

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

RECEIVED  
CITY CLERK'S OFFICE  
CITY OF LAKE FOREST

Date of election if applicable:  
(Month, Day, Year)  
11/04/2014

12 JUL 31 P 3:24

Statement covers period  
from 05/20/2012  
through 06/30/2012

SEE INSTRUCTIONS ON REVERSE

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

- Officerholder, Candidate Controlled Committee
- State Candidate Election Committee
- Recall (Also Complete Part 5)
- General Purpose Committee
- Sponsored
- Small Contributor Committee
- Political Party/Central Committee
- Primary Formed Ballot Measure Committee
- Controlled (Also Complete Part 6)
- Sponsored (Also Complete Part 6)
- Primary Formed Candidate/Officerholder Committee (Also Complete Part 7)

**2. Type of Statement:**

- Pre-election Statement
- Semi-annual Statement
- Termination Statement (Also file a Form 410 Termination)
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report
- Supplemental Pre-election Statement - Attach Form 495

**3. Committee Information**

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Voigts For Lake Forest City Council 2014

I.D. NUMBER 1331261

**Treasurer(s)**

NAME OF TREASURER Mr. John Fugatt  
MAILING ADDRESS \_\_\_\_\_

STREET ADDRESS (NO P.O. BOX) \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ AREA CODE/PHONE \_\_\_\_\_  
Lake Forest, CA 92630  
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ AREA CODE/PHONE \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ AREA CODE/PHONE \_\_\_\_\_  
NAME OF ASSISTANT TREASURER, IF ANY \_\_\_\_\_  
MAILING ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ AREA CODE/PHONE \_\_\_\_\_

OPTIONAL: FAX / E-MAIL ADDRESS \_\_\_\_\_

**4. Verification**

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 07/31/2012 Date  
Executed on 07/31/2012 Date  
Executed on \_\_\_\_\_ Date  
Executed on \_\_\_\_\_ Date

By [Signature] Signature of Treasurer or Assistant Treasurer  
By [Signature] Signature of Controlling Officer/Candidate, State Measure Proponent or Responsible Officer of Sponsor  
By \_\_\_\_\_ Signature of Controlling Officer/Candidate, State Measure Proponent  
By \_\_\_\_\_ Signature of Controlling Officer/Candidate, State Measure Proponent

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

Type or print in ink.

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE  
Mr. Scott Voigts

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

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

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER JURISDICTION

SUPPORT  
 OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.  
NAME OF OFFICEHOLDER, CANDIDATE, OR PROPOSER

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

COMMITTEE NAME I.D. NUMBER

NAME OF TREASURER  YES  NO CONTROLLED COMMITTEE?

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME I.D. NUMBER

NAME OF TREASURER  YES  NO CONTROLLED COMMITTEE?

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

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

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

Attach continuation sheets if necessary

# Campaign Disclosure Statement Summary Page

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

SUMMARY PAGE

CALIFORNIA  
FORM **460**

Statement covers period  
from 05/20/2012  
through 06/30/2012

Page 3 of 7  
I.D. NUMBER  
1331261

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Voigts For Lake Forest City Council 2014

## Contributions Received

|                                       | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|---------------------------------------|--|--|
| 1. Monetary Contributions .....       | Schedule A, Line 3 \$ 0.00                                 | \$ 4,302.26                                |
| 2. Loans Received .....               | Schedule B, Line 3 0.00                                    | 0.00                                       |
| 3. SUBTOTAL CASH CONTRIBUTIONS .....  | Add Lines 1 + 2 \$ 0.00                                    | \$ 4,302.26                                |
| 4. Nonmonetary Contributions .....    | Schedule C, Line 3 0.00                                    | 0.00                                       |
| 5. TOTAL CONTRIBUTIONS RECEIVED ..... | Add Lines 3 + 4 \$ 0.00                                    | \$ 4,302.26                                |

## Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

1/1 through 6/30 7/1 to Date

20. Contributions Received \$ \_\_\_\_\_

21. Expenditures Made \$ \_\_\_\_\_

## Expenditures Made

|  |                                  |             |
|--|----------------------------------|-------------|
| 6. Payments Made .....                   | Schedule E, Line 4 \$ 1,500.00   | \$ 2,017.09 |
| 7. Loans Made .....                      | Schedule H, Line 3 2,700.00      | 2,700.00    |
| 8. SUBTOTAL CASH PAYMENTS .....          | Add Lines 6 + 7 \$ 4,200.00      | \$ 4,717.09 |
| 9. Accrued Expenses (Unpaid Bills) ..... | Schedule F, Line 3 0.00          | 182.64      |
| 10. Nonmonetary Adjustment .....         | Schedule C, Line 3 0.00          | 0.00        |
| 11. TOTAL EXPENDITURES MADE .....        | Add Lines 8 + 9 + 10 \$ 4,200.00 | \$ 4,899.73 |

## Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made\*  
(If Subject to Voluntary Expenditure Limit)

Date of Election \_\_\_\_\_ Total to Date \_\_\_\_\_  
(mm/dd/yyyy) \$ \_\_\_\_\_

## Current Cash Statement

|   |   |
|---|---|
| 12. Beginning Cash Balance .....          | Previous Summary Page, Line 16 \$ 12,892.01               |
| 13. Cash Receipts .....                   | Column A, Line 3 above 0.00                               |
| 14. Miscellaneous Increases to Cash ..... | Schedule I, Line 4 0.00                                   |
| 15. Cash Payments .....                   | Column A, Line 8 above 4,200.00                           |
| 16. ENDING CASH BALANCE .....             | Add Lines 12 + 13 + 14, then subtract Line 15 \$ 8,692.01 |

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

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

## LOAN GUARANTEES RECEIVED

|                                    |                            |
|------------------------------------|----------------------------|
| 17. LOAN GUARANTEES RECEIVED ..... | Schedule B, Part 2 \$ 0.00 |
|------------------------------------|----------------------------|

## Cash Equivalents and Outstanding Debts

|                             |   |
|-----------------------------|---|
| 18. Cash Equivalents .....  | See instructions on reverse \$ 2,700.00         |
| 19. Outstanding Debts ..... | Add Line 2 + Line 9 in Column B above \$ 182.64 |

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

FPPC Form 460 (January/06)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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

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

Statement covers period  
from 05/20/2012  
through 06/30/2012

CALIFORNIA  
FORM  
**460**

SCHEDULED

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Voigts For Lake Forest City Council 2014

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I.D. NUMBER  
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| 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) |
|--------------------|---|--|---------------------------|--------------------|---|------------------------------------|
| 06/02/2012         | <input type="checkbox"/> Support <input type="checkbox"/> Oppose                                    | <input checked="" type="checkbox"/> Monetary Contribution<br><input type="checkbox"/> Nonmonetary Contribution<br><input type="checkbox"/> Independent Expenditure |                           | 2,700.00           | 2,700.00  | 2,700.00                           |
| 06/10/2012         | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                         | <input checked="" type="checkbox"/> Monetary Contribution<br><input type="checkbox"/> Nonmonetary Contribution<br><input type="checkbox"/> Independent Expenditure | Flag Day Dinner Table     | 1,000.00           | 1,000.00  |                                    |
| <b>SUBTOTAL \$</b> |   |  |                           | <b>3,700.00</b>    |   |                                    |

**Schedule D Summary**

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) ..... \$ 3,700.00
- Unitemized contributions and independent expenditures made this period of under \$100 ..... \$ 0.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ..... **TOTAL \$** 3,700.00

FPPC Form 460 (January 05)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/276-3772)

# Schedule E Payments Made

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Voigts For Lake Forest City Council 2014

Statement covers period  
from 05/20/2012 through 06/30/2012

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1331261

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

|     |   |     |   |     |   |
|-----|---|-----|---|-----|---|
| OMP | 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)*                           | CFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | FET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FL  | 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  | TSE | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER ID. NUMBER)                     | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|--|------|----|------------------------|-------------|
| John Fugate<br>Huntington Beach, CA 92647  | PRO  |    |                        | 500.00      |
| Orange County Republican Party (#742088)<br>1422 Ridgeway, Ste 110<br>AUSTIN, CA 92780 | CTB  |    | Flag Day Dinner Table  | 1,000.00    |

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

**SUBTOTAL \$ 1,500.00**

## Schedule E Summary

- Itemized payments made this period. (Include all Schedule E subtotals.) ..... \$ 1,500.00
- Unitemized 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).) ..... \$ 0.00
- Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ..... **TOTAL \$ 1,500.00**

**Schedule F  
Accrued Expenses (Unpaid Bills)**

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

SCHEDULE F

CALIFORNIA  
FORM  
**460**

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

Voigts For Lake Forest City Council 2014

Statement covers period  
from 05/20/2012  
through 06/30/2012

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1331261

**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   | FET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER ID. NUMBER) | CODE OR<br>DESCRIPTION OF PAYMENT | (a)<br>OUTSTANDING<br>BALANCE BEGINNING<br>OF THIS PERIOD | (b)<br>AMOUNT INCURRED<br>THIS PERIOD | (c)<br>AMOUNT PAID<br>THIS PERIOD<br>(ALSO REPORT ON E) | (d)<br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD |
|---|-----------------------------------|---|---------------------------------------|---|--|
| Scott Voigts  | POS                               | 132.00  | 0.00                                  | 0.00  | 132.00   |
| <b>SUBTOTALS \$</b>   |                                   | 132.00 \$   | 0.00 \$                               | 0.00 \$   | 132.00   |

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

**Schedule F Summary**

- 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.) ..... **INCURRED TOTALS \$** 0.00
- 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 \$** 0.00
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... **NET \$** 0.00  
May be a negative number

**Schedule H  
Loans Made to Others\***

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

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

Voigts For Lake Forest City Council 2014

Statement covers period  
from 05/20/2012  
through 06/30/2012

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| FULL NAME, STREET ADDRESS AND ZIP CODE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)              | IF AN INDIVIDUAL, ENTER<br>OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER<br>NAME OF BUSINESS) | (a)<br>OUTSTANDING<br>BALANCE<br>BEGINNING THIS<br>PERIOD | (b)<br>AMOUNT<br>LOANED THIS<br>PERIOD | (c)<br>REPAYMENT OR<br>FORGIVENESS<br>THIS PERIOD*                                       | (d)<br>OUTSTANDING<br>BALANCE AT<br>CLOSE OF THIS<br>PERIOD | (e)<br>INTEREST<br>RECEIVED | (f)<br>ORIGINAL<br>AMOUNT OF<br>LOAN | (g)<br>CUMULATIVE<br>LOANS<br>TO DATE     |
|---|---|---|--|--|---|-----------------------------|--------------------------------------|---|
|   |   |   |  |  |   |                             |                                      |   |
| California Conservative PAC (#13477851)<br>42 E Huntington Dr. #C-D<br>Arcadia, CA 91006-3222 |   | \$ 0.00   | \$ 2,700.00                            | <input type="checkbox"/> PAID<br>\$ 0.00<br><input type="checkbox"/> FORGIVEN<br>\$ 0.00 | \$ 2,700.00   | %<br>0.00                   | \$ 2,700.00<br>06/02/2012            | \$ 2,700.00<br>PER ELECTION**<br>2,700.00 |
|   |   | \$  | \$                                     | <input type="checkbox"/> PAID<br>\$<br><input type="checkbox"/> FORGIVEN<br>\$           | \$  | %<br>\$                     | \$<br>DATE INCURRED                  | \$<br>PER ELECTION**<br>\$                |
| <b>SUBTOTALS</b>  |   | \$  | \$ 2,700.00                            | \$ 0.00  | \$ 2,700.00   | \$ 0.00                     |                                      |   |

\*Loans that are contributions to another candidate or committee  
must also be summarized on Schedule D. Loans forgiven must  
also be reported on Schedule E.

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

**Schedule H Summary**

- Loans made this period ..... \$ 2,700.00  
(Total Column (b) plus unitemized loans of less than \$100.)
- Payments received on loans ..... \$ 0.00  
(Total Column (c) plus unitemized payments of less than \$100.)
- Net change this period. (Subtract Line 2 from Line 1.) ..... **NET \$ 2,700.00**  
(Enter the net here and on the Summary Page, Column A, Line 7.)

\*\*If Required