#### **CAMPAIGN STATEMENT LOG**

Name of Candidate or Office Holder: COMMITTEE TO CONTINUE THE PROGRESS OF EL SEGUNDO

YEAR: 2004/2005

STATEMENT TYPE	PERIOD COVERED	FILING DEADLINE	DATE FILED	NOTICE OF AMENDMENT	NOTICE OF FINE	NOTICE OF WAIVER
460	COVERED	DENDERRE	TIEBB	THURST (BIVIDAY)	OI III(E	OI WINVER
Jan Semi-	7/1/04	1/31/05				
Annual	12/31/05		2-1-05			
July Semi-	1/1/05	7/31/05				
Annual	6/30/05					
Annual Short	1/1/05	7/31/05				
Form 470	12/31/05					
1 <sup>st</sup> Pre-Election						
2 <sup>nd</sup> Pre-Election						
3 <sup>rd</sup> Pre-Election						
Post Election						
July Semi-						
Annual						

410 Term. 3-1-05

#### **CAMPAIGN STATEMENT LOG**

Name of Candidate or Office Holder: COMMITTEE TO CONTINUE THE PROGRESS OF EL SEGUNDO

YEAR: 2003/2004

STATEMENT	PERIOD	FILING	DATE	NOTICE OF	NOTICE	NOTICE
TYPE	COVERED	DEADLINE	FILED	<b>AMENDMENT</b>	OF FINE	OF WAIVER
410			1/16/04	amend.		
Jan Semi-	7/1/03	1/31/04		3-8-04		
Annual	12/31/03			3-8-07		
July Semi-	1/1/04	7/31/04				
Annual	6/30/04					
Annual Short	1/1/04	7/31/04				
Form 470	12/31/04	1				
(CANCENCE)	breake	£0000				
1 <sup>st</sup> Pre-Election	closing date 2/28/04	3/4/04	3-8-04			Excused U.S. Mail Problem
2 <sup>nd</sup> Pre-Election	2/29/04- 3/26/04	4/1/04	4-1-04			
3 <sup>rd</sup> Pre-Election	3/27/03- Noon 4/9/04	4/9/04 Noon	4-9-09			
Post Election	4/9/04- Noon 4/16/04	4/16/04 Noon	4-16-04			
July Semi- Annual	4/16/04- 6/30/04	7/31/04	7-26-04			Resunder 7

Cate Contribution

4-8-04

Recipient Committee Statement of Organization pe or print in ink

Statement Type □InItlal Not yet qualified or List (C) (sumber: # 1262139 List I.D. number: X Termination – See Part 5 31 2 KEVIN SHELLEY, Secretary of State RECEIVED Distribution STATEMENT OF ORGANIZATION in the office of the Secretary of State CALIFORNIA AND Of the State of California FEB 0 2 2005 icologica Contino ampaign Finance For Official Use Only
- | PN | |2: || |7

Is committee  Using (Paphlable)  2. Treasurer and NAME OF TREASURER	is committee Da'se (Izali)ied as committee Dai	Date qui	1. Committee Information	NAME OF COMMITTEE		Committee to Continue the Progress of El Segundo	Committee to Continue	Committee to Continue	Committee to Continue to STREET ADDRESS (NO PO. BOX)	Committee to Continue the F STREET ADDRESS (NO PO. BOX) 601 S. Glenoaks Blvd., #211	Committee to Continue  STREET ADDRESS (NO PO. BO.  601 S. Glenoaks Blvd.,  CITY	Committee to Continue  STREET ADDRESS (NO PO. BO)  601 S. Glenoaks Blvd., CITY  Burbank	Committee to Continue th  STREET ADDRESS (NO RO. BOX)  601 S. Glenoaks Blvd., #2  CITY  Burbank  MAILING ADDRESS (IF DIFFERENT)	Committee to Continue the STREET ADDRESS (NO PO. BOX) 601 S. Glenoaks Blvd., #2-CITY Burbank MAILING ADDRESS (IF DIFFERENT)	Committee to Continue  STREET ADDRESS (NO RO. BO)  601 S. Glenoaks Blvd., CITY  Burbank  MAILING ADDRESS (IF DIFFERE)  OPTIONAL: FAX / E-MAIL ADDR  818-260-0657	Committee to Continue  STREET ADDRESS (NO PO. BO)  601 S. Glenoaks Blvd., CITY  Burbank  MAILING ADDRESS (IF DIFFERE)  OPTIONAL: FAX / E-MAIL ADDR  818-260-0657  COUNTY OF DOMICILE  Los Angeles
(frapplicable)  2. Treasurer and NAME OF TREASURER Kinde Durkee STREET ADDRESS 601 S. Glenoaks BICITY Burbank	(frapplicable)  2. Treasurer and NAME OF TREASURER Kinde Durkee STREET ADDRESS 601 S. Glenoaks BICITY Burbank	alified as committee	ıtion		the Progress of I			0	#911		STATE		=			
2. Treasurer and INAME OF TREASURER Kinde Durkee STREET ADDRESS 601 S. Glenoaks BICITY Burbank	2. Treasurer and INAME OF TREASURER Kinde Durkee STREET ADDRESS 601 S. Glenoaks BICITY Burbank	Date (Janieco			El Segundo		1		· 7.		TE ZIP CODE					TE ZIP CODE  \( \text{91602} \)  \( \text{91602} \)  HERE COMMITTEES  NTY OF DOMICILE
er and (REASURER REASURER RESS) RESS RESS RESS RESS RESS RESS RESS	er and leasurer kee REASURESS BIOOAKS BI	plicable)								AREA CODE/PHONE		818-260-0669	818-260-0669	818-260-0669	818-260-0669	CA 91502 818-260-0669  COUNTY WHERE COMMITTIES IS ACTIVE IF DIFFERENT THAN COUNTY OF DOMICILE
	r Principal O	Date of Termination	_	- 1	Kinde Durkee	STREET ADORESS	601 S. Glenoaks Blvd., #2		Burbank	NAME OF ASSISTANT TREASURER, IF ANY			3.0	3.0	9. 391	
fficers  E ZIP CODE 91502		Placinatia Carifoli						AREA CODE/PHONE	818-260-0669					AREA CODE/PHONE	AREA CODE/PHONE	AREA CODE/PHONE

#### Verification

I have used all reasonable diligence in preparing this statement and to the best of my knowledge the information contained herein 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.

1/24/05 By	SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT	DATE	
DATE  DATE  DATE  DATE  By	By	1	Executed on
1/24/05  By Kinde Durkee  DATE  DATE  By By	SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONE	T.	
1/24/05  By Kinde Durkee  DATE  By	Ву	DATE	Executed on
1/24/05  By Kinde Durkee  DATE  By	SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPON		
1/24/05  By Kinde Durkee  SIGNATURE C	<b>P</b>	DATE	Executed on
1/24/05 By	SIGNATURE OF TREASURER OR ASSISTANT TREASURER	DATE	
	By Kinde Durkee	1/24/05	Executed on



#### COUNTY OF LOS ANGELES REGISTRAR-RECORDER/COUNTY CLERK

12400 IMPERIAL HWY. – P.O. BOX 1024, NORWALK, CALIFORNIA 90651-1024 (562) 462-2339 • FAX (562) 651-2548

CONNY B. McCORMACK
REGISTRAR-RECORDER/COUNTY CLERK

March 31, 2005

**Dear City Clerk:** 

Pursuant to the Political Reform Act (PRA), Government Code Sections 84101 and 85200 (as amended), the enclosed Statement(s) of Organization (Form 410) and/or Candidate Intention Statement(s) (Form 501) are being sent to you as the official filing officer.

If you have any questions, please contact the Campaign Finance Disclosure Section at (562) 462-2339.

Sincerely,

CONNY B. McCORMACK Registrar-Recorder/County Clerk

HARRIETT COLEMAN-RUSS

Division Manager,

**Election Information Services** 

HCR:ja

Enclosure(s)

# Recipient Committee

Type or print in ink.

|--|

FPPC Form 460 (June/01)	te Measure Proponent	Signature of Controlling Officeholder, Cardidate, State Measure Proponent	Ву	Executed on
	te Measure Proponent	Signature of Controlling Officeholder, ാം ചിർമര, State Measure Proponent		Date
	onent or Responsible Officer of Sponsor	Signature of Controlling Officeholder, Candidate, State Wick Are Proponent or Responsible Officer of Sponsor	ces	Executed onDate
	Company of	Comment of Comments of Comments	ı	
ļ	Paguirer Committee Committ	Sonature of Treasures Constitution Treasurer	By Kinde Durkee	Executed on01/23/2005
chedules is true and complete. I	d herein and in the attached s	knowledge the informatio, containe nd correct.	viewing this statement and to the best of my tate of California that the foregoing is true ar	
		7.200.0		4 Verification
	SS	OPTIONAL: FAX / E-N 48 ADDRESS		OPTIONAL: FAX / E-MAIL ADDRESS
AREA CODE/PHONE	SIAIE ZIP CODE	CITY CITY	AREA CODE/PHONE	O I A I
				ومدوعات
		MAILING ADDRESS	OR PO. BOX (8   8) 260-0669	MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR
	ER, IF ANY	NAME OF ASSISTANT TREASURER, IF ANY	m	STATE
(818) 260-0669	CA 91502	Burbank U		)1 S Glenoaks BI #211
		601 S Glenowks Bl #211		מינים על מינים
		MAILING ADDRESS	)f El Segundo	Committee To Continue The Progress Of El Segundo
		NAME OF TREASURES.	TEE)	COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
		Treasurer(s)	LD. NUMBER 1262139	3. Committee Information
1			_	O Small Contributor Committee O Political Party/Central Committee
			Primarily Formed Candidate/	se Committee
Supplemental Preelection Statement - Attach Form 495		☐ Amendment (Explain below)	O Sponsored	(Also Complete Part 5)
Quarterly Statement Special Odd-Year Report	☐ Quant		Ballot Measure Committee O Primarily Formed	er, Candidate Controlled Committee  Andidate Election Committee
V		2. Type of Statement:	– Complete Parts 1, 2, 3, and 4.	1. Type of Recipient Committee: All Committees
			through 12/31/2004	SEE INSTRUCTIONS ON REVERSE
Page 1 of 5 For Official Use Only	OTERNO OTTICE	Date of election if applicable. (Month, Day, Year)	Statement covers period from 07/01/2004	
FORM	HOEVED HOEVED	. 12		Cover Page (Government Code Sections 84200-84216.5)
CALIFORNIA 460	Date Stamp	nk.	Type or print in ink.	Campaign Statement

COVER PAGE - PART 2
LIFORNIA 460
FORM

												Ċ1	ř
CITY	NAME OF TREASURER	COMMITTEE NAME	COMMITTEE NAME	COMMITTEE ADDRESS	NAME OF TREASURER	COMMITTEE NAME	not included in this state contributions or make ex	Related Committees	RESIDENTIAL/BUSINESS AD	OFFICE SOUGHT OR HELD	NAME OF OFFICEHOLDER OR CANDIDATE	Officeholder or Can	
STATE ZIP CODE AREA CODE/PHONE	STREET ADDRESS (NO PO. BOX)	DO TO TO THE TO	STATE ZIP GODE AREA CODE/PHONE	STREET ADDRESS (NO P.O. BOX)	CONTROLLED COMMITTEE?	I.D. NUMBER	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.	Related Committees Not Included in this Statement: List any committees	RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP	OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)	OR CANDIDATE	Officeholder or Candidate Controlled Committee	
Attach continuat	NAME OF OFFICEHOLDER OR CANDIDATE	NAME OF OFFICEHOLDER OR CANDIDATE	NAME OF OFFICEHOLDER OR CANDIDATE	NAME OF OFFICEHOLDER GR CANDIDATE	7. Primarily Formed Committee List which this committee is primarily formed.	· · · · · · · · · · · · · · · · · · ·	OFFICE SOUGHT OR HELD	NAME OF OFFICEHOLDER, GANDIDATE, OR PROPONENT	Identify the controlling officeholder, ca	BALLOT NO. OR LETTER. JURISDICTION	NAME OF BALLOT ME. SURE	6. Ballot Measure Committee	
Attach continuation sheets if necessary	OFFICE SOUGHT OR HELD SUPPORT	OFFICE SOUGHT OR HELD SUPPORT	OFFICE SOUGHT OR HELD  SUPPORT  OPPOSE	OFFICE SOUGHT OR HELD  SUPPORT  OFFOSE	Primarily Formed Committee List names of officeholder(s) or candidate(s) for which this committee to primarily formed.		DISTRICT NO. IF ANY	ROPONENT	Identify the controlling officeholder, candidate, or state measure proponent, if any	ON SUPPORT OPPOSE			Page 2 of 5

## Summary Page Campaign Disclosure Statement

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

Statement covers period

CALIFORNIA SUMMARY PAGE

to wildle dollars	ars.	07/01/2004 FORM <b>40</b> U
SEE INSTRUCTIONS ON REVERSE	12hrough	h 12/31/2004 Page 3 of 5
NAME OF FILER  Committee To Continue The Progress Of El Segundo		1.D. NUMBER 1262139
Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column S CALENDAR YOUR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and
1. Monetary Contributions Schedule A, Line 3 \$0	\$ 41,	
2. Loans Received Schedule B, Line 7 0	0.00	1/1 through 6/30 7/1 to Date
SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$	\$ 4	20. Contributions \$ 0.00 \$ 0.00
4. Nonmonetary Contributions	0.00 46.045.00	21. Expenditures \$ 0.00 \$ 0.00
6. Payments Made	.32 \$ 41,374.17	Expenditure Limit Summary for State Candidates
	0.00	
8. SUBTOTAL CASH PAYMENTS	\$ 41	22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	0.00	Date of Election Total to Date
10. Nonmonetary Adjustment0	0.00 4,890.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$ 46,	\$
Current Cash Statement		\$
2. Beginning Cash Balance	.32 To calculate Column B, add	
13. Cash Receipts		*
Miscellaneous increases to Cash Schedule I, Line 4		\$
Cash Payments Column A, Line 8 above	Columi	A
4, then subtract Line 15 \$	0.00 figures that should be subtracted from previous	
If this is a termination statement, Line 16 must be zero.	period amounts.	\$
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$0	0.00 for this calendar lear, only carry over the arketints	*Since January 1, 2001. Amounts in this section may be
sh Equivalents and Outstanding Debts		different from amounts reported in Column B.
io. Casti Equivalents See instructions on reverse \$		

19. Outstanding Debts ...

Add Line 2 + Line 9 in Column B above

0.00

e d NI,

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

#### Supporting/Opp Candidates, Mea Summary of Ex Schedule D

	S. 7. 1		
1262139			Committee To Continue The Progress Of El Segundo
I.D. NUMBER	The second secon		NAME OF FICEX
Page 4 of 5	through <u>12/31/2004</u>		SEE INSTRUCTIONS ON REVERSE
	from 07/01/2004	to whole dollars.	Candidates, Measures and Committees
CALIFORNIA ACO	Statement covers period	Amounts may be rounded	Supporting/Opposing Other
SCHEDULE D	4.00	Type or print in ink	Summary of Expenditures

												11/29/2004			DATE
	Support Oppose				Support Oppose					X Support ☐ Oppose				El Segundo Firefighters PAC - State	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE
	Expenditure	Independent	Nonmonetary	Monetary Contribution	Expenditure	Independent	Contribution	Contribution	Monetary	Expenditure	☐ Independent	Contribution	Collaborion	Monetary	TYPE OF PAYMENT
SUBTOTA					\$ 22k			10-			150	<b>*</b>			DESCRIPTION (IF REQUIRED)
suвтотA \$ 1,000.00			4.7								A care	1,000.00			AMOUNT THIS PERIOD
												1,000.00		=	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)
															PER ELECTION TO DATE (IF REQUIRED)

# Schedule D Summary

- 1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subjects)......\$ 1,000.00
- 2. Uniternized contributions and independent expenditures made this period of under \$100 ...

1,000.00

0.00

#### Payments Made Schedule E

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

FOF	07/01/2004	from	
CALIFO	Statement covers period	St	

through 12/31/2004 Page 5 1262139 I.D. NUMBER و 5

SEE INSTRUCTIONS ON REVERSE

Committee To Continue The Progress Of El Segundo

1,679.32	\$ SUBTOTAL	rized on Schedule D.	* Payments that are contributions or independent expenditures must also be summarized on Schedule D.
		A disease	
1,000.00		CTB	El Segundo Firefighters PAC - State PO Box 55 El Segundo CA 90245 ID: 1231824
679.32		PRO	Durkee & Associates 601 S. Glenoaks Blvd., # 211 Burbank CA 91502
AMOUNT PAID	OÉSÉRIPTION OF PAYMENT	CODE OR DÉS	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)
ıe candidate/sponsor .mail)	RAD radio airtime and production costs  RFD returned contributions  SAL campaign workers' salaries  TEL t.v. or cable airtime and production costs  Candidate travel, lodging, and meals  TRS staff/spouse travel, lodging, and meals  TSF transfer between committees of the same candidate/sponsor  VOT voter registration  WEB information technology costs (internet, e-mail)	is control of the con	CODES: If one of the following codes accurately describes the payment, you may either the code.  CMP campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  ND fundraising events  ND independent expenditure supporting/opposing others (explain)*  PCS postage, delivery and messenger service professional services (legal, accounting)  PRT print ads  MBR member communications  MTG meetings and appearances  OFC office expenses  PET petition circulating  PHO phone banks  POL polling and survey research  POS postage, delivery and messenger service  PRO professional services (legal, accounting)  PRT print ads

# Schedule E Summary

- 1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) .....
- 2. Unitermized payments made this period of under \$100 ......
- 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 \$

↔ 4

1,679.32

1,679.32

0.00 0.00

#### SEE INSTRUCTIONS ON REVERSE (Government Code Sections 84200-84216.5) Cover Page Campaign Statement Recipient Committee Committee Information OPTIONAL: FAX / E-MAIL ADDRESS MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX STREET ADDRESS (NO P.O. BOX) COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Officeholder, Candidate Controlled Committee Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. 601 S Glenoaks BI #211 Burbank Committee To Continue The Progress Of El Segundo O State C O Sponsored (Also Complete Part 5) Small Contributor Committee Political Party/Central Committee State Candidate Election Committee STATE SA STATE 91502 ZIP CODE ZIP CODE I.D. NUMBER Primarily Formed Candidate/ Officeholder Committee O Controlled O Sponsored Ballot Measure Committee (Also Complete Part 7) (Also Complete Part 6) O Primarily Formed through from Statement covers period (818) 260-0669 1262139 AREA CODE/PHONE AREA CODE/PHONE 06/30/2004 04/17/2004 Type or print in ink. Date of election if applicable: (Month, Day, Year) 'n CITY OPTIONAL: FAX / E-MAIL ADDRESS MAILING ADDRESS NAME OF ASSISTANT TREASURER, IF ANY MAILING ADDRESS NAME OF TREASURER Treasurer(s) Burbank 601 S Glenoaks BI #211 Kinde Durkee Type of Statement: X Semi-annual Statement Preelection Statement Amendment (Explain below) Termination Statement 201 111 76 STATE SA STATE 91502 ZIP CODE ZIP CODE Supplemental Preelection Statement - Attach Form 495 Special Odd-Year Report Quarterly Statement Pag 1 CALIFORNIA 2001/02 FORM For Official Use Only (818) 260-0669 AREA CODE/PHONE AREA CODE/PHONE 약 COVER PAGE

#### Verification

certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct. 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

FPPC Form 460 (Ju	Signature of Controlling Officerolder, Candidate, State Measure Proponent	Date	
	D S	Executed on	m.
	Signature of Controlling Officeholder, Candidate, State Measure Proponent		
	By	Executed on	171
	Signature of Controlling Officeholder, Carddate, State Measure Proponent or Responsible Officer of Sponsor	Cate	
	Ву	Executed on	
	Signaptife of Treasurer or Assistant Treasurer	Sala	
	By Kinde Durkee	Executed on 07/15/2004	

COVER PAGE - PART 2
CALIFORNIA 460
FORM:

Page 2 of 7

CITY STATE ZIP CODE AREA CODE/PHONE Attach continuation sheets if necessary	NAME OF TREASURER  CONTROLLED COMMITTEE?  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  COMMITTEE ADDRESS  STREET ADDRESS (NO P.O. BOX)		COMMITTEE NAME    COMMITTEE NAME   COMMI	MITTEE ADDRESS STREET ADDRESS (NO PO. BOX)	List na	COMMITTEE NAME 1.D. NUMBER	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.	NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT	RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP Identify the controlling officeholder, candidate, or state measure proponent, if any.	OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)  BALLOT NO. OR LETTER JURISDICTION	NAME OF OFFICEHOLDER OR CANDIDATE  NAME OF OFFICEHOLDER OR CANDIDATE  NAME OF DEFICE HOLDER OR CANDIDATE  NAME OF DEFICE HOLDER OR CANDIDATE	Officeholder or Candidate Controlled Committee
:cessary	HT OR HELD SUPPORT OPPOSE	HT OR HELD SUPPORT OPPOSE	HT OR HELD SUPPORT OPPOSE	HT OR HELD SUPPORT OPPOSE	holder(s) or candidate(s) for		DISTRICT NO. IF ANY		ite measure proponent, if any	SUPPORT		

#### Summary Page Campaign Disclosure Statement

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

Summary Page	to whole dollars.	fro	Statement covers period 04/17/2004	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE		thr	through 06/30/2004	Page _3 of _7
NAME OF FILER  Committee To Continue The Progress Of El Segundo				I.D. NUMBER 1262139
Contributions Received	COLUMN A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTALT ODATE	Calendar Year Summary for Candidate Running in Both the State Primary and	Calendar Year Summary for Candidates Running in Both the State Primary and
1. Monetary Contributions Schedule A, Line 3 2. Loans Received Schedule B, Line 7	\$ 1,700.00 0.00	\$ 41,125.00 0.00		<b>ns</b> 1/1 through 6/30 7/1 to Date
SUBTOTAL CASH CONTRIBUTIONS	\$ 1,700.00 0.00 \$ 1,700.00	\$ 41,125.00 4,890.00 \$ 46,015.00	20. Contributions \$0.00  Received \$0.00  21. Expenditures \$0.00	₩ ₩ ₩ ₩
Expenditures Made  6. Payments Made	\$ 5,954.00 0.00	\$ 39,634.85 0.00	Expenditure Limit Summary for State Candidates	ummary for State
PAYMENTSs (Unpaid Bills)stment	\$ 5,954.00 0.00 0.00 \$ 5,954.00	\$ 39,634.85 0.00 4,890.00 \$ 44,524.85	Date (n	22. Cumulative Expenditures Made* (if Subject to Voluntary Expenditure Limit) of Election Total to Date nm/dd/yy) \$
Current Cash Statement  12. Beginning Cash Balance	\$ 5,744.15 1,700.00 189.17 5,954.00 \$ 1,679.32	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	the	G G G G
7. LOAN GUARANTEES RECEIVED Schedule B, Part 2  Cash Equivalents and Outstanding Debts	\$ 0.00	the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if		Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.
Sagn Eduivalents and Ontstanding Debts		any)		

19. Outstanding Debts .....

Add Line 2 + Line 9 in Column B above See instructions on reverse

49

0.00 0.00

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

any).

18. Cash Equivalents .....

## Schedule A **Monetary Contributions Received**

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

Statement covers period

SCHEDULE A

Wicherally	Alonemy Collumbanolis Vecelven	₽	to whole dollars.	from04/17/2004		FORM 460
SEE INSTRUCTIONS ON REVERSE	NS ON REVERSE			through 06/30/2004		Page_4of7
Committee	AME OF FILER  Committee To Continue The Progress Of El Segundo				<del>5</del> =	1.D. NUMBER 1262139
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD, NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELFEMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	TO DATE (IF REQUIRED)
05/25/2004	Committee To Re-Elect Sandra Jacobs PO Box 386 El Segundo CA 90245 ID: 1261810	SSC PY		1,200.00	1,200.00	0
06/16/2004	Mimi Huynh  1313 Grand Av #A  El Segundo  CA 90245	SS FIPOLOM MOD MOD MOD MOD MOD MOD MOD MOD MOD M	Secretary Remax Realty	500.00	500.00	0
		SS PY H SM				
		S P P S S S S S S S S S S S S S S S S S				
			\$UBTOTAL\$	1,700.00		

# Schedule A Summary

- 2. Amount received this period unitemized contributions of less than \$100 ..... 1. Amount received this period – contributions of \$100 or more. (Include all Schedule A subtotals.).....
- 3. Total monetary contributions received this period.

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ......TOTAL \$ 1,700.00

\$

....<del>.</del>

1,700.00

0.00

IND -- Individual
COM -- Recipient Committee
(other than PTY or SCC)
OTH -- Other PTY - Political Party
SCC - Small Contributor Committee \*Contributor Codes

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

#### Payments Made Schedule E

SEE INSTRUCTIONS ON REVERSE

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

from

through 06/30/2004 Statement covers period 04/17/2004 Page 5 CALIFORNIA LD. NUMBER FORM

SCHEDULE

o, **460** 

1262139

Committee To Continue The Progress Of El Segundo

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

civic donations contribution (explain nonmonetary) candidate filing/ballot fees campaign consultants campaign paraphernalia/misc. MBR member communications office expenses meetings and appearances petition circulating 

independent expenditure supporting/opposing others (explain)\* 공용무용적용하 professional services (legal, accounting) postage, delivery and messenger services polling and survey research phone banks

print ads

큰胆물

legal defense

fundraising events

campaign literature and mailings

CIR CK S S S

> returned contributions radio airtime and production costs

candidate travel, lodging, and meals t.v. or cable airtime and production costs campaign workers' salaries

transfer between committees of the same candidate/sponsor staff/spouse travel, lodging, and meals

information technology costs (internet, e-mail) voter registration

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Durkee & Associates			
601 S Glenoaks BI #211	PRO		3 100 00
Burbank CA 91502			4,100.00
TTA			
4374 Alder Dr	5		
San Diego CA 92116			3,164.00
Scott Kampmeyer			
20342 SW Cypress St	드		
Newport Beach CA 92660			500.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	rized on Schedule D.	SUBTOTAL \$	764 00

# Schedule E Summary

- 1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)
- 'n Unitemized payments made this period of under \$100 ......
- ယ Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ......(e).
- Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)

FPPC Toll-Free Helpline: 866/ASK-FPPC

TOTAL \$

5,954.00

0.00 0.00

60

5,954.00

5,764.00

# Schedule E (Continuation Sheet) Payments Made

Committee To Continue The Progress Of El Segundo

NAME OF FILER

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

SCHEDULE E (CONT.)

rounded rounde

		NetWork Finesse, Inc  6242 Westchester Pky #240 Los Angeles CA 90045  OFC	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)  CODE OR DESCRIPTION OF PAYMENT  AM	CMP campaign parapherralia/misc.  CMS campaign consultants  CTB contribution (explain nonmonetary)*  CYC civic donations  FL candidate filing/ballot fees  FND independent expenditure supporting/opposing others (explain)*  LEG legal defense  LEG legal defense  LTT campaign interature and mailings  MBR member communications  MBR member communications  MBR member communications  MRR member communications  MRR member communications  MRR member communications  ARD radio airtime and production costs  RFD returned contributions  SAL campaign workers' salaries  TEL t.v. or cable airtime and production costs  TEL t.v. or cable airtime and production costs
2		190.00	AMOUNT PAID	, n costs neals he same candidate/sponsor

## Schedule I Miscellaneous Increases to Cash

NAME OF FILER Committee To Continue The Progress Of El Segundo 04/30/2004 DATE RECEIVED Attach additional information on appropriately labeled continuation sheets. El Segundo El Segundo Main Post Office **US** Postmaster FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) 90245 Type or print in ink.
Amounts may be rounded to whole dollars. Refund DESCRIPTION OF RECEIPT from\_ through 06/30/2004 Statement covers period 04/17/2004 SUBTOTAL \$ Page 7 CALIFORNIA 460 1262139 I.D. NUMBER AMOUNT OF INCREASE TO CASH 약 SCHEDULE 189.12 189.12

## Schedule I Summary

1	ω	N	_
Summary Page, Line 14.) TOTAL \$	3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)\$\$	2. Uniternized increases to cash under \$100 this period\$	1. Increases to cash of \$100 or more this period.
189.17	0.00	0.05	189.12

# ត្តិពួក្ខ្រា

Recipient Committee Campaign Statement Cover Page	Type or print in ink.	n k	COVER PAGE CALIFORNIA 460 CITY CLERK'S OFFI 2001/02 FORM
(Constitution Constitution Classes)	Statement covers period from04/17/2004	Date of election if applicable: (Month, Day, Year)	Page 1 of 7
SEE INSTRUCTIONS ON REVERSE	through 06/30/2004		
1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.  Officeholder, Candidate Controlled Committee State Candidate Election Committee Officeholder, Candidate Committee	omplete Parts 1, 2, 3, and 4. Ballot Measure Committee O Primarily Formed O Controlled O Sponsored (Also Complete Part 6)	2. Type of Statement:  Preelection Statement  Semi-annual Statement  Termination Statement  Amendment (Explain below)	☐ Quarterly Statement☐ Special Odd-Year Report☐ Supplemental Preelection☐ Statement - Attach Form 495
Serielal rulpose Committee     Sponsored     Small Contributor Committee     Political Party/Central Committee	Primarily Formed Candidate/ Officeholder Committee (Also Complete Parl 7)		
3. Committee Information	1.D. NUMBER 1262139	Treasurer(s)	
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  Committee To Continue The Progress Of El Segundo	=I Sequindo	NAME OF TREASURER Kinde Durkee	
c		MAILING ADDRESS 601 S Glenoaks BI #211	211
STREET ADDRESS (NO P.O. BOX) 601 S Glenoaks BI #211		GITY Burbank	STATE ZIP CODE AREA CODE/PHONE CA 91502 (818) 260-0669
Burbank CA 91502	ODE AREA CODE/PHONE 02 (818) 260-0669	NAME OF ASSISTANT TREASURER, IF ANY	ER, IF ANY
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX		MAILING ADDRESS	
CITY STATE ZIP CODE	ODE AREA CODE/PHONE	CITY	STATE ZIP CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRESS	<u> </u>

#### 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.

FPPC Toll-Free Helpline: 866/ASK-FPPC	BySignature of Controlling Officeholder, Candidate, State Measure Proponent FPPC Toll-FI	Date	Executed on
	BySignature of Controlling Officeholder, Candidate, State Measure Proponent	Date	Executed on
	BySignature of Controlling Office noiser, Candidate, State Measure Proponent or Responsible Officer of Sponsor	Date	Executed on
	Signature of Treasurer or Assistantureasurer	Date	
	By Kinde Durkee / Walls / Mun	07/15/2004	Executed on

CALIFORNIA 460 FORM 7
of 7

5. Officeholder or Candid	Officeholder or Candidate Controlled Committee	6. Ballot Measure Committee	ittee		
NAME OF OFFICEHOLDER OR CANDIDATE	CANDIDATE	NAME OF BALLOT MEASURE			
OFFICE SOUGHT OR HELD (INC	OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)	BALLOT NO. OR LETTER	JURISDICTION		SUPPORT
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	ESS (NO. AND STREET) CITY STATE ZIP	identify the controlling of	iceholder, can	identify the controlling officeholder, candidate, or state measure proponent, if any.	oponent, if any.
		NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT	NDIDATE, OR PRO	DPONENT	
Related Committees No not included in this statement contributions or make expend	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.	OFFICE SOUGHT OR HELD		DISTRICT NO. IF ANY	ANY
COMMITTEE NAME	1.D. NUMBER				
NAME OF TREASURER	CONTROLLED COMMITTEE?	7. Primarily Formed Committee Liwhich this committee is primarily formed.	nmittee Listn narily formed.	Committee List names of officeholder(s) or candidate(s) for primarily formed.	ndidate(s) for
COMMITTEE ADDRESS	I	NAME OF OFFICEHOLDER OR CANDIDATE	CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
CITY	STATE ZIP CODE AREA CODE/PHONE	NAME OF OFFICEHOLDER OR CANDIDATE	CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
COMMITTEE NAME	I.D. NUMBER	NAME OF OFFICEHOLDER OR CANDIDATE	CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
NAME OF TREASURER	CONTROLLED COMMITTEE?	NAME OF OFFICEHOLDER OR CANDIDATE	CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
COMMITTEE ADDRESS	STREET ADDRESS (NO PO. BOX)				
CITY	STATE ZIP CODE AREA CODE/PHONE	Att	ich continuatio	Attach continuation sheets if necessary	

#### Summary Page Campaign Disclosure Statement

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

from

Statement covers period

04/17/2004

SUMMARY PAGE

CALIFORNIA

460

FORM

15. Cash Payments 14. Miscellaneous Increases to Cash ...... 13. Cash Receipts ..... 17. LOAN GUARANTEES RECEIVED 16. ENDING CASH BALANCE ......Add Lines 12 + 13 + 14, then subtract Line 15 12. Beginning Cash Balance ..... **Current Cash Statement** 11. TOTAL EXPENDITURES MADE 10. Nonmonetary Adjustment .... Expenditures Made Contributions Received NAME OF FILER SEE INSTRUCTIONS ON REVERSE Committee To Continue The Progress Of El Segundo Accrued Expenses (Unpaid Bills) SUBTOTAL CASH PAYMENTS If this is a termination statement, Line 16 must be zero. Loans Made ... Nonmonetary Contributions Loans Received ..... Payments Made .... SUBTOTAL CASH CONTRIBUTIONS TOTAL CONTRIBUTIONS RECEIVED Monetary Contributions ..... ......Add Lines 3 + 4 Previous Summary Page, Line 16 ..... Column A, Line 8 above Column A, Line 3 above .Add Lines 8 + 9 + 10 .. Schedule F, Line 3 Schedule H, Line 7 Schedule E, Line 4 Schedule A, Line 3 Schedule B, Part 2 Schedule C, Line 3 Schedule I, Line 4 Schedule C, Line 3 Schedule B, Line 7 Add Lines 6 + 7 Add Lines 1+2 49 G 60 69 TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) Column A 5,954.00 5,954.00 5,744.15 G Ç 1,700.00 1,700.00 1,700.00 ,679.32 ,700.00 ,954.00 189.17 954.00 0.00 0.00 0.00 0.00 0.00 0.00 for this calendar year, only subtracted from previous the first report being filed corresponding amounts amounts in Column A to the To calculate Column B, add figures that should be Column A may be negative report. Some amounts in from Column B of your last <del>(1)</del> period amounts. If this is COLUMN B
CALENDAR YEAR
TOTALT ODATE 46,015.00 41,125.00 41,125.00 44,524.85 39,634.85 39,634.85 4,890.00 4,890.00 0.00 0.00 0.00 through \*Since January 1, 2001. Amounts in this section may be Candidates Expenditure Limit Summary for State Expenditures
 Made Running in Both the State Primary and Calendar Year Summary for Candidates 06/30/2004 20. Contributions General Elections Received Date of Election (mm/dd/yy) Cumulative Expenditures Made\* (If Subject to Voluntary Expenditure Limit) 1/1 through 6/30 0.00 0.00 Page\_ 1262139 LD. NUMBER ω 0.00 0.00 Total to Date 7/1 to Date 으

9 œ .7 ტ

19. Outstanding Debts .....

.....

Add Line 2 + Line 9 in Column B above

69

0.00 0.00

> from Lines 2, 7, and 9 (if carry over the amounts

different from amounts reported in Column B

FPPC Toll-Free Helpline: 866/ASK-FPPC

FPPC Form 460 (June/01)

See instructions on reverse

49

18. Cash Equivalents ...

Cash Equivalents and Outstanding Debts

OI 4 ω  $\dot{N}$ <u>.</u>...

## Schedule A **Monetary Contributions Received**

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

from.

CALIFORNIA 460 SCHEDULE A

Statement covers period

04/17/2004

				06/30/2004		
SEE INSTRUCTIONS ON REVERSE	NS ON REVERSE			anough		or _
Committee	To Continue The Progress Of El Segundo					1262139
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-ENPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION R TO DATE 1) (IF REQUIRED)
05/25/2004	Committee To Re-Elect Sandra Jacobs PO Box 386 El Segundo CA 90245 ID: 1261810	SCC PT HOOM		1,200.00	1,200.00	00
06/16/2004	Av #A CA 90245	MERKE SS	Secretary Remax Realty	500.00	500.00	00
		SOC PT				
		MO CHANGE				
		SS POT H			1	
			\$UBTOTAL	1,700.00		
Schedule A Summ  1. Amount received this (Include all Schedule	Schedule A Summary  1. Amount received this period – contributions of \$100 or more.  (Include all Schedule A subtotals.)		€9	1,700.00	*Contributor Co IND – Individual COM – Recipier	*Contributor Codes IND – Individual COM – Recipient Committee (other than PTY or SCC)
2. Amount rec	Amount received this period - unitemized contributions of less than \$100	ın \$100	€9	0.00	OTH - Other	OTH - Other PTY - Political Party
3. Total mone	Total monetary contributions received this period.			70000	SCC-S	SCC - Small Contributor Committee

1,700.00

#### Payments Made Schedule E

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

from\_ Statement covers period 04/17/2004

through 06/30/2004 Page 5 CALIFORNIA .D. NUMBER FORM 으 460 SCHEDULE

1262139

Committee To Continue The Progress Of El Segundo SEE INSTRUCTIONS ON REVERSE

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

contribution (explain nonmonetary)\* campaign consultants <u>শ</u> MBR member communications meetings and appearances RAD

Z Z Z independent expenditure supporting/opposing others (explain)\* fundraising events

CVC S

civic donations

candidate filing/ballot fees

legal defense

campaign literature and mailings

유물교육 petition circulating office expenses postage, delivery and messenger services polling and survey research phone banks

professional services (legal, accounting)

radio airtime and production costs returned contributions

candidate travel, lodging, and meals campaign workers' salaries t.v. or cable airtime and production costs

voter registration transfer between committees of the same candidate/sponsor staff/spouse travel, lodging, and meals

information technology costs (internet, e-mail

Scott Kampmeyer 20342 SW Cypress St San Diego 4374 Alder Dr Burbank 601 S Glenoaks BI #211 Newport Beach TTA Durkee & Associates NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) S S S 91502 92116 Ξ PRO 득 CODE 유 DESCRIPTION OF PAYMENT AMOUNT PAID 3,164.00 2,100.00 500.00

# Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) .....

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

SUBTOTAL \$

5,764.00

67

5,954.00

Unitemized payments made this period of under \$100 ....

Й

- ယ Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)
- Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)

TOTAL \$

5,954.00

0.00 0.00

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

Committee To Continue The Progress Of El Segundo

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

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

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

from\_ Statement covers period

04/17/2004

SCHEDULE E (CONT.)

through 06/30/2004

CALIFORNIA 460

Page 6 LD. NUMBER of\_ 7

1262139

190.00	\$UBTOTAL \$	*Payments that are contributions or independent expenditures must also be summarized on Schedule D.
-		
190.00		6242 Westchester Pky #240 Los Angeles CA 90045
AMOUNT PAID	OR DESCRIPTION OF PAYMENT	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)  NetWork Finesse. Inc
candidate/sponsor	RAD radio airlime and production costs  RAD radio airlime and production costs  RED returned contributions  SAL campaign workers' salaries  TEL t.v. or cable airlime and production costs  TRC candidate travel, lodging, and meals  senger services TRS staff/spouse travel, lodging, and meals  TRS staff/spouse travel, lodging, and meals  VOT voter registration  WEB information technology costs (internet, e-mail)	CMP campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  FND independent expenditure supporting/opposing others (explain)*  LEG legal defense  LT campaign literature and mailings  MBR member communications  MTG meetings and appearances  OFC office expenses  FT petition circulating PHO phone banks  FOL polling and survey research PRO professional services (legal, accounting)  PRT print ads

# Schedule I Miscellaneou

Type or print in ink.

04/17/2004	Statement covers period	
FORM	CALIFORNIA	

Miscellane	Miscellaneous increases to Cash	Amounts may be rounded	Statement covers period	SCHEDOLE
		to whole dollars.	from 04/17/2004	FORM 460
SEE INSTRUCTIONS ON REVERSE	SON REVERSE		through_06/30/2004	Page 7 of 7
Committee T	Committee To Continue The Progress Of El Segundo	-		1.D. NUMBER 1262139
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DES	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
04/30/2004	US Postmaster El Segundo Main Post Office El Segundo CA 90245	Refund		189.12
Attach additi	Attach additional information on appropriately labeled continuation sheets.		SUBTOTAL \$	\$ 189.12
Schedule I Summary 1. Increases to cash of \$1	Schedule I Summary  1. Increases to cash of \$100 or more this period		\$ 189.12	* _
<ol> <li>Uniternized</li> <li>Total of all i</li> </ol>	Unitemized increases to cash under \$100 this period	е H, Column (e).)	\$ 0.00 \$ 0.00	
4. Total miscel Summary P	4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)	Enter here and on the	TOTAL \$189.17	

Executed on	Executed on	Executed on	Executed on04/15/2004	4. Verification I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the informal certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.	OPTIONAL: FAX / E-MAIL ADDRESS	CITY STATE ZIP CODE	MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX	STATE	STREET ADDRESS (NO P.O. BOX) 601 S Glenoaks BI #211		COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  Committee To Continue The Progress Of El Segundo	3. Committee Information   I.D. NUMBER	Sponsored Office Office Office Office Office Office Office Office Office	andidate Controlled Committee date Election Committee  5 6 Committee	1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.	SEE INSTRUCTIONS ON REVERSE	from	Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)
BySignature of	BySignature of	BySignature of Controlling Office	By Kinde Durkee	his statement and to the best of my knowled lifornia that the foregoing is true and corre	9	AREA CODE/PHONE CITY	(818) Z6U-U659		cin B	į.		1262139	(Also Complete Part 7)		2.	through 04/16/2004	tatement covers period 04/09/2004	Type or print in ink.
Signature of Controlling Officeholder, Candidate, State Measure Proponent	Signature of Controlling Officeholder, Candidate, State Measure Proponent	Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor	Signature of Tryasurer or Assistant Treasurer	ge the information contained herein and in the attact	OPTIONAL: FAX / E-MAIL ADDRESS	STATE	MAILING ADDRESS	NAME OF ASSISTANT TREASURER, IF ANY	urbank CA 9:	MAILING ADDRESS 601 S Glenoaks BI #211	NAME OF TREASURER Kinde Durkee	Treasurer(s)		□ Semi-annual Statement     □ Semi-annual Statement     □ Termination Statement     □ Amendment (Explain below)	Type of Statement:		Date of election if applicable:	CITY OLERIC'S OFFICE
FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC State of California		1801		tion contained herein and in the attached schedules is true and complete.		ZIP CODE AREA CODE/PHONE			2IP CODE AREA CODE/PHONE 91502 (818) 260-0669	*		1		Quarterly Statement Special Odd-Year Report Supplemental Preelection Statement - Attach Form 495			Page 1 of 10  For Official Use Only	CALIFORNIA 460 2001/02 FORM

	Attach continuation sheets if necessary	ch continuation	Attac	ZIP CODE AREA CODE/PHONE	STATE Z	ארוס	
[				о. вох)	STREET ADDRESS (NO P.O. BOX)	COMMITTEE ADDRESS	
SUPPORT OPPOSE	OFFICE SOUGHT OR HELD	CANDIDATE	NAME OF OFFICEHOLDER OR CANDIDATE	YES NO		NAME OF IREASURER	
SUPPORT OPPOSE	OFFICE SOUGHT OR HELD	CANDIDATE	NAME OF OFFICEHOLDER OR CANDIDATE				
SUPPORT OPPOSE	OFFICE SOUGHT OR HELD	LDER OR CANDIDATE	NAME OF OFFICEHOLDER OR C	ZIP CODE AREA CODE/PHONE	SIAIE	COMMITTEE NAME	
SUPPORT OPPOSE	OFFICE SOUGHT OR HELD	CANDIDATE	NAME OF OFFICEHOLDER OR CANDIDATE		(NO	COMMITTEE ADDRESS	
andidate(s) for	ames of officeholder(s) or ca	nmittee List n arily formed.	7. Primarily Formed Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.	CONTROLLED COMMITTEE?		NAME OF TREASURER	
				I.D. NUMBER		COMMITTEE NAME	
FANY	DISTRICT NO. IF ANY		OFFICE SOUGHT OR HELD	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.	Related Committees Not Included in this Statemen not included in this statement that are controlled by you or are pontributions or make expenditures on behalf of your candidacy.	Related Committees not included in this state, contributions or make ex	
	DPONENT	NDIDATE, OR PRO	NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT				
າroponent, if an	didate, or state measure p	ïceholder, can	Identify the controlling officeholder, candidate, or state measure proponent, if any.	CITY STATE ZIP	RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	RESIDENTIAL/BUSINESS AD	
SUPPORT OPPOSE		JURISDICTION	BALLOT NO. OR LETTER	OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)	) (INCLUDE LOCATION AND DIS	OFFICE SOUGHT OR HELD	
			NAME OF BALLOT MEASURE		OR CANDIDATE	NAME OF OFFICEHOLDER OR CANDIDATE	
		ittee	6. Ballot Measure Committee	nmittee	Officeholder or Candidate Controlled Committee		Ċī

# Campaign Disclosure Statement Summary Page

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

from\_

Statement covers period 04/09/2004

SUMMARY PAGE

CALIFORNIA FORM

# Schedule A Monetary Co

Type or print in ink. Amounts may be rounded

SCHEDULE A

UAL, ENTER NO EMPLOYER ID, ENTER NAME NESS)  BOTOTAL \$  SUBTOTAL \$	wonetary	Monetary Contributions Received	to	to whole dollars.	Statement covers period from 04/09/2004	2004	CALIFORNIA 460
Amount received this period - contributions of \$100 or more.   Continued To Continue The Progress Of El Segundo	SEE INSTRUCTION	NS ON REVERSE			1	2004	4 of_
DATE   PULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR RECEIVED   FAN INDIVIDUAL, ENTER COLOUR RECEIVED HIS CALLIN CODE # CONTRIBUTOR CODE # COLOURNION AND ENPROONS   RECEIVED HIS CALLIN CODE # COLOURN	(D	To Continue The Progress Of El Segundo				,	1.D. NUMBER 1262139
Michael Condon   Co	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 C CALENDAR YEA (JAN. 1 - DEC, 3	
37 Misty Acres Rd	04/13/2004	Michael Condon		Real Estate Agent			
Craig Meyer		CA	SSS PI	Colliers Seeley	1,000.00	1,000.	
2421 Via Rivera	04/13/2004	Craig Meyer		Real Estate			
Pacific Storage Partners LLC		states CA		Collers Seeley	1,000.00	1,000.	00
## Psomas A Corporation  ## Psomas A Corporation  ## 11444 W Olympic BI #750 West Los Angeles CA 90025  ## Bret Quinlan  ## 1,000.00  ## Provided A Summary  ## Provided all Schedule A subtotals.)	04/13/2004	Pacific Storage Partners LLC  17541 Seventeenth St  Tustin  CA 92780	SOS PARTICION NO SOS PA		2,000.00	5,000.	00
Bret Quinlan  4/13/2004  Bret Quinlan  Bret Quinlan  1520 Ramillo Av  CA 90815  CA 90815  CA 90815  CA 90815  CA 90815  CUshman & Wakefield  Cushman & Cushman	04/13/2004	ation BI #750 CA	ALA COS MOD ME LA COS		1,000.00	1,000.	00
chedule A Summary  Amount received this period – contributions of \$100 or more.  (Include all Schedule A subtotals.)\$ 6,500.00  Amount received this period – uniternized contributions of less than \$100\$ 0.00  Total monetary contributions received this period.  (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)	04/13/2004	CA	SCC ALACTOR OF SCC	Broker Cushman & Wakefield	250.00	500.0	30
Chedule A Summary  Amount received this period – contributions of \$100 or more.  (Include all Schedule A subtotals.)\$ 6,500.00  Amount received this period – unitemized contributions of less than \$100\$ 0.00  Total monetary contributions received this period.  (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)				\$UBTOTAL	5,250.00		
Amount received this period – unitemized contributions of less than \$100\$ 0.00  Total monetary contributions received this period.  (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)		Summary sived this period – contributions of \$100 or more. Schedule A subtotals.)		€9	6,500.00	*Contrib IND – In COM – F	utor Codes dividual Recipient Committee
Total monetary contributions received this period.  (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)		eived this period – unitemized contributions of less tha	ın \$100	\$	0.00	OTH -C	Ther
CONTRACTOR		ary contributions received this period. 1 and 2. Enter here and on the Summary Page, Colun	nn A, Line 1.)	* TOTAL	6,500.00	SCC - S	imall Contributor Committee

## Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink. Amounts may be rounded

SCHEDULE A (CONT.)

Wonetary	Monetary Contributions Received	amounts may be rounded to whole dollars.	pe rounded dollars.	Statement covers period from 04/09/2004		CALIFORNIA 460
				through 04/16/2004		Page 5 of 10
NAME OF FILER					1.0	I.D. NUMBER
Committee	Committee To Continue The Progress Of El Segundo				12	1262139
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	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)
04/13/2004	Bret Quinlan 1520 Ramillo Av Long Beach CA 90815	SCC COM SCO	Broker Cushman & Wakefield	250.00	500.00	0
04/13/2004	James Sullivan 1051 8th St Hermosa Beach CA 90254	SCC COM DISCONDING	Real Estate James K Sullivan	500.00	500.00	0
04/13/2004	The Krasnove Law Firm APC 3838 Carson St #210 Torrance CA 90503	SCC PTY ON SCC OM		500.00	500.00	0
		M F F C SS				
			\$ SUBTOTAL	1,250.00		

\*Contributor Codes

IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other
PTY – Political Party
SCC – Small Contributor Committee

#### Supporting/Opposing Other **Summary of Expenditures** Schedule D Candidates, Measures and Committees

NAME OF FILER

SEE INSTRUCTIONS ON REVERSE

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

from.	Stat
04/09/20	Statement cover

2 s period

Committee To Continue The Progress Of El Segundo through 04/16/2004 Page 6 1262139 CALIFORNIA I.D. NUMBER 10

	04/15/2004	04/15/2004	DATE
(4.0)	Sandra Jacobs  City Council Member  City of El Segundo District: 00	Bill Fisher  City Council Member  City of El Segundo  Support  Oppose  Eric Busch  City Council Member  City of El Segundo  District: 00	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION OR COMMITTEE
	Contribution Contribution Xt: 00	Contribution  Xt: 01    Monetary	OR TYPE OF PAYMENT
SUBTOTAL	Mailers	Mailers Mailers	DESCRIPTION (IF REQUIRED)
SUBTOTAL \$ 4,404.00	1,468.00	1,468.01	AMOUNT THIS PERIOD
	9,867.56	9,867.62	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)
			PER ELECTION TO DATE (IF REQUIRED)

# **Schedule D Summary**

- 2. Unitemized contributions and independent expenditures made this period of under \$100 ......\$100 ...... 1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)......\$ 5,619.00 5,619.00 0.00

# Schedule D (Continuation Sheet) Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committ

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

Statement covers period CALIFORNIA

Committee To Continue The Progress Of El Segundo NAME OF FILER 04/15/2004 Candidates, Measures and Committees 04/15/2004 04/15/2004 DATE City Council Member City Council Member City Council Member City of El Segundo City of El Segundo Sandra Jacobs City of El Segundo Eric Busch Bill Fisher NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, Support
 X Support X Support Support OR COMMITTEE Oppose ☐ Oppose Oppose ☐ Oppose District: 00 District: 00 District: 01  $\boxtimes$  $\boxtimes$  $\boxtimes$ TYPE OF PAYMENT Nonmonetary Expenditure Independent Contribution Nonmonetary Monetary Independent Contribution Contribution Monetary independent Nonmonetary Monetary Independent Nonmonetary Contribution Expenditure Expenditure Contribution Expenditure Contribution Monetary Contribution Contribution Mailer Mailer Mailer DESCRIPTION (IF REQUIRED) SUBTOTAL \$ 1,215.00 from\_ through 04/16/2004 405.00 405.00 405.00 AMOUNT THIS PERIOD 04/09/2004 CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) 9,867.56 9,867.51 9,867.62 1262139 Page 7 I.D. NUMBER FORM PER ELECTION
TO DATE (IF REQUIRED) of. 10

#### Payments Made Schedule E

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

from . Statement covers period 04/09/2004

through 04/16/2004

1262139 .D. NUMBER

Page 8 CALIFORNIA 6

앜

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CODES:

Committee To Continue The Progress Of El Segundo

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

₽₽ SH SH CVC ₹ San Diego 4374 Alder Dr San Diego 4374 Alder Dr San Diego 4374 Alder Dr ΠA I I Ā civic donations campaign consultants campaign paraphernalia/misc independent expenditure supporting/opposing others (explain)\* candidate filing/ballot fees contribution (explain nonmonetary)\* campaign literature and mailings legal defense fundraising events NAME AND ADDRESS OF PAYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CA S 92116 92116 유 MTG member communications office expenses postage, delivery and messenger services meetings and appearances professional services (legal, accounting) polling and survey research phone banks petition circulating 드 드 Ξ CODE 윘 Mailers Mailers Mailers DESCRIPTION OF PAYMENT SAH PH 정정교 information technology costs (internet, e-mail) voter registration transfer between committees of the same candidate/sponsor staff/spouse travel, lodging, and meals candidate travel, lodging, and meals t.v. or cable airtime and production costs campaign workers' salaries returned contributions radio airtime and production costs AMOUNT PAID 1,467.99 1,468.01 1,468.00

# Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) .....

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

SUBTOTAL \$

4,404.00

69 60

0.00 0.00

,219.00

- 2. Unitemized payments made this period of under \$100 .....
- Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ......(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
- FPPC Toll-Free Helpline: 866/ASK-FPPC FPPC Form 460 (June/01)

6,219.00

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

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

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

SCHEDULE E (CONT.)

Committee To Continue The Progress Of El Segundo from\_ through 04/16/2004 Statement covers period 04/09/2004 CALIFORNIA FORM Page 9 1262139 I.D. NUMBER of 10

CODES: If one of the following codes accurately describes the paymen CMP campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  FND fundraising events  ND independent expenditure supporting/opposing others (explain)*  LEG legal defense  LIT campaign literature and mailings  ND contribution (explain nonmonetary)*  PET petition to profit p	payment, you may enter the code member communications meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger service professional services (legal, accounting) print ads	enter the code. Otherwise, RAD RED SAL TEL TRC TRS arch TRS essenger services TSF gal, accounting) WEB	describe the payment.  radio airtime and production costs  returned contributions  campaign workers' salaries  t.v. or cable airtime and production costs  candidate travel, lodging, and meals  staff/spouse travel, lodging, and meals  transfer between committees of the same candidate/sponsor  voter registration  information technology costs (internet, e-mail)	: candidate/sponsor าลil)
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT		AMOUNT PAID
TTA		Mailer		
4374 Alder Dr	H			405.00
TTA	i	Mailer		
4374 Alder Dr San Diego CA 92116	 LT			405.00
TTA		Mailer		
4374 Alder Dr San Diego CA 92116	LIT			405.00
Jennifer Jacobs				
123 E Oak Av #107 El Segundo CA 90245	디			600.00
	Į:			
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	ed on Schedule D		SUBTOTAL \$	1 815 00

## Accrued Expenses (Unpaid Bills) Schedule F

Committee To Continue The Progress Of El Segundo

SEE INSTRUCTIONS ON REVERSE

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

from\_ Statement covers period 04/09/2004

CALIFORNIA FORM 9

through. 04/16/2004 Page \_

I.D. NUMBER 10 으 10

1262139

3. Net change this period. (Subtract Line 2 from Line 1. 'n \* Payments that are contributions or independent expenditures must also be summarized on Schedule D. 1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for Schedule F Summary San Diego T<sub>A</sub> B SS SS Q ₹ 4374 Alder Dr  $\overline{\mathbb{S}}$ CODES: Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) ...... contribution (explain nonmonetary) campaign paraphernalia/misc. fundraising events civic donations campaign literature and mailings legal defense independent expenditure supporting/opposing others (explain)\* candidate filing/ballot fees campaign consultants If one of the following codes accurately describes the NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) SA 92116 Enter the difference here and 문 몽 ဥ MTG MBR CODE OR DESCRIPTION OF PAYMENT payment, you may enter the code. Otherwise, describe the payment. office expenses meetings and appearances member communications print ads professional services (legal, accounting) postage, delivery and messenger services polling and survey research phone banks petition circulating SUBTOTALS G (a)
OUTSTANDING
BALANCEBEGINNING
OF THIS PERIOD 4,404.00 ,404.00 43 (b) AMOUNT INCURRED THIS PERIOD SAL ₩O1 꿈 돢 荔 정 RAD 둳 information technology costs (internet, e-mail) transfer between committees of the same candidate/sponsor t.v. or cable airtime and production costs voter registration staff/spouse travel, lodging, and meals candidate travel, lodging, and meals campaign workers' salaries returned contributions radio airtime and production costs ..... 0.00 0.00 49 PAID TOTALS THIS PERIOD (ALSO REPORT ON E) AMOUNT PAID 4,404.00 4,404.00 ₩ OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD -4,404.00 4,404.00 <u>a</u> 0.00 0.00 0.00

FPPC Toll-Free Helpline: 866/ASK-FPPC FPPC Form 460 (June/01)

#### ယ (Government Code Sections 84200-84216.5) Campaign Statement 1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. Cover Page Recipient Committee SEE INSTRUCTIONS ON REVERSE Verification Ø 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. Committee Information STREET ADDRESS (NO P.O. BOX) OPTIONAL: FAX / E-MAIL ADDRESS COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX 601 S Glenoaks BI #211 Committee To Continue The Progress Of El Segundo Burbank General Purpose Committee O Sponsored O State Co Officeholder, Candidate Controlled Committee 00 (Also Complete Part 5) Small Contributor Committee Political Party/Central Committee Executed on Executed on Executed on State Candidate Election Committee Executed on 04/15/2004 Date Date Date STATE STATE CA 91502 ZIP CODE ZIP CODE I.D. NUMBER O Controlled O Sponsored Primarily Formed Candidate/ Ballot Measure Committee O Primarily Formed Officeholder Committee (Also Complete Part 6) from through Statement covers period (818) 260-0669 1262139 AREA CODE/PHONE AREA CODE/PHONE 04/09/2004 03/27/2004 Ву Type or print in ink. Kinde Durkee Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor Signature of Controlling Officeholder, Candidate, State Measure Proponent Signature of Controlling Officeholder, Candidate, State Measure Proponent Date of election if applicable: (Month, Day, Year) Ņ 임기 OPTIONAL: FAX / E-MAIL ADDRESS Treasurer(s) MAILING ADDRESS NAME OF ASSISTANT TREASURER, IF ANY MAILING ADDRESS NAME OF TREASURER Type of Statement: Burbank 601 S Glenoaks BI #211 Kinde Durkee Amendment (Explain below) Preelection Statement To show changes in accrued expenditures (See Schedules D & F) Signature of Treasurer or Assistant Treasure Termination Statement Semi-annual Statement 福 1:17 Date Stamp STATE STATE CA 91502 ZIP CODE ZIP CODE Special Odd-Year Report Quarterly Statement Supplemental Preelection Statement - Attach Form 495 Page \_\_ CALIFORNIA 2001/02 FORM For Official Use Only (818) 260-0669 AREA CODE/PHONE AREA CODE/PHONE 야 | 460 COVER PAGE 강

age 2	CALIFORNIA FORM	COVE
of 12	<b>460</b>	COVER PAGE - PART 2

									Ċī
		COMMITTEE NAME	MITTEE ADDRESS	NAME OF TREASURER	COMMITTEE NAME	Related Committees No not included in this statemen contributions or make expend	RESIDENTIAL/BUSINESS ADDRE	OFFICE SOUGHT OR HELD (INC	Officeholder or Candidate Con
STREET ADDRESS (NO P.O. BOX)	TO MORELLA			CONTROLLED COMMITTEE?	I.D. NUMBER	ot Included in this Statement: List any committees that are controlled by you or are primarily formed to receivitures on behalf of your candidacy.	SS (NO. AND STREET) CITY STATE ZIP	SLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)	Officeholder or Candidate Controlled Committee  NAME OF OFFICEHOLDER OR CANDIDATE
NAME OF OFFICEHOLDER OR CANDIDATE OF	NAME OF OFFICEHOLDER OR CANDIDATE OF	NAME OF OFFICEHOLDER OR CANDIDATE	NAME OF OFFICEHOLDER OR CANDIDATE	7. Primarily Formed Committee List nam which this committee is primarily formed.		OFFICE SOUGHT OR HELD	Identify the controlling officeholder, candid	BALLOT NO. OR LETTER JURISDICTION	6. Ballot Measure Committee  NAME OF BALLOT MEASURE
				es of officeholder(s) or candidate(s) fo		DISTRICT NO. IF ANY	late, or state measure proponent, i	SUPPORT OPPOSE	
	STREET ADDRESS (NO P.O. BOX)	NAME OF OFFICEHOLDER OR CANDIDATE  CONTROLLED COMMITTEE?  NAME OF OFFICEHOLDER OR CANDIDATE  CONTROLLED COMMITTEE?  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  OFFICE SOUGHT OR HELD  OFFICE SOUGHT OR HELD	MITTEE NAME  OFFICE SOUGHT OR HELD  I.D. NUMBER  I.D. NUMBER  NAME OF OFFICEHOLDER OR CANDIDATE  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  OFFIC	STREET ADDRESS (NO PO. BOX)  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  OFFICE SOUGHT OR HELD	CONTROLLED COMMITTEE?  MITTEE ADDRESS  STREET ADDRESS (NO PO. BOX)  MITTEE ADDRESS  STREET ADDRESS (NO PO. BOX)  AREA CODE/PHONE  STATE  STATE	MITTEE NAME  OF TREASURER  ONTROLLED COMMITTEE?  MITTEE ADDRESS  STREET ADDRESS (NO PO. BOX)  MITTEE NAME  OF TREASURER  ONTROLLED COMMITTEE?  AREA CODE/PHONE  STATE  AREA CODE/PHONE  NAME OF OFFICEHOLDER OR CANDIDATE  NAME OF OFFICEHOLDER OR CANDIDATE  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  MAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  OFF	TITITEE NAME  STREET ADDRESS  OFFICE SOUGHT OR HELD  ONTROLLED COMMITTEE?  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  OFFICE SOUGHT OR HELD	DENTIALBUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP  Identify the controlling officeholder, candidate, or state measure propor  NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT  Tated Committees Not Included in this Statement: List any committees not have controlled by you or are primarily formed to receive included in this statement that are controlled by you or are primarily formed to receive included in this statement. List any committees of officeholder, candidate, or state measure propor name of office sought or help included in this statement. List any committees sought or help included in this statement included in this statement. List any comm	DENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP  ated Committees Not Included in this Statement: List any committees included in this statement that are controlled by you or are primarily formed to receive ributions or make expenditures on behalf of your candidacy.  The coft treasurer Controlled by you or are primarily formed to receive ributions or make expenditures on behalf of your candidacy.  CONTROLLED COMMITTEE?  STATE ZIP CODE AREA CODE/PHONE  BOFTREASURER STREET ADDRESS (NO PO. BOX)  MITTEE NAME  CONTROLLED COMMITTEE?  CONTROLLED COMMITTEE?  CONTROLLED COMMITTEE?  CONTROLLED COMMITTEE?  ON YES NO PO. BOX)

#### Summary Page **Campaign Disclosure Statement**

Type or print in ink.
Amounts may be rounded

SUMMARY PAGE

FPPC Form 460 (June/01)			\$ 4,404.00	19. Outstanding Debts
reported in Column B.	different from amounts reported in Column B.	from Lines 2, 7, and 9 (if any).	\$0.00	Cash Equivalents and Outstanding Debts 18. Cash Equivalents See instructions on reverse
*Since January 1, 2001. Amounts in this section may be	*Since January 1, 2001	the first report being filed for this calendar year, only carry over the amounts	\$0.00	17. LOAN GUARANTEES RECEIVED Schedule B, Part 2
φ φ 		Column A may be negative figures that should be subtracted from previous period amounts. If this is	\$ 5,463.15	15. Cash Payments
€9 €9 		amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in	0.00	
÷		To calculate Column B, add	\$ 7,739.94	Current Cash Statement  12. Beginning Cash Balance Previous Summary Pege, Line 16
<b>€</b> 9	(mm/qa/yy)	\$ 36,755.85	\$ 12,400.79	10. Nonmonetary Adjustment 3 11. TOTAL EXPENDITURES MADEAdd Lines 8 + 9 + 10
(If Subject to Voluntary Expenditure Limit) of Election Total to Date	(if Subjection	\$ 27,461.85	4,404.00	SUBTOTAL CASH PAYMENTS Add Lines 6 + 7      Accrued Expenses (Unpaid Bills)Schedule F, Line 3
stive Expenditures Made*	22 Cimula			Loans Made Schedule H, Line
Expenditure Limit Summary for State	Expenditure Limi	£ 27,461.85	s 7,276.79	Expenditures Made  6. Payments Made  Schedule E Line 4
0.00 \$ 0.00	Made \$	\$ 37,815.00	\$5,720.00	5. TOTAL CONTRIBUTIONS RECEIVEDAdd Lines 3 + 4
\$ 0.00	69		720.00	
0.00	20. Contributions	32 925 00	5.000.00	2. Loans Received
through 8/30	General Elections	\$ 32,925.00	\$ 5,000.00	1. Monetary Contributions Schedule A, Line 3
Calendar Year Summary for Candidates Running in Both the State Primary and	Calendar Year Su Running in Both	Column B CALENDAR YEAR TOTALT ODATE	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Contributions Received
1262139	=			Committee To Continue The Progress Of El Segundo
I.D. NUMBER				NAME OF FILER
Page 3 of 12	04/09/2004	through		SEE INSTRUCTIONS ON REVERSE
CALIFORNIA 460	Statement covers period 03/27/2004	fro	to whole dollars.	Summary Page

FPPC Toll-Free Helpline: 866/ASK-FPPC

# Schedule D Summary of Expenditures

Type or print in ink.

	03/27/2004	ment covers period
The second secon	FORM 40	CALIFORNIA

Supporting Candidate	Supporting/Opposing Other Candidates, Measures and Committees	ommittees	Amounts may be rounded to whole dollars.	e rounded bllars.	from03/27/2004		CALIFORNIA FORM	<sup>^</sup> 460
SEE INSTRUCTIONS ON REVERSE	NS ON REVERSE				through <u>04/09/2004</u>		Page 6	of 12
Committee T	Committee To Continue The Progress Of El Segundo	ss Of El Segundo			42		1.D. NUMBER 1262139	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	FICE, AND DISTRICT, OR TTER AND JURISDICTION, MITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN, 1 - DEC, 31)		PER ELECTION TO DATE (IF REQUIRED)
	Bill Fisher		Monetary Contribution	Newspaper Ad			à7/	
04/02/2004	City Council Member		Nonmonetary Contribution		233.34	7,994.61		
	X Support	Oppose	Independent Expenditure					
	Eric Busch		☐ Monetary					
		18 18 E	Contribution	Newspaper Ad				
04/02/2004	City Council Member		Nonmonetary Contribution		233 33	7 994 52	-	
	City of El Segundo	District: 00	Independent			1,00		
	X Support	Oppose	Expenditure					
e:	Sandra Jacobs		Monetary Contribution	Newspaper Ad				
04/02/2004	City Council Member		Nonmonetary		233 33	7 994 56		
	City of El Segundo	District: 00	Independent		0000	7,007.00		
	X Support	Oppose	Expenditure					
				SUBTOTAL \$ 700.00	700.00			

### Schedule D Summary

- 2. Unitemized contributions and independent expenditures made this period of under \$100 ......\$100..... 1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.).....\$ 6,130.54 0.00
- 6,130.54

# Schedule D (Continuation Sheet) Summary of Expenditures

Type or print in ink. Amounts may be rounded SCHEDULE D (CONT.)

Supportin	Supporting/Opposing Other		to whole dollars.	ollars.	from 03/27/2004		FORM 460
Candidate	Candidates, Measures and Committees	Committees			through_04/09/2004	4 Page	e 7 of 12
NAME OF FILER  Committee T	NAME OF FILER  Committee To Continue The Progress Of El Segundo	ess Of El Segundo	*			1262 1262	).D. NUMBER 1262139
DATE	NAME OF CANDIDATE, OI MEASURE NUMBER OR LE OR CON	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Bill Fisher		Monetary Contribution	High propensity calling			
04/02/2004	City Council Member		Nonmonetary Contribution		102.18	7,994.61	
	X Support	Oppose	Independent Expenditure				
	Eric Busch		Monetary Contribution	High propensity calling			
04/02/2004	City Council Member		Nonmonetary  Contribution		102.18	7,994.52	
	City of El Segundo	District: 00	Independent				
	X support	Cppose	10 min				
	Sandra Jacobs		Monetary Contribution	High propensity calling			
04/02/2004	City Council Member City of El Segundo	District: 00	Nonmonetary Contribution		102.18	7,994.56	
	X Support	Oppose	Expenditure				
	Bill Fisher		Monetary Contribution				
04/07/2004	City Council Member	District: 01	Nonmonetary Contribution		661.34	7,994.61	
	X Support	Oppose	Expenditure				
				SUBTOTAL :	\$ 967.88		

# Schedule D (Continuation Sheet) Summary of Expenditu Supporting/Opposing C Candidates, Measures

Type or print in ink.

Summary Supporti	Summary of Expenditures Supporting/Opposing Other		Amounts may be rounded to whole dollars.	be rounded ollars.	Statement covers period	NEW COLUMN	CALIFORNIA	RNIA 460
Candidat	Candidates, Measures and Committees	ımittees			through 04/09/2004	04	8	of 12
Committee	NAME OF FILER  Committee To Continue The Progress Of El Segundo	Of El Segundo					1.D. NUMBER 1262139	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	, AND DISTRICT, OR AND JURISDICTION,	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN, 1-DEC. 31)		PER ELECTION TO DATE (IF REQUIRED)
	Eric Busch		Monetary Contribution					
04/07/2004	City Council Member City of El Segundo	District: 00	Nonmonetary Contribution		661.33	7,994.52		
	Support      □	Oppose	Expenditure					
	Sandra Jacobs	# E	Monetary Contribution					
04/07/2004	City Council Member City of El Segundo	District: 00	Nonmonetary Contribution		661.33	7,994.56	in the second	
	X Support ☐	Oppose	Expenditure					
	Bill Fisher		Monetary Contribution					
04/07/2004	City Council Member City of El Segundo	District: 01	Nonmonetary Contribution		806.67	7,994.61		
	X Support □	Oppose	Expenditure					
	Eric Busch		Monetary Contribution					
04/07/2004	City Council Member City of El Segundo	District: 00	Nonmonetary Contribution		806.66	7,994.52		
		Oppose	Expenditure					
				SUBTOTAL	\$ 2,935.99		150	

# Schedule D (Continuation Sheet) Summary of Expenditu Supporting/Opposing ( Candidates, Measures

1262139	TT .		Committee To Continue The Progress Of El Segundo	Committee
Page 9 of 12	through <u>04/09/2004</u>		ER	NAME OF FILER
FORM 400	from 03/27/2004		Candidates, Measures and Committees	Candida
CALIFORNIA A CO	Statement covers period	Amounts may be rounded to whole dollars.	Summary of Expenditures	Summar
SCHEDULE D (CONT.)	LAA	Type or print in ink.	(Continuation offeet)	(COLLING)

Contribution Nonmonetary Contribution Nonmonetary Contribution Independent Expenditure  SUBTOTAL	Phone Bank
	240.00
	240.00
	806.67
DESCRIPTION (IF REQUIRED)	TION AMOUNT THIS PERIOD

#### SCHEDULE F

#### Accrued Expenses Schedule F

Type or print in ink.

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Committee To Continue

penses (Unpaid Bills)	Amounts may be rounded to whole dollars.	ed	Statement covers period from 03/27/2004	lui brita	FORM 460
ON REVERSE			through_04/09/2004		Page 12 of 12
Continue The Progress Of El Segundo				1.D. NUMBER 1262139	D. NUMBER 1262139
e of the following codes accurately describes the raphemalia/misc.  MBR nsultants  MTG  Oxylicity propagators (**)*		enter the code. Ot s ces	0 8	, describe the payment. radio airtime and production costs returned contributions	
(explain nonmonetary)* ns ng/ballot fees expenditure supporting/opposing others (explain)*		arch ressenger services		campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the sam	campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor
e rature and mailings		egal, accounting)		voter registration information technology costs (internet, e-mail)	e-mail)
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCEBEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
CA 92116	LIT	0.00	4,404.00	0.00	

independent expenditure s fundraising events candidate filing/ballot fees contribution (explain nonm campaign consultants

legal defense

campaign literature and ma

San Diego 4374 Alder Dr

TTA

civic donations

CMP campaign paraphemalia/m

CODES:

If one of the fol

# Schedule F Summary

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

SUBTOTALS \$

0.00 \$

4,404.00

€

0.00 49

4,404.00

- 1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for
- 2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) ......

..... PAID TOTALS

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and 

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

4,404.00

0.00

4,404.00

# Recip Camp Cove (Govern COVER PAGE

						ယ			-1	SE		ត្តិព្រ
OPTIONAL: FAX / E-MAIL ADDRESS	OITY STATE	Burbank CA 91502  MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX	1 S Glenoaks BI #211	t	COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  Committee To Continue The Progress Of El Segundo	0.5	General Purpose Committee     Sponsored     Small Contributor Committee     Political Party/Central Committee	<ul> <li>Officeholder, Candidate Controlled Committee</li> <li>O State Candidate Election Committee</li> <li>O Recall</li> <li>Also Complete Part 5)</li> </ul>	. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.	SEE INSTRUCTIONS ON REVERSE		Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)
	ZIP CODE	91502 R P.O. BOX	0000		श्री⊤⊞) Of El Seg	I.D. NUMBER	(Also Com) Primarily Officeho (Also Com)	Ballot M O Prim O Con O Spo	es – Complete	through	St.	
	AREA CODE/PHONE	(818) 260-0669	A	-	undo	<sup>3ER</sup> 1262139	(Also Complete Part 6)  Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	Ballot Measure Committee O Primarily Formed O Controlled O Sponsored	Parts 1, 2, 3, and 4.	ugh04/09/2004	Statement covers period 03/27/2004	Type or print in ink
OPTIONAL: FAX / E-MAIL ADDRESS	СПТУ	MAILING ADDRESS	4	601 S Glenoaks BI #211	NAME OF TREASURER Kinde Durkee	Treasurer(s)	Panoranion (Expan bolow)	☑ Preelection Statement     ☐ Semi-annual Statement     ☐ Termination Statement     ☐ Amendment (Explain below)	2. Type of Statement:		Date of election if applicable: 1/11 10: 4/2 (Month, Day, Year)	CHTY OLERKIS OFFI
	STATE		CA								12	Date Stamp
	ZIP CODE		2IP CODE 91502					☐ Quarterly Statement ☐ Special Odd-Year R ☐ Supplemental Preele ☐ Statement - Attach F			Page	ဥ
	AREA CODE/PHONE	0.60	(818) 260-0669					Quarterly Statement Special Odd-Year Report Supplemental Preelection Statement - Attach Form 495			ge 1 of 12 For Official Use Only	CALIFORNIA 460 2001/02 FORM

#### Verification

4 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	Executed on	Executed on	Executed on 04/09/2004
By	BySignature of Controlling Officeholder, Candidate, State Measure Proponent	BySignature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor	By Kinde Durkee Signature of Treasurer of Assistant Treasurer Multiple of Treasurer of Assistant Treasurer of

	Attach continuation sheets if necessary	ı continuation	Attach		DDE AREA CODE/PHONE	STATE ZIP CODE	OITY
SUPPORT	OFFICE SOUGHT OR HELD		NAME OF OFFICEHOLDER OR CANDIDATE	NAME OF (	YES NO	STREET ADDRESS (NO P.O. BOX)	COMMITTEE ADDRESS
SUPPORT OPPOSE	OFFICE SOUGHT OR HELD		NAME OF OFFICEHOLDER OR CANDIDATE	NAME OF	CONTROLLED COMMITTEES		NAME OF TREASURER
SUPPORT OPPOSE	OFFICE SOUGHT OR HELD		NAME OF OFFICEHOLDER OR CANDIDATE	NAME OF	I.D. NUMBER		COMMITTEE NAME
SUPPORT OPPOSE	OFFICE SOUGHT OR HELD		NAME OF OFFICEHOLDER OR CANDIDATE	NAME OF		ĝ o	COMMITTEE ADDRESS
ndidate(s) for	Primarily Formed Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.	nittee List n	Primarily Formed Committee Liswhich this committee is primarily formed.	7. Primari	CONTROLLED COMMITTEE?		NAME OF TREASURER
					I.D. NUMBER		COMMITTEE NAME
: ANY	DISTRICT NO. IF ANY		OFFICE SOUGHT OR HELD	OFFICE S	ement: List any committees rare primarily formed to receive didacy.	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.	Related Committee not included in this state contributions or make e
	OPONENT	DIDATE, OR PRO	NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT	NAME OF			
roponent, if any.	ldentify the controlling officeholder, candidate, or state measure proponent, if any.	eholder, can	the controlling offic	Identify (	TY STATE ZIP	ADDRESS (NO. AND STREET) CITY	RESIDENTIAL/BUSINESS ADDRESS
SUPPORT OPPOSE		JURISDICTION	BALLOT NO. OR LETTER	BALLOT N	T NUMBER IF APPLICABLE)	OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)	OFFICE SOUGHT OR HEL
			NAME OF BALLOT MEASURE	NAME OF		R OR CANDIDATE	NAME OF OFFICEHOLDER OR CANDIDATE
		tee	Ballot Measure Committee	6. Ballot N	ittee	Officeholder or Candidate Controlled Committee	5. Officeholder or Ca

# Campaign Disclosure Statement Summary Page

Type or print in ink.

SUMMARY PAGE

FPPC Form 460 (June/01)	EDDC To		9,000.00	19. Outstartding Debts Add Line 2 + Line 9 in Column B above
			8 00	
oorted in Column B.	different from amounts reported in Column B.	from Lines 2, 7, and 9 (if any).	\$ 0.00	4
*Since January 1, 2001. Amounts in this section may be	*Since January 1, 2001. A	for this calendar year, only carry over the amounts	\$ 0.00	17. LOAN GUARANTEES RECEIVED Schedule B, Part 2
<del>€</del>		subtracted from previous period amounts. If this is		If this is a termination statement, Line 16 must be zero.
69		Column A may be negative figures that should be	\$ 5,463.15	ALANCEAdd Lines 12 + 13 + 1
€9		from Column B of your last report. Some amounts in	7.276.79	14. Miscellaneous Increases to Cash Schedule I, Line 4
<b>⇔</b>		To calculate Column B, add amounts in Column A to the	5,000.00	13. Cash Receipts Column A, Line 3 above
<b>⇔</b>			7 739 94	ent
€ G		\$ 38,355.84	\$14,000.78	11. TOTAL EXPENDITURES MADE
Total to Date	Date of Election (mm/dd/yy)	4,890.00	720.00	10. Nonmonetary AdjustmentSchedule C, Line 3
ZZ. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)	ZZ. Cumulativ (If Subject to	\$ 27,461.85	\$ 7,276.79	
: :			0.00	Loans Made Schedile H, Line
Limit Summary for State	Expenditure Limit S	£ 27,461.85	\$ 7,276.79	Expenditures Made  6. Payments MadeSchedule E. Line 4
0.00	Made \$ 0.00	\$ 37,815.00	\$ 5,720.00	ECEIVED
\$ 0.00	Received \$ 0.00	4,890.00	720.00	4. Nonmonetary Contributions
	20. Contributions	32 925 00	5,000,00	Sc
<b>nS</b> 1/1 through 6/30	General Elections	\$ 32,925.00	\$ 5,000.00	
Calendar Year Summary for Candidates Running in Both the State Primary and	Calendar Year Sum	Column B CALENDAR YEAR TOTALT ODATE	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Contributions Received
1262139				Committee To Continue The Progress Of El Segundo
				NAME OF FILER
Page 3 of 12	04/09/2004	through		SEE INSTRUCTIONS ON REVERSE
FORM 460	Statement covers period 03/27/2004 m	fro	to whole dollars.	Summary Page
SUMMARY PAGE		7	Type or print in ink.  Amounts may be rounded	Campaign Disclosure Statement

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

# Schedule A Monetary Co

Type or print in ink.
Amounts may be round

SCHEDULE A

Monetary	Monetary Contributions Received	0	to whole dollars.	Statement covers period from 03/27/2004	l l	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE	NS ON REVERSE			through 04/09/2004		Page 4 of 12
NAME OF FILER						.D. NUMBER
Committee	Committee To Continue The Progress Of El Segundo					1262139
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	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)
04/02/2004	Robert Healey  2921 Via La Seiva  Palos Vardes Estatos CA 20027/	DDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDD	Real Estate Broker CB Richard Ellis	1,000.00	1,000.00	50
04/02/2004		D D NO S	Owner	3.000.00	3.000.00	ŏ
	240 Center St El Segundo CA 90245	□SCC PHY	Marco Fine Arts Gallery			
04/02/2004	William Peters	M F F S	Real Estate	1 000 00	1 000 00	Ĭ
	11 Johns Cyn Rd Rolling Hills CA 90274	DDI SSP :	CB Richard Ellis	-,000	1,000.	
		SCC SCC				
		SCC SCOM				
			\$ SUBTOTAL	5,000.00		

# Schedule A Summary

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

5,000.00

IND -- Individual
COM -- Recipient Committee
(other than PTY or SCC)
OTH -- Other PTY - Political Party
SCC - Small Contributor Committee \*Contributor Codes

5,000.00

0.00

FPPC Toil-Free Helpline: 866/ASK-FPPC

### Schedule C Nonmonetary Contributions Received

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Committee To Continue The Progress Of El Segundo

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

Statement covers period

SCHEDULE C

03/27/2004

from\_

FORM 460

through 04/09/2004 Page 5 I.D. NUMBER 1262139 으 12

Attach ado						04/08/2004		DATE RECEIVED
Attach additional information on appropriately labeled continuation sheets.					El Segundo CA 90245	04/08/2004 319 Main St	Wedgewood Enterprise Corp	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)
ed continuation	SCC DALA HOUSE	DSCC PIN	□ SCC	OTH COM	□scc	Z S S S S S S S S S S S S S S S S S S S	COM	CONTRIBUTOR CODE *
on sheets.								IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)
\$ SUBTOTAL							Phone Bank	DESCRIPTION OF GOODS OR SERVICES
720.00						720.00		AMOUNT/ FAIR MARKET VALUE
						7,890.00		COMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)
								PER ELECTION TO DATE (IF REQUIRED)

### Schedule C Summary

ယ

; <sup>)</sup>	_	
Amount received this period – unitemized nonmonetary contributions of less than \$100	(Include all Schedule C subtotals.)	<ul> <li>Amount received this period – nonmonetary contributions of \$100 or more.</li> </ul>
ry contributions of less than \$100		ons of \$100 or more.

120.00		0.00	720.00	_	
	SCC - Small Contributor Committee	OTH – Other	(other than PTY or SCC)	IND - Individual	*Contributor Codes

#### Supporting/Opposing Other **Summary of Expenditures** Schedule D Candidates, Measures and Committees

Committee To Continue The Progress Of El Segundo

NAME OF FILER

SEE INSTRUCTIONS ON REVERSE

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

FO	03/27/2004	from
CALIF	Statement covers period	State

through 04/09/2004 Page 6 of 12

1262139 I.D. NUMBER

			04/02/2004				04/02/2004				04/02/2004		DATE
	X Support	City of El Segundo	City Council Member	Sandra Jacobs	X Support	City of El Segundo	City Council Member	Eric Busch		City of El Segundo	City Council Member	Bill Fisher	NAME OF CANDIDATE, O MEASURE NUMBER OR LI OR COI
	Oppose	District: 00			Oppose	District: 00			Oppose	District: 01			NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE
	Expenditure	Independent	Nonmonetary	Monetary Contribution	Expenditure	Independent	Nonmonetary Contribution	☐ Monetary Contribution	Expenditure	Independent	Nonmonetary	Monetary Contribution	TYPE OF PAYMENT
SUBTOTAL \$ 700.00				Newspaper Ad				Newspaper Ad				Newspaper Ad	DESCRIPTION (IF REQUIRED)
700.00		0000	) 33 33			1	233 33			0	233 34		AMOUNT THIS PERIOD
		0,01	8 527 89			0	8 527 86			0,000	8 527 93		CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)
													PER ELECTION TO DATE (IF REQUIRED)

### Schedule D Summary

- 1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) ......\$ 7,730.53
- 2. Unitermized contributions and independent expenditures made this period of under \$100 ......\$100 states and independent expenditures made this period of under \$100 ...... .... 7,730.53 0.00

# Schedule D (Continuation Sheet) Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committe

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

Candidate	Candidates Measures and Committees	mmittage					0.1000	
					through <u>04/09/2004</u>	4	Page 7	of 12
NAME OF FILER  Committee T	NAME OF FILER  Committee To Continue The Progress Of El Segundo	s Of El Segundo					I.D. NUMBER 1262139	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	CE, AND DISTRICT, OR ER AND JURISDICTION,	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN, 1-DEC, 31)		PER ELECTION TO DATE (IF REQUIRED)
	Bill Fisher		Monetary Contribution	High propensity calling	-11-			
04/02/2004	City Council Member		Nonmonetary		102.18	8.527.93		
	City of El Segundo	District: 01						
	X Support [	Oppose	Expenditure					
	Eric Busch		Monetary Contribution	High propensity calling				
04/02/2004	City Council Member		Nonmonetary Contribution		102.18	8,527.86		
	City of El Segundo	District: 00	Independent					
	X Support	Oppose	Expenditure					
	Sandra Jacobs		Monetary Contribution	High propensity calling				
04/02/2004	City Council Member		Nonmonetary		102.18	8,527.89		
	City of El Segundo	District: 00	Independent					
	Support     Support	Oppose	Expenditure					
	Bill Fisher		Monetary Contribution	Mailer				
04/07/2004	City Council Member		Nonmonetary		1 468 00	8 527 93		
	City of El Segundo	District: 01	Contribution		1,100.00	0,041.00		
	X Support [	Oppose	Expenditure					
				SUBTOTAL \$ 1,774.54	1,774.54			

#### Supporting/Opposing Other Candidates, Measures and Committees **Summary of Expenditures** (Continuation Sheet) Schedule D

Committee To Continue The Progress Of El Segundo

NAME OF FILER

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

Statement covers period

from\_

through 04/09/2004 03/27/2004 FORM 460 Page 8 of 12

1262139 I.D. NUMBER

			4,002.66	SUBTOTAL \$ 4,002.66				
					Expenditure	Oppose		
	0,327.00		000.00		Contribution	District: 00	City of El Segundo	
	37 96 —	 Ю	ก ง ง		Nonmonetary	рег	City Council Member	04/08/2004
			(	Mailer	Monetary Contribution		Eric Busch	
					Expenditure	Oppose	X Support	
					Independent	District: 01	City of El Segundo	
	8,527.93		533.33		Nonmonetary	ЭЕГ	City Council Member	04/08/2004
				Mailer	Monetary Contribution		Bill Fisher	
					Expenditure	Oppose	X Support	
		,			Independent	District: 00	City of El Segundo	
	8.527.89	 ω	1.468.00		Nonmonetary	рег	City Council Member	04/07/2004
				Mailer	Monetary Contribution		Sandra Jacobs	
					Expenditure	Oppose		
	.00		1,100.00		Contribution	District: 00	City of El Segundo	
	8 577 86		1 168 00		Nonmonetary	рег	City Council Member	04/07/2004
		-		Mailer	Monetary Contribution		Eric Busch	
PER ELECTION TO DATE (IF REQUIRED)	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		AMOUNT THIS PERIOD	DESCRIPTION (IF REQUIRED)	TYPE OF PAYMENT	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	NAME OF CANDIDA MEASURE NUMBER O	DATE

### Schedule D (Continuation Sheet) **Summary of Expenditures**

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

Statement covers period CALIFORNIA / CO SCHEDULE D (CONT.)

		04/08/2004			T	04/08/2004			Ī <u> </u>	04/08/2004	(0			04/08/2004		DATE	Committee To	NAME OF FILER	Calluluates	Supporting
	X Support	City of El Segundo	Bill Fisher City Council Member	X Support	City of El Segundo	City Council Member	Eric Busch	X Support	City of El Segundo	City Council Member	Sandra Jacobs		City of El Segundo	City Council Member	Sandra Jacobs	NAME OF CANDIDATE, OFFICE, AND DISTRICT OR MEASURE NUMBER OR LETTER AND JURISDICTION OR COMMITTEE	Committee To Continue The Progress Of El Segundo		Candidates, Measures and Committees	Supporting/Opposing Other
	☐ Oppose	District: 01		☐ Oppose	District: 00			Oppose	District: 00			Oppose	District: 00			AATE, OFFICE, AND DISTRICT, OR R OR LETTER AND JURISDICTION, OR COMMITTEE	ess Of El Segundo		,omillitees	***************************************
	Expenditure	Contribution	Monetary Contribution	Expenditure	Independent	Nonmonetary	Monetary Contribution	Expenditure	Independent	Nonmonetary	Monetary Contribution	Expenditure	Contribution	Nonmonetary	Monetary Contribution	TYPE OF PAYMENT				
SUBTOTAL \$			Phone Bank				Phone Bank				Phone Bank				Mailer	DESCRIPTION (IF REQUIRED)				
1,253.33		240.00			1000	240 00			1	240.00			0000	カ コ コ コ コ コ コ		AMOUNT THIS PERIOD			through <u>04/09/2004</u>	from 03/27/2004
	13	8,527.93			1	8 527 86			,	8.527.89			0,027.00	8 527 80		CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)			ļ,	4
					_				_								1262139	O NI IMBEO	Page 9	FORM
																PER ELECTION TO DATE (IF REQUIRED)			of 12	400

#### Schedule E Payments Made

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

12

SCHEDULE

Committee To Continue The Progress Of El Segundo SEE INSTRUCTIONS ON REVERSE 1262139

E E CVC CTB SS Ω <del>\</del> \* Payments that are contributions or independent expenditures must also be summarized on Schedule D. 큰 3 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. El Segundo 312 E Imperial Av 312 E Imperial Av El Segundo Herald El Segundo El Segundo Herald Santa Monica 1311 Euclid St #4 Kelly Calkin civic donations contribution (explain nonmonetary)\* campaign paraphernalia/misc. campaign consultants legal defense independent expenditure supporting/opposing others (explain)\* campaign literature and mailings fundraising events candidate filing/ballot fees NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) S CA 90245 90404 90245 MTG P H 유 postage, delivery and messenger services office expenses member communications print ads professional services (legal, accounting) polling and survey research petition circulating meetings and appearances phone banks PRT PRT SAL CODE 유 Newspaper Ad Newspaper Ad DESCRIPTION OF PAYMENT 호택청청 SAL SAL 둳 transfer between committees of the same candidate/sponsor information technology costs (internet, e-mail voter registration returned contributions radio airtime and production costs staff/spouse travel, lodging, and meals candidate travel, lodging, and meals t.v. or cable airtime and production costs campaign workers' salaries SUBTOTAL \$ AMOUNT PAID 6,000.00 6,466.67 233.33 233.34

### Schedule E Summary

- Unitermized payments made this period of under \$100 .... 1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)
- ယ Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ...... 6
- TOTAL \$

7,276.79

6

7,276.79

0.00

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

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

SCHEDULE E (CONT.)

Statement covers period CALIFORNIA 460 from 03/27/2004 FORM 460 through 04/09/2004 Page 11 of 12 1262139

Committee To Continue The Progress Of El Segundo SEE INSTRUCTIONS ON REVERSE NAME OF FILER

EBBC Earm 460 ( luna (04)	בספט		
810.12	\$UBTOTAL \$	n Schedule D.	*Payments that are contributions or independent expenditures must also be summarized on Schedule D
270.25		SAL	Matthew Giangrande 514 1/2 E Grand Av El Segundo CA 90245
102.18	High propensity calling	PHO	TMG Marketing Inc 717 17th St #1900 Denver CO 80202
102.18	High propensity calling	PHO	TMG Marketing Inc 717 17th St #1900  Denver  CO 80202
102.18	High propensity calling	РНО	TMG Marketing Inc 717 17th St #1900 Denver CO 80202
233.33	Newspaper Ad	PRT	El Segundo Herald  312 E Imperial Av El Segundo CA 90245
AMOUNT PAID	OR DESCRIPTION OF PAYMENT	CODE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)
s ne candidate/sponsor -mail)	nember communications meetings and appearances office expenses petition circulating phone banks postage, delivery and messenger services professional services (legal, accounting) print ads  RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries t.v. or cable airtime and production costs campaign workers' salaries t.v. or cable airtime and production costs campaign workers' salaries t.v. or cable airtime and production costs campaign workers' salaries t.v. or cable airtime and production costs campaign workers' salaries t.v. or cable airtime and production costs campaign workers' salaries t.v. or cable airtime and production costs trace travel, lodging, and meals response travel, lodging, and meals response travel, lodging, and meals voter registration WEB information technology costs (internet, e-mail)	payment, you may enter the member communications meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger s professional services (legal, accouprint ads	CODES: If one of the following codes accurately describes the payment, you recommendation consultants contribution (explain nonmonetary)*  CVC civic donations FIL candidate filing/ballot fees FND fundraising events ND independent expenditure supporting/opposing others (explain)* LEG legal defense LTT campaign literature and mailings  MBR member community MTG meetings and app OFC office expenses PET petition circulating PHO phone banks POL polling and survey PRO postage, delivery PRO professional servi

### Accrued Expenses (Unpaid Bills) Schedule F

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

from\_ through 04/09/2004 Statement covers period 03/27/2004

Page 12 CALIFORNIA FORM of 12

I.D. NUMBER 1262139

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Committee To Continue The Progress Of El Segundo				126	1262139
C		40		, describe the payment. radio airlime and production costs returned contributions campaign workers' salaries tv. or cable airlime and production costs candidate travel lodging and meals	sts
FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads	earch messenger services legal, accounting)	W ¬ · · · ·	candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the same carvoter registration information technology costs (internet, e-mail)	candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor voter registration information technology costs (internet, e-mail)
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D., NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCEBEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
TTA 4374 Alder Dr	LIT	0.00	6,003.99	0.00	6,003.99
San Diego CA 92116					
		8			=
*Payments that are contributions or independent expenditures must also be summarized on Schedule D.	\$ subtotals	0.00 \$	6,003.99 \$	0.00	\$ 6,003.99
Schedule F Summary  1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)	ccrued expenses under	btotals for	INCURRED TOTALS \$	RED TOTALS \$	6,003.99
2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)	dule F, Column (c) subtot ayments on accrued expo	als for payments on enses under \$100.).		PAID TOTALS \$	0.00
3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)	er the difference here and		NET \$		6,003.99 May be a negative number

## Late Con

Late Contribution Report	Amounts	Type or print in ink. Amounts may be rounded to whole dollars.	CITY CLERK'S OFFICE	OFFICE LATE CONTRIBUTION REPORT
NAME OF FILER Committee To Continue The Progress Of El Segundo	Of El Segundo	Date of This Filing	2001 APR -8 PM 11: 11.7	FORM 497
AREA CODE/PHONE NUMBER	I.D. NUMBER (d'applicable)			For Official Use Only
-	1262139	Report No.		
STREET ADDRESS		☐ Amendment		
		to Report No.	æ	QI.
CITY	STATE ZIP CODE	(expan below)	3/>	
		No. of Pages	2/2	

# Late Contribution(s) Made

DATE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF	DATE OF ELECTION (IF APPLICABLE)
h9/8/h	Committee to Elect Eric Busch	City Comeil Member	773.33	4/13/64
	El Segundo CA 90245	Ballot: Dist:		
1/8/c4	Committee to Elect Bill Fisher 1225 E Ock	City of El Segundo	773.33	4/13/64
	10: 1261453	Dist:		
_	8	65 v		(F)
	D:	Ballot: Dist:	e.	
			# 7/. # 18.	£2
	<b>D</b>	Ballot: Dist:	9	
Reason for Amendment:	ment:		3. <b>*</b>	

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866(ASK-FPPC

# Late Contribution Report

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

LATE CONTRIBUTION REPORT

	2/3	No. of Pages		
	,	(explain below)	STATE ZIP CODE	CITY
		to Report No.	D.	0-700-X047604
				o Tanana Apparat
		Report No.	1262139	
For Official Use Only			I.D. NUMBER (it applicable)	AREA CODE/PHONE NUMBER
FORM 497		This Filing	ss Of El Segundo	NAME OF FILER Committee To Continue The Progress Of El Segundo
では、一大学の大学の一大学の大学の一大学の大学の大学の大学の大学の大学の大学の大学の大学の大学の大学の大学の大学の大				

# Late Contribution(s) Made

		Dist:	1261810	
10/81/3		City of El Segundo Ballot:	El Segudo CA 90245	
4/13/64	772 22	City Council Member	Committee to Re-Elect Sandre Jacobs	4/8/64
		Dist	ID: 1261453	
4/18/04	1468.00	City of El Degrada Ballot:	El Seguido CA CACA	
		City Council Menter	Consider to Elect Bill Fisher	4/2/04
		Dist:	1260749	
•		City of the Segument Ballot	El Segundo CA 50245	( <del>-</del>
4/13/04	1468.00	City Cours' Member	Connittee to Elect Eric Busch	4/7/04
		Dist	1D: 1261816	
., ,		City of El segundo Ballot	El Segudo CA 90245	_
4/13/64	1468.00	City Council Member	Committee to Re-Elect Sandan Jacobs	4/7/04
(IF APPLICABLE)	CONTRIBUTION	MEASURE AND JURISDICTION	(IF COMMITTEE, ALSO ENTER LD. NUMBER)	MADE
DATE OF ELECTION	AMIQUNT OF	CANDIDATE AND OFFICE	ELLI NAME MAILING ADDRESS AND ZID CODE DE RECIPIENT	DATE

Reason for Amendment

Late Contribution Report		Amounts may be rounded to whole dollars.	ole dollars.		LATE CONTRIBUTION REPO
NAME OF FILER Committee To Continu	NAME OF FILER Committee To Continue The Progress Of El Segundo	Date of This Filing	04/08/2004	Date Stamp	CALIFORNIA 40
AREA CODE/PHONE NUMBER	BER I.D. NUMBER (#4pfcode)		<u>.</u>		
(818) 260-0669	1262139	Report No.			
STREET ADDRESS 601 S Glenoaks 8I #211	- M	☐ Amendment to Repart No			
СПҮ	STATE ZIP CODE	[explain below)	نا	•	
Burbank	CA 91502	No. of Pages_		1/3	
Late Contribution(s) Received	on(s) Received				
DATE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTE, AUSDENTER LO. MUMBER)	TRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER IF SELFENPLOYED, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED
_	ID:		SCC P P P COM NO		
_	ID:		S P P P P P P P P P P P P P P P P P P P		
	ID:		SCC PTY H NO		
			o	*	
*Contributor Codes IND - Individual COM - Recipient Cami OTH - Other	*Contributor Codes   PTY - Political Party   ND - Individual   COM - Recipient Committee (other than PTY or SCC)   SCC - Small Contributor Committee   OTM - Other	Tre e			
Reason for Amendment					

#### Cover Page Campaign Statement **Recipient Committee**

(Government Code Sections 84200-84216.5)

from\_

Statement covers period 02/29/2004

Type or print in ink.

COVER PAGE

Date of election if applicable: (Month, Day, Year) \_1 图 5:21

CALIFORNIA

Page \_\_

of 20

For Official Use Only

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OPTIONAL: FAX / E-MAIL ADDRESS		RESS (IF DIFFERENT) NO. AND S	ırbank	STREET ADDRESS (NO PO. BOX) 601 S Glenoaks BI #211		Committee To Continue The Progress Of El Segundo	COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)	Committee Information	Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.  Officeholder, Candidate Controlled Committee Officeholder Condidate Election Committee Officeholder Commi
	STATE 2	TREET OR	STATE 2		,	gress (	то сомит		intee
	ZIP CODE	P.O. BOX	ZIP CODE 91502			Of El Se	TEE)	I.D. NUMBER	thi Complet Ballot Cocycle Coc
		-	(8)		•	gundo			through03/26  symplete Parts 1, 2, 3, and Ballot Measure Committe Controlled Controlled Sponsored (Also Complete Part 6)  Primarily Formed Candic Officeholder Committee (Also Complete Part 7)
0	AREA CODE/PHONE	100	AREA CODE/PHONE (818) 260-0669					1262139	through03/26/2004  Complete Parts 1, 2, 3, and 4.  Ballot Measure Committee  O Primarily Formed O Sponsored (Also Complete Part 6)  Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)
	PHONE		-0669						(e)
	o.l						1		, is
	СІТҮ	MAILING ADDRESS	NAME OF ASSISTANT TREASUR	сіт <sup>ү</sup> Burbank	601 S Glenoaks BI #211	Kinde Durkee	NAME OF TREASURER	Treasurer(s)	Type of Statement:    Preelection Statement     Semi-annual Statement     Termination Statement     Amendment (Explain below)
NESS SESS			TREASURER, IF ANY		#211				below)
	STATE		7	STATE CA					
	ZIP CODE			ZIP CODE 91502					☐ Quart ☐ Speci
	DDE			DE					Quarterly Statement Special Odd-Year R Supplemental Preele Statement - Attach F
-	AREA CODE/PHONE		2	AREA CODE/PHONE (818) 260-0669					Quarterly Statement Special Odd-Year Report Supplemental Preelection Statement - Attach Form 495

#### 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	03/31/2004	By Kinde Durkee About Min	
	Date	Signature of Treasurer or Assistant Treasurer	
Executed on	Date	By Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor	
Executed on	Date	BySignature of Controlling Officeholder, Candidate, Stata Measure Proponent	
Executed on	Date	By Constitute of Controlling Office books of Considering Office Management	FPPC For

													ပ်၊
CITY	COMMITTEE ADDRESS	NAME OF TREASURER		COMMITTEE NAME	COMMITTEE ADDRESS	NAME OF TREASURER	COMMITTEE NAME	Related Committees not included in this statem contributions or make exp		RESIDENTIAL/BUSINESS ADDRESS	OFFICE SOUGHT OR HELD (	NAME OF OFFICEHOLDER OR CANDIDATE	Officeholder or Canc
STATE ZIP (	STREET ADDRESS (NO P.O. BOX)			STATE ZIP (	STREET ADDRESS (NO P.O. BOX)			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.		(NO. AND STREET)	OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)	R CANDIDATE	Officeholder or Candidate Controlled Committee
ZIP CODE	(XO	CONTROLI	:	ZIP CODE	<u> </u>	CONTROLI YES	I.D. NUMBER	tement or are pri ndidacy.		CITY	CT NUMBE		ittee
AREA CODE/PHONE		CONTROLLED COMMITTEE?		AREA CODE/PHONE		CONTROLLED COMMITTEE?	MBER	: List any committees marily formed to receive		STATE ZIP	R IF APPLICABLE)		
Attac		NAME OF OFFICEHOLDER OR CANDIDATE	7. Primarily Formed Committee <i>Li</i> which this committee is primarily formed.		OFFICE SOUGHT OR HELD	NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT	ldentify the controlling offic	BALLOT NO. OR LETTER	NAME OF BALLOT MEASURE	6. Ballot Measure Committee			
h continu		ANDIDATE	ANDIDATE	ANDIDATE	ANDIDATE	mittee L			DIDATE, OR	eholder,	JURISDICTION		tee
Attach continuation sheets if necessary		OFFICE SOUGHT OR HELD	Primarily Formed Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.		DISTRICT NO. IF ANY	PROPONENT	rolling officeholder, candidate, or state measure proponent, if any.						
		SUPPORT	SUPPORT OPPOSE	SUPPORT OPPOSE	SUPPORT	ındidate(s) for		ANY		roponent, if any.	SUPPORT		

Campaign Disciosure Statement	The or british that			SUIVIIVIMITI FAGE
Summary Page	to whole dollars.	fro	Statement covers period 02/29/2004	FORM 460
SEE INSTRUCTIONS ON REVERSE		through	03/26/2004	Page 3 of 20
NAME OF FILER  Committee To Continue The Progress Of El Segundo				1.D. NUMBER 1262139
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTALT ODATE	Calendar Year Summary for Candidate Running in Both the State Primary and General Elections	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions	\$ 22,375.00 0.00 \$ 22,375.00 4,170.00 \$ 26,545.00	\$ 27,925.00 0.00 \$ 27,925.00 4,170.00 \$ 32,095.00	20. Contributions \$ 0.00 Received \$ 0.00 21. Expenditures \$ 0.00	1/1 through 6/30 7/1 to Date  0.00 \$ 0.00  0.00 \$ 0.00
xpenditures Made Payments Made	\$15,743.56 0.00	\$ 20,185.06	Expenditure Limit S Candidates	Limit Summary for State
7. Loans Made	\$ 15,743.56 0.00 4,170.00 \$ 19,913.56	\$ 20,185.06 0.00 4,170.00 \$ 24,355.06	22. Cumulative (If Subject to a Community)  Date of Election (mm/dd/yy)	22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) of Election Total to Date Im/dd/yy) \$
Current Cash Statement  12. Beginning Cash Balance Previous Summary Page, Line 16  13. Cash Receipts Cash Column A, Line 3 above  14. Miscellaneous Increases to Cash Cash Column A, Line 4  15. Cash Payments Column A, Line 8 above  16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 1,108.50 \$ 22,375.00 0.00 15,743.56 \$ 7,739.94	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		\$\$\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitt{\$\e
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ 0.00	the first report being filed for this calendar year, only carry over the amounts	*Since January 1, 2001. /	*Since January 1, 2001. Amounts in this section may be
Cash Equivalents and Outstanding Debts 18. Cash Equivalents	\$ 0.00	from Lines 2, 7, and 9 (if any).	different from amounts reported in Column B.	orted in Column B.
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ 0.00		FPPC Tol	FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

### Schedule A Monetary Contributions Received

SEE INSTRUCTIONS ON REVERSE

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE /

Committee To Continue The Progress Of El Segundo FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CONTRIBUTOR Owner Teacher Jim & Jacks Auto Repair CB Richard Ellis Inc. **ESUSD** Real Estate IF AN INDIVIDUAL, ENTER
OCCUPATION AND EMPLOYER
(IF SELF-EMPLOYED, ENTER NAME
OF BUSINESS) SUBTOTAL \$ through from AMOUNT RECEIVED THIS PERIOD Statement covers period 9,100.00 3,000.00 3,000.00 1,000.00 2,000.00 100.00 03/26/2004 02/29/2004 CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) 3,000.00 3,000.00 1,000.00 3,000.00 100.00 1262139 Page 4 CALIFORNIA I.D. NUMBER FORM PER ELECTION TO DATE (IF REQUIRED) 약 460 20

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03/17/2004

Pacific Storage Partners LLC

17541 Seventeenth St

92780

03/04/2004

James Kizirian

Manhattan Beach 469 36th St

28729 Rothrock Dr Rancho Palos VerdesCA 90274

03/24/2004

George Kallis

El Segundo

90245

1360 E Mariposa Av

03/04/2004

Ray Gen

03/01/2004

Consolidated Disposal Service

Santa Fe Springs

90670

12949 Telegraph Rd

DATE RECEIVED

(other than PTY or SCC) OTH - Other SCC - Small Contributor Committee PTY -- Political Party COM - Recipient Committee IND - Individual \*Contributor Codes

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

NAME OF FILER

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

from\_ through\_ Statement covers period 03/26/2004 02/29/2004 Page 5 1262139 I.D. NUMBER SCHEDULE A (CONT.) \_ of \_20

		13,250.00	\$UBTOTAL			
	3,000.00	3,000.00			The Great Sepulveda Car Wash  235 W Florence Av	03/01/2004
	3,000.00	3,000.00		SC PY THE SC OF	The Deretin Group 9800 S Sepulveda BI #720 Los Angeles CA 90045	03/04/2004
	1,000.00	1,000.00		SCC	Spectrum Club Holding Company 2805 N Dallas Pkwy #600 TX 75093	03/24/2004
	6,000.00	6,000.00		SCC PTY H M	SAMS Venture LLC  1900 Avenue Of The Stars #320 Los Angeles CA 90067	03/01/2004
	250.00	250.00	Entertainer Bobby Sherman Enterprises	SC CY PIN SON DO	Brigitte Poublon  11944 Brentridge Dr Los Angeles CA 90049	03/01/2004
PER ELECTION TO DATE (IF REQUIRED)	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	AMOUNT RECEIVED THIS PERIOD	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	CONTRIBUTOR CODE *	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DATE RECEIVED
1262139	1262				Committee To Continue The Progress Of El Segundo	Committee 7

IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other

PTY - Political Party
SCC - Small Contributor Committee

# Schedule C Nonmonetar

Type or print in ink.

SCHEDULE C

Nonmon	Nonmonetary Contributions Received		Amounts may be rounded to whole dollars.	St. from_	Statement covers period m02/29/2004		CALIFORNIA 460
SEE INSTRUCT	SEE INSTRUCTIONS ON REVERSE			thr	through 03/26/2004	Page 6	of 20
NAME OF FILER  Committe	AME OF FILER  Committee To Continue The Progress Of El Segundo	undo	,			1.D, NUMBER 1262139	39 39
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)
	Wedgewood Enterprise Corp	COM		Phone Bank			
02/29/2004	319 Main St	∏ XIQ			3,570.00	7,170.00	
	El Segundo CA 90245	□scc					
	Wedgewood Enterprise Corp	COM		Rent			
03/04/2004	319 Main St	지점 무 무 무			600.00	7,170.00	
	El Segundo CA 90245	□scc		A			
		Scc					
				, T			
		SCC					
Attach adı	Attach additional information on appropriately labeled continuation sheets	ed continuatio	on sheets.	\$ subtotal	\$ 4,170.00		

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)	_	2. Amount received this period – unitemized nonmonetary contributions of less than \$100\$\$ O.00   OTH – Other   PTY – Political Party	9.	1. Amount received this period – nonmonetary contributions of \$100 or more.  4 170 00   IND – Individual   I	Schedule C Summary
	SCC - Small Contributor Committee	- Other Political Party	(other than PTY or SCC)	Individual - Recipient Committee	ibutor Codes

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

# Schedule D Summary of Expenditures

		\$ 7,300.00	SUBTOTAL \$ 7,300.00			
			-9	Expenditure	X Support ☐ Oppose	
				Independent	City of El Segundo District: 00	
	5.951.02	2.433.33		Nonmonetary	City Council Member	03/09/2004
			Mailer	Monetary Contribution	Eric Busch	
				Expenditure	X Support	
	•			Independent	City of El Segundo District: 01	i.
	5,951.08	2,433.34		Nonmonetary Contribution	City Council Member	03/09/2004
			Mailer	Monetary Contribution	Bill Fisher	
				Expenditure	X Support ☐ Oppose	
	-	1		Independent	City of El Segundo District: 00	
	5 951 05	2 433 33		Nonmonetary	City Council Member	03/09/2004
4			Mailer	Monetary Contribution	Sandra Jacobs	
O DATE PER ELECTION FEAR TO DATE TO DATE (IF REQUIRED)	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	AMOUNT THIS PERIOD	DESCRIPTION (IF REQUIRED)	TYPE OF PAYMENT	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	DATE
1.D. NUMBER 1262139					committee To Continue The Progress Of El Segundo	Committee To
Page 7 of 20		through <u>03/26/2004</u>			NS ON REVERSE	SEE INSTRUCTIONS ON REVERSE
FORM		from 02/29/2004	ilars.	to whole dollars	Candidates, Measures and Committees	Sandidates
CALIFORNIA 160		Statement covers period	e rounded	Amounts may be rounded	Supporting/Opposing Other	Supporting

### Schedule D Summary

- 2. Unitemized contributions and independent expenditures made this period of under \$100 ......\$ 1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.).....\$ 17,765.00 88.15
- 17,853.15

# Schedule D (Continuation Sheet) Summary of Expenditus Supporting/Opposing C Candidates, Measures

(00111111111111111111111111111111111111	rion Olicer)		Type or print in ink.	CIRLINK.			SCHEDULE D CONT
Summary	Summary of Expenditures		Amounts may be rounded to whole dollars.	be rounded ollars.	Statement covers period		CALIFORNIA A CO
Supportin	Supporting/Opposing Other	'mmittoes			from 02/29/2004		FORM 400
	Candidates, incasales and confinitions			,	through 03/26/2004	ļ	Page 8 of 20
NAME OF FILER  Committee T	NAME OF FILER  Committee To Continue The Progress Of El Segundo	ess Of El Segundo				126.	I.D. NUMBER 1262139
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION OR COMMITTEE	NATE, OFFICE, AND DISTRICT, OR R OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Eric Busch			Mailer			
03/25/2004	City Council Member		Nonmonetary		806 86	л ол 1 no	
	City of El Segundo	District: 00	Contribution		000	0,00	
	Support	Oppose	Expenditure				
	Bill Fisher		Monetary Contribution	Mailer			
03/25/2004	City Council Member		Nonmonetary Contribution		806.67	5,951.08	
	City of El Segundo	District: 01	Independent			•	
	X Support	Oppose	Expenditure				
	Sandra Jacobs		Monetary Contribution	Mailer			
03/25/2004	City Council Member		Nonmonetary		806.67	5.951.05	
	City of El Segundo	District: 00	Independent				
	X Support	Oppose	Expenditure		*		
	Sandra Jacobs		Monetary Contribution	Postage			
03/09/2004	City Council Member		Nonmonetary		100 00	አ 051 05	
	City of El Segundo	District: 00	Contribution			0,00	
	X Support	☐ Oppose	Expenditure				
				SUBTOTAL \$ 2,520,00	2 520 00		

# Schedule D (Continuation Sheet) Summary of Expenditures Supporting/Opposing Other Candidates, Measures and C

Type or print in ink.

Amounts may be rounded

Statement covers period

Supportin	Supporting/Opposing Other		to whole dollars.	ollars.	from 02/29/2004	-	CALIFORNIA FORM	<sup>™</sup> 460
Candidate	Candidates, Measures and Committees	ommittees			through_03/26/2004	4	Page 9	of 20
Committee T	NAME OF FILER  Committee To Continue The Progress Of El Segundo	ess Of El Segundo				-	I.D. NUMBER 1262139	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION OR COMMITTEE	FICE, AND DISTRICT, OR TTER AND JURISDICTION,	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		PER ELECTION TO DATE (IF REQUIRED)
	Bill Fisher		Monetary Contribution	Postage				
03/09/2004	City Council Member		Nonmonetary		100.00	5.951.08		
	City of El Segundo	District: 01	Independent					
	Support     Support	☐ Oppose	Expenditure					
	Eric Busch		Monetary Contribution	Postage				
03/09/2004	City Council Member		Nonmonetary Contribution		100.00	5,951.02		
	City of El Segundo	District: 00	Independent					
		Oppose	Expenditure					
	Eric Busch		Monetary Contribution	Postage				
03/15/2004	City Council Member		Nonmonetary		66.66	5.951.02		
	City of El Segundo	District: 00	Independent					
	Support     Support	Oppose	Expenditure					
	Bill Fisher		Monetary Contribution	Postage				
03/15/2004	City Council Member		Nonmonetary Contribution		66.67	5,951.08		
	City of El Segundo	District: 01	Independent					26
	X Support	Oppose	Expenditure					*
				SUBTOTAL \$	333.33			

# (Continuation Sheet) Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees

Schedule D

Committee To Continue The Progress Of El Segundo

NAME OF FILER

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

smay be rounded statement covers period callFornia 460 from 02/29/2004 FORM through 03/26/2004 Page 10 of 20

1262139

I.D. NUMBER

SUBTOTAL \$ 266.67	40			Expenditure	Oppose	∑ Support	
	5,951.05	66.67		Nonmonetary   Contribution	District: 00	City Council Member	03/25/2004
			Postage			Sandra Jacobs	
				Expenditure	☐ Oppose	X Support	
		000		Independent	District: 01	City of El Segundo	
	5 951 08	86 67		Nonmonetary	91	City Council Member	03/25/2004
	41		Postage	Monetary Contribution		Bill Fisher	
				Expenditure	Oppose	X Support	
100 de				Independent	District: 00	City of El Segundo	
	5.951.02	66,66	-6	Nonmonetary	91	City Council Member	03/25/2004
			Postage	Monetary Contribution		Eric Busch	
				Expenditure	☐ Oppose		
	0,00			Independent	District: 00	City of El Segundo	
	5 951 05	66 67		Nonmonetary	ST.	City Council Member	03/15/2004
			Postage	Monetary Contribution		Sandra Jacobs	
PER ELECTION TO DATE (IF REQUIRED)	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	AMOUNT THIS PERIOD	DESCRIPTION (IF REQUIRED)	TYPE OF PAYMENT	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	NAME OF CANDIDATE MEASURE NUMBER O OR	DATE

# Schedule D (Continuation Sheet)

Type or print in ink.

Amounts may be rounded SCHEDULE D (CONT.)

Summary	Summary of Expenditures	Amounts may be rounded to whole dollars.	be rounded ollars.	Statement covers period	period CA	ALIFORNIA	
Supportin Candidate	Supporting/Opposing Other Candidates, Measures and Committees			from02/29/2004	04	FORM	100
				through <u>03/26/2004</u>		Page 11	of 20
NAME OF FILER  Committee 1	NAME OF FILER  Committee To Continue The Progress Of El Segundo			6	1	I.D. NUMBER 1262139	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		PER ELECTION TO DATE (IF REQUIRED)
	Eric Busch	Monetary Contribution	Newspaper Ad				
03/01/2004	ēr	Nonmonetary Contribution		333.33	5,951.02		
	Support ☐ Oppose	Independent Expenditure					
	Bill Fisher	Monetary Contribution	Newspaper Ad				
03/01/2004	City Council Member  City of El Segundo District: 01	Nonmonetary Contribution		333.34	5,951.08		
	∑ Support	Expenditure					
,	Sandra Jacobs	Monetary Contribution	Newspaper Ad				
03/01/2004	City Council Member  District: 00	Nonmonetary Contribution		333.33	5,951.05		
	X Support Dppose	Expenditure					
,	Eric Busch	☐ Monetary Contribution	Newspaper Ad				
03/15/2004	City Council Member	Nonmonetary		500 00	5 951 02		
	City of El Segundo District: 00	Contribution		0	0,001.01		
	Support ☐ Oppose	Expenditure					
			SUBTOTAL \$ 1,500.00	1,500.00			

### Schedule D (Continuation Sheet) Summary of Expenditures

Type or print in ink.

Amounts may be rounded

Statement covers period SCHEDULE D (CONT.)

Supporti	Supporting/Opposing Other	to whole dollars.	ollars.		1	CALIFORNIA 460
Candidat	Candidates, Measures and Committees			through 03/26/2004		Page 12 of 20
NAME OF FILER Committee	NAME OF FILER  Committee To Continue The Progress Of El Segundo				<u> </u>	1.D. NUMBER 1262139
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION EAR TO DATE TO DATE (IF REQUIRED)
	Bill Fisher	Monetary Contribution	Newspaper Ad			
03/15/2004	City Council Member	Nonmonetary		500.00	5.951.08	
	City of El Segundo District: 01	Independent		1		
	X Support ☐ Oppose	Expenditure				
	Sandra Jacobs	Monetary Contribution	Newspaper Ad			
03/15/2004	City Council Member	Nonmonetary Contribution		500.00	5,951.05	
	City of El Segundo District: 00	Independent Expenditure				
	Eric Busch	Monetary Contribution	Mailer			
03/25/2004	City Council Member	Nonmonetary		225 00	5 951 02	
	City of El Segundo District: 00	Independent			0	
	X Support ☐ Oppose	Expenditure				
	Bill Fisher	Monetary Contribution	Mailer			
03/25/2004	City Council Member	Nonmonetary		225.00	5 951 08	
	City of El Segundo District: 01	Independent		1000	0	
•17	X Support ☐ Oppose	Expenditure	V			
			\$ subtotal	\$ 1,450.00		No.

# Schedule D (Continuation Sheet) Summary of Expenditu Supporting/Opposing ( Candidates, Measures

Type or print in ink.

(00)	יניסוו סווככני		ype or print in ink.	nt in ink.			25	ニーフラント
Summary	Summary of Expenditures		Amounts may be rounded to whole dollars.	be rounded lollars.	Statement covers period	period	ALIFORNIA	RNIA A DO
Supportin Candidate	Supporting/Opposing Other Candidates. Measures and Committees	ommittees			from 02/29/2004	04	FORM	400
			×		through <u>03/26/2004</u>		Page 13	of 20
NAME OF FILER	: !	1					.D. NUMBER	
Committee	Committee To Continue The Progress Of El Segundo	ess Of El Segundo					1262139	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	ATE, OFFICE, AND DISTRICT, OR R OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		PER ELECTION TO DATE (IF REQUIRED)
	Sandra Jacobs		Monetary Contribution	Mailer				
03/25/2004	City Council Member		Nonmonetary		335 00	7 07 07		
	City of El Segundo	District: 00	Contribution		223.00	0,801.00		
		Oppose	Expenditure	×				
	Sandra Jacobs		Monetary Contribution	Phone Bank				
02/29/2004	City Council Member		Nonmonetary		1.190.00	5.951.05		
	City of El Segundo	District: 00	Independent					
	X Support	Oppose	Expenditure	0				
	Bill Fisher		Monetary Contribution	Phone Bank			4	
02/29/2004	City Council Member		Nonmonetary Contribution		1,190.00	5,951.08		
		Oppose	Expenditure					
	Eric Busch		Monetary Contribution	Phone Bank				2
02/29/2004	City Council Member		Nonmonetary		1 190 00	5 051 03		
	City of El Segundo	District: 00	Contribution		1,190.00	2,931.02		
	X Support	Oppose	Expenditure					
				SUBTOTAL \$	3,795.00			
								The second second

#### Summary of Expenditures Schedule D (Continuation Sheet)

Type or print in ink.

Amounts may be rounded Statement covers period SCHEDULE D (CONT.)

Summary	Summary of Experior larges		to whole dollars.	ollars.	Statement covers period		₹	A ()
Candidate	Candidates, Measures and Committees	nmittees			from 02/29/2004	)4	FORM	
	×				through 03/26/2004		Page 14 of 20	20
NAME OF FILER	NAME OF FILER  Committee To Continue The Broaders Of El Commide	Of El Commodo		2			I.D. NUMBER	
							1202139	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	EE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	D DATE PER ELECTION EAR TO DATE TO PER ELECTION (IF REQUIRED)	TION (E (ED)
	Sandra Jacobs		Monetary Contribution	Rent				
03/04/2004	City Council Member		Nonmonetary		200 00	5 951 05		
	City of El Segundo	District: 00	Independent			0,00		
		Oppose	Expenditure					
	Bill Fisher		Monetary Contribution	Rent				
03/04/2004	City Council Member		Nonmonetary		200.00	5,951.08		
	City of El Segundo	District: 01	Independent					
	X Support □	Oppose	Expenditure					
	Eric Busch		Monetary Contribution	Rent				
03/04/2004	City Council Member City of El Segundo	District: 00	Nonmonetary Contribution	i.	200.00	5,951.02		
		Oppose	Expenditure					
			Monetary Contribution					
			Nonmonetary Contribution					
	Support [	Oppose	Expenditure					
		8		SUBTOTAL \$	\$ 600.00			

#### Schedule E Payments Made

Committee To Continue The Progress Of El Segundo

NAME OF FILER

SEE INSTRUCTIONS ON REVERSE

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

nded from

Statement covers period CALIFORNIA 460 from 02/29/2004 FORM FORM 1.D. NUMBER 1262139

4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ...... ယ 2. Unitemized payments made this period of under \$100 .... 1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) QNS NS NS **CODES:** If one of the following codes accurately describes the payment, you may enter Schedule E Summary \* Payments that are contributions or independent expenditures must also be summarized on Schedule D San Diego 4374 Alder Dr San Diego 4374 Alder Dr TTA San Diego 4374 Alder Dr Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ...... civic donations contribution (explain nonmonetary)\* campaign consultants campaign paraphernalia/misc campaign literature and mailings independent expenditure supporting/opposing others (explain)\* fundraising events legal defense candidate filing/ballot fees NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) SA SA 92116 92116 POS PROPERTIES 폭 공 office expenses meetings and appearances polling and survey research phone banks petition circulating member communications professional services (legal, accounting) postage, delivery and messenger services ==딬 CODE 유 Mailer Mailer the code. Otherwise, describe the payment. Mailer DESCRIPTION OF PAYMENT 정 꿈 茲 voter registration radio airtime and production costs information technology costs (internet, e-mail transfer between committees of the same candidate/sponsor staff/spouse travel, lodging, and meals candidate travel, lodging, and meals t.v. or cable airtime and production costs campaign workers' salaries returned contributions TOTAL \$ SUBTOTAL \$ 6 4 ↔ AMOUNT PAID 15,743.56 15,655.41 7,300.00 2,433.33 2,433.34 2,433.33 88.15 0.00

#### Schedule E (Continuation **Payment**

Type or print in ink.

SCHEDULE E (CONT.)

(Continuation Sheet)  Amounts may be rounded	Statement covers period	CALIEORNIA
	02/29/2004	FORM 460
SEE INSTRUCTIONS ON REVERSE	through_03/26/2004	Page 16 of 20
NAME OF FILER		ID NI IMBER
Committee To Continue The Progress Of El Segundo		1262139
CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise describe the payment	rwise describe the payment	

2 620 00	SUBTOTAL \$	d on Schedule D.	*Payments that are contributions or independent expenditures must also be summarized on Schedule D.
100.00		POS	El Segundo Main Post Office El Segundo CA 90245
P	Postage		US Postmaster
100.00	Postage	POS	US Postmaster  El Segundo Main Post Office  El Segundo CA 90245
806.67	Mailer	ᄕ	4374 Alder Dr San Diego CA 92116
806.67	Mailer	두	TTA  4374 Alder Dr  San Diego CA 92116
806.66	Mailer	5	TTA 4374 Alder Dr San Diego CA 92116
AMOUNT PAID	DESCRIPTION OF PAYMENT	CODE OR	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)
ie candidate/sponsor	ter the code. Otherwise, describe the payment.  RAD radio airtime and production costs  RFD returned contributions  SAL campaign workers' salaries  TEL t.v. or cable airtime and production costs  TRC campaign workers' salaries  TRC stampaign w	payment, you may enter the code. member communications meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting) print ads	CODES: If one of the following codes accurately describes the payment, y  CMP campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  FND fundraising events  IND independent expenditure supporting/opposing others (explain)*  LEG legal defense  LT campaign literature and mailings  CMBR member com  MTG meetings and  OFC office expen  PET petition circul  PHO phone banks  POL polling and s  POS postage, deli  PRO professional  PRT print ads

### Payments Made Schedule E (Continuation Sheet)

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

Statement covers period 02/29/2004

from

**CALIFORNIA** SCHEDULE E (CONT. 460

FORM

CMP campaign paraph CNS campaign consul CTB contribution (exp CVC civic donations FL candidate filing/b FND fundraising even IND independent exp LEG legal defense LT campaign literatu Committee To Continue The Progress Of El Segundo \*Payments that are contributions or independent expenditures must also be summarized on Schedule D. CODES: SEE INSTRUCTIONS ON REVERSE NAME OF FILER El Segundo El Segundo Main Post Office **US** Postmaster El Segundo El Segundo Main Post Office US Postmaster El Segundo El Segundo Main Post Office El Segundo Main Post Office El Segundo Main Post Office El Segundo **US** Postmaster US Postmaster **US** Postmaster contribution (explain nonmonetary) campaign consultants campaign paraphernalia/misc independent expenditure supporting/opposing others (explain)\* campaign literature and mailings candidate filing/ballot fees fundraising events If one of the following codes accurately describes the payment, you may enter the code. Otherwise, NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER) CA CA SA 90245 90245 90245 90245 90245 R R P 몽퍼웅 MBR MBR office expenses meetings and appearances professional services (legal, accounting) phone banks petition circulating member communications postage, delivery and messenger services polling and survey research POS POS POS POS POS CODE 윘 Postage Postage Postage Postage Postage DESCRIPTION OF PAYMENT YOT ST 뀸 荔荵戸 through describe the payment. voter registration information technology costs (internet, e-mail) transfer between committees of the same candidate/sponsor staff/spouse travel, lodging, and meals campaign workers' salaries returned contributions candidate travel, lodging, and meals t.v. or cable airtime and production costs radio airtime and production costs 03/26/2004 SUBTOTAL \$ Page 17 1262139 .D. NUMBER AMOUNT PAID 약 366.66 20 100.00 66.66 66.67 66.67 66.66

### Payments Made Schedule E (Continuation Sheet)

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

SCHEDULE E (CONT.)

Committee To Continue The Progress Of El Segundo SEE INSTRUCTIONS ON REVERSE NAME OF FILER from\_ through 03/26/2004 Statement covers period 02/29/2004 CALIFORNIA FORM Page 18 1262139 I.D. NUMBER 양 20

\$ 2,527.08	SUBTOTAL \$	Schedule D.	* Payments that are contributions or independent expenditures must also be summarized on Schedule D
333.33		PRT	312 E Imperial Av El Segundo CA 90245
	Newspaper Ad		El Segundo Herald
60.41		OFC	Kelly Calkin  1311 Euclid St #4  Santa Monica CA 90404
2,000.00		SAL	Kelly Calkin  1311 Euclid St #4  Santa Monica CA 90404
66.67	Postage	POS	US Postmaster El Segundo Main Post Office El Segundo CA 90245
66.67	Postage	POS	US Postmaster  El Segundo Main Post Office  El Segundo CA 90245
AMOUNT PAID	DESCRIPTION OF PAYMENT	CODE OR	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)
s ne candidate/sponsor ⊦-mail)	ayment, you may enter the code. Otherwise, describe the payment.  RAD radio airtime and production costs meetings and appearances office expenses petition circulating phone banks phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting) professional services (legal, accounting)  Professional services (legal, accounting)  Professional services (legal, accounting)  WEB information technology costs (internet, e-mail)	payment, you may enter the member communications meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger s professional services (legal, accouprint ads	CODES: If one of the following codes accurately describes the payment, you may e  CMP campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  FND fundraising events  IND independent expenditure supporting/opposing others (explain)*  LEG legal defense  LIT campaign literature and mailings  MBR member communications  MIG meetings and appearanc  OFC office expenses  FET petition circulating  PHO phone banks  FOL polling and survey reseauch  POS postage, delivery and m  PRO professional services (le

## (Cc Schedule E

Type or print in ink.

SCHEDULE E (CONT.)

\$ 2,166.67	SUBTOTAL \$	hedule D.	*Payments that are contributions or independent expenditures must also be summarized on Schedule D.
500.00		PRT	312 E Imperial Av El Segundo CA 90245
	Ad	Newspaper Ad	El Segundo Herald
500.00		PRT	312 E Imperial Av El Segundo CA 90245
	Ad	Newspaper Ad	El Segundo Herald
500.00		PRT	312 E Imperial Av El Segundo CA 90245
	Ad	Newspaper Ad	El Segundo Herald
333.33		PRT	312 E Imperial Av El Segundo CA 90245
	Ad	Newspaper Ad	Herald
333.34		7	312 E Imperial Av El Segundo CA 90245
	Ad	Newspaper Ad	El Segundo Herald
AMOUNT PAID	DESCRIPTION OF PAYMENT	CODE OR	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)
ls me candidate/sponsor ∍-mail)	Otherwise, describe the payment.  RAD radio airtime and production costs RFD returned contributions  SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate airtime and production costs TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor voter registration WEB information technology costs (internet, e-mail)	es es arch essenger services gal, accounting)	CODES: If one of the following codes accurately describes the payment, you may ente CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LT campaign literature and mailings  MBR member communications MTG meetings and appearances OFC office expenses FET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messe PRO professional services (legal,
BER 39	1.D. NUMBER 1262139		NAME OF FILER  Committee To Continue The Progress Of El Segundo
19 of 20	through 03/26/2004 Page _		SEE INSTRUCTIONS ON REVERSE
CALIFORNIA 460	Statement covers period CALIFORI 02/29/2004 FORM	ounded rs.	(Continuation Sheet)  Amounts may be rounded to whole dollars.

## Schedule E (Continuation Sheet)

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

SCHEDULE E (CONT.

근원물됨 Committee To Continue The Progress Of El Segundo \* Payments that are contributions or independent expenditures must also be summarized on Schedule D. CVC CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, SEE INSTRUCTIONS ON REVERSE Payments Made El Segundo 123 E Oak Av #107 Jennifer Jacobs El Segundo Jennifer Jacobs El Segundo Jennifer Jacobs 123 E Oak Av #107 123 E Oak Av #107 campaign paraphernalia/misc. campaign consultants civic donations contribution (explain nonmonetary)\* campaign literature and mailings candidate filing/ballot fees independent expenditure supporting/opposing others (explain)\* tundraising events NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) S CA S 90245 90245 90245 MBR member communications
MTG meetings and appearances
OFC office expenses
PET petition circulating
PHO phone banks
POL polling and survey researc meetings and appearances professional services (legal, accounting) postage, delivery and messenger services polling and survey research 딬 득 듴 CODE 유 Mailer Mailer Mailer DESCRIPTION OF PAYMENT from. through 03/26/2004 Statement covers period describe the payment. transfer between committees of the same candidate/sponsor radio airtime and production costs information technology costs (internet, e-mail) staff/spouse travel, lodging, and meals candidate travel, lodging, and meals campaign workers' salaries t.v. or cable airtime and production costs returned contributions voter registration 02/29/2004 SUBTOTAL \$ Page 20 CALIFORNIA 1262139 I.D. NUMBER AMOUNT PAID of 20 675.00 225.00 225.00 225.00

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FPPC Toll-Free Helpline: 866/ASK-FPPC	Signature of Controlling Officeholder, Candidate, State Measure Proponent	Ву	Executed on
	Signature of Controlling Officeholder, Candidate, State Measure Proponent	Bys	Executed onDate
of Sponsor	Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor	BySignature of Contro	Executed onDate
	Signature of Treasurer or Assistant Treasurer	By Kinde Durkee	Executed on 03/03/2004
attached schedules is true and complete. I	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.	<b>Verification</b> I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledg certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.	<ol> <li>Verification         I have used all reasonable diligence in preparing a certify under penalty of perjury under the laws of     </li> </ol>
	OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRESS
ZIP CODE AREA CODE/PHONE	CITY STATE	ZIP CODE AREA CODE/PHONE	CITY STATE
	MAILING ADDRESS		RESS (IF DIFFERENT) NO. AND S
	NAME OF ASSISTANT TREASURER, IF ANY	ZIP CODE AREA CODE/PHONE 91502 (818) 260-0669	CITY STATE CA
2IP CODE AREA CODE/PHONE 91502 (818) 260-0669	Burbank CA		601 S Glenoaks BI #211
	601 S Glenoaks BI #211		
2	NAME OF TREASURER  Kinde Durkee	The Progress Of El Segundo	Committee To Continue The Progress Of E
	Treasurer(s)	I.D. NUMBER 1262139	3. Committee Information
		Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	
Statement - Attach Form 495	Amendment (Explain below)	O Sponsored (Also Complete Part 6)	(Also Complete Part 5)  X General Purpose Committee
Quarterly Statement     Special Odd-Year Report     Supplemental Brookering		Ballot Measure Committee O Primanily Formed O Controlled	Officeholder, Candidate Controlled C State Candidate Election Commit Recall
	2. Type of Statement:	All Committees - Complete Parts 1, 2, 3, and 4,	Type of Recipient Committee: All Comm
		through 02/28/2004	SEE INSTRUCTIONS ON REVERSE
Page 1 of 6	Date of election if applicable: (Month, Day, Year) - 8 Fit 1: 50	Statement covers period from 01/01/2004	
CALIFORNIA 460	RECEIVED RECEIVED OFFICE	Type or print in ink	Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)

21	<u>وا</u> خ	1	Q   C	വ വ	ZI	C	1 0 3	20 i	ال	01	ن عا 0
CITY	NAME OF IREASURER COMMITTEE ADDRESS		COMMITTEE NAME	COMMITTEE ADDRESS	NAME OF TREASURER	COMMITTEE NAME	not included in this stater contributions or make exp	Related Committees	RESIDENTIAL/BUSINESS AD	DFFICE SOUGHT OR HELD	Officeholder or Candidate Con
STATE ZI	STREET ADDRESS (NO P.O. BOX)		SIAIE	(NO			not included in this statement that are controlled by you or are p contributions or make expenditures on behalf of your candidacy.	Not Included in this S	RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)	Officeholder or Candidate Controlled Committee
ZIP CODE AREA CODE/PHONE	YES NO		ZIP CODE AREA CODE/PHONE		CONTROLLED COMMITTEE?	I.D. NUMBER	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.	Related Committees Not Included in this Statement: List any committees	CITY STATE ZIP	RICT NUMBER IF APPLICABLE)	mittee
mJ	1	Į.	II. m	1			10	, l			
Atta	NAME OF OFFICEHOLDER OR CANDIDATE	NAME OF OFFICEHOLDER OR CANDIDATE	NAME OF OFFICEHOLDER OR CANDIDATE	NAME OF OFFICEHOLDER OR CANDIDATE	/. Primarily Formed Committee Li. which this committee is primarily formed.		OFFICE SOUGHT OR HELD	NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT	Identify the controlling of	BALLOT NO. OR LETTER	6. Ballot Measure Committee  NAME OF BALLOT MEASURE
ch continua	CANDIDATE	CANDIDATE	CANDIDATE	CANDIDATE	nmittee Li			NDIDATE, OR	iceholder, c	JURISDICTION	ittee
Attach continuation sheets if necessary	OFFICE SOUGHT OR HELD	OFFICE SOUGHT OR HELD	OFFICE SOUGHT OR HELD	OFFICE SOUGHT OR HELD	Primarily Formed Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.		DISTRICT NO. IF ANY	PROPONENT	rolling officeholder, candidate, or state measure proponent, if any.		
	SUPPORT OPPOSE	SUPPORT OPPOSE	SUPPORT OPPOSE	SUPPORT	ndidate(s) for		- ANY	Х	roponent, if any.	SUPPORT OPPOSE	

## Summary Page Campaign Disclosure Statement

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

SUMMARY PAGI

16. ENDING CASH BALANCE ...... Add Lines 12 + 13 + 14, then subtract Line 15 Cash Payments 14. Miscellaneous Increases to Cash ..... 13. Cash Receipts .... 12. Beginning Cash Balance ..... 10. Nonmonetary Adjustment... Expenditures Made 19. Outstanding Debts ..... Cash Equivalents Cash Equivalents and Outstanding Debts Current Cash Statement Contributions Received NAME OF FILER SEE INSTRUCTIONS ON REVERSE 17. LOAN GUARANTEES RECEIVED Committee To Continue The Progress Of El Segundo Accrued Expenses (Unpaid Bills) SUBTOTAL CASH PAYMENTS Payments Made ... Nonmonetary Contributions Loans Made ..... SUBTOTAL CASH CONTRIBUTIONS TOTAL CONTRIBUTIONS RECEIVED Monetary Contributions ...... Loans Received If this is a termination statement, Line 16 must be zero. Add Line 2 + Line 9 in Column B above Previous Summary Page, Line 16 ..... Schedule F, Line 3 See instructions on reverse ...... Schedule C, Line 3 Column A, Line 3 above Column A, Line 8 above ......Add Lines 3 + 4 Schedule B, Part 2 Schedule H, Line 7 Schedule E, Line 4 Schedule C, Line 3 Schedule B, Line 7 Schedule A, Line 3 Schedule I, Line 4 Add Lines 6 + 7 Add Lines 1 + 2 69 6 60 TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) Column A 5,550.00 4,441.50 5,550.00 S 5,550.00 ,108.50 ,441.50 ,441.50 ,441.50 ,550.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 6 for this calendar year, only report. Some amounts in from Column B of your last from Lines 2, 7, and 9 (if carry over the amounts the first report being filed period amounts. If this is subtracted from previous figures that should be Column A may be negative corresponding amounts amounts in Column A to the To calculate Column B, add CALENDAR YEAR TOTALT ODATE Column B Ò 5,550.00 5,550.00 4,441.50 4,441.50 ,550.00 ,441.50 0.00 0.00 0.00 0.00 0.00 from through Statement covers period different from amounts reported in Column B. 01/01/2004 \*Since January 1, 2001. Amounts in this section may be Candidates Expenditure Limit Summary for State Expenditures Made Running in Both the State Primary and 20. General Elections Calendar Year Summary for Candidates 02/28/2004 Contributions Received Date of Election (mm/dd/yy) 22. Cumulative Expenditures Made\*
(If Subject to Voluntary Expenditure Limit) FPPC Toll-Free Helpline: 866/ASK-FPPC 0.00 0.00 1/1 through 6/30 Page. 1262139 CALIFORNIA I.D. NUMBER FPPC Form 460 (June/01) FORM ယ 0.00 0.00 Total to Date 7/1 to Date 앜 **46**( တ

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## **Monetary Contributions Received** Schedule A

SEE INSTRUCTIONS ON REVERSE

Committee To Continue The Progress Of El Segundo

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

SCHEDULE A

from through Statement covers period 01/01/2004 02/28/2004 1262139 Page 4 CALIFORNIA I.D. NUMBER of တ

		02/19/2004	01/22/2004	02/11/2004	DATE RECEIVED
		Wedgewood Enterprise Corp 319 Main St El Segundo CA 90245	S & S Hardware Co Inc 1111 E Grand El Segundo CA 90245	Consolidated Disposal Service 12949 Telegraph Rd Santa Fe Springs CA 90670	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D., NUMBER)
	SS YEACOURT	SS P P P P P P P P P P P P P P P P P P	SCC PTY ND SCC COM	SCC SCT SCT SCT SCT SCT SCT SCT SCT SCT	CONTRIBUTOR CODE *
\$ SUBTOTAL					IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)
5,500.00		3,000.00	1,500.00	1,000.00	AMOUNT RECEIVED THIS PERIOD
		3,000.00	1,500.00	1,000.00	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)
					PER ELECTION TO DATE (IF REQUIRED)

# Schedule A Summary

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

\*Contributor Codes IND - Individual

5,500.00

50.00

COM – Recipient Committee (other than PTY or SCC) OTH – Other

PTY - Political Party
SCC - Small Contributor Committee

5,550.00

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

### Payments Made Schedule E

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

from Statement covers period 01/01/2004

CALIFORNIA 으 46 တ

SCHEDULE

NAME OF FILER SEE INSTRUCTIONS ON REVERSE

Committee To Continue The Progress Of El Segundo

CODES:

through 02/28/2004 Page 5 1262139 I.D. NUMBER

 $\mathbb{R}^{\mathbb{P}}$ CVC CTB SRO S Kelly Calkin 505 S Flower Santa Monica Los Angeles **US Postal Service** Fountain Valley Fry's Electronics 1311 Euclid St #4 10300 Kalama River Av civic donations contribution (explain nonmonetary)\* campaign paraphemalia/misc candidate filing/ballot fees campaign consultants campaign literature and mailings legal defense independent expenditure supporting/opposing others (explain)\* fundraising events If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CA SA 90009 92708 90404 OFC OFG 周 meetings and appearances member communications office expenses professional services (legal, accounting) postage, delivery and messenger services polling and survey research phone banks petition circulating SAL POS OFC CODE 유 DESCRIPTION OF PAYMENT YOY RY 荔콩 描 SAL information technology costs (internet, e-mail) voter registration transfer between committees of the same candidate/sponsor staff/spouse travel, lodging, and meals candidate travel, lodging, and meals t.v. or cable airtime and production costs campaign workers' salaries returned contributions radio airtime and production costs AMOUNT PAID 1,500.00 225.00 216.50

# Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) .....

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

SUBTOTAL \$

1,941.50

6 60

,441.50

- 2. Unitemized payments made this period of under \$100 ......
- 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ...... (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

,441.50

0.00 0.00

### Schedule E Payments Made (Continuation Sheet)

Committee To Continue The Progress Of El Segundo

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

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

SCHEDULE E (CONT.)

from\_ through 02/28/2004 Statement covers period 01/01/2004 CALIFORNIA FORM Page 6 1262139 I.D. NUMBER of တ

\$ 2,500.00	SUBTOTAL \$	Schedule D.	so be summarized on	*Payments that are contributions or independent expenditures must also be summarized on Schedule D.
	34			
2,500.00		SAL	18	Kelly Calkin  1311 Euclid St #4  Santa Monica CA 90404
AMOUNT PAID	DESCRIPTION OF PAYMENT	CODE OR		NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)
s ne candidate/sponsor :-mail)	payment, you may enter the code. Otherwise, describe the payment.  RAD radio airlime and production costs meetings and appearances office expenses petition circulating phone banks postage, delivery and messenger services professional services (legal, accounting)  Print ads  RAD radio airlime and production costs  RED returned contributions  SAL campaign workers' salaries t.v. or cable airlime and production costs transfer between committees of the same candidate/sponsor voter registration WEB information technology costs (internet, e-mail)	nayment, you may enter the code.  member communications meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting) print ads	es the payment, you may e MBR member communications MTG meetings and appearanc OFC office expenses PET petition circulating PHO phone banks POL polling and survey resea POS postage, delivery and mo PRO professional services (le PRT print ads	CODES: If one of the following codes accurately describes the CMP campaign paraphemalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees FND fundraising events  ND independent expenditure supporting/opposing others (explain)*  POS LEG legal defense  LIT campaign literature and mailings  MRO PRI  POS PRO  PRO  PRO  PRO  PRO  PRO  PRO  PRO

Statement of Organization Recipient Committee	2	ntin ink /2	REC	RECEIVED AND FILE STATEMENT OF ORGANIZATION OF the State of California FORM	OF STATEMENT OF ORGANIZATION OF STATE CALIFORNIA 4.10	DC.
Statement Type (X) Initial  Not yet qualified (X) or	ĭ	☐ Amendment ☐ Termination – See Part List I.D. number: List I.D. number.	ee Part 5	of the State of Calloring	For Official Use Only 1	
		##	包	KEVIN SHELLEY, Secretary of State		
Date qualified as committee	nittee	Date qualified as committee  (if applicable)  Date of Termination	I		Science Section	

				ယ																:-	
Executed on	Executed on	Executed on	Executed on 01/12/04	Verification  I have used all reasonable diligence in preparing this statement and to the best of my knowledge the information contained herein 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.	Attach additional information on appropriately labeled continuation sheets	Los Angeles	COUNTY OF DOMICILE		OPTIONAL: FAX / E-MAIL ADDRESS		MAILING ADDRESS (IF DIFFERENT)	Burbank	CITY	601 S Glenoaks Blvd. #211	SIREEI ADDRESS (NO RO. BOX)			Committee to Continue the Progress of El Segundo	NAME OF COMMITTEE	Committee Information	Date qualified as committee
			4	in preparing of California th	iately labeled c		COUNTY WHER					CA	STATE					gress of El S			ommittee
	1		I,	this statemen at the foregoi	ontinuation she		E COMMITTEE IS OF DOMICILE					91502	ZIP CODE					egundo		76.1	Date qualified as committee (If applicable)
By _	Ву	₽	By Kinde Durkee	t and to the best of my ng is true and correct.	ets.		COUNTY WHERE COMMITTEE IS ACTIVE IF DIFFERENT THAN COUNTY OF DOMICILE					818-260-0669	AREA CODE/PHONE	3							lified as committee (If applicable)
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT	SIGNATURE OF CONTROLLING OF	SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT	2	knowledge the information cont	פודץ		MAII ING ADDRESS	NAME AND POSITION OF OTHER PRINCIPAL OFFICER(S), IF APPLICABLE		CITY	O INTERIOR ADDITION	017777	NAME OF ASSISTANT TREASURER, IF ANY	Burbank	CITY	601 S Glenoaks Blvd.	STREET ADDRESS	Kinde Durkee	NAME OF TREASURER	<ol><li>Treasurer and Ot</li></ol>	Date of Termination
FICEHOLDER, CANDIDATE,	NG OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT	FICEHOLDER, CANDIDATE,	SIGNATURE OF TREASURER OR ASSISTANT TREASURER	ained herein is true	S			IER PRINCIPAL OFFICE		S			URER, IF ANY	0	ST	Blvd. #211				Other Principal Officers	
OR STATE MEASUR	OR STATE MEASUR	OR STATE MEASUR	T TREASURER	and complete	STATE ZIP CODE			R(S), IF APPLICA		STATE ZIP CODE		24		CA 91502	STATE ZIP CODE					Officers	
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# Statement of Organization Recipient Committee

INSTRUCTIONS ON REVERSE

CALIFORNIA 410
FORM

Committee :	
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Committee to Continue the Progress of El Segundo	
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Segundo	

## Controlled Committee

Type of Committee Complete the applicable sections.

- List the name of each controlling officeholder, candidate, or state measure proponent. If candidate or officeholder controlled, also list the elective office sought or held, and district number, if any, and the year of the election.
- List the political party with which each officeholder or candidate is affiliated or check "non-partisan."
- If this committee acts jointly with another controlled committee, list the name and identification number of the other controlled committee.

SUPPOR.

# Statement of Organization Recipient Committee

STATEMENT OF ORGANIZATION CALIFORNIA 410
FORM

INSTRUCTIONS ON BEVERSE		
	Page 3	*
COMMITTEE NAME	I.D. NUMBER	
Committee to Continue the Progress of El Segundo		
4. Type of Committee (Continued)		
General Purpose Committee  Not formed to support or oppose specific candidates or measures in a single election. Check only one box:  CITY Committee  COUNTY Committee  STATECommittee		
PROVIDE BRIEF DESCRIPTION OF ACTIVITY		
To Support and/or oppose candidates and/or ballots in an election		
Sponsored Committee List additional sponsors on an attachment.		
NAME OF SPONSOR		
STREET ADDRESS NO. AND STREET CITY STATE ZIP CODE		
Small Contributor Committee	he committee qualified	as a
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- 5. Termination Requirements By signing the verification, the treasurer, assistant treasurer and/or candidate, officeholder, or proponent certify that all of the following conditions have been met:
- This committee has ceased to receive contributions and make expenditures;
- This committee does not anticipate receiving contributions or making expenditures in the future;
- This committee has eliminated or has no intention or ability to discharge all debts, loans received, and other obligations;
- This committee has no surplus funds; and
- This committee has filed all campaign statements required by the Political Reform Act disclosing all reportable transactions
- -- There are restrictions on the disposition of surplus campaign funds held by elected officers who are leaving office and by defeated candidates. Refer to Government Code Section 89519.



7002 3150 0004 5880 4993

\* \* # CHINEYBOWES

1400 U.S. POSTAGE P85557779 2450 \$ 04.880 MAR 03 2004 7026 MAILED FROM ZIP CODE 91502



TO:

El Segundo City Clerk 350 Main Street El Segundo, CA 90245

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### City of El Segundo

### Cathy Domann, CMC Deputy City Clerk

### **Elected Officials:**

Kelly McDowell, Mayor John G. Gaines, Mayor Pro Tem Jim Boulgarides, Council Member Eric K. Busch, Council Member Carl Jacobson, Council Member Cindy Mortesen, City Clerk Ralph Lanphere, City Treasurer

### **Appointed Officials:**

Mary Strenn, City Manager Mark D. Hensley, City Attorney

### **Department Directors:**

Jeffrey Stewart, Assistant City Manager Bret Plumlee, Administrative Services James Hansen, Community, Economic and Development Services Norm Angelo, Fire Chief Debra Brighton, Library & Cable Services Jack Wayt, Police Chief Interim Director, Public Works Stacia Mancini, Recreation & Parks

www.elsegundo.org

January 12, 2005

Kinde Durkee 601 S. Glenoaks BI #211 Burbank, CA 91502

RE: Semi-Annual Form 460 Committee Campaign Statement – Committee to Continue the Progress of El Segundo

Dear Ms. Durkee:

This is a reminder that your Semi-Annual Form 460, covering the period of July 1, 2004 through December 31, 2004, is due to be filed in the City Clerk's office by 5:00 p.m. January 31, 2005.

Should you have any questions regarding the above, or should you need forms, please feel free to contact this office.

Sincerely,

Cathy Domann, CMC Deputy City Clerk



### City of El Segundo

Cindy Mortesen, CMC
City Clerk

July 26, 2004

Kinde Durkee 601 S. Glenoaks BI #211 Burbank, CA 91502

RE: Semi-Annual Form 460 Committee Campaign Statement – Committee to Continue the Progress of El Segundo

Dear Ms. Durkee:

This is just a reminder that your Semi-Annual Form 460, covering the period of April 16, 2004 through June 30, 2004, is due to be filed in the City Clerk's office by 5:00 p.m. July 30, 2004.

Should you have any questions regarding the above, or should you need any additional forms, please feel free to contact this office.

Sincerely,

Cathy Domann, CMC Deputy City Clerk



### City of El Segundo

Cindy Mortesen, CMC
City Clerk

June 29, 2004

Kinde Durkee Committee to Continue the Progress of El Segundo 601 S. Glenoaks Bl #211 Burbank, CA 91502

RE: Semi-Annual Form 460 Recipient Committee Campaign Statement - Long Form

Dear Ms. Durkee:

Your Semi-Annual Form 460, covering the period April 16, 2004 through June 30, 2004, is due to be filed in the City Clerk's office by 5:00 p.m. July 30, 2004.

Should you have any questions regarding the above, or should you need any additional forms, please feel free to contact this office.

Sincerely,

Cathy Dmann, CMC Deputy City Clerk