Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

SEE INSTRUCTIONS ON REVERSE

Date Stamp: RECEIVED CITY CLERK 19 JAN 30 AM 9:53 CITY OF COSTA MESA BY [redacted]

COVER PAGE

CALIFORNIA 2001/02 FORM **460**

Page 1 of 19

For Official Use Only

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

Date of election if applicable: (Month, Day, Year) 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)
- [x] Amendment (Explain below)
- [ ] Quarterly Statement
- [ ] Special Odd-Year Report
- [ ] Supplemental Preelection Statement - Attach Form 495

Change Beginning Cash Balance due to previos report amendment

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 01/24/2019 (Date) By Tammi McIntyre [redacted] (Signature of Treasurer or Assistant Treasurer)

Executed on 01/24/2019 (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)

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Recipient Committee Campaign Statement Cover Page — Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA FORM **460**

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

DirectFile

Campaign Disclosure Statement
Summary Page

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

SUMMARY PAGE

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

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	$ 21706.99
2. Loans Received	*Schedule B, Line 3*	0.00	596.25
3. SUBTOTAL CASH CONTRIBUTIONS	*Add Lines 1 + 2*	$ 8794.00	$ 22303.24
4. Nonmonetary Contributions	*Schedule C, Line 3*	250.00	1754.00
5. TOTAL CONTRIBUTIONS RECEIVED	*Add Lines 3 + 4*	$ 9044.00	$ 24057.24

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*	$ 15596.69
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*	$ 15515.91

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	$ 15013.24	$ 9044.00
21. Expenditures Made	$ 7146.31	$ 9124.78

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 555 Capitol Mall Ste 400 Sacramento, CA 95814-4504 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 [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	100.00	100.00	100.00 G 18
09/07/2018	Alan Fenstermacher [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Attorney Rutan and Tucker	249.00	249.00	249.00 G 18
08/06/2018	Steven Hellings [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	President/Co-Founder WYS Consulting	249.00	249.00	249.00 G 18
09/13/2018	Faye Hezar [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Property Manager Faye Hezar	200.00	225.00	225.00 G 18
09/07/2018	Randal Jackson [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Principal Placeworks	249.00	249.00	249.00 G 18
			SUBTOTAL $	1047.00		

*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 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 [redacted]	☒ 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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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)
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		

*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 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 [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Social Services Director Western Community Housing	50.00	160.00	230.00 G 18
08/06/2018	Allan Sandvig [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	100.00	100.00	100.00 G 18
09/07/2018	Urban Arena 3195 Red Hill Ave Lot F Costa Mesa, CA 92626-3430	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		249.00	249.00	249.00 G 18
09/17/2018	Women for American Values and Ethics 19772 MacArthur Blvd Ste 240 Irvine, CA 92612-2413 ID :1411182	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		500.00	500.00	500.00 G 18
09/21/2018	Women in Leadership 22662 Fernwood St Lake Forest, CA 92630-3609 ID :931119	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		1000.00	2000.00	2000.00 G 18
			SUBTOTAL $	1899.00		

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

*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 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 180 Fairwinds Costa Mesa, CA 92626-6586 †☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Senior Program Manager / Candidate Willdan	$ 196.25	$ 0.00	☐ PAID $ ____ ☐ FORGIVEN $ ____	$ 196.25 12/31/2018 DATE DUE	0.00% RATE $ 0.00	$ 196.25 02/01/2018 DATE INCURRED	CALENDAR YEAR $ 197.25 PER ELECTION** $ 597.25 G 18
Andrea Marr 180 Fairwinds Costa Mesa, CA 92626-6586 †☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Senior Program Manager / Candidate Willdan	$ 400.00	$ 0.00	☐ PAID $ ____ ☐ FORGIVEN $ ____	$ 400.00 12/31/2018 DATE DUE	0.00% RATE $ 0.00	$ 400.00 06/16/2017 DATE INCURRED	CALENDAR YEAR $ 197.25 PER ELECTION** $ 597.25 G 18
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$ ____	$ ____	☐ PAID $ ____ ☐ FORGIVEN $ ____	$ ____ ____ DATE DUE	____% RATE $ ____	$ ____ ____ DATE INCURRED	CALENDAR YEAR $ ____ 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 555 Capitol Mall Ste 400 Sacramento, CA 95814-4504 ID :1377067	☐IND ☒COM ☐OTH ☐PTY ☐SCC		Blackman & Associates, Inc for consulting	250.00	2250.00	2250.00 G 18
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐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 675 N Euclid St. #481 Anaheim, CA 92801	LIT		361.00
ARDA Campaigns 675 N Euclid St. #481 Anaheim, CA 92801	LIT		1176.00
Budget Watchdogs 22410 Hawthorne Blvd Ste 5 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

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

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SUBTOTAL $ 782.00

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.

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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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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 5261 Business Dr Huntington Beach, CA 92649	LIT		300.00
McIntyre & Barcelona, LLC 1440 N Harbor Blvd., Suite 707 Fullerton, CA 92835	PRO		235.00
McIntyre & Barcelona, LLC 1440 N Harbor Blvd., Suite 707 Fullerton, CA 92835	PRO		385.00
McIntyre & Barcelona, LLC 1440 N Harbor Blvd., Suite 707 Fullerton, CA 92835	PRO		385.00
Navy Federal Credit Union P. O. Box 3500 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

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CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
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CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
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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 c/o Elizabeth Haynes 300 W. 23rd Street #10N New York, NY 10011	WEB		1000.00
OPro, LLC c/o Elizabeth Haynes 300 W. 23rd Street #10N New York, NY 10011	CNS		1500.00
PressPrint 5085 Mission Hills Dr Banning, CA 92220-6462	LIT		210.11
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		6.10
Stripe 185 Berry St, Suite 550 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
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
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LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		18.00
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		2.60
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107			48.85
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		3.20
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		3.20

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

SUBTOTAL $ 75.85

DirectFile

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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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
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		1.03
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		25.01
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		1.75
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		5.25
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		0.88

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

SUBTOTAL $ 33.92

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
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
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		1.75
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		0.88
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		7.55
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		1.03
The Camp 2937 Bristol St 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

DirectFile

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

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CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
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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 12500 Imperial Hwy Ste 200 Norwalk, CA 90650	WEB		1175.00
City of Costa Mesa 77 Fair Dr 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.*

Direct File