

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

Date Stamp RECEIVED 2008 APR 22 11:10 AM OFFICE OF THE CLERK OF THE STATE OF CALIFORNIA	CALIFORNIA FORM 460
	Page <u>1</u> of <u>31</u> For Official Use Only

Statement covers period
 from 01/20/2008
 through 04/19/2008

Date of election if applicable:
 (Month, Day, Year)

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 (Also Complete Part 5)	<input checked="" type="checkbox"/> Primarily Formed Ballot Measure Committee <input type="radio"/> Controlled <input type="radio"/> Sponsored (Also Complete Part 6)
<input 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 (Also Complete Part 7)

2. Type of Statement:

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

I.D. NUMBER 1297811

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Newport Beach City Hall in the Park Committee, Yes on Measure B

STREET ADDRESS (NO P.O. BOX)
537 Newport Center Dr #604
 CITY STATE ZIP CODE AREA CODE/PHONE
Newport Beach, CA 92660 949-723-3185

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
 CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER
Lysa Ray

MAILING ADDRESS
603 E Alton Suite H
 CITY STATE ZIP CODE AREA CODE/PHONE
Santa Ana, CA 92705 714-540-2295

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS
 CITY STATE ZIP CODE AREA CODE/PHONE

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 <u>4/18/08</u> Date	By _____ 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**

Type or print in ink.

COVER PAGE - PART 2

**CALIFORNIA
FORM 460**

Page 2 of 31

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?

YES 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?

YES 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 checked="" 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
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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
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Attach continuation sheets if necessary

**Campaign Disclosure Statement
Summary Page**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period		CALIFORNIA FORM 460
from	01/20/2008	
through	04/18/2008	Page <u>3</u> of <u>31</u>
		I.D. NUMBER 1297811

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions Schedule A, Line 3	\$ 308,542.00	\$ 394,967.00
2. Loans Received Schedule B, Line 3	15,000.00	15,000.00
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 323,542.00	\$ 409,967.00
4. Nonmonetary Contributions Schedule C, Line 3	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 323,542.00	\$ 409,967.00

**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	\$ 333,002.09	\$ 410,905.36
7. Loans Made Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 333,002.09	\$ 410,905.36
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	-19,295.83	0.00
10. Nonmonetary Adjustment Schedule C, Line 3	0.00	0.00
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 313,706.26	\$ 410,905.36

**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	\$ 9,370.09
13. Cash Receipts Column A, Line 3 above	323,542.00
14. Miscellaneous Increases to Cash Schedule I, Line 4	90.00
15. Cash Payments Column A, Line 8 above	333,002.09
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 0.00

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	\$ 15,000.00

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**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period from <u>01/20/2008</u> through <u>04/18/2008</u>	CALIFORNIA FORM 460
	Page <u>4</u> of <u>31</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Newport Beach City Hall in the Park Committee, Yes on Measure B	I.D. NUMBER 1297811
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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)
01/22/2008	John Croul [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	100,000.00	392,842.00	P 08 681,065.00
01/28/2008	John Croul [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	50,000.00	392,842.00	P 08 681,065.00
01/30/2008	John Croul [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	100,000.00	392,842.00	P 08 681,065.00
02/01/2008	Linda Beek [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Writer/Photographer/Editor Self	500.00	500.00	P 08 500.00
02/01/2008	John Croul [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	50,000.00	392,842.00	P 08 681,065.00

SUBTOTAL \$ 300,500.00

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 308,442.00
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 100.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 308,542.00

*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**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from <u>01/20/2008</u>		
through <u>04/18/2008</u>		Page <u>5</u> of <u>31</u>
NAME OF FILER		I.D. NUMBER
Newport Beach City Hall in the Park Committee, Yes on Measure B		1297811

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)
02/01/2008	Curci-Turner Construction Company LLC [REDACTED]	<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	P 08 5,000.00
02/01/2008	Lido Peninsula Company, LLC [REDACTED]	<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	P 08 5,000.00
02/01/2008	Marianne Scott [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	College Programs Coordinatort, CdMHS NMUSD	100.00	100.00	P 08 100.00
04/18/2008	John Croul [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	-2,158.00	392,842.00	P 08 681,065.00
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$				7,942.00		

*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 B – Part 1
Loans Received**

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period from <u>01/20/2008</u> through <u>04/18/2008</u>	CALIFORNIA FORM 460
	Page <u>6</u> of <u>31</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

I.D. NUMBER

1297811

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
John Croul [REDACTED]	Retired	\$ 0.00	\$ 15,000.00	<input type="checkbox"/> PAID \$ 0.00 <input type="checkbox"/> FORGIVEN \$ 0.00	\$ 15,000.00	0% RATE	\$ 15,000.00	CALENDAR YEAR \$ 392,842.00 PER ELECTION** P08 681,065.00
<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					DATE DUE	\$ 0.00	02/14/2008 DATE INCURRED	
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$	\$	<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	\$	0% RATE	\$	CALENDAR YEAR \$ PER ELECTION** \$
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$	\$	<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	\$	0% RATE	\$	CALENDAR YEAR \$ PER ELECTION** \$
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$	\$	<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	\$	0% RATE	\$	CALENDAR YEAR \$ PER ELECTION** \$
SUBTOTALS \$		\$ 15,000.00	\$ 0.00	\$ 15,000.00	\$ 0.00			

Schedule B Summary

(Enter (e) on
Schedule E, Line 3)

- Loans received this period \$ 15,000.00
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period \$ 0.00
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (Subtract Line 2 from Line 1.) **NET \$** 15,000.00
Enter the net here and on the Summary Page, Column A, Line 2.
(May be a negative number)

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

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

**Schedule E
Payments Made**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	01/20/2008	
through	04/18/2008	Page <u>7</u> of <u>31</u>
NAME OF FILER		I.D. NUMBER
Newport Beach City Hall in the Park Committee, Yes on Measure B		1297811

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

I.D. NUMBER

1297811

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
COGS South 3309 S Main St Santa Ana, CA 92707	CMP			2,645.92
Impact Placements 22431 Antonio Pkwy #B-160-131 Rancho Sta Margarita, CA 92688	CMP			1,075.00
Bieber Communications 3609 W. MacArthur Blvd., suite #812 Santa Ana, CA 92704	LIT	& Postage		7,325.95

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

SUBTOTAL \$ 11,046.87

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	332,844.19
2. Unitemized payments made this period of under \$100	\$	157.90
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 \$	333,002.09

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

SCHEDULE E (CONT.)

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/20/2008	
through	04/18/2008	Page <u>8</u> of <u>31</u>
NAME OF FILER		I.D. NUMBER
Newport Beach City Hall in the Park Committee, Yes on Measure B		1297811

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

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
Bieber Communications 3609 W. MacArthur Blvd., suite #812 Santa Ana, CA 92704	LIT		& Postage	7,975.25
Bieber Communications 3609 W. MacArthur Blvd., suite #812 Santa Ana, CA 92704	LIT		& Postage	15,574.91
Bieber Communications 3609 W. MacArthur Blvd., suite #812 Santa Ana, CA 92704	LIT		& Postage	15,599.91
COGS South 3309 S Main St Santa Ana, CA 92707	CMP			2,862.50
COGS South 3309 S Main St Santa Ana, CA 92707	CMP			3,975.97

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

SUBTOTAL \$ 45,988.54

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

SCHEDULE E (CONT.)

Type or print in ink.
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to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/20/2008	
through	04/18/2008	Page <u>9</u> of <u>31</u>
NAME OF FILER		I.D. NUMBER
Newport Beach City Hall in the Park Committee, Yes on Measure B		1297811

SEE INSTRUCTIONS ON REVERSE

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
Impact Placements 22431 Antonio Pkwy #B-160-131 Rancho Sta Margarita, CA 92688	CMP			725.00
STA Campaigns 503 32nd St #120 Newport Beach, CA 92663	VOT	& Postage		2,361.31
STA Campaigns 503 32nd St #120 Newport Beach, CA 92663	POL			15,680.00
Your Ballot Guide 15030 Ventura Blvd #19-530 Sherman Oaks, CA 91403	LIT			870.00
Bieber Communications 3609 W. MacArthur Blvd., suite #812 Santa Ana, CA 92704	LIT	& Postage		13,736.90

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

SUBTOTAL \$ 33,373.21

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

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/20/2008	
through	04/18/2008	Page 10 of 31
NAME OF FILER		I.D. NUMBER
Newport Beach City Hall in the Park Committee, Yes on Measure B		1297811

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

I.D. NUMBER

1297811

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
STA Campaigns 503 32nd St #120 Newport Beach, CA 92663	CMP			7,500.00
Debra Schulze 68 Corsica Dr. Newport Beach, CA 92660	CMP			420.00
Visteva 12881 Knott St #105 Garden Grove, CA 92481	WEB			56.67
Visteva 12881 Knott St #105 Garden Grove, CA 92481	WEB			148.75
Bieber Communications 3609 W. MacArthur Blvd., suite #812 Santa Ana, CA 92704	LIT	& Postage		15,599.91

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

SUBTOTAL \$ 23,725.33

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

SCHEDULE E (CONT.)

Type or print in ink.
Amounts may be rounded
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Statement covers period		CALIFORNIA FORM 460
from	01/20/2008	
through	04/18/2008	Page <u>11</u> of <u>31</u>
NAME OF FILER		I.D. NUMBER
Newport Beach City Hall in the Park Committee, Yes on Measure B		1297811

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

I.D. NUMBER

1297811

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
Garrett Enterprises Limited 1084 Skyline Dr Daly City, CA 94105	VOT			350.00
Garrett Enterprises Limited 1084 Skyline Dr Daly City, CA 94105	VOT			236.42
Garrett Enterprises Limited 1084 Skyline Dr Daly City, CA 94105	VOT			240.00
Moore Information 2130 SW Jefferson St #200 Portland, OR 97201	POL			18,000.00
Bieber Communications 3609 W. MacArthur Blvd., suite #812 Santa Ana, CA 92704	LIT	& Postage		14,385.46

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

SUBTOTAL \$ 33,211.88

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

SCHEDULE E (CONT.)

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/20/2008	
through	04/18/2008	Page <u>12</u> of <u>31</u>
NAME OF FILER		I.D. NUMBER
Newport Beach City Hall in the Park Committee, Yes on Measure B		1297811

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

I.D. NUMBER

1297811

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
Bieber Communications 3609 W. MacArthur Blvd., suite #812 Santa Ana, CA 92704	LIT		& Postage	38,976.28
Bieber Communications 3609 W. MacArthur Blvd., suite #812 Santa Ana, CA 92704	LIT			17,363.89
Democratic Voters Choice 340 N. Meyers Street Burbank, CA 91506	LIT			520.00
Garrett Enterprises Limited 1084 Skyline Dr Daly City, CA 94105	VOT			250.00
Garrett Enterprises Limited 1084 Skyline Dr Daly City, CA 94105	VOT			320.00

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

SUBTOTAL \$ 57,430.17

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

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/20/2008	
through	04/18/2008	Page <u>13</u> of <u>31</u>
NAME OF FILER		I.D. NUMBER
Newport Beach City Hall in the Park Committee, Yes on Measure B		1297811

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

I.D. NUMBER

1297811

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
Garrett Enterprises Limited 1084 Skyline Dr Daly City, CA 94105	VOT			340.00
Garrett Enterprises Limited 1084 Skyline Dr Daly City, CA 94105	VOT			720.00
Baker Party Rentals 1151 Baker St Costa Mesa, CA 92626	CMP			145.00
Bieber Communications 3609 W. MacArthur Blvd., suite #812 Santa Ana, CA 92704	LIT		& Postage	45,429.34
COGS South 3309 S Main St Santa Ana, CA 92707	CMP			2,655.61

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

SUBTOTAL \$ 49,289.95

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

SCHEDULE E (CONT.)

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/20/2008	
through	04/18/2008	Page <u>14</u> of <u>31</u>
NAME OF FILER		I.D. NUMBER
Newport Beach City Hall in the Park Committee, Yes on Measure B		1297811

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

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
Garrett Enterprises Limited 1084 Skyline Dr Daly City, CA 94105	VOT			960.00
Impact Placements 22431 Antonio Pkwy #B-160-131 Rancho Sta Margarita, CA 92688	CMP			725.00
STA Campaigns 503 32nd St #120 Newport Beach, CA 92663	VOT	& Postage		923.77
STA Campaigns 503 32nd St #120 Newport Beach, CA 92663	POL			15,750.00
STA Campaigns 503 32nd St #120 Newport Beach, CA 92663	CMP			889.92

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

SUBTOTAL \$ 19,248.69

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

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/20/2008	
through	04/18/2008	Page 15 of 31
NAME OF FILER		I.D. NUMBER
Newport Beach City Hall in the Park Committee, Yes on Measure B		1297811

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

I.D. NUMBER

1297811

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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
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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
The Ficker Group 417 30th St. Newport Beach, CA 92663	CMP			6,954.17
Visteva 12881 Knott St #105 Garden Grove, CA 92481	WEB			236.00
Abigail Abbott Staffing Services, INC. P.O. Box 54590 Los Angeles, CA 90054-0590	CMP			1,186.56
Garrett Enterprises Limited 1084 Skyline Dr Daly City, CA 94105	VOT			200.00
STA Campaigns 503 32nd St #120 Newport Beach, CA 92663	POL			6,815.90

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

SUBTOTAL \$ 15,392.63

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

SCHEDULE E (CONT.)

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/20/2008	
through	04/18/2008	Page 16 of 31
NAME OF FILER		I.D. NUMBER
Newport Beach City Hall in the Park Committee, Yes on Measure B		1297811

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

I.D. NUMBER

1297811

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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
STA Campaigns 503 32nd St #120 Newport Beach, CA 92663	PHO			16,556.40
STA Campaigns 503 32nd St #120 Newport Beach, CA 92663	CNS			12,600.00
Novell Hendrickson 1991 Port Claridge Pl. Newport Beach, CA 92660	OFC			718.28
Debra Schulze 68 Corsica Dr. Newport Beach, CA 92660	CMP			75.00
Jim Johnson Photography 1519 E. Chapman Ave. Orange, CA 92866	PRO			1,346.88

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

SUBTOTAL \$ 31,296.56

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

SCHEDULE E (CONT.)

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/20/2008	
through	04/18/2008	Page 17 of 31
NAME OF FILER		I.D. NUMBER
Newport Beach City Hall in the Park Committee, Yes on Measure B		1297811

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

I.D. NUMBER

1297811

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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
Lysa Ray Campaign Services 603 E Alton Ave Suite H Santa Ana, CA 92705	PRO			2,362.50
Pacific Strategies 435 E. Riverview Avenue Orange, CA 92865	CNS			4,575.00
STA Campaigns 503 32nd St #120 Newport Beach, CA 92663	CNS			826.80
STA Campaigns 503 32nd St #120 Newport Beach, CA 92663	POS			820.00
Seaview Secretary Solutions 2855 E. Coast Hwy. Suite 102 Corona Del Mar, CA 92625	OFC			418.25

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

SUBTOTAL \$ 9,002.55

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

SCHEDULE E (CONT.)

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/20/2008	
through	04/18/2008	Page 18 of 31
NAME OF FILER		I.D. NUMBER
Newport Beach City Hall in the Park Committee, Yes on Measure B		1297811

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

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
Visteva 12881 Knott St #105 Garden Grove, CA 92481	WEB			414.50
Gwen Hennessey 13082 Laurinda Way Santa Ana, CA 92705	PRO			2,125.00
Lysa Ray Campaign Services 603 E Alton Ave Suite H Santa Ana, CA 92705	WEB			1,298.31

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

SUBTOTAL \$ 3,837.81

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

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/20/2008	
through	04/18/2008	Page 19 of 31
NAME OF FILER		I.D. NUMBER
Newport Beach City Hall in the Park Committee, Yes on Measure B		1297811

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

I.D. NUMBER

1297811

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
Garrett Enterprises Limited 1084 Skyline Dr Daly City, CA 94105	VOT	236.42	0.00	0.00	236.42
COGS South 3309 S Main St Santa Ana, CA 92707	CMP	2,645.92	0.00	2,645.92	0.00
Impact Placements 22431 Antonio Pkwy #B-160-131 Rancho Sta Margarita, CA 92688	CMP	1,075.00	0.00	1,075.00	0.00

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

SUBTOTALS \$ 3,957.34 \$ 0.00 \$ 3,720.92 \$ 236.42

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 \$** 19,295.83
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** -19,295.83
May be a negative number

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

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE F (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/20/2008	
through	04/18/2008	Page 20 of 31
NAME OF FILER		I.D. NUMBER
Newport Beach City Hall in the Park Committee, Yes on Measure B		1297811

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 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
Bieber Communications 3609 W. MacArthur Blvd., suite #812 Santa Ana CA 92704	LIT & Postage	15,574.91	0.00	15,574.91	0.00
SUBTOTALS \$		15,574.91 \$	0.00 \$	15,574.91 \$	0.00

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

Type or print in ink.
 Amounts may be rounded to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	01/20/2008	
through	04/18/2008	Page 21 of 31
NAME OF FILER		I.D. NUMBER
Newport Beach City Hall in the Park Committee, Yes on Measure B		1297811
NAME OF AGENT OR INDEPENDENT CONTRACTOR		
Bieber Communications		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Bieber Communications

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
USPO Bay Station Newport Beach CA 92659	POS		2,289.10
USPO Bay Station Newport Beach CA 92659	POS		2,289.10
USPO Bay Station Newport Beach CA 92659	POS		5,114.78
USPO Bay Station Newport Beach CA 92659	POS		4,922.19

Attach additional information on appropriately labeled continuation sheets.

TOTAL * \$ 14,615.17

* 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)

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	01/20/2008	
through	04/18/2008	Page <u>22</u> of <u>31</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

I.D. NUMBER

1297811

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Bieber Communications

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
USPO Sunflower Station Santa Ana CA	POS		5,114.78
USPO Bay Station Newport Beach CA 92659	POS		5,114.78
USPO Bay Station Newport Beach CA 92659	POS		8,239.44
USPO Sunflower Station Santa Ana CA			632.86

Attach additional information on appropriately labeled continuation sheets.

TOTAL * \$ 19,101.86

* 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)

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE G

Statement covers period from <u>01/20/2008</u>	CALIFORNIA FORM 460
through <u>04/18/2008</u>	
Page <u>23</u> of <u>31</u>	
I.D. NUMBER 1297811	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Bieber Communications

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
USPO Bay Station Newport Beach CA 92659	POS		13,861.98

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 13,861.98

* 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)

Type or print in ink.
 Amounts may be rounded to whole dollars.

SCHEDULE G

Statement covers period from <u>01/20/2008</u> through <u>04/18/2008</u>	CALIFORNIA FORM 460
	Page <u>24</u> of <u>31</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

I.D. NUMBER

1297811

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Novell Hendrickson

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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| 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) |

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Staples 4343 MacArthur Blvd Newport Beach CA 92660	OFC		161.21
USPO Bay Station Newport Beach CA 92659	POS		451.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 612.21

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

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 to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	01/20/2008	
through	04/18/2008	Page <u>25</u> of <u>31</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

I.D. NUMBER

1297811

NAME OF AGENT OR INDEPENDENT CONTRACTOR

STA Campaigns

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
County of Orange 300 N Flower Santa Ana CA 92702	LIT		311.31
Powell Phones 607 NW 22nd Ave Portland OR 97210 STA #2917	PHO		15,680.00
USPO Bay Station Newport Beach CA 92659	POS		2,050.00
Monster Petitions 5694 Mission Center Rd #602-144 San Diego CA 92108	CMP		7,500.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 25,541.31

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

Type or print in ink.
 Amounts may be rounded to whole dollars.

Statement covers period
 from 01/20/2008
 through 04/18/2008

SCHEDULE G

CALIFORNIA FORM **460**

Page 26 of 31

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

I.D. NUMBER

1297811

NAME OF AGENT OR INDEPENDENT CONTRACTOR

STA Campaigns

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)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Abigail Abbott Staffing Services, INC. P.O. Box 54590 Los Angeles CA 90054-0590	CMP			889.92
County of Orange 300 N Flower Santa Ana CA 92702	VOT			103.77
Powell Phones 607 NW 22nd Ave Portland OR 97210 STA Inv #2922	PHO			14,875.00
USPO Bay Station Newport Beach CA 92659	POS			820.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 16,688.69

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

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 to whole dollars.

SCHEDULE G

Statement covers period from <u>01/20/2008</u>	CALIFORNIA FORM 460
through <u>04/18/2008</u>	
Page <u>27</u> of <u>31</u>	I.D. NUMBER 1297811

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

NAME OF AGENT OR INDEPENDENT CONTRACTOR

STA Campaigns

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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)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Powell Phones 607 NW 22nd Ave Portland OR 97210 STA #2926	PHO		5,885.80
Powell Phones 607 NW 22nd Ave Portland OR 97210 STA #2923	PHO		2,314.20
Powell Phones 607 NW 22nd Ave Portland OR 97210 STA #2923	PHO		11,850.00
USPO Sunflower Station Santa Ana CA	POS		820.00

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TOTAL* \$ 20,870.00

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

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 to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	01/20/2008	
through	04/18/2008	Page 28 of 31
I.D. NUMBER		1297811

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Ficker Group

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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 | FET 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 |
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Tom Ashely	CMP	economist	800.00
City of Newport Bch 3300 Newport Blvd. Newport Beach CA 92663	CMP		170.00
City of Newport Bch 3300 Newport Blvd. Newport Beach CA 92663	CMP		344.65
French's Cupcake Bakery 273 E 17th St Costa Mesa CA 92627	CMP		327.75

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 1,642.40

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

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 to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	01/20/2008	
through	04/18/2008	Page <u>29</u> of <u>31</u>
NAME OF FILER		I.D. NUMBER
Newport Beach City Hall in the Park Committee, Yes on Measure B		1297811
NAME OF AGENT OR INDEPENDENT CONTRACTOR		
The Ficker Group		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

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The Ficker Group

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| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Scott Kennedy	CMP		artist	250.00
Kinkos	CMP		copies etc...	188.24
Mouse Graphics 659 W. 19th Street Costa Mesa CA 92627	CMP			2,103.65
Party Makers 17831 Skypark Cir #H Irvine CA 92614	CMP			289.38

Attach additional information on appropriately labeled continuation sheets.

TOTAL * \$ 2,831.27

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

Type or print in ink.
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SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	01/20/2008	
through	04/18/2008	Page 30 of 31
NAME OF FILER		I.D. NUMBER
Newport Beach City Hall in the Park Committee, Yes on Measure B		1297811

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Ficker Group

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- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
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| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, e-mail) |

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Seaview Secretary Solutions 2855 E. Coast Hwy. Suite 102 Corona Del Mar CA 92625	CMP		341.60
Smart N Final Costa Mesa CA	CMP		178.81
Stater Brothers Baker St Costa Mesa CA 92626	CMP		274.73
Trader Joe's 8086 E Coast Hwy Newport Beach CA 92657	CMP		345.48

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 1,140.62

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**Schedule I
Miscellaneous Increases to Cash**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE I

Statement covers period from <u>01/20/2008</u> through <u>04/18/2008</u>	CALIFORNIA FORM 460
	Page <u>31</u> of <u>31</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Newport Beach City Hall in the Park Committee, Yes on Measure B

I.D. NUMBER

1297811

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 0.00

Schedule I Summary

- 1. Itemized increases to cash this period. \$ 0.00
- 2. Unitemized increases to cash of under \$100 this period. \$ 90.00
- 3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) \$ 0.00
- 4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) **TOTAL \$** 90.00