Recipient Committee		RECEINTRES	COVER PAGE
Campaign Statement	Type or print in	Ink. US AND ES OFFET	CALIFORNIA 460
Cover Page		2011	FORM TOO
(Government Code Sections 84200-84216.5)		2014 OCT 23 PM 8: 49	Page 1 of 71
	Statement covers period	Date of election if applicable: (Month, Day, Year)	For Official Use Only
	from 10/01/2014	DISCLASSIF HAMSE	
SEE INSTRUCTIONS ON REVERSE	through10/18/2014 }	11/04/2014 CLOSURE SECTION	
1. Type of Recipient Committee: All Committees - Co	omplete Parts 1, 2, 3, and 4.	2. Type of Statement:	
	Primarily Formed Ballot Measure	☑ Preelection Statement	] Quarterly Statement
	Committee Controlled	Semi-annual Statement	Special Odd-Year Report
(Also Complete Part 5)	Sponsored	Termination Statement (Also file a Form 410 Termination)	Supplemental Preciection Statement - Attach Form 495
General Purpose Committee	Also Complete Part 6)	Amendment (Explain below)	Specifical - August VIII 450
○ Sponsored ☑ F	Primarily Formed Candidate/ Officeholder Committee		
	Also Complete Part 7)		
3. Committee Information	D. NUMBER	Treasurer(s)	
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)		NAME OF TREASURER	
Local Experience We Trust For Our Communitie	•	Maria Elena Durazo	
Men and Women, Nurses, Teachers, Firefighter	-	MAILING ADDRESS	
Organizations for Sheila Kuehl for Supervisor	2014	CITY STATE	ZIP CODE AREA CODE/PHONE
STREET ASSURES (NO F.O. SONY		SIAE	ZIP CODE AREA CODE/PHONE
CITY STATE ZIP CO	ODE AREA CODE/PHONE	NAME OF ASSISTANT TREASURER, IF ANY	
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. I	вох	MAILING ADDRESS	
CITY STATE ZIP C	ODE AREA CODE/PHONE	CITY STATE	ZIP CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRESS	
4. Verification			·
have used all reasonable diligence in preparing and reviewin	ng this statement and to the best of my kn	owledge the information contained herein and in the attached	schedules is true and complete. I certify
under penalty of perjury under the laws of the State of Californ	ila that the foregoing is true and correct	•	
Executed on10/23/2014	Ву		·
	_	Signature of Treastraror Assistant Treasurer	
Executed on	BySignature of Co	ontrolling Officeholder, Candidate, State Newsufe Proppnent or Responsible Officer of	Sponsor
Executed on	Ву		
Outs		Signature of Controlling Officeholder, Candidate, State Measure Proponent	
Executed onOsts	Ву	Signature of Controlling Officeholder, Candidate, State Measure Proponent	EDDC 5 400 41

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

## Recipient Committee Campaign Statement Cover Page-Part 2

Type or print in ink

COVER PAGE-PART 2

CALIFORNIA 460 **FORM** Page 2 **of** 71

Officeholder or Candidate Contro	lled Committee	6.Primarily Formed Ball	ot Measure Committee	
NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BALLOT MEASURE		
OFFICE SOUGHT OR HELD(INCLUDE LOCATION AND DIST	RICT NUMBER IF APPLICABLE)	BALLOT NO. OR LETTER		UPPORT
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) C	CITY STATE ZIP	identify the controlling officeho	older, candidate, or state measure pro	ponent, if any.
		NAME OF OFFICEHLOLDER, CANDIDA	ATE, OR PROPONENT	
Related Committees Not Included in this Sta not included in this statement that are controlled by you or contributions or make expenditures on behalf of your cand	are primarily formed to receive	OFFICE SOUGHT OR HELD	DISTRICT NO. IF AN	Y
COMMITTEE NAME	I.D. NUMBER	7. Primarily Formed Cano officeholder(s) or candidate(s) for which	lidate/Officeholder Committ this committee is primarily formed.	ee List names o
NAME OF TREASURER	CONTROLLED COMMITTEE?  YES NO	NAME OF OFFICEHOLDER OR CANDI Sheila Kuehl	DATE OFFICE SOUGHT OR HELD Board of	SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO F	P.O. BOX)	onerra madir	Supervisors	
				OPPOSE
	ZIP CODE AREA CODE/PHONE		,	OPPOSE

FPPC Form 460 (January/05) FPPC Toti-Free Helpilne: 886/ASK-FPPC (886/275-3772) State of California

### Campaign Disclosure Statement Summary Page

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

SUMMARY PAGE

 Statement covers period from 10/1/2014
 CALIFORNIA FORM
 460

 ## Page 3 of 71
 \*\*TID. NUMBER\*\*

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

1371649

Contributions Received	Column A  Total This Period (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions Schedule A, Line 3	\$997,000.00	\$1,772,000.00	1/1 through 6/30 7/1 to Date
2. Loans Received Schedule B, Line 3	\$0.00	\$0.00	20. Contributions
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1+ 2	\$997,000.00	\$1,772,000.00	Received
4. Nonmonetary Contributions Schedule C, Line 3	\$229,000.00	\$229,000.00	21. Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$1,226,000.00	\$2,001,000.00	Made
Expenditures Made			Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$1,250,131.60	\$1,714,450.71	Candidates
7. Loans Made Schedule H, Line 3	\$0.00	\$0.00	22. Cumulative Expenditures Made *
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$1,250,131.60	\$1,714,450.71	(if Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	\$8,870.07	\$310,691.79	Date of Election Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3	\$229,000.00	\$229,000.00	(mm/dd/yyyy)
11. TOTAL EXPENDITURES MADE Add Lines 8 +9 + 10	\$1,488,001.67	\$2,254,142.50	
Current Cash Statement			
12. Beginning Cash Balance Previous Summary Page, Line 16	\$310,680.89	To calculate Column B, add	
13. Cash Receipts Column A, Line 3 above	\$997,000.00	amounts in Column A to the corresponding amounts from	
14. Miscellaneous increases to Cash Schedule I, Line 4	\$50,000.00	Column B of your last report. Some amounts in Column A	
15. Cash Payments Column A, Line 8 above	\$1,250,131.60	may be negative figures that should be subtracted from	*Amounts in this section may be different from amounts
16. ENDING CASH BALANCE Add Lines 12+13+14, then subtract Line 15	\$107,549.29	previous period amounts. If	reported in schedule B.
If this is a termination statement, Line 16 must be zero,		this is the first report being filed for this calendar year, only carry over the amounts	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$0.00	from Lines 2, 7, and 9 (if any).	
Cash Equivalents and Outstanding Debts			
18. Cash Equivalents See instructions on reverse	\$0.00		
19. Outstanding Debts Add Line 2+Line 9 in Column B above	\$310,691.79		
•			FPPC Form 460 (January/6 FPPC Toll-Free Helpline; 866/ASK-FPPC (866/275-37)

#### Schedule A **Monetary Contributions Received**

ID: 745604

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

SCHEDULE A

Statement covers period 10/1/2014 through 10/18/2014

**CALIFORNIA** 460 **FORM** Page 4 of 71

I.D. NUMBER

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

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

1371649 IF AN INDIVIDUAL, ENTER CONTRIBUTOR **CUMULATIVE TO DATE** PER ELECTION FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR AMOUNT DATE OCCUPATION AND EMPLOYER RECEIVED THIS CALENDAR YEAR TO DATE RECEIVED (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE \* (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) (IF REQUIRED) PERIOD (JAN. 1-DEC. 31) IND AFSCME CA District Council 36 PAC **V** COM 10/03/2014 Потн \$25,000.00 \$150,000.00 PTY Scc ID: 747152 □IND AFSCME CA District Council 36 PAC COM 10/09/2014 Потн \$25,000.00 \$150,000.00 PTY scc ID: 747152 DNI AFSCME CA District Council 36 PAC **V** COM ∏отн \$50,000.00 \$150,000.00 10/17/2014 PTY Scc ID: 747152 IND AFSCME **V** COM Потн 10/01/2014 \$150,000.00 \$150,000.00 PTY

SUBTOTAL	\$250,000.00	
Schedule A Summarv		*Contributor Codes
Armount received this period -itemized monetary contributions.		IND- Individual
(include all Schedule A subtotals.)	\$997,000.00	COM- Recipient Committee
2. Amount received this period -unitemized monetary contributions of less than \$100	\$0.00	(other than PTY or SCC) OTH- Other (e.g., business entity)
3. Total monetary contributions received this period.		PTY- Political Party SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.)	\$997,000.00	FPPC Form 460 (January/05)

Пscc

#### Schedule A **Monetary Contributions Received**

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

Statement covers period

10/1/2014 10/18/2014 CALIFORNIA 460

**FORM** 

SCHEDULE A

				through = 07 ± 07			<del></del>
	e We Trust for our Communities - A Coalition of Working or Sheila Kuehl for Supervisor 2014	Men and Women,	Nurses, Teachers, Firefighters	and Public Safety	Officers	1.D. NUMBER 1371649	
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	CALEN	VE TO DATE DAR YEAR 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/03/2014	Assn. for LA Deputy Sheriff's State PAC ID: 1359227	☐IND ☐COM ☐OTH ☐PTY ☐SCC		\$125,000.00	\$500,	000.00	
10/09/2014	Assn. for LA Deputy Sheriff's State PAC  . ID: 1359227	☐IND ☐COM ☐OTH ☐PTY ☐SCC		\$125,000.00	\$500,	000.00	
10/03/2014	CA Assn. of Professional Employees PAC	☐IND ☐COM ☐OTH ☐PTY ☐SCC		\$25,000.00	\$100,	000.00	
	ID: 761351						
10/09/2014	CA Assn. of Professional Employees PAC	☐IND ☐COM ☐OTH ☐PTY ☐SCC		\$25,000.00	\$100,	000.00	
	ID: 761351	· <del></del>	•	•	•		
			SUBTOTAL	\$300,000.00			

	- +000/000.00 <sub>18325</sub>	
Schedule A Summarv		*Contributor Codes
Amount received this period -itemized monetary contributions,		IND-Individual
(include all Schedule A subtotals.)	\$997,000.00	COM- Recipient Committee
2. Amount received this period -unitemized monetary contributions of less than \$100\$	\$0.00	(other than PTY or SCC) OTH- Other (e.g., business entity)
3. Total monetary contributions received this period.		PTY- Political Party SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.)	\$997,000.00	FPPC Form 480 (January/05)
	FPPC To	oli-Free Helpline: 866/ASK-FPPC (866/275-3772)

#### Schedule A **Monetary Contributions Received**

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

Statement covers period 10/1/2014 through 10/18/2014

**CALIFORNIA FORM** Page 6 of

SCHEDULE A

NAME OF FILER

	e We Trust for our Communities - A Coalition of Working or Sheila Kuehl for Supervisor 2014	Men and Women,	Nurses, Teachers, Firefighters a	nd Public Safety	Officers I.D. NUMBER 1371649	
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)
10/01/2014	Glen Dake	OM GOTH  THOSE  SCC	Landscape Architect GDML	\$10,000.00	\$10,000.00	
10/09/2014	LA County Firefighters Local 1014 Firefighters Organized Ready & Committeed In Emergencies	☐IND ☐COM ☐OTH ☐PTY ☐SCC		\$125,000.00	\$500,000.00	
	ID: 1279318		T	<b>,</b>		
10/09/2014	LA County Firefighters Local 1014 Firefighters Organized Ready & Committeed In Emergencies  ID: 1279318	☐IND ☑ COM ☐ OTH ☐ PTY ☐ SCC		\$125,000.00	\$500,000.00	
10/17/2014	LA County Probation Officers Union AFSCME, Local 685 Political Action Fund	☐IND ☐COM ☐OTH ☐PTY ☐SCC		\$50,000.00	\$100,000.00	
	ID: 744558					
			SUBTOTAL	\$310,000.00		
Schedule /	A Summary			<del> </del>	*Contributor Co	doe
(include all So	ved this period -itemized monetary contributions.  chedule A subtotals.)		· · · · · · · · · · · · · · · · · · ·	\$997,000.0 \$0.0	0 IND- Individual COM- Recipient (other that	
	y contributions received this period.				PTY- Political P	arty
	and 2. Enter here on the Summary Page, Column A, Line 1.)		TOTAL	\$997,000.0	o ————	ntributor Committee

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

Type or print in ink.	
Amounts may be rounded	Statement covers p
to whole dollars.	· ·

erlod 10/1/2014 through 10/18/2014

**CALIFORNIA FORM** Page 7 of 71

SCHEDULE A

Schedule A **Monetary Contributions Received** 

NAME OF FILER Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers
Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER

Organizations i	or Sheila Kuehl for Supervisor 2014	11371649				
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)
10/03/2014	LA County Professional Peace Officers' Assn. Independent Expenditure Cmte.	IND COM OTH PTY SCC		\$62,500.00	\$250,000.00	
10/09/2014	LA County Professional Peace Officers' Assn. Independent Expenditure Cmte.	IND COM OTH PTY scc		\$62,500.00	\$250,000.00	
10/09/2014	LA League of Conservation Voters (LALCV)	□IND □ COM ☑ OTH □ PTY □ SCC		\$10,000.00	\$10,000.00	
10/10/2014	Howard Welinsky	VIND □ COM □ OTH □ PTY □ SCC	Senior Vice President Warner Bros.	\$2,000.00	\$2,000.00	

SUBTOTAL	\$137,000.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual
(Include all Schedule A subtotals.)	\$997,000.00	COM- Recipient Committee
2. Amount received this period -unitemized monetary contributions of less than \$100	\$0.00	(other than PTY or SCC) OTH- Other (e.g., business entity)
3. Total monetary contributions received this period.		PTY- Political Party SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.)	\$997,000.00	EPPC Form 460 ( January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (886/275-3772)

#### Schedule C **Nonmonetary Contributions Received**

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

SCHEDULE C

Statement covers period CALIFORNIA 460 **FORM** 10/1/2014 Page 8 **of** 71

through 10/18/2014

I.D. NUMBER 1371649

NAME OF FILER Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 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)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/10/2014	Service Employees International Union Local 721, CTW, CLC Workers' Strength Committee	IND COM OTH PTY SCC		Positive Telvision Ad	\$229,000. 00	\$229,000.00	

SUBTOTAL	\$229,000.00	
Schedule C Summary  1. Amount received this period -itemized nonmonetary contributions.		*Contributor Codes IND- Individual
(Include all Schedule C subtotals.)	\$229,000.00	COM- Recipient Committee (other than PTY or SCC) OTH- Other (e.g., business entity) PTY- Political Party
3. Total nonmonetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Column A, Lines 4 and 10.)	\$229,000.00 FPPC Tol	FPPC Form 460 (January/05 II-Free Helpline: 886/ASK-FPPC (886/275-3772

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

10/1/2014

Statement covers period

**CALIFORNIA** 460 **FORM** Page 9 of 71

through 10/18/2014 NAME OF FILER I.D. NUMBER Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649 Organizations for Sheila Kuehl for Supervisor 2014 NAME OF CANDIDATE, OFFICE, AND TYPE OF DESCRIPTION AMOUNT/FAIR CUMULATIVE TO DATE PER ELECTION TO DATE DISTRICT, OR MEASURE NUMBER OR PAYMENT (IF REQUIRED) MARKET VALUE CALENDAR YEAR DATE LETTER AND JURISDICTION, OR (IF REQUIRED) (JAN. 1-DEC. 31) COMMITTEE Monetary Contribution Sheila Kuehl \$300,800.00 \$2,204,002.50 Board of Supervisors County: Nonmonetary Contribution 10/02/2014 TEL Los Angeles County Independent Expenditure Support Oppose Monetary Contribution Sheila Kuehl \$71,800.00 \$2,204,002.50 Board of Supervisors County: Nonmonetary Contribution 10/10/2014 TEL Los Angeles County Independent Expenditure Support Oppose Monetary Contribution Sheila Kuehl \$0.00 \$2,204,002.50 Board of Supervisors County: Nonmonetary Contribution Memo: \$229000.00 10/10/2014 Los Angeles County TEL Independent Expenditure Support Oppose SUBTOTAL \$601,600.00 Schedule D Summary \$1,487,861.67 \$0.00 2. Uniternized contributions and independent expenditures made this period of under \$100...... \$1,487,861.67 

Schedule D **Summary of Expenditures** 

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

Statement covers period

CALIFORNIA AGO

Supporting/ Candidates	Opposing Other , Measures and Committees			fro thre	7111	/1/2014 18/2014	FO Page	RM 400 10 of 71
	We Trust for our Communities - A Coalition of We r Sheila Kuehl for Supervisor 2014	orking Men and Wome	an, Nurses, Teachers, Firef:	ighters and l	Public Sai	ety Officers	I.D. NUMBI 137164	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUN MARKET	IT/FAIR FVALUE	CUMULATIVE CALENDAR	YEAR	PER ELECTION TO DATE (IF REQUIRED)
10/17/2014	Sheila Kuehl Board of Supervisors County: Los Angeles County  Support Oppose	Monetary Contribution  Nonmonetary Contribution  Independent Expenditure	TEL	\$305,4	100.00	\$2,204,0	002.50	
10/01/2014	Sheila Kuehl Board of Supervisors County: Los Angeles County  Support Oppose	Monetary Contribution  Nonmonetary Contribution  Independent Expenditure	LIT	\$4,8	814.26	\$2,204,0	002.50	
10/01/2014	Sheila Kuehl Board of Supervisors County: Los Angeles County  Support Oppose	Monetary Contribution  Nonmonetary Contribution  Independent Expenditure	LIT	\$7,	847.71	\$2,204,0	002.50	
			SUBTOTAL	\$318,0	61.97			
2. Unitemized cor	Summary putions and independent expenditures made this period	eriod of under \$100	,					\$1,487,861.67 \$0.00

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period from \_\_\_\_\_\_10/1/2014

CALIFORNIA 460
FORM
Page 11 of 71

through 10/18/2014 NAME OF FILER I.D. NUMBER Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649 Organizations for Sheila Kuehl for Supervisor 2014 CUMULATIVE TO DATE TYPE OF DESCRIPTION AMOUNT/FAIR PER ELECTION TO NAME OF CANDIDATE, OFFICE, AND DATE DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR PAYMENT (IF REQUIRED) MARKET VALUE CALENDAR YEAR DATE (IF REQUIRED) (JAN. 1-DEC. 31) COMMITTEE Monetary Contribution Sheila Kuehl \$7,847,71 \$2,204,002.50 Board of Supervisors County: Nonmonetary Contribution 10/03/2014 LIT Los Angeles County Independent Expenditure **V** Support Oppose Monetary Contribution Sheila Kuehl \$4,814.26 \$2,204,002.50 Board of Supervisors County: Nonmonetary Contribution 10/03/2014 POS Los Angeles County Independent Expenditure Support Oppose Monetary Contribution Sheila Kuehl \$11,098.60 \$2,204,002.50 Board of Supervisors County: Nonmonetary Contribution 10/03/2014 POS Los Angeles County Independent Expenditure Support Oppose SUBTOTAL \$23,760.57 Schedule D Summary \$1,487,861.67 \$0.00 2. Uniternized contributions and independent expenditures made this period of under \$100...... \$1,487,861.67 

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

Statement covers period 10/1/2014

CALIFORNIA 460 **FORM** 

12 **of** 

through 10/18/2014

Sheila Kuehl  Board of Supervisors County:    Sheila Kuehl   Contribution   Sad,707.69   \$2,204,002.50   \$2,204,002.50	.0/03/2014 Board Los A	d of Supervisors County: Angeles County	Contribution  Nonmonetary Contribution		\$17,613.26	\$2 204 002 50	
Sheila Kuehl Board of Supervisors County: Los Angeles County    Nonmonetary Contribution   Factor of Supervisors   Factor of S	63 - : 3	[₱] Gabbout ☐ Obboac	Expenditure	711		<b>42,204,002.30</b>	
Board of Supervisors County: Los Angeles County    Independent   Expenditure   Contribution   Pos   Contribution   Contribution   Pos   Contribution   Contributio	0/03/2014 Board	d of Supervisors County: Angeles County	Contribution  Nonmonetary Contribution	LIT	\$41,128.81	\$2,204,002.50	
	Board	d of Supervisors County: Angeles County	Nonmonetary Contribution	POS	\$34,707.69	\$2,204,002.50	

Sheila Kuehl

Los Angeles County

Support

10/07/2014

Board of Supervisors County:

Oppose

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

Statement covers period 10/1/2014 through 10/18/2014

\$4,814.26

\$2,204,002.50

**CALIFORNIA** 460 **FORM** 13 of Page 71

NAME OF FILER I.D. NUMBER Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649 Organizations for Sheila Kuehl for Supervisor 2014 PER ELECTION TO NAME OF CANDIDATE, OFFICE, AND TYPE OF DESCRIPTION AMOUNT/FAIR CUMUI ATIVE TO DATE DATE DISTRICT, OR MEASURE NUMBER OR PAYMENT (IF REQUIRED) MARKET VALUE CALENDAR YEAR DATE LETTER AND JURISDICTION, OR (IF REQUIRED) (JAN. 1-DEC, 31) COMMITTEE Monetary Contribution Sheila Kuehl \$11,098.60 \$2,204,002.50 Board of Supervisors County: Nonmonetary Contribution 10/07/2014 POS Los Angeles County Independent Expenditure Support Oppose Monetary Contribution Sheila Kuehl \$17,613.26 \$2,204,002.50 Board of Supervisors County: Nonmonetary Contribution 10/07/2014 LIT Los Angeles County Independent Expenditure Support Oppose Monetary Contribution

SUBTOTA	L \$33,526.12	
Schedule D Summarv		
1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)		\$1,487,861.67
2. Unitemized contributions and independent expenditures made this period of under \$100		\$0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summ	ary Page.)	TOTAL \$1,487,861.67

POS

Nonmonetary Contribution

independent Expenditure

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

Statement covers period 10/1/2014

**CALIFORNIA** 460 **FORM** Page 14 of 71

through 10/18/2014 NAME OF FILER I.D. NUMBER Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649 Organizations for Sheila Kuehl for Supervisor 2014 CUMULATIVE TO DATE NAME OF CANDIDATE, OFFICE, AND TYPE OF DESCRIPTION AMOUNT/FAIR PER ELECTION TO DATE (IF REQUIRED) DATE DISTRICT, OR MEASURE NUMBER OR PAYMENT MARKET VALUE CALENDAR YEAR LETTER AND JURISDICTION, OR (IF REQUIRED) COMMITTEE (JAN, 1-DEC, 31) Monetary Contribution Sheila Kuehl \$7,847.71 \$2,204,002.50 Board of Supervisors County: Nonmonetary 10/07/2014 LIT Los Angeles County Independent Expenditure Support Oppose Monetary Contribution Sheila Kuehl \$34,707.69 \$2,204,002.50 Board of Supervisors County: Nonmonetary 10/07/2014 POS Los Angeles County Independent Expenditure Support Oppose Monetary Contribution Sheila Kuehl \$39,052.34 \$2,204,002.50 Board of Supervisors County: Nonmonetary Contribution 10/07/2014 LIT Los Angeles County Independent Expenditure **✓** Support Oppose SUBTOTAL \$81,607.74 Schedule D Summary \$1,487,861.67 1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) \$0.00 2. Unitermized contributions and independent expenditures made this period of under \$100...... \$1,487,861.67 

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

Statement covers period **CALIFORNIA** 460 **FORM** 10/1/2014 Page 15 **of** 10/18/2014

through NAME OF FILER I.D. NUMBER Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649 Organizations for Sheila Kuehl for Supervisor 2014 NAME OF CANDIDATE, OFFICE, AND DESCRIPTION AMOUNT/FAIR CUMULATIVE TO DATE PER ELECTION TO TYPE OF DATE DISTRICT, OR MEASURE NUMBER OR PAYMENT (IF REQUIRED) MARKET VALUE CALENDAR YEAR DATE LETTER AND JURISDICTION, OR (IF REQUIRED) (JAN. 1-DEC. 31) COMMITTEE Monetary Contribution Sheila Kuehl \$11,098.60 \$2,204,002.50 Board of Supervisors County: Nonmonetary Contribution 10/09/2014 POS Los Angeles County Independent Expenditure Support Oppose Monetary Contribution Sheila Kuehl \$17,613,26 \$2,204,002.50 Board of Supervisors County: Nonmonetary Contribution 10/09/2014 LIT Los Angeles County Independent Expenditure Support Oppose Monetary Contribution Sheila Kuehl \$41,128.81 \$2,204,002.50 Board of Supervisors County: Nonmonetary Contribution 10/10/2014 LIT Los Angeles County independent Expenditure Support Oppose SUBTOTAL \$69,840.67 Schedule D Summarv \$1,487,861.67 \$0.00 2. Uniternized contributions and independent expenditures made this period of under \$100...... \$1,487,861.67 

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

Statement covers period 10/1/2014 Page

CALIFORNIA 460 **FORM** 16 of 71

through 10/18/2014 NAME OF FILER .D. NUMBER Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Pirefighters and Public Safety Officers 1371649 Organizations for Sheila Kuehl for Supervisor 2014 DESCRIPTION TYPE OF AMOUNT/FAIR CUMULATIVE TO DATE PER ELECTION TO DATE NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR PAYMENT (IF REQUIRED) MARKET VALUE CALENDAR YEAR DATE LETTER AND JURISDICTION, OR (IF REQUIRED) (JAN. 1-DEC, 31) COMMITTEE Monetary Contribution Sheila Kuehl \$34,707.69 \$2,204,002.50 Board of Supervisors County: Nonmonetary Contribution 10/10/2014 POS Los Angeles County Independent Expenditure Support Oppose Monetary Contribution Sheila Kuehl \$4,814.26 \$2,204,002.50 Board of Supervisors County: Nonmonetary 10/10/2014 POS Los Angeles County Independent Expenditure Support Oppose Monetary Contribution Sheila Kuehl \$7,847.71 \$2,204,002.50 Board of Supervisors County: Nonmonetary Contribution LIT 10/10/2014 Los Angeles County Independent Expenditure Support Oppose SUBTOTAL \$47,369.66 Schedule D Summary

\$1,487,861.67 \$0.00 2. Unitemized contributions and independent expenditures made this period of under \$100..... \$1,487,861.67 

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

Statement covers period 10/1/2014

CALIFORNIA 460 **FORM** 

through 10/18/2014

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NAME OF FILER I.D. NUMBER Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649 Organizations for Sheila Kuehl for Supervisor 2014 CUMULATIVE TO DATE NAME OF CANDIDATE, OFFICE, AND TYPE OF DESCRIPTION AMOUNT/FAIR PER ELECTION TO DATE (IF REQUIRED) MARKET VALUE CALENDAR YEAR DISTRICT, OR MEASURE NUMBER OR PAYMENT DATE LETTER AND JURISDICTION, OR (IF REQUIRED) COMMITTEE (JAN, 1-DEC, 31) Monetary Contribution Sheila Kuehl \$7,333.33 \$2,204,002.50 Board of Supervisors County: Nonmonetary Contribution 10/13/2014 CNS Los Angeles County Independent Expenditure Support Oppose Monetary Contribution Sheila Kuehl \$41,128.81 \$2,204,002.50 Board of Supervisors County: Nonmonetary Contribution 10/14/2014 LIT Los Angeles County Independent Expenditure Support Oppose Monetary Contribution Sheila Kuehl \$34,707.69 \$2,204,002.50 Board of Supervisors County: Nonmonetary Contribution 10/14/2014 POS Los Angeles County Independent Expenditure Oppose Support SUBTOTAL \$83,169.83 Schedule D Summary \$1,487,861.67 \$0.00 \$1,487,861.67

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

Statement covers period 10/1/2014 through 10/18/2014

CALIFORNIA **FORM** Page 18 **of** 71

I.D. NUMBER NAME OF FILER Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT/FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
0/14/2014	Sheila Kuehl Board of Supervisors County: Los Angeles County  Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	LIT	\$17,613.26	\$2,204,002.50	
0/14/2014	Sheila Kuehl Board of Supervisors County: Los Angeles County  Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	POS	\$11,098.60	\$2,204,002.50	
0/14/2014	Sheila Kuehl Board of Supervisors County: Los Angeles County  Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	LIT	\$7,847.71	\$2,204,002.50	

	SUBTOTAL	\$36,559.57	
Schedule D Summary			
1. Itemized contributions and independent expenditures made this period. (Include all Schedule D sub	totais.)		\$1,487,861.67
2. Unitemized contributions and independent expenditures made this period of under \$100			\$0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not ent	er on the Summary F	Page.)TOTAL	\$1,487,861.67

Type or print in ink.

Amounts may be rounded to whole dollars.

from 10/1/2014 through 10/18/2014

Statement covers period

CALIFORNIA FORM 19 of 71

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649

Organizations for Sheila Kuehl for Supervisor 2014 DESCRIPTION AMOUNT/FAIR CUMULATIVE TO DATE PER ELECTION TO NAME OF CANDIDATE, OFFICE, AND TYPE OF DATE (IF REQUIRED) MARKET VALUE CALENDAR YEAR DISTRICT, OR MEASURE NUMBER OR PAYMENT DATE LETTER AND JURISDICTION, OR (IF REQUIRED) (JAN. 1-DEC. 31) COMMITTEE Monetary Contribution Sheila Kuehl \$4,814.26 \$2,204,002.50 Nonmonetary Board of Supervisors County: 10/14/2014 POS Contribution Los Angeles County Independent Expenditure ✓ Support Oppose Monetary Contribution Sheila Kuehl \$7,847.71 \$2,204,002.50 Board of Supervisors County: Nonmonetary 10/17/2014 LIT Los Angeles County Independent Expenditure **✓** Support Oppose Monetary Contribution Sheila Kuehl \$4,814.26 \$2,204,002.50 Board of Supervisors County: Nonmonetary Contribution POS 10/17/2014 Los Angeles County Independent Expenditure Support Oppose

SUBTOTAL	\$17,476.23	
Schedule D Summarv		
1. Itemized contributions and independent expenditures made this period. (include all Schedule D subtotals.)		\$1,487,861.67
2. Unitemized contributions and independent expenditures made this period of under \$100		\$0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary P	age.) TOTAL _	\$1,487,861.67

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

Statement covers period from  $\frac{10/1/2014}{\text{through}}$ 

CALIFORNIA FORM Page 20 of 71

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Man and Women, Nurses, Teachers, Firefighters and Public Safety Officers

Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER

1371649

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT/FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/17/2014	Sheila Kuehl Board of Supervisors County: Los Angeles County  Support Oppose	Monetary Contribution  Nonmonetary Contribution  Independent Expenditure	LIT	\$41,128.81	\$2,204,002.50	
10/17/2014	Sheila Kuehl Board of Supervisors County: Los Angeles County  Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	POS	\$34,707.69	\$2,204,002.50	
10/15/2014	Sheila Kuehl Board of Supervisors County: Los Angeles County  Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	TEL	\$5,603.05	\$2,204,002.50	

Schedule D Summary	
1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)	\$1,487,861.67
2. Unitemized contributions and independent expenditures made this period of under \$100	\$0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	\$1,487,861.67

SUBTOTAL

\$81,439.55

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE E

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

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

CMP campaign paraphemalia/misc.
CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure

LEG legal defense

LIT campaign literature and mailings

MBR member communications

MTG meetings and appearances

OFC office expenses

OFC office expenses

PET petition circulating PHO phone banks

POL politing and survey research

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

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)

LIT campaign literature and mailings	PR   print ads	WEB information technology costs (inten	net, e-mail)
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Canal Partners Media LLC	IND	TEL, Sheila Kuehl, Support	\$300,800.00
Canal Partners Media LLC			
	IND	TEL, Sheila Kuehl, Support	\$71,800.00
Canal Partners Media LLC			
	IND	Memo: \$229000.00 TEL, Sheila Kuehl, Support	\$0.00
Payments that are contributions or independent expend	itures must also be summarized on Sched	lule D. SUBTOTAI	\$372,600.0
Schedule E Summary			
. Itemized payments made this period. (Include all Scho	edule E subtotais.)		\$1,249,991.60
2. Unitemized payments made this period of under \$100	)		\$140.00
3. Total interest paid this period on loans. (Enter amoun	t from Schedule B, Part 1, Column (e).)		\$0.00

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

SCHEDULE E Statement covers period

CALIFORNIA **FORM** 

10/1/2014 through 10/18/2014 Page 22 **of** 

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for 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)* CVC civic donations FIL candidate filina/ballot fees FND fundraising events IND independent expenditure LEG legal defense LIT campaign literature and mailings		nd appearances ases rlating s			RAD radio airtime and RFD returned contributed for the contributed	ctions s' salaries ne and production cost lodging, and meals el, lodging, and meals committees of the sa	s me candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE	OR	DES	CRIPTION OF PAYMENT		AMOUNT PAID
Canal Partners Media LLC		IND	TEL,	Sheila Kuehl,	Support		\$305,400.00
David Binder Research		IND	POL,	Sheila Kuehl,	Support		\$1,958.00
David Binder Research		IND	POL,	Sheila Kuehl,	Support		\$23,760.00
* Payments that are contributions or Independent expenditures n	nust also be summa	rized on Schedu	le D.			SUBTOTAL	\$331,118.00
Schedule E Summary  1. Itemized payments made this period. (Include all Schedule E  2. Unitemized payments made this period of under \$100							\$140.00
3. Total interest paid this period on loans. (Enter amount from S							\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. En	ter here and on the	Summary Page,	Column A	, Line 6.)		TOTAL	\$1,250,131.60

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period

SCHEDULE E

**CALIFORNIA** 

**FORM** 10/1/2014 through 10/18/2014 Page 23 **of** NAME OF FILER I.D. NUMBER Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649 Organizations for Sheila Kuehl for Supervisor 2014 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications RAD radio airtime and production costs CMP campaion paraphemalia/misc. CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)\* OFC office expenses SAL campaign workers' salaries CVC clvlc donations PET petition circulating TEL t.v. or cable airlime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals POL polling and survey research TRS staff/spouse travel, lodging, and meals FND fundralsing events POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor IND independent expenditure PRO professional services (legal, accounting) VOT voter registration LEG legal defense WEB information technology costs (Internet, e-mail) LIT campaign literature and mailings PRT print ads NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) David Binder Research IND POL, Sheila Kuehl, Support \$13,200.00 David Binder Research IND POL, Sheila Kuehl, Support \$13,200.00 The Strategy Group, Inc. \$4,814.26 IND LIT, Sheila Kuehl, Support \* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$31,214.26 Schedule E Summary 1, Itemized payments made this period. (Include all Schedule E subtotals.) \$1,249,991.60 \$140.00 2. Unitemized payments made this period of under \$100. 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)...... \$0.00 \$1,250,131.60

CMP campaign paraphemaila/misc.

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

Statement covers period

10/1/2014 through 10/18/2014

RAD radio airtime and production costs

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SCHEDULE E

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

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

MBR member communications

CNS campaion consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filling/ballot fees FND fundralsing events IND independent expenditure LEG legal defense LIT campaign literature and mailings	MTG meetings ar OFC office expen PET petition circu PHO phone bank POL polling and s POS postage, de PRO professiona PRT print ads	nses ulating is survey research livery and messe		RFD returned contributions SAL campaign workers' sala TEL t.v. or cable airtime and TRC candidate travel, lodgin TRS staff/spouse travel, lodg TSF transfer between comm VOT voter registration WEB information technology	production cos ig, and meals ling, and meals littees of the sa	s me candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION OF PAYMENT		AMOUNT PAID
The Strategy Group, Inc.		IND	LIT,	Sheila Kuehl, Support		\$7,847.71
The Strategy Group, Inc.		IND	LIT,	Sheila Kuehl, Support		\$7,847.71
The Strategy Group, Inc.		IND	POS,	Sheila Kuehl, Support		\$4,814.26
* Payments that are contributions or independent expendit	ures must also be summa	rized on Sched	ule D.	5	SUBTOTAL	\$20,509.68
Schedule E Summary  1. Itemized payments made this period. (Include all Sche  2. Unitemized payments made this period of under \$100.		••••••				
<ul><li>3. Total interest paid this period on loans. (Enter amount</li><li>4. Total payments made this period. (Add Lines 1, 2, and</li></ul>						\$0.00

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

SCHEDULE E Statement covers period

CALIFORNIA **FORM** 

10/1/2014 through 10/18/2014 Page 25 of 71

NAME OF FILER

CODES: If one of the following codes accurat	ely describes the payment, you m	ay enter t	ne code. Otherwise	, describe the payment.	
CMP campaign paraphemalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure LEG legal defense LIT campaign literature and mallings	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 messes PRO professional services (legal, a			RAD radio airtime and production cost RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and productio TRC candidate travel, lodging, and matter staff/spouse travel, lodging, and it TSF transfer between committees of the VOT voter registration WEB information technology costs (information technology co	on costs eals meals he same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESC	RIPTION OF PAYMENT	AMOUNT PAID
The Strategy Group, Inc.	IND	POS,	Sheila Kuehl,	Support	\$11,098.60
The Strategy Group, Inc.	IND	LIT,	Sheila Kuehl,	Support	\$17,613.26
The Strategy Group, Inc.	IND	LIT,	Sheila Kuehl,	Support	\$41,128.81
Payments that are contributions or Independent expendi	ures must also be summarized on Sched	ule D.		SUBTOT	AL \$69,840.6
Schedule E Summary					
. Itemized payments made this period. (Include all Sche	·				
Unitemized payments made this period of under \$100.					
s. Total interest paid this period on loans. (Enter amount					\$0.00
4. Total payments made this period. (Add Lines 1, 2, and	3. Enter here and on the Summary Page	Column A	Line 6 )	TOTAL	\$1,250,131.60

### Type or print in lnk. Amounts may be rounded

to whole dollars.

Statement covers period

**CALIFORNIA FORM** 

10/1/2014 through 10/18/2014 Page 26 **of** 

SCHEDULE E

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for 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)* CVC civic donations FIL candiate filing/ballot fees FND fundraising events IND independent expenditure LEG legal defense LIT campaign literature and mailings	MBR member commun MTG meetings and app OFC office expenses PET petition circulating PHO phone banks POL polling and survey POS postage, delivery PRO professional servi PRT print ads	pearances r research and messenger services	RAD radio airtime and RFD returned contributed contributed contributed and contributed are supported by the contributed are supporte	ations rs' salaries ne and production cost , lodging, and meals rei, lodging, and meals committees of the san	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTION OF PAYMENT		AMOUNT PAID
The Strategy Group, Inc.	IN	D POS,	Sheila Kuehl, Support		\$34,707.69
The Strategy Group, Inc.	IN	ID LIT,	Sheila Kuehl, Support		\$6,567.87
The Strategy Group, Inc.	IN	ND POS,	Sheila Kuehl, Support		\$4,827.68
* Payments that are contributions or independent expendit	tures must also be summarized	on Schedule D.		SUBTOTAL	\$46,103.24
Schedule E Summary  1. Itemized payments made this period. (Include all Sche	dule E subtotals )				\$1,249,991.60
Itemized payments made this period. (Include all Schedule E subtotals.).      Unitemized payments made this period of under \$100.					\$140.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)					\$0.00
4. Total payments made this period. (Add Lines 1, 2, and	3. Enter here and on the Sumr	mary Page, Column /	4, Line 6.)	TOTAL	\$1,250,131.60

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

SCHEDULE E

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

CODES: If one of the following codes accurately des	scribes the payment, you m	nay enter the code.	Otherwise, describe the pa	yment.	
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundralsing events IND independent expenditure LEG legal defense LIT campaign literature and mailings	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks TOPOL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting)		RFD returned contri SAL campaign work TEL t.v. or cable air TRC candidate trav TRS staff/spouse tra TSF transfer betwee VOT voter registrati	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/s VOT voter registration 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
The Strategy Group, Inc.	IND	LIT, Sheila	Kuehl, Support		\$6,567.87
The Strategy Group, Inc.	IND	POS, Sheila	Kuehl, Support		\$4,827.68
The Strategy Group, Inc.	IND	LIT, Sheila	Kuehl, Support		\$45,738.11
* Payments that are contributions or Independent expenditures mu	ıst also be summarized on Sched	ule D.		SUBTOTAL	\$57,133.66
Schedule E Summary  1. Itemized payments made this period. (include all Schedule E s  2. Unitemized payments made this period of under \$100					\$1,249,991.60 \$140.00 \$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter					\$1,250,131.60

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

SCHEDULE E

Statement covers period

**CALIFORNIA FORM** 10/1/2014 through 10/18/2014 Page 28 **of** I.D. NUMBER NAME OF FILER Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649 Organizations for Sheila Kuehl for Supervisor 2014 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 CMP campaign paraphemalia/misc. MBR member communications RFD returned contributions CNS campaign consultants MTG meetings and appearances SAL campaign workers' salaries CTB contribution (explain nonmonetary)\* OFC office expenses TEL t.v. or cable airtime and production costs CVC civic donations PET petition circulating 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 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 PRT print ads WEB information technology costs (internet, e-mail) LIT campaign literature and mailings NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) The Strategy Group, Inc. IND POS, Sheila Kuehl, Support \$34,707.69 The Strategy Group, Inc. IND POS, Sheila Kuehl, Support \$34,707.69 The Strategy Group, Inc. IND LIT, Sheila Kuehl, Support \$41,128.81 \* Payments that are contributions or Independent expenditures must also be summarized on Schedule D. SUBTOTAL \$110,544.19 Schedule E Summary \$1,249,991.60 \$140.00 2. Unitemized payments made this period of under \$100. \$0.00 

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

SCHEDULE E

Statement covers period **CALIFORNIA FORM** 10/1/2014 Page 29 of

through 10/18/2014

NAME OF FILER I.D. NUMBER Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649 Organizations for Sheila Kuehl for Supervisor 2014 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications RAD radio airtime and production costs CMP campaign paraphernalia/misc. RFD returned contributions CNS campaign consultants MTG meetings and appearances OFC office expenses SAL campaign workers' salaries CTB contribution (explain nonmonetary)\* PET petition circulating 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 TRS staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research TSF transfer between committees of the same candidate/sponsor IND independent expenditure POS postage, delivery and messenger services PRO professional services (legal, accounting) LEG legal defense VOT voter registration PRT print ads WEB Information technology costs (Internet, e-mail) LIT campaign literature and mailings DESCRIPTION OF PAYMENT NAME AND ADDRESS OF PAYEE CODE OR AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) The Strategy Group, Inc. IND POS, Sheila Kuehl, Support \$11,098.60 The Strategy Group, Inc. IND LIT, Sheila Kuehl, Support \$17,613.26 The Strategy Group, Inc. IND POS, Sheila Kuehl, Support \$4,814.26 \* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$33,526.12 Schedule E Summary \$1,249,991.60 1. itemized payments made this period. (Include all Schedule E subtotals.) \$140.00 2. Uniternized payments made this period of under \$100. 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)...... \$0.00 \$1,250,131.60

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE E

Statement covers period from 10/1/2014 through 10/18/2014 Through 10/18/2014 CALIFORNIA FORM Page 30 of 71

I.D. NUMBER 1371649

Wise, describe the payment.

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for 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)\*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure

LEG legal defense

LIT 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

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)

ti - campaign instance and mainings	FAT print agas	AACD HIIOHIIS	MOU (ectinology costs (litterities	technology costs (litterfier, e-figur)		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAY	MENT	AMOUNT PAID		
The Strategy Group, Inc.	IND	LIT, Sheila Kuehl, Support		\$7,847.71		
The Strategy Group, Inc.	IND	POS, Sheila Kuehl, Support		\$34,707.69		
The Strategy Group, Inc.	IND	LIT, Sheila Kuehl, Support		\$39,052.34		
* Payments that are contributions or independent expendi	tures must also be summarized on Schec	dule D.	SUBTOTAL	\$81,607.74		
Schedule E Summary  1. Itemized payments made this period. (Include all Sche  2. Unitemized payments made this period of under \$100.				\$1,249,991.60 \$140.00 \$0.00		
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)				\$1,250,131.60		

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

Statement covers period

CALIFORNIA **FORM** 

10/1/2014 through 10/18/2014 Page 31 of

SCHEDULE E

NAME OF FILER

Local Experience We Trust for our Communities - A Coal Organizations for Sheila Kuehl for Supervisor 2014	ition of Working Men and Women, Nu	rses, Teachers, Firefighters and	nd Public Safety Officers 1371	.649	
CODES: If one of the following codes accurately	describes the payment, you ma	ay enter the code. Otherwis	e, describe the payment.		
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 LEG legal defense LIT 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 messer PRO professional services (legal, a PRT print ads	***	RAD radio airtime and production con RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and producti TRC candidate travel, lodging, and m TRS staff/spouse travel, lodging, and TSF transfer between committees of VOT voter registration WEB information technology costs (In	ion costs neals I meals the same candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DES	CRIPTION OF PAYMENT	AMOUNT PAID	
The Strategy Group, Inc.	IND	POS, Sheila Kuehl,	Support	\$11,098.60	
The Strategy Group, Inc.	IND	LIT, Sheila Kuehl,	Support	\$17,613.26	
The Strategy Group, Inc.	IND	POS, Sheila Kuehl,	Support	\$4,814.26	
* Payments that are contributions or Independent expenditur	es must also be summarized on Schedu	ile D.	SUBTO	TAL \$33,526.12	
Schedule E Summary					
Itemized payments made this period. (Include all Schedu	le E subtotals.)			\$1,249,991.60	
2. Unitermized payments made this period of under \$100					
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.	1. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)				

### Schedule E

Type or print in lnk. Amounts may be rounded SCHEDULE E

Statement covers period **CALIFORNIA** to whole dollars. **Payments Made FORM** 10/1/2014 32 through 10/18/2014 Page of NAME OF FILER I.D. NUMBER Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649 Organizations for Sheila Kuehl for 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. MBR member communications RAD radio airtime and production costs MTG meetings and appearances RFD returned contributions CNS campaign consultants OFC office expenses SAL campaign workers' salaries CTB contribution (explain nonmonetary)\* PET petition circulating TEL t.v. or cable airtime and production costs CVC civic donations TRC candidate travel, lodging, and meals FIL candidate filing/ballot fees PHO phone banks TRS staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor IND Independent expenditure PRO professional services (legal, accounting) VOT voter registration LEG legal defense PRT print ads WEB information technology costs (Internet, e-mail) LIT campaign literature and mailings DESCRIPTION OF PAYMENT CODE OR AMOUNT PAID NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) The Strategy Group, Inc. IND LIT, Sheila Kuehl, Support \$7,847.71 The Strategy Group, Inc. IND CNS, Sheila Kuehl, Support \$7,333.33 Three Point Media, LLC IND TEL, Sheila Kuehl, Support \$23,543.44 \* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$38,724.48 Schedule E Summary 1. Itemized payments made this period. (Include all Schedule E subtotals.). \$1,249,991.60 \$140.00 2. Uniternized payments made this period of under \$100. \$0.00 \$1,250,131.60

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE E

 
 from
 10/1/2014 through
 CALIFORNIA FORM
 460

 Page
 33
 of
 71

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

1371649

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

CMP campaign paraphemalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)\*
CVC civic donations
FIL candidate filing/ballot fees
FND fundraising events

IND independent expenditure
LEG legal defense
LIT campaign literature and mailings

MBR member communications
MTG meetings and appearances
OFC office expenses
PET petition circulating

PET petition circulating
PHO phone banks
POL polling and survey research

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

PRO professional

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)

rii campaidh literature arid mailings	PRI pintaus		AACD Illiotitishous fecunolity costs (luteries' e-titali)		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Three Point Media, LLC		IND	TEL, She	ila Kuehl, Support	\$23,543.44
·		1			

* Payments that are contributions or Independent expenditures must also be summarized on Schedule D.	BTOTAL	\$23,543.44
Schedule E Summary		
1. Itemized payments made this period. (Include all Schedule E subtotals.)		\$1,249,991.60
2. Unitemized payments made this period of under \$100		\$140.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	<u>-</u>	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	AL	\$1,250,131.60

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

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

and on the Summary Page, Column A, Line 9.)

SCHEDULE F Type or print in ink, Amounts may be rounded Statement covers period CALIFORNIA to whole dollars. **FORM** 10/1/2014 Page through 10/18/2014 34 **of** NAME OF FILER I.D. NUMBER Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649 Organizations for Sheila Kuehl for 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. MBR member communications RAD radio airtime and production costs MTG meetings and appearances RFD returned contributions CNS campaign consultants OFC office expenses SAL campaign workers' salaries CTB contribution (explain nonmonetary)\* PET petition circulating TEL t.v. or cable airtime and production costs CVC civic donations PHO phone banks TRC candidate travel, lodging, and meals FIL candidate filing/ballot fees TRS staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research IND independent expenditure 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 PRT print ads WEB information technology costs (Internet, e-mail) LIT campaign literature and mailings (b) (d) NAME AND ADDRESS OF CREDITOR CODE OR DESCRIPTION OF OUTSTANDING BALANCE AMOUNT INCURRED AMOUNT PAID THIS OUTSTANDING THIS PERIOD BEGINNING OF THIS (IF COMMITTEE, ALSO ENTER I.D. NUMBER) PAYMENT PERIOD BALANCE AT CLOSE PERIOD OF THIS PERIOD (ALSO REPORT ON E) David Binder Research IND, POL, Sheila \$52,118.00 \$0.00 \$52,118.00 \$0.00 Kuehl, Support The Strategy Group, Inc. IND, POS, Sheila \$34,707.69 \$0.00 \$34,707.69 \$0.00 Kuehl, Support The Strategy Group, Inc. IND, LIT, Sheila \$45,738.11 \$0.00 \$45,738.11 \$0.00 Kuehl, Support \*Payments that are contributions or independent expenditures must also be **SUBTOTALS** \$132,563.80 \$0.00 \$132,563.80 \$0.00 summarized on Schedule D. Schedule F Summarv 1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for **INCURRED TOTALS** \$287,148.35 accrued expenses of \$100 or more, plus total uniternized payments on accrued expenses under \$100.) 2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) PAID TOTALS \$278,278.28

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

\$8,870.07

(May be a negative number)

NET

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

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

Statement covers period

**CALIFORNIA** 460 **FORM** 

10/1/2014 10/18/2014 through

Page 35 **of** 71

SCHEDULE F

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER 1371649

CODES: If one of the follo	owing codes accurately describes the	payment, you may enter the code.	Otherwise, describe the navment
	Willy Codes accurately describes the	Davincia, vou may enter the code.	Citie Wise, describe the bayinent.

CMP campaign paraphernalfa/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure

LEG legal defense

LIT 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

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)

		(a)	(b)	(c)	(d)
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	AMOUNT INCURRED THIS PERIOD	AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
The Strategy Group, Inc.	IND, POS, Sheila Kuehl, Support	\$4,827.68	\$0.00	\$4,827.68	\$0.00
The Strategy Group, Inc.	IND, LIT, Sheila Kuehl, Support	\$6,567.87	\$0.00	\$6,567.87	\$0.00
The Strategy Group, Inc.	IND, POS, Sheila Kuehl, Support	\$4,827.68	\$0.00	\$4,827.68	\$0.00
*Payments that are contributions or independent expenditures must also be summerized on Schedule D.	SUBTOTALS	\$16,223.23	\$0.00	\$16,223.23	\$0.00
Schedule F Summary					
Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)				CURRED TOTALS	\$287,148.35
2. Total accrued expenses paid this period. (Include all S accrued expenses of \$100 or more, plus total unitemized			······································	PAID TOTALS	\$278,278.28
3. Net change this period. (Subtract Line 2 from Line 1. E and on the Summary Page, Column A, Line 9.)				NET	\$8,870.07
and on the odiffinary rago, Column A, Line 8.)					May be a negative number)

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

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

SCHEDULE F

Type or print in lnk. Amounts may be rounded Statement covers period **CALIFORNIA** 460 to whole dollars. **FORM** 10/1/2014 36 of Page 71 10/18/2014 through NAME OF FILER I.D. NUMBER Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649 Organizations for Sheila Kuehl for 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. MBR member communications RAD radio airtime and production costs MTG meetings and appearances RFD returned contributions CNS campaign consultants OFC office expenses SAL campaign workers' salaries CTB contribution (explain nonmonetary)\* TEL t.v. or cable airtime and production costs PET petition circulating CVC civic donations PHO phone banks TRC candidate travel, lodging, and meals FIL candidate filing/ballot fees POL polling and survey research TRS staff/spouse travel, lodging, and meals FND fundraising events IND independent expenditure POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor PRO professional services (legal, accounting) VOT voter registration LEG legal defense WEB information technology costs (internet, e-mail) PRT print ads LIT campaign literature and mailings (b) (d) NAME AND ADDRESS OF CREDITOR CODE OR DESCRIPTION OF **OUTSTANDING BALANCE** AMOUNT INCURRED AMOUNT PAID THIS OUTSTANDING PAYMENT BEGINNING OF THIS THIS PERIOD (IF COMMITTEE, ALSO ENTER I.D. NUMBER) PERIOD BALANCE AT CLOSE PERIOD OF THIS PERIOD (ALSO REPORT ON E) The Strategy Group, Inc. IND, LIT, Sheila \$6,567.87 \$0.00 \$6,567.87 \$0.00 Kuehl, Support The Strategy Group, Inc. IND, LIT, Sheila \$41,128.81 \$0.00 \$41,128.81 \$0.00 Kuehl, Support The Strategy Group, Inc. IND, POS, Sheila \$34,707.69 \$0.00 \$34,707.69 \$0.00 Kuehl, Support \*Payments that are contributions or independent expenditures must also be SUBTOTALS \$82,404.37 \$0.00 \$82,404.37 \$0.00 summarized on Schedule D. Schedule F Summary 1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for **INCURRED TOTALS** \$287,148.35 accrued expenses of \$100 or more, plus total uniternized payments on accrued expenses under \$100.) 2. Total accrued expenses paid this period, (Include all Schedule F, Column (c) subtotals for payments on **PAID TOTALS** \$278,278.28 accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) 3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here NET \$8,870.07 and on the Summary Page, Column A, Line 9.) (May be a negative number)

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

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

SCHEDULE F

Statement covers period CALIFORNIA **FORM** 10/1/2014 37 Page 10/18/2014 through I.D. NUMBER

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

1371649

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

CMP campaign paraphernalla/misc. CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations FIL candidate filing/ballot fees FND fundraising events

LEG legal defense LIT campaign literature and mailings

IND Independent expenditure

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

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)

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
The Strategy Group, Inc.	IND, LIT, Sheila Kuehl, Support	\$0.00	\$41,128.81	\$0.00	\$41,128.81
The Strategy Group, Inc.	IND, POS, Sheila Kuehl, Support	\$0.00	\$34,707.69	\$0.00	\$34,707.69
The Strategy Group, Inc.	IND, LIT, Sheila Kuehl, Support	\$0.00	\$41,128.81	\$0.00	\$41,128.81
*Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$0.00	\$116,965.31	\$0.00	\$116,965.31
Schedule F Summarv			-		
Total accrued expenses incurred this period. (include a accrued expenses of \$100 or more, plus total unitemized.)			IN	CURRED TOTALS	\$287,148.35
2. Total accrued expenses paid this period. (include all S accrued expenses of \$100 or more, plus total unitemized				PAID TOTALS	\$278,278.28
3. Net change this period. (Subtract Line 2 from Line 1. E and on the Summary Page, Column A, Line 9.)				NET (M	\$8,870.07 ay be a negative number)

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

SCHEDULE F Statement covers period

CALIFORNIA **FORM** 

Page 38 of 71

10/1/2014 10/18/2014

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER 1371649

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)\*

CVC civic donations FIL candidate filing/ballot fees FND fundraising events

IND Independent expenditure

LEG legal defense

LIT 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

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)

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
The Strategy Group, Inc.	IND, POS, Sheila Kuehl, Support	\$0.00	\$34,707.69	\$0.00	\$34,707.69
The Strategy Group, Inc.	IND, LIT, Sheila Kuehl, Support	\$0.00	\$17,613.26	\$0.00	\$17,613.26
The Strategy Group, Inc.	IND, POS, Sheila Kuehl, Support	\$0.00	\$11,098.60	\$0.00	\$11,098.60
*Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$0.00	\$63,419.55	\$0.00	\$63,419.55
Schedule F Summarv  1. Total accrued expenses incurred this period. (include a accrued expenses of \$100 or more, plus total unitemized  2. Total accrued expenses paid this period. (Include all S accrued expenses of \$100 or more, plus total unitemized  3. Net change this period. (Subtract Line 2 from Line 1. E and on the Summary Page, Column A, Line 9.)	payments on accrued expenses und chedule F, Column (c) subtotals for p payments on accrued expenses und nter the difference here	payments on lier \$100.)		CURRED TOTALS PAID TOTALS NET	\$287,148.35 \$278,278.28 \$8,870.07

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

(a)

SCHEDULE F

(d)

Statement covers period **CALIFORNIA FORM** 10/1/2014 from 39 Page 10/18/2014 through I.D. NUMBER

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

1371649

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)\* CVC civic donations

FIL candidate filling/ballot fees FND fundralsing events

IND independent expenditure LEG legal defense

LIT 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

RFD returned contributions

SAL campaign workers' salaries

TEL tv. or cable airlime 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

(b)

WEB Information technology costs (Internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
The Strategy Group, Inc.	IND, LIT, Sheila Kuehl, Support	\$0.00	\$7,847.71	\$0.00	\$7,847.71
The Strategy Group, Inc.	IND, POS, Sheila Kuehl, Support	\$0.00	\$4,814.26	\$0.00	\$4,814.26
The Strategy Group, Inc.	IND, LIT, Sheila Kuehl, Support	\$0.00	\$7,847.71	\$0.00	\$7,847.71
*Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$0.00	\$20,509.68	\$0.00	\$20,509.68
Schedule F Summarv					
Total accrued expenses incurred this period. (Include a accrued expenses of \$100 or more, plus total unitemized.)			IN	CURRED TOTALS	\$287,148.35
Total accrued expenses paid this period. (Include all Seaccrued expenses of \$100 or more, plus total unitemized				PAID TOTALS	\$278,278.28
Net change this period. (Subtract Line 2 from Line 1. E and on the Summary Page, Column A, Line 9.)				NET (M	\$8,870.07 ay be a negative number)

Organizations for Sheila Kuehl for Supervisor 2014

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULÉ F

Statement covers period CALIFORNIA
FORM

Page 40 of 71

| from 10/1/2014 | through 10/18/2014

NAME OF FILER
Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649

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)\*

CVC civic donations
FIL candidate filing/ballot fees

FND fundraising events IND independent expenditure

LEG legal defense
LIT 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

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)

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
The Strategy Group, Inc.	IND, POS, Sheila Kuehl, Support	\$0.00	\$4,814.26	\$0.00	\$4,814.26
The Strategy Group, Inc.	IND, LIT, Sheila Kuehl, Support	\$0.00	\$41,128.81	\$0.00	\$41,128.81
The Strategy Group, Inc.	IND, POS, Sheila Kuehl, Support	\$0.00	\$34,707.69	\$0.00	\$34,707.69
*Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$0.00	\$80,650.76	\$0.00	\$80,650.76
Schedule F Summarv  1. Total accrued expenses incurred this period. (Include a accrued expenses of \$100 or more, plus total unitemized  2. Total accrued expenses paid this period. (Include all Scaccrued expenses of \$100 or more, plus total unitemized  3. Net change this period. (Subtract Line 2 from Line 1. E	payments on accrued expenses und chedule F, Column (c) subtotals for p payments on accrued expenses und nter the difference here	er \$100.) payments on ler \$100.)		CURRED TOTALS PAID TOTALS	\$287,148.35 \$278,278.28 \$8,870.07
and on the Summary Page, Column A, Line 9.)					viay be a negative number)

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

SCHEDULE F

Statement covers period **CALIFORNIA FORM** 10/1/2014 from 41 of Page 10/18/2014 through I.D. NUMBER

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

1371649

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)\* CVC civic donations FIL candidate filing/ballot fees FND fundraising events

IND independent expenditure LEG legal defense

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). DDT print ada

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)

Lili campaign literature and mailings	PRI print ads		ANER INIDITIE	VVEB information technology costs (Internet, e-mail)			
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD		
Three Point Media, LLC	IND, TEL, Sheila Kuehl, Support	\$70,630.32	\$0.00	\$47,086.88	\$23,543.44		
Three Point Media, LLC	IND, TEL, Sheila Kuehl, Support	\$0.00	\$5,603.05	\$0.00	\$5,603.05		

*Payments that are contributions or independent expenditures must also be summerized on Schedule D.	SUBTOTALS	\$70,630.32	\$5,603.05	\$47,086.88	\$29,146.49
Schedule F Summarv					
1. Total accrued expenses incurred this period. (Include all Schedule accrued expenses of \$100 or more, plus total unitemized payments		00.)	INCU	RRED TOTALS	\$287,148.35
2. Total accrued expenses paid this period. (Include all Schedule F, accrued expenses of \$100 or more, plus total unitemized payments				PAID TOTALS	\$278,278.28
3. Net change this period. (Subtract Line 2 from Line 1. Enter the diff and on the Summary Page, Column A, Line 9.)				NET	\$8,870.07

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

Statement covers period 10/1/2014 through 10/18/2014

CALIFORNIA **FORM** Page 42 **of** 71

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, 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.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

FIL candidate filling/ballot fees

FND fundralsing events

IND independent expenditure

LEG legal defense

LIT 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)

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

TEL 1.v. or cable airtime and production costs

TRC candidate travel, iodging, 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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Asendia	IND	POS	\$1,172.58
Asendia	IND	POS	\$3,876.93
Asendia	IND	POS	\$1,172.58
Asendia	IND	POS	\$1,749.26

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period

CALIFORNIA FORM

460

from 10/1/2014 through 10/18/2014

Page 43 of 7

NAME OF FILER

Ocal Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers
Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, Inc.

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

CMP campaion paraphemalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure

LEG legal defense

LIT 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)

DDT post set

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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Asendia	IND	POS	\$1,172.58
Asendia	IND	POS	\$3,876.93
Asendia	IND	POS	\$1,749.26
Asendia	IND	POS	\$1,749.26

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

from 10/1/2014 through 10/18/2014

Statement covers period

CALIFORNIA FORM 460
Page 44 of 71

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers

1.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, Inc.

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

CMP campaign paraphemalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure

LEG legal defense

LIT 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)

DDT neint ada

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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Asendia	IND	POS	\$1,172.58
Asendia	IND	POS	\$3,876.93
Asendia	IND	POS	\$1,172.58
Asendia	IND	POS	\$1,749.26

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

Statement covers period from 10/1/2014 through 10/18/2014

CALIFORNIA 460
FORM
Page 45 of 71

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kunhl for Supervisor 2014

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, 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.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure

LEG legal defense

LiT 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

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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Asendia	IND	POS	\$3,876.93
Asendia	IND	POS	\$3,876.93
Asendia	IND	POS	\$1,172.58
BridgeAmerica, Inc.	IND	LIT	\$352.00

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

10/1/2014 through 10/18/2014

Statement covers period

CALIFORNIA **FORM** 46 **of** Page

	AME OF FILE	ï
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Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, 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.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure

LEG legal defense

LIT 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

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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
BridgeAmerica, Inc.	IND	LIT	\$352.00
BridgeAmerica, Inc.	IND	LIT	\$352.00
BridgeAmerica, Inc.	IND	LIT	\$352.00
BridgeAmerica, Inc.	IND	LIT	\$352.00

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

10/1/2014 10/18/2014

Statement covers period

CALIFORNIA **FORM** Page 47 of

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, 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.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

FIL candidate filing/ballot fees

FND fundralsing events

IND independent expenditure

LEG legal defense LIT campaign literature and mallings 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)

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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
BridgeAmerica, Inc.	IND	LIT	\$352.00
Continental Colorcraft	IND	LIT	\$2,841.70
Continental Colorcraft	IND	LIT	\$13,987. 60
Continental Colorcraft	IND	LIT	\$2,841.70

Type or print in Ink.

Amounts may be rounded to whole dollars.

Statement covers period from  $\frac{10/1/2014}{\text{through}}$   $\frac{10/18/2014}{\text{through}}$ 

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NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers
Organizations for Sheila Kuehl for Supervisor 2014

LD. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, 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.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure

LEG legal defense

LIT 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

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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Continental Colorcraft	IND	LIT	\$4,593.60
Continental Colorcraft	IND	LIT	\$2,841.70
Continental Colorcraft	IND	LIT	\$14,227. 40
Continental Colorcraft	IND	LIT	\$4,593.60

Type or print in lnk.

Amounts may be rounded to whole dollars.

from 10/1/2014 through 10/18/2014

Statement covers period

CALIFORNIA 460
FORM of 71

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kushl for Supervisor 2014

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, 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.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure

LEG legal defense

LIT campaign literature and mailings

MBR member communications

MTG meetings and appearances

OFC office expenses

PET petition circulating

PHO phone banks

FITO priorie parks

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

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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Continental Colorcraft	IND	LIT	\$4,593.60
Continental Colorcraft	IND	LIT	\$2,841.70
Continental Colorcraft	IND	LIT	\$13,987. 60
Continental Colorcraft	IND	LIT	\$2,841.70

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

10/1/2014 through 10/18/2014

Statement covers period

**CALIFORNIA FORM** Page 50 of

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, 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.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure

LEG legal defense

LIT 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)

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, lodoing, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Continental Colorcraft	IND	LIT	\$4,593.60
Continental Colorcraft	IND	LIT	\$13,987. 60
Continental Colorcraft	IND	LIT	\$13,987. 60
Continental Colorcraft	IND	LIT	\$3,541.91

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

10/1/2014 through 10/18/2014

Statement covers period

CALIFORNIA **FORM** Page 51 **of** 71

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, 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.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure

LEG legal defense

LIT 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

RFD returned contributions

SAL campaion 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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Fortified Design	IND	LIT	\$1,056.00
Fortified Design	IND	LIT	\$1,056.00
Fortified Design	IND	LIT	\$1,056.00
Fortified Design	IND	LIT	\$1,056.00

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

Statement covers period

**CALIFORNIA FORM** 

10/1/2014 10/18/2014

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NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, Inc.

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

CMP campaign paraphemalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

FIL candidate filing/ballot fees

FND fundralsing events

IND independent expenditure

LEG legal defense

LIT 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)

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, locging, 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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Fortified Design	IND	LIT	\$1,056.00
Fortified Design	IND	LIT	\$1,056.00
Fortified Design	IND	LIT	\$1,056.00
Fortified Design	IND	LIT	\$1,056.00

Type or print in ink.

Amounts may be rounded to whole dollars.

from 10/1/2014 through 10/18/2014

Statement covers period

CALIFORNIA FORM Page 53 of 71

NAME OF FILER

local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, Inc.

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

CMP campaign parachemalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

FiL candidate filing/ballot fees

FND fundralsing events

IND independent expenditure

LEG legal defense

LIT campaign literature and mallings

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

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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Fortified Design	IND	LIT	\$1,056.00
Fortified Design	IND	LIT	\$1,056.00
Fortified Design	IND	LIT	\$1,056.00
HP Associates	IND	LIT	\$1,056.00

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

from 10/1/2014 through 10/18/2014

Statement covers period

CALIFORNIA FORM FORM 54 of 71

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers
Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, Inc.

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

CMP campaign paraphernalla/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure

LEG legal defense

LIT 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

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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
HP Associates	IND	LIT	\$1,056.00
HP Associates	IND	LIT	\$1,056.00
HP Associates	IND	LIT	\$1,056.00
Political Data, Inc.	IND	Voter Data	\$403.89

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

from 10/1/2014 through 10/18/2014

Statement covers period

CALIFORNIA 460
FORM
Page 55 of 71

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, Inc.

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

CMP campaign paraphernalia/mlsc.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure

LEG legal defense

LIT campaign literature and mailings

MBR member communications

MTG meetings and appearances

mio moomige and ap

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

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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Political Data, Inc.	IND	Voter Data	\$544.64
Political Data, Inc.	IND	Voter Data	\$403.89
Political Data, Inc.	IND	Voter Data	\$368.49
Political Data, Inc.	IND	Voter Data	\$403.89

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

Statement covers period **CALIFORNIA FORM** 10/1/2014 Page 56 **of** 71 10/18/2014 I.D. NUMBER

NAME OF FILER Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649 Organizations for Sheila Kuehl for Supervisor 2014 NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, 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. CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure

LEG legal defense

LIT 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

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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Political Data, Inc.	IND	Voter Data	\$544.64
Political Data, Inc.	IND	Voter Data	\$368.49
Political Data, Inc.	IND	Voter Data	\$368.49
Political Data, Inc.	IND	Voter Data	\$403.89

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

from 10/1/2014 through 10/18/2014

Statement covers period

FORM FAGE 57 of 71

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers
Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, 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.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC clyic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure

LEG legal defense

LIT 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

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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Political Data, Inc.	IND	Voter Data	\$544.64
Political Data, Inc.	IND	Voter Data	\$403.89
Political Data, Inc.	IND	Voter Data	\$368.49
Political Data, Inc.	IND	Voter Data	\$544.64

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

10/1/2014 through 10/18/2014

Statement covers period

CALIFORNIA **FORM** 58 **of** Page

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, 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.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND Independent expenditure

LEG legal defense

LIT 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

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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Political Data, Inc.	IND	Voter Data	\$544.64
Political Data, Inc.	IND	Voter Data	\$403.89
United States Postal Service	IND	POS	\$3,641.68
United States Postal Service	IND	POS	\$30,830. 76

Type or print in ink.

Amounts may be rounded to whole dollars.

from 10/1/2014 through 10/18/2014

Statement covers period

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers
Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, Inc.

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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

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LEG legal defense

LIT 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)

DDT ----

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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
United States Postal Service	IND	POS	\$3,641.68
United States Postal Service	IND	POS	\$9,349.26
United States Postal Service	IND	POS	\$3,641.68
United States Postal Service	IND	POS	\$30,830. 76

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

10/1/2014 10/18/2014

Statement covers period

CALIFORNIA **FORM** Page 60 of 71

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Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

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

CMP campaign paraphemalia/misc.

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IND independent expenditure

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PRT print ads

RAD radio airtime and production costs

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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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
United States Postal Service	IND	POS	\$9,349.26
United States Postal Service	IND	POS	\$9,349.26
United States Postal Service	IND	POS	\$3,641.68
United States Postal Service	IND	POS	\$30,830. 76

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

10/1/2014 from 10/18/2014 through

Statement covers period

CALIFORNIA FORM Page 61 71

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, 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.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

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TRS staff/spouse travel, lodging, and meals

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TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB Information technology costs (Internet, e-mail)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
United States Postal Service	IND	POS	\$3,641.68
United States Postal Service	IND	POS	\$9,349.26
United States Postal Service	IND	POS	\$30,830. 76
United States Postal Service	IND	POS	\$30,830. 76

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

SCHEDULE G

**CALIFORNIA FORM** 

Page 62 **of** 71

10/1/2014 10/18/2014

Statement covers period

I.D. NUMBER Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649

Organizations for Sheila Kuehl for Supervisor 2014 NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, 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.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

NAME OF FILER

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure

LEG legal defense

LIT campaign literature and mailings

MBR member communications

MTG meetings and appearances

OFC office expenses

PET petition circulating

PHO phone banks

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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)

\*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
United States Postal Service	IND	POS		\$3,641.68
Attach additional information on appropriately labeled continuation sheets.			TOTAL	\$377,693.22

<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.

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 856/ASK-FPPC (856/275-3772)

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

10/1/2014 through 10/18/2014

Statement covers period

CALIFORNIA FORM Page 63 of 71

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Canal Partners Media LLC

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)\*

CVC civic donations

FIL candidate filing/ballot fees

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IND Independent expenditure

LEG legal defense

LIT campaign literature and mailings

MBR member communications

MTG meetings and appearances

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PET petition circulating

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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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
KABC - TV	IND	TEL	\$64,260. 00
KABC - TV	IND	TEL	\$62,815. 00
KCAL - TV	IND	TEL	\$5,440.00
KCAL - TV	IND	TEL	\$5,440.00

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

10/1/2014 through 10/18/2014

Statement covers period

CALIFORNIA **FORM** 64 **of** Page 71

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Knehl for Supervisor 2014

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Canal Partners Media LLC

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)\*

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RFD returned contributions

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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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
KCBS - TV	IND	TEL	\$29,580. 00
KCBS - TV	IND	TEL	\$30,770. 00
KNBC - TV	IND	TEL	\$28,815. 00
KNBC - TV	IND	TEL	\$30,175. 00

Type or print in ink.

Amounts may be rounded to whole dollars.

from 10/1/2014 through 10/18/2014

Statement covers period

CALIFORNIA FORM FORM 65 of 71

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Canal Partners Media LLC

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CMP campaign paraphemalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

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IND independent expenditure

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LIT campaign literature and mailings

MBR member communications

MTG meetings and appearances

OFC office expenses

PET petition circulating

PHO phone banks

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POS postage, delivery and messenger services

PRO professional services (legal, accounting)

PRT print add

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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
KTLA - TV	IND	TEL	\$14,237. 50
KTLA - TV	IND	TEL	\$14,237. 50
KTTV - TV	IND	TEL	\$6,375.00
KTTV - TV	IND	TEL	\$6,375.00

Type or print in ink.

Amounts may be rounded to whole dollars.

from 10/1/2014 through 10/18/2014

Statement covers period

CALIFORNIA FORM Page 66 of 71

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers
Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

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CMP campaign paraphernalia/misc.

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MBR member communications

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OFC office expenses

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POS postage, delivery and messenger services

PRO professional services (legal, accounting)

PRT print ad

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, todging, 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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
NCC - Cable TV System	IND	TEL	\$114,107. 40
NCC - Cable TV System	IND	TEL	\$114,107. 40
Three Point Media, LLC	IND	TEL	\$7,560.00
Three Point Media, LLC	IND	TEL	\$640.00

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

Statement covers period

from 10/1/2014 through 10/18/2014 CALIFORNIA 460
FORM
Page 67 of 71

NAME OF FILI
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Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers
Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Canal Partners Media LLC

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

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CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

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FND fundralsing events

IND independent expenditure

LEG legal defense

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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)

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RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

TEL tv. 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-maji)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Three Point Media, LLC	IND	TEL	\$3,480.00
Three Point Media, LLC	IND	TEL	\$3,390.00
Three Point Media, LLC	IND	TEL	\$1,675.00
Three Point Media, LLC	IND	TEL	\$750.00

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

Statement covers period CALIFORNIA **FORM** 10/1/2014 Page 68 **of** 71 10/18/2014 I.D. NUMBER

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Canal Partners Media LLC

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

CMP campaign paraphernalia/m. c.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure

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MBR member communications

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RAD radio airtime and production costs

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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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Three Point Media, LLC	IND	TEL	\$13,424. 40
Three Point Media, LLC	IND	TEL	\$13,424. 40
Three Point Media, LLC	IND	TEL	\$1,579.34
Three Point Media, LLC	IND	TEL	\$185.80

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

from 10/1/2014 through 10/18/2014

Statement covers period

CALIFORNIA FORM			460
Page	69	of	71

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers
Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Canal Partners Media LLC

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CMP campaign paraphernalla/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)\*

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PRO professional services (legal, accounting)

DDT adatase

RAD radio airtime and production costs

RFD returned contributions

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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)

\*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 O	R DESCRIPTION OF PAYMENT	AMOUNT PAID
Three Point Media, LLC	IND	TEL	\$21.86
Three Point Media, LLC	IND	TEL	\$2.57
Three Point Media, LLC	IND	TEL	\$0.30
Three Point Media, LLC	IND	TEL	\$0.04
Attach additional information on appropriately labeled continuation shee	ets.	TOTAL*	\$572,868.52

\* 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.

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

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

SCHEDULE G

CALIFORNIA **FORM** 

10/1/2014 10/18/2014 through

Statement covers period

Page 70 of 71

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014

I.D. NUMBER 1371649

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Three Point Media, LLC

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CMP campaign paraphernalia/misc.

CNS campaign consultants

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CVC civic donations

FIL candidate filing/ballot fees

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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)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OF	DESCRIPTION OF PAYMENT	AMOUNT PAID
Baker Sound Studios, Inc.	IND	TEL	\$374.80
Extreme Reach	IND	TEL	\$570.00
Shine Creative, LLC	IND	TEL	\$2,500.00
Talent Paymaster	IND	TEL	\$2,158.25
Attach additional information on appropriately labeled continuation sheets.		TOTAL*	\$5,603.05

<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 I			
Miscellaneous	Increases	to	Cash

Type or print in ink.

SCHEDULE I

Miscellane	ous Increases to Cash	Amounts may be rounded to whole dollars.	Statement covers period	FORM 460 Page 71 of 71
	te We Trust for our Communities - A Coalition of Working Me for Sheila Kuehl for Supervisor 2014	n and Women, Nurses, Teachers, Firefighters	and Public Safety Officers	I.D. NUMBER 1371649
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTI	ON OF RECEIPT	AMOUNT OF INCREASE TO CASH
10/09/2014	GroundWorks Campaigns, Inc.	Refund		\$50,000.00

Attach additional information on appropriately labeled continuation sheets.	STOTAL	\$50,000.00
Schedule I Summary		
1. Itemized increases to cash this period.		\$50,000.00
2. Unitemized increases to cash of under \$100 this period	, <del></del>	\$0.00
3. Total of all Interest received this period on loans made to others. (Schedule H, Column (e).)		\$0.00
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)	******	\$50,000.00