Recipient Committee Campaign Statement Cover Page	Type or print in	ı ink.	Date Stamp	EIVE	CALIFORNIA 460 FORM Page 1 of 4	
(Government Code Sections 84200-84216.5) SEE INSTRUCTIONS ON REVERSE	Statement covers period 7/1/2013 through	Date of election if applicable: (Month, Day, Year) 06/03/2014	2015 JAN 26 CITY OF T	5 AM 7: 3	For Official Use Only	
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	inplete Parts 1, 2, 3, and 4. rimarily Formed Ballot Measure committee) Controlled) Sponsored (so Complete Part 6) rimarily Formed Candidate/ fficeholder Committee (so Complete Part 7)	2. Type of Statement: ☐ Preelection Statement ☐ Semi-annual Statement ☐ Termination Statement (Also file a Form 410 Te ☐ Amendment (Explain be Correction on page 3,	elow)	Supplemen	tatement d-Year Report tal Preelection Attach Form 495	
3. Committee Information 1 COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Alex See for Torrance City Council 2014 STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CO		Treasurer(s) NAME OF TREASURER Helen A. Nowatka MAILING ADDRESS CITY Torrance NAME OF ASSISTANT TREASUR Alex See	STATE CA RER, IF ANY	ZIP CODE 90501	AREA CODE/PHONE	
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. B CITY STATE ZIP CO OPTIONAL: FAX / E-MAIL ADDRESS	ox	MAILING ADDRESS CITY Torrance OPTIONAL: FAX / E-MAIL ADDR	STATE CA RESS	ZIP CODE 90505	AREA CODE/PHONE	
4. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California Executed on	a that the foregoing is true and co	Controlling Officeholder, Candidate, State Measure Prosignature of Controlling Officeholder, Candidate, Signature of Controlling Officeholder, Can	oponent or Responsible Officer State Measure Proponent		true and complete. I certify FPPC Form 460 (January/05)	

COVER PAGE

Campaign Disclosure Statement Summary Page

17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ __

18. Cash Equivalents See instructions on reverse \$

19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$

Cash Equivalents and Outstanding Debts

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period 7/1/2013		CALIFORNIA 460				
through _	12/31/2013	Page _	3	_ of _	17	
		I.D. N	UMBER			

SUMMARY PAGE

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Alex See for Torrance City Council 2014 **Calendar Year Summary for Candidates** Column B Column A Contributions Received CALENDAR YEAR TOTAL THIS PERIOD Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE General Elections 19.140.00 15.840.00 1. Monetary Contributions Schedule A, Line 3 1/1 through 6/30 7/1 to Date 0.00 5.005.00 2. Loans Received Schedule B, Line 3 20. Contributions 15,480.00 24,145.00 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ Received 0.00 0.00 4. Nonmonetary Contributions Schedule C, Line 3 21. Expenditures 15,480.00 24,145.00 Made 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 \$ **Expenditure Limit Summary for State Expenditures Made** 10.561.94 8,934.19 Candidates 6. Payments Made Schedule E, Line 4 0.00 0.00 7 Loans Made Schedule H. Line 3 22. Cumulative Expenditures Made* 10,561.94 8.934.19 8. SUBTOTAL CASH PAYMENTS Add Lines 6+7 \$ (If Subject to Voluntary Expenditure Limit) 0.00 0.00 Total to Date 9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3 Date of Election 0.00 (mm/dd/yy) 0.00 10. Nonmonetary Adjustment Schedule C, Line 3 10,561.94 8,934.19 **Current Cash Statement** 8,286.18 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ To calculate Column B, add 15,480.00 amounts in Column A to the 13. Cash Receipts Column A, Line 3 above corresponding amounts *Amounts in this section may be different from amounts 0.00 from Column B of your last 14. Miscellaneous Increases to Cash Schedule I, Line 4 reported in Column B. report. Some amounts in 8,934.19 15. Cash Payments Column A, Line 8 above Column A may be negative 14.831.99 figures that should be 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is

0.00 the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

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

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.

SCHEDULE A (CONT.)

Monetary Contributions Received	to whole dollars.		from07/01/2013		FORM 460	
.co e	a v		through_	12/31/2013	Page 14 of	17
NAME OF FILER Alex See for Torrance City Council 2014				*	I.D. NUMBER 1353186	

	•))	The state of the s		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IP COMMITTEE, ALSO ENTER LD. 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)
11/16/13	Huan Su Torrance, CA 90504	ZIND COM OTH PTY SCC	Self-Consultant Arts Curator/Exhibitor	100.00	200.00	200.00
11/16/13	Martha Deutsch Torrance, CA 90505	☑IND □COM □OTH □PTY □SCC	Homemaker	100.00	100.00	100.00
11/16/13	Roger Yanka Lomita, CA 90717	DIND COM OTH PTY SCC	Self- Owner Roger Express Inc.	100.00	100.00	100.00
11/19/13	Michael Wermers Torrance, CA 90505	☑IND □COM □OTH □PTY □SCC	Self- Owner GPSD, Inc	100.00	100.00	100.0
12/20/13	Jenifer Frial Torrance, CA 90505	COM COM OTH PTY	Homemaker	250.00	250.00	250.00
	9		SUBTOTAL	\$ 650.00		

*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

COL	IEDI	11 =	D	PART	4
SUF	にして	ノレロ	D-	FARI	

Schedule B - Part 1

Type or print in ink.

Amounts may be rounded

Statement covers period 07/01/2013 from		CALIFORNIA 46				
through	12/31/2013	Page of	17			

Loans Received	s Received to whole dollars. 67/01/2013			FORM 460				
SEE INSTRUCTIONS ON REVERSE					through12/	31/2013	Page15	of
NAME OF FILER							I.D. NUMBER	
Alex See for Torrance City Council 2014							1353186	
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)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(¢) AMOUNT PAI OR FORGIVE THIS PERIO	N. CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE
Alex See Torrance, CA 90505	Partner King Shabu Shabu		0.00	PAID \$ 0.00	- -	%	\$5.00	\$ 5.00 PER ELECTION**
[†] ☑ IND □ COM □ OTH □ PTY □ SCC		\$5.00	\$	s0.00	0 6/3/14 DATE DUE	\$ 00.00	7/1/2012 DATE INCURRED	\$
Alex See Torrance, CA 90505	Partner King Shabu Shabu	5005.00		PAID \$ 0.00	\$	%	ş_5000.00	CALENDAR YEAR \$ 5005.00 PER ELECTION ***
TO IND COM OTH PTY SCC		\$_5005.00	\$	s0.00	0 6/3/14 DATE DUE	\$0.00	6/29/13 DATE INCURRED	\$
		₹*		\$ FORGIVEN	s	%	\$	\$PER ELECTION**
† IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	s
		SUBTOTALS \$	0.00	\$ 00.0	00 \$ 5005.00			
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
Loans received this period (Total Column (b) plus unitemized loan.	s of less than \$100.)		*****************	\$	0.00	·	Contributor Code	s
Loans paid or forgiven this period (Total Column (c) plus loans under \$100 (Include loans paid by a third party that) paid or forgiven.)			\$	0.00	- C	OTH – Other (e.g. PTY – Political Par	PTY or SCC) , business entity) ty
3. Net change this period. (Subtract Line Enter the net here and on the Summar	e 2 from Line 1.)y Page, Column A, Line 2.	***************************************		. NET \$ _	0.00 (May be a negative number)		SCC – Small Contr	ibutor Committee

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

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