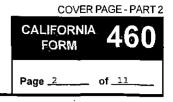
Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in	ink.	Date Stamp	CALIFORNIA FORM 460		
SEE INSTRUCTIONS ON REVERSE	Statement covers period from01/01/2012 through03/17/2012	Date of election if applicable: (Month, Day, Year) 	CITY CLERK MAD	Page 1 of 11 For Official Use Only		
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	mplete Parts 1, 2, 3, and 4. rimarily Formed Ballot Measure ommittee) Controlled) Sponsored <i>Iso Complete Part 6</i> rimarily Formed Candidate/ fficeholder Committee <i>Iso Complete Part 7</i>)	2. Type of Statement:	CITY C더투Supple crmination) Statem	rly Statement I Odd-Year Report mental Preciscion lent - Attach Form 495		
3. Committee Information 1.D COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Protect Fullerton - Recall NO!, A Committee O Bankhead, Jones & McKinley STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CO Fullerton, CA 92835 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO CITY STATE ZIP CO Santa Ana, CA 92705 OPTIONAL: FAX / E-MAIL ADDRESS	DE AREA CODE/PHONE	Treasurer(S) NAME OF TREASURER Lysa Ray MAILING ADDRESS CITY Santa Ana, CA 92705 NAME OF ASSISTANT TREASUR MAILING ADDRESS CITY OPTIONAL: FAX / E-MAIL ADDR	STATE ZIP COD			
A. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California Executed on	that the foregoing is t By By		ein and in the attached schedule: reasurer onent or Responsible Officer of Sponsor ate Measure Proponent te Measure Proponent	S is true and complete. I certify FPPC Form 460 (January/05) line: 866/ASK-FPPC (866/275-3772) State of California		

.....

State of Califor

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 DIS	TRICT NUMBER IF A	PLICABLE)
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. NUMBE	R
NAME OF TREASURER				
COMMITTEE ADDRESS	STREET ADDRESS	(NO P.O. BO	X)	
CITY	STATE	ZIP CC	DE	AREA CODE/PHONE

NAME OF TREASURER		CONTROLLI	ED COMMITTEE?
		T YES	
COMMITTEE ADDRESS STRE	EETADDRESS (NO P.O. B	OX)	
CITY	STATE ZIP C	ODE	AREA CODE/PHONE

STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

TBD City of Fullerton X OPPOSE		JURISDICTION City of Fullerton	
--------------------------------	--	-----------------------------------	--

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	
	 <u>_</u>	

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	
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT

Attach continuation sheets if necessary

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

Campaign Disclosure Statement Summary Page	Type or print in ink. Amounts may be rounded Since Sin			State	ment covers	period		
					from	01/01/2	2012	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE					through	03/17/2	2012	Page of
NAME OF FILER Protect Fullerton - Recall NO!, A Committee Opposing the Reca	all	of Bankhead, Jones	5 & M	lcKinley				I.D. NUMBER 1340873
Contributions Received	(Column A Total this period FROMATTACHED SCHEDULES)		Column CALENDAR TOTALTO D	/EAR	Running	in Both th	nmary for Candidates ne State Primary and
1. Monetary Contributions Schedule A, Line 3	\$	4,224.00	\$	4,22	4.00	General f		
2. Loans Received Schedule B, Line 3		0.00			0.00_		⁻1/1 t	through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	4,224.00	\$	4,22	24.00	20. Contrib Receive		\$
4. Nonmonetary Contributions Schedule C, Line 3		0.00			0.00	21. Expend		V
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	4,224.00	\$	4,2	24.00	Made	\$	\$
Expenditures Made		· · ·				Expendit	ure Limit :	Summary for State
6. Payments Made Schedule E, Line 4	\$	9,765.70	\$. 9,7	65.70	Candidat		
7. Loans Made		0.00			0.00		0	
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7				9,7	65.70_	22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)		
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3		—		2,5	00.00_	Date o	f Election	Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3						(mm	/dd/yy)	
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$	9,619.70	\$	12,2	55.70	 /_	/	\$
Current Cash Statement			Γ			/	/	\$
12. Beginning Cash Balance Previous Summary Page, Line 16		9,383.39	То	calculate Colur	nn B, add			
13. Cash Receipts		4,224.00	am	nounts in Colum rresponding an	n A to the			
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	m Column B of	your last	 *Amounts in reported in C 		nay be different from amounts
15. Cash Payments Column A, Line 8 above		9,765.70		oort. Some ame lumn A may be				
16. ENDING CASH BALANCE	\$	3,841.69	fig	ures that should	dbe			
If this is a termination statement, Line 16 must be zero.			ре	riod amounts.	f this is			
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for	e first report bei this calendar y דע over the arr	ear, only			
Cash Equivalents and Outstanding Debts		· · · · · · · · · · · · · · · · · · ·	fro	m Lines 2, 7, a				
18. Cash Equivalents See instructions on reverse	\$	0.00	an	y).				
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	2,500.00				FPPC Toll	-Free Helplin	FPPC Form 460 (January/05) e: 866/ASK-FPPC (866/275-3772)
			-			•	-	,

•

ъ

•2

Schedule A Monetary Contributions Received		Amoun	e or print in ink. ts may be rounded whole dollars.	Statement cov	ers period .	d CALIFORNIA 460		
		10	whole dollars.	from01/01/2	2012			
SEE INSTRUCTIO	ONS ON REVERSE			through	2012	Page	_4 of11	
NAME OF FILER Protect Ful	llerton - Recall NO!, A Committee Opposing the Rec	all of Bank)	nead, Jones & McKinley	· · ·		I.D. NUMI 134085		
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 (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)	
02/02/2012	Ray Ashcroft Fullerton, CA 92833-1925	©IND □COM □OTH □PTY □SCC	Owner WE3	100.00		LOO.00		
02/02/2012	W. Peter Godfrey Fullerton, CA 92831	⊠IND □COM □OTH □PTY □SCC	Attorney Godfrey Godfrey & Lamb, LLP	250.00	:	250.00		
01/23/2012	Martin Hairabedian Canyon Lake, CA 92587	XIND COM OTH PTY SCC	Retired	150.00]	.50.00		
01/16/2012	Howard Hankins Fullerton, CA 92835		Retired	100.00	1	.00.00		
01/16/2012	Gary Johnson Fullerton, CA 92832	XIND COM OTH PTY SCC	Safety Director Penhall Company	100.00	2	00.00		
<u></u>			SUBTOTAL \$	700.00				
1. Amount re (Include al 2. Amount re 3. Total mone	A Summary ceived this period – itemized monetary contributions. I Schedule A subtotals.) ceived this period – unitemized monetary contributions etary contributions received this period.	of less than \$	\$	3,650.00 574.00	IND - COM OTH PTY -	– Other (e.ç - Political Pa	Committee In PTY or SCC) J., business entity)	
(Add Lines	s 1 and 2. Enter here and on the Summary Page, Colur	nn A, Line 1.)	TOTAL \$	4,224.00		FPPC Fo		

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

.

3

Monetary	A (Continuation Sheet) Contributions Received	Type or pri Amounts may to whole (be rounded	Statement cov from01/01/2 through03/17/2	012	SCHEDULE A (CONT.) CALIFORNIA FORM 460 Page 5_ of 11		
NAME OF FILER	lerton - Recall NO!, A Committee Opposing the Rec	all of Bankh	ead, Jones & McKinley			I.D. NUME 134087	1	
DATE	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
01/19/2012	Richard Mathewson Fullerton, CA 92831		Retired	100.00	10	0.00		
01/23/2012	Molly McClanahan Fullerton, CA 92832-1122		Retired	100.00	10	00.00		
01/09/2012	Chris Meyer Fullerton, CA 92835	IND COM OTH PTY SCC	Retired	100.00	10	00.00	· · · · · · · · · · · · · · · · · · ·	
01/23/2012	Michael Sugarman, MD., Inc. Fullerton, CA 92835-3614	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		100.00	10	0.00		
01/19/2012	Gayle Paden Fullerton, CA 92831	XIND COM OTH PTY SCC	Retired	100.00	10	00.00		
			SUBTOTAL	\$ 500.00				

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

.

•:

•

•

	e A (Continuation Sheet) Contributions Received	Type or pri Amounts may to whole	be rounded	Statement cov		SCHEDULE A (CONT.) CALIFORNIA FORM 460		
NAME OF FILER				through03/17/2		Page6 of11 I.D. NUMBER		
Protect Ful	lerton - Recall NO!, A Committee Opposing the Rec	all of Bankh	ead, Jones & McKinley			1340873		
	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YE (JAN. 1 - DEC. 3	AR TO DATE		
01/13/2012	Marlin Plejdrup Fullerton, CA 92835-3011	IND COM OTH PTY SCC	Retired	- 100.00	100	0.00		
03/05/2012	Mary Ransom Fullerton, CA 92833	⊠IND □COM □OTH □PTY □SCC	Retired	2,000.00	2,000	0.00		
01/09/2012	Santa Monica Police Officers Association for a Better Community (#1225795) Sacramento, CA 95814	□IND XCOM OTH PTY SCC		250.00	. 250	0.00		
01/19/2012	Stanley Winston Fullerton, CA 92832-1017	IND COM OTH PTY SCC		100.00	100			
		IND COM OTH PTY SCC						
			SUBTOTAL	2,450.00	ar is arca			

.

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

.

÷

.

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

Schedule E Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period from01/01/2012	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through	Page of1
NAME OF FILER			I.D. NUMBER
Protect Fullerton - Recall NO!, A Committee Opposing the F	Recall of Bankhead, Jones & McKinley		1340873

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
	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
	civic donations	PET	petition circulating	TEL.	t.v. or cable airtime and production costs
	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research		staff/spouse travel, lodging, and meals
ND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services		transfer between committees of the same candidate/sponsor
	legal defense	PRO	professional services (legal, accounting)		voter registration
பா	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

	DRESS OF PAYEE O ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
ieber Communications		LIT	<u> </u>	••••••••••••••••••••••••••••••••••••••	 4,803.00
anta Ana, CA 92704					
ieber Communications		LIT			 141.00
anta Ana, CA 92704					
leber Communications	<u>_</u>	СМР			 146.00
nta Ana, CA 92704					

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

SUBTOTAL\$ 5,090.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)\$	9,765.70
2. Unitemized payments made this period of under \$100 \$	
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	9,765.70

.

Schedule E (Continuation Sheet) Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER Protect Fullerton - Recall NO!, A Committee Opposing		chead, Jon	·	from through .	ment covers pe 01/01/201 03/17/201	riod CALIFO 12 FOR 12 Page 1.D. NUMB 134087	B of 11 ER
CODES: If one of the following codes accurately descr CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member.com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and s POS postage, del	nmunications d appearance ises ilating survey resear ivery and me	25	RAD rac RFD ret SAL car TEL t.v. TRC car TRS sta TSF trai VOT vot	lio airtime and p urned contributi mpaign workers or cable airtime ndidate travel, lo ff/spouse travel nsfer between o er registration	oroduction costs	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE		ESCRIPTION OF	PAYMENT		AMOUNT PAID
Fundraising by Net LLC Washington, DC 20004-2544 Lysa Ray Campaign Services					·····		147.98
Santa Ana, CA 92705		PRO					250.00
Lysa Ray Campaign Services Santa Ana, CA 92705		PRO					500.00
Lysa Ray Campaign Services Santa Ana, CA 92705		PRO		·			250.00
Political Data Inc. Norwalk, CA 90650		VOT					190.58
* Payments that are contributions or independent expenditures must	also be summarized on \$	Schedule D.	l			SUBTOTAL \$	

. .

.

Schedule E (Continuation Sheet) Payments Made	Ar	Type or print mounts may b to whole do	e rounded			State from through	ement covers pe 01/01/20 03/17/20		SCHEDULE E (CON FORNIA ORM 460
NAME OF FILER Protect Fullerton - Recall NO!, A Committee Opposing t	he Reca	all of Bank	head, Jo	ones & McKinl	ley				JMBER 0873
CODES: If one of the following codes accurately describ CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FiL candidate filing/ballot fees FND fundraising events ND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR MTG OFC PET PHO	member com meetings an office exper petition circu phone banks polling and s postage, del	munication d appearar ses lating survey rese ivery and r	IS Inces	ices	RAD ra RFD re SAL ca TEL t.v TRC ca TRS st TSF tra VOT vo	Idio airtime and eturned contribut ampaign workers v. or cable airtim andidate travel, li anf/spouse trave ansfer between oter registration	production costs tions s' salaries e and production c odging, and meals sl, lodging, and me	als same candidate/spons
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CODE	OR	DESC	RIPTION O	F PAYMENT		AMOUNT PAID
Political Data Inc.			VOT					_	659.86
Political Data Inc.			VOT						487.21
Political Data Inc. Norwalk, CA 90650			VOT						190.58
Snattlerake Hosting eMotiv Marketing Newport Beach, CA 92660			WEB			<u>.</u>			500.00
Snattlerake Hosting eMotiv Marketing Newport Beach, CA 92660			WEB						500.00
* Payments that are contributions or independent expenditures must al	<u> </u>			<u> </u>			<u> </u>	SUBTOTA	L\$ 2,337.65

Schedule E (Continuation Sheet) Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period from01/01/2012	SCHEDULE E (CONT.) CALIFORNIA FORM	
		through03/17/2012	. Page <u>10</u> of <u>11</u>	
NAME OF FILER		I.D. NUMBER		
Protect Fullerton - Recall NO!, A Committee	Opposing the Recall of Bankhead, Jones & McKinle	ey	1340873	
CODES: If one of the following codes accura	tely describes the payment, you may enter the code	e. Otherwise, describe the paymer	t.	
CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production	on costs	
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions		
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salarie	3 5	
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and p		
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, a	and meals	
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodgin	g, and meals	

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

POL polling and survey research

PRT print ads

- TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals
- TSF transfer between committees of the same candidate/sponsor
- VOT voter registration
- WEB information technology costs (internet, e-mail)

* Payments that are contributions or independent expenditures must also be summarized on S	Schedule D.			SUBTOTA	L\$ 9!	99.49
			_			
· ·						
Fullerton, CA 92835	СМР				. 99	99.49
The Complete Package		[`	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE	OR DESC	CRIPTION OF PAYMEN	 γ	AMOUNT P/	AID

ND

LΠ

LEG legal defense

campaign literature and mailings

independent expenditure supporting/opposing others (explain)*

					SCHEDULE F
Schedule F Accrued Expenses (Unpaid Bills)	Type or print in ink. Amounts may be round to whole dollars.		Statement cove		ORNIA 460
SEE INSTRUCTIONS ON REVERSE			through03/17/	^{/2012} Page	<u>11</u> of <u>1</u>
NAMEOFFILER Protect Fullerton - Recall NO!, A Committee Opposing th	he Recall of Bankhead, Jo	ones & McKinley		' I.D. NUM 1340	
CODES: If one of the following codes accurately describ CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events ND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	es the payment, you may MBR member communication MTG meetings and appeara OFC office expenses PET petition circulating PHO phone banks POL polling and survey rest POS postage, delivery and PRO professional services (PRT print ads	ns nces earch messenger services	RADradio airtime anRFDreturned contribSALcampaign workTELt.v. or cable airtTRCcandidate travelTRSstaff/spouse traTSFtransfer betweeVOTvoter registration	d production costs outions ers' salaries ime and production cost , lodging, and meals vel, lodging, and meals n committees of the sa	me candidate/sponsor
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
Delta Partners, LLC	CNS	2,500.00	0.00	0.00	2,500.00
Bieber Communications	СМР	146,00	0.00	146.00	0.00
Santa Ana, CA 92704					
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS \$	2,646.00 \$	0.00\$	146.00\$	2,500.00
Schedule F Summary 1. Total accrued expenses incurred this period. (Include all S					
 accrued expenses of \$100 or more, plus total uniternized a 2. Total accrued expenses paid this period. (Include all Sche accrued expenses of \$100 or more, plus total uniternized p 	edule F, Column (c) subtot	als for payments on			
3. Net change this period. (Subtract Line 2 from Line 1. Ent on the Summary Page, Column A, Line 9.)	let the difference here and				

~

•2.