# Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

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COVER PAGE

CALIFORNIA 2001/02 FORM **460**

Page 1 of 19

For Official Use Only

| Statement covers period | Date of election if applicable: (Month, Day, Year) |
|---|---|
| from 07/01/2018 | 11/06/2018 |
| through 09/22/2018 | |

## 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)
- [X] Amendment (Explain below)
- [ ] Quarterly Statement
- [ ] Special Odd-Year Report
- [ ] Supplemental Preelection Statement - Attach Form 495

Remove loan by Candidate reported in error

## 3. Committee Information

I.D. NUMBER: 1397147

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE): Marr for City Council 2018

STREET ADDRESS (NO P.O. BOX): 1440 N Harbor Blvd Ste 707

| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|---|---|---|---|
| Fullerton | CA | 92835-4120 | (949) 697-7532 |

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

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

OPTIONAL: FAX / E-MAIL ADDRESS: (949) 271-4896 t-mac-consulting@pacbell.net

## Treasurer(s)

NAME OF TREASURER: Tammi McIntyre

MAILING ADDRESS: 1440 N Harbor Blvd Ste 707

| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|---|---|---|---|
| Fullerton | CA | 92835-4120 | 949-697-7532 |

NAME OF ASSISTANT TREASURER, IF ANY: Joanna Barcelona

MAILING ADDRESS: 1440 N Harbor Blvd Suite 707

| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|---|---|---|---|
| Fullerton | CA | 92835-4127 | 714-745-5281 |

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 10/24/2018 (Date) By Tammi McIntyre [redacted] (Signature of Treasurer or Assistant Treasurer)

Executed on 10/24/2018 (Date) By Andrea Marr [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)

# Recipient Committee Campaign Statement Cover Page — Part 2

Type or print in ink.



## 5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
Andrea Marr

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
Sought : City Council Member
City- City of Costa Mesa, Dist 3 3

| RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) | CITY | STATE | ZIP |
|---|---|---|---|
| 180 Fairwinds | Costa Mesa | CA | 92626-6586 |

**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***



Direct File

# Campaign Disclosure Statement
# Summary Page

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

SUMMARY PAGE

CALIFORNIA FORM **460**

Statement covers period from 07/01/2018 through 09/22/2018



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marr for City Council 2018

I.D. NUMBER
1397147

## Contributions Received

| | | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|---|---|---|---|
| 1. Monetary Contributions | *Schedule A, Line 3* | $ 8794.00 | $ 21377.00 |
| 2. Loans Received | *Schedule B, Line 3* | 0.00 | 596.25 |
| 3. SUBTOTAL CASH CONTRIBUTIONS | *Add Lines 1 + 2* | $ 8794.00 | $ 21973.25 |
| 4. Nonmonetary Contributions | *Schedule C, Line 3* | 250.00 | 1754.00 |
| 5. TOTAL CONTRIBUTIONS RECEIVED | *Add Lines 3 + 4* | $ 9044.00 | $ 23727.25 |

## Expenditures Made

| | | | |
|---|---|---|---|
| 6. Payments Made | *Schedule E, Line 4* | $ 8874.78 | $ 14517.09 |
| 7. Loans Made | *Schedule H, Line 3* | 0.00 | 0.00 |
| 8. SUBTOTAL CASH PAYMENTS | *Add Lines 6 + 7* | $ 8874.78 | $ 14517.09 |
| 9. Accrued Expenses (Unpaid Bills) | *Schedule F, Line 3* | 0.00 | 0.00 |
| 10. Nonmonetary Adjustment | *Schedule C, Line 3* | 250.00 | 1754.00 |
| 11. TOTAL EXPENDITURES MADE | *Add Lines 8 + 9 + 10* | $ 9124.78 | $ 16271.09 |

## Current Cash Statement

| | | |
|---|---|---|
| 12. Beginning Cash Balance | *Previous Summary Page, Line 16* | $ 15266.70 |
| 13. Cash Receipts | *Column A, Line 3 above* | 8794.00 |
| 14. Miscellaneous Increases to Cash | *Schedule I, Line 4* | 0.00 |
| 15. Cash Payments | *Column A, Line 8 above* | 8874.78 |
| 16. **ENDING CASH BALANCE** | *Add Lines 12 + 13 + 14, then subtract Line 15* | $ 15185.92 |

*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* $ 596.25

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.



DirectFile

# Schedule A
## Monetary Contributions Received

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

SCHEDULE A

CALIFORNIA FORM **460**

Statement covers period
from 07/01/2018
through 09/22/2018



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marr for City Council 2018

I.D. NUMBER
1397147

| 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) |
|---|---|---|---|---|---|---|
| 09/01/2018 | Dennis Ashendorf [redacted] | ☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Teacher Newport Mesa USD | 20.00 | 170.00 | 170.00 G 18 |
| 08/01/2018 | Dennis Ashendorf [redacted] | ☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Teacher Newport Mesa USD | 20.00 | 170.00 | 170.00 G 18 |
| 07/01/2018 | Dennis Ashendorf [redacted] | ☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Teacher Newport Mesa USD | 20.00 | 170.00 | 170.00 G 18 |
| 09/19/2018 | Costa Mesa Firefighters Association Local 1465 PAC<br>555 Capitol Mall<br>Ste 400<br>Sacramento, CA 95814-4504<br>ID :1377067 | ☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC | | 2000.00 | 2250.00 | 2250.00 G 18 |
| 08/06/2018 | Elizabeth Cowan [redacted] | ☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Retired N/A | 100.00 | 100.00 | 100.00 G 18 |
| | | | SUBTOTAL $ | 2160.00 | | |

## Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 8130.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 664.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL $ 8794.00

*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



Direct File

# Schedule A (Continuation Sheet)
# Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from 07/01/2018
through 09/22/2018

CALIFORNIA FORM 460



NAME OF FILER
Marr for City Council 2018

I.D. NUMBER
1397147

| 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) |
|---|---|---|---|---|---|---|
| 08/26/2018 | Roy Duvall<br>135 Shoreline Dr<br>Malakoff, TX 75148 | ☒ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | Retired<br>N/A | 100.00 | 100.00 | 100.00 G 18 |
| 09/07/2018 | Alan Fenstermacher<br>[redacted] | ☒ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | Attorney<br>Rutan and Tucker | 249.00 | 249.00 | 249.00 G 18 |
| 08/06/2018 | Steven Hellings<br>[redacted] | ☒ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | President/Co-Founder<br>WYS Consulting | 249.00 | 249.00 | 249.00 G 18 |
| 09/13/2018 | Faye Hezar<br>[redacted] | ☒ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | Property Manager<br>Faye Hezar | 200.00 | 225.00 | 225.00 G 18 |
| 09/07/2018 | Randal Jackson<br>[redacted] | ☒ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | Principal<br>Placeworks | 249.00 | 249.00 | 249.00 G 18 |
| | | | SUBTOTAL $ | 1047.00 | | |

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IND – Individual
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SCC – Small Contributor Committee



DirectFile

# Schedule A (Continuation Sheet)
# Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from 07/01/2018
through 09/22/2018

CALIFORNIA FORM 460



NAME OF FILER
Marr for City Council 2018

I.D. NUMBER
1397147

| 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) |
|---|---|---|---|---|---|---|
| 08/25/2018 | Florence Martin [redacted] | ☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Retired N/A | 500.00 | 750.00 | 1000.00 G 18 |
| 07/10/2018 | Kimberly Martinez [redacted] | ☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Systems Engineer Raytheon | 100.00 | 100.00 | 100.00 G 18 |
| 08/09/2018 | John McHugh P. O. Box 157 Corona del Mar, CA 92625 | ☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | MD OBHG | 250.00 | 250.00 | 250.00 G 18 |
| 09/20/2018 | Eva Orozco [redacted] | ☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Retired N/A | 25.00 | 180.00 | 230.00 G 18 |
| 08/20/2018 | Eva Orozco [redacted] | ☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Retired N/A | 25.00 | 180.00 | 230.00 G 18 |
| | | | SUBTOTAL $ | 900.00 | | |

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SCC – Small Contributor Committee



Direct File

# Schedule A (Continuation Sheet)
# Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from 07/01/2018
through 09/22/2018

CALIFORNIA FORM 460



NAME OF FILER
Marr for City Council 2018

I.D. NUMBER
1397147

| 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) |
|---|---|---|---|---|---|---|
| 07/20/2018 | Eva Orozco [redacted] | ☒IND ☐COM ☐OTH ☐PTY ☐SCC | Retired N/A | 25.00 | 180.00 | 230.00 G 18 |
| 09/04/2018 | Planned Parenthood of Orange & San Bernardino Countyies PAC 555 Capitol Mall Ste 400 Sacramento, CA 95814-4504 ID :1282464 | ☐IND ☒COM ☐OTH ☐PTY ☐SCC | | 500.00 | 500.00 | 500.00 G 18 |
| 09/07/2018 | John Ramirez [redacted] | ☒IND ☐COM ☐OTH ☐PTY ☐SCC | Attoreny Rutan and Tucker | 249.00 | 249.00 | 249.00 G 18 |
| 07/03/2018 | Wilson Rickerson [redacted] | ☒IND ☐COM ☐OTH ☐PTY ☐SCC | Consultant Converge Strategies, LLC | 100.00 | 100.00 | 600.00 G 18 |
| 08/21/2018 | Harley Rouda [redacted] | ☒IND ☐COM ☐OTH ☐PTY ☐SCC | Candidate Harley Roude for Congress | 250.00 | 250.00 | 250.00 G 18 |
| | | | SUBTOTAL $ | 1124.00 | | |

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SCC – Small Contributor Committee



DirectFile

# Schedule A (Continuation Sheet)
# Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from 07/01/2018
through 09/22/2018

CALIFORNIA FORM 460



NAME OF FILER
Marr for City Council 2018

I.D. NUMBER
1397147

| 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) |
|---|---|---|---|---|---|---|
| 08/06/2018 | Dianne Russell<br>[redacted] | ☒ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | Social Services Director<br>Western Community Housing | 50.00 | 110.00 | 180.00 G 18 |
| 08/06/2018 | Allan Sandvig<br>[redacted] | ☒ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | Retired<br>N/A | 100.00 | 100.00 | 100.00 G 18 |
| 09/07/2018 | Urban Arena<br>3195 Red Hill Ave<br>Lot F<br>Costa Mesa, CA 92626-3430 | ☐ IND<br>☐ COM<br>☒ OTH<br>☐ PTY<br>☐ SCC | | 249.00 | 249.00 | 249.00 G 18 |
| 09/17/2018 | Women for American Values and Ethics<br>19772 MacArthur Blvd<br>Ste 240<br>Irvine, CA 92612-2413<br>ID :1411182 | ☐ IND<br>☒ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | | 500.00 | 500.00 | 500.00 G 18 |
| 09/21/2018 | Women in Leadership<br>22662 Fernwood St<br>Lake Forest, CA 92630-3609<br>ID :931119 | ☐ IND<br>☒ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | | 1000.00 | 2000.00 | 2000.00 G 18 |
| | | | SUBTOTAL $ | 1899.00 | | |

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Direct File

# Schedule A (Continuation Sheet)
# Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from 07/01/2018
through 09/22/2018

CALIFORNIA FORM 460



NAME OF FILER
Marr for City Council 2018

I.D. NUMBER
1397147

| 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) |
|---|---|---|---|---|---|---|
| 08/13/2018 | Women in Leadership<br>22662 Fernwood St<br>Lake Forest, CA 92630-3609<br>ID :931119 | ☐IND<br>☒COM<br>☐OTH<br>☐PTY<br>☐SCC | | 1000.00 | 2000.00 | 2000.00 G 18 |
| | | ☐IND<br>☐COM<br>☐OTH<br>☐PTY<br>☐SCC | | | | |
| | | ☐IND<br>☐COM<br>☐OTH<br>☐PTY<br>☐SCC | | | | |
| | | ☐IND<br>☐COM<br>☐OTH<br>☐PTY<br>☐SCC | | | | |
| | | ☐IND<br>☐COM<br>☐OTH<br>☐PTY<br>☐SCC | | | | |
| | | | | SUBTOTAL $ 1000.00 | | |

*Contributor Codes
IND – Individual
COM – Recipient Committee (other than PTY or SCC)
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DirectFile

# Schedule B – Part 1
# Loans Received

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

Statement covers period
from 07/01/2018
through 09/22/2018

CALIFORNIA FORM **460**



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marr for City Council 2018

I.D. NUMBER
1397147

| 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 |
|---|---|---|---|---|---|---|---|---|
| Andrea Marr<br>180 Fairwinds<br>Costa Mesa, CA 92626-6586<br>†☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Senior Program Manager / Candidate Willdan | $ 196.25 | $ 0.00 | ☐ PAID $ ____<br>☐ FORGIVEN $ ____ | $ 196.25<br>12/31/2018 DATE DUE | 0.00% RATE<br>$ 0.00 | $ 196.25<br>02/01/2018 DATE INCURRED | CALENDAR YEAR $ 197.25<br>PER ELECTION** $ 597.25 G 18 |
| Andrea Marr<br>180 Fairwinds<br>Costa Mesa, CA 92626-6586<br>†☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Senior Program Manager / Candidate Willdan | $ 400.00 | $ 0.00 | ☐ PAID $ ____<br>☐ FORGIVEN $ ____ | $ 400.00<br>12/31/2018 DATE DUE | 0.00% RATE<br>$ 0.00 | $ 400.00<br>06/16/2017 DATE INCURRED | CALENDAR YEAR $ 197.25<br>PER ELECTION** $ 597.25 G 18 |
| †☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | | $ ____ | $ ____ | ☐ PAID $ ____<br>☐ FORGIVEN $ ____ | $ ____<br>____ DATE DUE | ____% RATE<br>$ ____ | $ ____<br>____ DATE INCURRED | CALENDAR YEAR $ ____<br>PER ELECTION** $ ____ |
| | | SUBTOTALS $ 0.00 | $ 0.00 | $ 0.00 | $ 596.25 | $ 0.00 (Enter (e) on Schedule E, Line 3) | | |

## Schedule B Summary

1. Loans received this period ..... $ 0.00
   (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** $ 0.00
   (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.



Direct File

# Schedule C
# Nonmonetary Contributions Received

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

SCHEDULE C

CALIFORNIA FORM **460**

Statement covers period
from 07/01/2018
through 09/22/2018



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marr for City Council 2018

I.D. NUMBER
1397147

| 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) |
|---|---|---|---|---|---|---|---|
| 09/21/2018 | Costa Mesa Firefighters Association Local 1465 PAC<br>555 Capitol Mall<br>Ste 400<br>Sacramento, CA 95814-4504<br>ID :1377067 | ☐IND<br>☒COM<br>☐OTH<br>☐PTY<br>☐SCC | | Blackman & Associates, Inc for consulting | 250.00 | 2250.00 | 2250.00 G 18 |
| | | ☐IND<br>☐COM<br>☐OTH<br>☐PTY<br>☐SCC | | | | | |
| | | ☐IND<br>☐COM<br>☐OTH<br>☐PTY<br>☐SCC | | | | | |
| | | ☐IND<br>☐COM<br>☐OTH<br>☐PTY<br>☐SCC | | | | | |

*Attach additional information on appropriately labeled continuation sheets.* **SUBTOTAL $** 250.00

## Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) ..... $ 250.00
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 $** 250.00

*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



DirectFile

# Schedule E
# Payments Made

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

Statement covers period
from 07/01/2018
through 09/22/2018

CALIFORNIA FORM **460**



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marr for City Council 2018

I.D. NUMBER
1397147

**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 |
|---|---|---|---|
| ARDA Campaigns<br>675 N Euclid St. #481<br>Anaheim, CA 92801 | LIT | | 361.00 |
| ARDA Campaigns<br>675 N Euclid St. #481<br>Anaheim, CA 92801 | LIT | | 1176.00 |
| Budget Watchdogs<br>22410 Hawthorne Blvd Ste 5<br>Torrance, CA 90505-2500 | PRT | | 310.00 |

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

**SUBTOTAL $** 1847.00

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 8874.78
2. Unitemized payments made this period of under $100 ..... $ 0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ..... $ 0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ..... **TOTAL $** 8874.78



Direct File

# Schedule E
# (Continuation Sheet)
# Payments Made

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

SCHEDULE E (CONT.)

Statement covers period
from 07/01/2018
through 09/22/2018

CALIFORNIA FORM **460**

Page 13 of 19

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marr for City Council 2018

I.D. NUMBER
1397147

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

| | | | | | |
|---|---|---|---|---|---|
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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 |
|---|---|---|---|
| CAL SAL Voter Guide<br>22410 Hawthorne Blvd Ste 5<br>Torrance, CA 90505-2500 | PRT | | 131.00 |
| California Voter Guide<br>22410 Hawthorne Blvd Ste 5<br>Torrance, CA 90505-2500 | PRT | | 136.00 |
| Continuing the Republican Revolution<br>1300 Bristol Ave North<br>Ste 100<br>Newport Beach, CA 92660 | PRT | | 190.00 |
| Election Digest<br>22410 Hawthorne Blvd Ste 5<br>Torrance, CA 90505-2500 | PRT | | 190.00 |
| Mailing Pros Inc<br>5261 Business Dr<br>Huntington Beach, CA 92649 | LIT | | 135.00 |

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

**SUBTOTAL $** 782.00



DirectFile

# Schedule E (Continuation Sheet) Payments Made

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

Statement covers period from 07/01/2018 through 09/22/2018

CALIFORNIA FORM 460



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Marr for City Council 2018

I.D. NUMBER: 1397147

**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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| 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 |
|---|---|---|---|
| Mailing Pros Inc<br>5261 Business Dr<br>Huntington Beach, CA 92649 | LIT | | 300.00 |
| McIntyre & Barcelona, LLC<br>1440 N Harbor Blvd., Suite 707<br>Fullerton, CA 92835 | PRO | | 235.00 |
| McIntyre & Barcelona, LLC<br>1440 N Harbor Blvd., Suite 707<br>Fullerton, CA 92835 | PRO | | 385.00 |
| McIntyre & Barcelona, LLC<br>1440 N Harbor Blvd., Suite 707<br>Fullerton, CA 92835 | PRO | | 385.00 |
| Navy Federal Credit Union<br>P. O. Box 3500<br>Merrifield, VA 22119-3500 | WEB | Credit Payment | 1893.54 |

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

SUBTOTAL $ 3198.54



Direct File

# Schedule E
# (Continuation Sheet)
# Payments Made

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

SCHEDULE E (CONT.)

Statement covers period
from 07/01/2018
through 09/22/2018

CALIFORNIA FORM **460**



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marr for City Council 2018

I.D. NUMBER
1397147

**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 |
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| CVC | civic donations | PET | petition circulating | TEL | t.v. or cable airtime and production costs |
| FIL | candidate filing/ballot fees | PHO | phone banks | TRC | candidate travel, lodging, and meals |
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| LEG | legal defense | PRO | professional services (legal, accounting) | VOT | voter registration |
| LIT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, e-mail) |

| NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---|---|---|
| OPro, LLC<br>c/o Elizabeth Haynes<br>300 W. 23rd Street #10N<br>New York, NY 10011 | WEB | | 1000.00 |
| OPro, LLC<br>c/o Elizabeth Haynes<br>300 W. 23rd Street #10N<br>New York, NY 10011 | CNS | | 1500.00 |
| PressPrint<br>5085 Mission Hills Dr<br>Banning, CA 92220-6462 | LIT | | 210.11 |
| Stripe<br>185 Berry St, Suite 550<br>San Francisco, CA 94107 | WEB | | 6.10 |
| Stripe<br>185 Berry St, Suite 550<br>San Francisco, CA 94107 | WEB | | 7.55 |

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

**SUBTOTAL $** 2723.76



Direct File

# Schedule E (Continuation Sheet) Payments Made

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

Statement covers period from 07/01/2018 through 09/22/2018

CALIFORNIA FORM 460



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Marr for City Council 2018

I.D. NUMBER: 1397147

**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 |
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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 |
|---|---|---|---|
| Stripe<br>185 Berry St, Suite 550<br>San Francisco, CA 94107 | WEB | | 18.00 |
| Stripe<br>185 Berry St, Suite 550<br>San Francisco, CA 94107 | WEB | | 2.60 |
| Stripe<br>185 Berry St, Suite 550<br>San Francisco, CA 94107 | | | 48.85 |
| Stripe<br>185 Berry St, Suite 550<br>San Francisco, CA 94107 | WEB | | 3.20 |
| Stripe<br>185 Berry St, Suite 550<br>San Francisco, CA 94107 | WEB | | 3.20 |

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

SUBTOTAL $ 75.85



Direct File

# Schedule E
# (Continuation Sheet)
# Payments Made

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

SCHEDULE E (CONT.)

Statement covers period
from 07/01/2018
through 09/22/2018

CALIFORNIA FORM **460**



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marr for City Council 2018

I.D. NUMBER
1397147

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

| | | | | | |
|---|---|---|---|---|---|
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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 |
|---|---|---|---|
| Stripe<br>185 Berry St, Suite 550<br>San Francisco, CA 94107 | WEB | | 1.03 |
| Stripe<br>185 Berry St, Suite 550<br>San Francisco, CA 94107 | WEB | | 25.01 |
| Stripe<br>185 Berry St, Suite 550<br>San Francisco, CA 94107 | WEB | | 1.75 |
| Stripe<br>185 Berry St, Suite 550<br>San Francisco, CA 94107 | WEB | | 5.25 |
| Stripe<br>185 Berry St, Suite 550<br>San Francisco, CA 94107 | WEB | | 0.88 |

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

**SUBTOTAL $** 33.92



DirectFile

# Schedule E (Continuation Sheet) Payments Made

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

Statement covers period from 07/01/2018 through 09/22/2018

CALIFORNIA FORM 460



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Marr for City Council 2018

I.D. NUMBER: 1397147

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

| | | | | | |
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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 |
|---|---|---|---|
| Stripe<br>185 Berry St, Suite 550<br>San Francisco, CA 94107 | WEB | | 1.75 |
| Stripe<br>185 Berry St, Suite 550<br>San Francisco, CA 94107 | WEB | | 0.88 |
| Stripe<br>185 Berry St, Suite 550<br>San Francisco, CA 94107 | WEB | | 7.55 |
| Stripe<br>185 Berry St, Suite 550<br>San Francisco, CA 94107 | WEB | | 1.03 |
| The Camp<br>2937 Bristol St<br>Costa Mesa, CA 92626-5982 | FND | | 202.50 |

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

SUBTOTAL $ 213.71



Direct File

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

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

SCHEDULE G

CALIFORNIA FORM **460**

Statement covers period
from 07/01/2018
through 09/22/2018



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marr for City Council 2018

I.D. NUMBER
1397147

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Navy Federal Credit Union

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

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

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

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---|---|---|---|
| Political Data<br>12500 Imperial Hwy<br>Ste 200<br>Norwalk, CA 90650 | WEB | | | 1175.00 |
| City of Costa Mesa<br>77 Fair Dr<br>Costa Mesa, CA 92626-6520 | FIL | | | 600.00 |
| | | | | |
| | | | | |

*Attach additional information on appropriately labeled continuation sheets.*

**TOTAL* $** 1775.00

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



DirectFile