Recipient Committee
Campaign Statement
Cover Page
(Government Code Sections 84200-84218.5)

Statement covers period from 01/01/2018 through 09/22/2018

Date of election if applicable: 11/06/2018

City of Del Mar
Administrative Services Dept.

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 6)
   - Primarily Formed Ballot Measure Committee
   - Controlled
   - Sponsored (Also Complete Part 6)
   - General Purpose Committee
   - Sponsored
   - Small Contributor Committee
   - Political Party/Central Committee
   - Primarily Formed Candidate/Officerholder Committee

2. Type of Statement:
   - Pre-election Statement
   - Semi-Annual Statement
   - Termination Statement
   - Quarterly Statement
   - Special Odd-Year Report
   - Supplemental Pre-election Statement - Attach Form 495
   - Amendment (Explain below)

3. Committee Information
   COMMITTEE NAME OR CANDIDATE'S NAME IF NO COMMITTEE:
   YES ON MEASUREMENT, SUPPORT OUR SHORELINE, A COALITION OF DEL MAR RESIDENTS
   I.D. NUMBER: 1408650
   STREET ADDRESS (NO P.O. BOX):
   CITY: [Redacted] STATE: CA ZIP CODE: 94901 AREA CODE/PHONE:
   CITY: [Redacted] STATE: [Redacted] ZIP CODE: [Redacted] AREA CODE/PHONE:
   MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX:
   CITY: [Redacted] STATE: CA ZIP CODE: 94901 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, under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 09/27/2018

By
Signature of Controlling Officerholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on [Redacted]

By
Signature of Controlling Officerholder, Candidate, State Measure Proponent

Executed on [Redacted]

By
Signature of Controlling Officerholder, Candidate, State Measure Proponent

Executed on [Redacted]

By
Signature of Controlling Officerholder, Candidate, State Measure Proponent

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

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)</td>
</tr>
<tr>
<td>RESIDENCE/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP</td>
</tr>
</tbody>
</table>

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.*

<table>
<thead>
<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
</table>

6. Primarily Formed Ballot Measure Committee

| NAME OF BALLOT MEASURE |
| SHORELINE PROTECTION INITIATIVE |

<table>
<thead>
<tr>
<th>BALLOT NO. OR LETTER</th>
<th>JURISDICTION</th>
<th>SUPPORT</th>
<th>OPPOSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>R</td>
<td>CITY OF DEL MAR</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A (TOTAL PERIOD FROM ATTACHED SCHEDULES)</th>
<th>Column B (CALENDARS YEAR TOTAL TO DATE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Monetary Contributions</td>
<td>$75,500.00</td>
<td>$75,500.00</td>
</tr>
<tr>
<td>2. Loans Received</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>3. SUBTOTAL CASH CONTRIBUTIONS</td>
<td>$75,500.00</td>
<td>$75,500.00</td>
</tr>
<tr>
<td>4. Nonmonetary Contributions</td>
<td>$36,233.30</td>
<td>$36,233.30</td>
</tr>
<tr>
<td>5. TOTAL CONTRIBUTIONS RECEIVED</td>
<td>$111,733.30</td>
<td>$111,733.30</td>
</tr>
</tbody>
</table>

## Expenditures Made

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Payments Made</td>
<td>$74,572.38</td>
<td>$74,572.38</td>
</tr>
<tr>
<td>7. Loans Made</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>8. SUBTOTAL CASH PAYMENTS</td>
<td>$74,572.38</td>
<td>$74,572.38</td>
</tr>
<tr>
<td>9. Accrued Expenses (Unpaid Bills)</td>
<td>$49,618.52</td>
<td>$49,618.52</td>
</tr>
<tr>
<td>10. Nonmonetary Adjustment</td>
<td>$36,233.30</td>
<td>$36,233.30</td>
</tr>
<tr>
<td>11. TOTAL EXPENDITURES MADE</td>
<td>$160,424.20</td>
<td>$160,424.20</td>
</tr>
</tbody>
</table>

## Current Cash Statement

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>12. Beginning Cash Balance</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>13. Cash Receipts</td>
<td>$75,500.00</td>
<td>$75,500.00</td>
</tr>
<tr>
<td>14. Miscellaneous Increases to Cash</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>15. Cash Payments</td>
<td>$74,572.38</td>
<td>$74,572.38</td>
</tr>
<tr>
<td>16. ENDING CASH BALANCE</td>
<td>$927.52</td>
<td>$927.52</td>
</tr>
</tbody>
</table>

### Cash Equivalents and Outstanding Debts

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>18. Cash Equivalents</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>19. Outstanding Debts</td>
<td>$49,618.52</td>
<td>$49,618.52</td>
</tr>
</tbody>
</table>

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

Amounts may be rounded to whole dollars.

Statement covers period from __/__/2018 through __/__/2018

YES ON MEASURE R, SUPPORT OUR SHORELINE, A COALITION OF DEL MAR RESIDENTS

I.D. NUMBER 1408653

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (F.F.E., 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>
</tr>
</thead>
<tbody>
<tr>
<td>08/21/2018</td>
<td>RICK THOMPSON</td>
<td></td>
<td>INVESTOR SIGRIA VENTURES PARTNERS</td>
<td>75,000.00</td>
<td>111,233.30</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Del Mar, CA 92014</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>08/29/2018</td>
<td>DIANE P. COX</td>
<td></td>
<td>DEVELOPMENT DIRECTOR JUST IN TIME FOR POSTER YOUTH</td>
<td>500.00</td>
<td>500.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td>San Diego, CA 92101</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

|               | IND                                                   | COM                 | OTH                                |PTY | SCC |
|               |                                                     |                     |                                   |    |     |
|               |                                                     |                     |                                   |    |     |
|               |                                                     |                     |                                   |    |     |

Schedule A Summary

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) ........................................ $ 75,500.00

2. Amount received this period – unitemized monetary contributions of less than $100 $ 0.00

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ............. TOTAL $ 75,500.00

Contributor Codes

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

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FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/276-3772)
www.fppc.ca.gov
**Schedule C**

**Nonmonetary Contributions Received**

Amounts may be rounded to whole dollars.

**Statement covers period**

from 01/01/2018

through 09/22/2018

<table>
<thead>
<tr>
<th>ID. NUMBER</th>
<th>1408650</th>
</tr>
</thead>
</table>

YES ON MEASURE R, SUPPORT OUR SHORELINE, A COALITION OF DEL MAR RESIDENTS

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR</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</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>08/06/2018</td>
<td>RICK THOMPSON</td>
<td>IND</td>
<td>INVESTOR SIGMA VENTURE PARTNERS</td>
<td>CONSULTING SERVICES</td>
<td>20,000.00</td>
<td>111,233.30</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Del Mar, CA 92014</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>08/06/2019</td>
<td>RICK THOMPSON</td>
<td>IND</td>
<td>INVESTOR SIGMA VENTURE PARTNERS</td>
<td>LEGAL SERVICES</td>
<td>16,233.30</td>
<td>111,233.30</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Del Mar, CA 92014</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL $** 36,233.30

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**Schedule C Summary**

1. Amount received this period – itemized nonmonetary contributions.
   (Include all Schedule C subtotals.) $ 36,233.30

2. Amount received this period – unitemized nonmonetary contributions of less than $100 $ 0.00

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 $ 36,233.30

---

*Contributor Codes*

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

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FPPC Form 460 (Jan/2016)

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 from 01/01/2018 through 09/22/2018

ID. NUMBER 1408650

YES ON MEASURER R, SUPPORT OUR SHORELINE, A COALITION OF DEL MAR RESIDENTS

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
- CCB contribution (explain nonmonetary)*
- CVC civic donations
- PLC 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
- MTS meetings and appearances
- OFC office expenses
- PET petition circulating
- PHO phone banks
- PCL polling and survey research
- POS postage, delivery and messenger services
- PRO professional services (legal, accounting)
- PRK print ads
- RAD radio airtime and production costs
- REO 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
- TSC 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 PAYEE</th>
<th>CODE OR</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>STEILLEN MERSHAEGER PARKINELLO GROSS &amp; LEONI LLP</td>
<td>PRO</td>
<td>SEAN P. WESCH, COMMITTEE ASSISTANT TREASURER, IS A PARTNER OF PAYEE</td>
<td>7,500.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FORTBANE LLC</td>
<td>CNS</td>
<td></td>
<td>10,000.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TMS DOLPHIN GROUP, INC.</td>
<td>CNS</td>
<td></td>
<td>20,000.00</td>
</tr>
</tbody>
</table>

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

**SUBTOTAL** $37,500.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) $ 74,572.38
2. Unitemized payments made this period of under $100 $ 0.00
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 $ 74,572.38

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## Schedule E (Continuation Sheet)
### Payments Made

**Amounts may be rounded to whole dollars.**

<table>
<thead>
<tr>
<th>Statement covers period</th>
<th>SCHEDULE E (CONT.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>from 01/01/2018</td>
<td>CALIFORNIA FORM 460</td>
</tr>
<tr>
<td>through 09/22/2018</td>
<td>Page 7 of 11</td>
</tr>
<tr>
<td>I.D. NUMBER</td>
<td>1408653</td>
</tr>
</tbody>
</table>

**YES ON MEASURE R, SUPPORT OUR SHORELINE, A COALITION OF DEL MAR RESIDENTS**

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

- **CNS:** campaign consultants
- **CVR:** contribution (explain nonmonetary)*
- **CFA:** civic donations
- **CM:** candidate filing/ballot fees
- **FND:** fundraising events
- **IND:** independent expenditure supporting/opposing others (explain)*
- **LEG:** legal defense
- **LT:** campaign literature and mailings
- **MBR:** member communications
- **MTG:** meetings and appearances
- **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
- **TMS:** 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)

### Payments Made

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>PHTOBIKE LLC</td>
<td>CNS</td>
<td></td>
<td>10,000.00</td>
</tr>
<tr>
<td>Long Beach, CA 90803</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NEILSON MERKAMER PARZINELLO GROSS &amp; LEONI LLP</td>
<td>PRO</td>
<td>SEAN P. WELCH, COMMITTEE ASSISTANT TREASURER, IS A PARTNER OF PAYEE</td>
<td>27,072.38</td>
</tr>
<tr>
<td>San Rafael, CA 94901</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**SUBTOTAL $** 37,072.38

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FPPC Form 460 (Jan/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
www.fppc.ca.gov
## Schedule F
### Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

**Statement covers period**
- from: 01/01/2018
- through: 09/22/2018
- I.D. NUMBER: 1408650

**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
- FIND: fundraising events
- IND: independent expenditure supporting/opposing others (explain)*
- LEG: legal defense
- LT: campaign literature and mailings
- MPR: 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)
- RAD: radio airtime and production costs
- RPD: returned contributions
- SAL: campaign workers' salaries
- TRC: candidate 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</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 D)</th>
<th>(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>LATHAM &amp; WATKINS LLP</td>
<td>PRO</td>
<td>0.00</td>
<td>23,872.19</td>
<td>0.00</td>
<td>23,872.19</td>
</tr>
<tr>
<td>San Diego, CA 92130</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>THE DOLPHIN GROUP, INC.</td>
<td>SCHEDULE G</td>
<td>0.00</td>
<td>5,746.33</td>
<td>0.00</td>
<td>5,746.33</td>
</tr>
<tr>
<td>Los Angeles, CA 90064</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>THE DOLPHIN GROUP, INC.</td>
<td>CBS</td>
<td>0.00</td>
<td>20,000.00</td>
<td>0.00</td>
<td>20,000.00</td>
</tr>
<tr>
<td>Los Angeles, CA 90064</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**SUBTOTALS**
- $0.00
- $49,618.52
- $0.00
- $49,618.52

**Schedule F Summary**
1. **INCURRED TOTALS** $49,618.52
2. **PAID TOTALS** $0.00
3. **NET** $49,618.52

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www.netfile.com

FFPC Form 460 (Jan/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
www.fppc.ca.gov
**SCHEDULE G**

**Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)**

<table>
<thead>
<tr>
<th>CODE</th>
<th>Description of Payment</th>
<th>Amount Paid</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>VOTER INFORMATION FILE</td>
<td>600.00</td>
</tr>
</tbody>
</table>

**NAME OF FILER**

KATHY NICKR

**NAME OF AGENT OR INDEPENDENT CONTRACTOR**

YES ON MEASURE R, SUPPORT OUR SHORELINE, A COALITION OF DEL MAR RESIDENTS

**I.D. NUMBER**

1408650

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

- QMF: campaign paraphernalia/misc.
- CNS: campaign consultants
- CTB: contribution (explain nonmonetary)*
- CVC: civic donations
- PIL: candidate filing/ballot fees
- PND: fundraising events
- NO: independent expenditure supporting/opposing others (explain)*
- LEG: legal defense
- UT: campaign literature and mailings
- MBR: member communications
- MTS: meetings and appearances
- OFG: office expenses
- PET: petition circulating
- PHO: phone banks
- POL: polling and survey research
- POS: postage, delivery and messenger services
- PRO: professional services (legal, accounting)
- PRK: print ads
- RAD: radio airtime and production costs
- RFO: 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
- VCT: voter registration
- 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 PAYER OR CREDITOR**

<table>
<thead>
<tr>
<th>Name and Address of Payer or Creditor</th>
<th>Code or Description of Payment</th>
<th>Amount Paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>POLITICAL DATA, INC.</td>
<td>VOTER INFORMATION FILE</td>
<td>600.00</td>
</tr>
<tr>
<td>2001 Embassy Drive</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SOTHE WALK, CA 90660</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*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.*

www.netfile.com
Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

NAME OF HIRER
YES ON MEASURE R, SUPPORT OUR SHORELINE, A COALITION OF DEL MAR RESIDENTS
NAME OF AGENT OR INDEPENDENT CONTRACTOR
THE DOLPHIN GROUP, INC.

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
- IN: independent expenditure supporting/opposing others (explain*)
- LEG: legal defense
- LIT: legal foundation

MBR: member communications
MTG: meetings and appearances
OPC: office expenses
PET: petition circulating
PHO: phone banks
POL: polling and survey research
POS: postage, delivery and messenger services
PRO: professional services (legal, accounting)
PRI: 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/souse travel, lodging, and meals
TSF: transfer between committees of the same candidate/sponsor
VOT: voter registration
WEB: information technology costs (internet, e-mail)

* 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</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>LAING STRATEGIC COMMUNICATIONS</td>
<td>CSS</td>
<td>SEE SCHEDULE G</td>
<td>4,000.00</td>
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<tr>
<td>San Diego, CA 92101</td>
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<td></td>
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<tr>
<td>KATHY LUCKER</td>
<td></td>
<td>SEE SCHEDULE G</td>
<td>600.00</td>
</tr>
<tr>
<td>Los Angeles, CA 90064</td>
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</tr>
<tr>
<td>DANIEL NGUYEN</td>
<td></td>
<td>REIMBURSEMENT EXPENSES; UNDER $500</td>
<td>1,024.03</td>
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<tr>
<td>Los Angeles, CA 90064</td>
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</tbody>
</table>

Attach additional information on appropriately labeled continuation sheets.

TOTAL* $ 5,624.03

* 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.
NAME OF FILER
YES ON MEASURE B, SUPPORT OUR SHORELINE, A COALITION OF DEL MAR RESIDENTS

ADDRESS: [Redacted] DEL MAR, CA 92014

I.D. NUMBER 1408650