Recipient Committee Campaign Statement Cover Page Government Code Sections 84200-84216.5)			CITY CL		FORNIA 460
	Statement covers period from01/01/2016	Date of election if applicable: (Month, Day, Year)	16 AUG -1	AN 10: <b>7-39e</b>	1 of 17
SEE INSTRUCTIONS ON REVERSE	through06/30/2016	11/08/2016	CITY AFGOST	A MESA	
1. Type of Recipient Committee: All Committees - Co	omplete Parts 1, 2, 3, and 4.	2. Type of Statement:	Constituting of Constitution of the State of Sta	- Special Control of the Special Control of t	
<ul> <li>State Candidate Election Committee</li> <li>Recall</li> <li>(Also Complete Part 5)</li> <li>General Purpose Committee</li> <li>Sponsored</li> <li>Small Contributor Committee</li> </ul>	Primarily Formed Ballot Measure Committee Controlled Sponsored Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee Also Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 To	ermination)	Quarterly Stater   Special Odd-Ye   Supplemental P   Statement - Atta	ar Report reelection
5. Committee information	D. NUMBER 1385647	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)	1303041	NAME OF TREASURER			
Mercurio for City Council 2016		Lysa Ray			
		MAILING ADDRESS	***		
		603 E Alton Ave STE G	}		
STREET ADDRESS (NO P.O. BOX) 1835 Newport Blvd #A109-219		CITY	STATE	ZIP CODE	AREA CODE/PHONE
	2005	Santa Ana	CA	92705	(714)540-2295
	•	NAME OF ASSISTANT TREASUR	RER, IF ANY		
Costa Mesa CA 9263  MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. I		MAILING ADDRESS			
603 E Alton Ave STE G		WAILING ADDICESS			
CITY STATE ZIP CO	DDE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
Santa Ana CA 9270	05		7.7.12	0052	THEIR GODEN HONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDR	RESS	<del></del>	····
lysaray.campaignservices@gmail.com					
I. Verification	· · · · · · · · · · · · · · · · · · ·				
I have used all reasonable diligence in preparing and reviewin	g this statement and to the best of my kn	owledge the information contained her	rein and in the attached s	schedules is true a	and complete. I certify
under penalty of perjury under the laws of the State of Californ	a that the foregoing is true and correct.		1		
Executed on07/20/2016	Ву				
Date		Signature of Treas Assistant	Treasurer		
Executed on	BySignature of Co	ontrolling Officeholder, Candidate, State Measure Pro	proment or Responsible Officer of S	Propert	
	//	San Colored Co	Action of treaton ising Chire.	porisor	
Executed on	Ву	Signature of Controlling Officeholder, Candidate, S	tate Measure Proponent	——————————————————————————————————————	
Executed on	Ву				
Date	-J	Signature of Controlling Officeholder, Candidate, St	tate Measure Proponent	<del></del>	

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

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

COVER PAGE - PART 2					
CALIF FC	ORNIA RM	460			
Page _	2 (	of <u>17</u>			

					tee	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
Julie Mercurio						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION	ON AND DISTRICT NUMBER IF APPLICABLE)	)	BALLOT NO. OR LETTER	JURISDICTION		SUPPORT
City Council Member: City of Cost	ca Mesa	•				OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND	STREET) CITY STATE	ZIP			<u> </u>	
256 Esther St	Costa Mesa CA	92627	Identify the controlling office	ceholder, candidate, or	r state measure p	proponent, if ar
			NAME OF OFFICEHOLDER, CAND	DIDATE, OR PROPONENT		
Related Committees Not included	in this Statement: List any comm	nittees				
not included in this statement that are cont	rolled by you or are primarily formed to		OFFICE SOUGHT OR HELD		DISTRICT NO. II	F ANY
contributions or make expenditures on beh	alf of your candidacy.					
COMMITTEE NAME	1.D. NUMBER		<del></del>			- <u>,  -</u>
NAME OF TREASURER	CONTROLLED COMMITTEE	7.	. Primarily Formed Cand	lidate/Officeholder	Committee Lis	st names of
NAME OF TREASURER	CONTROLLED COMMITTEE	<u> 7</u>	<ul> <li>Primarily Formed Cand officeholder(s) or candidate(s)</li> </ul>	idate/Officeholder for which this committe	Committee Lis	st names of ed.
	CONTROLLED COMMITTEE  YES NO ESS (NO P.O. BOX)	7. ———	Primarily Formed Cand officeholder(s) or candidate(s)  NAME OF OFFICEHOLDER OR CA	for which this committe	Committee Lise is primarily forme	ed.
	☐ YES ☐ NO	<b>7</b> .	officeholder(s) or candidate(s)	for which this committe	e is primarily form	ed.
COMMITTEE ADDRESS STREET ADDR	☐ YES ☐ NO		officeholder(s) or candidate(s)  NAME OF OFFICEHOLDER OR CA	for which this committe  ANDIDATE OFFICE S	e is primarily forme	ed.
COMMITTEE ADDRESS STREET ADDR	YES NO P.O. BOX)		officeholder(s) or candidate(s)	for which this committe  ANDIDATE OFFICE S	e is primarily form	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDR	YES NO NO ESS (NO P.O. BOX)  ATE ZIP CODE AREA CODE/		officeholder(s) or candidate(s)  NAME OF OFFICEHOLDER OR CA	for which this committe  ANDIDATE OFFICE S	e is primarily forme	ed.
COMMITTEE ADDRESS STREET ADDRE	YES NO P.O. BOX)		officeholder(s) or candidate(s)  NAME OF OFFICEHOLDER OR CA	ANDIDATE OFFICE S  ANDIDATE OFFICE S	e is primarily forme	SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRE	YES NO NO ESS (NO P.O. BOX)  ATE ZIP CODE AREA CODE/		NAME OF OFFICEHOLDER OR CA	ANDIDATE OFFICE S  ANDIDATE OFFICE S	e is primarily forme	SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRE	YES NO NO ESS (NO P.O. BOX)  ATE ZIP CODE AREA CODE/	/PHONE	NAME OF OFFICEHOLDER OR CA	ANDIDATE OFFICE S  ANDIDATE OFFICE S  ANDIDATE OFFICE S	COUGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRI CITY ST  COMMITTEE NAME  NAME OF TREASURER	YES NO ESS (NO P.O. BOX)  ATE ZIP CODE AREA CODE/  I.D. NUMBER  CONTROLLED COMMITTEE  YES NO	/PHONE	NAME OF OFFICEHOLDER OR CA	ANDIDATE OFFICE S  ANDIDATE OFFICE S  ANDIDATE OFFICE S	e is primarily forme	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRI CITY ST  COMMITTEE NAME  NAME OF TREASURER	YES NO ESS (NO P.O. BOX)  ATE ZIP CODE AREA CODE/  I.D. NUMBER  CONTROLLED COMMITTEE	/PHONE	NAME OF OFFICEHOLDER OR CA	ANDIDATE OFFICE S  ANDIDATE OFFICE S  ANDIDATE OFFICE S	COUGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS  CITY ST  COMMITTEE NAME  NAME OF TREASURER  COMMITTEE ADDRESS STREET ADDRESS	YES NO ESS (NO P.O. BOX)  ATE ZIP CODE AREA CODE/  I.D. NUMBER  CONTROLLED COMMITTEE  YES NO	PHONE  E?	NAME OF OFFICEHOLDER OR CA	ANDIDATE OFFICE S  ANDIDATE OFFICE S  ANDIDATE OFFICE S	COUGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE

### Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

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->1	IRARA	ARY	

CALIFORNIA 460

Statement covers period

from \_

01/01/2016

SEE INSTRUCTIONS ON REVERSE					through <sub>-</sub>	06/30/2016	Page3 of17
NAME OF FILER	_	<del> </del>			-		I.D. NUMBER
Mercurio for City Council 2016							1385647
Contributions Received	. (	Column A TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)		Column E CALENDAR YEA TOTAL TO DATE	AR	Running in Both th	mary for Candidates e State Primary and
1. Monetary Contributions	\$	11,206.01	\$	11,20	06.01	General Elections	
2. Loans Received Schedule B, Line 3		9,000.00		9,00	00.00	1/1 th	1rough 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	20,206.01	\$	20,20	06.01	20. Contributions Received \$	\$
4. Nonmonetary Contributions Schedule C, Line 3		. 270.00		2	70.00	21. Expenditures	<u> </u>
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	20,476.01	\$	20,4	76.01	Made \$	<b>\$</b>
Expenditures Made						Expenditure Limit S	Summary for State
6. Payments Made Schedule E, Line 4	\$	226.03	\$	2	26.03	Candidates	, , , , , , , , , , , , , , , , , , ,
7. Loans Made Schedule H, Line 3		0.00			0.00	22 C	F
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7		226.03	\$	22	26.03		e Expenditures Made* Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)		0.00			0.00	Date of Election	Total to Date
10. Nonmonetary Adjustment		270.00		2	70.00	(mm/dd/yy)	
11. TOTAL EXPENDITURES MADE	\$	496.03	\$	49	96.03		_ \$
Current Cash Statement							_ \$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	0.00	To	o calculate Column	n B. add		
13. Cash Receipts Column A, Line 3 above		20,206.01	ar	mounts in Column	A to the		
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	orresponding amor om Column B of ye	our last	*Amounts in this section mareported in Column B.	nay be different from amounts
15. Cash Payments		226.03		eport. Some amou folumn A may be no		reported in Coldina B.	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	19,979.98	fic	gures that should I	be i		
If this is a termination statement, Line 16 must be zero.			pε	ubtracted from pre eriod amounts. If t	this is		
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	fo	ne first report being or this calendar yea arry over the amou	ar, only		
Cash Equivalents and Outstanding Debts	•		fro	om Lines 2, 7, and			
18. Cash Equivalents	\$	0.00	al	ny).			
19. Outstanding Debts	\$	9,000.00					
			ı				

Schedule A Monetary Contributions Received			ts may be rounded	Statement cov	ers period	SCHEDULE A			
	monetary contributions received		whole dollars.	from01/01/2	C/A	LIFORNI FORM	<sup>A</sup> 460		
SEE INSTRUCTION	ONS ON REVERSE			through <u>06/30/2</u>	016 Pa	je <u>4</u>	_ of17		
NAME OF FILER				<del></del>	I.D.	NUMBER			
Mercurio fo	r City Council 2016				136	5647			
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)		R ELECTION TO DATE REQUIRED)		
06/30/2016	Toby Baran	☑IND □COM □OTH □PTY □SCC	Retired	100.00	100.0	0 G2016	\$100.00		
06/30/2016	Lino Baratto	IND  COM  OTH  PTY  SCC	President Evans Roofing Co	1,000.00	1,000.0	0 G2016	\$1,000.00		
06/30/2016	Rudy Bojorquez	IND □ COM □ OTH □ PTY □ SCC	Sales & Finance Manager Tuttle Click Auto Group	100.00	100.0	0 G2016	\$100.00		
06/24/2016	Chris Byrne	⊠IND □COM □OTH □PTY □SCC	Sales Executive Structural Materials Co	100.00	11,100.0	0 G2016	\$11,100.00		
06/30/2016	Chris Byrne	⊠IND □COM □OTH □PTY □SCC	Sales Executive Structural Materials Co	2,000.00	11,100.0	0 G2016	\$11,100.00		
		7,184.18	SUBTOTALS	3,300.00					
Amount re (Include al	A Summary ceived this period – itemized monetary contributions.  Schedule A subtotals.)			10,108.01	*Contributo IND-Indivi COM-Red	r Codes dual	nittee		
	ceived this period unitemized monetary contributions	of less than	\$100 \$	1,098.00		er (e.g., bu	siness entity)		
3. Total mone (Add Lines	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colur	mn A, Line 1.)	)TOTAL \$	11,206.01			or Committee		

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

# Schedule A (Continuation Sheet) Monetary Contributions Received Amounts may be rounded to whole dollars. Statem

	SCHEDULE A (CONT.)
Statement covers period	CALIFORNIA 460
from 01/01/2016	FORM 400
through 06/30/2016	Page5 of17

NAME OF FILER					I.D. NI	JMBER
Mercurio for	City Council 2016				1385	647
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)
05/07/2016	Rick Conlan	⊠IND □COM □OTH □PTY □SCC	General Contractor Self	100.00	120.00	G2016 \$120.0
05/19/2016	Rick Conlan	⊠IND □COM □OTH □PTY □SCC	General Contractor Self	20.00	120.00	G2016 \$120.0
06/30/2016	Robert Dickson	⊠IND □COM □OTH □PTY □SCC	Legal Latham & Watkins	249.00	249.00	G2016 \$249.0
06/30/2016	Ha Do	IND □ COM □ OTH □ PTY □ SCC	Manager Kingston Technology	100.00	100.00	G2016 \$100.0
06/30/2016	Dale Dykema	⊠IND □COM □OTH □PTY □SCC	Chairman TD Service Financial	100.00	100.00	G2016 \$100.0
			SUBTOTAL\$	569.00	164444644	

\*Contributor Codes
IND-Individual
COM-Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC-- Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received		Amounts may	be rounded [	SCHEDULE A (					
		to whole	dollars.	from01/01/	-	CALIFORNIA 460		460	
				through 06/30/	(2016	Page.	6	of <u>17</u>	
NAME OF FILER			····		•••	I.D. NL	JMBER		
Mercurio for	City Council 2016	· · · · · · · · · · · · · · · · · · ·				1385	6 <b>47</b>		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	T	ELECTION TO DATE REQUIRED)	
06/30/2016	Jim Fisler	☑IND □COM □OTH □PTY □SCC	Director Mesa Water Board	100.00	10	0.00	G2016	\$100.00	
06/24/2016	Jim Fitzpatrick	IND COM OTH PTY SCC	Owner TouchPoint Services	100.00	10	0.00	G2016	\$100.00	
06/30/2016	Julie Fowler	IND COM	Sales Manager Stearns Lending	100.00	10	0.00	G2016	\$100.00	
06/30/2016	G Constructors	□IND □COM ☑OTH □PTY □SCC		250.00	25	0.00	G2016	\$250.00	
06/30/2016	Dominique Galbo	IND COM OTH PTY SCC	Director of Sales UPS	150.00	15	0.00	G2016	\$150.00	

\*Contributor Codes
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(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

700.00

SUBTOTAL\$

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

Amounts may be rounded to whole dollars.

Statement covers period from 01/01/2016

CALIFORNIA 460

through 06/30/2016

Page 7 of 17

				through 06/30/	2016	Page.	of	<u> 17</u>
NAME OF FILER Mercurio for	City Council 2016					I.D. NU	JMBER 647	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	:AR	то	LECTION DATE QUIRED)
06/30/2016	Dominic Garcia		Owner Connected Healthworks	100.00	10	00.00	G2016	\$100.00
06/30/2016	Jason Gendron	☑IND □COM □OTH □PTY □SCC	CEO Cembrus	500.00	50	0.00	G2016	\$500.00
06/30/2016	Marc Hale	⊠IND □COM □OTH □PTY □SCC	Deputy OC Sheriff	100.00	10	00.00	G2016	\$100.00
06/30/2016	Robert Hallock	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Contractor Commercial Coatings	250.00	25	50.00	G2016	\$250.00
05/10/2016	Betty Johner	⊠IND □COM □OTH □PTY □SCC	Retired	100.00	10	00.00	G2016	\$100.00

SUBTOTAL\$

1,050.00

\*Contributor Codes

IND -- Individual

COM -- Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

SCHEDULE A (CONT.)

#### **Schedule A (Continuation Sheet)** Monetary Contributions Received Amounts may be rounded to whole dollars.

SCHEDU	LEA (CONT.)
CALIFORNIA	460

Statement covers	CALIFORNIA 160
from 01/01/20	
through 06/30/20	16 Page 8 of 17
	I.D. NUMBER
	1385647

Mercurio for City Council 2016

NAME OF FILER

					1303	]
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 PÉRIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
06/30/2016	Law Offices of Randall Longwith	□IND □COM ☑OTH □PTY □SCC		250.00	250.00	G2016 \$250.00
06/30/2016	Lee Ramos for City Council 2016 (ID# 1361842) 603 E Alton Ave Ste G Santa Ana, CA 92705	□IND  INCOM □OTH □PTY □SCC		100.00	100.00	G2016 \$100.00
06/30/2016	Lois Mercurio	☑IND □COM □OTH □PTY □SCC	Retired	200.00	200.00	G2016 \$200.00
05/06/2016	Gary Monahan		Owner Skosh Monahan's	100.00	370.00	G2016 \$370.00
06/30/2016	Gil Moran		Subject Matter Expert One Call Care Management	100.00	100.00	G2016 \$100.00
-			SUBTOTALS	750.00	866555666	

\*Contributor Codes

IND-Individual

COM - Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

	A (Continuation Sheet) Contributions Received	Amounts may to whole		Statement cover from 01/01/	2016	F	IFORNIA ORM	400
NAME OF FILER				through 06/30/	2010		9 (	of 17
	City Council 2016					1385	JMBER 647	
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	CUMULATIVETO CALENDAR Y (JAN. 1 - DEC	EAR	TO	ELECTION D DATE EQUIRED)
05/18/2016	Diana Olson	⊠IND □COM □OTH □PTY □SCC	Asset Manager Hager Pacific Properties	100.00	1	00.00	G2016	\$100.00
05/17/2016	Pilates on 17th INC 2001 Harbor Blvd Suite 103 Costa Mesa, CA 92627	□IND □COM ☑OTH □PTY □SCC		100.00	1	00.00	G2016	\$100.00
06/30/2016	Christopher Pizula	⊠IND □COM □OTH □PTY □SCC	Manager Project Dell Software	100.00	1	00.00	G2016	\$100.00
05/06/2016	Lysa Ray 603 E Alton Ave STE G Santa Ana, CA 92705	□IND □COM 図OTH □PTY □SCC	President Lysa Ray Campaign Services	100.00	1	20.00	G2016	\$120.00
06/30/2016	Tysa Ray 603 E Alton Ave STE G Santa Ana, CA 92705	□IND □COM 図OTH □PTY □SCC	President Lysa Ray Campaign Services	20.00	1	20.00	G2016	\$120.00

SUBTOTAL\$

*Contributor Codes
IND-Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

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

Amounts may be rounded

SCHEDULE A (CONT.)

Statement covers period

		to whole	dollars.	from01/01/	(2016	FORM 460		
NAME OF FILER				through 06/30/	1 69	e10	of17	
	City Council 2016					NUMBER 5647		
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 (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	T	ELECTION O DATE EQUIRED)	
06/30/2016	Louis Rice 2900 Bristol St #A-201 Costa Mesa, CA 92626	IND □ COM □ OTH □ PTY □ SCC	Chiropractor Self	100.01	100.0	1 G2016	\$100.01	
06/30/2016	James Righeimer	⊠IND □COM □OTH □PTY □SCC	Partner LMC Management Group	250.00	250.0	0 G2016	\$250.00	
05/25/2016	Louise Rose	☑IND □COM □OTH □PTY □SCC	Retired /	50.00	150.0	0 G2016	\$150.00	
06/24/2016	Louise Rose	⊠IND □COM □OTH □PTY □SCC	Retired	100.00	150.0	G2016	\$150.00	
06/30/2016	Securenx Inc	□IND □COM ☑OTH □PTY □SCC		100.00	100.0	G2016	\$100.00	
			SUBTOTAL	600.01			denis di manasan Gadi un da sa m	

\*Contributor Codes
IND-Individual
COM-Recipient Committee

M – Recipient Committee (other than PTY or SCC) H – Other (e.g., business entity

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

PTY-Political Party

SCC - Small Contributor Committee

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

Amounts may be rounded

SCHEDULE A (CONT.)

Statement covers period

мопетагу	Contributions Received	Amounts may to whole			california 460		
				through 06/30/	2016 Pag	11	of <u>17</u>
NAME OF FILER					I.D.	NUMBER	
Mercurio for	City Council 2016				138	5647	
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	ECEIVED THIS CALENDAR YEAR PERIOD (JAN. 1 - DEC. 31)		ELECTION TO DATE REQUIRED)
06/24/2016	Andrew Smith	XIND COM OTH PTY SCC	Insurance Broker AvPac Insurance Services INC	100.00	100.0	G2016	\$100.00
06/30/2016	Robert Taft Jr	⊠IND □COM □OTH □PTY □SCC	Director 420 Central	249.00	249.0	G2016	\$249.00
06/30/2016	TBR Holdings	□IND □COM 図OTH □PTY □SCC		250.00	250.0	G2016	\$250.00
06/30/2016	Dmitri Triphon	☑IND □COM □OTH □PTY □SCC	President Almaz Investments	2,000.00	2,000.0	G2016	\$2,000.00
06/30/2016	Ben Turin	☑IND □COM □OTH □PTY □SCC	Software Engineer Edwards Lifesciences	100.00	120.0	G2016	\$120.00
			SUBTOTAL	\$ 2,699.00	Jepolek 2 das Bri	4001	

\*Contributor Codes

IND-Individual

COM-Recipient Committee (other than PTY or SCC)
OTH – Other (e.g., business entity)

PTY - Political Party

SCC-Small Contributor Committee

	A (Continuation Sheet)						SCHEDULE	EA (CONT.)
Monetary	Contributions Received	Amounts may to whole		Statement covers period  from01/01/2016			FORNIA ORM	460
				through 06/30/	2016	Page_	<u>12</u> of_	17
NAME OF FILER						I.D. NU	MBER	
Mercurio for	City Council 2016	,				13856	47	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	ÆAR	PER ELI TOD (IF REQ	ATE
06/30/2016	Ben Turin	IND COM OTH SCC IND COM	Software Engineer Edwards Lifesciences	20.00		120.00	G2016	\$120.00
		SCC						
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						7.
		□IND □COM □OTH						

□ PTY

SUBTOTAL\$

*Contributor Codes
IND-Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

### Schedule B – Part 1

Amounts may be rounded

Statement covers period	CALIFORNIA	460
m01/01/2016	FORM	400

Loans Received		to whole dollars.			from01/01/2016		FORM 400	
SEE INSTRUCTIONS ON REVERSE					through06/3	0/2016	Page 13	of <u>17</u>
NAME OF FILER							I.D. NUMBER	
Mercurio for City Council 2016							1385647	THE STATE OF THE S
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IFCOMMITTEE ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIO	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Chris Byrne 5571 Ocean Terrace Huntington Beach, CA 92648	Sales Executive Structural Materials Co			PAID \$0.0 □ FORGIVEN		%	\$_9,000.00	CALENDAR YEAR \$ 11,100.00 PER ELECTION**
<sup>†</sup> ☑ IND □ COM □ OTH □ PTY □ SCC		\$	\$ 9,000.00	\$0_0	DATE DUE	\$0.00	06/30/2016 DATE INCURRED	\$ G2016 11,100.0
				PAID  S  FORGIVEN	\$	%	\$	CALENDAR YEAR  \$ PER ELECTION ***
†□ IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
				PAID  \$  FORGIVEN	s		\$	\$PER ELECTION**
†□ IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	s	DATE INCURRED	s
		SUBTOTALS \$	9,000.00\$	<b>5</b> 0.	00\$ 9,000.00	\$ 0.00	10.00 (1	
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
Loans received this period (Total Column (b) plus unitemized loans	s of less than \$100.)	••••	***************************************	\$	9,000.00	_	Contributor Codes	
<ol> <li>Loans paid or forgiven this period (Total Column (c) plus loans under \$100 (Include loans paid by a third party that</li> </ol>	) paid or forgiven.)			\$	0.00		D – Indi <b>v</b> idual DM – Recipient Co	ommittee PTY or SCC) business entity)
Net change this period. (Subtract Line Enter the net here and on the Summar	e 2 from Line 1.) y Page, Column A, Line 2.			NET \$	9,000.00 (May be a negative number)	1 00	CC – Small Contri	butor Committee
*Amounts forgiven or paid by another party also at the transfer of the transfe	must be reported on Schedule A.						FDDG 5	400 ( ) 4004

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

Schedu Nonmor	le C netary Contributions Received		Amounts may be rounded to whole dollars.		Statement covers period				CHEDULE <b>46</b> (	
SEE INSTRUC	TIONS ON REVERSE				thro	ough 06/30/201	.6	Page	14 of_	17
	for City Council 2016							I.D. NUME		
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 GOODS OR SERV		AMOUNT/ FAIR MARKET VALUE	CALEN!	ATIVE TO DATE DAR YEAR - DEC 31)	PER EI TO	LECTION DATE QUIRED)
06/30/2016	Skosh Monahens 2000 Newport Blvd Costa Mesa, CA 92627	□IND □COM ☑OTH □PTY □SCC		FND food & Dri	nk	270.00		370.00	G2016	\$370.
		□IND □COM □OTH □PTY □SCC								
		□IND □COM □OTH □PTY □SCC					<del></del>			
		□IND □COM □OTH □PTY □SCC								****
Attach ad	ditional information on appropriately labe	led continuati	ion sheets.	SUBTO	TAL \$	270.00				
1. Amount	e C Summary received this period – itemized nonmonetar all Schedule C subtotals.)	y contributions			\$	270.0	INE	ontributor Co O – Individual M – Recipien		e

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

PTY - Political Party

(other than PTY or SCC)

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

SCC - Small Contributor Committee

0.00

270.00

3. Total nonmonetary contributions received this period.

Schedule E Payments Made	Amounts may be rounded to whole dollars.				Statement covers period CALIFORNIA FORM				
SEE INSTRUCTIONS ON REVERSE				through	06/30/2016	Page	of _	17	
NAME OF FILER  Mercurio for City Council 2016			· · · · · · · · · · · · · · · · · · ·			I.D. NUMBE	R		
CODES: If one of the following codes accurately described campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  fundraising events  independent expenditure supporting/opposing others (explain)*  LEG legal defense  campaign literature and mailings	MBR member com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and POS postage, del	nmunications d appearances uses ulating s survey researcl	n senger services	RAD radio airt RFD returned SAL campaign TEL t.v. or ca TRC candidate TRS staff/spor TSF transfer I VOT voter reg	ime and production contributions n workers' salaries ble airtime and prod e travel, lodging, and use travel, lodging, a between committees	luction costs I meals and meals s of the same o		e/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE OF	₹	DESCRIPTION OF PAYM	ENT		AMOUN	T PAID	
Anedot.com PO Box 84314 Baton Rouge, LA 70884			cc Processing					12.60	
Anedot.com PO Box 84314 Baton Rouge, LA 70884		of a state of the						4.20	
Anedot.com PO Box 84314 Baton Rouge, LA 70884			cc Processing					4.16	
Payments that are contributions or independent expenditures	s must also be summ	arized on Sc	hedule D.		SU	BTOTAL\$	,	20.96	
Schedule E Summary  1. Itemized payments made this period. (Include all Schedu	le E subtotals.)					\$	19	94.79	

FPPC Form 460 (Jan/2016) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772) www.fppc.ca.gov

0.00

## Schedule F

SCHEDULE E (CONT)				
	COLUMN	N 11 F	/	CTIAN
	SIDE	74 II B		1 101 1 3

(Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.		Statement covers period  from 01/01/2016  through 06/30/2016	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER	****	······································	through 06/30/2016	Page 16 of 17
Mercurio for City Council 2016				I.D. NUMBER 1385647
CODES: If one of the following codes accurately describ  CMP campaign paraphemalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  civic donations  CVC civic donations  candidate filing/ballot fees  fundraising events  independent expenditure supporting/opposing others (explain)*  LEG legal defense  LIT campaign literature and mailings	MBR member.com MTG meetings and OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, del	munications d appearances ases lating	RAD radio airtime and production returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and pro TRC candidate travel, lodging, an staff/spouse travel, lodging,	duction costs Id meals In and meals In the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER ID. NUMBER)		CODE OR DES	CRIPTION OF PAYMENT	AMOUNT PAID
Anedot.com PO Box 84314 Baton Rouge, LA 70884		ce Processing		5.28
Anedot.com PO Box 84314 Baton Rouge, LA 70884		cc Processing		2.25

Anedot.com cc Processing 4.16 PO Box 84314 Baton Rouge, LA 70884

Anedot.com cc Processing 16.80 PO Box 84314 Baton Rouge, LA 70884

Anedot.com cc Processing 91.76 PO Box 84314 Baton Rouge, LA 70884

**SUBTOTAL \$** 

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

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

Amounts may be rounded to whole dollars.

CULEDI II		/へへいてい
SCHEDUL		I CON I.I

CALIFORNIA ACO

Statement covers period

Payments Made	to whole dollars.			from 01/01/2016	FOR	M 400
EEE INSTRUCTIONS ON REVERSE				through 06/30/2016	····	17 of 17
Mercurio for City Council 2016					I.D. NUMBE 1385647	
CODES: If one of the following codes accurately described ampaign paraphemalia/misc.  CMS campaign consultants  CMS campaign consultants  CMS contribution (explain nonmonetary)*  CVC civic donations  CMS civic donations	MBR member community meetings and office expenses petition circul phone banks POL polling and sepos postage, deli	munications Lappearances ses	services	RAD radio airtime and production returned contributions campaign workers' salaried to read candidate travel, lodging, a staff/spouse travel, lodging transfer between committee voter registration web information technology contributions.	on costs es oduction costs and meals g, and meals ees of the sam	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DES	SCRIPTION OF PAYMENT		AMOUNT PAID
nedot.com O Box 84314 aton Rouge, LA 70884	-14	cc Pro	cessing			49.43
nedot.com O Box 84314 aton Rouge, LA 70884		cc Pro	cessing			4.14
			4,,			
Payments that are contributions or independent expenditures must also	o be summarized on S	Schedule D.	77-3-7	S	UBTOTAL \$	53.58