t covers period 18 /2018 Parts 1,2,3, and 4. sure Committee / Formed led ored e Part 6.) rmed Candidate/ er Committee e Part 7.)	Date of election if applicable: (Month, Day, Year) 2. Type of Statement □ Pre-election Statement ■ Semi-annual Statement □ Termination Statement □ Amendment (Explase)	nent ment nent	☐ Specia	e <u>1</u> of <u>61</u> For Official Use Only erly Statement al Odd-Year Report emental Preelection hent - Attach Form 495
Parts 1,2,3, and 4. sure Committee / Formed led ored e Part 6.) rmed Candidate/ er Committee	 Pre-election Statem Semi-annual Statem Termination Statem Amendment (Explation) 	nent ment nent	☐ Specia	I Odd-Year Report emental Preelection
	Troccuror(c)			
	NAME OF TREASURER Nancy R. Haley MAILING ADDRESS			
A CODE/PHONE -3600	Danielle Stephen	STATE CA RER, IF ANY	ZIP CODE 92024	AREA CODE/PHONE 760-632-3600
A CODE/PHONE	CITY Encinitas	STATE CA SS	ZIP CODE 92024	AREA CODE/PHONE 760-632-3600
P	-3600 A CODE/PHONE	A CODE/PHONE -3600 A CODE/PHONE -3600 A CODE/PHONE CITY Encinitas A CODE/PHONE CITY Encinitas OPTIONAL: FAX/E-MAIL ADDRE	A CODE/PHONE -3600 A CODE/PHONE CITY Encinitas CA CA NAME OF ASSISTANT TREASURER, IF ANY Danielle Stephen MAILING ADDRESS CITY STATE Encinitas CA OPTIONAL: FAX/E-MAIL ADDRESS	A CODE/PHONE -3600 CITY Encinitas CITY Danielle Stephen MAILING ADDRESS CITY CITY CITY CITY CITY CITY CITY CITY

Executed on	01/30/2019	By Nancy R. Haley	
	DATE	SIGNATURE OF TREASURER OR ASSISTANT TREASURER	
Executed on_		By	
	DATE	SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR	
Executed on_		By	
	DATE	SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT	
Executed on_		By	FPPC Form 460 (June/01)
	DATE	SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT	FPPC Toll-Free Helpline: 866/ASK-FPPC State of California

COVER PAGE - PART 2

CALIFORNIA FORM	460
Page o	f

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR C/	ANDIDATE				
OFFICE SOUGHT OR HELD (INCL	UDE LOCATION AND I	DISTRICT	NUMBER IF	APPLICABLE)	I
RESIDENTIAL/BUSINESS ADDRE	SS (NO. AND STREET)	CI	ΓY	STATE	ZIP
Related Committees No not included in this statement that contributions or to make expendi	at are controlled by you	or are p	rimarily form	List any comr ned to receive	nittees
COMMITTEE NAME			I.D.NUMBE	२	
NAME OF TREASURER				ED COMMITTE	E?
COMMITTEE ADDRESS STREET	ADDRESS (NO P.O.BO	X)			
CITY	STATE	ZIP CO	DDE	AREA CODE	/PHONE
COMMITTEE NAME			I.D.NUMBE	R	
NAME OF TREASURER					E?
COMMITTEE ADDRESS STREET	ADDRESS (NO P.O.BO	X)			
CITY	STATE	ZIP CO	DDE	AREA CODE	PHONE

6. Ballot Measure Committee

NAME OF BALLOT MEASURE					
BALLOT NO. OR LETTER	JURISDICTIC	N		U SUPPORT	
Identify the controlling office	holder, cand	idate, or state	measure pr	roponent, if any.	
NAME OF OFFICEHOLDER, CANE	DIDATE, OR PR	OPONENT			
OFFICE SOUGHT OR HELD			DISTRICT N	IO. IF ANY	
Primarily Formed Co which this committee is primarily		E List names	of officehold	er(s) or candidate(s) F	for
NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUC	GHT OR HELD		
NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUC	OFFICE SOUGHT OR HELD		
NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUGHT OR HELD		D SUPPORT	
NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUC	GHT OR HELD		

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page	Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period from10/21/2018			CALIFORNIA FORM 460		
SEE INSTRUCTIONS ON REVERSE		th	rough <u>12/31</u>	/2018	Page <u>3</u>	of <u>61</u>		
VAME OF FILER Business Leaders for Ethical Government					I.D. NUMBER 1407824	2		
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Colun CALENDAR TOTAL TO	R YEAR	Calendar Year Running in Bot	h the State			
I. Monetary Contributions Schedule A, Line 3	\$124,400.00	\$295,830.04		General Election	ons			
2. Loans Received Schedule B, Line 7	\$0.00	\$0.00		1	/1 through 6/30	7/1 to Date		
B. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$124,400.00	\$295,830.04		20. Contribution Received _\$	00	\$.00		
I. Nonmonetary Contributions Schedule C, Line 3	\$0.00	\$0.00						
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$124,400.00	\$295,830.04		21. Expenditures Made\$	00	\$.00		
Expenditures Made				Expenditure Li	mit Summa	ry for State		
B. Payments Made Schedule E, Line 4	\$119,815.12	\$232,375.05		Candidates				
2. Loans Made Schedule H, Line 7	\$0.00	\$0.00				ditures Made*		
3. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$119,815.12	\$232,375.05		(If Subject	to Voluntary Ex	penditure Limit)		
0. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	(\$16,913.75)	\$10,650.75		Date of Electio (mm/dd/yy)	n	Total to Date		
0. Nonmonetary Adjustment Schedule C, Line 3	\$0.00	\$0.00		(mm/dd/yy)				
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$102,901.37	\$243,025.80						
Current Cash Statement								
2. Beginning Cash Balance Previous Summary Page, Line 16	\$60,757.35	To calculate Col amounts in Colu						
3. Cash Receipts Column A, Line 3 above	\$124,400.00	corresponding a	mounts					
4. Miscellaneous Increases to Cash Schedule I, Line 4	\$862.07	from Column B or report. Some an						
5. Cash Payments Column A, Line 8 above	\$119,815.12	Column A may b figures that shou						
6. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$66,204.30	subtracted from	previous					
If this is a termination statement, Line 16 must be zero.		period amounts. the first report be						
7. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$0.00	for this calendar carry over the ar	mounts					
Cash Equivalents and Outstanding Debts		from Lines 2, 7, any).	and 9 (If	*Since January 1, 2				
18. Cash Equivalents See instructions on reverse	\$0.00			different from amou	nts reported in	Column B.		
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$10,650.75							
				FPPC 1	FPPC I oll-Free Helpli	Form 460 (June/0 [,] ne: 866/ASK-FPP		

Schedule A

Type or print in ink. Amounts may be rounded

SCHEDULE A

Monetary	Contributions Received		nts may be rounded o whole dollars.	Statement covers period from10/21/2018		CALIFORNIA 4 FORM	
SEE INSTRUCTIO	DNS ON REVERSE			through <u>12/31/201</u>	18	Page 4	of
NAME OF FILER						I.D. Nun	
Business Leaders	for Ethical Government					1407824	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
12/18/2018	CA Real Estate PAC - CA Assn of Realtors (CREPAC) Los Angeles, CA 90020 Committee ID: 890106	□ IND □ COM □ OTH □ PTY ■ SCC	N/A N/A	\$17,500.00	\$17,500.00		
10/23/2018	Citizens Against Wasteful Spending PAC Upland, CA 91784 Committee ID: 1381874	□ IND □ COM □ OTH □ PTY □ SCC	N/A N/A	\$10,000.00	\$10,000.00		
11/19/2018	Diversified Pacific Opportunity Fund 1, LLC Rancho Cucamonga, CA 91730	□ IND □ COM ■ OTH □ PTY □ SCC	N/A N/A	\$25,000.00	\$74,500.00		
11/2/2018	Executive Freedom Corp. Rialto, CA 92377	□ IND □ COM ■ OTH □ PTY □ SCC	N/A N/A	\$5,000.00	\$5,000.00		
10/31/2018	Shirley Leggio Upland, CA 91785	IND COM OTH PTY SCC	N/A Retired	\$2,500.00	\$2,500.00		
			SUBTOTA	L			
1. Amount red	A Summary ceived this period - contributions of \$100 or more. Il Schedule A subtotals.)			\$124,400.00	INI		
2. Amount red	ceived this period - unitemized contributions of less	s than \$100		\$0.00		H - Other	,
3. Total mone	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, C			\$124,400.00		Y - Politica C - Small (I Party Contributor Committee

FPPC Form 460 (JUNE/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule A (Continuation Sheet) Monetary Contributions Received		y Contributions Received to whole dollars.			ers period	SCHEDULE A (CONT.) CALIFORNIA 460 FORM		
	INS ON REVERSE			through12/31/201	0	Page 5	of	
NAME OF FILER Business Leaders	for Ethical Government					I.D. Numl 1407824	ber	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
10/26/2018	Pipeline Trucking Inc. Rancho Cucamonga, CA 91730	□ IND □ COM ■ OTH □ PTY □ SCC	N/A N/A	\$3,500.00	\$3,500.00			
12/10/2018	James Louis Previti Rancho Cucamonga, CA 91730	IND COM OTH PTY SCC	Frontier Enterprises President & CEO	\$60,000.00	\$109,000.00			
10/23/2018	University Crossing SBR LLC Palm Desert, CA 92260	□ IND □ COM ■ OTH □ PTY □ SCC	N/A N/A	\$900.00	\$900.00			
		□ IND □ COM □ OTH □ PTY □ SCC						
		□ IND □ COM □ OTH □ PTY □ SCC						
			SUBTOTA	\$124,400.00				

*Contributor Codes IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

Schedule B – Part 1			Type or print in in	k			SCHEE	DULE B - PART 1
		Amounts may be rounded Statement covers period			overs period	CALIFORN		
Loans Received			to whole dollars		from10/21/201	8	FORM	⊷ 460
SEE INSTRUCTIONS ON REVERSE					through $_{12/31/2}$	2018	Page _6	of _61
NAME OF FILER							I.D. NUMBER	
Business Leaders for Ethical Government							1407824	
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
				PAID				CALENDAR YEAR
						% RATE		PER ELECTION**
					DATE DUE		DATE INCURRED	
				PAID				CALENDAR YEAR
						% RATE		PER ELECTION**
					DATE DUE		DATE INCURRED	
				PAID				CALENDAR YEAR
						% RATE		PER ELECTION**
					DATE DUE		DATE INCURRED	
		SUBTOTALS						
Schedule B Summary 1. Loans received this period.							(Enter (e) on Schedule E, Line 3)	
(Total Column (b) plus unitemized loans 2. Loans paid or forgiven this period (Total Column (c) plus loans under \$10 (Include loans paid by a third party that	0 paid or forgiven.)	dule A.)					* Amounts forg another party a reported on Sc	iven or paid by Iso must be hedule A.
3. Net change this period. (Subtract Lin Enter the net here and on the Summary					Net (may be a neg	ative number)	** If required.	
*Contributor Codes IND-Individual COM-Recipient Committee (r	other than PTY or SCC)	OTH-Other PT	Y-Political Party	SCC-Small Cor	ntributor Committee	FPPC	FPPC Fo Toll-Free Helpline	rm 460 (June/01) e: 866/ASK-FPPC

Schedule B - Part 2 Loan Guarantors Type or print in Amounts may be to whole dol SEE INSTRUCTIONS ON REVERSE NAME OF FILER Business Leaders for Ethical Government				Statement covers perform 10/21/2018 through 12/31/2018	eriod	SCHEDULE B - PART 2 CALIFORNIA 460 FORM 61 Page 7 of 61 I.D. Number 1407824	
FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD		LATIVE DATE	BALANCE OUTSTANDING TO DATE
			LENDER		CALENDAR YEAR PER ELECTION (IF REQUIRED)		
	COM OTH PTY SCC		DATE				
			LENDER		CALENDAR YEAR		
			DATE		PER ELECTION (IF REQUIRED)		
			LENDER		CALEND	AR YEAR	
			DATE		PER ELECTION (IF REQUIRED)		
			LENDER		CALEND	CALENDAR YEAR	
□ COM □ OTH □ PTY □ SCC			DATE	_	PER ELE (IF REQI	ECTION JIRED)	
			SUB [.]	TOTAL	Ente Summar Line 1	er on y Page, 7 only.	

Schedule C			Type or	print in ink. ay be rounded					SCHEDULE C	
Nonmonetary Contributions Received			to whole dollars.			atement covers po 10/21/2018	eriod	CALIFORNIA 460		
NAME OF FILER	IONS ON REVERSE				from throu	ugh <u>12/31/2018</u>		Page <u>8</u> 1.D. Numbo 1407824	of <u>61</u>	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION GOODS OR SERV		AMOUNT/ FAIR MARKET VALUE	CUMULAT DAT CALENDA (JAN 1 - I	TE R YEAR	PER ELECTION TO DATE (IF REQUIRED)	
		IND COM OTH PTY SCC								
		IND COM OTH PTY SCC								
		IND COM OTH PTY SCC								
		IND COM OTH PTY SCC								

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

1. Amount received this period - nonmonetary contributions of \$100 or more.	*Contributor Codes
(Include all Schedule C subtotals.)	IND - Individual
2. Amount received this period - unitemized nonmonetary contributions of less than \$100	COM- Recipient Committee (other than PTY or SCC) OTH - Other
 Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)	PTY - Political Party SCC - Small Contributor Committee

Schedule D

Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		Type or print Amounts may b to whole do	e rounded	Statement c	CALIFORNIA FORM 460			
SEE INSTRUCT	FIONS ON REVERSE			through <u>12/31/20</u>	18	Page 9)	of <u>61</u>
NAME OF FILE Business Leade	R rs for Ethical Government					I.D. NUN 140782		
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN.1 - DEC.	EAR	TE PER ELECTION TO DATE (IF REQUIRED)	
10/23/2018	Payee Name: Gino Fillipi - IE 2018 Candidate Name: Gino Fillipi City Council Member District 3 Jurisdiction: City of Upland	 Monetary Contribution Nonmonetary Contribution Independent Expenditure 	Mailer	\$5,153.65	\$10,418.88			
10/24/2018	Payee Name: Sam Crowe - IE 2018 Candidate Name: Sam Crowe Mayor Jurisdiction: City of Ontario	 Monetary Contribution Nonmonetary Contribution Independent Expenditure 	Graphic Design	\$300.00	\$10,035.95			
10/24/2018	Payee Name: Sam Crowe - IE 2018 Candidate Name: Sam Crowe Mayor Jurisdiction: City of Ontario	□ Monetary Contribution □ Nonmonetary Contribution ■ Independent Expenditure	Consulting	\$250.00	\$10,035.95			
			SUBTOTAL					
	e D Summary tions and independent expenditures made this period of	f \$100 or more. (Incl	ude all Schedule D s	ubtotals.)			<u>\$110,358.1</u>	11

2. Unitemized contributions and independent expenditures made this period of under \$100

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

Type or print in ink

Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		Amounts may b to whole do	e rounded	Statement c	18	CALIFORNIA FORM 460		
				through <u>12/31/20</u>	018	Page	<u>10</u> of <u>61</u>	
NAME OF FILE Business Leade	R ers for Ethical Government					I.D. NUMBER 1407824		
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN.1 - DEC	′EAR	PER ELECTION TO DATE (IF REQUIRED)	
10/24/2018	Payee Name: Sam Crowe - IE 2018 Candidate Name: Sam Crowe Mayor Jurisdiction: City of Ontario	Monetary Contribution	Voter File	\$300.84	\$10,035.95			
10/30/2018	□ Support ■ Oppose Payee Name: Gino Fillipi - IE 2018	Expenditure	Graphic Design	\$600.00	\$10,418.88			
	Candidate Name: Gino Fillipi City Council Member District 3 Jurisdiction: City of Upland	Monetary Contribution Nonmonetary Contribution Independent						
	Support Oppose	Expenditure						
10/30/2018	Payee Name: Bill Holland - 2018 IE Candidate Name: Bill Holland City Council Member District 2 Jurisdiction: City of Hesperia	Monetary Contribution	Mailer	\$1,835.98	\$9,200.22			
	Support Oppose	Expenditure						
10/31/2018	Payee Name: Larry Nava - IE 2018 Candidate Name: Larry Nava City Council Member District 2 Jurisdiction: City of Hesperia	Monetary Contribution	Mailer	\$1,716.67	\$3,478.53			
	Support Oppose	Expenditure						
			SUBTOTA					

rint in ink SCHEDULE D (CONT.)

Summar Supporti Candidat	y of Expenditures ng/Opposing Other tes, Measures and Committees	Type or print Amounts may b to whole do	e rounded	Statement covers period from 10/21/2018		CALIFORNIA FORM 460	
NAME OF FILE	R			through <u>12/31/20</u>)18	Page	<u>11</u> of <u>61</u> JMBER
Business Leade	ers for Ethical Government					14078	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN.1 - DEC.	'EAR	PER ELECTION TO DATE (IF REQUIRED)
10/22/2018	Payee Name: Ricky Felix for Upland City Council 2018 Candidate Name: Ricky Felix City Council Member District 3	Monetary Contribution	Mailer	\$2,019.45	\$9,897.28		
	Jurisdiction: City of Upland	Non-Monetary Contribution					
	Support Oppose	Independent Expenditure					
10/31/2018	Payee Name: Doug Chaffee - IE 2018 Candidate Name: Doug Chaffee County Supervisor	Monetary Contribution	Mailer	\$7,142.98	\$7,142.98		
	District 4 Jurisdiction: County of Orange County	Nonmonetary Contribution					
	Support Oppose	Independent Expenditure					
10/31/2018	Payee Name: Paulette Marshall Chaffee - IE 2018 Candidate Name: Paulette Marshall Chaffee City Council Member	Monetary Contribution	Mailer	\$4,761.98	\$4,761.98		
	District 5 Jurisdiction: City of Fullerton	Nonmonetary Contribution					
	Support Oppose	Independent Expenditure					
10/26/2018	Payee Name: Sam Crowe - IE 2018 Candidate Name: Sam Crowe Mayor	Monetary Contribution	Mailer	\$7,345.21	\$10,035.95		
	Jurisdiction: City of Ontario	Nonmonetary Contribution					
	Support Oppose	Independent Expenditure					
		<u>I</u>	SUBTOTA				

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

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rint in ink т.

Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period from 10/21/2018 through 12/31/2018		CALIFORNIA FORM 460 Page 12 of 61		
NAME OF FILEF Business Leade	R rs for Ethical Government						JMBER	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN.1 - DEC	YEAR	PER ELECTION TO DATE (IF REQUIRED)	
11/5/2018	Payee Name: Yvette Walker - IE 2018 Candidate Name: Yvette Walker City Council Member District 2 Jurisdiction: City of Upland	□ Monetary Contribution □ Non-Monetary Contribution ■ Independent Expenditure	Voter File	\$333.74	\$9,468.70			
11/5/2018	Support Oppose Payee Name: Ricky Felix for Upland City Council 2018 Candidate Name: Ricky Felix City Council Member District 3 Jurisdiction: City of Upland Support Oppose	□ Monetary Contribution □ Nonmonetary Contribution ■ Independent Expenditure	Voter File	\$472.99	\$9,897.28			
11/5/2018	Payee Name: Yvette Walker - IE 2018 Candidate Name: Yvette Walker City Council Member District 2 Jurisdiction: City of Upland	 ☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure 	Mailer	\$4,326.48	\$9,468.70			
11/5/2018	Payee Name: Yvette Walker - IE 2018 Candidate Name: Yvette Walker City Council Member District 2 Jurisdiction: City of Upland	□ Monetary Contribution □ Nonmonetary Contribution □ Independent Expenditure	Mailer	\$3,426.48	\$9,468.70			
			SUBTOTAI	<u> </u>		ł		

SCHEDULE D (CONT.)

Summar Supporti Candida	y of Expenditures ing/Opposing Other tes, Measures and Committees	Type or print Amounts may be to whole do	e rounded	Statement covers period from <u>10/21/2018</u>		CALIFORNIA FORM 460		
				through <u>12/31/20</u>)18	Page		of <u>61</u>
NAME OF FILE Business Leade	R ers for Ethical Government					I.D. NU 14078		
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN.1 - DEC.	/EAR	ТО Г	ELECTION DATE QUIRED)
11/5/2018	Measure N - IE Cultivation, Manufacturing, & Testing Marijuana Business Tax Ballot Number or Letter: N Jurisdiction: City of Banning	Monetary Contribution	Mailer	\$1,203.75	\$1,267.33			
	Support Oppose	■ Independent Expenditure						
11/5/2018	Measure O - IE Retail Marijuana Business Tax Ballot Number or Letter: O Jurisdiction: City of Banning	 Monetary Contribution Nonmonetary Contribution Independent 	Mailer	\$1,203.75	\$1,267.33			
	Support Oppose	Expenditure						
11/5/2018	Measure P - IE Authorization to Transfer Electric Utility Revenue to General Fund & Utility Fee Rate Increase Restriction Ballot Number or Letter: P Jurisdiction: City of Banning	Nonmonetary Contribution	Mailer	\$1,203.75	\$1,267.34			
	Support Oppose	Independent Expenditure						
11/5/2018	Measure N - IE Cultivation, Manufacturing, & Testing Marijuana Business Tax Ballot Number or Letter: N Jurisdiction: City of Banning	Monetary Contribution	Voter File	\$63.58	\$1,267.33			
	Support Oppose	Expenditure						
			SUBTOTAI	_				

Schedule D n Sheet)

SCHEDULE D	(CONT.)
CONCOULD D	

Summary Supportin Candidat	of Expenditures ng/Opposing Other es, Measures and Committees	Type or print Amounts may be to whole do	e rounded	Statement covers period from 10/21/2018		CALIFORNIA FORM 460		
				through <u>12/31/2</u>	018	Page	<u>14</u> of	f <u>61</u>
NAME OF FILER Business Leader	R rs for Ethical Government					I.D. NU 14078		
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN.1 - DEC.	EAR TO DATE		ΛTE
11/5/2018	Measure O - IE Retail Marijuana Business Tax Ballot Number or Letter: O Jurisdiction: City of Banning	Monetary Contribution	Voter File	\$63.58	\$1,267.33			
	Support Oppose	Expenditure						
11/5/2018	Measure P - IE Authorization to Transfer Electric Utility Revenue to General Fund & Utility Fee Rate Increase Restriction Ballot Number or Letter: P Jurisdiction: City of Banning	Nonmonetary Contribution	Voter File	\$63.59	\$1,267.34			
	Support Oppose	Independent Expenditure						
10/25/2018	Inland Empire Taxpayers Association PAC	Monetary Contribution		\$4,000.00	\$10,400.00			
	Support Oppose	Independent Expenditure						
10/25/2018	Inland Empire Taxpayers Association PAC	Monetary Contribution		\$400.00	\$10,400.00			
		Nonmonetary Contribution						
	Support Oppose	Independent Expenditure						
			SUBTOTAI					

Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		Type or print Amounts may be to whole do	e rounded	Statement co	•	CALIFORNIA FORM 460		
				through <u>12/31/20</u>	18	Page	<u>15</u> of <u>61</u>	
NAME OF FILE Business Leade	R ers for Ethical Government					I.D. NU 14078	JMBER 324	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN.1 - DEC.	'EAR	PER ELECTION TO DATE (IF REQUIRED)	
10/23/2018	Payee Name: Steinorth for City Council 2018 Candidate Name: Marc Steinorth City Council Member District 3 Jurisdiction: City of Rancho Cucamonga Memo Reference: NON295	Monetary Contribution Non-Monetary Contribution Independent Expenditure	Voter Link	\$219.95	\$13,153.02			
10/23/2018	Payee Name: Friends of David Happe for City Council 2018 Candidate Name: David Happe City Council Member District 4 Jurisdiction: City of Banning Memo Reference: NON296	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Opposition Mailer	\$461.70	\$52,950.94			
10/23/2018	Payee Name: Friends of David Happe for City Council 2018 Candidate Name: David Happe City Council Member District 4 Jurisdiction: City of Banning Memo Reference: NON297	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Research	\$562.50	\$52,950.94			
10/23/2018	Payee Name: Patrick 'Cork' Irwin for City Council 2018 Candidate Name: Patrick 'Cork' Irwin City Council Member District 5 Jurisdiction: City of Banning Memo Reference: NON298	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Research	\$562.50	\$49,985.63			
			SUBTOTAI					

Summary Supporti Candidat	Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		in ink. e rounded Ilars.	Statement co from 10/21/20 through 12/31/20	18	$\frac{\text{CALIFORNIA}}{\text{FORM}} \frac{460}{\text{of} \frac{61}{1000}}$		
NAME OF FILEI Business Leade	R rs for Ethical Government					I.D. NU 14078	JMBER 324	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN.1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
10/23/2018	Payee Name: Patrick 'Cork' Irwin for City Council 2018 Candidate Name: Patrick 'Cork' Irwin City Council Member District 5 Jurisdiction: City of Banning Memo Reference: NON299	Monetary Contribution Non-Monetary Contribution Independent Expenditure	Opposition Mailer	\$461.70	\$49,985.63			
10/23/2018	Payee Name: Committee to Elect Tyra Weis to Chino City Council District 1 - 2018 Candidate Name: Tyra Weis City Council Member District 1 Jurisdiction: City of Chino Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Slate Mailer	\$449.99	\$4,620.81			
10/23/2018	Payee Name: Committee to Elect Tyra Weis to Chino City Council District 1 - 2018 Candidate Name: Tyra Weis City Council Member District 1 Jurisdiction: City of Chino Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Slate Mailer	\$450.00	\$4,620.81			
10/23/2018	Payee Name: Committee to Elect Tyra Weis to Chino City Council District 1 - 2018 Candidate Name: Tyra Weis City Council Member District 1 Jurisdiction: City of Chino	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Slate Mailer	\$449.96	\$4,620.81			
			SUBTOTAL					

Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		Type or print Amounts may be to whole do	e rounded	Statement co from <u>10/21/20</u> through <u>12/31/20</u>	18	$\frac{\text{CALIFORNIA}}{\text{FORM}} \frac{460}{\text{of}}$		
NAME OF FILE Business Leade	R rs for Ethical Government			1		I.D. NU 14078		
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TC CALENDAR Y (JAN.1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
10/23/2018	Payee Name: Committee to Elect Tyra Weis to Chino City Council District 1 - 2018 Candidate Name: Tyra Weis City Council Member District 1 Jurisdiction: City of Chino Support Oppose	Monetary Contribution Non-Monetary Contribution Independent Expenditure	Slate Mailer	\$449.86	\$4,620.81			
10/23/2018	Payee Name: The Committee to Elect Sylvia Orozco Chino City Council 2018 Candidate Name: Sylvia Orozco City Council Member District 2 Jurisdiction: City of Chino	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Slate Mailer	\$449.85	\$7,661.85			
10/23/2018	Payee Name: The Committee to Elect Sylvia Orozco Chino City Council 2018 Candidate Name: Sylvia Orozco City Council Member District 2 Jurisdiction: City of Chino Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Slate Mailer	\$450.00	\$7,661.85			
10/24/2018	Payee Name: Patrick 'Cork' Irwin for City Council 2018 Candidate Name: Patrick 'Cork' Irwin City Council Member District 5 Jurisdiction: City of Banning Memo Reference: NON319 Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Opposition Mailer	\$903.18	\$49,985.63			
			SUBTOTAL					

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Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		Type or print Amounts may be to whole dol	e rounded	Statement c from	covers period	CALIFORNIA FORM 460		
				through <u>12/31/20</u>	018	Page	<u>18</u> of <u>61</u>	
NAME OF FILEF Business Leader	R ers for Ethical Government					I.D. NL 14078	JMBER 824	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	- DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN.1 - DEC.	YEAR	PER ELECTION TO DATE (IF REQUIRED)	
10/24/2018	Payee Name: Friends of David Happe for City Council 2018 Candidate Name: David Happe City Council Member District 4 Jurisdiction: City of Banning Memo Reference: NON320 Support Oppose	Monetary Contribution Non-Monetary Contribution Independent Expenditure	Opposition Mailer	\$1,030.32	\$52,950.94			
10/26/2018	Payee Name: Friends of David Happe for City Council 2018 Candidate Name: David Happe City Council Member District 4 Jurisdiction: City of Banning Memo Reference: NON327	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Graphic Design	\$300.00	\$52,950.94			
10/26/2018	Payee Name: Patrick 'Cork' Irwin for City Council 2018 Candidate Name: Patrick 'Cork' Irwin City Council Member District 5 Jurisdiction: City of Banning Memo Reference: NON328 Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Graphic Design	\$300.00	\$49,985.63			
10/26/2018	Payee Name: Patrick 'Cork' Irwin for City Council 2018 Candidate Name: Patrick 'Cork' Irwin City Council Member District 5 Jurisdiction: City of Banning Memo Reference: NON329 Image: Support interval Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Opposition Mailer	\$903.18	\$49,985.63			
			SUBTOTAL					

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Summary Supportin Candidate	of Expenditures ng/Opposing Other es, Measures and Committees	Type or print Amounts may be to whole do	e rounded	Statement covers period from 10/21/2018 through 12/31/2018		$\frac{\text{CALIFORNIA}}{\text{FORM}} \frac{460}{\text{of}^{61}}$	
NAME OF FILER				unougn <u>12/31/20</u>	10	I.D. NU	
	s for Ethical Government					14078	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN.1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	Payee Name: Friends of David Happe for City Council 2018 Candidate Name: David Happe City Council Member District 4 Jurisdiction: City of Banning Memo Reference: NON337	Monetary Contribution Non-Monetary Contribution Independent Expenditure	Graphic Design	\$600.00	\$52,950.94		
10/30/2018	Payee Name: Friends of David Happe for City Council 2018 Candidate Name: David Happe City Council Member District 4 Jurisdiction: City of Banning Memo Reference: NON338	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Mailer	\$1,124.07	\$52,950.94		
10/30/2018	Payee Name: Patrick 'Cork' Irwin for City Council 2018 Candidate Name: Patrick 'Cork' Irwin City Council Member District 5 Jurisdiction: City of Banning Memo Reference: NON339	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Graphic Design	\$600.00	\$49,985.63		
10/30/2018	Payee Name: Steinorth for City Council 2018 Candidate Name: Marc Steinorth City Council Member District 3 Jurisdiction: City of Rancho Cucamonga Memo Reference: NON340	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Graphic Design	\$685.00	\$13,153.02		
			SUBTOTAL				

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Summary Supportin Candidat	y of Expenditures ng/Opposing Other es, Measures and Committees	Type or print Amounts may be to whole do	e rounded	Statement covers period from10/21/2018		CALIFORNIA FORM 460	
				through <u>12/31/20</u>)18	Page	• <u>20</u> of <u>61</u>
NAME OF FILER Business Leader	R rs for Ethical Government					I.D. N 1407	UMBER 824
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN.1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
10/29/2018	Payee Name: Friends of David Happe for City Council 2018 Candidate Name: David Happe City Council Member District 4 Jurisdiction: City of Banning Memo Reference: NON341	Monetary Contribution Non-Monetary Contribution Independent Expenditure	Field Program	\$6,750.00	\$52,950.94		
10/29/2018	Payee Name: Patrick 'Cork' Irwin for City Council 2018 Candidate Name: Patrick 'Cork' Irwin City Council Member District 5 Jurisdiction: City of Banning Memo Reference: NON342	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Field Program	\$6,750.00	\$49,985.63		
10/30/2018	Payee Name: Steinorth for City Council 2018 Candidate Name: Marc Steinorth City Council Member District 3 Jurisdiction: City of Rancho Cucamonga Memo Reference: NON344	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Mailer	\$8,638.38	\$13,153.02		
10/31/2018	Payee Name: Friends of David Happe for City Council 2018 Candidate Name: David Happe City Council Member District 4 Jurisdiction: City of Banning Memo Reference: NON347	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Mailer	\$444.42	\$52,950.94		
			SUBTOTAL				

Summary Supporti Candidat	y of Expenditures ng/Opposing Other tes, Measures and Committees	Type or print Amounts may b to whole do	e rounded	Statement covers period from 10/21/2018 through 12/31/2018		FO	$\frac{\text{CALIFORNIA}}{\text{FORM}} \frac{460}{\text{of}^{61}}$	
NAME OF FILE	D			through <u>12/31/20</u>		-		1
	rs for Ethical Government					I.D. NU 14078		
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN.1 - DEC.	EAR	PER ELECT TO DATE (IF REQUIRE	Ξ
10/31/2018	Payee Name: Patrick 'Cork' Irwin for City Council 2018 Candidate Name: Patrick 'Cork' Irwin City Council Member District 5 Jurisdiction: City of Banning Memo Reference: NON348	Monetary Contribution Non-Monetary Contribution Independent Expenditure	Mailer	\$444.42	\$49,985.63			
10/31/2018	Payee Name: Friends of David Happe for City Council 2018 Candidate Name: David Happe City Council Member District 4 Jurisdiction: City of Banning Memo Reference: NON350	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Mailer	\$1,124.07	\$52,950.94			
10/31/2018	Payee Name: Patrick 'Cork' Irwin for City Council 2018 Candidate Name: Patrick 'Cork' Irwin City Council Member District 5 Jurisdiction: City of Banning Memo Reference: NON352	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Mailer	\$961.83	\$49,985.63			
10/31/2018	Payee Name: Patrick 'Cork' Irwin for City Council 2018 Candidate Name: Patrick 'Cork' Irwin City Council Member District 5 Jurisdiction: City of Banning Memo Reference: NON355	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Mailer	\$6,624.55	\$49,985.63			
			SUBTOTAL					

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Summar Supporti Candida	y of Expenditures ing/Opposing Other tes, Measures and Committees	Type or print Amounts may b to whole do	e rounded	Statement covers period from 10/21/2018 through 12/31/2018		FC	$\frac{\text{CALIFORNIA}}{\text{FORM}} \frac{460}{\text{of}}$	
NAME OF FILE Business Leade	R ers for Ethical Government			1		I.D. NU 14078	IMBER	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN.1 - DEC.	EAR	PER ELECTIO TO DATE (IF REQUIRED)	N
10/31/2018	Payee Name: Patrick 'Cork' Irwin for City Council 2018 Candidate Name: Patrick 'Cork' Irwin City Council Member District 5 Jurisdiction: City of Banning Memo Reference: NON356	Monetary Contribution Non-Monetary Contribution Independent Expenditure	Mailer	\$902.49	\$49,985.63			
10/31/2018	Payee Name: Friends of David Happe for City Council 2018 Candidate Name: David Happe City Council Member District 4 Jurisdiction: City of Banning Memo Reference: NON357	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Mailer	\$902.49	\$52,950.94			
10/31/2018	Payee Name: Friends of David Happe for City Council 2018 Candidate Name: David Happe City Council Member District 4 Jurisdiction: City of Banning Memo Reference: NON359	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Mailer	\$1,030.32	\$52,950.94			
10/31/2018	Payee Name: Friends of David Happe for City Council 2018 Candidate Name: David Happe City Council Member District 4 Jurisdiction: City of Banning Memo Reference: NON361	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Field Program	\$950.00	\$52,950.94			
			SUBTOTAI	_				

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Summary Supporti Candidat	y of Expenditures ng/Opposing Other es, Measures and Committees	Type or print Amounts may be to whole do	e rounded	Statement covers period from10/21/2018		california form 460	
				through <u>12/31/20</u>)18	Page	<u>23</u> of <u>61</u>
NAME OF FILEI Business Leade	R rs for Ethical Government					I.D. NI 14078	UMBER 824
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN.1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
10/31/2018	Payee Name: Patrick 'Cork' Irwin for City Council 2018 Candidate Name: Patrick 'Cork' Irwin City Council Member District 5 Jurisdiction: City of Banning Memo Reference: NON362	Monetary Contribution Non-Monetary Contribution Independent Expenditure	Field Program	\$950.00	\$49,985.63		
10/31/2018	Payee Name: Friends of David Happe for City Council 2018 Candidate Name: David Happe City Council Member District 4 Jurisdiction: City of Banning Memo Reference: NON365	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Signs	\$70.00	\$52,950.94		
10/31/2018	Payee Name: Patrick 'Cork' Irwin for City Council 2018 Candidate Name: Patrick 'Cork' Irwin City Council Member District 5 Jurisdiction: City of Banning Memo Reference: NON366	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Signs	\$70.00	\$49,985.63		
10/31/2018	Payee Name: Brosowske for City Council 2018 Candidate Name: Jeremiah Brosowske City Council Member District 4 Jurisdiction: City of Hesperia Memo Reference: NON368	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Mailer	\$1,615.37	\$9,078.32		
			SUBTOTAI				

Summary Supporti Candidat	y of Expenditures ng/Opposing Other tes, Measures and Committees	Type or print Amounts may b to whole do	e rounded	Statement covers period from 10/21/2018 through 12/31/2018		CALIFORNIA FORM 460		
NAME OF FILE	R			through <u>12/31/20</u>	18	I.D. NU		of <u>01</u>
Business Leade	rs for Ethical Government					14078		
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN.1 - DEC.	EAR	TO	LECTION DATE QUIRED)
11/1/2018	Payee Name: Friends of David Happe for City Council 2018 Candidate Name: David Happe City Council Member District 4 Jurisdiction: City of Banning Memo Reference: NON375	Monetary Contribution Non-Monetary Contribution Independent Expenditure	Voter File	\$250.00	\$52,950.94			
11/1/2018	Payee Name: Patrick 'Cork' Irwin for City Council 2018 Candidate Name: Patrick 'Cork' Irwin City Council Member District 5 Jurisdiction: City of Banning Memo Reference: NON376	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Voter File	\$250.00	\$49,985.63			
11/5/2018	Payee Name: Friends of David Happe for City Council 2018 Candidate Name: David Happe City Council Member District 4 Jurisdiction: City of Banning Memo Reference: NON384	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Mailer	\$5,276.41	\$52,950.94			
11/5/2018	Payee Name: Brosowske for City Council 2018 Candidate Name: Jeremiah Brosowske City Council Member District 4 Jurisdiction: City of Hesperia Memo Reference: NON385	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Mailer	\$3,047.15	\$9,078.32			
			SUBTOTAL	-				

Type or print in ink

Summary Supportin Candidat	y of Expenditures ng/Opposing Other es, Measures and Committees	Amounts may be rounded to whole dollars.	from10/21/20	Statement covers period from 10/21/2018 through 12/31/2018		$\frac{\text{CALIFORNIA}}{\text{FORM}} \frac{460}{460}$ Page $\frac{25}{61}$ of $\frac{61}{10}$	
NAME OF FILEF Business Leader	R rs for Ethical Government				I.D. NUI 140782	MBER	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT DESCRI (IF REQU	JIRED) PERIOD	CUMULATIVE TO CALENDAR Y (JAN.1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
11/1/2018	Payee Name: Tim Shaw - IE 2018 Candidate Name: Tim Shaw County Supervisor District 4 Jurisdiction: County of Orange County	Monetary Contribution Non-Monetary Contribution Independent Expenditure Monetary	\$3,704.00	\$3,704.00			
	Support Oppose	Contribution Contribution Nonmonetary Contribution Independent Expenditure					
	Support Oppose	 Monetary Contribution Nonmonetary Contribution Independent Expenditure 					
	Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
		SU	BTOTAL \$110,358.11				

SCHEDULE E Schedule E Type or print in ink. Statement covers period CALIFORNIA Amounts may be rounded **Payments Made** FORM to whole dollars. 10/21/2018 from _ of <u>61</u> Page <u>26</u> through 12/31/2018 SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Business Leaders for Ethical Government 1407824

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, email)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE O	R	DESCRIPTION OF PAYMENT	AMOUNT PAID
Crown Connect San Bernardino, CA 92408	LIT			\$923.40
Point Loma Strategic Research San Diego, CA 92101	POL			\$1,125.00
Voter Link Alpine, UT 84004	LIT	Voter File		\$219.95

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

Schedule E Summary

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1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$119,815.12
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).)	<u>\$0.00</u>
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	\$119,815.12

Schedule E (Continuation Sheet) Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period from10/21/2018	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through <u>12/31/2018</u>	Page <u>27</u> of <u>61</u>
NAME OF FILER Business Leaders for Ethical Government			I.D. NUMBER 1407824

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, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE O	R DESCRIPTION OF PAYMENT	AMOUNT PAID
Crown Connect San Bernardino, CA 92408	IND	Mailer Opposing Gino Filippi - See Schedule G	\$1,718.85
Your Community Voter Guide Long Beach, CA 90802	LIT	Slate Mailer	\$449.99
Committee ID: 1408057			
Latino Family Voter Guide Long Beach, CA 90802	LIT	Slate Mailer	\$450.00
Committee ID: 1386464			
California Families Vote Green Long Beach, CA 90802	LIT	Slate Mailer	\$449.96
Committee ID: 1408055			
Families First Education Voter Guide Long Beach, CA 90802	LIT	Slate Mailer	\$449.86
Committee ID: 1398433			

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

Schedule E (Continuation Sheet) Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period from10/21/2018	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through <u>12/31/2018</u>	Page <u>28</u> of <u>61</u>
NAME OF FILER Business Leaders for Ethical Government			I.D. NUMBER 1407824

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, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE C	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Families First Education Voter Guide Long Beach, CA 90802	LIT	Slate Mailer	\$449.85
Committee ID: 1398433			
Your Community Voter Guide Long Beach, CA 90802	LIT	Slate Mailer	\$450.00
Committee ID: 1408057			
3AM Communications Manteca, CA 95337	IND	Graphic Design Opposing Sam Crowe	\$300.00
Minuteman Press Rancho Cucamonga, CA 91730	LIT	See Schedule G	\$1,030.32
Minuteman Press Rancho Cucamonga, CA 91730	LIT	See Schedule G	\$903.18

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

Schedule E (Continuation Sheet) Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period from10/21/2018	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through <u>12/31/2018</u>	Page 29 of 61
NAME OF FILER Business Leaders for Ethical Government			I.D. NUMBER 1407824

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
СТВ	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, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Inland Empire Taxpayers Association PAC Riverside, CA 92501	СТВ		\$4,000.00
Committee ID: 1285847			
Inland Empire Taxpayers Association PAC Riverside, CA 92501	СТВ		\$400.00
Committee ID: 1285847			
Minuteman Press Rancho Cucamonga, CA 91730	LIT	See Schedule G	\$903.18
BAM Communications Manteca, CA 95337	LIT	Graphic Design	\$600.00
BAM Communications Manteca, CA 95337	LIT	Graphic Design - will not be used.	\$300.00

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

Schedule E (Continuation Sheet) Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period from10/21/2018	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through <u>12/31/2018</u>	Page <u>30</u> of <u>61</u>
NAME OF FILER Business Leaders for Ethical Government			I.D. NUMBER 1407824

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
СТВ	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, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE O	R DESCRIPTION OF PAYMENT	AMOUNT PAID
Voter Link Alpine, UT 84004	LIT	Voter File	\$190.75
Crown Connect San Bernardino, CA 92408	LIT	See Schedule G	\$1,124.07
3AM Communications Manteca, CA 95337	IND	Graphic Design Opposing Gino Fillipi	\$300.00
3AM Communications Manteca, CA 95337	LIT	Graphic Design	\$1,500.00
Minuteman Press Rancho Cucamonga, CA 91730	LIT	See Schedule G	\$4,319.19

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Schedule E (Continuation Sheet) Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period from <u>10/21/2018</u>	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through <u>12/31/2018</u>	Page <u>31</u> of <u>61</u>
NAME OF FILER Business Leaders for Ethical Government			I.D. NUMBER 1407824

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
СТВ	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, email)

NAME AND ADDRESS OF PAYEE OR CREDITO (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE C	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Crown Connect San Bernardino, CA 92408	IND	Mailer Opposing Bill Holland - See Schedule G	\$1,535.98
Crown Connect San Bernardino, CA 92408	LIT		\$888.84
Crown Connect San Bernardino, CA 92408	LIT		\$1,124.07
Crown Connect San Bernardino, CA 92408	LIT	See Schedule G	\$961.83
Crown Connect San Bernardino, CA 92408	LIT	See Schedule G	\$961.83

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

Schedule E (Continuation Sheet) Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period from10/21/2018	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through <u>12/31/2018</u>	Page <u>32</u> of <u>61</u>
NAME OF FILER Business Leaders for Ethical Government			I.D. NUMBER 1407824

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
СТВ	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, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Minuteman Press Rancho Cucamonga, CA 91730	LIT	See Schedule G	\$1,804.98
Minuteman Press Rancho Cucamonga, CA 91730	LIT	See Schedule G	\$1,030.32
The La Jolla Group San Diego, CA 92111	CNS		\$1,900.00
COGS South Signs Santa Ana, CA 92707	СМР		\$70.00
COGS South Signs Santa Ana, CA 92707	СМР		\$70.00

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

Schedule E (Continuation Sheet) Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period from10/21/2018	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through <u>12/31/2018</u>	Page <u>33</u> of <u>61</u>
NAME OF FILER Business Leaders for Ethical Government			I.D. NUMBER 1407824

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, email)

CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
LIT	See Schedule G	\$1,615.37
IND	Mailer Supporting Larry Nava - See Schedule G	\$1,416.67
IND	Mailer Supporting Ricky Felix - See Schedule G	\$1,719.45
IND	Mailer Opposing Doug & Paulette Chaffee - See Schedule G	\$11,904.96
IND	Mailer Opposing Sam Crowe - See Schedule G	\$7,345.21
	IND IND	LIT See Schedule G IND Mailer Supporting Larry Nava - See Schedule G IND Mailer Supporting Ricky Felix - See Schedule G IND Mailer Supporting Ricky Felix - See Schedule G IND Mailer Opposing Doug & Paulette Chaffee - See Schedule G

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

Schedule E (Continuation Sheet) Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period from10/21/2018	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through <u>12/31/2018</u>	Page <u>34</u> of <u>61</u>
NAME OF FILER Business Leaders for Ethical Government			I.D. NUMBER 1407824

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
СТВ	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, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE O	R DESCRIPTION OF PAYMENT	AMOUNT PAID
Voter Link Alpine, UT 84004	LIT	Voter File	\$500.00
Voter Link Alpine, UT 84004	IND	Voter File Supporting Ricky Felix & Yvette Walker	\$667.48
Minuteman Press Rancho Cucamonga, CA 91730	IND	Mailer Supporting Yvette Walker - See Schedule G	\$3,426.48
Minuteman Press Rancho Cucamonga, CA 91730	IND	Mailer Supporting Yvette Walker - See Schedule G	\$3,426.48
Minuteman Press Rancho Cucamonga, CA 91730	LIT	See Schedule G	\$1,461.77

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Schedule E (Continuation Sheet) Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period from10/21/2018	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through <u>12/31/2018</u>	Page <u>35</u> of <u>61</u>
NAME OF FILER Business Leaders for Ethical Government			I.D. NUMBER 1407824

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
СТВ	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, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Minuteman Press Rancho Cucamonga, CA 91730	LIT	See Schedule G	\$2,347.15
Minuteman Press Rancho Cucamonga, CA 91730	IND	Mailer Supporting Measure N, O & P - See Schedule G	\$3,311.25
Scott & Cronin LLP Encinitas, CA 92024	PRO		\$1,000.00
Scott & Cronin LLP Encinitas, CA 92024	PRO		\$1,591.19
3AM Communications Manteca, CA 95337	LIT	Graphic Design	\$4,585.00

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Schedule E (Continuation Sheet) Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period from10/21/2018	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through <u>12/31/2018</u>	Page <u>36</u> of <u>61</u>
NAME OF FILER Business Leaders for Ethical Government			I.D. NUMBER 1407824

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
СТВ	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, email)

CODE	OR DESCRIPTION OF PAYMENT	
IND	Graphic Design Opposing Bill Holland & Gino Filippi; Supporting Yvette Walker, Ricky Felix, Measure N, O, & P	Larry Nava, \$2,100.00
PRO		\$1,222.70
PRO		\$112.60
LIT	See Schedule G	\$9,992.55
IND	Mailers (2) Opposing Gino Filippi - See Schedule G	\$3,434.80
	PRO PRO LIT	IND Graphic Design Opposing Bill Holland & Gino Filippi; Supporting Yvette Walker, Ricky Felix, Measure N, O, & P PRO PRO LIT See Schedule G

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

SCHEDULE E (CONT.)

Schedule E (Continuation Sheet) Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period from10/21/2018	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through <u>12/31/2018</u>	Page <u>37</u> of <u>61</u>
NAME OF FILER Business Leaders for Ethical Government			I.D. NUMBER 1407824

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
СТВ	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, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
James H. Erwin Highland, CA 92346	CNS		\$3,943.56
United Taxpayers of Orange County Newport Beach, CA 92658	IND	Slate Mailer Supporting Tim Shaw	\$3,704.00
Committee ID: 1285728			
Kaufman Legal Group, APC Los Angeles, CA 90017	PRO		\$112.50
Voter Link Alpine, UT 84004	LIT	Voter File	\$100.00
Voter Link Alpine, UT 84004	LIT	Voter File	\$139.25

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

SUBTOTAL

SCHEDULE E (CONT.)

Schedule E (Continuation Sheet) Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period from10/21/2018	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through <u>12/31/2018</u>	Page <u>38</u> of <u>61</u>
NAME OF FILER Business Leaders for Ethical Government			I.D. NUMBER 1407824

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, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Voter Link Alpine, UT 84004	LIT	Voter File	\$250.00
Voter Link Alpine, UT 84004	LIT	Voter File	\$250.00
Secretary of State - Political Reform Division Sacramento, CA 95814	FIL		\$50.00
Scott & Cronin LLP Encinitas, CA 92024	PRO		\$962.50
The La Jolla Group San Diego, CA 92111	CNS		\$716.80

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

SUBTOTAL

SCHEDULE E (CONT.)

Schedule E (Continuation Sheet) Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period from 10/21/2018	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through <u>12/31/2018</u>	Page <u>39</u> of <u>61</u>
NAME OF FILER Business Leaders for Ethical Government			I.D. NUMBER 1407824

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
СТВ	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating		t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks		candidate travel, lodging, and meals
	fundraising events		polling and survey research		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, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE O	DR DESC	RIPTION OF PAYMENT	AMOUNT PAID
The La Jolla Group San Diego, CA 92111	CNS			\$13,500.00

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

SUBTOTAL \$119,815.12

Point Loma Strategic Research POL \$1.125.00 \$0.00 \$1.125.00 \$0.00 res must also be **SUBTOTALS** 4.50 3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and **NET** (\$16,913.75) on the Summary Page, Column A, Line 9.)..... May be a negative number. FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

BALANCE BEGINNING

OF THIS PERIOD

\$5,000.00

\$5,000.00

Schedule F Am Accrued Expenses (Unpaid Bills)

ounts	may	be rounded
to w	hole	dollars.

Type or print in ink.

Statement covers period CALIFORNIA

THIS PERIOD

(ALSO REPORT ON E)

\$0.00

\$0.00

from 10/21/2018

through 12/31/2018

THIS PERIOD

\$0.00

\$0.00

Page <u>40</u> of <u>61</u>

I.D. NUMBER 1407824

FORM

\$5,000.00

\$5.000.00

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

CNS

CNS

CMP	campaign paraphernalia/misc.	MBR member communications		RAD	D radio airtime and production costs			
CNS	campaign consultants	MTG	meetings and appeara	nces	RFD	returned c		
CTB	contribution (explain nonmonetary)*	OFC	office expenses		SAL	campaign	workers' salaries	
CVC	civic donations	PET petition circulating		TEL	TEL t.v. or cable airtime and production costs		costs	
FIL	candidate filing/ballot fees	PHO	PHO phone banks		TRC	RC candidate travel, lodging, and meals		
FND	fundraising events	POL polling and survey research		TRS	TRS staff/spouse travel, lodging, and meals			
IND	independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services		TSF	F transfer between committees of the same candidate/sp			
LEG	legal defense	PRO professional services (legal, accounting)		VOT voter registration				
LIT	campaign literature and mailings	PRT	print ads	o v o ,	WEB	informatio	n technology costs (interr	net, email)
	NAME AND ADDRESS OF CREDITOR		CODE OR	(a) OUTSTANDING	(b) AMOUNT INC	JRRED	(c) Amount paid	(d) OUTSTANDING

CODE OR DESCRIPTION OF PAYMENT

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)

Schedule F Summary

SEE INSTRUCTIONS ON REVERSE

Business Leaders for Ethical Government

NAME OF FILER

OPR Communications

OPR Communications

Riverside, CA 92501

San Diego, CA 92101

2347873-0

Riverside, CA 92501

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for	
	INCURRED TOTALS \$650.75

2. 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 §17,56



SCHEDULE F (CONT.)

Schedule F Continuation Sheet) Accrued Expenses (Unpaid Bills)			Statement cove from10/21/201	•	CALIFORNIA FORM 460		
			through <u>12/31/201</u>	8	Page $\frac{41}{2}$ of $\frac{6}{2}$	51	
NAME OF FILER Business Leaders for Ethical Government					I.D. NUMBER 1407824		
CODES: If one of the following codes accurately describes			· ·				
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 *Payments that are contributions or independent expenditures must also be sum	MBR member communication MTG meetings and appears OFC office expenses PET petition circulating PHO phone banks POL polling and survey res POS postage, delivery and PRO professional services PRT print ads mearized on Schedule D.	ances search messenger services	RFD returned of SAL campaign TEL t.v. or cat TRC candidate TRS staff/spou TSF transfer b VOT voter regi	stration	s oduction costs and meals	ate/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 PA THIS PERIC (ALSO REPORT O	DD BALANCE A	DING T CLOSE	
Kaufman Legal Group, APC Los Angeles, CA 90017	PRO	\$1,222.70	\$0.00	\$1,222.70	\$0.00		
Scott & Cronin LLP Encinitas, CA 92024	PRO	\$1,000.00	\$0.00	\$1,000.00	\$0.00		
The La Jolla Group San Diego, CA 92111	CNS	\$716.80	\$0.00	\$716.80	\$0.00		
The La Jolla Group San Diego, CA 92111	CNS	\$13,500.00	\$0.00	\$13,500.00	\$0.00		
	SUBTOTALS		1	<u> </u>			

SCHEDULE F (CONT.)

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)	Type or print in ir Amounts may be rou to whole dollars	unded	Statement cove from	•	CALIFORNIA 460
			through <u>12/31/201</u>	8	Page <u>42</u> of <u>61</u>
NAME OF FILER Business Leaders for Ethical Government					I.D. NUMBER 1407824
CODES: If one of the following codes accurately describes 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 *Payments that are contributions or independent expenditures must also be sum	MBR member communication MTG meetings and appears OFC office expenses PET petition circulating PHO phone banks POL polling and survey res POS postage, delivery and PRO professional services of PRT print ads	ons ances earch messenger services	RAD radio airti RFD returned o SAL campaign TEL t.v. or cab TRC candidate TRS staff/spou TSF transfer b VOT voter regi	me and productions contributions workers' salarie ble airtime and pr travel, lodging, use travel, lodging, etween committe stration	rs roduction costs and meals
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 P/ THIS PERIC (ALSO REPORT C	DD BALANCE AT CLOSE
Scott & Cronin LLP Encinitas, CA 92024	PRO	\$0.00	\$650.75	\$0.00	\$650.75
	SUBTOTALS	\$27,564.50	\$650.75	\$17,564.50	\$10,650.75

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)	t	Amount	e or print in ink. nts may be rounded whole dollars.	State	ement covers period	CALIFORNIA FORM 46	
SEE INSTRUCTIONS ON REVERSE				through	12/31/2018	Page <u>43</u> of <u>61</u>	_
NAME OF FILER Business Leaders for Ethical Government						I.D. NUMBER 1407824	
NAME OF AGENT OR INDEPENDENT CONTRACTOR Chris Jones Consulting							
CODES: If one of the following codes accurately describes	the payment, yo	u may ent	ter the code. Otherw	ise, descrit	be the payment.		
CMP campaign paraphernalia/misc.	MBR member co	•			radio airtime and producti	ion costs	
CNS campaign consultants	MTG meetings a	and appearan	inces		returned contributions		
CTB contribution (explain nonmonetary)*	OFC office expen				campaign workers' salarie		
CVC civic donations	PET petition circ				t.v. or cable airtime and p		
FIL candidate filing/ballot fees	PHO phone bank				candidate travel, lodging,		
FND fundraising events		d survey rese			staff/spouse travel, lodgin		
IND independent expenditure supporting/opposing others (explain)*	1 0		messenger services			tees of the same candidate/spo	onsor
LEG legal defense		al services (in	(legal, accounting)		voter registration		
LIT campaign literature and mailings	PRT print ads			WEB	information technology co	osts (internet, email)	
* Payments that are contributions or independent expenditures must also be sur NAME AND ADDRESS OF PAYEE OR CREDITOR	nmarized on Schedule) D. T				I	
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	ļ	CODE	OR DESC	SCRIPTION OF F	PAYMENT	AMOUNT PAID	J
Tony Siciliani	ŀ	IND	Printing Opposing Doug &	& Paulette Cha	ıffee	\$5,047.00	
Sacramento, CA 95816	ļ	1					
	ļ	1					
	ļ	1					
	ļ	1					
	ļ	1					
United States Postal Service		IND	Postage Opposing Doug &	& Paulette Cha	ffee	\$4,476.65	
Enginiting CA 02024	1	1					

Encinitas, CA 92024 Hareline Graphics West Sacramento, CA 95691 IND Graphic Design Opposing Doug & Paulette Chaffee \$1,000.00 Political Data, Inc. IND Voter File Opposing Doug & Paulette Chaffee \$381.31 Norwalk, CA 90652 **TOTAL*** \$10904.96

Attach additional information on appropriately labeled continuation sheets.

* 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)			pe or print in ink. Ints may be rounded	Statement covers period	
			o whole dollars.	from10/21/2018	FORM 46
				through <u>12/31/2018</u>	—— Page <u>44</u> of <u>61</u>
SEE INSTRUCTIONS ON REVERSE					_
Business Leaders for Ethical Government					I.D. NUMBER 1407824
JAME OF AGENT OR INDEPENDENT CONTRACTOR Crown Connect					
CODES: If one of the following codes accurately describes	the paymer	it, you may ei	nter the code. Otherw	vise, describe the payment.	
CMP campaign paraphernalia/misc.	• •	ber communicat		RAD radio airtime and pr	oduction costs
CNS campaign consultants	MTG mee	tings and appear	rances	RFD returned contributio	ins
CTB contribution (explain nonmonetary)*	OFC office			SAL campaign workers'	salaries
CVC civic donations		on circulating		TEL t.v. or cable airtime	
FIL candidate filing/ballot fees	PHO phor			TRC candidate travel, loo	
FND fundraising events	POL pollir	ng and survey re	search	TRS staff/spouse travel,	
IND independent expenditure supporting/opposing others (explain)*			messenger services		ommittees of the same candidate/spo
LEG legal defense LIT campaign literature and mailings			(legal, accounting)	VOT voter registration	any agata (international)
LIT campaign literature and mailings * Payments that are contributions or independent expenditures must also be sur				WEB information technol	ogy costs (internet, email)
NAME AND ADDRESS OF PAYEE OR CREDITOR		CODE	OR DES	SCRIPTION OF PAYMENT	AMOUNT PAID
(IF COMMITTEE, ALSO ENTER I.D. NUMBER)				SCRIPTION OF PATMENT	
Jnited States Postal Service Encinitas, CA 92024		POS			\$258.75
Mennus, CA 72024					
United States Postal Service		IND	Postage Opposing Bill H	Holland	\$521.86
Encinitas, CA 92024					
Jnited States Postal Service		POS			\$258.75
Encinitas, CA 92024					
Jnited States Postal Service		IND	Postage Supporting Rich	ky Felix	\$711.81
Encinitas, CA 92024			l' souge supporting Rief	,	ψ/11.01

Attach additional information on appropriately labeled continuation sheets.

* 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.

TOTAL* \$1751.17

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)		Amount	e or print in ink. nts may be rounded whole dollars.	State	tement covers period 10/21/2018	CALIFOR FORM	
SEE INSTRUCTIONS ON REVERSE				through	h <u>12/31/2018</u>	- Page <u>45</u>	of
NAME OF FILER Business Leaders for Ethical Government						I.D. NUMBER 1407824	
NAME OF AGENT OR INDEPENDENT CONTRACTOR Crown Connect							
CODES: If one of the following codes accurately describes the	ne payment, yo	u may ent	ter the code. Otherw	ise, descrił	be the payment.		I
CMP campaign paraphernalia/misc.	MBR member co	ommunicatio	uns	RAD	radio airtime and produc	ction costs	
CNS campaign consultants		and appearan	.nces	RFD			
CTB contribution (explain nonmonetary)*	OFC office exper			SAL	campaign workers' salar		
CVC civic donations	PET petition circ			TEL	t.v. or cable airtime and		3
FIL candidate filing/ballot fees	PHO phone bank			TRC		0.	
FND fundraising events		d survey resea		TRS TSF	staff/spouse travel, lodgi transfer between commit		
IND independent expenditure supporting/opposing others (explain)* LEG legal defense			messenger services	VOT		lttees of the same	e candidate/sponsor
LEG legal defense LIT campaign literature and mailings	PRO professiona PRT print ads	al services (in	(legal, accounting)		voter registration information technology c	costs (internet 6	smoil)
* Payments that are contributions or independent expenditures must also be sumn		~ D			Information technology o	20515 (Internet, 5	many
NAME AND ADDRESS OF PAYEE OR CREDITOR							
(IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DESC	SCRIPTION OF F	PAYMENT		AMOUNT PAID
United States Postal Service Encinitas, CA 92024	I	IND	Postage Opposing Gino F	ilippi		\$7	711.18
United States Postal Service Encinitas, CA 92024	<u>1</u>	POS				\$2	331.35

IND

Postage Opposing Sam Crowe

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$5909.65

\$4,867.12

* 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.

United States Postal Service Encinitas, CA 92024

Schedule G Payments Made by an Agent or Independent		Type or print in ink. Amounts may be rounded to whole dollars.			ement covers period		SCHEDULE
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)					10/21/2018		FORM 460
				through	12/31/2018	Page <u>46</u>	of _61
SEE INSTRUCTIONS ON REVERSE						_	
Business Leaders for Ethical Government						I.D. NUMBE 1407824	κ
NAME OF AGENT OR INDEPENDENT CONTRACTOR Minuteman Press							
CODES: If one of the following codes accurately describes the	ne payment, yo	ou may ente	er the code. Otherwis	e, describ	e the payment.		
CMP campaign paraphernalia/misc.	MBR member c	ommunication	ns	RAD	radio airtime and produc	ction costs	
CNS campaign consultants	MTG meetings		nces	RFD	returned contributions		
CTB contribution (explain nonmonetary)*	OFC office expe			SAL	campaign workers' salar		
CVC civic donations	PET petition cir PHO phone bar			TEL			sts
FIL candidate filing/ballot fees FND fundraising events	POL polling and		arch	TRC	candidate travel, lodging staff/spouse travel, lodgi		
IND independent expenditure supporting/opposing others (explain)*			nessenger services	TSF	transfer between commi		
LEG legal defense			egal, accounting)	VOT	voter registration		
LIT campaign literature and mailings	PRT print ads		ogai, accounting)		information technology of	costs (internet,	email)
* Payments that are contributions or independent expenditures must also be sumr		e D.			6,	, , , , , , , , , , , , , , , , , , ,	,
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DESC		PAYMENT		AMOUNT PAID
United States Postal Service Encinitas, CA 92024		POS					\$1,303.59
United States Postal Service Encinitas, CA 92024		POS					\$741.68
United States Postal Service Encinitas, CA 92024		IND	Postage Opposing Gino Fil	ippi			\$790.43
United States Postal Service Encinitas, CA 92024		IND	Postage Opposing Gino Fil	ippi			\$790.43
Attach additional information on appropriately labeled continua						TOTAL*	#2/2/12

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or

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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 from10/21/2018	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through <u>12/31/2018</u>	Page <u>47</u> of <u>61</u>
NAME OF FILER Business Leaders for Ethical Government			I.D. NUMBER 1407824
NAME OF AGENT OR INDEPENDENT CONTRACTOR Minuteman Press			
CODES: If one of the following codes accurately describes the			
CMP campaign paraphernalia/misc. CNS campaign consultants	MBR member communications	RAD radio airtime and producti RFD returned contributions	on costs
CNS campaign consultants CTB contribution (explain nonmonetary)*	MTG meetings and appearances OFC office expenses	SAL campaign workers' salarie	es
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,	
 FND fundraising events IND independent expenditure supporting/opposing others (explain)* 	POL polling and survey research POS postage, delivery and messenger services	TRS staff/spouse travel, lodgin TSF transfer between committ	g, and meals ees of the same candidate/sponsor
LEG legal defense	POS postage, delivery and messenger services PRO professional services (legal, accounting)	VOT voter registration	ees of the same candidate/sponsor
LIT campaign literature and mailings	PRT print ads	WEB information technology co	sts (internet, email)
* Payments that are contributions or independent expenditures must also be sum	marized on Schedule D.		
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DES	SCRIPTION OF PAYMENT	AMOUNT PAID
United States Postal Service Encinitas, CA 92024	IND Postage Supporting Mea	isure N, O & P	\$2,014.27
United States Postal Service Encinitas, CA 92024	IND Postage Supporting Yve	tte Walker	\$2,127.78
United States Postal Service Encinitas, CA 92024	IND Postage Supporting Yve	tte Walker	\$2,127.78

POS

Attack additional information a		Inholed continuation shorts
Attach additional information of	n appropriately	abeled continuation sheets.

TOTAL* \$6605.06

\$335.23

* 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.

United States Postal Service Encinitas, CA 92024

chedule G	Type or print in ink.		SCHEDULE
ayments Made by an Agent or Independent	Amounts may be rounded	Statement covers period	
contractor (on Behalf of This Committee)	to whole dollars.	from10/21/2018	FORM 400
E INSTRUCTIONS ON REVERSE		through	Page <u>48</u> of <u>61</u>
ME OF FILER			I.D. NUMBER
isiness Leaders for Ethical Government			1407824
ME OF AGENT OR INDEPENDENT CONTRACTOR inuteman Press			
CODES: If one of the following codes accurately describes the payment,	you may enter the code. Otherw	vise, describe the payment.	
CMP campaign paraphernalia/misc. MBR memb	er communications	RAD radio airtime and producti	on costs
	gs and appearances	RFD returned contributions	
CTB contribution (explain nonmonetary)* OFC office of	•	SAL campaign workers' salarie	
CVC civic donations PET petition FIL candidate filing/ballot fees PHO phone	n circulating	TEL t.v. or cable airtime and p TRC candidate travel, lodging,	
	and survey research	TRC calificate travel, lodging,	
	e, delivery and messenger services		ees of the same candidate/spon
	sional services (legal, accounting)	VOT voter registration	
IT campaign literature and mailings PRT print a		WEB information technology co	sts (internet, email)
Payments that are contributions or independent expenditures must also be summarized on Sche	dule D.		· · ·
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DES	SCRIPTION OF PAYMENT	AMOUNT PAID
nited States Postal Service acinitas, CA 92024	POS		\$538.50
nited States Postal Service	POS		\$571.81
icinitas, CA 92024			5571.01
nited States Postal Service acinitas, CA 92024	IND Postage Supporting Larr	y Nava	\$495.45
nited States Postal Service cinitas, CA 92024	POS		\$2,325.82
ttach additional information on appropriately labeled continuation sheets.			TOTAL* \$3931.58

* 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

Schedule G	Type or print in ink. Amounts may be rounded to whole dollars.				S			
Payments Made by an Agent or Independent				d k	Statement covers perio			
Contractor (on Behalf of This Committee)							ORM 460	
EE INSTRUCTIONS ON REVERSE					through	Page <u>49</u>	of	
JAME OF FILER Jusiness Leaders for Ethical Government						I.D. NUME 1407824	BER	
IAME OF AGENT OR INDEPENDENT CONTRACTOR Minuteman Press								
CODES: If one of the following codes accurately describes the	payment, yc	ou may en	ter the code. Oth	nerwise,	describe the payment.			
	BR member c	ommunicatio	ons		RAD radio airtime and p	roduction costs		
	TG meetings		inces		RFD returned contribution			
	FC office exp				SAL campaign workers			
	ET petition cil HO phone bar				TEL t.v. or cable airtime TRC candidate travel, lo	e and production co	DSIS	
	OL polling and		earch		TRS staff/spouse travel	lodging, and means	le	
			messenger services				ame candidate/spon	
			(legal, accounting)		VOT voter registration			
	RT print ads		(-3-,		WEB information techno	logy costs (interne	t, email)	
* Payments that are contributions or independent expenditures must also be summari	ized on Schedul	e D.						
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIP	TION OF PAYMENT		AMOUNT PAID	
Jnited States Postal Service Encinitas, CA 92024		POS					\$4,068.36	
United States Postal Service		POS					\$335.23	
Encinitas, CA 92024								
United States Postal Service Encinitas, CA 92024		POS					\$268.02	
United States Postal Service Encinitas, CA 92024		POS					\$268.02	
Attach additional information on appropriately labeled continuatior	n sheets.					TOTAL*	\$4939.63	

* 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

Schedule H –		Type or print in ink. Amounts may be rounded				SCHEDULE H		
					Statement covers period		CALIFORN	
Loans Made to Others*		to whole dollars.			from 10/21/2018		CALIFORNIA FORM 460	
					10/11/2			
SEE INSTRUCTIONS ON REVERSE					through <u>12/31/2</u>	018	Page <u>50</u>	of <u>61</u>
NAME OF FILER Business Leaders for Ethical Government							I.D. NUMBER 1407824	
Business Leaders for Editical Government							1407824	
		(a)	(b)	(c)	(d)	(e)	(f)	(g)
FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT LOANED THIS PERIOD	REPAYMENT OR FORGIVENESS THIS PERIOD*	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	INTEREST RECEIVED	ORIGINAL AMOUNT OF LOAN	CUMULATIVE LOANS TO DATE
								CALENDAR YEAR
						% RATE		PER ELECTION**
				· [DATE DUE		DATE INCURRED	
								CALENDAR YEAR
						%		
						RATE		PER ELECTION**
				·	DATE DUE		DATE INCURRED	
*Loans that are contributions to another candidate								
must also be summarized on Schedule D. Loans also be reported on Schedule E.	lorgiven must	SUBTOTALS						
			1	1		(Enter (e) on Schedule I, Line 3)		
Schedule H Summary								
1. Loans made this period (Total Column (b) plus unitemized loans							*	* If Required
2. Payments received on loans	,							
(Total Column (c) plus unitemized payn								
3. Net change this period. (Subtract Lin						gative number)		
(Enter the net here and on the Summar					(May be a ne	yauve number)		

Schedule I Miscellaneous Increases to Cash

SCHEDULE I

Schedule I		Type or print in ink.	SCHEDULE I			
Miscellan	neous Increases to Cash An	nounts may be rounded to whole dollars.	Statement covers period			
		to whole donars.	from10/21/2018	CALIFORNIA FORM 460		
SEE INSTRUCTIO	DNS ON REVERSE		through12/31/2018	. Page <u>51</u> of <u>61</u>		
NAME OF FILER Business Leaders	1	I.D. NUMBER 1407824				
Dusiness Leaders				1407024		
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DES	CRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH		
11/12/2018	Crown Connect San Bernardino, CA 92408	Refund		\$862.07		
Attach additional information on appropriately labeled continuation sheets.			SUBTOTAL \$862.07			
Schedule	I Summary					
	to cash of \$100 or more this period		\$862.07			
2. Unitemize	d increases to cash under \$100 this period		\$0.00			
3. Total of all	l interest received this period on loans made to others. (Schedule H, Co	olumn (e).)	\$0.00	_		
	ellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter h Page, Line 14.)		TOTAL <u>\$862.07</u>			
				EPBC Form 460 (luno/01)		

Memo Reference: NON327 In-Kind

Memo Reference: NON295 In-Kind

Memo Reference: NON296 In-Kind

Memo Reference: NON297 In-Kind <u>Memo Reference: NON299</u> In-Kind

Memo Reference: NON304 In-Kind

Memo Reference: NON305 In-Kind Memo Reference: NON306 In-Kind

Memo Reference: NON307 In-Kind

Memo Reference: NON310 In-Kind

Memo Reference: NON311 In-Kind Memo Reference: NON320 In-Kind

Memo Reference: NON328 In-Kind

Memo Reference: NON329 In-Kind Memo Reference: NON337 In-Kind

Memo Reference: NON338 In-Kind

Memo Reference: NON339 In-Kind

<u>Memo Reference: NON340</u> In-Kind Memo Reference: NON341 In-Kind

Memo Reference: NON342 In-Kind

Memo Reference: NON344 In-Kind _____

Memo Reference: NON347 In-Kind Memo Reference: NON350 In-Kind

Memo Reference: NON352 In-Kind

Memo Reference: NON355 In-Kind Memo Reference: NON356 In-Kind

Memo Reference: NON357 In-Kind

Memo Reference: NON359 In-Kind

<u>Memo Reference: NON361</u> In-Kind

Memo Reference: NON362 In-Kind

Memo Reference: NON365 In-Kind

Memo Reference: NON366 In-Kind

Memo Reference: NON368 In-Kind Memo Reference: NON376 In-Kind

Memo Reference: NON384 In-Kind

Memo Reference: NON385 In-Kind