Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

SEE INSTRUCTIONS ON REVERSE

Date Stamp: RECEIVED CITY CLERK SEP 27 AM 10: 33 CITY OF COSTA MESA BY

CALIFORNIA FORM **460**

For Official Use Only

Statement covers period	Date of election if applicable: (Month, Day, Year)
from 01/01/2018	
through 09/22/2018	11/06/2018

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

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

2. Type of Statement:

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

3. Committee Information

I.D. NUMBER: 1406904

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE): Figueredo-Wilson for City Council 2018

STREET ADDRESS (NO P.O. BOX): c/o Lysa Ray 3843 S Bristol St #604

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Santa Ana	CA	92704	(714)540-2295

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE

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

Treasurer(s)

NAME OF TREASURER: Lysa Ray

MAILING ADDRESS: c/o Lysa Ray 3843 S Bristol St #604

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Santa Ana	CA	92704	(714)540-2295

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 09/23/2018 (Date) By [redacted] (Signature of Treasurer or Assistant Treasurer)

Executed on 09/23/2018 (Date) By [redacted] (Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor)

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

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Recipient Committee Campaign Statement Cover Page — Part 2

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Michelle Figueredo-Wilson

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

City Council Member: City of Costa Mesa District 4

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP
797 Center St	Costa Mesa	CA	92627

Related Committees Not Included in this Statement: *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? ☐ YES ☐ NO
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	
CITY STATE ZIP CODE AREA CODE/PHONE	

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? ☐ YES ☐ NO
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	
CITY STATE ZIP CODE AREA CODE/PHONE	

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	☐ SUPPORT ☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

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

Attach continuation sheets if necessary

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Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

CALIFORNIA FORM 460

Statement covers period from 01/01/2018 through 09/22/2018

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Figueredo-Wilson for City Council 2018

I.D. NUMBER: 1406904

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	*Schedule A, Line 3*	$ 14,496.00	$ 14,496.00
2. Loans Received	*Schedule B, Line 3*	2,100.00	2,100.00
3. SUBTOTAL CASH CONTRIBUTIONS	*Add Lines 1 + 2*	$ 16,596.00	$ 16,596.00
4. Nonmonetary Contributions	*Schedule C, Line 3*	454.15	454.15
5. TOTAL CONTRIBUTIONS RECEIVED	*Add Lines 3 + 4*	$ 17,050.15	$ 17,050.15

Expenditures Made

6. Payments Made	*Schedule E, Line 4*	$ 5,256.74	$ 5,256.74
7. Loans Made	*Schedule H, Line 3*	0.00	0.00
8. SUBTOTAL CASH PAYMENTS	*Add Lines 6 + 7*	$ 5,256.74	$ 5,256.74
9. Accrued Expenses (Unpaid Bills)	*Schedule F, Line 3*	0.00	0.00
10. Nonmonetary Adjustment	*Schedule C, Line 3*	454.15	454.15
11. TOTAL EXPENDITURES MADE	*Add Lines 8 + 9 + 10*	$ 5,710.89	$ 5,710.89

Current Cash Statement

12. Beginning Cash Balance	*Previous Summary Page, Line 16*	$ 0.00
13. Cash Receipts	*Column A, Line 3 above*	16,596.00
14. Miscellaneous Increases to Cash	*Schedule I, Line 4*	0.00
15. Cash Payments	*Column A, Line 8 above*	5,256.74
16. **ENDING CASH BALANCE**	*Add Lines 12 + 13 + 14, then subtract Line 15*	$ 11,339.26

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

17. LOAN GUARANTEES RECEIVED — *Schedule B, Part 2* — $ 0.00

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	*See instructions on reverse*	$ 0.00
19. Outstanding Debts	*Add Line 2 + Line 9 in Column B above*	$ 2,100.00

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contributions Received	$	$
21. Expenditures Made	$	$

Expenditure Limit Summary for State Candidates

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

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

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

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Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

Statement covers period
from 01/01/2018
through 09/22/2018

SCHEDULE A
CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Figueredo-Wilson for City Council 2018

I.D. NUMBER
1406904

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/19/2018	All Encompass Corporation 8280 Aspen St. 195 Rancho Cucamonga, CA 91730	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		100.00	100.00	G2018 $100.00
06/25/2018	AvPac Insurance 1978 Tustin Ave Laguna Niguel, CA 92677	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		250.00	500.00	G2018 $500.00
08/04/2018	Cheryl Ball [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	500.00	500.00	G2018 $500.00
09/18/2018	Doug Banfill [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Engineer USHIO America	100.00	100.00	G2018 $100.00
08/14/2018	Melissa Barlow [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	RN SARH	200.00	200.00	G2018 $200.00
			SUBTOTAL $	1,150.00		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 13,594.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 902.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL $ 14,496.00

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

Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
from 01/01/2018
through 09/22/2018

CALIFORNIA FORM 460

NAME OF FILER: Figueredo-Wilson for City Council 2018

I.D. NUMBER: 1406904

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/19/2018	Edwin Byers [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Consulting Deloitte	250.00	250.00	G2018 $250.00
09/14/2018	Walton Chan [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	COO CBL	249.00	249.00	G2018 $249.00
09/18/2018	Steven Check 575 Anton Blvd #500 Costa Mesa, CA 92626	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	President Check Capital Mgmt	5,000.00	5,000.00	G2018 $5,000.00
07/30/2018	Ann Cross [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Exec UCI	100.00	100.00	G2018 $100.00
08/06/2018	GeGe Engwald-Parry [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Realtor ReMax Masters	100.00	100.00	G2018 $100.00
			SUBTOTAL $	5,699.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
from 01/01/2018
through 09/22/2018

CALIFORNIA FORM 460

NAME OF FILER: Figueredo-Wilson for City Council 2018

I.D. NUMBER: 1406904

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/05/2018	Fernando Figueredo [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Loan Officer PAC West Loans	150.00	150.00	G2018 $150.00
08/18/2018	Michelle Figueredo-Wilson [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Realtor ReMax Masters	150.00	301.60	G2018 $301.60
08/30/2018	Steven Hellings [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	President WYS Consulting	249.00	249.00	G2018 $249.00
07/05/2018	Clint Henderson [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Exec Social Management Group	100.00	100.00	G2018 $100.00
07/30/2018	Buck Johns 3501 Jamnoree Rd, S Tower #606 Newport Beach, CA 92660	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	President Inland Group	500.00	500.00	G2018 $500.00
			SUBTOTAL $	1,149.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded to whole dollars.

Statement covers period
from 01/01/2018
through 09/22/2018

SCHEDULE A (CONT.)

CALIFORNIA FORM 460

NAME OF FILER
Figueredo-Wilson for City Council 2018

I.D. NUMBER
1406904

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/09/2018	Michael Juergens [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Managing Principal Deloitte & Touch	249.00	249.00	G2018 $249.00
08/09/2018	Bruce Krochman [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Manager DFM Associates	250.00	250.00	G2018 $250.00
07/20/2018	Alexander Matthes [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Insurance Broker AFLAC	1,000.00	1,500.00	G2018 $1,500.00
08/06/2018	Alexander Matthes [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Insurance Broker AFLAC	500.00	1,500.00	G2018 $1,500.00
07/17/2018	Steve Mensinger [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Real Estate Mesa Management	250.00	1,125.00	G2018 $1,125.00
			SUBTOTAL $	2,249.00		

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PTY – Political Party
SCC – Small Contributor Committee

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Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
from 01/01/2018
through 09/22/2018

CALIFORNIA FORM 460

NAME OF FILER: Figueredo-Wilson for City Council 2018

I.D. NUMBER: 1406904

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/02/2018	Steve Mensinger [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Real Estate Mesa Management	500.00	1,125.00	G2018 $1,125.00
08/17/2018	Steve Mensinger [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Real Estate Mesa Management	250.00	1,125.00	G2018 $1,125.00
07/30/2018	Mark Peterson [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Broker ReMax Masters	100.00	100.00	G2018 $100.00
08/13/2018	James Righeimer [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Consultant LMC Management	500.00	500.00	G2018 $500.00
07/09/2018	Esmeralda Salazar [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Retired	100.00	100.00	G2018 $100.00
			SUBTOTAL $	1,450.00		

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OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

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Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
from 01/01/2018
through 09/22/2018

CALIFORNIA FORM 460

NAME OF FILER: Figueredo-Wilson for City Council 2018

I.D. NUMBER: 1406904

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/15/2018	Rohan Sidhu [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	CSO SW Ventures	249.00	249.00	G2018 $249.00
09/22/2018	Andrew Smith [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Owner AVPAC Insurance	250.00	500.00	G2018 $500.00
08/15/2018	Frederik Solter [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Real Estate Self	500.00	500.00	G2018 $500.00
09/09/2018	Michael Stewart [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Sales MMJ	249.00	249.00	G2018 $249.00
08/14/2018	Daniel Sullivan [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Motion Picture Propmaker IATSE 44	300.00	300.00	G2018 $300.00
			SUBTOTAL $	1,548.00		

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

Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
from 01/01/2018
through 09/22/2018

CALIFORNIA FORM 460

NAME OF FILER
Figueredo-Wilson for City Council 2018

I.D. NUMBER
1406904

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/18/2018	Touchpoint Services 170 E 17th St #202 Costa Mesa, CA 92626	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		249.00	249.00	G2018 $249.00
06/30/2018	Linda Wilson [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	100.00	100.00	G2018 $100.00
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
			SUBTOTAL $	349.00		

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

Schedule B – Part 1
Loans Received

Amounts may be rounded to whole dollars.

Statement covers period from 01/01/2018 through 09/22/2018

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Figueredo-Wilson for City Council 2018

I.D. NUMBER: 1406904

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
Michelle Figueredo-Wilson [redacted] † ☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Realtor ReMax Masters	$ 0.00	$ 100.00	☐ PAID $ 0.00 ☐ FORGIVEN $ 0.00	$ 100.00 DATE DUE	0.00 % RATE $ 0.00	$ 100.00 06/22/2018 DATE INCURRED	CALENDAR YEAR $ 301.60 PER ELECTION ** $ G2018 301.60
Glenn Wilson [redacted] † ☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Consulting Deloitte	$ 0.00	$ 2,000.00	☐ PAID $ 0.00 ☐ FORGIVEN $ 0.00	$ 2,000.00 DATE DUE	0.00 % RATE $ 0.00	$ 2,000.00 07/05/2018 DATE INCURRED	CALENDAR YEAR $ 2,000.00 PER ELECTION ** $ G2018 2,000.00
† ☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$	$	☐ PAID $ ☐ FORGIVEN $	$ DATE DUE	% RATE $	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION ** $
		SUBTOTALS $ 2,100.00		$ 0.00	$ 2,100.00	$ 0.00		

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

Schedule B Summary

1. Loans received this period ..... $ 2,100.00
   (Total Column (b) plus unitemized loans of less than $100.)
2. Loans paid or forgiven this period ..... $ 0.00
   (Total Column (c) plus loans under $100 paid or forgiven.)
   (Include loans paid by a third party that are also itemized on Schedule A.)
3. Net change this period. (**Subtract** Line 2 from Line 1.) ..... **NET** $ 2,100.00
   (May be a negative number)
   Enter the net here and on the Summary Page, Column A, Line 2.

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

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

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Schedule C
Nonmonetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE C
CALIFORNIA FORM 460

Statement covers period
from 01/01/2018
through 09/22/2018

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Figueredo-Wilson for City Council 2018

I.D. NUMBER: 1406904

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 OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
07/19/2018	Michelle Figueredo-Wilson [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Realtor ReMax Masters	PO Box	51.60	301.60	G2018 $301.60
09/07/2018	Grow Elect (ID# 1342160) 1022 G St Sacramento, CA 95814	[ ] IND [X] COM [ ] OTH [ ] PTY [ ] SCC		Videos	100.00	100.00	G2018 $100.00
07/31/2018	Steve Mensinger [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Real Estate Mesa Management	FND Food	125.00	1,125.00	G2018 $1,125.00
08/27/2018	Richard Russell [redacted]	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	New Home Sales Brookfield Residential	Banner and signs	177.55	177.55	G2018 $177.55

Attach additional information on appropriately labeled continuation sheets. **SUBTOTAL $** 454.15

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) ..... $ 454.15
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $ 0.00
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) ..... **TOTAL $** 454.15

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

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Schedule E
Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 01/01/2018
through 09/22/2018

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Figueredo-Wilson for City Council 2018

I.D. NUMBER: 1406904

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot PO Box 84314 Houston, Tx 70884		cc Processing	10.30
Anedot PO Box 84314 Houston, Tx 70884		cc Processing	2.40
Anedot PO Box 84314 Houston, Tx 70884		cc Processing	84.60

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

SUBTOTAL $ 97.30

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 5,206.74
2. Unitemized payments made this period of under $100 ..... $ 50.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ..... $ 0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ..... TOTAL $ 5,256.74

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Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 01/01/2018
through 09/22/2018

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Figueredo-Wilson for City Council 2018

I.D. NUMBER: 1406904

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
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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot PO Box 84314 Houston, Tx 70884		cc processing	4.26
Anedot PO Box 84314 Houston, Tx 70884		cc processing	10.30
Anedot PO Box 84314 Houston, Tx 70884		cc processing	16.90
Anedot PO Box 84314 Houston, Tx 70884		cc Processing	24.56
Anedot PO Box 84314 Houston, Tx 70884		cc Processing	20.30

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SUBTOTAL $ 76.32

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 01/01/2018
through 09/22/2018

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Figueredo-Wilson for City Council 2018

I.D. NUMBER: 1406904

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CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot PO Box 84314 Houston, Tx 70884		cc Processing	20.30
Anedot PO Box 84314 Houston, Tx 70884		cc Processing	14.56
Anedot PO Box 84314 Houston, Tx 70884		cc Processing	40.90
Anedot PO Box 84314 Houston, Tx 70884		cc Processing	4.26
Anedot PO Box 84314 Houston, Tx 70884		cc Processing	14.56

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

SUBTOTAL $ 94.58

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 01/01/2018
through 09/22/2018

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Figueredo-Wilson for City Council 2018

I.D. NUMBER
1406904

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
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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot PO Box 84314 Houston, Tx 70884		cc Processing	10.26
Anedot PO Box 84314 Houston, Tx 70884		cc Processing	10.56
Anedot PO Box 84314 Houston, Tx 70884		cc Processing	10.26
Anedot PO Box 84314 Houston, Tx 70884		cc Processing	10.26
Anedot PO Box 84314 Houston, Tx 70884		cc Processing	10.26

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SUBTOTAL $ 51.60

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 01/01/2018
through 09/22/2018

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Figueredo-Wilson for City Council 2018

I.D. NUMBER: 1406904

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot PO Box 84314 Houston, Tx 70884		cc Processing	2.30
Chase P.O.BOX 15123 Wilmington, DE 19850	CMP		222.83
Citi Card PO B 78045 Phoenix, AZ 85062	CMP		635.38
City of Costa Mesa 77 Fair Dr Costa Mesa, CA 92626	FIL		600.00
Ford Printing 1440 Arrow Hwy #F Baldwin Park, CA 91706	LIT		416.10

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

SUBTOTAL $ 1,876.61

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 01/01/2018
through 09/22/2018

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Figueredo-Wilson for City Council 2018

I.D. NUMBER: 1406904

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Ford Printing 1440 Arrow Hwy #F Baldwin Park, CA 91706	LIT		1,213.03
Lysa Ray Campaign Services 3843 S Bristol #604 Santa Ana, CA 92704	PRO		425.00
Lysa Ray Campaign Services 3843 S Bristol #604 Santa Ana, CA 92704	PRO		500.00
Andrew Smith [redacted]	CMP		71.18
Andrew Smith [redacted]	CMP		801.12

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

SUBTOTAL $ 3,010.33

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

Amounts may be rounded to whole dollars.

Statement covers period
from 01/01/2018
through 09/22/2018

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Figueredo-Wilson for City Council 2018

I.D. NUMBER: 1406904

NAME OF AGENT OR INDEPENDENT CONTRACTOR: Chase

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
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IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Political Data Inc. P.O.BOX 59570 Norwalk, CA 90652	CMP		222.83

Attach additional information on appropriately labeled continuation sheets.

TOTAL* $ 222.83

** 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.*

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

Amounts may be rounded to whole dollars.

Statement covers period
from 01/01/2018
through 09/22/2018

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Figueredo-Wilson for City Council 2018

I.D. NUMBER: 1406904

NAME OF AGENT OR INDEPENDENT CONTRACTOR: Citi Card

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
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LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Political Lawn Signs 916 Byrd Ave Neenah, WI 54956	CMP			635.38

Attach additional information on appropriately labeled continuation sheets.

TOTAL* $ 635.38

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

Amounts may be rounded to whole dollars.

Statement covers period
from 01/01/2018
through 09/22/2018

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Figueredo-Wilson for City Council 2018

I.D. NUMBER: 1406904

NAME OF AGENT OR INDEPENDENT CONTRACTOR: Ford Printing

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CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
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LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
USPO Sunflower Station Santa Ana, CA 92704	POS		589.56

Attach additional information on appropriately labeled continuation sheets.

TOTAL* $ 589.56

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

Amounts may be rounded to whole dollars.

Statement covers period
from 01/01/2018
through 09/22/2018

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Figueredo-Wilson for City Council 2018

I.D. NUMBER: 1406904

NAME OF AGENT OR INDEPENDENT CONTRACTOR: Andrew Smith

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CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Political Data Inc. P.O.BOX 59570 Norwalk, CA 90652	CMP		600.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* $ 600.00

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