Recipient Committee				COVER PAGE
			Date Stamp	CALIFORNIA 160
Campaign Statement		200	DECEIVED	CALIFORNIA 460
Cover Page			RECEIVED	· Ortin
		I		Page1 of15
	Statement covers period	Date of election if applicable:	SEP 2 7 2018	
	from July 1, 2018	(Month, Day, Year)	SEI 2 8 2010	For Official Use Only
			City Clerk's Office	
SEE INSTRUCTIONS ON REVERSE	through September 22, 2018	11/06/2018	City Of Laguna Beach, C.	^
	tinough		Oity of Laguna Deach, C.	A
1. Type of Recipient Committee: All Committees - Cor	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:		
✓ Officeholder, Candidate Controlled Committee □ P	rimarily Formed Ballot Measure	✓ Preelection Statement	Пош	dad. Clatarant
	Committee	Semi-annual Statemen		rterly Statement
○ Recall	Controlled	☐ Termination Statement	□ Spec	cial Odd-Year Report
	Sponsored	(Also file a Form 410 Te	ermination)	
☐ General Purpose Committee	llso Complete Part 6)	Amendment (Explain be	elow)	
○ Sponsored ☐ P	rimarily Formed Candidate/			
- ontain continuation continuation	Officeholder Committee			
O Political Party/Central Committee	Iso Complete Part 7)			
3. Committee Information	. NUMBER	T		
	387291	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)		NAME OF TREASURER		
Friends of Judie Mancuso Election Committee 2	018	Michael E. Morris		
		MAILING ADDRESS		
STREET ADDRESS (NO P.O. BOX)		CITY	STATE ZIP CO	DDE AREA CODE/PHONE
		Laguna Beach	CA 9265	1
CITY STATE ZIP COD		NAME OF ASSISTANT TREASURE	R, IF ANY	
Laguna Beach CA 92651				
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX		MAILING ADDRESS		
CITY STATE ZIP COD	DE AREA CODE/PHONE	CITY	STATE ZIP CC	DDE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS				
OF HOMAL, FAX / E-WAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRES	S	
4. Verification				
I have used all reasonable diligence in preparing and reviewin certify under penalty of perjury under the laws of the State of C	g this statement and to the best of my kn	owledge the information contained	herein and in the attached sch	edules is true and complete. I
	1.4	Minnia		
Executed on September 27, 2018	By Which	at Monis		
Contember 27, 2019		Signature of Treasurer or Assistant	Treasurer	
Executed on September 27, 2018	BySignature of Controll	ight rome	De Constitution de Constituti de Constitution de Constitution de Constitution de Constitution	
Date	Signature of Controll	ng Officeholder, Candidate, State Measure Pro	purient of Responsible Officer of Sponso	DF
Executed on	BySign	nature of Controlling Officeholder, Candidate, S	tate Measure Proponent	
	Sigi	5. Controlling Officeriolaci, Canadate, 5	nate measure responding	
Executed on	BySign	nature of Controlling Officeholder, Candidate, S	tate Measure Proponent	

COVER PAGE

Recipient Committee Campaign Statement Cover Page — Part 2

	COVER PA	AGE - PART 2
	FORNIA DRM	460
Page_	20	_f 15

Officeholder or Candidate Controlle	d Committee	6.	Primarily Formed Ballo	t Measure	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE				
Judie Mancuso							
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AF	ND DISTRICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICT	ION		SUPPORT
Laguna Beach City Council (seeking)							OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STR 1525 Skyline Drive,	EET) CITY STATE ZIP Laguna Beach, CA 92651		Identify the controlling office	holder, cand	lidate, or state mea	sure prop	onent, if any.
			NAME OF OFFICEHOLDER, CAN	DIDATE, OR P	ROPONENT		
Related Committees Not Included in not included in this statement that are controlled contributions or make expenditures on behalf of	by you or are primarily formed to receive		OFFICE SOUGHT OR HELD		DIS.	TRICT NO. I	FANY
COMMITTEE NAME	I.D. NUMBER						
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS	CONTROLLED COMMITTEE?	7.	Primarily Formed Cand officeholder(s) or candidate(s)	for which thi	ceholder Comm s committee is prima	arily forme	st names of d.
			TANKE OF OF HOLHOLDER OR OF	ANDIDATE	OFFICE SOOGHT	OK RELD	SUPPORT OPPOSE
CITY STATE	ZIP CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR CA	110101-	05510# 04115115		01100
			NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT (OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT (OR HELD	SUPPORT
COMMITTEE ADDRESS STREET ADDRESS							☐ OPPOSE
CITY STATE	ZIP CODE AREA CODE/PHONE		Attac	ch continuati	ion sheets if neces:	sary	

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Friends of Judie Mancuso Election Committee 2018 1387291 Column A Column B Calendar Year Summary for Candidates Contributions Received TOTAL THIS PERIOD CALENDAR YEAR (FROM ATTACHED SCHEDULES) Running in Both the State Primary and TOTAL TO DATE General Elections 8474 1. Monetary Contributions Schedule A, Line 3 \$ _____ 1/1 through 6/30 7/1 to Date 4000 4000 20. Contributions 12114 12474 SUBTOTAL CASH CONTRIBUTIONS...... Add Lines 1 + 2 \$ Received 275 275 4. Nonmonetary Contributions...... Schedule C. Line 3 21. Expenditures 12389 12749 5. TOTAL CONTRIBUTIONS RECEIVEDAdd Lines 3 + 4 S _____ Made **Expenditures Made Expenditure Limit Summary for State** 8542 Candidates 7. Loans Made...... Schedule H. Line 3 0 22. Cumulative Expenditures Made* SUBTOTAL CASH PAYMENTS...... Add Lines 6 + 7 \$ 8396 8542 (If Subject to Voluntary Expenditure Limit) 9. Accrued Expenses (Unpaid Bills)Schedule F. Line 3 Date of Election Total to Date 0 0 (mm/dd/yy) 8396 8542 **Current Cash Statement** 475 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ ______ To calculate Column B. 12114 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. 8396 of your last report. Some 15. Cash Payments Column A, Line 8 above amounts in Column A may 4193 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 from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). 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 Monetary Contributions Received			nts may be rounded whole dollars.	Statement covers period from July 1, 2018			CALIFORNIA 460	
EE INSTRUCTIO	DNS ON REVERSE			through Septem	ber 22, 2018	Page	4 of <u>15</u>	
Friends of	Judie Mancuso Election Committee 2018					1.D. NU 13872	JMBER 291	
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)	
7/11/2018	Jim Mouradick 1278 Glenneyre Street, #202, Laguna Beach, CA 92651	☑IND □COM □OTH □PTY □SCC	retired	360	3	60	360	

☑ IND Carol Mouradick Псом retired 7/11/2018 360 360 1278 Glenneyre Street, #202. 360 Потн Laguna Beach, CA 92651 [] PTY □scc □IND Mike Gatto for LG 2022, ID#:1400399. **Z** сом 7/21/2018 360 360 360 5419 Hollywood Blvd., Suite C-356, □отн Los Angeles, CA 90027 ☐ PTY □scc ✓ IND David Quintana □сом Self-employed 7/21/2018 360 360 360 1215 K Street Suite 2260 □отн The Quintana Cruz Sacramento, CA 95814 PTY Company □scc ✓ IND John D'Amico Project Manager Псом 7/21/2018 8623 Rugby Drive, West Hollywood 90069 180 180 180 Потн University of California, ☐ PTY Los Angeles □ scc

SUBTOTAL \$ 1620.00

Schedule A Summary

1. Amount received this period – itemized monetary contributions. 7400 (Include all Schedule A subtotals.)\$ ___ 714 2. Amount received this period – unitemized monetary contributions of less than \$100\$

3. Total monetary contributions received this period. 8114 (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

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA **FORM**

Statement covers period

from_

July 1, 2018

NAME OF FILER Friends of J	udie Mancuso Election Committee 2018	through September 22, 2018			5 of <u>75</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 CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
7/22/2018	Mark Weideman 1215 K Street Suite 2290 Sacramento, CA 95814	☑IND □COM □OTH □PTY □SCC	Self-employed Weideman Group, Inc.	360	31	60	360
7/22/2018	Dr. Richard Sullivan 20447 Hawthorne Blvd. Torrance, CA 90503	☑IND □COM □OTH □PTY □SCC	Veterinarian Bay Cities Pet Hospital, Inc.	200	20	00	200
7/22/2018	Judie Mancuso P.O. Box 1125 Laguna Beach 92652-1125	☑IND □COM □OTH □PTY □SCC	CEO & President Social Compassion in Legislation (501c4)	100	10	00	100
7/27/2018	Donna Dennison 3435 Ocean Park Blvd., STE 107-33 Santa Monica, CA 90405	☑IND □COM □OTH □PTY □SCC	CEO, Creative Dreams	100	10	00	100
7/30/2018	Victor Gambone Jr. 1504 Skyline Dr., Laguna Beach, CA 92651	☑IND □COM □OTH □PTY □SCC	retired	100	10	00	100
200	SUBTOTAL \$ 860.00						

*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

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA 4.0

Statement covers period

, in the second second				from July 1	, 2018	F	ORM 460
				through Septemi	per 22, 2018	Page .	6 of 15
NAME OF FILER						I,D. NI	JMBER
Friends of J	udie Mancuso Election Committee 2018					13872	291
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)
7/30/2018	Dr. Cheryl Waterhouse 11352 N. Sandhaven Avenue Fresno, CA 93730-7015	☑ IND □ COM □ OTH □ PTY □ SCC	self-employed Waterhouse Animal Hospital	200	21	00	200
7/30/2018	Josh Balk 815 Thayer Ave. Silver Spring, MD 20910	☑IND □COM □OTH □PTY □SCC	Non-profit worker, Humane Society of the US	360	36	30 i	360
9/07/2018	Chris Tebbutt 2 Ritz Carlton Dr., Dana Point, CA 92629	☑IND □COM □OTH □PTY □SCC	Real Estate Agent Berkshire Hathaway Homeservices	100	10	00	100
9/07/2018	Patty Shenker 5927 Cahill Ave. Tarzana, CA 91356-1207	ØIND □COM □OTH □PTY □SCC	retired	250	25	50	250
9/07/2018	Orange County League of Conservation Voters P.O. Box 1303, Huntington Beach, CA 92647 FPPC ID 1223961	□IND ☑ COM □ OTH □ PTY □ SCC		360	36	60	360
	SUBTOTAL \$ 1270.00						

*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

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Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

July 1, 2018

				fromJuly 1	, 2018	FC	ORM T	
				through Septemb	oer 22, 201	Page _	7 of <u>15</u>	5
NAME OF FILER						I.D. NU	MBER	
Friends of J	udie Mancuso Election Committee 2018					13872	91	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTIO TO DATE (IF REQUIRED	
9/07/2018	Hoyt Bacon 1514 Skyline Drive, Laguna Beach, CA 92651	☑IND □COM □OTH □PTY □SCC	retired	250	25	50		250
9/10/2018	Sherry DeBoer 27179 Meadows Rd. Carmel, CA 93923	☑IND □COM □OTH □PTY □SCC	retired	360	36	60		360
9/10/2018	Eric Carter 1415 Coral Dr., Laguna Beach, CA 92651	☑IND □COM □OTH □PTY □SCC	retired	250	25	50		250
9/10/2018	Francis Carter 1415 Coral Dr., Laguna Beach, CA 92651	☑IND □COM □OTH □PTY □SCC	retired	250	25	50		250
9/10/2018	Holly Fraumeni-DeJesus 3324 SWAllows Nest Lane Sacramento, CA 95833	☑IND □COM □OTH □PTY □SCC	Political Advocate, Partner Lighthouse PA	360	36	0		360
SUBTOTAL \$ 1								

*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)

6325 Topanga Canyon Blvd

John D'Amico

Paul Bauer

770 L Street, Suite 1440

Sacramento, CA 95814

Suite 435, Woodland Hills, CA, 91367

8623 Rugby Drive, West Hollywood 90069

Amounts may be rounded

SCHEDULE A (CONT.)

360

280

360

Monetary	Contributions Received	to whole	dollars.	Statement cov from July 1	ers period , 2018		FORNIA 460
				through Septemb	er 22, 2018	Page _	8 of <u>15</u>
NAME OF FILER		***************************************				I.D. NUN	MBER
Friends of J	Judie Mancuso Election Committee 2018					138729	91
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)
9/12/2018	Wilk for Senate 2020 7185 Navajo Rd, Suite P,San Diego, CA 92119 FPPC ID:1392822	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		360	3	60	360
9/15/2018	Jeffory A. Smith 1105 Skyline Drive Laguna Beach, CA 92651	☑ IND □ COM □ OTH □ PTY □ SCC	retired	100	1	00	100
0/40/0040	Dr. Jim Jensvold, DDS	☑IND	self-employed		••		

Oral Surgeon

Project Manager

Political Advocate,

Mercury Public Affairs,

Los Angeles

LLC

University of California,

□сом

□ OTH

□ PTY scc **☑** IND

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PTY Scc

SUBTOTAL \$	1 36 0.00	

360

100

360

*Contributor Codes

IND - Individual

9/16/2018

9/19/2018

9/19/2018

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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360

280

360

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

				fromJuly 1, 2018		F	ORM 400
				through Septemb	per 22, 2018	Page _	9 of 15
NAME OF FILER	Judie Mancuso Election Committee 2018					I.D. NU	
Therius or a	Tudie Mancuso Liection Committee 2018					13872	91
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 YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
9/22/2018	M.J. Abraham 31852 Seaview St., Laguna Beach, CA 92651	☑ IND □ COM □ OTH □ PTY □ SCC	retired	360	36	60	360
9/22/2018	Loreen Gilbert 1605 Tahiti Ave. Laguna Beach, CA 92651	☑ IND □ COM □ OTH □ PTY □ SCC	President Wealthwise Financial Services	360	36	60	360
9/21/2018	Wendy Crimp 220 Cypress, Laguna Beach, CA 92651	☑ IND □ COM □ OTH □ PTY □ SCC	Self-employed Crimp Resource Group	100	10	00	100
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC				- The state of the	
	SUBTOTAL \$ 820.00						

*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

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www.fppc.ca.gov

Schedu	le l	B –	Part	1
Loans R	ec	:eiv	ed	

Amounts may be rounded

	PART 1

Loans Received	to whole dollar	s.		Statement cov	•	CALIFORNIA 460		
200110 110001100				**************************************	from July	I, 2018	FORM	
SEE INSTRUCTIONS ON REVERSE					through Septem	nber 22, 20 4	Page10	of <u>16</u>
NAME OF FILER				•			I.D. NUMBER	
Friends of Judie Mancuso Election Comr	nittee 2018						1387291	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. 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 FORGIVEN THIS PERIOD	L CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Judie Mancuso 1525 Skyline Drive Laguna Beach, CA, 92651	CEO & President, Social Compassion in Legislation, 501c4 non-p			s FORGIVEN	s 2000	% RATE	s 2000	S 2000 PER ELECTION**
TIND COM OTH PTY SCC		s0	s 2000	S	DATE DUE	s	8/27/18 DATE INCURRED	s
Judie Mancuso 1525 Skyline Drive Laguna Beach, CA, 92651	CEO & President, Social Compassion in Legislation, 501c4 non-p			PAID s FORGIVEN	s 2000	RATE	s 2000	s 2000 PER ELECTION**
[†] ☑IND □ COM □ OTH □ PTY □ SCC		s0	s 2000	s	DATE DUE	s	9/22/18 DATE INCURRED	S
				PAID S FORGIVEN	\$	% RATE	s	SPER ELECTION**
TO IND COM OTH PTY SCC			\$	s	DATE DUE	\$	DATE INCURRED	s
***************************************	<u> </u>	SUBTOTALS \$	4000 \$	0	\$ 4000			
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
Loans received this period (Total Column (b) plus unitemized loan		•••••		\$	4000	(†c	ontributor Codes	
 Loans paid or forgiven this period (Total Column (c) plus loans under \$10 (Include loans paid by a third party that 	00 paid or forgiven.)			\$	0_	IN CC	D – Individual DM – Recipient Co (other than F FH – Other (e.g., t	PTY or SCC) pusiness entity)
 Net change this period. (Subtract Line Enter the net here and on the Summar 					4000		Y – Political Party CC – Small Contril	
Line the net here and on the cultiffial	, rago, commina, cine z.			tes.	.,			

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

Schedule B - Part 2 **Loan Guarantors**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

Statement covers period **CALIFORNIA FORM** July 1, 2018 from_ through September 22, 201 Page ____11 __ of __15 I.D. NUMBER

.....

Friends of Judie Mancuso Election Committee	∋ 2018				1387291	
FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
None	□ IND		LENDER		CALENDAR YEAR	
	□ОТН □РТҮ		DATE	The state of the s	PER ELECTION (IF REQUIRED)	
	□scc				\$	
			LENDER		CALENDAR YEAR	And the control of th
	□ COM □ OTH □ PTY		DATE		PER ELECTION (IF REQUIRED)	
	□scc				s	
	☐ IND		LENDER		CALENDAR YEAR	
	□OTH □PTY		DATE		PER ELECTION (IF REQUIRED)	
	□scc				\$	
	☐ IND		LENDER		CALENDAR YEAR	
	OTH		DATE		PER ELECTION (IF REQUIRED)	
	□scc				s	
			SUBTOTAL	\$	Enter on Summary Page, Line 17 only.	

Schedu	ile C		Amounts may be rounded						SCHEDULE
Nonmo	netary Contributions Received		to whole dollars.		s	tatement covers	•	CALIF	ORNIA 460
					from	July 1, 2	018	FO	RM TOC
	TIONS ON REVERSE				thro	ugh <u>Septembe</u>	r 22, 29	Page	12 of 15
NAME OF FILE	Ŕ		***************************************					I.D. NUME	BER
Friends o	of Judie Mancuso Election Committee 2018							138729	11
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 O GOODS OR SERVI		AMOUNT/ FAIR MARKET VALUE	CALEND	ATIVE TO ATE AR YEAR DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
9/15/2018	Phil Abraham P.O. Box 9677 Laguna Beach, CA 92652	☑IND □COM □OTH □PTY □SCC	Self-employed PJ & MJ Abraham, Inc.	In-kind food donation, Sourced Cuisi	ne	275		275	275
		□IND □COM □OTH □PTY □SCC							
		□IND □COM □OTH □PTY □SCC			A A A A A A A A A A A A A A A A A A A			7	
		□IND □COM □OTH □PTY □SCC			The state of the s			A COLUMN TO THE PARTY OF THE PA	
Attach add	litional information on appropriately labeled	continuation s	sheets.	SUBTO	TAL \$	275			
1. Amount	e C Summary received this period – itemized nonmonetary	y contributions	S.	erve Priedingslehm	Œ	275	IND	ntributor Cod – Individual 1 – Recipieo	es t Committee

1.	. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.)\$	·	275
2.	. Amount received this period – unitemized nonmonetary contributions of less than \$100\$		
3.	. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)		275

(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 fromJuly 1, 2018	CALIF(SCHEDULE ORNIA 460 RM	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER	• • • • • • • • • • • • • • • • • • • •		and the second s	through September 22, 20	Page	
Friends of Judie Mancuso Election Committee 2018					138729	
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS 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 com MTG meetings and OFC office expens PET petition circu PHO phone banks POL polling and s POS postage, deli PRO professional PRT print ads	nmunications d appearanc ses lating urvey resear	es ch ssenger services	herwise, describe the payment. RAD radio airtime and production returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production trace candidate travel, lodging, ar transfer between committee voter registration web information technology costs.	duction costs nd meals and meals es of the same	e candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR D	DESCRIPTION OF PAYMENT		AMOUNT PAID
Stu News Laguna 668 N. Coast HWY, 1125, Laguna Beach, CA 92651		PRT	Online Ad	**************************************		400.00
DPOC 1916 West Chapman, Suite B, Orange, CA 92868		CMP	Voter Access N	Network		500.00
Villere Design/iCandy Essentials 2075 Laguna Canyon Rd., Laguna Beach, CA 92651		PRT	Photos			350.00
Payments that are contributions or independent expenditures must also be	summarized on Sche	dule D.		su	BTOTAL \$	1250.00
Schedule E Summary			- минест			100.00
l. Itemized payments made this period. (Include all Schedule	E subtotals.)		••••••••••••		\$	8233.00
2. Unitemized payments made this period of under \$100			••••••		\$	163.00
B. Total interest paid this period on loans, (Enter amount from	n Schedule B. Part	1. Colum	n (e).)		\$	0

FPPC Form 460 (Jan/2016)

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

8396.00

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

Amounts may be rounded to whole dollars.

Statement covers period **CALIFORNIA FORM** July 1, 2018 through September 22, 204 Page _ I.D. NUMBER

1387291

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Judie Mancuso Election Committee 2018

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 candidate travel, lodging, and meals FND fundraising events TRS staff/spouse travel, lodging, and meals polling and survey research IND independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services transfer between committees of the same candidate/sponsor TSF

LEG legal defense PRO professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) ARDA Campaigns LLC Campaign management services 675 N. Euclid St., #481 CNS 1000.00 Anaheim, CA 92802-4639 Stu News Laguna Print ads, Aug & Sept 668 N. Coast HWY, #1125, Laguna Beach, CA 92651 PRT 800.00 City of Laguna Beach Candidate filing fee 505 Forest Ave. FIL 1000.00 Laguna Beach, CA 92651 CalSal Voter Guide Slate Mailer 22410 Hawthorne Blvd., Ste 5, Torrance, CA 90505-2500 LIT 438.00 Election Digest G2018 Slate Mailer 22410 Hawthorne Blvd., Ste 5 LIT 476.00 Torrance, CA 90505-2500 SUBTOTAL \$ 3714.00

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

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

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Statement covers period	CALIFORNIA AGO
fromJuly 1, 2018	FORM 400
through September 22, 201	Page 15 of 15
	I.D. NUMBER

1387291

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Judie Mancuso Election Committee 2018

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
	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		staff/spouse travel, lodging, and meals
	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services		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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Budget Watchdogs 22410 Hawthorne Blvd., Ste 5, Torrance, CA 90505-2500	LIT	Slate Mailer	665.00
CALIFORNIA OUTDOOR GRAPHICS South 3309 S Main St, Santa Ana, CA 92707	LIT	yard signs	1989.00
ARDA Campaigns LLC 675 N. Euclid St., #481 Anaheim, CA 92802-4639	PRT	Flyers	312.00
Educate Your Vote 16633 Ventura Blvd., Suite 1008 Encino, CA 91436 FPPC ID#: 1345655	LIT	Slate Mailer	303.00
<u>-</u>			

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

SUBTOTAL \$

3269.00