Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

CALIFORNIA 2001/02 FORM **460**

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

Page 1 of 32

For Official Use Only

SEE INSTRUCTIONS ON REVERSE

Statement covers period from 01/01/2018 through 06/30/2018

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

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:

- [ ] Preelection Statement
- [x] 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

Add missing Donations

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)

Direct File

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 01/01/2018
through 06/30/2018

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*	$ 12912.99	$ 12912.99
2. Loans Received	*Schedule B, Line 3*	196.25	596.25
3. SUBTOTAL CASH CONTRIBUTIONS	*Add Lines 1 + 2*	$ 13109.24	$ 13509.24
4. Nonmonetary Contributions	*Schedule C, Line 3*	1504.00	1504.00
5. TOTAL CONTRIBUTIONS RECEIVED	*Add Lines 3 + 4*	$ 14613.24	$ 15013.24

Expenditures Made

6. Payments Made	*Schedule E, Line 4*	$ 5642.31	$ 5642.31
7. Loans Made	*Schedule H, Line 3*	0.00	0.00
8. SUBTOTAL CASH PAYMENTS	*Add Lines 6 + 7*	$ 5642.31	$ 5642.31
9. Accrued Expenses (Unpaid Bills)	*Schedule F, Line 3*	0.00	0.00
10. Nonmonetary Adjustment	*Schedule C, Line 3*	1504.00	1504.00
11. TOTAL EXPENDITURES MADE	*Add Lines 8 + 9 + 10*	$ 7146.31	$ 7146.31

Current Cash Statement

12. Beginning Cash Balance	*Previous Summary Page, Line 16*	$ 8129.76
13. Cash Receipts	*Column A, Line 3 above*	13109.24
14. Miscellaneous Increases to Cash	*Schedule I, Line 4*	0.00
15. Cash Payments	*Column A, Line 8 above*	5642.31
16. **ENDING CASH BALANCE**	*Add Lines 12 + 13 + 14, then subtract Line 15*	$ 15596.69

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	$ 0.00
21. Expenditures Made	$ 7146.31	$ 0.00

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.

Direct File

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 01/01/2018
through 06/30/2018

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)
02/05/2018	Steven Acevedo [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CEO Regatta	500.00	1000.00	1000.00 G 18
02/05/2018	Steven Acevedo [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CEO Regatta	500.00	1000.00	1000.00 G 18
06/28/2018	Barbi Appelquist [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Attorney Barbi Appelquist	100.00	100.00	100.00 G 18
06/28/2018	Tom Arnold [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	500.00	500.00	500.00 G 18
04/01/2018	Dennis Ashendorf [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Teacher Newport Mesa USD	20.00	110.00	110.00 G 18
			SUBTOTAL $	1620.00		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 10376.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 2536.99
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL $ 12912.99

*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 01/01/2018
through 06/30/2018

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)
03/01/2018	Dennis Ashendorf [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Teacher Newport Mesa USD	20.00	110.00	110.00 G 18
05/31/2018	Dennis Ashendorf [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Teacher Newport Mesa USD	10.00	110.00	110.00 G 18
06/01/2018	Dennis Ashendorf [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Teacher Newport Mesa USD	20.00	110.00	110.00 G 18
02/01/2018	Dennis Ashendorf [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Teacher Newport Mesa USD	20.00	110.00	110.00 G 18
05/01/2018	Dennis Ashendorf [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Teacher Newport Mesa USD	20.00	110.00	110.00 G 18
			SUBTOTAL $	90.00		

*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 01/01/2018
through 06/30/2018

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)
03/06/2018	William Ault [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Ship Handling Instructor LB&B	100.00	100.00	100.00 G 18
01/19/2018	Chris Blank [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Attorney Christopher L. Blank	250.00	250.00	250.00 G 18
01/30/2018	Tom Bowen [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Manager ABM	100.00	100.00	100.00 G 18
06/26/2018	Paul Christman [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Analyst Sempra Energy	100.00	100.00	100.00 G 18
02/23/2018	Jim Conrath [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	250.00	300.00	300.00 G 18
			SUBTOTAL $	800.00		

*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 01/01/2018
through 06/30/2018

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)
06/26/2018	Jim Conrath [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	50.00	300.00	300.00 G 18
03/13/2018	Maria Dzida [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Info requested Info requested	100.00	100.00	100.00 G 18
06/30/2018	Eastside LLC 3334 E Coast Hwy Ste 418 Corona Del Mar, CA 92625-2328	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		875.00	875.00	875.00 G 18
04/21/2018	Irene Engard [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	99.00	356.00	456.00 G 18
04/21/2018	Irene Engard [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	57.00	356.00	456.00 G 18
			SUBTOTAL $	1181.00		

*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.)

CALIFORNIA FORM 460

Statement covers period
from 01/01/2018
through 06/30/2018

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)
06/26/2018	Irene Engard [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	100.00	356.00	456.00 G 18
05/07/2018	Irene Engard [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	100.00	356.00	456.00 G 18
03/13/2018	Foley for Mayor 2018 1600 Dove St Ste 101 Newport Beach, CA 92660 ID :1397432	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		249.00	249.00	249.00 G 18
05/02/2018	Jean Forbath [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	100.00	100.00	100.00 G 18
05/31/2018	Full Moon Photography 1815 Kinglet Ct Costa Mesa, CA 92626	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		100.00	100.00	100.00 G 18
			SUBTOTAL $	649.00		

*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 01/01/2018
through 06/30/2018

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)
05/31/2018	Generation Change PAC 1787 Tribute Rd Ste K Sacramento, CA 95815 ID :1397743	☐IND ☒COM ☐OTH ☐PTY ☐SCC		1000.00	1000.00	1000.00 G 18
01/03/2018	Nathan Gonzalez [redacted]	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Professor USAF	250.00	250.00	250.00 G 18
06/30/2018	Lucy Harney [redacted]	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Retired N/A	100.00	100.00	100.00 G 18
06/30/2018	Susan Jerich [redacted]	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Rains, Lucia, Stern	300.00	300.00	300.00 G 18
04/16/2018	Michael Kotick [redacted]	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Unemployed N/A	250.00	250.00	350.00 G 18
			SUBTOTAL $	1900.00		

*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 01/01/2018
through 06/30/2018

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)
03/13/2018	Andrea Marr 180 Fairwinds Costa Mesa, CA 92626-6586	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Senior Program Manager / Candidate Willdan	1.00	197.25	597.25 G 18
06/06/2018	Gladis Marr [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	100.00	100.00	100.00 G 18
06/30/2018	Zara Marselian [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CEO La Maestra Community Health Centers	100.00	100.00	200.00 G 18
03/27/2018	Florence Martin [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	250.00	250.00	500.00 G 18
04/21/2018	William McCarty [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	President Cobalt Productions	50.00	100.00	120.00 G 18
			SUBTOTAL $	501.00		

*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 01/01/2018
through 06/30/2018

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)
03/13/2018	William McCarty [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	President Cobalt Productions	50.00	100.00	120.00 G 18
06/30/2018	Ed Ruth McKinney [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Truck Driver ITS Logistics	100.00	100.00	100.00 G 18
06/24/2018	Charles Mooney [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	100.00	100.00	100.00 G 18
04/21/2018	Mary Ann O'Connell [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Franchise Consultant O'Connell & Company, Inc	20.00	145.00	245.00 G 18
03/13/2018	Mary Ann O'Connell [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Franchise Consultant O'Connell & Company, Inc	25.00	145.00	245.00 G 18
			SUBTOTAL $	295.00		

*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 01/01/2018
through 06/30/2018

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)
06/24/2018	Mary Ann O'Connell [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Franchise Consultant O'Connell & Company, Inc	100.00	145.00	245.00 G 18
04/25/2018	Oatman for Congress 525 E Seaside Way Ste 101-C Long Beach, CA 90802 ID :C00636969	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		500.00	500.00	500.00 G 18
05/23/2018	Orange County Employees Assoiation PAC 1121 L Street Ste 200 Sacramento, CA 95814 ID :801447	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		1000.00	1000.00	1000.00 G 18
01/20/2018	Eva Orozco [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	10.00	105.00	155.00 G 18
03/20/2018	Eva Orozco [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	10.00	105.00	155.00 G 18
			SUBTOTAL $	1620.00		

*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 01/01/2018
through 06/30/2018

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)
06/20/2018	Eva Orozco [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	25.00	105.00	155.00 G 18
02/20/2018	Eva Orozco [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	10.00	105.00	155.00 G 18
04/20/2018	Eva Orozco [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	25.00	105.00	155.00 G 18
05/20/2018	Eva Orozco [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	25.00	105.00	155.00 G 18
05/31/2018	Irma Ramirez [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Director, Special Events Segerstrom Center for the Arts	100.00	100.00	200.00 G 18
			SUBTOTAL $	185.00		

*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 01/01/2018
through 06/30/2018

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)
05/31/2018	Gary Reynolds [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	100.00	100.00	100.00 G 18
06/30/2018	Greg Ridge [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Chef Chapters Capistrano	100.00	100.00	200.00 G 18
04/21/2018	Maritza Rivera [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	100.00	125.00	125.00 G 18
06/28/2018	Maritza Rivera [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	25.00	125.00	125.00 G 18
06/27/2018	Ronald Robinson [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Tech USN	100.00	200.00	300.00 G 18
			SUBTOTAL $	425.00		

*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 01/01/2018
through 06/30/2018

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)
03/26/2018	Ronald Robinson [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Tech USN	100.00	200.00	300.00 G 18
05/31/2018	Dianne Russell [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Social Services Director Western Community Housing	25.00	110.00	180.00 G 18
03/13/2018	Dianne Russell [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Social Services Director Western Community Housing	35.00	110.00	180.00 G 18
01/23/2018	Dianne Russell [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Social Services Director Western Community Housing	50.00	110.00	180.00 G 18
06/30/2018	Samuel Salazar-Rey [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Sales Tpx	100.00	100.00	350.00 G 18
			SUBTOTAL $	310.00		

*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.

Statement covers period
from 01/01/2018
through 06/30/2018

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)
01/23/2018	Coleen Scherf Ghara [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Fundraising Soka University	100.00	100.00	100.00 G 18
06/30/2018	Julie Stromberg [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Attorney Obagi Law Group, PC	100.00	100.00	100.00 G 18
02/13/2018	Sally Jane Super [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Property Manager Sally Jane Super	100.00	100.00	100.00 G 18
04/12/2018	Floyd Sylvester [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Dir, Employment Assistance Univ of Nebraska	100.00	100.00	350.00 G 18
06/30/2018	Mitchellene Sylvester [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Teacher Lincoln Public Schools	100.00	100.00	350.00 G 18
			SUBTOTAL $	500.00		

*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 01/01/2018
through 06/30/2018

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)
06/30/2018	Anais Tangie [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CEO/Founder A. T. Connections	100.00	100.00	100.00 G 18
06/30/2018	Terry Welsh [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Physician Pathoology Associates	100.00	100.00	100.00 G 18
05/05/2018	Maya Willey [redacted]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Student University of Maryland	100.00	100.00	100.00 G 18
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
			SUBTOTAL $	300.00		

*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 B – Part 1
Loans Received

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

Statement covers period from 01/01/2018 through 06/30/2018

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	$ 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
Andrea Marr 180 Fairwinds Costa Mesa, CA 92626-6586 †☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Senior Program Manager / Candidate Willdan	$ 0.00	$ 196.25	☐ 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
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$ ____	$ ____	☐ PAID $ ____ ☐ FORGIVEN $ ____	$ ____ DATE DUE	____% RATE $ ____	$ ____ DATE INCURRED	CALENDAR YEAR $ ____ PER ELECTION** $ ____
		SUBTOTALS $	196.25	$ 0.00	$ 596.25	$ 0.00 (Enter (e) on Schedule E, Line 3)		

Schedule B Summary

1. Loans received this period ..... $ 196.25
   (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 $ 196.25
   (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 01/01/2018
through 06/30/2018

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)
02/01/2018	Anne's Boutique Wines 270 E 17th St #14 Costa Mesa, CA 92627	☐IND ☐COM ☒OTH ☐PTY ☐SCC		Sommelier and Facility use for fundraiser	300.00	300.00	300.00 G 18
01/02/2018	Inspired Art Wine 1500 Adams Ave Ste 109 Costa Mesa, CA 92626-3866	☐IND ☐COM ☒OTH ☐PTY ☐SCC		Staff for fundraiser	825.00	825.00	825.00 G 18
05/09/2018	Modus Acupuncture 170 E 17th St Ste 211 Costa Mesa, CA 92627-3701	☐IND ☐COM ☒OTH ☐PTY ☐SCC		Acupuncture service gift card for raffle at fundraiser	130.00	130.00	130.00 G 18
04/12/2018	The Straw 1215 Baker St Ste A Costa Mesa, CA 92626-3901	☐IND ☐COM ☒OTH ☐PTY ☐SCC		Staff used for fundtaiser.	150.00	150.00	150.00 G 18

Attach additional information on appropriately labeled continuation sheets. **SUBTOTAL $** 1405.00

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) ..... $ 1405.00
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $ 99.00
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 $** 1504.00

*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 01/01/2018
through 06/30/2018

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
Anne's Boutique Wines 270 E 17th St #14 Costa Mesa, CA 92627	FND		127.92
ARDA Campaigns 675 N Euclid St. #481 Anaheim, CA 92801	OFC		290.95
Democratic Party of Orange County 1916 West Chapman Ave, Ste B Orange, CA 92868 ID :742006	WEB		500.00

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

SUBTOTAL $ 918.87

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 5523.98
2. Unitemized payments made this period of under $100 ..... $ 118.33
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 $** 5642.31

Direct File

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period from 01/01/2018 through 06/30/2018

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
Nicole Harding [redacted]	CMP		350.00
Mailing Pros Inc 5261 Business Dr Huntington Beach, CA 92649	LIT		130.00
McIntyre & Barcelona, LLC 1440 N Harbor Blvd., Suite 707 Fullerton, CA 92835	PRO		150.00
McIntyre & Barcelona, LLC 1440 N Harbor Blvd., Suite 707 Fullerton, CA 92835	PRO		150.00
McIntyre & Barcelona, LLC 1440 N Harbor Blvd., Suite 707 Fullerton, CA 92835	PRO		150.00

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

SUBTOTAL $ 930.00

DirectFile

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period from 01/01/2018 through 06/30/2018

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
McIntyre & Barcelona, LLC 1440 N Harbor Blvd., Suite 707 Fullerton, CA 92835	PRO		150.00
McIntyre & Barcelona, LLC 1440 N Harbor Blvd., Suite 707 Fullerton, CA 92835	WEB		170.00
McIntyre & Barcelona, LLC 1440 N Harbor Blvd., Suite 707 Fullerton, CA 92835	PRO		150.00
McIntyre & Barcelona, LLC 1440 N Harbor Blvd., Suite 707 Fullerton, CA 92835	PRO		150.00
Navy Federal Credit Union P. O. Box 3500 Merrifield, VA 22119-3500	OFC	Credit Payment	94.35

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

SUBTOTAL $ 714.35

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 01/01/2018
through 06/30/2018

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
Navy Federal Credit Union P. O. Box 3500 Merrifield, VA 22119-3500	OFC		163.94
Navy Federal Credit Union P. O. Box 3500 Merrifield, VA 22119-3500	OFC	Credit Payment	33.32
Navy Federal Credit Union P. O. Box 3500 Merrifield, VA 22119-3500	OFC	Credit Payment	59.86
OPro, LLC c/o Elizabeth Haynes 300 W. 23rd Street #10N New York, NY 10011	CNS		1500.00
OPro, LLC c/o Elizabeth Haynes 300 W. 23rd Street #10N New York, NY 10011	WEB		1000.00

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

SUBTOTAL $ 2757.12

DirectFile

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period from 01/01/2018 through 06/30/2018

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		3.20
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		1.03
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		0.88
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		0.59
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		10.75

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

SUBTOTAL $ 16.45

Direct File

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period
from 01/01/2018
through 06/30/2018

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		1.91
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		3.20
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		1.75
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		1.03
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 $ 11.09

Direct File

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period from 01/01/2018 through 06/30/2018

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		3.20
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
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 $ 15.86

DirectFile

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period
from 01/01/2018
through 06/30/2018

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		14.80
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		0.88
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		1.47
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		0.45
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		1.03

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

SUBTOTAL $ 18.63

DirectFile

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period from 01/01/2018 through 06/30/2018

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		3.20
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		3.20
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		5.98
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		1.03
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		5.98

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

SUBTOTAL $ 19.39

Direct File

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period
from 01/01/2018
through 06/30/2018

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		12.27
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		4.95
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		4.23
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		27.35
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 $ 56.35

Direct File

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period from 01/01/2018 through 06/30/2018

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		2.63
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		0.88
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		3.17
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		2.93
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 $ 17.16

DirectFile

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period
from 01/01/2018
through 06/30/2018

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		0.59
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		0.59
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		0.45
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		1.33
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 $ 6.16

DirectFile

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period from 01/01/2018 through 06/30/2018

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		30.77
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		1.03
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		7.55
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 $ 42.55

DirectFile