Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)		CITY	CLERK	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE	Statement covers period	- -	25 PM 2: 19 COSTA MESA	For Official Use Only
1. Type of Recipient Committee: All Committees – Officeholder, Candidate Controlled Committee State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee	Complete Parts 1, 2, 3, and 4. Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination) Amendment (Explain below)	Special C	v Statement Odd-Year Report ental Preelection nt - Attach Form 495
3. Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTE Lee Ramos for Costa Mesa City Council 2016 STREET ADDRESS (NO P.O. BOX) 2001 Aliso Ave	I.D. NUMBER 1361842 E)	Treasurer(s) NAME OF TREASURER Lysa Ray MAILING ADDRESS 603 E Alton Ave STE G CITY Santa Ana	STATE ZIP CODE CA 92705	AREA CODE/PHONE (714)540-2295
COSTA MESA CA 92 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O 603 E Alton Ave STE G CITY STATE ZIP	CODE AREA CODE/PHONE 627 (710)510-6388 BOX CODE AREA CODE/PHONE 705	NAME OF ASSISTANT TREASURER, IF ANY MAILING ADDRESS CITY OPTIONAL: FAX / E-MAIL ADDRESS	STATE ZIP CODE	
1ee4costamesa@gmail.com/lysaray.campaignse: 4. Verification I have used all reasonable diligence in preparing and review under penalty of perjury under the laws of the State of Califor Executed on	ing this statement and to the best of my kn nia that the foregoing is true and correct. By By Signature of Co		nsible Officer of Sponsor	s true and complete. I certify
Executed on	Ву	Signature of Controlling Officeholder, Candidate, State Measure Proj	ponent	÷

FPPC Form 460 (Jan/2016)

Recipient Committee Campaign Statement Cover Page — Part 2

	COVER	PAG	E-PAR	RT 2
	ORNIA ORM	4	16	כ
Page _	2	of _	15	

NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE				
Lee Ramos							
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND D City Council Member: Costa Mesa	ISTRICT NUMBER IF APPLICABLE	Ξ)	BALLOT NO. OR LETTER	JURISDICTI	ON		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE	ZIP	Identify the controlling o	officeholder ca	indidate or state n	measure nr	ononent if ar
2001 Aliso Ave	Costa Mesa CA	92627	NAME OF OFFICEHOLDER, C.			nousure pr	oponent, ii ai
Related Committees Not Included in thing included in this statement that are controlled by contributions or make expenditures on behalf of your	you or are primarily formed to		OFFICE SOUGHT OR HELD		DIST	RICT NO. IF	ANY
COMMITTEE NAME							
COMMITTEE NAME	I.D. NUMBER						
	CONTROLLED COMMITTE	EE?	7. Primarily Formed Ca officeholder(s) or candidate	ndidate/Offic	ceholder Comm is committee is prim	ittee List	names of
NAME OF TREASURER	CONTROLLED COMMITTE	EE?	7. Primarily Formed Ca officeholder(s) or candidate	(s) for which th	ceholder Comm is committee is prim	narily formed	d.
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO	CONTROLLED COMMITTE		officeholder(s) or candidate	e(s) for which the	is committee is prim	DR HELD	SUPPORT OPPOSE
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO CITY STATE	CONTROLLED COMMITTE YES NO P.O. BOX)		officeholder(s) or candidate	R CANDIDATE	OFFICE SOUGHT O	DR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO	CONTROLLED COMMITTE YES NO P.O. BOX) ZIP CODE AREA CODE	E/PHONE	NAME OF OFFICEHOLDER OF	R CANDIDATE R CANDIDATE R CANDIDATE	OFFICE SOUGHT O	DR HELD DR HELD DR HELD	SUPPORT OPPOSE SUPPORT OPPOSE

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period CALIFORNIA FORM 09/25/2016 10/22/2016 Page __ 3 __ of __ 15 through _ I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Lee Ramos for Costa Mesa City Council 2016 1361842

Contributions Received	(FRO	Column A TOTAL THIS PERIOD MATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTALTO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions Schedule A, Line 3	\$_	12,190.00	\$_	26,187.00	
2. Loans Received Schedule B, Line 3	_	0.00	_	110.00	1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$_	12,190.00	\$_	26,297.00	20. Contributions
4. Nonmonetary Contributions Schedule C, Line 3		0.00		6,099.09	Received \$ \$ 21. Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	12,190.00	\$ _	32,396.09	Made \$ \$
Expenditures Made					Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$	5,096.72	\$_	18,837.49	Candidates
7. Loans Made Schedule H, Line 3	1/2	0.00		0.00	
3. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$_	5,096.72	\$_	18,837.49	22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)
Accrued Expenses (Unpaid Bills)Schedule F, Line 3	-	0.00		3,012.80	Date of Election Total to Date
10. Nonmonetary Adjustment	_	0.00	_	6,099.09	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$_	5,096.72	\$_	27,949.38	\$
Current Cash Statement					\$
2. Beginning Cash Balance Previous Summary Page, Line 16	\$_	5,520.68	To ca	alculate Column B, add	
13. Cash Receipts Column A, Line 3 above	1.52	12,190.00	amo	unts in Column A to the	
4. Miscellaneous Increases to Cash Schedule I, Line 4	_	0.00	from	esponding amounts Column B of your last	*Amounts in this section may be different from amounts reported in Column B.
5. Cash Payments Column A, Line 8 above		5,096.72	repor	rt. Some amounts in mn A may be negative	reported in Column B.
6. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	12,613.96	figure	es that should be	
If this is a termination statement, Line 16 must be zero.			perio	acted from previous d amounts. If this is	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2		0.00	for th	irst report being filed nis calendar year, only over the amounts	
Cash Equivalents and Outstanding Debts				Lines 2, 7, and 9 (if	
18. Cash Equivalents See instructions on reverse	\$	0.00	uny).		
See instructions on reverse					

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

Schedule A Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A

5	Statement covers period	CALIFORNIA AGO
fron	n09/25/2016	FORM 400
thro	ough _10/22/2016	Page4 of15
		I.D. NUMBER
		1361842

Lee Ramos for Costa Mesa City Council 2016

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

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 I	ELECTION DATE EQUIRED)
10/12/2016	Jaime Alefosio	IND COM OTH PTY SCC	Owner Direct Mail House	249.00	249.00	G2016	\$249.00
09/28/2016	Applied Economics, Inc. 5267 Warner Ave. #258 Huntington Beach, CA 92649	☐IND ☐COM 図OTH ☐PTY ☐SCC		249.00	249.00	G2016	\$249.00
10/12/2016	ARC Group Inc. 3334 E. Coast Hwy., Ste. 538 Corona Del Mar, CA 92625	□IND □COM ③OTH □PTY □SCC		249.00	249.00	G2016	\$249.00
10/12/2016	Burtin Realty LLC	□IND □COM ☑OTH □PTY □SCC		249.00	249.00	G2016	\$249.00
09/28/2016	California Recovery Inc 2052 Newport Blvd #6 Costa Mesa, CA 92627	□IND □COM ☑OTH □PTY □SCC		2,000.00	2,000.00	G2016	\$2,000.00
			SUBTOTAL\$	2,996.00			Fil

Schedule A Summary

	Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.)	\$ 12,190.00
2.	Amount received this period – unitemized monetary contributions of less than \$100	\$ 0.00
	Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)	\$ 12,190.00

*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

State	ment covers period	CALIF	ORN	IA	100
from	09/25/2016		RM		460
through_	10/22/2016	Page _	5	_ of_	15
		I.D. NUM	MBER		
		NO. COLOR DE LA CO			

Lee Ramos for Costa Mesa City Council 2016

NAME OF FILER

1361842

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)		RELECTION TO DATE REQUIRED)
10/18/2016	Michael Donovan	IND COM OTH PTY SCC	Retired	249.00	249.00	G2016	\$249.00
09/28/2016	Equaltox Laboratory 1562 Parkway Loop #B Tustin, CA 92780	□IND □COM ☑OTH □PTY □SCC		1,000.00	1,000.00	G2016	\$1,000.00
09/28/2016	Andrew Gall Jr	IND COM OTH PTY SCC	Retired	200.00	200.00	G2016 G2014	\$200.00 \$250.00
10/12/2016	Grand Prix Road Trends, Inc. 1718 Newport Blvd. Costa Mesa, CA 92627	□IND □COM ☑OTH □PTY □SCC		200.00	200.00	G2016 G2014	\$200.00 \$249.00
10/14/2016	Grow Elect (ID# 1342160) 1020 12th St #232 Sacramento, CA 95814	☐IND IND IND IND IND IND IND IND		2,500.00	5,500.00	G2016 G2014	\$5,500.00 \$13,000.00
			SUBTOTALS	4,149.00			

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

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

PTY - Political Party

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

		to whole	uviidis.	from09/25/	2016	FORM	400
NAME OF FILER Lee Ramos fo	r Costa Mesa City Council 2016					D, NUMBER	
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 D CALENDAR YEA (JAN. 1 - DEC. 3	ATE PER	R ELECTION TO DATE REQUIRED)
10/12/2016	Harbor Mesa 149 Palos Verdes Blvd. Redondo Beach, CA 90277	□IND □COM 図OTH □PTY □SCC		500.00	500	.00 G2016	\$500.00
10/12/2016	Hidden Halo 2401 Katella Ave. Anaheim, CA 92805	□IND □COM ☑OTH □PTY □SCC		249.00	249	.00 G2016	\$249.00
10/14/2016	Jeff Holcombe	IND COM OTH PTY SCC	Sales US Foods	249.00	249	.00 G2016	\$249.00
10/12/2016	Rita Hunter	⊠IND □COM □OTH □PTY □SCC	Retired	100.00	100	.00 G2016 G2014	\$100.00 \$100.00
10/12/2016	Capt. Bruce Lamb	XIND	Retired	200.00	200	.00 G2016	\$200.00

COM
OTH
PTY
SCC

CLIDTOTAL	1 200 00
SUBTOTAL\$	1,298.00

Statement covers period

*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

State	ment covers period	CALIFORNIA 160
from	09/25/2016	FORM 400
through_	10/22/2016	Page 7 of 15
		I.D. NUMBER
		1261042

Lee Ramos for Costa Mesa City Council 2016

NAME OF FILER

					1301		
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)	T	ELECTION O DATE REQUIRED)
10/20/2016	Orange County Automobile Dealers Assoc PAC (ID# 870777) 3737 Birch St #220 Newport Beach, CA 92660	□IND ☑COM □OTH □PTY □SCC		1,000.00	1,000.00	G2016 G2014	\$1,000.0 \$1,000.0
10/12/2016	Robin Russell P.O.Box 1536 Newport Beach, CA 92659	⊠IND □COM □OTH □PTY □SCC	Teacher Array Contijo	249.00	249.00	G2016	\$249.0
10/21/2016	Angela Sparks	☑IND □COM □OTH □PTY □SCC	Housewife	250.00	250.00	G2016 G2014	\$250.00 \$249.00
10/22/2016	Gerda Sparks	IND COM OTH PTY SCC	Housewife	250,00	250.00	G2016 G2014	\$250.00 \$249.00
10/21/2016	Jeffrey Sparks	IND □COM □OTH □PTY □SCC	Computer Programmer Extron Electronics	250.00	250.00	G2016 G2014	\$250.00 \$249.00
			SUBTOTAL\$	1,999.00		1	

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

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

PTY - Political Party

Amounts may be rounded Statement covers period

•		to whole dollars.		from 09/25/	(2016 F	IFORNIA ORM	460
				through $\frac{10/22}{}$	²⁰¹⁶ Page	8 o	of15
NAME OF FILER					I.D. N	UMBER	
Lee Ramos fo	or Costa Mesa City Council 2016	- 1 · · · · · · · · · · · · · · · · · ·			1361	.842	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	то	ELECTION DIDATE EQUIRED)
10/16/2016	Jeremy Sparks	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Computer Consultant Self	250.00	250.00	G2016 G2014	\$250.00 \$249.00
10/22/2016	Tereza Sparks	IND COM OTH PTY SCC	Housewife	250.00	250.00	G2016 G2014	\$250.00 \$249.00
10/13/2016	Thomas Sparks	⊠IND □COM □OTH □PTY □SCC	Real Estate Investments Sparks Enterprise, LP	250.00	250.00	G2016 G2014	\$250.00 \$249.00
10/12/2016	The Lincoln Club of Orange State PAC (ID# 970861) 9070 Irvine Center Dr., #150 Irvine, CA 92618	□IND © COM □ OTH □ PTY □ SCC		500.00	500.00	G2016	\$500.00
10/18/2016	Sheng Chieh Wang	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	249.00	498.00	G2016	\$498.00
			SUBTOTAL	\$ 1,499.00			

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

Schedule A (Continuation Sheet) Monetary Contributions Received		Amounts may to whole		Statement coverage from 09/25/	2016		Annual State of State	460
NAME OF FILER				through10/22/	2016		of .	15
	or Costa Mesa City Council 2016					1.D. NI	JMBER 842	
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 CALENDAR (JAN. 1 - DE	YEAR		ECTION DATE QUIRED)
10/18/2016	Sheng Chieh Wang		Retired	249.00		498.00	G2016	\$498.0
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						

SUBTOTAL\$

249.00

□IND □сом □отн PTY □scc

*Contributor Codes

IND-Individual

COM – Recipient Committee (other than PTY or SCC)

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

Sahadula D. David							SCHE	DULE B - PART
Schedule B – Part 1 Loans Received	Am	ounts may be ro to whole dollar			from09/2	ers period 5/2016	CALIFORN FORM	^{IA} 460
SEE INSTRUCTIONS ON REVERSE					through10/2:	2/2016	Page10_	of15
NAME OF FILER Lee Ramos for Costa Mesa City Council	2016				•		I.D. NUMBER	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER LD. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAIL OR FORGIVE THIS PERIOD	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTION: TO DATE
Barbara & Lee Ramos † IND COM OTH PTY SCC	Retired	\$50.00	\$	PAID \$ 0.00 FORGIVEN \$ 0.00	s50.00	0.00 % RATE	\$50.00	CALENDAR YEAR \$ 285.17 PER ELECTION* G2018 50.00 G2016 345.17 \$G2014 0.00
Barbara & Lee Ramos To IND COM OTH PTY SCC	Retired	s60.00	so.oo	PAID \$ 0.00 FORGIVEN \$ 0.00		0.00 % RATE \$0.00	\$60.00 11/30/2015 DATE INCURRED	CALENDAR YEAR \$ 285.17 PER ELECTION* G2018 50.00 G2016 345.17 \$G2014 0.00
[†] □ IND □ COM □ OTH □ PTY □ SCC		s	s	PAID FORGIVEN S	DATE DUE	% RATE	\$DATE INCURRED	CALENDAR YEAR \$ PER ELECTION* \$
		SUBTOTALS \$	0.00	0.0	0\$ 110.00	\$ 0.00		
1. Loans received this period	s of less than \$100.)				0.00	INI	ontributor Codes D – Individual DM – Recipient Co	ommittee
(Include loans paid by a third party that		dule A.)					other than) "H – Other (e.g., "Y – Political Part	

*Amounts forgiven or paid by another party also must be reported on Schedule A. ** If required.

Enter the net here and on the Summary Page, Column A, Line 2.

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

Schedule E Payments Made

Amounts may be rounded to whole dollars.

State	ment covers period	CALIFORNIA 160
from	09/25/2016	FORM 400
through	10/22/2016	Page11 of15
		I.D. NUMBER
		Aug 17 Addison

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Lee Ramos for Costa Mesa City Council 2016 1361842 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants meetings and appearances returned contributions CTB contribution (explain nonmonetary)* office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals FND fundraising events polling and survey research staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* IND postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) PRO VOT voter registration campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail) NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID Anedot. cc processing 10.05 PO Box 84314 Baton Rouge, LA 70884 Anedot cc processing 10.01 PO Box 84314 Baton Rouge, LA 70884 Anedot cc processing 10.05 PO Box 84314 Baton Rouge, LA 70884 Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 30.11 Schedule E Summary 4,996.72 2. Unitemized payments made this period of under \$100\$ 100.00

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....\$

FPPC Form 460 (Jan/2016)

0.00

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

Schedule E (C)

SCHEDULE E (CONT.)
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Amounts may be rounded to whole dollars.	Statement covers period from09/25/2016	FORM 460
	through10/22/2016	Page 12 of 15
		I.D. NUMBER
		1361842
	The state of the s	to whole dollars. from09/25/2016

CMP CNS CTB CVC FIL FND IND LEG	candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense	MBR MTG OFC PET PHO POL POS	member communications meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger services	RAD RFD SAL TEL TRC TRS TSF	radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor
	legal defense campaign literature and mailings	PRO PRT	postage, delivery and messenger services professional services (legal, accounting) print ads	VOT	transfer between committees of the same candidate/sponsor voter registration 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
Anedot PO Box 84314 Baton Rouge, LA 70884	cc Pro	ocessing	10.05
Anedot PO Box 84314 Baton Rouge, LA 70884	cc Pro	ocessing	30.15
AvPac Insurance Services, Inc. 19531 Campus Dr., Ste. 15 Santa Ana, CA 92707	СМР		93.00
Bank of America 3730 Bristol St Santa Ana, CA 92704			3.00
JP Morgan Chase 2710 Media Center Dr. Building #6, Ste. 120 Los Angeles, CA 90065	TEL		3,060.00

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

SUBTOTAL \$

3,196.20

Schedule E

SCHEDILLE E.	CONT	
SCHEDULEE	(CONT.)	

		Statement covers period from09/25/2016	FORM 460
		through10/22/2016	Page 13 of 15
			I.D. NUMBER
			1361842
MBR member com MTG meetings an OFC office exper PET petition circl. PHO phone banks POL polling and POS postage, de	nmunications d appearances uses ulating s survey research livery and messenger sei	RAD radio airtime and producti RFD returned contributions SAL campaign workers' salari TEL t.v. or cable airtime and p TRC candidate travel, lodging, TRS staff/spouse travel, lodgin vices TSF transfer between committed	on costs es roduction costs and meals eg, and meals eees of the same candidate/sponsor
	CODE OR	DESCRIPTION OF PAYMENT	ÁMOUNT PAID
	TEL		255.00
	СМР		112.50
	PRO		250.00
	Des the payment, y MBR member com MTG meetings an OFC office exper PET petition circu phone banks POL polling and POS postage, de PRO professional	MBR member communications meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger set professional services (legal, account print ads CODE OR TEL CMP	to whole dollars. from

Silver Dove Productions, LLC TEL 500.00

CMP

SUBTOTAL \$

1,520.41

402.91

Barbara & Lee Ramos

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

Schedule E

CHEDULE	F(C	ONT
O. ILDOLL	- 10	O141./

(Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.	Statement covers period from09/25/2016	CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE		through10/22/2016	Page14 of15	
NAME OF FILER			I.D. NUMBER	
Lee Ramos for Costa Mesa City Council 2016			1361842	
CODES: If one of the following codes accura	tely describes the payment, you may enter the c	code. Otherwise, describe the paymen		

C MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs 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 independent expenditure supporting/opposing others (explain)* IND POS postage, delivery and messenger services transfer between committees of the same candidate/sponsor TSF LEG legal defense professional services (legal, accounting) VOT voter registration LIT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Silver Dove Productions, LLC	TEL		250.00

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

SUBTOTAL \$

250.00

Schedule F		
Accrued Expenses	(Unpaid	Bills

Amounts may be rounded to whole dollars.

CALIFORNIA Statement covers period FORM 09/25/2016 through __10/22/2016 Page 15 of 15 I.D. NUMBER

WEB information technology costs (internet, e-mail)

1361842

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Lee Ramos for Costa Mesa City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations petition circulating t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks candidate travel, lodging, and meals FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals IND independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT print ads

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
AV PAC Insurance Services 19531 Campus Dr #15 Santa Ana, CA 92707	СМР	2,522.55	0.00	0.00	2,522.55
AV PAC Insurance Services 19531 Campus Dr #15 Santa Ana, CA 92707	CMP	450.25	0.00	0.00	450.25
* Payments that are contributions or independent expenditures must also summarized on Schedule D.	SUBTOTALS	\$ 2,972.80\$	0.00\$	0.00\$	2,972.80

Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for 0.00

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

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

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