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CITY OF COSTA MESA

				00\/EB B*05
Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)			Date Stamp	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE	Statement covers period	Date of election if applicable: (Month, Day, Year)		Page 1 of 12 For Official Use Only
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	proplete 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 Tem Amendment (Explain b	ermination)	Quarterly Statement Special Odd-Year Report Supplemental Preelection Statement - Attach Form 495
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Eckles for City Council 2018 STREET ADDRESS (NO P.O. BOX)	D. NUMBER 1396985	Treasurer(s) NAME OF TREASURER Lysa Ray MAILING ADDRESS 3843 S Bristol St #60 CITY	STATE	ZIP CODE AREA CODE/PHONE
8907 Warner Ave #239 CITY STATE ZIP CO Huntington Beach CA 9266 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. E C/O Lysa Ray 3843 S Bristol St #604 CITY STATE ZIP CO	47 (949) 370-5164 BOX	SANTA ANA NAME OF ASSISTANT TREASUL MAILING ADDRESS CITY		92704 (714) 540-2295 ZIP CODE AREA CODE/PHONE
Santa Ana CA 927 OPTIONAL: FAX / E-MAIL ADDRESS lysaray.campaignservices@gmail.com	04	OPTIONAL: FAX / E-MAIL ADDI	RESS	A National Control of the Control o
Verification I have used all reasonable diligence in preparing and reviewin under penalty of perjury under the laws of the State of Californ Executed on	is that the foregoing is true and correct.		Treasurer ponent or Responsible Officer of State Measure Proponent State Measure Proponent	

Recipient Committee Campaign Statement Cover Page — Part 2 COVER PAGE - PART 2

CALIFORNIA 460

FORM 460

Page 2 of 12

Officeholder or Candidate Controlled Com	Officeholder or Candidate Controlled Committee			ot Measure	Committee	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
Brett Eckles					- 5	
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	ICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICT	ION	SUPPORT
City Council Member: City of Costa Mesa Di	strict 3					OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP		Identify the controlling of	ficeholder ca	endidate, or state mea	sure proponent, if an
152 Terraza Ct	osta Mesa CA 92627					oute proposions, ir as
1.5			NAME OF OFFICEHOLDER, CA	NDIDATE, OR P	ROPONENT	
Related Committees Not Included in this S	tatement: List any committees					
not included in this statement that are controlled by you contributions or make expenditures on behalf of your c	or are primarily formed to receive		OFFICE SOUGHT OR HELD	2	DISTRIC	T NO. IF ANY
COMMITTEENAME	I.D. NUMBER				L	- 2
		_				
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	 Primarily Formed Can officeholder(s) or candidate(
	☐ YES ☐ NO		onicarolaer(a) or canadata	s) for which a	na committee la primarii	y ronneu.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	BOX)		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR H	ELD SUPPORT OPPOSE
CITY STATE ZIP	CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR H	IELD □ SUPPORT □ OPPOSE
COMMITTEE NAME	I.D. NUMBER					
			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR I	GELD SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR H	(ELD
	YES NO	348.0	TOWNE OF OUT TO BE TO SEE THE	BELLEVIA A		SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	BOX)				CAMPUTE STATES	
CITY STATE ZIP	CODE AREA CODE/PHONE			ob continue	ion sheets if necessar	
	TOTAL CONTRACTOR OF THE PARTY O	VI area	NEXT STEEL SERVICE TO THE	un conunu a t	ivii aileets II Necessai	and the second second

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

Campaign Disclosure Statement Summary Page	Amounts may be round to whole dollars.	led Sta	atement covers period	CALIFORNIA 460	
-		from	07/01/2018	FORM TOU	
SEE INSTRUCTIONS ON REVERSE		through	gh09/22/2018	Page3 of12	
NAME OF FILER		•		I.D. NUMBER	
Eckles for City Council 2018				1396985	
Contributions Received	Column A TOTAL THIS PERIOD (FROMATTACHED SCHEDULES)	Column B CALENDARYEAR TOTAL TODATE		nmary for Candidates he State Primary and	
1. Monetary Contributions Schedule A, Line 3	\$ 8,191.00	\$12,638.00		through 6/30 7/1 to Date	
2. Loans Received Schedule B, Line 3	0.00	100.00	2	ulrough 6/30 //1 to Date	
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 8,191.00	\$12,738.00	20. Contributions Received \$	s	
4. Nonmonetary Contributions Schedule C, Line 3	0.00	0.00	21 Expenditures	7 LONG 300 LO	
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3+4	\$8,191.00	\$12,738.00	Made \$	5	
Expenditures Made	4 200		Expenditure Limit	Summary for State	
6. Payments Made Schedule E, Line 4	\$2,333.48	\$ 2,907.20		9/1-1-10	
7. Loans Made Schedule H, Line 3	0.00	0.00			
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 2,333.48	\$ 2,907.20		ve Expenditures Made* to Voluntary Expenditure Limit)	
9. Accrued Expenses (Unpaid Bills)	0.00	0.00	Date of Election	Total to Date	
10. Nonmonetary Adjustment	0.00	0.00	(mm/dd/yy)		
11. TOTAL EXPENDITURES MADE	\$ 2,333.48	\$ 2,907.20	1	\$ 2000 1400 1400	
Current Cash Statement				_ s	
12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 7,713.38	To calculate Column B, ad	id.		
13. Cash Receipts Column A, Line 3 above	8,191.00	amounts in Column A to the			
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00	corresponding amounts from Column B of your last	*Amounts in this section reported in Column B.	may be different from amounts	
15. Cash Payments Column A, Line 8 above	2,333.48	report. Some amounts in Column A may be negative	Toportod in Column 6.		
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 13,570.90	figures that should be			
If this is a termination statement, Line 16 must be zero.		subtracted from previous period amounts. If this is			
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ 0.00	the first report being filed for this calendar year, on carry over the amounts			
Cash Equivalents and Outstanding Debts	11年7年2月8日東京公司五百分	from Lines 2, 7, and 9 (if			
18. Cash Equivalents	\$0.00	any).			
19. Outstanding Debts Add Line 2 + Line 9 in Column B above					
	一			FPPC Form 460 (Jan/20	
			FPPC Advice:	advice@fppc.ca.gov (866/275-37	

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Schedule Monetary	Contributions Received	Amounts may be rounded to whole dollars.		Statement covers period from 07/01/2018		CALIFORNIA 460		
SEE INSTRUCTIO	ONS ON REVERSE			through _09/22/20	18	Page _	4 (of <u>12</u>
NAME OF FILER				L		I.D. NUM	BER	
Eckles for	City Council 2018					139698	5	
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	TO	LECTION DATE QUIRED)
09/05/2018	Stephan Andranian	⊠IND □COM □OTH □PTY □SCC	Attorney Vogt Resnick & Sherak	100.00		100.00 G2	2018	\$100.
09/05/2018	Jeff Bellitti	⊠IND □COM □OTH □PTY □SCC	Real Estate JLL	100.00	Son T	100.00 G2	2018	\$100.0
09/10/2018	Donald Bowers	⊠IND □COM □OTH □PTY □SCC	Owner Bowers Properties	200.00	or other hands	200.00 G2	2018	\$200.
09/19/2018	Steven Check 575 Anton Blvd #500 Costa Mesa, CA 92626	IND □COM □OTH □PTY □SCC	Owner Check Capital Mgmt	5,000.00	5.	000.00 G2	2018	\$5,000.
09/17/2018	Lindsay Coluccio	⊠IND □COM □OTH □PTY □SCC	Homemaker	249.00		249.00 G	1018 	\$249.
Tells in the control of			SUBTOTAL	\$ 5,649.00				
1. Amount re (Include a 2. Amount re 3. Total mone	A Summary ceived this period – itemized monetary contributions. Il Schedule A subtotals.) ceived this period – unitemized monetary contributions etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colu	s of less than	\$100\$	7,844.00 347.00 8,191.00	IND- COM OTH PTY	- Other (e - Political F	et Commit nan PTY (o.g., busir Party	

	A (Continuation Sheet)					:	SCHEDULE	A (CONT.)
Monetary Contributions Received		Amounts may to whole		Statement cove		CALIFORNIA 460		
				through09/22/	2018	age	5 of	12
NAME OF FILER		19	1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			.D. NUM	BER	
Eckles for C	ity Council 2018					139698	5	
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 D CALENDAR YEA (JAN. 1 - DEC. 3	R	PER ELE TO D. (IF REQ	ATE
09/17/2018	Rett Coluccio	□IND □COM 図OTH □PTY □SCC	Broker Province West	249.00	245	0.00 G	2018	\$249.00
09/01/2018	Corona del Mar Physical Therapy 3600 B Coast Hwy #150 Corona Del Mar, CA 92625	□IND □COM ☑OTH □PTY □SCC		249.00	245	0.00 G	2018	\$249.00
09/05/2018	Matt Ellis	⊠IND □COM □OTH □PTY □SCC	Real Estate Invesment Self	100.00	100	0.00 G	2018	\$100.00
09/01/2018	Brian Fracalosy	⊠IND □COM □OTH □PTY □SCC	Manager Magnolua Physical Therapy	249.00	249	0.00 G	2018	\$249.00
09/08/2018	Jacob Haley	XIND COM OTH PTY	Education NMUSD	100.00	100	0.00 G	2018	\$100.00

*Contributor Codes

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

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	A (Continuation Sheet)					SCHEDU	JLE A (CONT.)
Monetary	Contributions Received	Amounts may to whole		Statement cove	2018 F	CALIFORNIA 460	
NAME OF FILER				un ough		UMBER	"
	ity Council 2018	2			1396		
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)	TO	ELECTION O DATE EQUIRED)
09/20/2018	Jeffrev Harlan	⊠IND □COM □OTH □PTY □SCC	Attorney Ervin Cohen & Jessup	100.00	100.00	G2018	\$100.00
08/30/2018	Steven Hellings	⊠IND □COM □OTH □PTY □SCC	President WYS Consulting	249.00	249.00	G2018	\$249.00
08/30/2018	Brian Hogan	⊠IND □COM □OTH □PTY □SCC	Sales & Marketing Fluent	100.00	100.00	G2018	\$100.00
08/10/2018	Bruce Krochman 2973 Harbor Blvd #644 Costa Mesa, CA 92626	⊠IND □COM □OTH □PTY □SCC	Manager DFM Associates	250.00	250.00	G2018	\$250.00
07/31/2018	Tom Robinson 4 Corporate Plaza Dr #210 Newport Beach, CA 92660	⊠IND □COM □OTH □PTY □SCC -	Developer Self	249.00	249.00	G2018	\$249.00

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

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*Contributor Codes

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Schedule	A (Continuation Sheet)						SCHEDULE A (CONT.)	
Monetary Contributions Received		Amounts may to whole		Statement cove	. 0	california 460		
			<	through 09/22/	2018	Page_	7 of 12	
NAME OF FILER Eckles for C	City Council 2018	ž	_			I.D. NU	70	
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-EMPLOYER AME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)	
08/05/2018	Dave Weber	⊠IND □COM □OTH □PTY □SCC	Owner Gracie Barra	300.00		00.00	G2018 \$300.00	
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC	Pan-12 Williams	4.00			ness (Lab.2) Canadoptes (La	
		□IND □COM □OTH □PTY □SCC					200	
			SUBTOTAL	\$ 300.00				

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

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*Contributor Codes

Onlandada B. Bank A				_			SCHE	DULE B - PART 1
Schedule B – Part 1 Loans Received	Amo	ounts may be ro to whole dollar			from 07/01	ers period	CALIFORN FORM	^{IA} 460
SEE INSTRUCTIONS ON REVERSE					through09/22	2/2018	Page8	of <u>12</u>
NAME OF FILER		****				75.5	I.D. NUMBER	
Eckles for City Council 2018							1396985	
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	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE
Brett Eckles 152 Terraza Ct Costa Mesa, CA 92627 †⊠ IND □ COM □ OTH □ PTY □ SCC	Owner Eckles Construction	\$ 100.00	s0.00	\$0.00 FORGIVEN	\$ 100.00	0.00 % RATE	\$ 100.00 06/08/2017 DATE INCURRED	\$ 0.00 PER ELECTION** \$ 0.00
† IND COM OTH PTY SCC		s		PAID S FORGIVEN S S	DATE DUE	%%	\$ DATE INCURRED	CALENDAR YEAR \$ PER ELECTION ** \$
†□IND □COM □OTH □PTY □SCC		- Allen	7 + 150 5 - 150 8 - 15	PAID S———————————————————————————————————	DATEDUE	RATE	\$	CALENDAR YEAR \$ PER ELECTION** \$
		SUBTOTALS S	0.00	0.0	100.00	\$ 0.0		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
Loans received this period		Steel Hillian M		\$	0.00		Magning to a Paragraph	ren spekin likede.
2. Loans paid or forgiven this period (Total Column (c) plus loans under \$10 (Include loans paid by a third party the 3. Net change this period. (Subtract Lin Enter the net here and on the Summa	0 paid or forgiven.) It are also itemized on Scheo e 2 from Line 1.)	dule A.)		NET S	0.00 0.00 May be a negative number)	C	Contributor Codes ID – Individual OM – Recipient Co (other than ITH – Other (e.g., TY – Political Part CC – Small Contril	ommittee PTY or SCC) business entity) y
*Amounts forgiven or paid by another party also ** If required.	must be reported on Schedule A.						FPPC F	orm 460 (Jan/201

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Schedule E Payments Made	Amounts may be rounded to whole dollars.	Statement covers period	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		through09/22/2018	Page 9 of 12
Eckles for City Council 2018			1396985

campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)*
CVC cvic donations
FiL candidate filing/ballot feeFND fundraising eventindepen-CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications RAD radio airtime and production costs MTG OFC PET PHO POL POS returned contributions campaign workers' salaries t.v. or cable airtime and production costs meetings and appearances office expenses RFD SAL petition circulating TEL TRC TRS TSF candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor phone banks fundraising events independent expenditure supporting/opposing others (explain)* polling and survey research postage, delivery and messenger services professional services (legal, accounting) legal defense voter registration campaign literature and mailings 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 PA	YMENT	AMOUNT PAID
Anedot P.O.BOX 84314 Baton Rouge, LA 70884	cc	processing		4.20
Anedot P.O.BOX 84314 Baton Rouge, LA 70884	cc	Processing		10.20
Anedot P.O.BOX 84314 Baton Rouge, LA 70884	cc	Processing		12.3
* Payments that are contributions or independent expenditures must also be su	mmarized on Sche	dule D.	SUBTOTAL\$	26.8
Schedule E Summary		ingeline salik (19.000) (19.00)		24.5
1. Itemized payments made this period. (Include all Schedule E subtotals.)			s	2,303.14
2. Unitemized payments made this period of under \$100			\$	30.34
3. Total interest paid this period on loans. (Enter amount from Schedule B, P	art 1, Column (e).)	ss	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and				2,333.48

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Schedule E (Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.
SEE INSTRUCTIONS ON REVERSE	
NAME OF FILER	

Statement covers period CALIFORNIA FORM 07/01/2018 through 09/22/2018 Page _ 10 of 12 I.D. NUMBER

Eckl	es for City Council 2018				1396985
COD	PES: If one of the following codes accurately describe	s the	payment, you may enter the code.	Otherwise,	describe the payment.
CMP	campaign paraphernalia/misc.	MBR	R member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
ND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)
	NAME AND ADDRESS OF PAYEE				
	NAME AND ADDRESS OF TAILER		CODE OR	DESCRIPTIO	N OF PAYMENT AMOUNT PAID

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYME	NT AMOUNT PAID
Anedot P.O.BOX 84314 Baton Rouge, LA 70884	cc Processing	10.36
Anedot P.O.BOX 84314 Baton Rouge, LA 70884	cc Processing	23.08
Anedot P.O.BOX 84314 Baton Rouge, LA 70884	cc Processing	20.52
Anedot P.O.BOX 84314 Baton Rouge, LA 70884	cc Processing	12.90
Anedot P.O.BOX 84314 Baton Rouge, LA 70884	cc Processing	4.30
* Payments that are contributions or independent expenditures must also be s	mmarized on Schedule D.	SUBTOTAL \$ 71.10

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Schedule E			SCHEDULE E (CON			
(Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA 460			
Payments Made	to whole dollars.	from 07/01/2018	FORM 400			
SEE INSTRUCTIONS ON REVERSE	1 - 27 -	through 09/22/2018	Page11 of12			
NAME OF FILER			I.D. NUMBER			

Eckles for City Council 2018 1396985 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. campaign paraphernalia/misc. campaign consultants RAD radio airtime and production costs RFD returned contributions MBR member communications
MTG meetings and appearances CNS CTB CVC FIL FND ND OFC PET PHO POL POS PRO PRT SAL TEL TRC TRS campaign workers' salaries t.v. or cable airlime and production costs contribution (explain nonmonetary)* civic donations office expenses petition circulating petition circulating phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting) print ads candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* TSF VOT voter registration information technology costs (internet, e-mail) LEG legal defense campaign literature and mailings WEB NAME AND ADDRESS OF PAYEE DESCRIPTION OF PAYMENT AMOUNT PAID

(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot P.O.BOX 84314 Baton Rouge, LA 70884	cc	c Processing	20.52 s
City of Costa Mesa 77 Fair Dr Costa Mesa, CA 92626	FIL		600.00
JC Evans 150 S Hwy 160 #8-121 Pahrump, NV 89048	WEB		834.70
Lysa Ray Campaign Services 3843 S Bristol St #604 Santa Ana, CA 92704	PRO		250.00
Lysa Ray Campaign Services 3843 S Bristol St #604 Santa Ana, CA 92704	PRO		250.00

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

FPPC Form 480 (Jan/2016) FPPC Toll-Free Helpline: 868/ASK-FPPC (866/275-3772)

SUBTOTAL \$

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1,955.22

			SCHEDULE E (CONT.)
Schedule E (Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.	Statement covers period from 07/01/2018	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE		through 09/22/2018	Page 12 of 12
NAME OF FILER			I.D. NUMBER
Eckles for City Council 2018	- 13		1396985
CODES: If one of the following codes accurately describe	es the payment, you may enter the code. Ot	therwise, describe the paymer	nt
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events ND idependent expenditure supporting/opposing others (explain)*	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	RAD radio airtime and producting RFD returned contributions SAL campaign workers' salariful. t.v. or cable airtime and productions and particular travel, lodging, tanffix staff/spouse travel, lodging transfer between committed.	es roduction costs and meals
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration	

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE OR	DESCRIPTION	ON OF PAYMENT	AMOUNT PAID	
Lysa Ray Campaign Services 3843 S Bristol St #604 Santa Ana, CA 92704			PRO			250.0
						ar inde
		141				
kan managan kanan menanggan kanan kanan sebagai sebagai sebagai sebagai sebagai sebagai sebagai sebagai sebaga Kanan managan kanan sebagai se						
enter de la company de la comp				ining a section of the section of th		
Digital and the second second second						
			especialistic di Manageria Romania di di			a de
						A STATE OF THE STA

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

SUBTOTAL \$

250.00

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