Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

SEE INSTRUCTIONS ON REVERSE

Date Stamp

SAN BUENA VENTURA
CITY CLERK

COVER PAGE

CALIFORNIA 2001/02 FORM **460**

Page 1 of 18

For Official Use Only

Statement covers period	Date of election if applicable: (Month, Day, Year)
from 9/25/2011	
through 10/22/2011	11/8/2011

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

- [x] 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:

- [x] 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

I.D. NUMBER #1340570

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Morehouse for Council Committee 2011

STREET ADDRESS (NO P.O. BOX)

[redacted]

CITY STATE ZIP CODE AREA CODE/PHONE

[redacted]

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

CITY STATE ZIP CODE AREA CODE/PHONE

[redacted]

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

[redacted]

MAILING ADDRESS

[redacted]

CITY STATE ZIP CODE AREA CODE/PHONE

[redacted]

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

[redacted]

4. Verification

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

Executed on 10/26/11 (Date) By [signature] (Signature of Treasurer or Assistant Treasurer)

Executed on 10/26/11 (Date) By [signature] (Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor)

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Recipient Committee Campaign Statement Cover Page — Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA FORM **460**

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Carl E. Morehouse

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

Member City Council

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

[redacted]

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
None	
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

None

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
Not applicable		
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 9/25/2011
through 10/22/2011

CALIFORNIA FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Morehouse for Council Committee 2011

I.D. NUMBER
#1340570

Contributions Received

		Column A (TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES))	Column B (CALENDAR YEAR TOTAL TO DATE)
1. Monetary Contributions	*Schedule A, Line 3*	$ 5,320	$ 11,275
2. Loans Received	*Schedule B, Line 3*	0	3,000
3. SUBTOTAL CASH CONTRIBUTIONS	*Add Lines 1 + 2*	$ 5,320	$ 14,275
4. Nonmonetary Contributions	*Schedule C, Line 3*	0	0
5. TOTAL CONTRIBUTIONS RECEIVED	*Add Lines 3 + 4*	$ 5,320	$ 14,275

Expenditures Made

6. Payments Made	*Schedule E, Line 4*	$ 9,020.00	$ 10,626.00
7. Loans Made	*Schedule H, Line 3*		0.00
8. SUBTOTAL CASH PAYMENTS	*Add Lines 6 + 7*	$ 9,020.00	$ 10,626.00
9. Accrued Expenses (Unpaid Bills)	*Schedule F, Line 3*	0.00	0.00
10. Nonmonetary Adjustment	*Schedule C, Line 3*	0.00	0.00
11. TOTAL EXPENDITURES MADE	*Add Lines 8 + 9 + 10*	$ 9,020.00	$ 10,626.00

Current Cash Statement

12. Beginning Cash Balance	*Previous Summary Page, Line 16*	$ 7,349.00
13. Cash Receipts	*Column A, Line 3 above*	5,320
14. Miscellaneous Increases to Cash	*Schedule I, Line 4*	0.00
15. Cash Payments	*Column A, Line 8 above*	9,020.00
16. **ENDING CASH BALANCE**	*Add Lines 12 + 13 + 14, then subtract Line 15*	$ 3,649.00

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

17. LOAN GUARANTEES RECEIVED ..... *Schedule B, Part 2* $ 0

Cash Equivalents and Outstanding Debts

18. Cash Equivalents ..... *See instructions on reverse* $ 0

19. Outstanding Debts ..... *Add Line 2 + Line 9 in Column B above* $ 3,000

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).

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	$	$

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
/ /	$
/ /	$

*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.

SCHEDULE A

CALIFORNIA FORM **460**

Statement covers period
from 9/25/2011
through 10/22/2011

Page 31 of 18

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Morehouse for Council Committee 2011

I.D. NUMBER
#1340570

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/27/11	Beatty, James [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	General Manager, Lagniappes, Inc.	$50	$50	
10/19/11	Bothman, Sanford [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$250	$250	
9/26/11	Bowles, Donald [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$50	$50	
10/11/11	California Real Estate Political Action Committee [redacted]	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC		$275	$275	
10/19/11	Case, Michael [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Attorney, Ferguson Case Orr Paterson, LLP	$130	$130	
			SUBTOTAL $	755		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 5,320
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 0
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL $** 5,320

*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 9/25/2011
through 10/22/11

CALIFORNIA FORM 460

NAME OF FILER
Morehouse for Council Committee 2011

I.D. NUMBER
#1340570

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)
10/3/11	Charnofsky, Norene [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$35	$35	
10/3/11	Chess, Elizabeth [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$50	$50	
10/1/11	Cushman, William [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Engineer, William Cushman Engineering	$100	$100	
9/26/11	Davidson, Robert [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$100	$100	
10/5/11	Dembowski, Ellyn [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Realtor, Prudential California Realty	$100	$100	
			SUBTOTAL $	385		

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IND – Individual
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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 9/24/2011
through 10/22/2011

CALIFORNIA FORM 460

NAME OF FILER
Morehouse for Council Committee 2011

I.D. NUMBER
#1340570

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/25/11	Fiori, Tony [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Auto Dealer, Vista Honda	$275	$275	
10/1/11	Foster, Lorraine [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$50	$50	
10/4/11	Friedman, James [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Insurance Sales, James Friedman CLU, CLFC	$275	$275	
10/3/11	Golden, Deborah [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$100	$100	
10/4/11	Goldstein, David [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Solid Waste Analyst, County of Ventura	$25	$25	
			SUBTOTAL $	725		

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IND – Individual
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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 9/24/2011
through 10/22/2011

CALIFORNIA FORM 460

NAME OF FILER
Morehouse for Council Committee 2011

I.D. NUMBER
#1340570

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/26/11	Greenberg, Donald [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Attorney, Donald S. Greenbert, Attorney at Law	$100	$100	
9/25/11	Halter, Doug [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Landscape Contractor, Dough Halter Landscape	$50	$50	
10/18/11	Harrington, Ronald [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Attorney, Law Office of Ronald Harrington	$100	$100	
9/25/11	Harrison, Ralph [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Executive, E.J. Harrison & Sons, Inc.	$275	$275	
10/14/11	Heller, James [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Engineer, U.S. Navy	$50	$50	
			SUBTOTAL $	575		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period
from 9/25/2011
through 10/22/2011

CALIFORNIA FORM 460

NAME OF FILER
Morehouse for Council Committee 2011

I.D. NUMBER
#1340570

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/26/11	Hocking, Mark [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$50	$50	
9/29/11	Hocking, Laura [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Data Tech. County of Ventura	$50	$50	
9/30/11	Hornstein, James [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Physician, James Hornstein, M.D.	$50	$50	
10/7/11	James Gray Printing [redacted]	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		$50	$50	
10/7/11	Jones, John [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Software Support, Elixir Technologies	$25	$25	
			SUBTOTAL $	225		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

CALIFORNIA FORM 460

Statement covers period
from 9/25/2011
through 10/22/2011

NAME OF FILER
Morehouse for Council Committee 2011

I.D. NUMBER
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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)
10/16/11	Jones, John [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Software Support Elixir Technologies	$25	$50	
9/28/11	Kent, Robert [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Professor, Cal State University Northridge	$30	$30	
10/17/11	Klebaum, Noel [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$50	$50	
9/26/11	Lax, Jane [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Fund Development Director, Turning Point Foundation	$50	$50	
10/4/11	Lindberg, Carol [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$50	$50	
			SUBTOTAL $	205		

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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 9/25/2011
through 10/22/2011

CALIFORNIA FORM 460

NAME OF FILER
Morehouse for Council Committee 2011

I.D. NUMBER
#1340570

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/26/11	Mann, Jean [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Farmer, Howard & Howard, LLC	$100	$100	
9/28/11	Marx, Jan [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Mayor, City of San Luis Obispo	$25	$25	
9/26/11	Mora, Moses [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retried	$50	$50	
10/9/11	Novstrup, Ginger [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Educator, Ventura Unified School District	$250	$250	
9/25/11	Ogden, Leslie [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$100	$100	
			SUBTOTAL $	525		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period
from 9/25/111
through 10/22/2011

CALIFORNIA FORM 460

NAME OF FILER
Morehouse for Council Committee 2011

I.D. NUMBER
#1340570

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)
10/10/11	Peace Officers Research Association [redacted] #810830	☐IND ☑COM ☐OTH ☐PTY ☐SCC		$250	$250	
9/26/11	Pollock, David [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Council Member City of Moorpark	$50	$50	
10/7/11	Price, Donald [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Engineer, Ventura County APCD	$50	$50	
10/9/11	Prince, Roy [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Owner, Greenhomesforsale.com	$25	$25	
10/9/11	Ramirez, Maria [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney, Maria Ramirez, Attorney at Law	$200	$200	
			SUBTOTAL $	575		

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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 9/25/2011
through 10/22/2011

CALIFORNIA FORM 460

NAME OF FILER
Morehouse for Council Committee 2011

I.D. NUMBER
#1340570

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)
10/11/11	Robinson, Mary [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$250	$250	
9/26/11	Scholfield, Millie [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$50	$50	
9/26/11	Settle, Nancy [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$50	$50	
10/16/11	Smith, Jeffrey [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Attorney & Business Manager, Smith-Hobson, LLC	$125	$125	
10/4/11	Mark, Stephens [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$25	$25	
			SUBTOTAL $	500		

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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 9/25/2011
through 10/22/2011

CALIFORNIA FORM **460**

NAME OF FILER
Morehouse for Council Committee 2011

I.D. NUMBER
#1340570

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)
10/14/11	Stratton, Alicia [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Analyst, Ventura County APCD	$25	$25	
10/5/11	Thayer, Shirley [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Admin. Law Judge, State of California	$100	$100	
9/27/11	Thomas, Terri [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Engineer, Ventura County APCD	$50	$50	
10/8/11	Thonis, James [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$100	$100	
9/26/11	Travis, Mary [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Administrator, Ventura County Transportation Commission	$25	$25	
			SUBTOTAL $	300		

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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 9/25/2011
through 10/27/2011

CALIFORNIA FORM **460**

NAME OF FILER
Morehouse for Council Committee 2011

I.D. NUMBER
#1340570

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)
10/8/11	Travis, Mary [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Adminstrator, Ventura County Transportation Commission	$25	$50	
10/4/11	Vye, George [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$50	$50	
9/26/11	Wack, Paul [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Educator, Cal Poly San Luis Obispo	$50	$50	
10/3/11	Wiens, Kathleen [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Homemaker	$50	$50	
9/26/11	Zucker, Paul [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Consultant, Zucker Systems	$50	$50	
			SUBTOTAL $	225		

*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 9/25/2011
through 10/22/2011

CALIFORNIA FORM 460

NAME OF FILER
Morehouse for Council Committee 2011

I.D. NUMBER
#1340570

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/25/11	Linda Parks [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	County Supervisor, County of Ventura	$50	$50	
10/16/11	Channer, Gary [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$125	$125	
10/16/11	Channer, Patricia [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$150	$150	
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
			SUBTOTAL $	325		

*Contributor Codes
IND – Individual
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SCC – Small Contributor Committee

Schedule E
Payments Made

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

Statement covers period
from 9/25/11
through 10/22/11

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Morehouse for Council Committee 2011

I.D. NUMBER
#134057

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Boross Media Services [redacted]	LIT		$785.07
Ventura Signs & Screen Printing [redacted]	LIT		$530.89
Mail Manager [redacted]	POS		$522.84

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

SUBTOTAL $ 1,838.80

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 8,868.41
2. Unitemized payments made this period of under $100 ..... $ 151.09
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ..... $ 0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ..... TOTAL $ 9,019.50

Schedule E
(Continuation Sheet)
Payments Made

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

SCHEDULE E (CONT.)

Statement covers period
from 9/25/11
through 10/22/11

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Morehouse for Council Committee 2011

I.D. NUMBER
#1340570

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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
Ventura County Reporter [redacted]	PRT		$527.00
Ventura County Star [redacted]	PRT		$275.00
Clark's Printing [redacted]	LIT		$242.35
Mail Manager [redacted]	POS		$5,405.26
Ventura Breeze [redacted]	PRT		$255.00

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

SUBTOTAL $ 6,704.61

Schedule E
(Continuation Sheet)
Payments Made

Type or print in ink.
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SCHEDULE E (CONT.)

Statement covers period
from 9/25/11
through 10/22/11

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Morehouse for Council Committee 2011

I.D. NUMBER
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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Boross Media Services [redacted]	LIT		$325.00

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

SUBTOTAL $ 325.00