

**Recipient Committee
Campaign Statement
Cover Page**

Date Stamp RECEIVED SEP 26 2018 CITY CLERK'S DIVISION CITY OF MOORPARK	CALIFORNIA FORM 460 Page <u>1</u> of <u>3</u> For Official Use Only 1407816
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Statement covers period from <u>7-1-18</u> through <u>8-22-18</u>	Date of election if applicable: (Month, Day, Year) <u>11-6-18</u>
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SEE INSTRUCTIONS ON REVERSE

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

- | | |
|---|--|
| <input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee
<input type="checkbox"/> State Candidate Election Committee
<input type="checkbox"/> Recall
<small>(Also Complete Part 5)</small> | <input type="checkbox"/> Primarily Formed Ballot Measure Committee
<input type="checkbox"/> Controlled
<input type="checkbox"/> Sponsored
<small>(Also Complete Part 6)</small> |
| <input type="checkbox"/> General Purpose Committee
<input type="checkbox"/> Sponsored
<input type="checkbox"/> Small Contributor Committee
<input type="checkbox"/> Political Party/Central Committee | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee
<small>(Also Complete Part 7)</small> |

2. Type of Statement:

- | | |
|---|--|
| <input checked="" type="checkbox"/> Pre-election Statement | <input type="checkbox"/> Quarterly Statement |
| <input type="checkbox"/> Semi-annual Statement | <input type="checkbox"/> Special Odd-Year Report |
| <input type="checkbox"/> Termination Statement
<small>(Also file a Form 410 Termination)</small> | |
| <input type="checkbox"/> Amendment (Explain below) | |

3. Committee Information

I.D. NUMBER _____

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
**DAVID LOPEZ-LEE FOR MOORPARK
CITY COUNCIL 2018**

STREET ADDRESS (NO P.O. BOX)
[REDACTED]

CITY STATE ZIP CODE AREA CODE/PHONE
MOORPARK CA 93021 [REDACTED]

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

CITY STATE ZIP CODE AREA CODE/PHONE
lopezlee@usc.edu

OPTIONAL: FAX / E-MAIL ADDRESS
1

Treasurer(s)

NAME OF TREASURER
MALOU GILMORE

MAILING ADDRESS
[REDACTED]

CITY STATE ZIP CODE AREA CODE/PHONE
OXNARD CA 93030 [REDACTED]

NAME OF ASSISTANT TREASURER, IF ANY
[REDACTED]

MAILING ADDRESS
[REDACTED]

CITY STATE ZIP CODE AREA CODE/PHONE
[REDACTED]

OPTIONAL: FAX / E-MAIL ADDRESS
[REDACTED]

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 <u>9-25-18</u> Date	By _____
Executed on <u>9/25/2018</u> Date	By _____
Executed on _____ Date	By _____
Executed on _____ Date	By _____

Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Recipient Committee
Campaign Statement
Cover Page — Part 2**

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

DAVID LOPEZ-LEE

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

MOORPARK CITY COUNCIL 2018

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

[REDACTED] MOORPARK, CA 93001

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
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NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
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COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
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CITY	STATE	ZIP CODE	AREA CODE/PHONE
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COMMITTEE NAME	I.D. NUMBER
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NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
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COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
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CITY	STATE	ZIP CODE	AREA CODE/PHONE
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6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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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
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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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>7-1-18</u> through <u>8-22-18</u>	CALIFORNIA FORM 460
Page <u>3</u> of <u>3</u>	I.D. NUMBER <u>1407816</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

DAVID LOPEZ-LEE FOR MOORPARK CITY COUNCIL 2018

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions..... Schedule A, Line 3	\$ <u>5,031.00</u>	\$ <u>5,158.00</u>
2. Loans Received..... Schedule B, Line 3	\$ <u>1,867.00</u>	\$ <u>1,867.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1 + 2	\$ <u>6,898.00</u>	\$ <u>7,025.00</u>
4. Nonmonetary Contributions..... Schedule C, Line 3	\$ <u>0</u>	\$ <u>0</u>
5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4	\$ <u>6,898.00</u>	\$ <u>7,025.00</u>

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	\$ _____	\$ _____

Expenditures Made

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made..... Schedule E, Line 4	\$ <u>4,896.60</u>	\$ <u>5,011.44</u>
7. Loans Made..... Schedule H, Line 3	\$ <u>0</u>	\$ _____
8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7	\$ <u>4,896.60</u>	\$ <u>5,011.44</u>
9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3	\$ <u>0</u>	\$ _____
10. Nonmonetary Adjustment..... Schedule C, Line 3	\$ <u>0</u>	\$ _____
11. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10	\$ <u>4,896.60</u>	\$ <u>5,011.44</u>

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
<u>1/1/18</u>	\$ _____
<u>1/1/18</u>	\$ _____

Current Cash Statement

12. Beginning Cash Balance..... Previous Summary Page, Line 16	\$ <u>12.16</u>
13. Cash Receipts..... Column A, Line 3 above	\$ <u>6,898.00</u>
14. Miscellaneous Increases to Cash..... Schedule I, Line 4	\$ <u>0</u>
15. Cash Payments..... Column A, Line 8 above	\$ <u>4,896.60</u>
16. ENDING CASH BALANCE..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>2,103.56</u>

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

17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2	\$ <u>0</u>
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents..... See instructions on reverse	\$ _____
19. Outstanding Debts..... Add Line 2 + Line 9 in Column B above	\$ _____

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).

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

Clear Summ Pg

Print Form

**Schedule A
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period from <u>7-1-18</u> through <u>9-22-18</u>	CALIFORNIA FORM 460
	Page <u>1</u> of <u>4</u>
	I.D. NUMBER <u>1407816</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

DAVIN LOPEZ-LEE FOR MOORPARK CITY COUNCIL 2018

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)
7-13-18	CHERYL DE BARI 11361 BROADVIEW DR MOORPARK, CA 93021	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ATTORNEY	500.00		
7-9-18 7-16-18	MALOU GILMORE 2971 FANSMELL WALK OXNARD, CA 93035	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ENROLLED AGENT S/E MALOU GILMORE, EA	200.00		
7-19-18	VICTORIA PEREZ 4627 BELLA VISTA DR MOORPARK, CA 93021	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	REALTOR	100.00		
7-23-18	SANDRA MEDINA 15011 LOFTALL DR LA MICHAN, CA 90638	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	TELEVISION REP	300.00		
7-26-18	ARTURO FRANZ 1463 POPENDE RD LA HABRA HEIGHTS, CA 90631	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED	100.00		

SUBTOTAL \$ 4,400.00

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 4,400.00
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 631.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) TOTAL \$ 5,031.00

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

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>7-1-18</u> through <u>9-22-18</u>	CALIFORNIA FORM 460 Page <u>2</u> of <u>4</u>
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NAME OF FILER

DAVID LOPEZ-LEE FOR MOORPARK CITY COUNCIL 2018

I.D. NUMBER

1407816

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)
8-1-18	BRUCE THOMAS 12494 BEECH GROVE CT MOORPARK, CA 93021	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED	250.00		
8-7-18	RUTH BANDA-RALPH 13103 WOODRUFF AVE DONNER, CA 90242	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED	100.00		
8-10-18	BERNARD PEREZ 4627 BELLA VISTA DR MOORPARK, CA 93021	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	TRUSTEE, VENTURA COMM. COLL. DIST.	100.00		
8-10-18	FRED HERMOSILLO 85-447 TREVISIO DR INDIO, CA 92203	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED	100.00		
8-17-18	GILBERT GONZALES 1 PYRAMID LAKE CT RANCHO MIRAGE, CA 92270	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED	150.00		
SUBTOTAL \$				700.00		

*Contributor Codes

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

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>7-1-18</u> through <u>9-22-18</u>	CALIFORNIA FORM 460 Page <u>3</u> of <u>4</u>
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NAME OF FILER <u>DAVID LOPEZ-LEE FOR MOOREPARK CITY COUNCIL 2018</u>	I.D. NUMBER <u>1407816</u>
---	-------------------------------

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8-27-18	CYNTHIA ZIEMINSKY 720 CONGRESSIONAL RD MOOREPARK, CA 93065	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED	100.00		
9-4-18	GREGORY BARKER 12453 HILLSIDE DR MOOREPARK, CA 93021	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED	100.00		
9-11-18	KATHLEEN SMILEY 533 RACKET CLUB LN THOUSAND OAKS, CA 91360	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	REALTOR	150.00		
9-11-18	OPERATING ENGINEERS 150 E. CORSON ST PASADENA, CA 91103	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00		
9-15-18	CARA LOPEZ-LEE 450 ANACAPA ST VENTURA, CA 93001	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	WRITER	100.00		
SUBTOTAL \$				1,450.00		

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

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>7-1-18</u> through <u>9-22-18</u>	CALIFORNIA FORM 460
Page <u>4</u> of <u>4</u>	I.D. NUMBER

NAME OF FILER

DAVID LOPEZ-LEE FOR MOORPARK CITY COUNCIL 2018

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)
9-15-18	SATYA KARRA 12317 WILLOW FOREST DR MOORPARK, CA 93021	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED	100.00		
9-21-18	WEST COAST CONSULTING 530 NEW LOS ANGELES #115-202 MOORPARK, CA 93021	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00		
9-21-18	MICHAEL COSENZA 6936 SHADOW WOOD DR MOORPARK, CA 93021	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PROFESSOR CALIFORNIA UNIVERSITY	100.00		
9-21-18	MOORPARK DEMOCRATIC CLUB 207 W. LOS ANGELES AVE MOORPARK, CA 93021	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		750.00		
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$1,050.00						

*Contributor Codes

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

**Schedule B - Part 1
Loans Received**

Amounts may be rounded to whole dollars.

Statement covers period from <u>7-1-18</u> through <u>8-22-18</u>	CALIFORNIA FORM 460
Page <u>1</u> of <u>1</u>	I.D. NUMBER <u>1407816</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

DAVID LOPEZ LEE FOR MOORPARK CITY COUNCIL 2018

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
				<input type="checkbox"/> PAID	<input type="checkbox"/> FORGIVEN				
DAVID LOPEZ-LEE [REDACTED] MOORPARK, CA 93001 <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PROFESSOR EMERITUS	\$ <u>0</u>	\$ <u>494.00</u>	\$ <u>494.00</u>	\$ <u>0</u>	\$ <u>494.00</u> DATE DUE <u>11-6-18</u>	% RATE	\$ <u>494.00</u> DATE INCURRED <u>7-2-18</u>	CALENDAR YEAR <u>494.00</u> PER ELECTION** \$
DAVID LOPEZ-LEE [REDACTED] MOORPARK, CA 93001 <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PROFESSOR EMERITUS	\$ <u>494.00</u>	\$ <u>773.00</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>4267.00</u> DATE DUE <u>11-6-18</u>	% RATE	\$ <u>773.00</u> DATE INCURRED <u>7-10-18</u>	CALENDAR YEAR <u>4267.00</u> PER ELECTION** \$
DAVID LOPEZ-LEE [REDACTED] MOORPARK, CA 93001 <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PROFESSOR EMERITUS	\$ <u>4267.00</u>	\$ <u>600.00</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>4867.00</u> DATE DUE <u>11-6-18</u>	% RATE	\$ <u>600.00</u> DATE INCURRED <u>8-22-18</u>	CALENDAR YEAR <u>4867.00</u> PER ELECTION** \$
SUBTOTALS		\$ <u>1,867.00</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>1,867.00</u>			

Schedule B Summary

1. Loans received this period \$ 1,867.00
(Total Column (b) plus unitemized loans of less than \$100.)
2. Loans paid or forgiven this period \$ 0
(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 \$ 1,867.00
Enter the net here and on the Summary Page, Column A, Line 2.
(May be a negative number)

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

†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.

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period from <u>7-1-18</u> through <u>8-22-18</u>	CALIFORNIA FORM 460
Page <u>1</u> of <u>3</u>	I.D. NUMBER <u>1407816</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

DAVID LOPEZ-LEE FOR MOORPARK CITY COUNCIL 2018

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
<u>WOODLAND HILLS PRINTING 21602 VENTURA BLVD WOODLAND HILLS, CA 91364</u>	<u>LIT</u>		<u>493.00</u>
<u>CITY OF MOORPARK 799 MOORPARK AVE MOORPARK, CA 93021</u>	<u>FIL</u>		<u>800.00</u>
<u>COPS VOTER GUIDE 705-B E. BIDWELL ST #370 FOLSOM, CA 95630</u>	<u>LIT</u>		<u>530.00</u>

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

SUBTOTAL \$ 1,825.00

Schedule E Summary

- | | |
|--|---------------------------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.) | \$ <u>4,765.60</u> |
| 2. Unitemized payments made this period of under \$100 | \$ <u>131.00</u> |
| 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) | \$ _____ |
| 4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) | TOTAL \$ <u>4,896.60</u> |

Clear Sch. E

Print Form

**Schedule E
(Continuation Sheet)
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>7-1-18</u> through <u>8-22-18</u>	CALIFORNIA FORM 460
	Page <u>2</u> of <u>3</u>
	I.D. NUMBER <u>1407816</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

DAVID LOPEZ-LEE FOR MOORPARK CITY COUNCIL 2018

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
POLITICAL DATA INC. P.O. BOX 59570 NORWALK, CA 90652	LIT		273.75
PRESS PRINT, INC. 5885 MISSION HILLS DR DANNING, CA 92220	LIT		275.84
LARRY LEVIN'S ELECTION DIGEST 6 2018 22410 HAWTHORNE BLVD #5 TORRANCE, CA 90505	LIT		385.00
CALIFORNIA VOTER GUIDE 22410 HAWTHORNE BLVD #5 TORRANCE, CA 90505	LIT		296.00
BUDGET WATCH LOGS 22410 HAWTHORNE BLVD #5 TORRANCE, CA 90505	LIT		611.00

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

SUBTOTAL \$ 1841.59

**Schedule E
(Continuation Sheet)
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>7-1-18</u> through <u>8-22-18</u>	CALIFORNIA FORM 460
	Page <u>3</u> of <u>3</u>
	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

DAVID LOPEZ LEE FOR MODOC PARK CITY COUNCIL 2018

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 82410 HANTHORNE BLVD #5 TORRANCE, CA 90505	LIT,		300.00
PRESS PRINT 5085 MISION HILLS DR BANNING, CA 92220	LIT,		799.01

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

SUBTOTAL \$ 1,099.01