Recipient Committee					COVER PAGE
Campaign Statement Cover Page			CITY CL		FORM 460
	Statement covers period from July 1, 2017	Date of election if applicable: (Month, Day, Year)	8 FEB -1	AM 8: 43	ge 1 of 24  For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through Dec 31, 2017	November 4, 2014	TY OF COST	A MESA	
I. Type of Recipient Committee: All Committees	- Complete Parts 1, 2, 3, and 4.	2. Type of Statement:		Wilder Complete Control of the Contr	
✓ Officeholder, Candidate Controlled Committee  State Candidate Election Committee  Recall (Also Complete Part 5)  General Purpose Committee  Sponsored Small Contributor Committee Political Party/Central Committee	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 Term ☐ Amendment (Explain below	The second secon	Quarterly S Special Od	tatement d-Year Report
3. Committee Information	I.D. NUMBER 1397432	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE	)	NAME OF TREASURER			
Foley for Mayor 2018		Kimberlee Belli			
		MAILING ADDRESS			
STREET ADDRESS (NO P.O. BOX)		1600 Dove Street, Suite 1		715.0055	
1600 Dove Street, Suite 101		Newport Beach	STATE	ZIP CODE 92660	AREA CODE/PHONE 949-502-8800
	P CODE AREA CODE/PHONE 2660 949-502-8800	NAME OF ASSISTANT TREASURER, I		32000	949-302-0000
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO	OX.	MAILING ADDRESS			
CITY STATE ZI	P CODE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRESS			
. Verification					
I have used all reasonable diligence in preparing and rev	iewing this statement and to the best of my	knowledge the information contained he	erein and in the att	ached schedules	s is true and complete. I
certify under penalty of perjury under the laws of the Stat	e of California that the foregoing is true and	d correct.			and the property of the same o
Executed on	Ву				
1(31)10		Signature of Treasurer or Assistant Tre	easurer		
Executed onDate	BySignature of Con	t olling Officeholder, Candidate, State Measure Propor	nent or Responsible Off	icer of Sponsor	
Executed on	Ву	0			
Date		Signature of Controlling Officeholder, Candidate, State	e Measure Proponent		
Executed on	Ву	Signature of Controlling Officeholder, Candidate, State	e Measure Proponent		

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

COVER PAGE - PART 2							
CALII F(	ORNIA ORM	460					
Page_	2 0	of <u>24</u>					

Officeholder or Candidate Controlled (	Committee	6.	Primarily Formed Ball	ot Measure	Committee	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE	<del></del>		
Katrina Foley						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND	DISTRICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTI	ON	SUPPORT
Mayor of Costa Mesa						OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREE 1600 Dove Street, Suite 101			Identify the controlling offic	eholder, cand	idate, or state measure p	roponent, if any,
1000 Bove diffeet, duite 101	lewport Beach CA 92660		NAME OF OFFICEHOLDER, CAI		- ·	
Related Committees Not Included in the not included in this statement that are controlled by contributions or make expenditures on behalf of you	V VOU Or are primarily formed to receive		OFFICE SOUGHT OR HELD		DISTRICT N	O. IF ANY
COMMITTEE NAME	I.D. NUMBER	7.	Primarily Formed Can	didate/Offic	ceholder Committee	Listnama
NAME OF TREASURER	CONTROLLED COMMITTEE?	••	officeholder(s) or candidate(s	) for which this	s committee is primarily for	med.
COMMITTEE ADDRESS STREET ADDRESS (N			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEL	D SUPPORT OPPOSE
CITY STATE	ZIP CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEL	D SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR (	CANDIDATE	OFFICE SOUGHT OR HEL	
NAME OF TREASURER  COMMITTEE ADDRESS STREET ADDRESS (No	CONTROLLED COMMITTEE?  YES NO O P.O. BOX)		NAME OF OFFICEHOLDER OR (	CANDIDATE	OFFICE SOUGHT OR HEL	D SUPPORT OPPOSE
CITY STATE	ZIP CODE AREA CODE/PHONE		Atta	ach continuati	on sheets if necessary	

#### **Campaign Disclosure Statement Summary Page**

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period CALIFORNIA July 1, 2017 FORM from Dec 31, 2017 24 through. I.D. NUMBER

NAME OF FILER Foley for Mayor 2018 1397432 Column A Calendar Year Summary for Candidates Contributions Received Column B TOTAL THIS PERIOD CALENDAR YEAR (FROM ATTACHED SCHEDULES) Running in Both the State Primary and TOTAL TO DATE **General Elections** 1. Monetary Contributions ...... Schedule A, Line 3 \$ \_\_\_\_ 29,112.10 39,364.05 1/1 through 6/30 7/1 to Date 0 29,112.10 39.364.05 20. Contributions 3. SUBTOTAL CASH CONTRIBUTIONS...... Add Lines 1 + 2 \$ \_ 10,251.95 \$ 39,364.05 Received 4,408.00 4,320.00 Nonmonetary Contributions...... Schedule C, Line 3 21. Expenditures 5,533.08 \$ 25,313.98 5. TOTAL CONTRIBUTIONS RECEIVED......Add Lines 3 + 4 \$ \_\_\_\_ 29,112.10 39.364.05 Made **Expenditures Made Expenditure Limit Summary for State** \$ 25,313.98 Candidates 22. Cumulative Expenditures Made\* 25.313.98 (If Subject to Voluntary Expenditure Limit) 9. Accrued Expenses (Unpaid Bills) ...... Schedule F, Line 3 Date of Election Total to Date (mm/dd/yy) 25,313.98 Current Cash Statement 12. Beginning Cash Balance ...... Previous Summary Page, Line 16 \$ \_\_\_\_ 6.695.11 To calculate Column B. 29.112.10 add amounts in Column A to the corresponding 14. Miscellaneous Increases to Cash ...... Schedule I, Line 4 \*Amounts in this section may be different from amounts amounts from Column B reported in Column B. 19,780.90 of your last report. Some 15. Cash Payments ...... Column A, Line 8 above amounts in Column A may 16. ENDING CASH BALANCE ......Add Lines 12 + 13 + 14, then subtract Line 15 \$ \_\_ 16,026,31 be negative figures that should be subtracted from If this is a termination statement, Line 16 must be zero. previous period amounts. If this is the first report being 17. LOAN GUARANTEES RECEIVED...... Schedule B, Part 2 \$ \_\_\_\_\_ filed for this calendar year. only carry over the amounts Cash Equivalents and Outstanding Debts from Lines 2, 7, and 9 (if any). 18. Cash Equivalents...... See instructions on reverse \$ 19. Outstanding Debts...... Add Line 2 + Line 9 in Column B above \$ FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772)

www.fppc.ca.gov

# Schedule A

Amounts may be rounded

SCHEDULE A

Monetary Contributions Received		to	whole dollars.	Statement covers period from July 1, 2017		CALIFORNIA 460			
SEE INSTRUCTION	ONS ON REVERSE			through Dec	31, 2017	Page _	4 of 24		
	Mayor 2018					1.D. NUA 139743			
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 1 CALENDAR (JAN. 1 - DE	YEAR	PER ELECTION TO DATE (IF REQUIRED)		
07/8/17	Garrett Wilchek	IND COM OTH PTY		100.00	100.00				
07/7/17	Arlis Reynolds	ZIND COM OTH PTY SCC	Engineer	100.00	100.00		100.00		
07/7/17	Mary Swanson	☑IND □COM □OTH □PTY □SCC	retired	100.00	100.00				
07/3/17	Leslie Bubb	☑IND □COM □OTH □PTY □SCC	OC Dept. of Education Grant Advisor Independent Contractor	150.00	400.00				
07/14/17	Andrea Marr	☑ IND □ COM □ OTH □ PTY □ SCC	Engineer	100.00	100.00				
			SUBTOTAL \$	550.00			3.00		
. Amount red (Include all	A Summary ceived this period – itemized monetary contributions. Schedule A subtotals.)			25,970.10 3,142.00	IND COM	(other th	nt Committee an PTY or SCC) g., business entity)		
(Add Lines	tary contributions received this period. 1 and 2. Enter here and on the Summary Page, Colu	ımn A, Line 1.	)TOTAL \$	29,112.10	scc	- Small Co	ontributor Committee		

Amounts may be rounded to whole dollars.

SCHEDULE A	(CONT.)
COLLEGELA	CON I.

CALIFORNIA

Statement covers period

				from July 1	, 2017	FOR	M TOO		
				through Dec 3	31, 2017	Page5	of 24		
NAME OF FILER				11.5.7		I.D. NUMBI			
Foley for M	layor 2018					1397432			
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 T CALENDAR Y (JAN. 1 - DEC	/EAR	PER ELECTION TO DATE (IF REQUIRED)		
07/16/17	Kathy Esfahani	☑IND □COM □OTH □PTY □SCC	Court of Appeal Attorney	100.00	100.00		100.00		
07/20/17	Yolanda Newton	☑IND □COM □OTH □PTY □SCC	Michael Nusskern Sales	100.00	100.00				
07/20/17	Paul Flanagan	IND COM OTH PTY	retired	100.00	100.00				
07/20/17	Arlene Flanagan	☑IND □COM □OTH □PTY □SCC	retired	100.00	100.	.00			
07/20/17	Cecila Flanagan	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC	UCI Student	100.00	100.	00			

SUBTOTAL \$

500.00

\*Contributor Codes

IND - Individual

COM - Recipient Committee

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

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

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

SCHEDULE A (	CONT.)
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CALIFORNIA

Statement covers period

July 1, 2017

NAME OF FILER Foley for Mayor 2018					er 31, 2017	Page6 of24	
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	D THIS CALENDAR YEAR (JAN. 1 - DEC. 31)		PER ELECTION TO DATE (IF REQUIRED)
07/20/17	Kaitlin Morris	☑IND □COM □OTH □PTY □SCC	USC Grad Student	100.00			
07/20/17	Fran Sdao	ZIND COM OTH PTY SCC	retired	100.00	100.00		
07/21/17	Kathleen Andrews	☑IND □COM □OTH □PTY □SCC	State of California Gas Regulator	100.00	100.00		
07/26/17	Clay Epperson	☑IND □COM □OTH □PTY □SCC	Retired CMPD	100.00	100.00		
07/28/17	Jill Nelke	☑IND □COM □OTH □PTY □SCC	unemployed	100.00	200.	00	
			SUBTOTAL	500.00			

\*Contributor Codes

IND - Individual

COM - Recipient Committee

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

PTY – Political Party SCC – Small Contributor Committee

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

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

from.

July 1, 2017

				through Decemb	er 31, 2017	Page	7 of 24
NAME OF FILER Foley for N	layor 2018			1.D. NUM 13974:	IBER		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)
07/28/17	Nguyet Thomas	☑IND □COM □OTH □PTY □SCC	Full Moon Photography	100.00	100.00		
07/29/17	Belinda De La Libertad	☑IND □COM □OTH □PTY □SCC	A - Z Techs owner	200.00	200.00		
07/30/17	Leah Ersoylu	☑IND □COM □OTH □PTY □SCC	Ersoylu Consulting Consultant	500.00	500.00		
07/31/17	Jill Nelke	ZIND COM OTH PTY	unemployed	100.00	200	.00	
08/03/17	Brad Mitchell	☑IND □COM □OTH □PTY □SCC	Voip Engineering, LLC Engineer	128.00	128.	00	
			SUBTOTALS	\$ 1,028.00			

\*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

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

PTY – Political Party SCC – Small Contributor Committee

Type or print in ink. Amounts may be rounded

SCHEDULE A	(CONT.)
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Monetary Contributions Received		Amounts may to whole o		Statement coverage of the statement coverage	ers period , 2017	CALIFORNIA 460		
				through Decemb	er 31, 2017	Page	8 of 24	
NAME OF FILER Foley for N	layor 2018					1.D. NUM 13974		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)	
08/2/17	Belinda De La Libertad	☑IND □COM □OTH □PTY □SCC	A - Z Techs owner	225.00	225.	00		
08/1/17	Andrea Marr	ZIND COM OTH PTY SCC	Engineer	125.00	225.	00		
11/8/17	Florence Martin	☑IND □COM □OTH □PTY □SCC	retired	500.00	500.	00		
11/8/17	Mary Ann O.Connell	☑IND □COM □OTH □PTY □SCC	O'Connell Company dba FranWise Franchise Consultant	100.00	100.	00		

Engineer

SUBTOTAL\$

☑IND □COM

□oтн □PTY SCC

\*Contributor Codes

IND - Individual

11/9/17

COM - Recipient Committee (other than PTY or SCC)

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

Arlis Reynolds

SCC - Small Contributor Committee

450.00

100.00

1,050.00

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

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

from.

July 1, 2017

NAME OF FILER Foley for N	Mayor 2017			through Decemb	per 31, 2017	Page	
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 N (JAN. 1 - DEC	/EAR	PER ELECTION TO DATE (IF REQUIRED)
11/11/17	Eric Traut	☑IND □COM □OTH □PTY □SCC	Traut Law Firm Attorney	200.00	200.00		
11/14/17	Robert Bauman	☑IND □COM □OTH □PTY □SCC	Lynx Studios Founder / Hardware Engineer	250.00	250.00		
11/15/17	Leslie Bubb	ZIND COM OTH PTY SCC	OC Dept. of Education Grant Advisor Independent Contractor	250.00	400.00		
11/16/17	Harley Rouda	☑IND □COM □OTH □PTY □SCC	Trident Holding Company	1,000.00	1,000.00		
11/17/17	John Fisher	☑IND □COM □OTH □PTY □SCC	McMurry Stern, Inc. General Manager	100.00	100.	00	

SUBTOTAL\$

1,800.00

\*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

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

SCHEDULE A (CONT.)

Statement covers period from July 1, 2017	CALIFORNIA 460
through December 31, 2017	Page 10 of 24
	I.D. NUMBER 1391432

					13914	32
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)
11/22/17	Suzanne Gauntlett	☑IND □COM □OTH □PTY □SCC	Unemployed	750.00	750.00	
12/05/17	Mark Burnett	☑IND □COM □OTH □PTY □SCC	Attorney	100.00	100.00	
12/22/17	Bruce Entezam	☑IND □COM □OTH □PTY □SCC	Chief Operations Officer Green MEP Engineering Attorney	600.00	600.00	
03/28/17	IBEW PAC Education Fund	☐IND ☐COM ☑OTH ☐PTY ☐SCC		200.00	200.00	
07/05/17	LA/OC Building & Construction Trades Council	☐IND ☐COM ☑OTH ☐PTY ☐SCC		100.00	100.00	
			SUBTOTAL\$	1,750.00		

\*Contributor Codes

IND-Individual

NAME OF FILER

Foley for Mayor 2018

COM - Recipient Committee (other than PTY or SCC)

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

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

		10 1111010	John S.	from July 1	1, 2017	FO	RM 460
				through Decemb	per 31, 2017	Page _	11 of 24
Foley for N	Mayor 2018					1.D. NUM 13974	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
05/16/17	So CA Pipe Trades District Council #16	□IND □COM ☑OTH □PTY □SCC		249.00 249.00		249.00	
07/31/17	John Stephens	☑IND □COM □OTH □PTY □SCC	Stephens Friedland Attorney	200.00	200.00		i.
08/03/17	Olga Zapata Reynolds	ZIND COM OTH PTY SCC	retired	100.00	200.	.00	
7/31/17	Arlis A. Reynolds	ZIND COM OTH PTY	Engineer	250.00	350.00		
08/14/17	Operating Engineers Local 501, I.U.O.E.	☐IND ☑COM ☐OTH ☐PTY ☐SCC		249.00	249.	00	
			SUBTOTALS	1,048.00			

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

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

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

from.

July 1, 2017

NAME OF FILER Foley for Mayer 2018					per 31, 2017	Page	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)
11/09/17	Anthony Betts	☑IND □COM □OTH □PTY □SCC	Costa Mesa Auto Service Center Owner	249.00	249	.00	
11/12/17	Diana Lee Carey	ZIND COM OTH PTY SCC	retired	200.00	200.00		
09/09/17	John A. Kelly	☑IND □COM □OTH □PTY □SCC	Realtor	249.00			
11/09/17	Joan Perry	☑IND □COM □OTH □PTY □SCC	retired	100.00	100	00	
11/09/17	Kenneth M. Fait, Jr.	☑IND □COM □OTH □PTY □SCC	F & S Gourmet Foods Owner	249.00	249.	00	
			SUBTOTAL\$	1,047.00			

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PTY – Political Party
SCC – Small Contributor Committee

Type or print in ink.

SCHEDULE A (CONT.)

ionetary Contributions Received	to whole dollars.	Statement covers period from July 1, 2017	CALIFORNIA 460
		through December 31, 2017	Page 13 of 24
ME OF FILER		9	I.D. NUMBER
Foley for Mayor 2018			1397432

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)
10/18/17	Orange County Employee Asssociation	□IND □COM ☑OTH □PTY □SCC		2,500.00	2,500.00	
10/24/17	OCPMIA Plasterers Local Union #200	☐IND ☐COM ☑OTH ☐PTY ☐SCC		249.00	249.00	
10/30/17	Bryon Ward	☑IND □COM □OTH □PTY □SCC	Burnham Ward Developer	1,000.00	1,000.00	
11/13/17	Mark Iveson	☑IND □COM □OTH □PTY □SCC	sales	100.00	100.00	
11/13/17	Clay Epperson	☑IND □COM □OTH □PTY □SCC	retired CMPD	100.00	200.00	
			SUBTOTAL\$	3,949.00		

\*Contributor Codes

IND - Individual

NAME OF FILER

COM – Recipient Committee (other than PTY or SCC)

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

PTY – Political Party SCC – Small Contributor Committee

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

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

SCHEDULE A (CONT.)

Statement covers period from July 1, 2017	CALIFORNIA 460
through December 31, 2017	Page14 of24
	I.D. NUMBER

NAME OF FILER

Foley for Mayor 2018

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)
IGF Investment Group, LLC	☐IND ☐COM ☑OTH ☐PTY ☐SCC		200.00	200.00	
Nancy Clark and Assoc Inc.	☐IND ☐COM ☑OTH ☐PTY ☐SCC	Nancy Clark & Assoc, Inc. Criminal Justice Consult	100.00	100.00	
Rex Allen	☑IND □COM □OTH □PTY □SCC	retired	249.00	249.00	
Suzanne Joyce Savary	☑IND □COM □OTH □PTY □SCC	retired	100.00	100.00	
Olga Zapata Reynolds	☑IND □COM □OTH □PTY □SCC	retired	100.00	300.00	
	IGF Investment Group, LLC  Nancy Clark and Assoc Inc.  Rex Allen  Suzanne Joyce Savary	IGF Investment Group, LLC	COUPATION AND EMPLOYER CODE *   COUPATION AND EMPLOYER ((FSELF-EMPLOYED ENTER NAME)	CONTRIBUTION AND EMPLOYER (IF SELF-EMPLOYER (IF SELF-EMPLOYER OF BUSINESS)   COCUPATION AND EMPLOYER (IF SELF-EMPLOYER DENTER NAME OF BUSINESS)   RECEIVED THIS PERIOD	COUNTITEE, ALSO ENTER LD. NUMBER)  COUNTITION TO COUNTITION AND EMPLOYER (F SELF-EMPLOYED ENTER NAME)  COUNTITION TO BUSINESS)  CALENDAR YEAR (JAN. 1 - DEC. 31)  CALENDAR YEAR (JAN. 2 - DEC. 31)  CALENDAR YEAR

\*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party

Type or print in ink.

SCHEDULE A (CONT.)

Monetary Contributions Received	Amounts may be rounded to whole dollars.	Statement covers period from July 1, 2017	CALIFORNIA 460
		through December 31, 2017	Page15 of24
NAME OF FILER			I.D. NUMBER
Foley for Mayor 2018			1397432
	The second secon		<u> </u>

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)
12/01/17	Florence Hoffman	☑IND □COM □OTH □PTY □SCC	Law Office of Florence Hoffman. L.C. Attorney / self-employed	100.00	100.00	
12/01/17	Francine L. Sdao	☑IND □COM □OTH □PTY □SCC	retired	249.00	349.00	
11/28/17	Rachel Perry	☑IND □COM □OTH □PTY □SCC	retired	100.00	100.00	
12/14/17	Denise Moon	IND COM OTH PTY		125.00	125.00	
12/08/17	Conrad Moreno	☑IND □COM □OTH □PTY □SCC		200.00	200.00	
			SUBTOTAL \$	774 00		

\*Contributor Codes

IND - Individual

COM - Recipient Committee

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

PTY – Political Party SCC – Small Contributor Committee

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

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

from.

July 1, 2017

NAME OF THE				through Decemb	per 31, 2017	Page	16 of 24
Foley for N	Mayor 2018				1.D. NUN 13974		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
12/06/17	UFCW Local 324 PAC	☐IND ☐COM ☑OTH ☐PTY ☐SCC		1,000.00	1,000	.00	
12/22/17	Kenneth Fait, Sr.	☑IND □COM □OTH □PTY □SCC	Meadows Asset Management	10,000.00	10,000.00		
12/13/17	State of CA EDD - refund	☐IND ☐COM ☑OTH ☐PTY ☐SCC		225.10	225.	10	
		□IND □COM □OTH □PTY □SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
			SUBTOTAL\$	11,225.10			

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

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

Schedu Nonmoi	le C netary Contributions Received		Amounts may be rounded to whole dollars.		Statement covers	33 00000	CALIF FO	
SEE INSTRUCT	TIONS ON REVERSE				through Dec 31	, 2017	Page	17 of 24
Foley for	Mayor 2018						1.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 OF GOODS OR SERVICE		CALEND	ATIVE TO ATE AR YEAR DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
12/31/17	The Foley Group, PLC 1600 Dove Street, Suite 101 Newport Beach, CA 92660	□IND □COM ☑OTH □PTY □SCC		office rent, telephone, receptionist, internet,	4,320.00			
		□IND □COM □OTH □PTY □SCC		computer, scanner, storag unlimited photocopying	ge,			
		□IND □COM □OTH □PTY □SCC		& printing & periodic staffing 7/1/17 - 12/31/1				
12/23/17	Webmaster	□IND □COM □OTH □PTY □SCC		Press Releases 11/16/17 & 12/23/17	88.00			
Attach ado	litional information on appropriately labeled	continuation s	sheets.	SUBTOT	AL\$ 4,408.00			

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

 \*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

Schedule E Payments Made	Amounts may be rounded to whole dollars.	Statement covers period from July 1, 2017	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		through Dec 31, 2017	Page 18 of 24
Foley for Mayor 2018			I.D. NUMBER 1397432

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, d	lescribe 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 supporting/opposing others (explain)*  LEG legal defense  MBR member communications  RED  OFC office expenses  SAL  PET petition circulating  PHO phone banks  FND postage, delivery and messenger services  TSF  PRO professional services (legal, accounting)  VOT	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 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
DeSnoo & Desnoo PO Box 11426 Santa Ana, CA 92711	CNS	campaign consultant	1,500.00
Brent Bowman 19011 Pauline Lane Huntington Beach, CA 92646	RFD	Sanderson Ray	249.00
Quattro Caffe 3333 Bristol Street, #1205 Costa Mesa, CA 92626	FND	Fundraising Event	1,407.81

\*Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 3,156.81

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)\$	17,820.56
2. Unitemized payments made this period of under \$100\$	1,960.34
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	

Schedule E
(Continuation Sheet)
Payments Made

Amounts may be rounded

SCHEDULE E (CONT.)

Payments Made	to whole dollars.	from July 1, 2017	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		through Dec 31, 2017	Page 19 of 24
NAME OF FILER			I.D. NUMBER
Foley for Mayor 2018			1397432
CODES: If one of the following sedes served	4 4 4		

CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* 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)	RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor 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
Bank of America 4101 MacArthur Boulevard Newport Beach, CA 92660	PRT	Constant Contact and Facebook Ads	201.95
TotalWebDesign.com 10106 W. Candlewood Drive Sun City, AZ 85351	WEB	Web Hosting	137.88
Bank of America 4101 MacArthur Boulevard Newport Beach, CA 92660	PRT	Facebook Ads	827.05
Estancia High School 2323 Placentia Avenue Costa Mesa, CA 92627	CVC	Donation	150.00
Holiday 719 W. 19th Street Costa Mesa, CA 92627	FND	Campaign Event	327.00

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

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

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

SCHEDULE E (CONT.)

Statement covers period

(Continuation Sheet) Payments Made	Amounts may be to whole do			Statement covers period from July 1, 2017	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				through December 31, 201	Page 20 of 24
Foley for Mayor 2018					I.D. NUMBER 1397432
CODES: If one of the following codes accurately designed compaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  FND fundraising events  IND independent expenditure supporting/opposing others (explain)  LEG legal defense  LIT campaign literature and mailings	MBR member con MTG meetings ar OFC office exper PET petition circu. PHO phone banks POL polling and POS postage, de	nmunications of appearance uses ulating s survey resea livery and me	es	RAD radio airtime and production returned contributions SAL campaign workers' salaries t.v. or cable airtime and pro TRC candidate travel, lodging, ar staff/spouse travel, lodging.	n costs s duction costs nd meals and meals es of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DES	CRIPTION OF PAYMENT	AMOUNT PAID
DeSnoo & DeSnoo PO Box 11426 Santa Ana, CA 92711		CMP	campaign envelo	ppes	337.56
Costa Mesa Firefighters Association P.O. Box 2141 Costa Mesa, CA 92628		СТВ	Donation		100.00
Michele Mullen 1600 Dove Street, Suite 101 Newport Beach, CA 92660		SAL	campaign worker 06/26/17 - 07/10/	r salary - taxes 117	259.12
Michele Mullen 1600 Dove Street, Suite 101 Newport Beach, CA 92660		SAL	campaign worker 06/26/17 - 07/10/		901.12
Michele Mullen 1600 Dove Street, Suite 101 Newport Beach, CA 92660		SAL	campaign worker 07/11/17 - 07/25/	salary - taxes 17	221.75

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

1,819.55

SUBTOTAL \$

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

Type or print in ink.

Amounts may be rounded to whole dollars.

aymonto maac	from	
EE INSTRUCTIONS ON REVERSE	through December 31, 201	Page 21 of 24
AME OF FILER		I.D. NUMBER
Foley for Mayor 2018		1397432

CODES: If one of the following codes accurately describ	pes 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 supporting/opposing others (explain)* 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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Michele Mullen 1600 Dove Street, Suite 101 Newport Beach, CA 92660	SAL	campaign worker salary 07/11/17 - 07/25/17	795.12
Michele Mullen 1600 Dove Street, Suite 101 Newport Beach, CA 92660	SAL	campaign worker salary - taxes 07/26/17 - 08/10/17	392.43
Michele Mullen 1600 Dove Street, Suite 101 Newport Beach, CA 92660	SAL	campaign worker salary 07/26/17 - 08/10/17	1,255.50
Michele Mullen 1600 Dove Street, Suite 101 Newport Beach, CA 92660	SAL	campaign worker salary - taxes 8/11/17 - 08/25/17	272.11
Michele Mullen 1600 Dove Street, Suite 101 Newport Beach, CA 92660	SAL	campaign worker salary 08/11/17 - 08/125/174	949.69

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

SUBTOTAL \$

3,664.85

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

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Statement covers period CALIFORNIA ACO

CODES: If one of the following codes accurately describe	es 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 supporting/opposing others (explain)* 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 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
Michele Mullen 1600 Dove Street, Suite 101 Newport Beach, CA 92660	SAL	campaign worker salary - taxes 08/26/17 - 09/10/17	190.55
Michele Mullen 1600 Dove Street, Suite 101 Newport Beach, CA 92660	SAL	campaign worker salary 08/26/17 - 09/10/17	722.78
Michele Mullen 1600 Dove Street, Suite 101 Newport Beach, CA 92660	SAL	campaign worker salary 09/11/25 - 9/25/17	438.96
Michele Mullen 1600 Dove Street, Suite 101 Newport Beach, CA 92660	SAL	campaign worker salary - taxes 10/11/17 - 10/25/17	216.28
Michele Mullen 1600 Dove Street, Suite 101 Newport Beach, CA 92660	SAL	campaign worker salary 10/11/17 - 10/25/17	896.29

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

SUBTOTAL \$

2,464.86

# Schedule E (Continuation Sheet)

Type or print in ink. Amounts may be rounded SCHEDULE E (CONT.)

(Continuation Sheet) Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.			Statement covers period  from July 1, 2017  through December 31, 201	CALIFORNIA FORM 460  Page 23 of 24
SEE INSTRUCTIONS ON REVERSE NAME OF FILER	unougn	Page of			
Foley for Mayor 2017					1397432
CODES: If one of the following codes accurately descriced campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member cor MTG meetings an OFC office expe PET petition circ PHO phone bank POL polling and POS postage, de	nmunications nd appearanc nses ulating s survey resea livery and me	es	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and pro- TRC candidate travel, lodging, an TRS staff/spouse travel, lodging,	costs duction costs d meals and meals s of the same candidate/sponso
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DE	AMOUNT PAID	
Michele Mullen 1600 Dove Street, Suite 101 Newport Beach, CA 92660		SAL	campaign work 10/26/17 - 11/10	er salary - taxes 0/17	275.93
Michele Mullen 1600 Dove Street, Suite 101 Newport Beach, CA 92660		SAL	campaign worke 10/26/17 - 11/10		1,032.02
Paypal - Facebook ads		PRT	Facebook ads	500.15	
Michele Mullen 1600 Dove Street, Suite 101 Newport Beach, CA 92660		SAL	campaign worke	226.22	
Michele Mullen 1600 Dove Street, Suite 101 Newport Beach, CA 92660		SAL	campaign worke 11/11/17/- 11/25	915.16	
Payments that are contributions or independent expenditures must a	also be summarized on	Schedule D.	1	SU	BTOTAL \$ 2,949.48

#### Schedule E (Conti Payme

Type or print in ink.

SCHEDULE E (CONT.)

(Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.	Statement covers period from July 1, 2017	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE		through December 31, 201	Page24of24
NAME OF FILER			I.D. NUMBER
Foley for Mayor 2018			1391432

	ES: If one of the following codes accurately describe		payment, you may onto the bode.	Otherwise,	describe the payment.
	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
	contribution (explain nonmonetary)*		office expenses		campaign workers' salaries
	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
	fundraising events	POL	polling and survey research		staff/spouse travel, lodging, and meals
IND	ndependent expenditure supporting/opposing others (explain)*		postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	egal defense	PRO	professional services (legal, accounting)		voter registration
LIT	campaign literature and mailings	PRT	print ads		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
Michele Mullen 1600 Dove Street, Suite 101 Newport Beach, CA 92660	SAL	campaign worker salary 11/26/17 - 12/10/17	384.77
Constant Contact	PRT		294.25
Michele Mullen 1600 Dove Street, Suite 101 Newport Beach, CA 92660	SAL	campaign worker salary - taxes 12/11/17 - 12/25/17	295.80
Michele Mullen 1600 Dove Street, Suite 101 Newport Beach, CA 92660	SAL	campaign worker salary 12/11/17 - 12/25/17	1,146.31

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

SUBTOTAL \$

2,121.13