Recipient Committee
Campaign Statement
Cover Page

Statement covers period
from 7-1-17
through 12-31-17

Date of election if applicable:
(Month, Day, Year)
N/A

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.
☒ Officeholder, Candidate Controlled Committee
☐ State Candidate Election Committee
☐ Recall
(Not Complete Part 4)
☐ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☐ Political Party/Central Committee
☐ Primarily Formed Ballot Measure Committee
☐ Controlled
(Not Complete Part 1)
☐ Primarily Formed Candidate/Officeholder Committee
(Not Complete Part 7)

2. Type of Statement:
☐ Preelection Statement
☐ Semi-annual Statement
☐ Termination Statement
☐ Amendment (Explain below)
☐ Quarterly Statement
☐ Special Odd-Year Report

3. Committee Information

COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE)
HAFFA FOR COUNCIL 2016

LD. NUMBER
1340305

Treasurer(s)

NAME OF TREASURER
RENEE FRANKEN

MAILING ADDRESS

STREET ADDRESS (IF APPLICABLE)
ADDRESS REMOVED FOR PRIVACY

CITY MONTEREY STATE CA ZIP CODE 93940

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

CITY

STATE
ZIP CODE
AREA CODE/PHONE

OPT. FAX/E-MAIL ADDRESS

C5franken@aol.com

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 1-1-18

By
 Signature of Managing Director or Responsible Officer of Sponsor

Executed on 1-1-18

By
 Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on

By
 Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE  
ALAN HAFFA

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

MONTEREY, CA 93940

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:  

DATE:  

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

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.
### Contributions Received

1. Monetary Contributions
   - Schedule A, Line 3 $0
2. Loans Received
   - Schedule B, Line 3 $0
3. SUBTOTAL CASH CONTRIBUTIONS
   - Add Lines 1 + 2 $0
4. Nonmonetary Contributions
   - Schedule C, Line 3 $0
5. TOTAL CONTRIBUTIONS RECEIVED
   - Add Lines 3 + 4 $0

### Expenditures Made

6. Payments Made
   - Schedule E, Line 4 $250
7. Loans Made
   - Schedule H, Line 3 $0
8. SUBTOTAL CASH PAYMENTS
   - Add Lines 6 + 7 $250
9. Accrued Expenses (Unpaid Bills)
   - Schedule F, Line 3 $0
10. Nonmonetary Adjustment
    - Schedule C, Line 3 $0
11. TOTAL EXPENDITURES MADE
    - Add Lines 9 + 9 + 10 $250

### Current Cash Statement

12. Beginning Cash Balance
    - Previous Summary Page, Line 16 $11,006.68
13. Cash Receipts
    - Column A, Line 3 above $0
14. Miscellaneous Increases to Cash
    - Schedule I, Line 4 $0
15. Cash Payments
    - Column A, Line 8 above $0
16. ENDING CASH BALANCE
    - Add Lines 12 + 13 + 14, then subtract Line 15 $11,006

### Cash Equivalents and Outstanding Debts

16. Cash Equivalents
    - See instructions on reverse $0
17. Outstanding Debts
    - Add Line 2 + Line 9 in Column A above $0

---

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

- **Date of Election (mm/dd/yyyy)**
  - 1/1
  - $0

**Expenditure Limit Summary for State Candidates**

- **Date of Election (mm/dd/yyyy)**
  - 1/1
  - $0

*Amounts in this section may be different from amounts reported in Column B.*
Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

Statement covers period from 7-1-17 through 12-31-17

NAME OF FILER
HAF FA FOR COUNCIL 2016

ID NUMBER
1390305

<table>
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<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
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</tr>
</tbody>
</table>

SUBTOTAL $  

Schedule A Summary

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) ........................................ $

2. Amount received this period – unitemized monetary contributions of less than $100 .................. $

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ......................... TOTAL $

*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

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LID NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
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</tbody>
</table>

**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

**SUBTOTAL $**
**Schedule B – Part 1**

**Loans Received**

---

**NAME OF FILER**

HAFA FOR COUNCIL 2016

---

**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)**

- **NONE**

---

<table>
<thead>
<tr>
<th>IF</th>
<th>AMOUNT PAID OR FORGIVEN THIS PERIOD</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>OUTSTANDING BALANCE BEGINNING THIS PERIOD</th>
<th>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
<th>ORIGINAL AMOUNT OF LOAN</th>
<th>CUMULATIVE CONTRIBUTIONS TO DATE</th>
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<td>☐ OTH</td>
<td>☑ PTY</td>
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</table>

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**SUBTOTALS**

- $  
- $  
- $  

---

**Schedule B Summary**

1. Loans received this period ............................................................ $  
   (Total Column (b) plus unitemized loans of less than $100.)

2. Loans paid or forgiven this period .............................................. $  
   (Total Column (c) plus loans under $100 paid or forgiven.)
   (Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) ...................... NET $  
   (May be a negative number)

---

*Amounts forgiven or paid by another party also must be reported on Schedule A.  
** if required.

---

Statement covers period from 7-1-17 through 12-31-17

Page 6 of 17
### Schedule B – Part 2
#### Loan Guarantors

**Statement covers period from 7-1-17 through 12-31-17**

<table>
<thead>
<tr>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE</th>
<th>LOAN</th>
<th>AMOUNT GUARANTEED THIS PERIOD</th>
<th>CUMULATIVE TO DATE</th>
<th>BALANCE OUTSTANDING TO DATE</th>
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### End of form.

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov  (866/275-3772)
www.fppc.ca.gov
<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>DESCRIPTION OF GOODS OR SERVICES</th>
<th>AMOUNT/FAIR MARKET VALUE</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
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</tbody>
</table>

Attach additional information on appropriately labeled continuation sheets.  

**Schedule C Summary**

1. Amount received this period – itemized nonmonetary contributions.  
   (Include all Schedule C subtotals.) $ 

2. Amount received this period – unitemized nonmonetary contributions of less than $100 $ 

3. Total nonmonetary contributions received this period.  
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) TOTAL $ 

---

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

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### Schedule D Summary

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) ........................................... $  

2. Unitemized contributions and Independent expenditures made this period of under $100. ........................................... $  

3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ................................ TOTAL: $  

---

**NOTE:** All monetary contributions must be reported to the Political Reform Act (PRA) enforcement agency. All contributors to the campaign, regardless of amount, must be reported to the PRA enforcement agency. All contributors must be reported even if they are not authorized to do so by the candidate or campaign (e.g., a foreign national or alien). Authorized committees must report all contributions, including those made to them by foreign nationals or aliens.  

*FPPC Form 460 (Jan/2016)*  
*FPPC Advice: advice@fppc.ca.gov (866/275-3772)*  
*www.fppc.ca.gov*
<table>
<thead>
<tr>
<th>DATE</th>
<th>NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE</th>
<th>TYPE OF PAYMENT</th>
<th>DESCRIPTION (IF REQUIRED)</th>
<th>AMOUNT THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
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<td>Monetary Contribution</td>
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<td>Independent Expenditure</td>
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<td>Oppose</td>
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<td>Monetary Contribution</td>
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<td>Nonmonetary Contribution</td>
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<td>Independent Expenditure</td>
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<td>Support</td>
<td>Oppose</td>
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</table>

**SUBTOTAL $**

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FPPC Advice: advice@fppc.ca.gov (866)275-3772
www.fppc.ca.gov
### Schedule E

**Payments Made**

Amounts may be rounded to whole dollars.

**Statement covers period**

\[ \text{from } 7-1-17 \text{ through } 12-31-17 \]

**NAME OF FILER**

HAFFA FOR COUNCIL 2016

**CALIFORNIA**

**FORM 460**

**L.D. NUMBER**

1390305

### CODES:

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

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<th>Code</th>
<th>Description</th>
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<td>campaign paraphernalia/misc.</td>
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<tr>
<td>CNS</td>
<td>campaign consultants</td>
</tr>
<tr>
<td>CTB</td>
<td>contribution (explain nonmonetary)*</td>
</tr>
<tr>
<td>CVC</td>
<td>civic donations</td>
</tr>
<tr>
<td>FIL</td>
<td>candidate filing/ballot fees</td>
</tr>
<tr>
<td>FND</td>
<td>fundraising events</td>
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<tr>
<td>IND</td>
<td>independent expenditure supporting/opposing others (explain)*</td>
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<td>campaign literature and mailings</td>
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<td>member communications</td>
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<td>meetings and appearances</td>
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<td>OPC</td>
<td>office expenses</td>
</tr>
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<td>petition circulating</td>
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<td>phone banks</td>
</tr>
<tr>
<td>POL</td>
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<tr>
<td>POS</td>
<td>postage, delivery and messenger services</td>
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<td>PRO</td>
<td>professional services (legal, accounting)</td>
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<td>print ads</td>
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<tr>
<td>RAD</td>
<td>radio airtime and production costs</td>
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<tr>
<td>RDF</td>
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<td>SAL</td>
<td>campaign workers' salaries</td>
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<td>TEL</td>
<td>t.v. or cable airtime and production costs</td>
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<td>candidate travel, lodging, and meals</td>
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<tr>
<td>TRS</td>
<td>staff/party travel, lodging, and meals</td>
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<td>transfer between committees of the same candidate/sponsor</td>
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<tr>
<td>WEB</td>
<td>information technology costs (internet, e-mail)</td>
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### NAME AND ADDRESS OF PAYEE

(P.C. COMMITTEE, ALSO ENTER L.D. NUMBER)

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

**SUBTOTAL $**

### Schedule E Summary

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

FPPC Form 460 (Jan/2016)

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www.fppc.ca.gov
### Schedule E (Continuation Sheet)
#### Payments Made

**NAME OF FILER:**

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

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<th>Code</th>
<th>Description</th>
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<td>Meetings and appearances</td>
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<td>Polling and survey research</td>
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<tr>
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<td>Postage, delivery and messenger services</td>
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<td>TRC</td>
<td>Candidate travel, lodging, and meals</td>
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<tr>
<td>TRS</td>
<td>Staff/spouse travel, lodging, and meals</td>
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<td>Transfer between committees of the same candidate/sponsor</td>
</tr>
<tr>
<td>VOT</td>
<td>Voter registration</td>
</tr>
<tr>
<td>WEB</td>
<td>Information technology costs (Internet, e-mail)</td>
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</table>

**NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)**

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<th>CODE</th>
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<td></td>
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</tbody>
</table>

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

**SUBTOTAL:**

---

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

**NAME OF FILER**: HAFFA FOR COUNCIL 2016

**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
- FIL candidate filing/filing 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)

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER ID. NUMBER)</th>
<th>CODE OR DESCRIPTION OF PAYMENT</th>
<th>[A] OUTSTANDING BALANCE BEGINNING OF THIS PERIOD</th>
<th>[B] AMOUNT INCURRED THIS PERIOD</th>
<th>[C] AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)</th>
<th>[D] OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONE</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>SUBTOTALS $</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
</table>

---

**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. )

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. )

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)

**Incurred Totals $**

**Paid Totals $**

**Net $**

---

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

---

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**www.fppc.ca.gov**
NAME OF FILER: 

NAME AND ADDRESS OF CREDITOR OF COMMITTEE (ALSO ENTER I.D. NUMBER)

CODE OR DESCRIPTION OF PAYMENT

OUTSTANDING BALANCE BEGINNING OF THIS PERIOD

AMOUNT INCURRED THIS PERIOD (ALSO REPORT ON E)

AMOUNT PAID THIS PERIOD

OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD

SUBTOTALS $

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

Amounts may be rounded to whole dollars.

Statement covers period from 7-1-17 through 12-31-17

NAME OF FILER

NAME OF AGENT OR INDEPENDENT CONTRACTOR

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

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CNP</td>
<td>campaign paraphernalia/misc.</td>
</tr>
<tr>
<td>CNS</td>
<td>campaign consultants</td>
</tr>
<tr>
<td>CTB</td>
<td>contribution (explain nonmonetary)*</td>
</tr>
<tr>
<td>CVC</td>
<td>civic donations</td>
</tr>
<tr>
<td>FSL</td>
<td>candidate filing/ballot fees</td>
</tr>
<tr>
<td>FND</td>
<td>fundraising events</td>
</tr>
<tr>
<td>IND</td>
<td>independent expenditure supporting/opposing others (explain)*</td>
</tr>
<tr>
<td>LEG</td>
<td>legal defense</td>
</tr>
<tr>
<td>LIT</td>
<td>campaign literature and mailings</td>
</tr>
<tr>
<td>MBR</td>
<td>member communications</td>
</tr>
<tr>
<td>OFC</td>
<td>office expenses</td>
</tr>
<tr>
<td>PEC</td>
<td>petition circulating</td>
</tr>
<tr>
<td>PHO</td>
<td>phone banks</td>
</tr>
<tr>
<td>POL</td>
<td>polling and survey research</td>
</tr>
<tr>
<td>POS</td>
<td>postage, delivery and messenger services</td>
</tr>
<tr>
<td>PRO</td>
<td>professional services (legal, accounting)</td>
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<tr>
<td>PRT</td>
<td>print aids</td>
</tr>
<tr>
<td>RAD</td>
<td>radio airline and production costs</td>
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<tr>
<td>RFC</td>
<td>returned contributions</td>
</tr>
<tr>
<td>TEL</td>
<td>l.v. or cable airline and production costs</td>
</tr>
<tr>
<td>TRC</td>
<td>candidate travel, lodging, and meals</td>
</tr>
<tr>
<td>TRS</td>
<td>staff/spouse travel, lodging, and meals</td>
</tr>
<tr>
<td>TSF</td>
<td>transfer between committees of the same candidate/sponsor</td>
</tr>
<tr>
<td>WEB</td>
<td>information technology costs (Internet, e-mail)</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE OR CREDITOR (OF COMMITTEE, ALSO ENTER I.D. NUMBERS)</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
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<tbody>
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Attach additional information on appropriately labeled continuation sheets.

TOTAL* $ 0

* 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.

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<table>
<thead>
<tr>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>OUTSTANDING BALANCE BEGINNING THIS PERIOD</th>
<th>AMOUNT LOANED THIS PERIOD</th>
<th>REPAYMENT OR FORGIVENESS THIS PERIOD</th>
<th>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
<th>INTEREST RECEIVED</th>
<th>ORIgINAL AMOUNT OF LOAN</th>
<th>CUMULATIVE AMOUNT OF LOANS TO DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
<td>$ 0.00</td>
<td>$ 0.00</td>
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</tbody>
</table>

*For 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.

<table>
<thead>
<tr>
<th>SUBTOTALS</th>
<th>$</th>
<th>$</th>
<th>$</th>
<th>$</th>
</tr>
</thead>
</table>

**Schedule H Summary**

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

**If Required**

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## Schedule I Summary

1. Itemized increases to cash this period. ................................................................. \$ 
2. Unitemized increases to cash of under $100 this period. .......................... \$ 
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) ......................... \$ 
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) ................................................... TOTAL \$ 

SUBTOTAL $ 

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