Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in	ink.	CENSED	CALIF 200 FO	ORNIA 1/02 RM
SEE INSTRUCTIONS ON REVERSE	Statement covers period from 07/01/2022 through 09/24/2022	Date of election if applicable: (Month, Day, Year) 22 SE 11/08/2022	P 29 PH 4 F COSTA HE		1 of 23 Official Use Only
1. Type of Recipient Committee: All Committees - Co	omplete Parts 1, 2, 3, and 4,	2. Type of Statement:	- yy	2010	1 and and a second
 Officeholder, Candidate Controlled Committee State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee 	Primarily Formed Ballot Measure Committee Controlled Sponsored Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee Also Complete Part 7)	 Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Terminati Amendment (Explain below) 	on)	Quarterly Staten Special Odd-Ye: Supplemental Pr Statement - Atta	ar Report reelection
3. Committee information	d. NUMBER 397147	Treasurer(s) NAME OF TREASURER Tammi McIntyre MAILING ADDRESS			
STREET ADDRESS (NO P.O. BOX)		CITY		ZIP CODE	AREA CODE/PHONE
CITY STATE ZIP CO		Fullerton		92835-4135	949-697-7532
	DDE AREA CODE/PHONE 5-4135 (949) 697-7532	Joanna Barcelona			
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. E		MAILING ADDRESS 1400 N Harbor Blvd Suite 550			.
CITY STATE ZIP CO	DDE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
		Fullerton	CA S	92835-4135	714-745-5281
OPTIONAL FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRESS			
(949) 271-4896 t-mac-consulting@pacbell.net					
4. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California 00/26/2022	a that the foregoing is true and correct.	The second	in the attached s	chedules is true a	nd complete. I certify
Executed on	_{By} Tammi McIr	Sighsture of Treusurer or Assistant Treusurer			
Executed on	By Andrea Mar Signature of Co		Responsible Officer of S	ponsor	
Executed on Date	Ву	Signature of Controlling Officeholder, Candidate, State Measu	re Proponent		

By .

		and the second se	
Signature of Controlling	Officeholder,	Candidate,	State Measure Proponent

Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772) State of California

Birect File

Executed on ____

Date

COVER PAGE - PART 2

	FORN DRM	^{IA} 460
Page _	2	_ of <u>23</u>

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIS Held : City Council Member	TRICT NUMBE	R IF APPLICABL	E)
City- City of Costa Mesa			3
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP
Cos	ta Mesa	CA 9262	6-5604

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.

COMMITTEE NAME		I.D. NUMB	ER
NAME OF TREASURER	ALC: STATE		
COMMITTEE ADDRESS	STREET ADDRESS (N	O P.O. BOX)	
CITY	STATE	ZIP CODE	AREA CODE/PHONE
COMMITTEE NAME		I.D. NUME	ER
NAME OF TREASURER	···		
COMMITTEE ADDRESS	STREET ADDRESS (N	IO P.O. BOX)	
CITY	STATE	ZIP CODE	AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME C	OF BALL	OTMEA	SURE

JURISDICTION	
	JURISDICTION

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY	

7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

OFFICE SOUGHT OR HELD	SUPPORT OPPOSE
OFFICE SOUGHT OR HELD	
OFFICE SOUGHT OR HELD	SUPPORT
OFFICE SOUGHT OR HELD	SUPPORT
	OFFICE SOUGHT OR HELD

Attach continuation sheets if necessary

SS TRACK LARKS



Campaign Disclosure Statement Summary Page	A	Type or print in ink. Amounts may be rounded to whole dollars.			State	ment covers period 07/01/2022	CALIFORNIA FORM 460	
SEE INSTRUCTIONS ON REVERSE					through	09/24/2022	Page of	
NAME OF FILER Marr for City Council 2022							I.D. NUMBER 1397147	
Contributions Received	ł	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)		Colur CALENDA TOTAL TO	RYEAR		nmary for Candidates he State Primary and	
1. Monetary Contributions Schedule A, Line 3	\$	22574.40	\$:	33081.11			
2. Loans Received Schedule B, Line 3		470.81			470.81	1/1	through 6/30 7/1 to Date	
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	23045.21	\$		33551.92	20. Contributions Received \$	\$	
4. Nonmonetary Contributions Schedule C, Line 3		41.70			41.70	21 Expenditures		
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	23086.91	\$	00500 CO		Made \$	\$\$	
Expenditures Made						Expenditure Limit	Summary for State	
5. Payments Made Schedule E, Line 4	\$	15074.35	\$	-	18204.17	Candidates		
7. Loans Made Schedule H. Line 3		0.00			0.00			
B. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	15074.35	\$		18204.17		ve Expenditures Made* to Voluntary Expenditure Limit)	
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3		0.00		-	0.00	Date of Election	Total to Date	
10. Nonmonetary Adjustment Schedule C, Line 3		41.70			41.70	(mm/dd/yy)		
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$	15116.05	\$		18245.87	///////	\$	
Current Cash Statement		-init-ad				/	\$	
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	13831.43	То	calculate Co	lumn B, add			
13. Cash Receipts		23045.21	an	ounts in Col	umn A to the			
14. Miscellaneous Increases to Cash Schedule I, Line 4		12.00		responding n Column B	of your last	*Amounts in this section may be different from an reported in Column B.		
15. Cash Payments		15074.35		ort. Some a	mounts in be negative			
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	21814.29	fig	ires that sho	ould be	317		
If this is a termination statement, Line 16 must be zero.			pe	iod amounts	. If this is			
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for	first report this calenda ry over the	r year, only			
Cash Equivalents and Outstanding Debts		NEWSON W	1 399003	n Lines 2, 7				
18. Cash Equivalents See instructions on reverse	\$	0.00	CET IS					
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	470.81					FPPC Form 460 (January	

Direct File

Schedule Monetary	Contributions Received	Amounts may be rounded to whole dollars.		Statement cov from07/0	CALIFORNIA 460				
	DNS ON REVERSE			through09/2	4/2022	Page _	4 of23		
NAME OF FILER	Council 2022				12	I.D. NUN 139714	Second Second		
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 CALENDAR Y (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)		
07/02/2022	Kevin Johnson	XIND Business Development COM GlidePath OTH PTY SCC SCC	250.00 250.00	0 250.00		100.00 G 18 250.00 G 22			
07/05/2022	John Stephens for Mayor 2022 ID :1439034	☐ IND		1000.00	1000.00 125.00 350.00		1000.00		1000.00 G 22
07/05/2022	Nicholas Thomas	IND COM OTH PTY SCC	Owner CloudComm	25.00			50.00 G 18 225.00 G 22		
07/06/2022	Orange County Employees Assolation PAC	☐ IND X COM ☐ OTH ☐ PTY ☐ SCC		350.00			350.00 G 22 1000.00 G 18		
07/07/2022	James Zaniboni	XIND COM OTH PTY SCC	EVP Willdan	250.00	2	250.00	250.00 G 22		
			SUBTOTAL	\$ 1875.00	ALS: 34 %				
1. Amount re (Include a	A Summary eceived this period – itemized monetary contributions. Il Schedule A subtotals.) eceived this period – unitemized monetary contributions			22225.81 348.59	IND COM OTH PTY	(other the contract of the con	nt Committee han PTY or SCC) e.g., business entity) Party		
	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colu	mn A, Line 1.) TOTAL \$_	22574.40	sco		Form 460 (January/05)		

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Birect File

Monetary	A (Continuation Sheet) Contributions Received	Type or pri Amounts may to whole o	be rounded	from	ers period 1/2022 1/2022	CALIFORNIA FORM 460				
NAME OF FILER	Council 2022					1.D. NUM 139714	625608D			
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 CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)			
07/08/2022	Samuel Rey	ØIND COM OTH PTY SCC	Sales Proofpoint	259.11	509.11 250.00 180.00		250.00		509.11 G 22	
07/11/2022	Newport Beach Womens Democratic Club ID :C00570168	□IND XCOM OTH PTY SCC		250.00					400.00 G 18 250.00 G 22	
07/18/2022	Dennis Ashendorf	XIND COM OTH PTY SCC	Teacher Newport Mesa USD	20.00 180.00					230.00 G 18 300.00 G 22	
07/23/2022	Haverly Horton	XIND Unemployed COM N/A OTH PTY SCC 23.08		COM N/A 23.08 315		COM OTH PTY N/A 23.08 3	23.08 315.30		315.30	453.78 G 22
08/06/2022	Kathleen Esfahani	XIND COM OTH PTY SCC	Unemployed N/A	100.00	1	52.38	455.00 G 18 402.38 G 22			
			SUBTOTAL	\$ 652.19						

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	A (Continuation Sheet) Contributions Received	Type or pri Amounts may to whole o	be rounded	Statement covers period from 07/01/2022 through 09/24/2022		SCHEDULE A (CONT.) LIFORNIA FORM 460
MAME OF FILER	Council 2022					NUMBER 7147
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/06/2022	Dan Kalmick	XIND COM OTH PTY SCC	IT Consultant Flashlight Technologies	250.00	250.0	250.00 G 22
08/06/2022	Samuel Rey	XIND COM OTH PTY SCC	Sales Proofpoint	250.00	509.1	509.11 G 22 1
08/06/2022	Greg Ridge	XIND COM OTH PTY SCC	Chef GR Chef Serices	103.83	362.9	200.00 G 18 362.94 G 22
08/06/2022	Stephen Ryan	XIND COM OTH PTY SCC	Engineer Northrop Grumman Corp	500.00	500.0	500.00 G 22
08/06/2022	Cynthia Vasquez	XIND COM OTH PTY SCC	Founder Propel Consulting	100.00	100.0	100.00 G 22
	·		SUBTOTAL	\$ 1203.83		

	A (Continuation Sheet) Contributions Received	Type or pri Amounts may to whole o	be rounded [Statement covers period from		SCHEDULE A (CONT.) ALIFORNIA FORM 460
	Council 2022				1000	97147
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER 1.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEAR (JAN. 1 - DEC. 31)	TODATE
08/06/2022	Colleen Wall	ØIND COM OTH PTY SCC	Manager Boeing	100.00	100.	100.00 G 22
08/06/2022	Harold Weitzberg		Consultant Weitzberg Consulting	259.11	259.	259.11 G 22 11 100.00 G 18
08/07/2022	Mariel LeValley	XIND COM OTH PTY SCC	Bookkeeper RC Edwards & Co, CPA	100.00	100.	100.00 G 22
08/10/2022	Kathleen Treseder	XIND COM OTH PTY SCC	Professor UCI	100.00	100.	100.00 G 22
08/11/2022	Leah Ersoylu	XIND COM OTH PTY SCC	Consultant Ersoylu Consulting	250.00 250.00		250.00 G 22 500.00 G 18
			SUBTOTAL	\$ 809.11		



	A (Continuation Sheet) Contributions Received	Type or pri Amounts may to whole o	be rounded	Statement covers period from 07/01/2022 through 09/24/2022		SCHEDULE A (CONT.) CALIFORNIA FORM 460 Page 8 of 23
NAME OF FILER	Council 2022					1.0. NUMBER 1397147
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YE/ (JAN. 1 - DEC. 3	AR TO DATE
08/11/2022	Mike Lingle		Unemployed N/A	155.59	15	155.59 G 22
08/11/2022	Florence Martin	XIND COM OTH PTY SCC	Retired N/A	2000.00	300	4000.00 G 22 0.00 1000.00 G 18
08/13/2022	Leia Guccione		Principal Rocky Mountain Institute	517.91	51	100.00 G 10 7.91 517.91 G 23
08/17/2022	Dave Min for State Senate 2024 ID :1435246			500.00	50	500.00 G 2
08/18/2022	Dennis Ashendorf	XIND COM OTH PTY SCC	Teacher Newport Mesa USD	20.00	18	230.00 G 1 0.00 300.00 G 2
			SUBTOTAL	\$ 3193.50		



Monetary	A (Continuation Sheet) Contributions Received	Type or pri Amounts may to whole o	be rounded	Statement covers period from		SCHEDULE A (CONT CALIFORNIA FORM 460 Page 9 of 23	
NAME OF FILER Marr for City	Council 2022					NUMBER 97147	
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 DAT CALENDAR YEAR (JAN. 1 - DEC. 31)	E PER ELECTION TO DATE (IF REQUIRED)	
08/23/2022	Haverly Horton	XIND COM OTH PTY SCC	Unemployed N/A	23.08	315.3	453.78 G 22	
08/29/2022	Dara Weinraub	XIND COM OTH PTY SCC	Program Manager USC	500.00	500.0	500.00 G 22	
08/29/2022	Women in Leadership ID .C00790790			250.00	750.0	750.00 G 22 00 2000.00 G 18	
09/01/2022	Greg Ridge	XIND COM OTH PTY SCC	Chef GR Chef Serices	259.11 362.94		362.94 G 22 200.00 G 18	
09/03/2022	CJ Segerstrom & Sons	IND COM XOTH PTY SCC		249.00	249.0	249.00 G 22	
			SUBTOTAL	\$ 1281.19			

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	A (Continuation Sheet) Contributions Received	Type or pri Amounts may to whole o	be rounded	Statement covers period from 07/01/2022		CALIFORNIA FORM 460			
				through09/24	Page	10 of 23			
NAME OF FILER	Council 2022			1		I.D. NUM 139714			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) 1000.00 4500.00		PER ELECTION TO DATE (IF REQUIRED)		
09/07/2022	Broadway Homes	☐ IND ☐ COM [X] OTH ☐ PTY ☐ SCC		1000.00			1000.00		0.00 G 22
09/07/2022	Michelle Murphy for School Board 2018	☐ IND IX COM ☐ OTH ☐ PTY ☐ SCC		4500.00			4650.00 G 22		
09/12/2022	Orange County League of Conservation Voters ID :1223961	☐ IND X COM ☐ OTH ☐ PTY ☐ SCC		500.00	5	00.00	500.00 G 22		
09/16/2022	Kristen Kavanaugh		Unemployed N/A	250.00	350.00		350.00 G 22 150.00 G 18		
09/18/2022	Dennis Ashendorf		Teacher Newport Mesa USD	20.00	1	80.00	230.00 G 18 300.00 G 22		
		*	SUBTOTAL	\$ 6270.00	an a				



A (Continuation Sheet) Contributions Received	Amounts may	be rounded	Statement covers period 07/01/2022		CALIFORNIA FORM 460			
			through09/24	9/24/2022 Page 11 of				
Council 2022			.* 53			2010/06/26		
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	CALENDAR YE	AR	PER ELECTION TO DATE (IF REQUIRED)		
Costa Mesa Firefighters Association Local 1465 PAC	☐ IND X COM ☐ OTH ☐ PTY ☐ SCC		4900.00	4900.00 500.00		4900.00		4900.00 G 22 6251.13 G 18
Planned Parenthood of Orange & San Bernardino Countyies PAC	☐ IND X COM ☐ OTH ☐ PTY ☐ SCC		500.00			500.00 G 22 500.00 G 18		
Women for American Values and Ethics	IND X COM OTH PTY SCC		1000.00	100	0.00	500.00 G 18 1000.00 G 22		
Haverly Horton	XIND COM OTH PTY SCC	Unemployed N/A	23.08	315.30		453.78 G 22		
Steven Acevedo	XIND COM OTH PTY SCC	CEO Regatta	517.91	51	7.91	1000.00 G 18 1017.91 G 22		
	Contributions Received Council 2022 FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Costa Mesa Firefighters Association Local 1465 PAC ID :1377067 Planned Parenthood of Orange & San Bernardino Countyies PAC ID :1282464 Women for American Values and Ethics ID :1411182 Haverly Horton ID :1411182	Contributions Received Amounts may to whole Council 2022 FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CONTRIBUTOR CODE * Costa Mesa Firefighters Association Local 1465 PAC IND COM ID :1377067 SCC IND Planned Parenthood of Orange & San Bernardino Countyies PAC IND COM ID :1282464 SCC IND COM ID :1411182 SCC IND COM Haverly Horton XIND COM OTH PTY Steven Acevedo XIND COM	Contributions Received Amounts may be rounded to whole dollars. Council 2022 FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (FOOMMITTEE, ALSOBATER I.D. NUMBER) CONTRIBUTOR CODE * IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER OF BUSINESS) Costa Mesa Firefighters Association Local 1465 PAC IND OF BUSINESS) ID :1377067 SCC IND Planned Parenthood of Orange & San Bernardino Countyies PAC IND Women for American Values and Ethics IND Women for American Values and Ethics SCC Haverly Horton XIND Unemployed N/A OTH PTY Steven Acevedo XIND Common County is Steven Acevedo XIND CEO	Contributions Received Amounts may be rounded to whole dollars. Statement cover from	Contributions Received Amounts may be rounded to whole dollars. Statement covers period from 07/01/2022 Image: Statement covers period to whole dollars. 07/01/2022 Council 2022 09/24/2022 FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (PCOMMITTER ALSOENTERID NUMBER) CONTRIBUTOR CODE * IF AN INDIVIDUAL, ENTER OCCUPATION AND BMPLOYER OCCUPATION AND BMPLOYER OF BURDARY PERIOD Clumulative tor Calendary PERIOD Costa Mesa Firefighters Association Local 1465 PAC IND Coode * (IF SEF-AMCYCE DIFER MARE OF BURDARY PERIOD Clumulative tor Calendary PERIOD Clumulative tor Calendary PERIOD ID :1377067 ID :1377067 Statement covers and Ethics IND Statement covers and Ethics Statement covers and Ethics 1000.00 50 ID :1282464 Statement covers and Ethics IND Statement covers and Ethics 1000.00 100 ID :1411182 Statement covers and Ethics Statement covers and Ethics Unemployed 23.08 31 ID :1411182 Statement covers and Ethics 1000.00 100 ID :1411182 Statement covers and Ethics Statement covers and Ethics Statemen	Contributions Received Amounts may be rounded to whole dollars. Statement covers period 77/01/2022 CALICG from 07/01/2022 09/24/2022 Page Council 2022 ID. NUME 09/24/2022 Page FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (PECOMUTTER ALSOENTERID NUMBER) CONTRIBUTOR CODE * IF AN INDIVIDUAL, ENTER OCCUPATION AND EMERAGE AMOUNT RECEIVED THIS CLAURURE VEAR (IAN. 1 - DEC. 31) Costa Mesa Firefighters Association Local 1465 PAC IND COM A900.00 4900.00 ID :1377067 ID :1377067 IND COM 500.00 500.00 500.00 ID :1222464 ID :1222464 ID :1222464 ID :1222464 ID :1000.00 1000.00 1000.00 1000.00 ID :1411182 ID :1411182 ID :1000.00 ID :1000.00 1000.00		

Direct File

Ostadula D. David	2	Type or print in	ink.	-			SCHE	DULE B - PART 1
Schedule B – Part 1 Loans Received	Ame	ounts may be ro to whole dollar			Statement cov from07/(o1/2022	CALIFORNI FORM	^A 460
				2	through09/2	24/2022	Page 12	of
SEE INSTRUCTIONS ON REVERSE NAME OF FILER			~				I.D. NUMBER	
Marr for City Council 2022							1397147	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIOL	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Andrea Marr	Director Willdan				s 470.81	0.00%	s 470.81	CALENDAR YEAR
		s0.00	\$470.81	FORGIVEN	12/31/2022 DATE DUE	RATE \$0.00	08/11/2022 DATE INCURRED	PER ELECTION** 661.85 G 18 \$ 470.81 G 22
A				PAID \$FORGIVEN	_ \$	%	s	CALENDAR YEAR \$ PER ELECTION **
		s	s	s	DATE DUE	s	DATE INCURRED	\$
				PAID S FORGIVEN	_ \$	%	s	CALENDAR YEAR \$ PER ELECTION **
		\$	\$	\$	DATE DUE	\$	DATE INCURRED	s
		SUBTOTALS	470.81	\$ 0.0	00 \$ 470.81	alle ser stations		
Schedule B Summary					2.2.7	(Enter (e) on Schedule E, Line 3)		
 Loans received this period	0 paid or forgiven.) at are also itemized on Scher e 2 from Line 1.)	dule A.)			470.81 0.00 470.81 (May be a negative number)		Contributor Codes ID – Individual OM – Recipient Co (other than TH – Other (e.g., TY – Political Party CC – Small Contrit	ommittee PTY or SCC) business entity) y
*Amounts forgiven or paid by another party also ** If required.	must be reported on Schedule A.	.)			مىرىنىيەر يىلىرى مىرىنىيەر بىلىرى		FPPC Form	460 (January/05)



Schedule Nonmone	C tary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		S			RM 400		
SEE INSTRUCTION	IS ON REVERSE				thro	ugh	.2	Page	13 of 23	
NAME OF FILER	Council 2022							1.D. NUME		
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 C GOODS OR SERVE	10.00 T 10.00	AMOUNT/ FAIR MARKET VALUE	CALE	JLATIVE TO DATE NDAR YEAR 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)	
		□IND □COM □OTH □PTY □SCC								
		□IND □COM □OTH □PTY □SCC								
		□IND □COM □OTH □PTY □SCC								
		□IND □COM □OTH □PTY □SCC								
Attach additi	onal information on appropriately labe	eled continuati	on sheets.	SUBTO	TAL \$	0.00				
1. Amount rec	C Summary weived this period – itemized nonmonetant Schedule C subtotals.)			· · · · ·	\$	0.0	~ II	Contributor Co ID – Individual OM – Recipien		
	eived this period – unitemized nonmone					41.7	_	(other th	an PTY or SCC)	
3. Total nonmo	onetary contributions received this period 1 and 2. Enter here and on the Summar	I.				41.7	IS	OTH – Other (e.g., business entity) PTY – Political Party SCC – Small Contributor Committee		

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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	Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period from 07/01/2022	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through09/24/2022	Page of
NAME OF FILER			I.D. NUMBER
Marr for City Council 2022			1397147

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
McIntyre & Barcelona, LLC 1440 N Harbor Blvd., Suite 707 Fullerton, CA 92835	PRO		300.00
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		46.82
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		19.95
* Payments that are contributions or independent expenditures must a	also be summarized on Schedule D	. SUBTOTAL\$	366.77

Schedule E Summary

14896.65	\$ 1. Itemized payments made this period. (Include all Schedule E subtotals.)	
177.70	 Uniternized payments made this period of under \$100 	
0.00	 Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	
15074.35	 Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) 	



Schedule E Type or print in ink. (Continuation Sheet) Amounts may be rounded to whole dollars. SEE INSTRUCTIONS ON REVERSE NAME OF FILER MARE OF FILER Marr for City Council 2022 CODES: If one of the following codes accurately describes the payment, you may enter the code. Ot compaign paraphernalia/misc. MBR member communications CMP campaign paraphernalia/misc. MBR member communications CNS campaign consultants MTG meetings and appearances CVC civic donations PET petition circulating FIL candidate filing/ballot fees PHO phone banks FND fundraising events POL polling and survey research ND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services (legal, accounting) ILG ampaign literature and mailings PRO professional services (legal, accounting)				from	escribe the payment dio airtime and production turned contributions mpaign workers' salaries or cable airtime and pro ndidate travel, lodging, ar aff/spouse travel, lodging,	tion costs ries production costs , and meals ing, and meals ittees of the same candidate/s		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DE	SCRIPTION O			AMOUN	T PAID
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107		WEB						11.88
California Latino Voters' Guide 930 Colorado Blvd Bldg 1 Los Angeles, CA 90041-1735		PRT			N			250.00
Navy Federal Credit Union P. O. Box 3500 Merrifield, VA 22119-3500		OFC						1688.20
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107		WEB						10.55
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107		WEB						10.92

SUBTOTAL \$ 1971.55

DirectFile

Schedule E				SCHEDULE E (CONT.)
(Continuation Sheet)	Type or prin Amounts may b		Statement covers period	CALIFORNIA
Payments Made	to whole de		from07/01/2022	FORM 460
			through09/24/2022	Page 16 of 23
SEE INSTRUCTIONS ON REVERSE	30222	н		I.D. NUMBER
Marr for City Council 2022				1397147
CODES: If one of the following codes accurately descr	ibes the payment, y	you may enter the code. C	Otherwise, describe the payment.	
CMP campaign paraphernalia/misc.	MBR member con	nmunications Id appearances	RAD radio airtime and production RFD returned contributions	costs
CNS campaign consultants CTB contribution (explain nonmonetary)*	MTG meetings an OFC office exper		SAL campaign workers' salaries	
CVC civic donations	PET petition circu	ulating	TEL t.v. or cable airtime and prod	
FIL candidate filing/ballot fees	PHO phone banks		TRC candidate travel, lodging, and TRS staff/spouse travel, lodging, a	
FND fundraising events IND independent expenditure supporting/opposing others (explain)*	POL polling and POS postage, de	survey research livery and messenger services		s of the same candidate/sponsor
LEG legal defense	PRO professional	services (legal, accounting)	VOT voter registration	
LIT campaign literature and mailings	PRT print ads		WEB information technology costs	(internet, e-mail)
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Stripe				
185 Berry St, Suite 550		WEB		1.12
San Francisco, CA 94107				
Stripe				
185 Berry St, Suite 550		WEB		0.71
San Francisco, CA 94107				
Stripe				
185 Berry St, Suite 550		WEB		1.25
San Francisco, CA 94107				100404003
McIntyre & Barcelona, LLC				
1440 N Harbor Blvd., Suite 707		PRO		307.75
Fullerton, CA 92835		110		
Navy Federal Credit Union				
P. O. Box 3500		POS		333.76
Merrifield, VA 22119-3500				
* Payments that are contributions or independent expenditures mus	t also be summarized on	Schedule D.	SU	BTOTAL \$ 644.59
· · · · · · · · · · · · · · · · · · ·				011.00



Schedule E Type or print (Continuation Sheet) Amounts may be to whole do Payments Made to whole do SEE INSTRUCTIONS ON REVERSE NAME OF FILER Marr for City Council 2022 Marr for City Council 2022	rounded	from 07/01/2022 through 09/24/2022 Pag	SCHEDULE E (CONT.) LIFORNIA 460 FORM 23 ge 17 of 23 NUMBER 7147
CTB contribution (explain nonmonetary)* OFC office expen CVC civic donations PET petition circul FIL candidate filing/ballot fees PHO phone banks FND fundraising events POL polling and s IND independent expenditure supporting/opposing others (explain)* POS postage, deli	nunications appearances ses	therwise, describe the payment. RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production TRC candidate travel, lodging, and meal TRS staff/spouse travel, lodging, and m TSF transfer between committees of th VOT voter registration WEB information technology costs (inter-	s eals e same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR C	DESCRIPTION OF PAYMENT	AMOUNT PAID
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		80.75
City of Costa Mesa 77 Fair Dr Costa Mesa, CA 92626-6520	FIL		470.81
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		1.16
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107	WEB		4.40
CA Slates 249 E Ocean Blvd Ste 670 Long Beach, CA 90802-4849	PRT		745.20
* Payments that are contributions or independent expenditures must also be summarized on	Schedule D.	SUBTOT	AL\$ 1302.32

Direct File

Schedule E (Continuation Sheet) Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER Marr for City Council 2022	Type or print in ink. Amounts may be rounded to whole dollars.			Staten from through _	nent covers period 07/01/2022 09/24/2022	CALIFO FOR	M 400
CODES: If one of the following codes accurately describes CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings an OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, del	munications d appearance ises lating survey resear ivery and me	PS	RAD rad RFD retu SAL can TEL t.v. TRC can TRS stat TSF trar VOT voto	scribe the paymen to airtime and production in a contributions in paign workers' salarie or cable airtime and pr ididate travel, lodging, a ff/spouse travel, lodging, isfer between committed er registration immation technology cos	on costs es roduction costs and meals g, and meals sees of the sam	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION OF	PAYMENT		AMOUNT PAID
Democratic Party of Orange County 1475 S State College Blvd Ste 110 Anaheim, CA 92806-5701 ID :742006		WEB					500.00
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107		WEB					17.23
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107		WEB					21.53
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107		WEB					2.35
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107		WEB					1012.00
* Paymente that are contributions or independent expanditures must als							1553 11

SUBTOTAL \$ 1553.11

Direct File

Schedule E (Continuation Sheet) Payments Made	ation Sheet) Amounts may be rounded to whole dollars.		S from thro	09/24/2022	SCHE CALIFORNI FORM Page 19	DULE E (CONT.) A 460 of 23	
NAME OF FILER Marr for City Council 2022	31. 16-9 U					I.D. NUMBER 1397147	
CODES: If one of the following codes accurately described 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 com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and a postage, del	munications d appearance ises lating survey resear- ivery and m	ces	RAD RFD SAL TEL TRC TRS TSF VOT	radio airtime and production returned contributions campaign workers' salaries t.v. or cable airtime and pro candidate travel, lodging, ar staff/spouse travel, lodging, transfer between committee	n costs duction costs ad meals and meals es of the same ca	5.2 o
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTIO	ON OF PAYMENT	A	MOUNT PAID
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107		WEB					0.71
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107		WEB					1.25
ARDA Campaigns 675 N Euclid St. #481 Anaheim, CA 92801		PRT					2911.00
Staples (Costa Mesa) 241 E 17th St Costa Mesa, CA 92627-3831		OFC					48.23

WEB

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 2981.99

20.80

Direct File

Stripe 185 Berry St, Suite 550

San Francisco, CA 94107

Schedule E (Continuation Sheet) Payments Made	Type or print Amounts may b to whole do	e rounded		S from throu	09/24/2022	SCH CALIFORM FORM Page 20	400
NAME OF FILER Marr for City Council 2022	- C				2	I.D. NUMBER 1397147	
CODES: If one of the following codes accurately des 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.com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and s POS postage, del	munications d appearance ises lating survey resear ivery and me	95	Otherwise, RAD RFD SAL TEL TRC TRS TSF VOT WEB	radio airtime and production returned contributions campaign workers' salaries t.v. or cable airtime and pro candidate travel, lodging, ar staff/spouse travel, lodging, transfer between committee voter registration	duction costs duction costs ad meals and meals es of the same	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTIC	ON OF PAYMENT		AMOUNT PAID
McIntyre & Barcelona, LLC 1440 N Harbor Blvd., Suite 707 Fullerton, CA 92835		PRO					300.00
Staples (Costa Mesa) 241 E 17th St Costa Mesa, CA 92627-3831		OFC					113.70
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107		WEB					10.92
COGS South 3309 S Main St Santa Ana, CA 92707-4406		СМР					2154.68

WEB

SUBTOTAL \$

0.71

2580.01

Direct File

185 Berry St, Suite 550

San Francisco, CA 94107

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

Stripe

Schedule E (Continuation Sheet) Payments Made	Jation Sheet) Amounts may be rounded			Statem from through _	09/24/2022 21			
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Marr for City Council 2022						i.D. NUMBE 1397147		
CODES: If one of the following codes accurately describ 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 com MTG meetings and OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, deli	munications d appearance ses lating survey resear- ivery and me	S	RAD radi RFD retu SAL carr TEL t.v. TRC can TRS staf TSF tran VOT vote	scribe the payment o airtime and productio inned contributions or cable airtime and pro didate travel, lodging, an f/spouse travel, lodging sfer between committe er registration rmation technology cos	n costs s oduction costs nd meals , and meals es of the sam	ne candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	DR I	DESCRIPTION OF	PAYMENT		AMOUNT PAID	
Broadway Homes 5900 Balcones Dr Ste 100 Austin, TX 78731-4257		RFD					1000.00	
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107		WEB					41.30	
Apollo Printing& Graphics 2100 W Lincoln Ave Anaheim, CA 92801-5640		PRT					102.36	
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107		WEB					2.43	
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107		WEB					20.80	
* Payments that are contributions or independent expenditures must al	so be summarized on	Schedule D.			S	UBTOTAL \$	1166.89	

Direct File

Schedule E				SCHEDULE E (CONT.					
(Continuation Sheet)	Type or print in ink. Amounts may be rounded			Statement covers period CALIFO				100	
Payments Made		to whole dollars.			from 07/01/2022			460	
SEE INSTRUCTIONS ON REVERSE				through 09/24/2022			Page 22 of		
NAME OF FILER Marr for City Council 2022		4				1.D. NUM			
						139714	/		
CODES: If one of the following codes accurately describe	s the payment, y	ou may ente	er the code. Oth	nerwise, des	scribe the paymen	it.			
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	OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, deli	d appearances ses lating survey research	enger services	RFD retu SAL can TEL t.v. TRC can TRS staf TSF tran VOT vote	to airtime and production inned contributions inpaign workers' salaries or cable airtime and pri- didate travel, lodging, a ff/spouse travel, lodging, isfer between committed r registration immation technology committed	es roduction cost and meals g, and meals ees of the sa	me candid	late/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	_	CODE OF	DE	SCRIPTION OF	PAYMENT		AMOU	NT PAID	
ARDA Campaigns 675 N Euclid St. #481 Anaheim, CA 92801		PRT						2313.70	
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107		WEB						10.55	
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107		WEB						3.13	
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107		WEB						1.33	
Stripe 185 Berry St, Suite 550 San Francisco, CA 94107		WEB				11		0.71	
* Payments that are contributions or independent expenditures must als	o be summarized on	Schedule D.			5	UBTOTAL	\$	2329.42	

Direct File

Schedule I Miscellaneous Inc	reases to Cash	Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers per from 07/01/202	2 FORM 40		
EE INSTRUCTIONS ON REVER	SE		through through	Page of		
Marr for City Council 20	22			1397147		
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DE	DESCRIPTION OF RECEIPT			
Attach additional inform	nation on appropriately labeled continuation sheets.		SU	BTOTAL \$ 0.0		
Schedule I Summa	ry					
	o cash this period.		\$	0.00		
	es to cash of under \$100 this period.			12.00		
	eceived this period on loans made to others. (Sc			0.00		
4. Total miscellaneous	increases to cash this period. (Add Lines 1, 2, a e 14.)	and 3. Enter here and on the		12.00		
				FPPC Form 460 (Janua		

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

