

RECEIVED  
CITY OF LAKE FOREST  
Date Stamp

Page 1 of 10  
For Official Use Only

Date of election if applicable:  
(Month, Day, Year) 14 FEB -3 P 4:21

Statement covers period  
from 07/01/2013 through 12/31/2013

Date of election if applicable:  
(Month, Day, Year) 14 FEB -3 P 4:21

SEE INSTRUCTIONS ON REVERSE

**Recipient Committee Campaign Statement Cover Page**  
(Government Code Sections 84200-84216.5)

- 1. Type of Recipient Committee:** All Committees - Complete Parts 1, 2, 3, and 4.
- Officeholder, Candidate Controlled Committee
  - State Candidate Election Committee
  - Recall (Also Complete Part 5)
  - General Purpose Committee
  - Sponsored
  - Small Contributor Committee
  - Political Party/Central Committee
  - Primarily Formed Ballot Measure Committee
  - Controlled
  - Sponsored (Also Complete Part 6)
  - Primarily Formed Candidate/Officeholder Committee (Also Complete Part 7)

- 2. Type of Statement:**
- Preelection Statement
  - Semi-annual Statement
  - Termination Statement (Also file a Form 410 Termination)
  - Amendment (Explain below)
  - Quarterly Statement
  - Special Odd-Year Report
  - Supplemental Preelection Statement - Attach Form 495

**3. Committee Information**  
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) I.D. NUMBER  
Voigts For Lake Forest City Council 2014 1331261

**Treasurer(s)**  
NAME OF TREASURER Mr. John Fugatt  
MAILING ADDRESS  
CITY STATE ZIP CODE AREA CODE/PHONE  
Huntington Beach, CA 92647

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  
Huntington Beach, CA 92647  
OPTIONAL: FAX / E-MAIL ADDRESS

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 1/31/14 Date  
Executed on 1/31/14 Date  
Executed on \_\_\_\_\_ Date  
Executed on \_\_\_\_\_ Date

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

Type or print in ink.

COVER PAGE - PART 2

# Recipient Committee Campaign Statement Cover Page — Part 2

# CALIFORNIA FORM 460

Page 2 of 10

## 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  
Lake Forest, CA 92630

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

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?  
 YES  NO

COMMITTEE ADDRESS

STREET ADDRESS (NO P.O. BOX)

CITY

STATE ZIP CODE

AREA CODE/PHONE

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?  
 YES  NO

COMMITTEE ADDRESS

STREET ADDRESS (NO P.O. BOX)

CITY

STATE ZIP CODE

AREA CODE/PHONE

## 6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER

JURISDICTION

SUPPORT  
 OPPOSE

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

NAME OF OFFICEHOLDER, CANDIDATE, OR PROponent

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

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

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

SUPPORT  
 OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

SUPPORT  
 OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

SUPPORT  
 OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

SUPPORT  
 OPPOSE

Attach continuation sheets if necessary

# Campaign Disclosure Statement Summary Page

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

SUMMARY PAGE

Statement covers period  
from 07/01/2013  
through 12/31/2013

CALIFORNIA  
FORM **460**

Page 3 of 10

I.D. NUMBER  
1331261

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Voigts For Lake Forest City Council 2014

## Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions .....	Schedule A, Line 3 \$ <u>4,848.00</u>	\$ <u>5,997.00</u>
2. Loans Received .....	Schedule B, Line 3 <u>0.00</u>	<u>0.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS .....	Add Lines 1 + 2 \$ <u>4,848.00</u>	\$ <u>5,997.00</u>
4. Nonmonetary Contributions .....	Schedule C, Line 3 <u>0.00</u>	<u>0.00</u>
5. TOTAL CONTRIBUTIONS RECEIVED .....	Add Lines 3 + 4 \$ <u>4,848.00</u>	\$ <u>5,997.00</u>

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

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

## Expenditures Made

6. Payments Made .....	Schedule E, Line 4 \$ <u>1,155.05</u>	\$ <u>4,197.73</u>
7. Loans Made .....	Schedule H, Line 3 <u>0.00</u>	<u>2,700.00</u>
8. SUBTOTAL CASH PAYMENTS .....	Add Lines 6 + 7 \$ <u>1,155.05</u>	\$ <u>6,897.73</u>
9. Accrued Expenses (Unpaid Bills) .....	Schedule F, Line 3 <u>1,000.00</u>	<u>1,182.64</u>
10. Nonmonetary Adjustment .....	Schedule C, Line 3 <u>0.00</u>	<u>0.00</u>
11. TOTAL EXPENDITURES MADE .....	Add Lines 8 + 9 + 10 \$ <u>2,155.05</u>	\$ <u>8,080.37</u>

## Expenditure Limit Summary for State Candidates

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

Date of Election (mm/dd/yy)	Total to Date
/ /	\$ _____
/ /	\$ _____

## Current Cash Statement

12. Beginning Cash Balance .....	Previous Summary Page, Line 16 \$ <u>10,214.33</u>
13. Cash Receipts .....	Column A, Line 3 above <u>4,848.00</u>
14. Miscellaneous Increases to Cash .....	Schedule I, Line 4 <u>0.00</u>
15. Cash Payments .....	Column A, Line 8 above <u>1,155.05</u>
16. ENDING CASH BALANCE .....	Add Lines 12 + 13 + 14, then subtract Line 15 \$ <u>13,907.28</u>

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

17. LOAN GUARANTEES RECEIVED .....	Schedule B, Part 2 \$ <u>0.00</u>
------------------------------------	-----------------------------------

## Cash Equivalents and Outstanding Debts

18. Cash Equivalents .....	See instructions on reverse \$ <u>2,700.00</u>
19. Outstanding Debts .....	Add Line 2 + Line 9 in Column B above \$ <u>1,182.64</u>

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

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

# Schedule A Monetary Contributions Received

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

Statement covers period  
from 07/01/2013  
through 12/31/2013

Page 4 of 10  
I.D. NUMBER  
1331261

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER  
Voigts For Lake Forest City Council 2014

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)
12/09/2013	Brookfield Land Services, LLC 3090 Bristol Street Ste 200 Costa Mesa, CA 92626	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
12/13/2013	Larry Smith Newport Beach, CA 92660	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President MHI Real Company	500.00	500.00	G 12 500.00
12/16/2013	FAUBEL PUBLIC AFFAIRS Lake Forest, CA 92630	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00	250.00	
12/16/2013	KAY KEARNEY Huntington Beach, CA 92648	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner K&K Public Affairs	150.00	150.00	
12/16/2013	SEA COUNTRY TOWING & RECOVERY, INC 20611 PRISM PLACE Lake Forest, CA 92630	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	
<b>SUBTOTAL \$</b>				<b>2,400.00</b>		

## Schedule A Summary

- Amount received this period — itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 4,100.00
- Amount received this period — unitemized monetary contributions of less than \$100 ..... \$ 748.00
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$** 4,848.00

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

# Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period

from 07/01/2013

through 12/31/2013

**CALIFORNIA 460  
FORM**

Page 5 of 10

I.D. NUMBER

1331261

NAME OF FILER

Voigts For Lake Forest City Council 2014

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)	PERELECTION TO DATE (IF REQUIRED)
12/16/2013	Suzanne Shafer Lake Forest, CA 92630	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	150.00	150.00	
12/17/2013	Alexis Boulanger El Toro, CA 92630	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Teaching Assistant Salvation Army	100.00	100.00	
12/17/2013	LARRY NELSON Newport Coast, CA 92657	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Nelson Enterprises	250.00	250.00	
12/17/2013	DIANE SMITH Lake Forest, CA 92630	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	100.00	100.00	
12/20/2013	Waltman-Podor Properties 101 Via Toluca San Clemente, CA 92672	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	

**SUBTOTAL \$** 1,100.00

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

# Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period

from 07/01/2013

through 12/31/2013

CALIFORNIA  
FORM 460

Page 6 of 10

NAME OF FILER: Voigts For Lake Forest City Council 2014  
I.D. NUMBER: 1331261

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)	PERELECTION TO DATE (IF REQUIRED)
12/30/2013	Dennis Bauer  Santa Ana, CA 92701	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SR. DDA  County of Orange	100.00	100.00	
12/31/2013	Christopher Townsend  Laguna Hills, CA 92653	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President  Townsend Public Affairs	500.00	500.00	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				<b>600.00</b>		

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

# Schedule E Payments Made

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

Statement covers period

from 07/01/2013

through 12/31/2013

CALIFORNIA  
FORM

460

Page 7 of 10

I.D. NUMBER  
1331261

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Voigts For Lake Forest City Council 2014

**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                |
| 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                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | print ads                                 | WEB | information technology costs (internet, e-mail)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Scott Voigts Lake Forest, CA 92630	CMP			584.60
Bagmasters 1160 California Ave Corona, CA 92881	CMP			230.89
Bieber Communications 3609 W MacArthur Blvd Santa Ana, CA 92704	MBR			220.00

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL \$ 1,035.49**

## Schedule E Summary

- Itemized payments made this period. (Include all Schedule E subtotals.) ..... \$ 1,035.49
- Unitemized payments made this period of under \$100 ..... \$ 119.56
- 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 \$ 1,155.05**

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

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

Statement covers period  
from 07/01/2013  
through 12/31/2013

Page 8 of 10

I.D. NUMBER  
1331261

**CALIFORNIA  
FORM  
460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Voigts For Lake Forest City Council 2014

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

- CMP campaign paraphernalia/misc.
- CNS campaign consultants
- CTB contribution (explain nonmonetary)\*
- CVC civic donations
- FL 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
- MTG meetings and appearances
- OFC office expenses
- PET petition circulating
- PHO phone banks
- POL polling and survey research
- POS postage, delivery and messenger services
- PRO professional services (legal, accounting)
- PRT print ads

- RAD radio airtime and production costs
- RFD returned contributions
- SAL campaign workers' salaries
- TEL t.v. or cable airtime and production costs
- TRC 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)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING 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
Scott Voigts Lake Forest, CA 92630	POS	132.00	0.00	0.00	132.00
Scott Voigts Lake Forest, CA 92630	OFC	50.64	0.00	0.00	50.64
Scott Voigts Lake Forest, CA 92630	FND	0.00	1,000.00	0.00	1,000.00
<b>SUBTOTALS \$</b>		182.64 \$	1,000.00 \$	0.00 \$	1,182.64

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

**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.) ..... **INCURRED TOTALS \$** 1,000.00
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 \$** 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.) ..... **NET \$** 1,000.00  
May be a negative number



# Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

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

SCHEDULE G  
CALIFORNIA 460  
FORM

Statement covers period  
from 07/01/2013  
through 12/31/2013

Page 9 of 10

I.D. NUMBER  
1331261

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Voigts For Lake Forest City Council 2014

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Scott Voigts

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

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

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Bagmasters 1160 California Ave Corona CA 92881	CMP		584.60
Costco 27972 Cabot Rd, Laguna Niguel CA 92677	FND	Holiday Fundraiser	400.00
Home Depot 23651 El Toro Rd Lake Forest CA 92630	FND	Holiday Fundraiser	200.00
Smart and Final 23631 A El Toro Rd. Lake Forest CA 92630	FND	Holiday Fundraiser	400.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL \* \$ 1,584.60

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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

www.netfile.com

# Schedule H Loans Made to Others\*

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

Statement covers period

from 07/01/2013

through 12/31/2013

SCHEDULE H

CALIFORNIA  
FORM  
**460**

Page 10 of 10

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Voigts For Lake Forest City Council 2014

I.D. NUMBER  
1331261

(a) FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	(b) IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(c) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(d) AMOUNT LOANED THIS PERIOD	(e) REPAYMENT OR FORGIVENESS THIS PERIOD*	(f) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(g) INTEREST RECEIVED	(h) ORIGINAL AMOUNT OF LOAN	(i) CUMULATIVE LOANS TO DATE
California Conservative PAC (#1347785)  42 E Huntington Dr. #C-D Arcadia, CA 91006-3222		\$ 2,700.00	\$ 0.00	<input type="checkbox"/> PAID \$ 0.00 <input type="checkbox"/> FORGIVEN \$ 0.00	\$ 2,700.00	%	\$ 2,700.00	CALENDAR YEAR 0.00 PERELECTION** P 12 2,700.00
		\$	\$	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN \$	\$	%	\$	CALENDAR YEAR PERELECTION**
<b>SUBTOTALS</b>		\$ 0.00	\$ 0.00	\$ 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 ..... \$ 0.00  
(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 \$** 0.00  
(Enter the net here and on the Summary Page, Column A, Line 7.)

\*\*If Required