

Sasha Linker

From: Sherry Martini <sherryannmartini@yahoo.com>
Sent: Wednesday, August 16, 2017 11:22 PM
To: atitus@bmhlaw.com; Dustin Peterson; Phillip Ung; Rick Cole; Galena West; Ann Flaherty; CommAsst
Cc: Sue Himmelrich; Kevin McKeown; Ted Winterer; Eda Suh
Subject: Fw: Addition to Summary of call with Phillip Ung from FPCC re April 2015 Huntley Investigation
Attachments: NO ON LV HOME returned donations (I don't know) 06 30 2017.pdf; Santa Monica Forward Committee report 2016.pdf; Santa Monica Forward Committee report 2017.pdf

Letter to Fair Political Practices Commission from Santa Monica resident Sherry Ann Martini
Hon. Chair Remke and Commissioners Audero, Hatch and Hayward
August 16, 2017 RE:
Comment to August 17, 2017 Agenda, Items 3 and 4

I am a resident of Santa Monica and a mom of two young children. I live at 220 San Vicente Boulevard, a few blocks from the Miramar hotel.

I disagree with Ashlee Titus' statement made in her public comment letter for tomorrow's August 17, 2017 hearing where she opposes the wording in the proposed Stipulation as set forth below:

[From the Proposed Stipulation] *As did many other businesses and residents in the immediate neighborhood and throughout the city, The Huntley took issue with the Miramar's proposed expansion, primarily due to its adverse impacts on local traffic, its blocking of the sunlight and views of adjacent and nearby buildings, and the disruption to the quality of life that would be caused by its lengthy construction timetable."*

[Ashlee] **"This statement, as written, is inaccurate and misleading, and unnecessary."**

Ashlee is incorrect. This statement in the proposed stipulation is absolutely true and the whole truth is even more harmful. I ask that my email be made a part of the hearing tomorrow.

I have a multitude of emails between myself and former Miramar expansion head Alan Epstein from in and around July 2013 where these very matters are discussed and where I asked him for details on allegations the Miramar made in fliers and elsewhere. I was so dismayed by the fliers I received at my home and saw about town that I wrote Mr. Epstein to discuss them. They were harmful and distorted the truth. For instance, one of the allegations was that: *"At that meeting, according to a local attorney who attended by invitation [as if she were just a citizen], Manju Raman, the General Manager of the Huntley commented that she "doesn't want affordable housing next to her hotel" because she "sees the type of people coming out of the affordable housing located off the freeway and most of them are crazy." Latham & Watkins attorney Rick Zbur observed that, "if we can stop the condominiums, we can stop the affordable housing project."*

When I asked Alan who that "local attorney was" he after some time responded that it was Paula Lamore of Harding Lamore. Harding Lamore is an influential land use law firm in this city. Years later (just this month in fact), I was told Harding Lamore has been the Miramar's land use attorneys since 2010.

Ms. Titus in her public comment letter speaks ill of the Huntley campaign, but neglects to mention the harmful and demeaning flier the Miramar put out showing a darkened picture of the CEO of the hotel Sohrab Sassounian, as if he were a criminal, stating: *"Who is Sohrab Sassounian and why is he spending **millions** to smear the Miramar."* [emphasis added.]. I was shocked by this. (See linked *Santa Monica Mirror* article).

Further, when I asked Mr. Epstein to tell me how much the parking at the hotel would cost for neighbors and hotel workers I was never given an answer. This was one of the huge incentives the Miramar was floating in its literature and yet they could not tell anyone how much the parking would cost for neighbors or if it would be free for employees. They still to this

day will not tell us how much the parking will be. If it is too expensive, no employees or neighbors will benefit from it, so this was and is an important issue.

The Miramar also tried to put it out there that the Huntley was the only one behind the opposition which was, as they knew, not true. I spoke to Alan about this and told him I felt it was an attempt to quiet the citizens voices. So Ashlee knows full well that a large group of citizens opposed this project and for more important reasons than she cares to admit, such as sustainability, affordability (million dollar condos and luxury hotels drive costs up for residents), etc.

Ms. Titus goes on to say in her public comment letter:

"Finally, we only recently learned about the FPPC's investigation, and only recently received a copy of the proposed Stipulations. We have begun our own review of the campaign contribution history which is the subject of the proposed Stipulations in order to confirm that the proposed Stipulations are comprehensive. In that regard, we respectfully request that, to correct the public record and in accordance with the Commission's past practices, the Huntley be required to promptly file amended Major Donor campaign statements for all applicable reporting periods showing its direct and indirect contributions, and identifying each "intermediary" through whom these unlawful contributions were made, in order to match up these contributions with how they were reported by the recipients."

Based on Ms. Titus' request, I ask that the Miramar and any committee that supported it be asked to provide the same information Ms. Titus requests of the Huntley and that the FPPC thoroughly review both the Huntley's and the Miramar and pro-developer backed committees, during 2012, 2014 and 2016 (including 2016 "No on LV/Home" committee and "Santa Monica Forward Committee"). To use the language of the FPPC, this is a "proactive" request.

Finally, attached is an article that I fee appropriately captures the climate in Santa Monica at the time. Also, the email chain below captures my communications with the FPPC regarding this issue and others. In full transparency, I wish that this also be part of the August 17, 2017 record.

Thank you.

Sherry Martini
Mom
Activist

[Huntley Hotel Serves Notice On Fairmont Miramar Regarding "Smear Campaign": - Santa Monica Mirror](#)



Huntley Hotel Serves Notice On Fairmont Miramar Regarding "Smear Campaig...

If the Hatsfields and McCoys lived in Santa Monica in 2013, one family would be residing in the Fairmont Miramar...

Thank you.

Sherry Martini
Mom
Activist

(310) 309 0450

----- Forwarded Message -----

From: Sherry Martini <sherryannmartini@yahoo.com>

To: Phillip Ung <PUng@fppc.ca.gov>

Cc: gwest@fppc.ca.gov <gwest@fppc.ca.gov>; aflaherty@fppc.ca.gov <aflaherty@fppc.ca.gov>; Rick Cole <rick.cole@smgov.net>; Sue Himmelrich <sue.himmelrich@smgov.net>; Ted Winterer <ted.winterer@smgov.net>; Eda Suh <eda.suh@smgov.net>

Sent: Wednesday, August 16, 2017, 10:05:11 PM PDT

Subject: Addition to Summary of call with Phillip Ung from FPCC re April 2015 Huntley Investigation

Dear Mr. Ung:

Further proactive information before the hearing tomorrow:

1) As to No. 4 below, I see now that the Kaufman Legal was paid for its services by the Santa Monica Forward Committee in 2016, which committee came out heavily against the citizen-led Yes on LV and supported the developer-backed No on LV/Home Committee. As we discussed, the former Chief Enforcer of the FPPC, George Winuk, is also a partner with Kaufman Legal. You advised that Mr. Winuk left the FPPC in 2015, a couple of months before the investigation into the Huntley began in April 2015. I am again assuming there is no conflict and that Mr. Winuk had no access to the Huntley investigation nor did he have any part in the instigation of the Huntley investigation, but I would appreciate your confirmation regarding this. This is important because so many of the same people/corporations and LLCs that supported the 2012 and 2014 pro-developer committees, also supported the 2016 No on LV/Home and Santa Monica Forward Committees in 2016. They are intertwined. I have attached a Santa Monica Forward Committee's Report from 2016 and one from 2017 re same for your perusal.

(As stated below, it is my understanding that in or around October 2016 attorney George Yin of Kaufman Legal, Mr. Winuk's partner, filed a campaign violations' complaint against the citizen-led Yes on LV Committee on behalf of an individual who had clearly stated he was against Yes on LV -- I do not know the outcome of that complaint -- but please again confirm there is no conflict.)

2) I have also attached a 2017 report from the No on LV/Home Committee. Can you explain to me why I am seeing minus signs (-) in front of many of the donations on this 2017 report filed after the 2016 campaign was over? I don't quite understand this and was wondering if you could explain this to me.

Thank you. And I look forward to receiving the documents and information re discussed on the phone (specifically the name of the person who "initiated" the investigation into the Huntley. I also look forward to watching the hearing tomorrow and hoping that the process is fair and transparent.

Sherry Martini
Mom
Activist

On Friday, August 11, 2017, 6:55:44 PM PDT, Sherry Martini <sherryannmartini@yahoo.com> wrote:

[To Mr. Ung, Ms. West, Ms. Flaherty at the FPPC and City Council members, etc.]

Thanks for the call. I enjoyed speaking with you. I hope I did not delay you on a late Friday evening.

To memorialize our phone call:

1) You advised that a "commission initiated" investigation involves dozens of staff, attorneys, investigators, etc. who participate in a "proactive program" where they filter information (such as news articles and you stated possibly anonymous input) and look with a critical eye at jurisdictions that have low contribution limits and possibility of large development projects, pull campaign election statements, put those in spreadsheets and look for patterns. Once questionable patterns are discovered you open a case and try to obtain more documents through various means available to you. When the Huntley committee statements were obtained by the FPCC based on some "proactive"

initiation by the FPPC, a formal investigation was initiated because dozens of individuals who worked for the Huntley had donated the individual campaign maximum or close to it to the committee. This was a red flag.

2) You indicated that the Huntley investigation started in April 2015.

3) You advised that you do not know at this time who in the FPCC initiated the investigation and WHY, but you will attempt to find this out and provide it to me.

4) You indicated that Gary Winuk, the former FPPC Chief Enforcer who now works with George Yin at Kaufman Legal (who filed a complaint on behalf of a NO on LUV supporter in October 2016), left the FPCC in February 2015 and probably had no input into or access to the Huntley investigation and so there should be no conflict.

5) You indicated that you run conflict of interest checks and that all the commissioners at the August 17 hearing will be required to run one as well.

6) You advised that you will try to provide me with the documents from my PRA in the near future.

7) You also indicated that a red flag would exist if say, hypothetically, a group of attorneys from the same firm, a firm that represents developers, had individually donated thousands of dollars for a pro-development committee. (Of course, this could be completely legitimate, but, if I understood you correctly, this would be a "red flag.")

I'm wondering if a red flag would also exist if a corporate entity donated thousands and thousands of dollars through their LLCs, all for slightly different amounts like, for instance, \$11,223.23.

You encouraged me to file a complaint if I felt any improprieties had occurred as to No on LV and HOME committees from 2016, or as to any pro-development PAC or committee from 2012 and 2014, and I told you that there is no way for me to know if an impropriety had occurred as I am not an expert in this area, nor do I have the investigative tools available to the FPPC to allege same. To file a complaint without knowing someone has done something wrong is not something I wish to do.

I further advised that I would hope that the FPPC would use my emails as one of its "proactive" tools in order to look as closely at the other side, which consisted of millions of dollars in donations, as it looked at the Huntley committee.

8) You kindly stated that you hoped I had answered your questions and I stated that our votes are important and you seemed to share that point of view.

Thanks for your time!

Sherry
Mom
Activist

On Friday, August 11, 2017, 4:46:06 PM PDT, Sherry Martini <sherryannmartini@yahoo.com> wrote:

Mr. Ung:

I left you one message and then a f/u message with my phone number. (310) 309-0450.

If you want to understand my messages read my first and earliest email to Ms. West first. It provides a summary. But I'll try to recap here.

1) The Huntley investigation was said to be "commission initiated." This implies that someone within the commission initiated the investigation. How did this happen and who within the commission "initiated" it and what caused them to look into a small committee in Santa Monica? As a matter of transparency, there is no reason this information cannot be provided.

2) When the Commission decided to self-initiate an investigation against the Huntley committee, a small, citizen-supported, low impact group that was fighting billionaire Michael Dells' Miramar Hotel expansion, did the Commission also look at the millions and millions of dollars that have been funded through corporations, attorneys representing developers, LLCs and fake developer-funded PAC to fight the Santa Monica citizen-led slow growth committee(s) and to support City Council candidates who are pro-luxury development? This has been going on since 2010, with a step up in intensity increasing every year, and the effect has been to deny residents a real, undistorted vote in their elections. Essentially, what has happened, and is happening in Santa Monica is no different than what happened in our last Presidential election..

3) I ask that you investigate the NO on LV and HOME committees during the 2016 Santa Monica election with the same scrutiny you have applied to the Huntley. I also ask that you, in fairness, investigate the developer funded PACS during the 2012 and 2014 elections in Santa Monica, with the same scrutiny that you have applied to the Huntley. If you care about what is right, you will investigate the other side just as rigorously.

4) I am assuming Mr. Winuk, a former FPPC Chief now working with George Yin of Kaufman Law Group, had no involvement with the "commission initiated" investigation into the Huntley. George Yin has represented a man who filed a complaint against a citizen-led Committee in 2016 (YES on LV). As I am unaware of the timeline of the investigation, I cannot ascertain if Mr. Winuk's association with Mr. Yin presents or presented a conflict of interest. If you can tell me Mr. Winuk or his partners had no involvement in the Huntley investigation, then I can put that issue to rest.

5) I also assume Ms. West passed my PRA request on to you. Please let me know when I will receive the documents or if I need to clarify anything.

Again, if you care about fairness and citizens' rights to a real and undistorted vote, you will look at the other side just as closely as you looked at the Huntley.

Thank you.

Sherry
Mom
Activist
Slightly Unhinged trying to help my 12 and 14 year old kids' future

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Date Stamp

E-Filed 07/31/2017 13:45:44 Filing ID: 165549157

Statement covers period from 01/01/2017 through 06/30/2017	Date of election if applicable: (Month, Day, Year)
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SEE INSTRUCTIONS ON REVERSE

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

- Officeholder, Candidate Controlled Committee
 - State Candidate Election Committee
 - Recall
(Also Complete Part 5)
- Primarily Formed Ballot Measure Committee
 - Controlled
 - Sponsored
(Also Complete Part 6)
- General Purpose Committee
 - Sponsored
 - Small Contributor Committee
 - Political Party/Central Committee
- Primarily Formed Candidate/Officeholder Committee
(Also Complete Part 7)

2. Type of Statement:

- Preelection Statement
- Semi-annual Statement
- Termination Statement
(Also file a Form 410 Termination)
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report
- Supplemental Preelection Statement - Attach Form 495

3. Committee Information

I.D. NUMBER
1386316

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
NO ON LV, HOME - HOUSING & OPPORTUNITY FOR A MODERN ECONOMY,
SPONSORED BY SANTA MONICA HOUSING PROVIDERS

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
LOS ANGELES	CA	91364	(818) 593-2949

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS
CAMPAIGN@CAMPAIGNLAWYERS.COM

Treasurer(s)

NAME OF TREASURER

BRADLEY HERTZ

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
LOS ANGELES	CA	91364	(818) 593-2949

NAME OF ASSISTANT TREASURER, IF ANY

NICHOLAS SANDERS

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
LOS ANGELES	CA	91364	(818) 593-2949

OPTIONAL: FAX / E-MAIL ADDRESS

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 07/31/2017
Date

By BRADLEY W. HERTZ
Signature of Treasurer or Assistant Treasurer

Executed on _____
Date

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on _____
Date

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on _____
Date

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

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

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

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

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
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NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
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COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME	I.D. NUMBER
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NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
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COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE
LAND USE VOTER EMPOWERMENT MEASURE

BALLOT NO. OR LETTER LV	JURISDICTION CITY OF SANTA MONICA	<input type="checkbox"/> SUPPORT <input checked="" type="checkbox"/> OPPOSE
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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
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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 <input type="checkbox"/> OPPOSE
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NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

SUMMARY PAGE

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2017	
through	06/30/2017	Page <u>3</u> of <u>10</u>
SEE INSTRUCTIONS ON REVERSE		I.D. NUMBER
NAME OF FILER		1386316

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

NO ON LV, HOME - HOUSING & OPPORTUNITY FOR A MODERN ECONOMY, SPONSORED BY SANTA MONICA HOUSING PROVIDERS

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions Schedule A, Line 3	\$ <u>-24,208.96</u>	\$ <u>-24,208.96</u>
2. Loans Received Schedule B, Line 3	<u>0.00</u>	<u>0.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ <u>-24,208.96</u>	\$ <u>-24,208.96</u>
4. Nonmonetary Contributions Schedule C, Line 3	<u>0.00</u>	<u>0.00</u>
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ <u>-24,208.96</u>	\$ <u>-24,208.96</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	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

Expenditures Made

	Column A	Column B
6. Payments Made Schedule E, Line 4	\$ <u>5,216.49</u>	\$ <u>5,216.49</u>
7. Loans Made Schedule H, Line 3	<u>0.00</u>	<u>0.00</u>
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ <u>5,216.49</u>	\$ <u>5,216.49</u>
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	<u>-527.14</u>	<u>0.00</u>
10. Nonmonetary Adjustment Schedule C, Line 3	<u>0.00</u>	<u>0.00</u>
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ <u>4,689.35</u>	\$ <u>5,216.49</u>

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____

Current Cash Statement

12. Beginning Cash Balance Previous Summary Page, Line 16	\$ <u>29,425.45</u>
13. Cash Receipts Column A, Line 3 above	<u>-24,208.96</u>
14. Miscellaneous Increases to Cash Schedule I, Line 4	<u>0.00</u>
15. Cash Payments Column A, Line 8 above	<u>5,216.49</u>
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>0.00</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).

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

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

17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ <u>0.00</u>
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse	\$ <u>0.00</u>
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ <u>0.00</u>

Schedule A Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from	01/01/2017	
through	06/30/2017	Page <u>4</u> of <u>10</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER NO ON LV, HOME - HOUSING & OPPORTUNITY FOR A MODERN ECONOMY, SPONSORED BY SANTA MONICA HOUSING PROVIDERS	I.D. NUMBER 1386316
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
06/30/2017	1425NMS, LLC SANTA MONICA, CA 90401	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		-455.12	-455.12	
06/30/2017	1547 7TH STREET, LLC SANTA MONICA, CA 90401	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		-169.46	-169.46	
06/30/2017	1650 LINCOLN NMS, LLC SANTA MONICA, CA 90401	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		-283.24	-283.24	
06/30/2017	1658 LICNOLN NMS, LLC SANTA MONICA, CA 90401	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		-123.46	-123.46	
06/30/2017	1660 LINCOLN NMS, LLC SANTA MONICA, CA 90401	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		-123.46	-123.46	
SUBTOTAL \$				-1,154.74		

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ -24,208.96
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 0.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** -24,208.96

*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**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2017	
through	06/30/2017	Page <u>5</u> of <u>10</u>

NAME OF FILER NO ON LV, HOME - HOUSING & OPPORTUNITY FOR A MODERN ECONOMY, SPONSORED BY SANTA MONICA HOUSING PROVIDERS	I.D. NUMBER 1386316
---	------------------------

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
06/30/2017	501 BROADWAY NMS, LLC SANTA MONICA, CA 90401	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		-455.12	-455.12	
06/30/2017	601 COLORADO NMS, LLC SANTA MONICA, CA 90401	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		-510.80	-510.80	
06/30/2017	BCM - 1437 7TH STREET LLC SANTA MONICA, CA 90401	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		-237.24	-237.24	
06/30/2017	BCM - 1737 7TH STREET LLC SANTA MONICA, CA 90401	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		-1,186.23	-1,186.23	
06/30/2017	BCP - 525 COLORADO LLC SANTA MONICA, CA 90401	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		-1,423.48	-1,423.48	
SUBTOTAL \$				-3,812.87		

*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**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2017	
through	06/30/2017	Page <u>6</u> of <u>10</u>

NAME OF FILER NO ON LV, HOME - HOUSING & OPPORTUNITY FOR A MODERN ECONOMY, SPONSORED BY SANTA MONICA HOUSING PROVIDERS	I.D. NUMBER 1386316
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
06/30/2017	CALIFORNIA APARTMENT ASSOCIATION POLITICAL ACTION COMMITTEE (ID# 745208) SACRAMENTO, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		-474.49	-474.49	
06/30/2017	CENTURY WEST PARTNERS LLC, AND AFFILIATED ENTITIES LOS ANGELES, CA 90025	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		-2,670.24	-2,670.24	
06/30/2017	CYPRESS EQUITY INVESTMENTS, LLC LOS ANGELES, CA 90025	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		-890.88	-890.88	
06/30/2017	LUXE 1441 LINCOLN, LLC SANTA MONICA, CA 90401	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		-256.61	-256.61	
06/30/2017	NMS 601 WILSHIRE, LLC SANTA MONICA, CA 90401	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		-256.61	-256.61	
SUBTOTAL \$				-4,548.83		

*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**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2017	
through	06/30/2017	Page <u>7</u> of <u>10</u>

NAME OF FILER NO ON LV, HOME - HOUSING & OPPORTUNITY FOR A MODERN ECONOMY, SPONSORED BY SANTA MONICA HOUSING PROVIDERS	I.D. NUMBER 1386316
---	------------------------

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
06/30/2017	NMS PROPERTIES, INC. SANTA MONICA, CA 90401	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		-14,082.47	-14,082.47	
06/30/2017	NMS1238 7TH, LLC SANTA MONICA, CA 90401	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		-183.98	-183.98	
06/30/2017	NMS1318LINCOLN, LLC SANTA MONICA, CA 90401	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		-256.61	-256.61	
06/30/2017	NMS15437, LLC SANTA MONICA, CA 90401	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		-169.46	-169.46	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$				-14,692.52		

*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		CALIFORNIA FORM 460
from	01/01/2017	
through	06/30/2017	Page 8 of 10
NAME OF FILER		I.D. NUMBER
NO ON LV, HOME - HOUSING & OPPORTUNITY FOR A MODERN ECONOMY, SPONSORED BY SANTA MONICA HOUSING PROVIDERS		1386316

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

NO ON LV, HOME - HOUSING & OPPORTUNITY FOR A MODERN ECONOMY, SPONSORED BY SANTA MONICA HOUSING PROVIDERS

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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SUTTON LAW FIRM SAN FRANCISCO, CA 94108	PRO		BRADLEY HERTZ, TREASURER, IS PARTNER OF PAYEE; NICHOLAS SANDERS, ASSISTANT TREASURER, IS EMPLOYEE OF PAYEE.	527.14
SUTTON LAW FIRM SAN FRANCISCO, CA 94108	PRO		BRADLEY HERTZ, TREASURER, IS PARTNER OF PAYEE; NICHOLAS SANDERS, ASSISTANT TREASURER, IS EMPLOYEE OF PAYEE.	1,531.10
SUTTON LAW FIRM SAN FRANCISCO, CA 94108	PRO		BRADLEY HERTZ, TREASURER, IS PARTNER OF PAYEE; NICHOLAS SANDERS, ASSISTANT TREASURER, IS EMPLOYEE OF PAYEE.	807.19

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

SUBTOTAL \$ 2,865.43

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	5,216.49
2. Unitemized payments made this period of under \$100	\$	0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$	5,216.49

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2017	
through	06/30/2017	Page <u>9</u> of <u>10</u>
NAME OF FILER		I.D. NUMBER
NO ON LV, HOME - HOUSING & OPPORTUNITY FOR A MODERN ECONOMY, SPONSORED BY SANTA MONICA HOUSING PROVIDERS		1386316

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

NO ON LV, HOME - HOUSING & OPPORTUNITY FOR A MODERN ECONOMY, SPONSORED BY SANTA MONICA HOUSING PROVIDERS

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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SUTTON LAW FIRM SAN FRANCISCO, CA 94108	PRO		BRADLEY HERTZ, TREASURER, IS PARTNER OF PAYEE; NICHOLAS SANDERS, ASSISTANT TREASURER, IS EMPLOYEE OF PAYEE.	351.06
SUTTON LAW FIRM SAN FRANCISCO, CA 94108	PRO		BRADLEY HERTZ, TREASURER, IS PARTNER OF PAYEE; NICHOLAS SANDERS, ASSISTANT TREASURER, IS EMPLOYEE OF PAYEE.	2,000.00

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

SUBTOTAL \$ 2,351.06

**Schedule F
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2017	
through	06/30/2017	Page 10 of 10
I.D. NUMBER		1386316

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

NO ON LV, HOME - HOUSING & OPPORTUNITY FOR A MODERN ECONOMY, SPONSORED BY SANTA MONICA HOUSING PROVIDERS

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 CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
SUTTON LAW FIRM SAN FRANCISCO, CA 94108	PRO BRADLEY HERTZ, TREASURER, IS PARTNER OF PAYEE; NICHOLAS SANDERS, ASSISTANT TREASURER, IS EMPLOYEE OF PAYEE.	527.14	0.00	527.14	0.00

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

SUBTOTALS \$	527.14\$	0.00\$	527.14\$	0.00
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Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) **INCURRED TOTALS \$** 0.00
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) **PAID TOTALS \$** 527.14
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** -527.14
May be a negative number

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Date Stamp

E-Filed
09/29/2016
16:52:51
Filing ID:
161757051

Statement covers period from <u>07/01/2016</u> through <u>09/24/2016</u>	Date of election if applicable: (Month, Day, Year) <u>11/08/2016</u>
---	---

SEE INSTRUCTIONS ON REVERSE

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

- Officeholder, Candidate Controlled Committee
 - State Candidate Election Committee
 - Recall
(Also Complete Part 5)
- General Purpose Committee
 - Sponsored
 - Small Contributor Committee
 - Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
 - Controlled
 - Sponsored
(Also Complete Part 6)
- Primarily Formed Candidate/Officeholder Committee
(Also Complete Part 7)

2. Type of Statement:

- Preelection Statement
- Semi-annual Statement
- Termination Statement
(Also file a Form 410 Termination)
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report
- Supplemental Preelection Statement - Attach Form 495

3. Committee Information

I.D. NUMBER
1385604

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Santa Monica Forward Issues Committee - No on LV

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Santa Monica	CA	90403	(310)828-3708

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE
------	-------	----------	-----------------

OPTIONAL: FAX / E-MAIL ADDRESS
(310)828-3708 / opposeluve@gmail.com

Treasurer(s)

NAME OF TREASURER
Debbie Mulvaney

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
SANTA MONICA	CA	90403	(310)600-1864

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
------	-------	----------	-----------------

OPTIONAL: FAX / E-MAIL ADDRESS
debbiemulvaney@gmail.com

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 09/29/2016
Date

By Debbie Mulvaney
Signature of Treasurer or Assistant Treasurer

Executed on _____
Date

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on _____
Date

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on _____
Date

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

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

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

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

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	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
-------------------	---

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME	I.D. NUMBER
----------------	-------------

NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
-------------------	---

COMMITTEE ADDRESS 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 <input type="checkbox"/> OPPOSE
----------------------	--------------	---

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 <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

SUMMARY PAGE

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	07/01/2016	
through	09/24/2016	Page <u>3</u> of <u>29</u>
I.D. NUMBER		1385604

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Santa Monica Forward Issues Committee - No on LV

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions Schedule A, Line 3	\$ 412,240.00	\$ 422,494.95
2. Loans Received Schedule B, Line 3	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 412,240.00	\$ 422,494.95
4. Nonmonetary Contributions Schedule C, Line 3	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 412,240.00	\$ 422,494.95

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	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

Expenditures Made

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made Schedule E, Line 4	\$ 56,389.57	\$ 56,957.86
7. Loans Made Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 56,389.57	\$ 56,957.86
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	0.00	0.00
10. Nonmonetary Adjustment Schedule C, Line 3	0.00	0.00
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 56,389.57	\$ 56,957.86

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made*
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____

Current Cash Statement

12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 9,686.66
13. Cash Receipts Column A, Line 3 above	412,240.00
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00
15. Cash Payments Column A, Line 8 above	56,389.57
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 365,537.09

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

17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ 0.00
---	---------

Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse	\$ 0.00
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ 0.00

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).

*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		CALIFORNIA FORM 460
from	07/01/2016	
through	09/24/2016	Page 4 of 29

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Santa Monica Forward Issues Committee - No on LV	I.D. NUMBER 1385604
---	----------------------------

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/01/2016	Yesenia Monsour Los Angeles, CA 90025	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Kaiser Permanente	100.00	100.00	
07/03/2016	West Hooker Santa Monica, CA 90401	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Brussola, Inc	100.00	100.00	
07/06/2016	Greg Morena Santa Monica, CA 90405	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Oz Corp	250.00	250.00	
07/25/2016	California Apartment Association (ID# 745208) Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		5,000.00	5,000.00	
07/27/2016	Felcor Irving, TX 75062	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		25,000.00	25,000.00	

SUBTOTAL \$ 30,450.00

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 411,722.00
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 518.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 412,240.00

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

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	07/01/2016	
through	09/24/2016	Page 5 of 29

NAME OF FILER Santa Monica Forward Issues Committee - No on LV	I.D. NUMBER 1385604
---	------------------------

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/29/2016	Chris Harding Santa Monica, CA 90402	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Harding Larmore Kutcher & Kozal, LLP	8,000.00	8,000.00	
07/29/2016	L Wayne Harding Santa Monica, CA 90402	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired none	5,000.00	5,000.00	
07/29/2016	Mr. Kenneth Kutcher Culver City, CA 90230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Harding Larmore Kutcher & Kozal, LLP	16,000.00	16,000.00	
07/29/2016	Paula Larmore Los Angeles, CA 90049	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Harding Larmore Kutcher & Kozal, LLP	8,000.00	8,000.00	
07/29/2016	Laurie Lieberman Santa Monica, CA 90402	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	School Board President SMMUSD	8,000.00	8,100.00	
SUBTOTAL \$				45,000.00		

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

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	07/01/2016	
through	09/24/2016	Page <u>6</u> of <u>29</u>

NAME OF FILER Santa Monica Forward Issues Committee - No on LV	I.D. NUMBER 1385604
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/30/2016	Julie Eizenberg Santa Monica, CA 90404	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Architect Koning Eizenberg Architecture	2,500.00	2,500.00	
07/30/2016	Hendrik Koning Santa Monica, CA 90404	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Architect Koning Eizenberg Architecture	2,500.00	2,525.00	
08/01/2016	Sheila Kuehl Santa Monica, CA 90405	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Supervisor Los Angeles County	100.00	100.00	
08/02/2016	Blue Devils Lessee, LLCDBA Le Meridien Delfina Santa Monica, CA 90405	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		10,000.00	10,000.00	
08/02/2016	Metropolitan Pacific Capital, Inc Santa Monica, CA 90401	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		5,000.00	5,000.00	
SUBTOTAL \$				20,100.00		

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

Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER Santa Monica Forward Issues Committee - No on LV	I.D. NUMBER 1385604
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/03/2016	Kevin Kozal Calabasas, CA 91301	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Harding Larmore Kutcher & Kozal, LLP	8,000.00	8,000.00	
08/04/2016	Signet Plaza II, LLC Santa Monica, CA 90402	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		9,950.00	9,950.00	
08/05/2016	By the Blue Sea, LLC Santa Monica, CA 90405	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		20,000.00	20,000.00	
08/05/2016	ETC Bayside LLC Santa Monica, CA 90405	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		9,500.00	9,500.00	
08/05/2016	Neptune's Walk, LLC Santa Monica, CA 90405	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		20,000.00	20,000.00	
SUBTOTAL \$				67,450.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/05/2016	Seritage SRC Finance LLC New York, NY 10017	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		25,000.00	25,000.00	
08/08/2016	Belle Vue Plaza Santa Monica, CA 90401	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		49,000.00	49,000.00	G2016 \$49,000.00
08/08/2016	BMS Realty Washington DC, DC 20008	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		5,000.00	5,000.00	
08/08/2016	Hudson Pacific Properties Los Angeles, CA 90025	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		49,000.00	49,000.00	
08/08/2016	David Nelson Redondo Beach, CA 90277	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	small business owner self-employed - no other name	100.00	100.00	
SUBTOTAL \$				128,100.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/08/2016	Ocean Avenue, LLC Phoenix, AZ 85016	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		49,000.00	49,000.00	
08/08/2016	Redcar Properties, Ltd Los Angeles, CA 90012	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
08/08/2016	Scott Schonfeld Santa Monica, CA 90405	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Investments Linwood Ventures	48,900.00	49,000.00	
08/09/2016	LaSalle Hotel Lessee Inc Bathesda, MD 20814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		9,900.00	9,900.00	
08/15/2016	LA League of Conservation Voters San Gabriel, CA 91775	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	
SUBTOTAL \$				109,300.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
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Statement covers period		CALIFORNIA FORM 460
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/31/2016	Michael Folonis Santa Monica, CA 90404	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Architect Michael W Folonis, Architects	100.00	385.00	
09/12/2016	CW Hotels Limited Partnership Crestview Hills, KY 41017	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		10,000.00	10,000.00	
09/17/2016	Judy Abdo Santa Monica, CA 90405	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired none	50.00	250.00	
09/17/2016	James Conn Santa Monica, CA 90405	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired none	77.00	102.00	
09/17/2016	Joan Goldfeder Santa Monica, CA 90403	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Marketing Consultant self - no other name	100.00	100.00	
SUBTOTAL \$				10,327.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/17/2016	Valerie Griffin Santa Monica, CA 90403	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Software developer Gryphon Software	100.00	100.00	
09/17/2016	Jason Islas Santa Monica, CA 90404	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Outreach and Communication Director self-employed - no other name	50.00	100.00	
09/17/2016	Linda Jassim Santa Monica, CA 90405	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Associate Gwynne Pugh Urban Studio	10.00	110.00	
09/17/2016	Juan Matute Santa Monica, CA 90404	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Researcher UCLA	100.00	125.00	
09/17/2016	Melissa Sweeney Santa Monica, CA 90404	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	consultant self-employed - Eumendies Consulting	100.00	190.00	
SUBTOTAL \$				360.00		

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 SCC – Small Contributor Committee

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER Santa Monica Forward Issues Committee - No on LV	I.D. NUMBER 1385604
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/24/2016	Barbara Filet Santa Monica, CA 90404	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	photographer Filet Photographics	50.00	100.00	
09/24/2016	Dwight Flowers Santa Monica, CA 90402	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Architect retired	100.00	150.00	
09/24/2016	Michael Folonis Santa Monica, CA 90404	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Architect Michael W Folonis, Architects	85.00	385.00	
09/24/2016	John Given Santa Monica, CA 90405	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City Planner City Build Advisors	100.00	100.00	
09/24/2016	Craig Hamilton Santa Monica, CA 90405	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Architect Cannon Design	100.00	200.00	
SUBTOTAL \$				435.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period
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NAME OF FILER

Santa Monica Forward Issues Committee - No on LV

I.D. NUMBER

1385604

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/24/2016	Iao Katagiri Los Angeles, CA 90025	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired none	100.00	100.00	
09/24/2016	Carol Lemlein Santa Monica, CA 90405	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired none	100.00	150.00	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$				200.00		

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SCC – Small Contributor Committee

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Santa Monica Forward Issues Committee - No on LV

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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Stripe San Francisco, CA 94110			Credit Card Fees	3.20
Stripe San Francisco, CA 94110			Credit Card Fees	1.03
Stripe San Francisco, CA 94110			Credit Card Fees	1.03

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

SUBTOTAL \$ 5.26

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	56,053.57
2. Unitemized payments made this period of under \$100	\$	336.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$	<u>56,389.57</u>

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

SCHEDULE E (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER

Santa Monica Forward Issues Committee - No on LV

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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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Stripe San Francisco, CA 94110			Credit Card Fees	3.20
Stripe San Francisco, CA 94110			Credit Card Fees	0.59
Stripe San Francisco, CA 94110			Credit Card Fees	7.55
1640 5th Street, LLC Santa Monica, CA 90401	FND		Advance Building Maintenance	410.82
Peg Hale Santa Monica, CA 90404	FND			575.73

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

SUBTOTAL \$ 997.89

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

Amounts may be rounded
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NAME OF FILER

Santa Monica Forward Issues Committee - No on LV

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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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Kaufman Legal Group Los Angeles, CA 90017-5864	PRO		Legal	320.00
Scott Schonfeld Santa Monica, CA 90405	FND			1,317.26
Stripe San Francisco, CA 94110			Credit Card Fees	145.60
Goodwin Simon Strategic Research, Inc. Culver City, CA 90232	POL		Focus Groups	3,000.00
Stripe San Francisco, CA 94110			Credit Card Fees	3.20

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SUBTOTAL \$ 4,786.06

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

SCHEDULE E (CONT.)

Amounts may be rounded
to whole dollars.

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NAME OF FILER

Santa Monica Forward Issues Committee - No on LV

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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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Stripe San Francisco, CA 94110			Credit Card Fees	18.00
Stripe San Francisco, CA 94110			Swipe Fees	1.75
Jason Islas Santa Monica, CA 90404	CNS		Communications Consultant - 8/1-8/15/2016	2,800.00
Austin Cyr Culver City, CA 90230	CNS		Consultant	2,750.00
Scott Schonfeld Santa Monica, CA 90405	WEB			12.00

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SUBTOTAL \$ 5,581.75

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

Amounts may be rounded
to whole dollars.

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NAME OF FILER

Santa Monica Forward Issues Committee - No on LV

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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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Jason Islas Santa Monica, CA 90404	CNS		Communications Consultant - 8/16-8/31/2016	2,800.00
Stripe San Francisco, CA 94110			Swipe Fees	3.20
Goodwin Simon Strategic Research, Inc. Culver City, CA 90232	POL			12,000.00
Jason Islas Santa Monica, CA 90404			Facebook ads	28.88
Kaufman Legal Group Los Angeles, CA 90017-5864	PRO		Legal	1,052.37

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

SUBTOTAL \$ 15,884.45

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	07/01/2016	
through	09/24/2016	Page <u>19</u> of <u>29</u>
NAME OF FILER		I.D. NUMBER
Santa Monica Forward Issues Committee - No on LV		1385604

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Santa Monica Forward Issues Committee - No on LV

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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Barbara Grover, Inc Los Angeles, CA 90026	CMP		buttons/flyers/photos	775.30
Jason Islas Santa Monica, CA 90404	CNS		Communications Consultant	2,800.00
Alisha Reinhart Santa Monica, CA 90404	TEL			275.00
Kenneth Sok Long Beach, CA 90806	TRS		Mileage	19.50
Kenneth Sok Long Beach, CA 90806	SAL		Canvassing	501.50

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

SUBTOTAL \$ 4,371.30

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	07/01/2016	
through	09/24/2016	Page <u>20</u> of <u>29</u>
NAME OF FILER		I.D. NUMBER
Santa Monica Forward Issues Committee - No on LV		1385604

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Santa Monica Forward Issues Committee - No on LV

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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Jonathan Anderson Northridge, CA 91325	SAL		canvassing	290.00
Jonathan Anderson Northridge, CA 91325	TRS		mileage	17.50
Wesley Bridle West Hollywood, CA 90048	SAL		canvassing	480.00
Thomas Carney West Hollywood, CA 90046	SAL		canvassing	323.00
Joe Christie Los Angeles, CA 90019	SAL		canvassing	412.25

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

SUBTOTAL \$ 1,522.75

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	07/01/2016	
through	09/24/2016	Page <u>21</u> of <u>29</u>
NAME OF FILER		I.D. NUMBER
Santa Monica Forward Issues Committee - No on LV		1385604

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Santa Monica Forward Issues Committee - No on LV

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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Joe Christie Los Angeles, CA 90019	TRS		mileage	6.25
Austin Cyr Culver City, CA 90230	CNS		consultant	2,750.00
Austin Cyr Culver City, CA 90230	OFC			305.67
Austin Cyr Culver City, CA 90230	OFC		Office Supplies	542.58
Lee Fruechtenicht West Hollywood, CA 90048	TRS		mileage	66.00

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

SUBTOTAL \$ 3,670.50

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	07/01/2016	
through	09/24/2016	Page <u>22</u> of <u>29</u>
NAME OF FILER		I.D. NUMBER
Santa Monica Forward Issues Committee - No on LV		1385604

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Santa Monica Forward Issues Committee - No on LV

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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Lee Fruechtenicht West Hollywood, CA 90048	SAL		canvassing	590.00
Berender Johnson Culver City, CA 90231	SAL		canvassing	501.50
Berender Johnson Culver City, CA 90231	TRS		mileage	19.00
Mark Oster Los Angeles, CA 90066	TRS		mileage	48.00
Mark Oster Los Angeles, CA 90066	SAL		canvassing	501.50

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

SUBTOTAL \$ 1,660.00

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	07/01/2016	
through	09/24/2016	Page <u>23</u> of <u>29</u>
NAME OF FILER		I.D. NUMBER
Santa Monica Forward Issues Committee - No on LV		1385604

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Santa Monica Forward Issues Committee - No on LV

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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Karina Perez Pacoima, CA 91331	SAL		canvassing	378.00
Karina Perez Pacoima, CA 91331	TRS		mileage	47.90
Tyler Pledger Santa Clarita, CA 91351	SAL		canvassing	331.50
Tyler Pledger Santa Clarita, CA 91351	TRS		mileage	36.60
Vernon Williams Los Angeles, CA 90005	SAL		canvassing	229.50

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

SUBTOTAL \$ 1,023.50

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	07/01/2016	
through	09/24/2016	Page <u>24</u> of <u>29</u>
NAME OF FILER		I.D. NUMBER
Santa Monica Forward Issues Committee - No on LV		1385604

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Santa Monica Forward Issues Committee - No on LV

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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Stripe San Francisco, CA 94110			Swipe Fees	23.70
Stripe San Francisco, CA 94110			Swipe Fees	2.63
Stripe San Francisco, CA 94110			Swipe Fees	1.34
Barbara Grover, Inc Los Angeles, CA 90026	LIT			10,675.78
Barbara Grover, Inc Los Angeles, CA 90026	LIT			5,474.50

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

SUBTOTAL \$ 16,177.95

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	07/01/2016	
through	09/24/2016	Page 25 of 29
NAME OF FILER		I.D. NUMBER
Santa Monica Forward Issues Committee - No on LV		1385604

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Santa Monica Forward Issues Committee - No on LV

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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Continuing the Republican Revolution Newport Beach, CA 92660	LIT			350.00
Stripe San Francisco, CA 94110			Swipe Fees	1.03
Stripe San Francisco, CA 94110			Swipe Fees	16.18
Stripe San Francisco, CA 94110			Swipe Fees	1.75
Stripe San Francisco, CA 94110			Swipe Fees	3.20

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

SUBTOTAL \$ 372.16

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

Statement covers period
 from 07/01/2016
 through 09/24/2016

SCHEDULE G
CALIFORNIA FORM 460
 Page 26 of 29
 I.D. NUMBER
 1385604

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Santa Monica Forward Issues Committee - No on LV

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Barbara Grover, Inc

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) |

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
The Harman Press North Hollywood, CA 91605	LIT		flyers	643.10
Dr. Don's Buttons Glendale, AZ 85308	CMP		buttons	103.20
Service Mailers & Fulfillment Los Angeles, CA 90018	LIT			10,675.78
The Harman Press North Hollywood, CA 91605	LIT			5,474.50

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 16,896.58

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

Statement covers period
 from 07/01/2016
 through 09/24/2016

SCHEDULE G

CALIFORNIA FORM 460

Page 27 of 29

I.D. NUMBER
1385604

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Santa Monica Forward Issues Committee - No on LV

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Austin Cyr

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 |
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| 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) |

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Amazon.com, Inc Seattle, WA 98109	OFC			305.67
Staples Santa Monica, CA 90403	OFC			542.58

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 848.25

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

SCHEDULE G

Amounts may be rounded to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	07/01/2016	
through	09/24/2016	Page 28 of 29

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Santa Monica Forward Issues Committee - No on LV	I.D. NUMBER 1385604
NAME OF AGENT OR INDEPENDENT CONTRACTOR Peg Hale	

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) |

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Vons Santa Monica, CA 90404	FND			204.53
Vons Santa Monica, CA 90404	FND			32.80
Costco Marina Del Rey, CA 90292	FND			144.62

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 381.95

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

Statement covers period
 from 07/01/2016
 through 09/24/2016

SCHEDULE G

CALIFORNIA FORM 460

Page 29 of 29

I.D. NUMBER
1385604

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Santa Monica Forward Issues Committee - No on LV

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Scott Schonfeld

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) |

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Border Grill Santa Monica, CA 90401	FND			798.47
The Wine House Los Angeles, CA 90064	FND			266.95
Alex Party Rental Venice, CA 90066	FND			251.84

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 1,317.26

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Date Stamp

E-Filed
06/28/2017
13:58:42
Filing ID:
165285225

Statement covers period from <u>01/01/2017</u> through <u>06/28/2017</u>	Date of election if applicable: (Month, Day, Year) <u>11/08/2016</u>
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SEE INSTRUCTIONS ON REVERSE

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

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

2. Type of Statement:

- | | |
|---|---|
| <input type="checkbox"/> Preelection Statement | <input type="checkbox"/> Quarterly Statement |
| <input type="checkbox"/> Semi-annual Statement | <input type="checkbox"/> Special Odd-Year Report |
| <input checked="" type="checkbox"/> Termination Statement
(Also file a Form 410 Termination) | <input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
| <input type="checkbox"/> Amendment (Explain below) | |

3. Committee Information

I.D. NUMBER
1385604

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Santa Monica Forward Issues Committee

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Santa Monica</u>	<u>CA</u>	<u>90405</u>	<u>(310)828-3708</u>

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE
------	-------	----------	-----------------

OPTIONAL: FAX / E-MAIL ADDRESS
(310)828-3708 / opposeluve@gmail.com

Treasurer(s)

NAME OF TREASURER
Debbie Mulvaney

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>SANTA MONICA</u>	<u>CA</u>	<u>90403</u>	<u>(310)600-1864</u>

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
------	-------	----------	-----------------

OPTIONAL: FAX / E-MAIL ADDRESS
debbiemulvaney@gmail.com

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 06/28/2017
Date

By Debbie Mulvaney
Signature of Treasurer or Assistant Treasurer

Executed on 06/28/2017
Date

By Judy Abdo
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on _____
Date

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on _____
Date

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

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

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

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

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	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
-------------------	---

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME	I.D. NUMBER
----------------	-------------

NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
-------------------	---

COMMITTEE ADDRESS 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 <input type="checkbox"/> OPPOSE
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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 <input type="checkbox"/> OPPOSE
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NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

SUMMARY PAGE

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2017	
through	06/28/2017	Page <u>3</u> of <u>7</u>
NAME OF FILER		I.D. NUMBER
Santa Monica Forward Issues Committee		1385604

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Santa Monica Forward Issues Committee

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions Schedule A, Line 3	\$ 0.00	\$ 0.00
2. Loans Received Schedule B, Line 3	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 0.00	\$ 0.00
4. Nonmonetary Contributions Schedule C, Line 3	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 0.00	\$ 0.00

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	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

Expenditures Made

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made Schedule E, Line 4	\$ 73,041.29	\$ 73,041.29
7. Loans Made Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 73,041.29	\$ 73,041.29
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	-55,000.00	0.00
10. Nonmonetary Adjustment Schedule C, Line 3	0.00	0.00
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 18,041.29	\$ 73,041.29

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made*
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____

Current Cash Statement

12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 73,041.29
13. Cash Receipts Column A, Line 3 above	0.00
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00
15. Cash Payments Column A, Line 8 above	73,041.29
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 0.00

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).

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

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

17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ 0.00
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse	\$ 0.00
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ 0.00

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2017	
through	06/28/2017	Page <u>4</u> of <u>7</u>
NAME OF FILER		I.D. NUMBER
Santa Monica Forward Issues Committee		1385604

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Santa Monica Forward Issues Committee

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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Kaufman Legal Group Los Angeles, CA 90017-5864	LEG			287.35
Barbara Grover, Inc Los Angeles, CA 90026	CNS			55,000.00
Barbara Grover, Inc Los Angeles, CA 90026	CNS	bonus		11,364.76

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

SUBTOTAL \$ 66,652.11

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	72,915.29
2. Unitemized payments made this period of under \$100	\$	126.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$	<u>73,041.29</u>

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2017	
through	06/28/2017	Page <u>5</u> of <u>7</u>
NAME OF FILER		I.D. NUMBER
Santa Monica Forward Issues Committee		1385604

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Santa Monica Forward Issues Committee

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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Jason Islas Santa Monica, CA 90404	PRO	bonus		5,000.00
Debbie Mulvaney SANTA MONICA, CA 90403	PRO			1,263.18

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

SUBTOTAL \$ 6,263.18

**Schedule F
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2017	
through	06/28/2017	Page <u>6</u> of <u>7</u>
NAME OF FILER		I.D. NUMBER
Santa Monica Forward Issues Committee		1385604

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Santa Monica Forward Issues Committee

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 CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Barbara Grover, Inc Los Angeles, CA 90026	CNS	55,000.00	0.00	55,000.00	0.00

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

SUBTOTALS \$	55,000.00\$	0.00\$	55,000.00\$	0.00
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Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) **INCURRED TOTALS \$** 0.00
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) **PAID TOTALS \$** 55,000.00
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** -55,000.00
May be a negative number

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

Statement covers period
 from 01/01/2017
 through 06/28/2017

SCHEDULE G

CALIFORNIA FORM 460

Page 7 of 7

I.D. NUMBER
1385604

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Santa Monica Forward Issues Committee

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Debbie Mulvaney

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) |

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Quickbooks Mountain View, CA 94043	OFC		1099 preparation	232.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 232.00

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.