

**Recipient Committee  
Campaign Statement  
Cover Page**

|  |   |
|--|---|
| Date Stamp<br><b>RECEIVED</b><br><b>SEP 26 2022</b><br><b>CITY CLERK</b> | CALIFORNIA FORM <b>460</b><br>Page <u>1</u> of <u>15</u><br>For Official Use Only<br>SEP 26 2022 PM 03:27 |
|--|---|

|   |   |
|---|---|
| Statement covers period<br>from <u>JULY 1, 2022</u><br><br>through <u>Sept 24, 2022</u> | Date of election if applicable:<br>(Month, Day, Year)<br><br>NOVEMBER 8, 2022 |
|---|---|

SEE INSTRUCTIONS ON REVERSE

**1. Type of Recipient Committee:** All Committees – Complete Parts 1, 2, 3, and 4.

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee<br><input type="checkbox"/> State Candidate Election Committee<br><input type="checkbox"/> Recall<br><small>(Also Complete Part 5)</small> | <input type="checkbox"/> Primarily Formed Ballot Measure Committee<br><input type="checkbox"/> Controlled Sponsored<br><small>(Also Complete Part 6)</small> |
| <input type="checkbox"/> General Purpose Committee<br><input type="checkbox"/> Sponsored<br><input type="checkbox"/> Small Contributor Committee<br><input type="checkbox"/> Political Party/Central Committee              | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee<br><small>(Also Complete Part 7)</small>  |

**2. Type of Statement:**

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Preelection Statement <i>[initials]</i><br><input checked="" type="checkbox"/> Semi-annual Statement<br><input type="checkbox"/> Termination Statement<br><small>(Also file a Form 410 Termination)</small><br><input type="checkbox"/> Amendment (Explain below) | <input type="checkbox"/> Quarterly Statement<br><input type="checkbox"/> Special Odd-Year Report |
|---|--|

**3. Committee Information**

I.D. NUMBER  
~~140935~~ 1449935

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
**STEPHANIE KLEIN FOR LEMON GROVE CITY COUNCIL 2022 FPPC 140935**  
1449935

STREET ADDRESS (NO P.O. BOX)  
[REDACTED]

|                    |           |              |                 |
|--------------------|-----------|--------------|-----------------|
| CITY               | STATE     | ZIP CODE     | AREA CODE/PHONE |
| <b>LEMON GROVE</b> | <b>CA</b> | <b>91945</b> | [REDACTED]      |

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX  
N/A

|            |       |          |                 |
|------------|-------|----------|-----------------|
| CITY       | STATE | ZIP CODE | AREA CODE/PHONE |
| <u>N/A</u> |       |          |                 |

OPTIONAL: FAX / E-MAIL ADDRESS  
N/A

**Treasurer(s)**

NAME OF TREASURER  
**ERICA LYNN DIETRICH**

MAILING ADDRESS  
[REDACTED]

|            |            |            |                 |
|------------|------------|------------|-----------------|
| CITY       | STATE      | ZIP CODE   | AREA CODE/PHONE |
| [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED]      |

NAME OF ASSISTANT TREASURER, IF ANY  
**JULIET DEAMICIS**

MAILING ADDRESS  
[REDACTED]

|            |            |            |                 |
|------------|------------|------------|-----------------|
| CITY       | STATE      | ZIP CODE   | AREA CODE/PHONE |
| [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED]      |

OPTIONAL: FAX / E-MAIL ADDRESS  
[REDACTED]

**4. Verification**

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

|   |  |
|---|--|
| Executed on <u>9/23/2022</u><br><small>Date</small> | By <u>[REDACTED]</u><br><small>Signature of Controlling Officeholder, Candidate, State Measure Proponent</small> |
| Executed on <u>9/24/2022</u><br><small>Date</small> | By <u>[REDACTED]</u><br><small>Signature of Controlling Officeholder, Candidate, State Measure Proponent</small> |
| Executed on _____<br><small>Date</small>            | By _____<br><small>Signature of Controlling Officeholder, Candidate, State Measure Proponent</small>             |
| Executed on _____<br><small>Date</small>            | By _____<br><small>Signature of Controlling Officeholder, Candidate, State Measure Proponent</small>             |

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

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE  
STEPHANIE KLEIN

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)  
LEMON GROVE CITY COUNCIL, DISTRICT 4

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP  
[REDACTED]

**Related Committees Not Included in this Statement:** *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

|   |   |
|---|---|
| COMMITTEE NAME                                    | I.D. NUMBER   |
| NAME OF TREASURER<br><u>N/A</u>                   | CONTROLLED COMMITTEE?<br><input type="checkbox"/> YES <input type="checkbox"/> NO |
| COMMITTEE ADDRESS<br>STREET ADDRESS (NO P.O. BOX) |   |
| CITY STATE ZIP CODE AREA CODE/PHONE               |   |

|   |   |
|---|---|
| COMMITTEE NAME                                    | I.D. NUMBER   |
| NAME OF TREASURER<br><u>N/A</u>                   | CONTROLLED COMMITTEE?<br><input type="checkbox"/> YES <input type="checkbox"/> NO |
| COMMITTEE ADDRESS<br>STREET ADDRESS (NO P.O. BOX) |   |
| CITY STATE ZIP CODE AREA CODE/PHONE               |   |

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE

|                      |              |   |
|----------------------|--------------|---|
| BALLOT NO. OR LETTER | JURISDICTION | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
|                      | <u>N/A</u>   |   |

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD DISTRICT NO. IF ANY

**7. Primarily Formed Candidate/Officeholder Committee** *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

|   |                       |   |
|---|-----------------------|---|
| NAME OF OFFICEHOLDER OR CANDIDATE               | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE               | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE<br><u>N/A</u> | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE               | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |

*Attach continuation sheets if necessary*

# Campaign Disclosure Statement Summary Page

Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

|   |                                |
|---|--------------------------------|
| Statement covers period<br>from <u>July 1, 2022</u> | <b>CALIFORNIA<br/>FORM 460</b> |
| through <u>Sept 24, 2022</u>                        |                                |
| Page <u>3</u> of <u>15</u>                          |                                |
| I.D. NUMBER<br><u>1449935</u>                       |                                |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
**STEPHANIE KLEIN FOR LEMON GROVE CITY COUNCIL 2022 FPPC 1449935**

## Contributions Received

|  | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|--|--|--|
| 1. Monetary Contributions..... Schedule A, Line 3    | \$ <u>4235.72</u>  | \$ <u>6235.72</u>                          |
| 2. Loans Received..... Schedule B, Line 3            | \$ <u>0</u>  | \$ <u>0</u>                                |
| 3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1 + 2  | \$ <u>4235.72</u>  | \$ <u>6235.72</u>                          |
| 4. Nonmonetary Contributions..... Schedule C, Line 3 | \$ <u>550.00</u>   | \$ <u>550.00</u>                           |
| 5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4 | \$ <u>4785.72</u>  | \$ <u>7335.72</u>                          |

## Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

|                            | 1/1 through 6/30  | 7/1 to Date       |
|----------------------------|-------------------|-------------------|
| 20. Contributions Received | \$ <u>2000.00</u> | \$ <u>4785.72</u> |
| 21. Expenditures Made      | \$ <u>0</u>       | \$ <u>5641.88</u> |

## Expenditures Made

|  | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|--|--|--|
| 6. Payments Made..... Schedule E, Line 4                   | \$ <u>3621.08</u>  | \$ <u>3621.08</u>                          |
| 7. Loans Made..... Schedule H, Line 3                      | \$ <u>0</u>  | \$ <u>0</u>                                |
| 8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7             | \$ <u>3621.08</u>  | \$ <u>3621.08</u>                          |
| 9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3 | \$ <u>1470.80</u>  | \$ <u>1470.80</u>                          |
| 10. Nonmonetary Adjustment..... Schedule C, Line 3         | \$ <u>550.00</u>   | \$ <u>550.00</u>                           |
| 11. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10      | \$ <u>5641.88</u>  | \$ <u>5641.88</u>                          |

## Expenditure Limit Summary for State Candidates

| 22. Cumulative Expenditures Made*<br>(If Subject to Voluntary Expenditure Limit) |                   |
|--|-------------------|
| Date of Election<br>(mm/dd/yy)   | Total to Date     |
| 11 / 08 / 22   | \$ <u>5641.88</u> |
| ____ / ____ / ____   | \$ _____          |

## Current Cash Statement

|  |                   |
|--|-------------------|
| 12. Beginning Cash Balance..... Previous Summary Page, Line 16             | \$ <u>2000.00</u> |
| 13. Cash Receipts..... Column A, Line 3 above                              | \$ <u>4235.72</u> |
| 14. Miscellaneous Increases to Cash..... Schedule I, Line 4                | \$ <u>0</u>       |
| 15. Cash Payments..... Column A, Line 8 above                              | \$ <u>3621.08</u> |
| 16. ENDING CASH BALANCE..... Add Lines 12 + 13 + 14, then subtract Line 15 | \$ <u>2614.72</u> |

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

If this is a termination statement, Line 16 must be zero.

|  |             |
|--|-------------|
| 17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2 | \$ <u>0</u> |
|--|-------------|

## Cash Equivalents and Outstanding Debts

|  |                   |
|--|-------------------|
| 18. Cash Equivalents..... See instructions on reverse            | \$ <u>0</u>       |
| 19. Outstanding Debts..... Add Line 2 + Line 9 in Column B above | \$ <u>1470.80</u> |

\*Amounts in this section may be different from amounts reported in Column B.

**Schedule A  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A

|   |                            |
|---|----------------------------|
| Statement covers period<br>from <u>JULY 1, 2022</u><br>through <u>SEPT 24, 2022</u> | <b>CALIFORNIA FORM 460</b> |
|   | Page <u>4</u> of <u>15</u> |

SEE INSTRUCTIONS ON REVERSE

|  |                               |
|--|-------------------------------|
| NAME OF FILER<br><u>STEPHANIE KLEIN FOR LEMON GROVE CITY COUNCIL 2022 FPPC 1449935</u> | I.D. NUMBER<br><u>1449935</u> |
|--|-------------------------------|

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|---------------|---|---|---|-----------------------------|--|---------------------------------------|
| 8/7/22        | Patrick Brennan<br>[REDACTED]   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Food Broker<br>owner Biennan &<br>Associates  | \$ 482.86                   | \$ 482.86  | \$ 482.86                             |
| 8/2/22        | James Pace<br>[REDACTED]  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Business Owner,<br>Pace Print and<br>Design LLC   | \$ 10.00                    | \$ 10.00   | \$ 10.00                              |
| 8/2/22        | Brian Page<br>[REDACTED]  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retail Operations<br>manager of Zoo<br>and aquariums  | \$ 41.43                    | \$ 41.43   | \$ 41.43                              |
| 8/1/22        | Kelly Sott<br>[REDACTED]  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Escrow officer<br>Netco Title Co.   | \$ 100.00                   | \$ 100.00  | \$ 100.00                             |
| 8/3/22        | Karen Daneri<br>[REDACTED]  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | caretaker<br>Home Supportive<br>services  | \$ 25.00                    | \$ 25.00   | \$ 25.00                              |

SUBTOTAL \$

\$ 659.29

**Schedule A Summary**

- Amount received this period – itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 3,432.86
- Amount received this period – unitemized monetary contributions of less than \$100 ..... \$ 802.86
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)..... **TOTAL \$** 4,235.72

\*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 to whole dollars.

|   |                            |
|---|----------------------------|
| Statement covers period<br>from <u>July 1, 2022</u> | <b>CALIFORNIA FORM 460</b> |
| through <u>Sept 24, 2022</u>                        |                            |
| Page <u>5</u> of <u>15</u>                          |                            |

SEE INSTRUCTIONS ON REVERSE

|  |                               |
|--|-------------------------------|
| NAME OF FILER<br><u>STEPHANIE KLEIN FOR LEMON GROVE CITY COUNCIL 2022 FPPC 1449935</u> | I.D. NUMBER<br><u>1449935</u> |
|--|-------------------------------|

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|---------------|---|---|---|-----------------------------|--|---------------------------------------|
| 8/29/22       | Bobbie Plough<br>[REDACTED]   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired Professor   | \$50.00                     | \$50.00  | \$50.00                               |
| 8/27/22       | Joseph Monroe<br>[REDACTED]   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Self employed software development consultant   | \$250.00                    | \$250.00   | \$250.00                              |
| 9/7/22        | Evan Hindman<br>[REDACTED]  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Sales, Aya Healthcare   | \$82.86                     | \$82.86  | \$82.86                               |
| 9/6/22        | Kenny Chen<br>[REDACTED]  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Business owner Onyx moto LLC  | \$500.00                    | \$500.00   | \$500.00                              |
| 9/1/22        | Mary England<br>[REDACTED]  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Pres. & CEO Lamesa Chamber of Commerce  | \$300.00                    | \$300.00   | \$300.00                              |

**SUBTOTAL \$** \$ 1,182.86

**Schedule A Summary**

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

**\*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  
to whole dollars.

SCHEDULE A (CONT.)

|   |                            |
|---|----------------------------|
| Statement covers period<br>from <u>July 1, 2022</u><br>through <u>Sept 24, 2022</u> | <b>CALIFORNIA FORM 460</b> |
|   | Page <u>6</u> of <u>15</u> |

NAME OF FILER: STEPHANIE KLEIN FOR LEMON GROVE CITY COUNCIL 2022 FPPC 1449935 I.D. NUMBER: 1449935

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *   | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|--|---|-----------------------------|--|---------------------------------------|
| 8/21/22            | Becky Toth<br>[REDACTED]  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC                | Business owner,<br>Natural Health Solutions   | \$50.00                     | \$50.00  | \$50.00                               |
| 9/13/22            | Kathleen Harris<br>[REDACTED]   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC                | Independent<br>Retired  | \$30.00                     | \$30.00  | \$30.00                               |
| <del>8/5/22</del>  | <del>Sheri Keller<br/>175 N Harbor Drive, Apt 241<br/>Chicago, IL, 60601</del>                  | <del><input checked="" type="checkbox"/> IND<br/><input type="checkbox"/> COM<br/><input type="checkbox"/> OTH<br/><input type="checkbox"/> PTY<br/><input type="checkbox"/> SCC</del> | <del>Sales<br/>Kindbody</del>   | <del>VOID</del>             |  |                                       |
| 8/22/22            | Jonathan Crosthwaite<br>[REDACTED]  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC                | Public officer,<br>Metropolitan<br>Public Transportation                                      | \$300.00                    | \$300.00   | \$300.00                              |
| 8/1/22             | Feling Thom<br>[REDACTED]   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC                | Retired,<br>Housewife   | \$98.57                     | \$398.57   | \$398.57                              |
| <b>SUBTOTAL \$</b> |   |  |   |                             | <b>\$ 778.57</b>                                       | <b>"</b>                              |

\*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  
to whole dollars.

SCHEDULE A (CONT.)

|   |  |
|---|--|
| Statement covers period<br>from <u>JULY 1, 2022</u><br>through <u>SEPT 24, 2022</u> | <b>CALIFORNIA FORM 460</b><br>Page <u>7</u> of <u>15</u> |
|---|--|

|  |                               |
|--|-------------------------------|
| NAME OF FILER<br><b>STEPHANIE KLEIN FOR LEMON GROVE CITY COUNCIL 2022 FPPC 1449935</b> | I.D. NUMBER<br><b>1449935</b> |
|--|-------------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 8/1/22             | Felina Thom<br>[REDACTED]   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Housewife, retired  | \$ 300.00                   | 398.57   | 398.57                                |
| 7/30/22            | Armenia Macias Salazar<br>[REDACTED]  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Social worker<br>County of sand. co   | \$ 50.00                    | \$ 50.00   | \$ 50.00                              |
| 8/22/22            | Patrick Brennan<br>[REDACTED]   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Food Broker<br>owner of<br>Brennan Associate  | \$ 500.00                   | 982.86   | \$ 982.86                             |
| 8/20/22            | Bryon Scott<br>[REDACTED]   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Pastor,<br>Engage Community<br>Church   | \$ 100.00                   | \$ 100.00  | \$ 100.00                             |
| 9/9/22             | Alex Ritola<br>[REDACTED]   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Independent<br>contractor,<br>Self Employed   | \$ 30.00                    | \$ 30.00   | \$ 30.00                              |
| <b>SUBTOTAL \$</b> |   |   |   |                             | <b>\$ 1,561.43</b>                                     | <b>1</b>                              |

\*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  
to whole dollars.

SCHEDULE A (CONT.)

|   |                            |
|---|----------------------------|
| Statement covers period<br>from <u>July 1, 2022</u><br>through <u>Sept 24, 2022</u> | <b>CALIFORNIA FORM 460</b> |
|   | Page <u>8</u> of <u>15</u> |
| I.D. NUMBER<br><del>149935</del> <u>1449935</u>                                     |                            |

NAME OF FILER  
**STEPHANIE KLEIN FOR LEMON GROVE CITY COUNCIL 2022 FPPC ~~149935~~ 1449935**

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 9/19/22            | Sergio Padilla<br>[REDACTED]  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | \$ 20.00                    | \$ 20.00   | \$ 20.00                              |
| 9/19/22            | Jessica Heredia<br>[REDACTED]   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Hairdresser,<br>"Hairsnite it is".  | \$ 100.00                   | \$ 100.00  | \$ 100.00                             |
| 9/19/22            | Juliet Debnicis<br>[REDACTED]   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Analyst,<br>Co Baddy  | \$ 20.00                    | \$ 30.00   | \$ 30.00                              |
| 9/19/22            | David Ray<br>[REDACTED]   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Business Coach,<br>Self-employed<br>Drive Ray coaching<br>& consulting.                       | \$ 20.00                    | \$ 20.00   | \$ 20.00                              |
|                    |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                             |  |                                       |
| <b>SUBTOTAL \$</b> |   |   |   |                             | <u>\$ 170.00</u>                                       | "                                     |

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  
to whole dollars.

SCHEDULE A (CONT.)

|   |                                      |
|---|--------------------------------------|
| Statement covers period<br>from <u>July 1, 2022</u><br>through <u>Sept 24, 2022</u> | <b>CALIFORNIA FORM 460</b>           |
| Page <u>9</u> of <u>15</u>  | I.D. NUMBER<br><u>140935-1449935</u> |

NAME OF FILER  
**STEPHANIE KLEIN FOR LEMON GROVE CITY COUNCIL 2022 FPPC ~~140935~~ 1449935**

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME) OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|--|-----------------------------|--|---------------------------------------|
| 9/19/22            | Paul Shanahan<br>[REDACTED]   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | scientist,<br>Department of Defense  | \$50.00                     | \$ 50.00   | \$ 50.00                              |
| 9/15/22            | Dale R. Garant<br>[REDACTED]  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Computer software developer,<br>Epix, Inc.   | \$ 100.00                   | \$ 100.00  | \$ 100.00                             |
| 9/18/22            | Nathan Nguyen<br>[REDACTED]   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Student,<br>University of San Diego  | \$ 50.00                    | \$ 50.00   | \$ 50.00                              |
| 9/19/22            | Jill Mitschke<br>[REDACTED]   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired  | \$ 100.00                   | \$ 100.00  | \$ 100.00                             |
| 9/19/22            | Dustin Daneri<br>[REDACTED]   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Civil Design engineer,<br>Latitude 33 Planning And engineering                                 | \$ 25.00                    | \$ 25.00   | \$ 25.00                              |
| <b>SUBTOTAL \$</b> |   |   |  |                             | <b>\$ 325.00</b>                                       | <b>"</b>                              |

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 (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  
to whole dollars.

SCHEDULE A (CONT.)

|   |                             |
|---|-----------------------------|
| Statement covers period<br>from <u>July 1, 2022</u><br>through <u>Sept 24, 2022</u> | <b>CALIFORNIA FORM 460</b>  |
|   | Page <u>10</u> of <u>15</u> |
| I.D. NUMBER<br><del>149935</del> <u>1449935</u>                                     |                             |

NAME OF FILER  
**STEPHANIE KLEIN FOR LEMON GROVE CITY COUNCIL 2022 FPPC ~~149935~~ 1449935**

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME) OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|--|-----------------------------|--|---------------------------------------|
| 9/19/22            | Karen Damari<br>[REDACTED]  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Carretaker,<br>In Home Supportive Services   | \$ 40.00                    | \$ 65.00   | \$ 65.00                              |
| 9/19/22            | Victoria Vega<br>[REDACTED]   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Office Administrator,<br>MTR Child & Family Services   | \$ 100.00                   | \$ 100.00  | \$ 100.00                             |
| 9/19/22            | Shacole Hamlett<br>[REDACTED]   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Owner,<br>The Hamlett Coffee Shop  | \$ 200.00                   | \$ 200.00  | 200.00                                |
| 9/19/22            | Teresa Rosiak<br>[REDACTED]   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Auditor,<br>Sharp Healthcare   | \$ 50.00                    | \$ 50.00   | \$ 50.00                              |
| 9/19/22            | Jeff Galford<br>[REDACTED]  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Loan officer,<br>Veteran Home Loans  | \$ 50.00                    | \$ 50.00   | \$ 50.00                              |
| <b>SUBTOTAL \$</b> |   |   |  |                             | <b>\$ 465.00</b>                                       | <b>  </b>                             |

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

**Schedule C  
Nonmonetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE C

|   |                             |
|---|-----------------------------|
| Statement covers period<br>from <u>JULY 1, 2022</u><br>through <u>SEPT 24, 2022</u> | <b>CALIFORNIA FORM 460</b>  |
|   | Page <u>11</u> of <u>15</u> |
| I.D. NUMBER<br><b>1449935</b>   |                             |

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

**STEPHANIE KLEIN FOR LENOX GROVE CITY COUNCIL 2022 FPPC 1449935**

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE*   | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | DESCRIPTION OF GOODS OR SERVICES | AMOUNT/ FAIR MARKET VALUE | CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|--|---|--|----------------------------------|---------------------------|---|------------------------------------|
| 9/19/22       | Erica Earl/District<br>[REDACTED]  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Nurse/RN<br>Critical Care  | wine basket for raffle           | \$ 50.00                  | \$ 50.00  | \$ 50.00                           |
| 9/19/22       | Kunmy Chen<br>[REDACTED]   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Business Owner,<br>Onyx Moto LLC   | campaign kickoff food            | \$ 300.00                 | \$ 600.00   | \$ 600.00                          |
| 9/19/22       | Karina Kavalis<br>[REDACTED]   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Business Owner,<br>Zest Wine Pistro  | Campaign Kickoff venue           | \$ 200.00                 | \$ 200.00   | \$ 200.00                          |
|               |  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |  |                                  |                           |   |                                    |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 5

1050.00

**Schedule C Summary**

- Amount received this period – itemized nonmonetary contributions.  
(Include all Schedule C subtotals.).....\$ 500.00
- Amount received this period – unitemized nonmonetary contributions of less than \$100.....\$ 50.00
- Total nonmonetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.).....**TOTAL \$** 550.00

\*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 E  
Payments Made**

Amounts may be rounded to whole dollars.

|   |                                      |
|---|--------------------------------------|
| Statement covers period<br>from <u>July 1, 2022</u><br>through <u>Sept 24, 2022</u> | <b>CALIFORNIA FORM 460</b>           |
|   | Page <u>12</u> of <u>15</u>          |
|   | I.D. NUMBER<br><u>140035 1449935</u> |

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

**STEPHANIE KLEIN FOR LEMON GROVE CITY COUNCIL 2022 FPPC 140035- 1449935**

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

- |  |  |  |
|--|--|--|
| <b>CMP</b> campaign paraphernalia/misc.                                  | <b>MBR</b> member communications                     | <b>RAD</b> radio airtime and production costs                        |
| <b>CNS</b> campaign consultants  | <b>MTG</b> meetings and appearances                  | <b>RFD</b> returned contributions                                    |
| <b>CTD</b> contribution (explain nonmonetary)*                           | <b>OFC</b> office expenses                           | <b>SAL</b> campaign workers' salaries                                |
| <b>CVC</b> civic donations   | <b>PET</b> petition circulating                      | <b>TEL</b> t.v. or cable airtime and production costs                |
| <b>FIL</b> candidate filing/ballot fees                                  | <b>PHO</b> phone banks                               | <b>TRC</b> candidate travel, lodging, and meals                      |
| <b>FND</b> fundraising events  | <b>POL</b> polling and survey research               | <b>TRS</b> staff/spouse travel, lodging, and meals                   |
| <b>IND</b> independent expenditure supporting/opposing others (explain)* | <b>POS</b> postage, delivery and messenger services  | <b>TSF</b> transfer between committees of the same candidate/sponsor |
| <b>LEG</b> legal defense   | <b>PRO</b> professional services (legal, accounting) | <b>VOT</b> voter registration  |
| <b>LIT</b> campaign literature and mailings                              | <b>PRT</b> print ads                                 | <b>WEB</b> information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR               | DESCRIPTION OF PAYMENT                                | AMOUNT PAID |
|---|-----------------------|---|-------------|
| Pace Print and Design LLC<br>[REDACTED]                             | LIT                   | INVOICE FA 2209-0009<br>Campaign mailers, installment | \$ 2000.00  |
| Pace Print and Design LLC<br>[REDACTED]                             | WEB                   | Invoice #16<br>Web Host Services monthly fee          | \$ 20.00    |
| Pace Print and Design LLC<br>[REDACTED]                             | <del>LIT</del><br>CMP | INVOICE FA 2208-0003<br>Banners, signs                | \$ 407.63   |

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

**SUBTOTAL \$ 2427.<sup>63</sup>**

**Schedule E Summary**

|  |   |
|--|---|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.)   | \$ <u>\$ 3,307.<sup>63</sup></u>              |
| 2. Unitemized payments made this period of under \$100   | \$ <u>\$ 313.<sup>45</sup></u>                |
| 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)                   | \$ <u>0</u>                                   |
| 4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) | <b>TOTAL \$ <u>\$ 3,621.<sup>08</sup></u></b> |

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

Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

|   |                                      |
|---|--------------------------------------|
| Statement covers period<br>from <u>July 1, 2022</u><br>through <u>Sept 24, 2022</u> | <b>CALIFORNIA<br/>FORM 460</b>       |
|   | Page <u>13</u> of <u>15</u>          |
|   | I.D. NUMBER<br><u>140935 1449935</u> |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

STEPHANIE KLEIN FOR LEMON GROVE CITY COUNCIL 2022 FPPC ~~140935~~ 1449935

**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                  | 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                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND 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<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT                         | AMOUNT PAID |
|---|---------|--|-------------|
| Pace Print and Design LLC<br>[REDACTED]                             | LIT     | INVOICE FA2208-0005<br>500 Cards               | \$37.63     |
| Pace Print and Design LLC<br>[REDACTED]                             | WEB     | Invoice #11<br>Web Host services monthly fee   | \$20.00     |
| Pace Print and Design LLC<br>[REDACTED]                             | LIT     | Invoice FA2207-0002<br>Campaign Business Cards | \$52.17     |
| Regina Sykes c/o G's Crafty Craft Boutique<br>[REDACTED]            | CMP     | Invoice #100<br>Campaign T-Shirts x 100        | \$900.00    |
| Pace Print and Design LLC<br>[REDACTED]                             | WEB     | Invoice #1<br>Webstart up & Host Services      | \$92.90     |

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

**SUBTOTAL \$** 1,102.72

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

Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

|   |                                      |
|---|--------------------------------------|
| Statement covers period<br>from <u>July 1, 2022</u><br>through <u>Sept 24, 2022</u> | <b>CALIFORNIA<br/>FORM 460</b>       |
|   | Page <u>14</u> of <u>15</u>          |
|   | I.D. NUMBER<br><u>149935 1449935</u> |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

STEPHANIE KLEIN FOR LEMON GROVE CITY COUNCIL 2022 FPPC ~~149935~~ 1449935

**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                  | 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                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND 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<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT  | AMOUNT PAID |
|---|---------|---|-------------|
| County of San Diego Registrar of Voters<br>[REDACTED]               | POL     | Lemon Grove May 91945, 91946<br>Transaction # 194374628         | \$54.41     |
| County of San Diego Registrar of Voters<br>[REDACTED]               | POL     | Registered Voter Data<br>Lemon Grove<br>Transaction # 195460294 | \$36.34     |
|   |         |   |             |
|   |         |   |             |
|   |         |   |             |

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

**SUBTOTAL \$ 690.75**

FPPC Form 460 (Jan/2016))

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

[www.fppc.ca.gov](http://www.fppc.ca.gov)

