Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in	LOS ANGELE	coverpage CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE	Statement covers period  from10/01/2014  through10/18/2014	Date of election if applited as DCT 23 (Month, Day, Year)  CAMPAIGN F  11/04/2014 DISCLOSURE	PM 6: 24
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	nplete Parts 1, 2, 3, and 4. imarily Formed Ballot Measure ommittee ) Controlled ) Sponsored so Complete Part 6) imarily Formed Candidate/ fficeholder Committee so Complete Part 7)	2. Type of Statement:	☐ Quarterly Statement ☐ Special Odd-Year Report ☐ Supplemental Preelection Statement - Attach Form 495
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) COMMITTEE TO ELECT BOBBY SHRIVER SUPERVISOR 2  STREET ADDRESS (NO P.O. BOX)  CITY STATE ZIP COL	DE AREA CODE/PHONE	Treasurer(s)  NAME OF TREASURER  FLORA YIN  MAILING ADDRESS  CITY  NAME OF ASSISTANT TREASURER, IF ANY  JERRY SIMMONS	STATE ZIP CODE AREA CODE/PHONE
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO		MAILING ADDRESS  CITY  OPTIONAL: FAX / E-MAIL ADDRESS	STATE ZIP CODE AREA CODE/PHONE
4. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California  Executed on	that the foregoing is true and correct.  By	Signature of Treasurer or Assistant Treasurer  otrolling Officeholder, Candidate, State Measure Proponent or Respor	nsible Officer of Sponsor

Officeholder or Candidate Controlled Com	mittee	6. P	rimarily Formed Ballo	ot Measure C	ommittee	
NAME OF OFFICEHOLDER OR CANDIDATE	· · · · · · · · · · · · · · · · · · ·	NA NA	ME OF BALLOT MEASURE			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	RICT NUMBER IF APPLICABLE)	B/	ALLOT NO. OR LETTER	JURISDICTION		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP	Id	entify the controlling off	iceholder, cand	idate, or state measur	e proponent, if any
		N/	AME OF OFFICEHOLDER, CAN	IDIDATE, OR PROF	PONENT	
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	O	FFICE SOUGHT OR HELD		DISTRICT N	O. IF ANY
COMMITTEE NAME	I.D. NUMBER	_				
NAME OF TREASURER	CONTROLLED COMMITTEE?		rimarily Formed Can			
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	вох)		AME OF OFFICEHOLDER OR O		OFFICE SOUGHT OR HEL County Supervisor	X SUPPORT OPPOSE
CITY STATE ZIF	P CODE AREA CODE/PHONE	N.	AME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEL	D SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER	N.	AME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEL	D SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?	N.	AME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEL	D SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O	. BOX)					

### Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Type or print in ink.

Amounts may be rounded to whole dollars.

		SUMMARY PAGE
Statem	ent covers period	CALIFORNIA 160
from	10/01/2014	FORM 400
through _	10/18/2014	Page3 of32
<b>J</b>		I.D. NUMBER

NAME OF FILER						I.D. NUMBER
COMMITTEE TO ELECT BOBBY SHRIVER SUPERVISOR 2014						1367856
Contributions Received	Column A  TOTAL THIS PERIOD (FROMATTACHED SCHEDULES)			COIUMN B CALENDAR YEAR TOTAL TO DATE		mary for Candidates e State Primary and
1. Monetary Contributions Schedule A, Line 3	\$	211,500.00	\$ _	890,750.00		7/4 Av Date
2. Loans Received Schedule B, Line 3		0.00	-	0.00	3/1 (	hrough 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	211,500.00	\$ -	890,750.00	20. Contributions  Received \$	S
4. Nonmonetary Contributions Schedule C, Line 3		0.00	_	1,462.77	21 Expenditures	
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	211,500.00	\$ _	892,212.77	Made \$	<b>\$</b>
Expenditures Made					Expenditure Limit	Summary for State
6. Payments Made Schedule E, Line 4	\$	507,155.91	\$ .	663,280.15	Candidates	
7. Loans Made Schedule H, Line 3		0.00	-	0.00	22 Cumulatis	ve Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	.\$	507,155.91	\$ .	663,280.15		Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)		16.824.88		57,934.21	Date of Election	Total to Date
10. Nonmonetary Adjustment		0.00	-	1,462.77	(mm/dd/yy)	
11. TOTAL EXPENDITURES MADE	\$	523,980.79	\$ .	722,677.13		\$
Current Cash Statement						\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	523,126.31	Tod	calculate Column B, add		
13. Cash Receipts Column A, Line 3 above		211,500.00		ounts in Column A to the responding amounts		
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00		n Column B of your last	*Amounts in this section r reported in Column B.	may be different from amounts
15. Cash Payments Column A, Line 8 above		507,155.91		ort. Some amounts in umn A may be negative		
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	227,470.40	figu	res that should be		
If this is a termination statement, Line 16 must be zero.			peri	tracted from previous od amounts. If this is first report being filed		
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for	this calendar year, only by over the amounts		
Cash Equivalents and Outstanding Debts			fron any	n Lines 2, 7, and 9 (if		
18. Cash Equivalents	\$	0.00				
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	57,934.21			FPPC Toll-Free Helpli	FPPC Form 460 (January/ ne: 866/ASK-FPPC (866/275-37

# Schedule A Monetary Contributions Received SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Type or print in ink.

Amounts may be rounded to whole dollars.

COMMITTEE TO ELECT BOBBY SHRIVER SUPERVISOR 2014

COMMITTEE IC	FELECT BUBBY SHRIVER SUPERVISOR 2014				13678	300
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)
10/01/2014	807080A LLC	□IND □COM 図OTH □PTY □SCC		10,000.00	10,000.00	
10/01/2014	STEPHEN L. BING		PRODUCER SHANGRI-LA ENTERTAINMENT	10,000.00	10,000.00	
10/17/2014	ANNETTE C. BLUM	⊠IND □COM □OTH □PTY □SCC	OWNER BLUM MEDIA INTERNATIONAL	10,000.00	10,000.00	
10/13/2014	BERTRAM FIELDS	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	ATTORNEY GREENBERG GLUSKER FIELDS CLAMAN & MACHTINGER LLP	5,000.00	5,000.00	
10/08/2014	SAM FISCHER	☑IND □COM □OTH □PTY □SCC	ATTORNEY ZIFFREN BRITTENHAM, LLP	10,000.00	10,000.00	
			SUBTOTAL	45,000.00		

**Schedule A Summary** 

Amount received this period – itemized monetary contributions.

(Include all Schedule A subtotals.)

 \$\frac{211,500.00}{2}\$

2. Amount received this period – unitemized monetary contributions of less than \$100 ......\$

 \*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 Form 460 (January/05)

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

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

Type or print in ink.
Amounts may be rounded

SCHEDULE A	(CONT.)
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Monetary	Contributions Received	Amounts may to whole o		Statement cove	· ·	CALIFORNIA 460	
				through 10/18/	2014	Page	5 of 32
NAME OF FILER						I.D. NUM	BER
COMMITTEE TO	ELECT BOBBY SHRIVER SUPERVISOR 2014					136785	6
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 YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
10/13/2014	JAMES GIANOPULOS	IND  COM  OTH  PTY  SCC	CHAIRMAN FOX FILMED ENTERAINMENT	10,000.00	10,0	00.00	
10/17/2014	RUSSELL GOLDSMITH	⊠IND □COM □OTH □PTY □SCC	CHAIRMAN AND CEO CITY NATIONAL BANK	5,000.00	5,0	00,00	
10/16/2014	SUSAN HARRIS	⊠IND □COM □OTH □PTY □SCC	WRITER SAMMY PRODUCTIONS	2,500.00	2,5	00.00	
10/06/2014	BRUCE KARATZ	☑IND □COM □OTH □PTY □SCC	PRESIDENT BK CAPITAL	1,500.00	1,5	00.00	
10/17/2014	SHERRY LANSING	⊠IND □COM □OTH □PTY □SCC	RETIRED	5,000.00	6,4	62.77	
			SUBTOTAL	24,000.00			

\*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

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

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA 160

Statement covers period

			· · ·	from10/01/	2014	FORM 400
				through 10/18/	2014 Pag	e 6 of 32
NAME OF FILER					I.D.	NUMBER
COMMITTEE TO	ELECT BOBBY SHRIVER SUPERVISOR 2014				136	7856
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)
10/08/2014	LAURENE POWELL JOBS, INCLUDING EMERSON COLLECTIVE. LLC  CONTRIBUTION RECEIVED FROM EMERSON COLLECTIVE, LLC	⊠IND □COM □OTH □PTY □SCC	CHAIR EMERSON COLLECTIVE, LLC	25,000.00	25,000.0	0
10/03/2014	PETER MORTON	⊠IND □COM □OTH □PTY □SCC	FOUNDER HARD ROCK CAFE	10,000.00	10,000.0	0
10/01/2014	RONALD O. PERELMAN	☑IND □COM □OTH □PTY □SCC	CHAIRMAN AND CEO MACANDREWS & FORBES HOLDINGS INC.	10,000.00	10,000.0	0
10/06/2014	A. JERROLD PERENCHIO	⊠IND □COM □OTH □PTY □SCC	PRESIDENT CHARTWELL PARTNERS LLC	10,000.00	10,000.0	
10/06/2014	ROSLAND CAPITAL LLC	□IND □COM 図OTH □PTY □SCC		10,000.00	10,000.0	0
-7			SUBTOTAL	\$ 65,000.00		

\*Contributor Codes

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(other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

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

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDU	ILF A	(CONT.)
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CALIFORNIA ACO

Statement covers period

				from10/01/	2014	FOR	M HUU
				through10/18/	2014 P	age	7 of32
NAME OF FILER					1	.D. NUMBE	R
COMMITTEE TO ELE	ECT BOBBY SHRIVER SUPERVISOR 2014		·		1	367856	
RECEIVED	LL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, 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 DO CALENDAR YEA (JAN. 1 - DEC. 3	R	PER ELECTION TO DATE (IF REQUIRED)
	OMAS E. ROTHMAN		FILM EXECUTIVE TRI STAR PRODUCTIONS	25,000.00	25,000	.00	
	UTHERN CALIFORNIA DISTRICT COUNCIL OF BORERS PAC (ID# 1358150)	□IND □COM □OTH □PTY ☑SCC		30,000.00	30,000	.00	
10/13/2014 CAS	SEY WASSERMAN	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CHAIRMAN & CHIEF EXECUTIVE OFFICER WASSERMAN MEDIA GROUP, LLC	,	10,000	.00	
	TSON LAND COMPANY	□IND □COM ☑OTH □PTY □SCC		5,000.00	5,000	1.00	
10/16/2014 PAT	UL J. WITT	☑IND □COM □OTH □PTY □SCC	FILM PRODUCER WITT PRODUCTIONS	2,500.00	2,500	0.00	
			SUBTOTAL\$	72,500.00	entral meters		

\*Contributor Codes

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(other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

### Schedule A (Continuation Sheet)

Type or print in ink.

SCHEDULE A (CONT.)

wonetary	MONETARY CONTRIBUTIONS RECEIVED  Amounts may to whole of			Statement covers period from10/01/2014		CALIFORNIA 460	
				through 10/18/	2014	Page _	8 of 32
NAME OF FILER						I.D. NU	MBER
COMMITTEE TO	ELECT BOBBY SHRIVER SUPERVISOR 2014					13678	56
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	ÆAR	PER ELECTION TO DATE (IF REQUIRED)
10/09/2014	KENNETH ZIPFREN	⊠IND □COM □OTH □PTY □SCC	ATTORNEY ZIFFREN BRITTENHAM LLP	5,000.00	5,0	00.00	
		IND   COM   OTH   PTY   SCC					
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					
			SUBTOTAL	\$ 5,000.00	an and the second of the second	mer sitt	

\*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 D Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		Type or prin Amounts may b to whole do	e rounded	Statement covers  from10/01/20  through10/18/20	FC	CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		<del>N. H.</del>		through 10710720	I.D. NL	9 of 32 IMBER	
COMMITTEE	TO BLECT BOBBY SHRIVER SUPERVISOR 2014				1367	856	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN, 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
10/02/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3  X Support  Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	MAILER	92,920.82	568,940.6	8	
10/02/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3	Monetary Contribution Nonmonetary Contribution Independent Expenditure	POLLING	39,300.00	568,940.6	8	
10/02/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3  X Support Oppose	Monetary Contribution Nonmonetary Contribution  Independent Expenditure	CONSULTING	10,000.00	568,940.6		
			SUBTOTAL	\$ 142,220.82			

FPPC Form 460 (Jan/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule D (Continuation Sheet) Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		Type or pri Amounts may to whole o	be rounded Statement covers period			SCHEDULED (CONT.)  ORNIA 460  10 of 32
NAME OF FILER					I.D. NUM	BER
COMMITTEE T	O ELECT BOBBY SHRIVER SUPERVISOR 2014				13678	56
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/02/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3  X Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	CONSULTING	10,000.00	568,940.68	
10/02/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3   Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	CONSULTING	7,274.38	568,940.68	
10/02/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3  X Support Oppose	Monetary Contribution Nonmonetary Contribution X Independent Expenditure	CONSULTING	7,000.00	568,940.68	
10/02/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3  X Support Oppose	Monetary Contribution Nonmonetary Contribution X Independent Expenditure	RESEARCH	10,549.86	568,940.68	
			SUBTOTAL	\$ 34,824.24		

Schedule D (Continuation Sheet) Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		Type or pri Amounts may to whole d	y be rounded Statement covers period			SCHEDULE D (CON CALIFORNIA 460 FORM Page 11 of 32	
NAME OF FILER					I.D. NU	MBER	
COMMITTEE 1	TO ELECT BOBBY SHRIVER SUPERVISOR 2014				1367	356	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
10/02/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3	Monetary Contribution Nonmonetary	CONSULTING	10,000.00	568,940.6	3	
		Contribution  X Independent Expenditure					
10/02/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3  X Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	CONSULTING	10,000.00	568,940.6	В	
10/02/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3	Monetary Contribution Nonmonetary Contribution Independent Expenditure	CONSULTING	7,071.93	568,940.6	8	
10/02/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3	Monetary Contribution Nonmonetary Contribution Independent Expenditure	CONSULTING	10,000.00	568,940.6	8	

SUBTOTAL \$

37,071.93

Schedule D (Continuation Sheet) Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		Type or pri Amounts may to whole o	be rounded	Statement covers period from 10/01/2014			SCHEDULED (CONT.)  CALIFORNIA 460  FORM	
NAME OF FILER				through 10/18/20		Page I.D. NUME	12 of 32	
	TO ELECT BOBBY SHRIVER SUPERVISOR 2014					136785		
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE CALENDAR (JAN. 1 - DE	YEAR	PER ELECTION TO DATE (IF REQUIRED)	
10/02/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3	Monetary Contribution Nonmonetary Contribution Independent Expenditure	PHOTOGRAPHY	500.00	568,	940.68		
10/02/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3  X Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	GRAPHIC DESIGN	1,627.50	568,	940.68		
10/02/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3  X Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	VOTER FILE	1,781.83	568,	940.68		
10/03/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3  X Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	NEWSPAPER AD	720.00	568,	,940.68		
			SUBTOTAL	\$ 4,629.33	PORCE -	CO <u>NCIDENTIALI</u>		

4,629.33

Schedule D (Continuation Sheet) Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		Type or pri Amounts may to whole c	be rounded Statement covers period			SCHEDULE D (CONT.) FORNIA 460 PRM of 32
NAME OF FILER					I.D. NU	MBER
COMMITTEE T	O BLECT BOBBY SHRIVER SUPERVISOR 2014				1367	856
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/03/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3	Monetary Contribution Nonmonetary Contribution X Independent	GRAPHIC DESIGN	100.00	568,940.6	8
•		Expenditure				
10/06/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3  X Support Oppose	Monetary Contribution Nonmonetary Contribution X Independent Expenditure	SLATE MAILER	6,896.00	568,940.6	8
10/06/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3  X Support Oppose		SLATE MAILER	7,500.00	568,940.6	8
10/08/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3  X Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	STOCK PHOTOGRAPHS	48.83	568,940.6	8
		<b>-</b>	SUBTOTAL	\$ 14.544.83	graduja po de la la la compania de l La compania de la comp	MARCHANIA

Schedule D (Continuation Sheet) Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE D (CONT.)

Statement covers period

from 10/01/2014

CALIFORNIA 460

FORM

Page 14 of 32

I.D. NUMBER

NAME OF FILER 1367856 COMMITTEE TO ELECT BOBBY SHRIVER SUPERVISOR 2014 **CUMULATIVE TO DATE** PER ELECTION NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR DESCRIPTION **AMOUNT THIS** DATE TYPE OF PAYMENT CALENDAR YEAR TO DATE MEASURE NUMBER OR LETTER AND JURISDICTION, (IF REQUIRED) PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OR COMMITTEE 568,940.68 10/08/2014 BOBBY SHRIVER EMAIL NEWSLETTERS 25,000.00 ☐ Monetary County Supervisor LOS ANGELES COUNTY, #3 Contribution ☐ Nonmonetary Contribution X Independent Expenditure X Support Oppose 10/09/2014 BOBBY SHRIVER MAILER 42,739.14 568,940.68 County Supervisor LOS ANGELES COUNTY, #3 Contribution □ Nonmonetary Contribution X Independent Expenditure X Support ☐ Oppose 64,256.20 568,940.68 10/09/2014 MAILER BOBBY SHRIVER Monetary County Supervisor Contribution LOS ANGELES COUNTY, #3 ☐ Nonmonetary Contribution X Independent X Support Oppose Expenditure 10/09/2014 BOBBY SHRIVER GRAPHIC DESIGN 1.030.75 568,940.68 ☐ Monetary County Supervisor LOS ANGELES COUNTY, #3 Contribution ☐ Nonmonetary Contribution X Independent Expenditure X Support Oppose SUBTOTAL \$ 133,026.09

Schedule D (Continuation Sheet) Type or print in ink. SCHEDULE D (CONT.) **Summary of Expenditures** Amounts may be rounded Statement covers period **CALIFORNIA** to whole dollars. Supporting/Opposing Other **FORM** 10/01/2014 Candidates, Measures and Committees through 10/18/2014 Page 15 of 32 NAME OF FILER I.D. NUMBER 1367856 COMMITTEE TO ELECT BOBBY SHRIVER SUPERVISOR 2014 CUMULATIVE TO DATE PER ELECTION NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR DESCRIPTION AMOUNT THIS DATE TYPE OF PAYMENT CALENDAR YEAR TO DATE MEASURE NUMBER OR LETTER AND JURISDICTION, (IF REQUIRED) PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OR COMMITTEE GRAPHIC DESIGN 1,030.75 568,940.68 10/09/2014 BOBBY SHRIVER ☐ Monetary County Supervisor LOS ANGELES COUNTY, #3 Contribution ☐ Nonmonetary Contribution X Independent Expenditure X Support Oppose BOBBY SHRIVER 3,663.11 10/09/2014 VOTER FILE 568,940.68 ■ Monetary County Supervisor Contribution LOS ANGELES COUNTY, #3 ☐ Nonmonetary Contribution X Independent Expenditure X Support Oppose 10,000.00 568,940.68 10/09/2014 BOBBY SHRIVER CONSULTING Monetary County Supervisor Contribution LOS ANGELES COUNTY, #3 ☐ Nonmonetary Contribution |X| Independent Expenditure X Support Oppose 10/09/2014 BOBBY SHRIVER NEWSPAPER AD 1,200.00 568,940.68 County Supervisor LOS ANGELES COUNTY, #3 Contribution ☐ Nonmonetary Contribution X Independent Expenditure X Support ☐ Oppose SUBTOTAL \$ 15,893.86

Schedule D (Continuation Sheet) Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		Type or pri Amounts may to whole o	be rounded	from 10/01/2014		SCHEDULE D (CONT.)  CALIFORNIA 460  FORM 460  Page 16 of 32	
NAME OF FILER					I.D. NUM	BER	
COMMITTEE T	O ELECT BOBBY SHRIVER SUPERVISOR 2014				136789	56	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
10/14/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3  X Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	MAILER	69,854.66	568,940.68		
10/14/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3  X Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	MAILER	20,301.21	568,940.68		
10/14/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3  X Support Oppose	Monetary Contribution Nonmonetary Contribution X Independent Expenditure	GRAPHIC DESIGN	1,030.75	568,940.68		
10/14/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3  X Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	GRAPHIC DESIGN	949.38	568,940.68		
			SUBTOTAL	\$ 92,136.00	page Halphan garage (1918) ki		

Schedule D (Continuation Sheet) Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers  from 10/01/20  through 10/18/20	14 FO	SCHEDULE D (CONT.)  CALIFORNIA 460  FORM  Page 17 of 32	
NAME OF FILER			<u> </u>	anough	I.D. NUM		
	TO ELECT BOBBY SHRIVER SUPERVISOR 2014				13678		
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
10/14/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3  X Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	VOTER FILE	3,098.12	568,940.68		
10/16/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3  X Support Oppose	Monetary Contribution Nonmonetary Contribution X Independent Expenditure	NEWSPAPER AD	1,200.00	568,940.68		
10/17/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3  X Support Oppose	Monetary Contribution Nonmonetary Contribution X Independent Expenditure	MAILER	67,110.20	568,940.68		
10/17/2014	BOBBY SHRIVER County Supervisor LOS ANGELES COUNTY, #3  X Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	CÓNSULTING	10,000.00	568,940.68	3	
			SUBTOTAL	\$ 81,408.32			

Schedule D (Continuation Sheet) Type or print in ink. SCHEDULE D (CONT.) **Summary of Expenditures** Amounts may be rounded Statement covers period CALIFORNIA to whole dollars. **Supporting/Opposing Other FORM** 10/01/2014 Candidates, Measures and Committees through 10/18/2014 Page \_\_\_18\_\_\_ of \_\_32\_ NAME OF FILER I.D. NUMBER 1367856 COMMITTEE TO ELECT BOBBY SHRIVER SUPERVISOR 2014 PER ELECTION CUMULATIVE TO DATE NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR DESCRIPTION AMOUNT THIS TO DATE DATE TYPE OF PAYMENT CALENDAR YEAR MEASURE NUMBER OR LETTER AND JURISDICTION. (IF REQUIRED) PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OR COMMITTEE 10/17/2014 BOBBY SHRIVER CONSULTING 10,000.00 568,940.68 ☐ Monetary County Supervisor LOS ANGELES COUNTY, #3 Contribution Nonmonetary Contribution X Independent Expenditure X Support Oppose 87.32 568,940.68 BOBBY SHRIVER STOCK PHOTOGRAPHS 10/17/2014 County Supervisor Contribution LOS ANGELES COUNTY, #3 ☐ Nonmonetary Contribution X Independent Expenditure X Support ☐ Oppose 10/17/2014 BOBBY SHRIVER VOTER FILE 1,795.94 568,940.68 County Supervisor LOS ANGELES COUNTY, #3 Contribution ☐ Nonmonetary Contribution x Independent X Support ☐ Oppose Expenditure 10/17/2014 BOBBY SHRIVER GRAPHIC DESIGN 568,940.68 1,302.00 ☐ Monetary County Supervisor LOS ANGELES COUNTY, #3 Contribution ☐ Nonmonetary Contribution X Independent Expenditure X Support Oppose SUBTOTAL \$ 13,185.26

Schedule E Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.			S	tatement covers period	CALIFO FOR	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER			· · · · · · · · · · · · · · · · · · ·	thro	ough 10/18/2014	Page 1:	
COMMITTEE TO ELECT BOBBY SHRIVER SUPERVISOR 2014						1367856	
CODES: If one of the following codes accurately describes  CMP campaign paraphernalia/misc.  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  LIT campaign literature and mailings	MBR member con MTG meetings ar OFC office exper PET petition circle PHO phone bank POL polling and POS postage, de	nmunications and appearance ases ulating s survey researd livery and mes	3		radio airtime and product returned contributions campaign workers' salar t.v. or cable airtime and candidate travel, lodging, staff/spouse travel, lodgitransfer between commitvoter registration	ies production costs and meals ng, and meals ttees of the same	·
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE C	R	DESCRIPTIO	N OF PAYMENT		AMOUNT PAID
ACTBLUE		OFC					197.50
AUSTIN/EGOSCUE DEVELOPMENT		CNS					10,000.00
AUSTIN/EGOSCUE DEVELOPMENT		CNS		and the second s			10,000.00
* Payments that are contributions or independent expenditures m	ust also be sumn	narized on S	hedule D.			SUBTOTAL\$	20,197.50

1. Itemized payments made this period. (Include all Schedule E subtotals.) \$ 507, 106.00

# Schodula E

SCHEDULE E (CONT.)

(Continuation Sheet)	Type or print in ink.	Statement covers period	CALIFORNIA 460					
Payments Made	Amounts may be rounded to whole dollars.	from10/01/2014						
SEE INSTRUCTIONS ON REVERSE		through	Page 20 of 32					
NAME OF FILER			I.D. NUMBER					
COMMITTEE TO ELECT BOBBY SHRIVER SUPERVISOR	2014		1367856					
CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.								
CMP campaign paraphernalia/misc	MRR member communications	RAD radio airtime and production	n costs					

CNS campaign consultants RFD returned contributions MTG meetings and appearances CTB contribution (explain nonmonetary)\* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research independent expenditure supporting/opposing others (explain)\* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor ND VOT voter registration LEG legal defense PRO professional services (legal, accounting) 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
CALIFORNIA PRIDE VOTER GUIDE (#1367324)	IND	SLATE MAILER SUPPORTING BOBBY SHRIVER	7,500.00
CAPITAL STRATEGIES	CNS		15,000.00
COURTNEY LINDBERG PHOTOGRAPHY	anı	MAILER SUPPORTING BOBBY SHRIVER	500.00
DAN KACVINSKI	IND	MAILER SUPPORTING BOBBY SHRIVER	1,200.00
KAUFMAN CAMPAIGN CONSULTANTS, INC.	IND	MAILER SUPPORTING BOBBY SHRIVER	10,000.00

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

SUBTOTAL \$

34,200.00

# Schedule E

Type or print in ink.

SCHEDULE E (CONT.)

(Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA 460
Payments Made	to whole dollars.	from 10/01/2014	FORM 400
SEE INSTRUCTIONS ON REVERSE		through 10/18/2014	Page21 of32
NAME OF FILER			I.D. NUMBER
COMMITTEE TO ELECT BOBBY SHRIVER SUPERVISOR	2014		1367856
CODEO K f 4 f-II- l		Alana da antica da a	

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)\* OFC office expenses SAL campaign workers' salaries CVC civic donations petition circulating TEL t.v. or cable airtime and production costs PET candidate travel, lodging, and meals FIL. candidate filing/ballot fees PHO phone banks staff/spouse travel, lodging, and meals TRS FND fundraising events POL polling and survey research postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor ND independent expenditure supporting/opposing others (explain)\* professional services (legal, accounting) VOT voter registration LEG legal defense PRO WEB information technology costs (internet, e-mail) campaign literature and mailings PRT print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
KAUFMAN CAMPAIGN CONSULTANTS, INC.	IND	MAILER SUPPORTING BOBBY SHRIVER	10,000.00
ZAIN KHAN	IND	EMAIL NEWSLETTERS SUPPORTING BOBBY SHRIVER	25,000.00
RYAN KNIGHT	IND	CONSULTING SUPPORTING BOBBY SHRIVER	7,071.93
MAILRITE PRINT & MAIL INC.	IND	MAILER SUPPORTING BOBBY SHRIVER	92,920.82
MAILRITE PRINT & MAIL INC.	IND	MAILER SUPPORTING BOBBY SHRIVER	64,256.20

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

SUBTOTAL \$

199,248.95

#### Schedule E (Continuation Sheet) Payments Made

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Statement covers period	CALIFORNIA 160		
from10/01/2014	FORM +OU		
through 10/18/2014	Page of32		
Ł	I.D. NUMBER		
	1367856		

COMMITTEE TO BLECT BOBBY SHRIVER SUPERVISOR 2014

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

CMP campaign paraphernalia/misc.

CMS campaign consultants

CMS campaign consultants

CMS campaign consultants

CMS campaign consultants

MTG meetings and appearances

SAL campaign workers' salaries

CVC civic donations

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 polling and survey research

POS postage, delivery and messenger services

FRO postage, delivery and messenger services

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

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
MAILRITE PRINT & MAIL INC.	IND	MAILER SUPPORTING BOBBY SHRIVER	42,739.14
MAILRITE PRINT & MAIL INC.	IND	MAILER SUPPORTING BOBBY SHRIVER	69,854.66
MAILRITE PRINT & MAIL INC.	IND	MAILER SUPPORTING BOBBY SHRIVER	20,301.21
MAILRITE PRINT & MAIL INC.	IND	MAILER SUPPORTING BOBBY SHRIVER	67,110.20
CHRISTOPHER MCNEIL	IND	MAILER SUPPORTING BOBBY SHRIVER	1,627.50
			TOTAL

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

SUBTOTAL \$

201,632.71

## Schedule E

Type or print in ink.

SCHEDULE E (CONT.)

(Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA 460
Payments Made	to whole dollars.	from 10/01/2014	FORM 400
SEE INSTRUCTIONS ON REVERSE		through 10/18/2014	Page 23 of 32
NAME OF FILER			I.D. NUMBER
COMMITTEE TO ELECT BOBBY SHRIVER SUPERVISOR 2014			1367856
CODES: If one of the following codes accurately de	scribes the payment, you may enter the code. Ot	herwise, describe the payment.	
OMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production	costs

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
CHRISTOPHER MCNEIL	IND	MAILER SUPPORTING BOBBY SHRIVER	1,030.75
CHRISTOPHER MCNEIL	IND	MAILER SUPPORTING BOBBY SHRIVER	1,030.75
MERIDIAN PACIFIC, INC.	IND	SLATE MAILER SUPPORTING BOBBY SHRIVER	6,896.00
NEW ECONOMY CAMPAIGNS, LLC	WEB		1,000.00
POLITICAL DATA INC.	IND	MAILER SUPPORTING BOBBY SHRIVER	1,781.83
* Payments that are contributions or independent expenditures must also be	eummarizad on Schadula	D SUBTOTA	1 \$ 11 729 22

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

SUBTOTAL \$

11,739.33

# Schedule F

SCHEDULE E (CONT.)

(Continuation Sheet)	Type or print in ink. Amounts may be rounded	Statement covers period	CALIFORNIA 460
Payments Made	to whole dollars.	from 10/01/2014	FORM 400
SEE INSTRUCTIONS ON REVERSE		through10/18/2014	Page24 of32
NAME OF FILER			I.D. NUMBER
COMMITTEE TO ELECT BOBBY SHRIVER SUPERVISOR 20	014		1367856
CODES: If one of the following codes accurate	ly describes the payment, you may enter the code.	Otherwise, describe the payment.	•
MP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production	n costs

RFD returned contributions CNS campaign consultants MTG meetings and appearances CTB contribution (explain nonmonetary)\* SAL campaign workers' salaries OFC office expenses CVC civic donations PET petition circulating t.v. or cable airtime and production costs candidate filing/ballot fees candidate travel, lodging, and meals FIL phone banks TRC PHO staff/spouse travel, lodging, and meals fundraising events TRS FND POL polling and survey research postage, delivery and messenger services professional services (legal, accounting) transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)\* TSF ND LEG legal defense VOT voter registration PRO WEB information technology costs (internet, e-mail) campaign literature and mailings PRT print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
POLITICAL DATA INC.	IND	MAILER SUPPORTING BOBBY SHRIVER	3,663.11
REED & DAVIDSON, LLP	PRO		9,404.40
RICHARD KATZ CONSULTING, INC.	IND	CONSULTING SUPPORTING BOBBY SHRIVER	10,000.00
RICHARD KATZ CONSULTING, INC.	IND	CONSULTING SUPPORTING BOBBY SHRIVER	10,000.00
THE JEWISH JOURNAL	IND	NEWSPAPER ADS SUPPORTING BOBBY SHRIVER	7,020.00

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

SUBTOTAL \$

40,087.51

#### Schedule F **Accrued Expenses (Unpaid Bills)**

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

Statement covers period **CALIFORNIA FORM** 10/01/2014 through \_\_10/18/2014 Page 25 of 32

I.D. NUMBER

1367856

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

COMMITTEE TO ELECT BOBBY SHRIVER SUPERVISOR 2014

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

CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)\* OFC CVC civic donations PET

FIL candidate filing/ballot fees FND fundraising events

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

campaign literature and mailings LIT

MBR member communications

MTG meetings and appearances office expenses

petition circulating PHO phone banks POL polling and survey research

postage, delivery and messenger services POS

professional services (legal, accounting) PRO PRT print ads

RAD radio airtime and production costs

RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

	F			• • • • • • • • • • • • • • • • • • • •	-
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
RICHARD KATZ CONSULTING, INC.	IND CONSULTING SUPPORTING BOBBY SHRIVER	10,000.00	0.00	10,000.00	0.00
COURTNEY LINDBERG PHOTOGRAPHY	IND MAILER SUPPORTING BOBBY SHRIVER	500.00	0.00	500.00	0.00
NEW ECONOMY CAMPAIGNS, LLC	WEB	1,000.00	0.00	1,000.00	0.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS :	\$ 11,500.00	\$ 0.00	11,500.00	\$ 0.00

#### 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 

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period rom \_\_\_\_\_10/01/2014

CALIFORNIA 460

SCHEDULE F (CONT.)

through \_\_\_10/18/2014\_\_\_

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NAME OF FILER

COMMITTEE TO ELECT BOBBY SHRIVER SUPERVISOR 2014

I.D. NUMBER

1367856

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

CMP campaign paraphernalia/misc. RAD radio airtime and production costs MBR member communications CNS campaign consultants MTG meetings and appearances returned contributions CTB contribution (explain nonmonetary)\* SAL campaign workers' salaries OFC office expenses CVC civic donations TEL t.v. or cable airtime and production costs PET petition circulating candidate travel, lodging, and meals FIL candidate filing/ballot fees PHO phone banks FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)\* TSF transfer between committees of the same candidate/sponsor postage, delivery and messenger services

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)

LIT campaign literature and mailings PRT print ads

\* 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) (b) OUTSTANDING AMOUNT INCURRE BALANCE BEGINNING THIS PERIOD OF THIS PERIOD		(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
POLITICAL DATA INC.	IND MAILER SUPPORTING BOBBY SHRIVER	1,781.83	0.00	1,781.83	0.00
POLITICAL DATA INC.	IND MAILER SUPPORTING BOBBY SHRIVER	0.00	3,098.12	0.00	3,098.12
POLITICAL DATA INC.	IND MAILER SUPPORTING BOBBY SHRIVER	0.00	1,795.94	0.00	1,795.94
MAILRITE PRINT & MAIL INC.	IND MAILER SUPPORTING BOBBY SHRIVER (INDEPENDENT EXPENDITURE MADE AFTER 10/18/14)	0.00	32,557.10	0.00	32,557.10
	SUBTOTALS	\$ 1,781.83	\$ 37,451.16	1,781.83	\$ 37,451.16

#### Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE F (CONT.)

Statement covers period	CALIFORNIA 160
from10/01/2014	FORM TOO
through10/18/2014	Page of32
	I.D. NUMBER
	1367856

NAME OF FILER

COMMITTEE TO ELECT BOBBY SHRIVER SUPERVISOR 2014

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

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

<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 LD. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	OOISIANDING ANOCO		(b) (c)  AMOUNT INCURRED AMOUNT PAID  THIS PERIOD THIS PERIOD  (ALSO REPORT ON E)								
CAPITAL STRATEGIES	CNS	0.00	246.10	0.00	246.10							
IMAGE ASSOCIATES	PRO	0.00	565.50	0.00	565.50							
CAPITAL STRATEGIES	CNS	0.00	15,000.00	0.00	15,000.00							
CHRISTOPHER MCNEIL	IND MAILER SUPPORTING BOBBY SHRIVER	1,627.50	0.00	1,627.50	0.00							
	SUBTOTALS	\$ 1,627.50	\$ 15,811.60	SUBTOTALS \$ 1,627.50\$ 15,811.60\$ 1,627.50\$ 15,811.60								

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills) Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE F (CONT.)

 Statement covers period
 CALIFORNIA FORM
 460

 from \_\_\_\_10/01/2014
 Page \_\_28 \_\_ of \_\_32 \_\_

NAME OF FILER

COMMITTEE TO ELECT BOBBY SHRIVER SUPERVISOR 2014

I.D. NUMBER

1367856

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)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND.	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LΠ	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
CHRISTOPHER MCNEIL	IND MAILER SUPPORTING BOBBY SHRIVER	0.00	1,030.75	0.00	1,030.75
CHRISTOPHER MCNEIL	IND MAILER SUPPORTING BOBBY SHRIVER	0.00	949.38	0.00	949.38
CHRISTOPHER MCNEIL	IND MAILER SUPPORTING BOBBY SHRIVER	0.00	1,302.00	0.00	1,302.00
CHRISTOPHER MCNEIL	IND MAILER SUPPORTING BOBBY SHRIVER (INDEPENDENT EXPENDITURE MADE AFTER 10/18/14)	0.00	1,302.00	0.00	1,302.00
	SUBTOTALS	\$ 0.00;	4,584.13	\$ 0.00	\$ 4,584.13

Type or print in ink.

Amounts may be rounded to whole dollars.

MBR member communications

petition circulating

OFC office expenses

PHO phone banks

print ads

PET

PRO

PRT

MTG meetings and appearances

POL polling and survey research

POS postage, delivery and messenger services

professional services (legal, accounting)

SCHEDULE F (CONT.)

CALIFORNIA 160

 Statement covers period

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 460

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 10/18/2014
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 I.D. NUMBER

1367856

NAME OF FILER

CMP campaign paraphernalia/misc.

CTB contribution (explain nonmonetary)\*

campaign literature and mailings

candidate filing/ballot fees

CNS campaign consultants

CVC civic donations

LEG legal defense

FND fundraising events

FIL

ND

LIT

COMMITTEE TO ELECT BOBBY SHRIVER SUPERVISOR 2014

independent expenditure supporting/opposing others (explain)\*

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

RAD radio airtime and production costs

RFD returned contributions SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE OR DESCRIPTION OF PAYMENT			(¢) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
DAN KACVINSKI	IND MAILER SUPPORTING BOBBY SHRIVER	1,200.00	0.00	1,200.00	0.00
ZAIN KHAN	IND EMAIL NEWSLETTERS SUPPORTING BOBBY SHRIVER	25,000.00	0.00	25,000.00	0.00
				,	
	SUBTOTALS	\$ 26,200.00	0.00	\$ 26,200.00	0.00

### Schedule G Payments Made by an Agent or Independent

Type or print in ink. Amounts may be rounded

SCHEDULE G Statement covers period **CALIFORNIA** 

Contractor (on Behalf of This Committee)	to whole donars.	from10/01/2014	FORM	100
SEE INSTRUCTIONS ON REVERSE		through 10/18/2014	Page 30	of32
NAME OF FILER			I.D. NUMBER	
COMMITTEE TO ELECT BOBBY SHRIVER SUPERVISOR 2014			1367856	
NAME OF AGENT OR INDEPENDENT CONTRACTOR				
MAILRITE PRINT & MAIL INC.				

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. RAD radio airtime and production costs MBR member communications

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

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

transfer between committees of the same candidate/sponsor TSF ND independent expenditure supporting/opposing others (explain)\* postage, delivery and messenger services LEG legal defense PRO professional services (legal, accounting) VOT voter registration print ads campaign literature and mailings PRT WEB information technology costs (internet, e-mail) LIT

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

	NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AI	MOUNT PAID
U.S. POSTMASTER		POS	POSTAGE		49,876.82
U.S. POSTMASTER		POS	POSTAGE		24,942.14
U.S. POSTMASTER		POS	POSTAGE		37,356.20
U.S. POSTMASTER	·	POS	POSTAGE		39,326.66
Attach additional	information on appropriately labeled continuation sheets.			TOTAL* \$	151,501.82

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

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

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

SCHEDULE G (CONT.) Statement covers period CALIFORNIA

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I.D. NUMBER

1367856

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

COMMITTEE TO ELECT BOBBY SHRIVER SUPERVISOR 2014

NAME OF AGENT OR INDEPENDENT CONTRACTOR

MAILRITE PRINT & MAIL INC.

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

print ads

PRT

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

Ш campaign literature and mailings MBR member communications

MTG meetings and appearances office expenses PET petition circulating

PHO phone banks polling and survey research postage, delivery and messenger services PRO professional services (legal, accounting)

RAD radio airtime and production costs

RFD returned contributions SAL campaign workers' salaries

through 10/18/2014

TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

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

	NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
U.S. POSTMASTER		POS	POSTAGE		11,395.21
			,		
U.S. POSTMASTER		POS	POSTAGE		37,356.20
					İ
U.S. POSTMASTER		POS	POSTAGE		17,326.10
U.S. POSIFMSIER		POS	POSTAGE		17,320.10
	•				
					<u></u>
Attach additional	information on appropriately labeled continuation sheets.			TOTAL*	\$ 66,077.51

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

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

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

Statement covers period **CALIFORNIA** FORM 10/01/2014

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SCHEDULE G

I.D. NUMBER

1367856

COMMITTEE TO ELECT BOBBY SHRIVER SUPERVISOR 2014

NAME OF AGENT OR INDEPENDENT CONTRACTOR

MERIDIAN PACIFIC, INC.

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

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

print ads

PRO

PRT

CMP campaign paraphernalia/misc. campaign consultants CTB contribution (explain nonmonetary)\* CVC civic donations

OFC PET FIL candidate filing/ballot fees PHO FND fundraising events POL ND independent expenditure supporting/opposing others (explain)\*

LEG legal defense LIT campaign literature and mailings

RAD radio airtime and production costs MBR member communications

RFD returned contributions meetings and appearances campaign workers' salaries office expenses SAL TEL

t.v. or cable airtime and production costs petition circulating phone banks TRC candidate travel, lodging, and meals polling and survey research TRS staff/spouse travel, lodging, and meals postage, delivery and messenger services

transfer between committees of the same candidate/sponsor TSF VOT voter registration

information technology costs (internet, e-mail) WEB

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

. NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER J.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
CALIFORNIA REPUBLICAN TAXPAYERS ASSOCIATION (#1286135)	LIT	SLATE MAILER	5,862.00
	***************************************		

professional services (legal, accounting)

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or

Attach additional information on appropriately labeled continuation sheets.

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

TOTAL\* \$

5,862.00

independent contractor as reported on Schedule E.