Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in	ink. 🌣	RECEIVED	CALIFORNIA 460 FORM 1 of 12
(Government Gode Geotions 04200-04210.0)	Statement covers period from05/18/2014		14 JUL 28 AH 9: 59	Page of For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through06/30/2014	06/03/2014	CITY OF TORRANCE	AIIIAIIIVE
1. Type of Recipient Committee: All Committees - Co	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:		
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	rimarily Formed Ballot Measure committee) Controlled) Sponsored Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee Also Complete Part 7)	☐ Preelection Statement ☐ Semi-annual Statement ☐ Termination Statement (Also file a Form 410 To	Spec Supp ermination) State	terly Statement ial Odd-Year Report lemental Preelection ment - Attach Form 495
	, number 355747	Treasurer(s)		
Pat Furey for Mayor 2014 STREET ADDRESS (NO P.O. BOX)		NAME OF TREASURER Patrick J. Furey MAILING ADDRESS CITY	STATE ZIP C	ODE AREA CODE/PHONE
STREET ADDRESS (NO F.O. BOX)		Torrance	Ca 9050	
Torrance Ca 90504 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. E	1	NAME OF ASSISTANT TREASU	RER, IF ANY	
MAILING ADDICESS (II DIFFERENT) NO. AND OTHER ON THE		WATERIO ABBITECO		
Torrance Ca 90504 OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDI	STATE ZIP C	ODE AREA CODE/PHONE
4. Verification		٨		
I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of Californi	g this statement and to the best a that the foregoing is true and g		eattached schedu	les is true and complete. I certify
7/28/2014	Ву			
7/28/2014 Date	BySign		sible Officer of Sponsor	
Executed on	Ву	Signature of Controlling Officeholder, Candidate, S	State Measure Proponent	
Executed on	Ву	Signature of Controlling Officeholder, Candidate, S	State Measure Proponent	EPPC Form 460 (January/05

COVER PAGE

COVER PAGE - PART 2							
	FORNIA DRM	4	60				
	JK IVI						
Page _	2	of _	12				

Officeholder or Candidate Controlled Commi	ttee	6.	Primarily Formed Balle	ot Measure	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE				
Patrick J. Furey			BALLOT NO. OR LETTER	JURISDICTIO	ON		
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRIC	F NUMBER IF APPLICABLE)		BALLOT NO, OR LETTER	JURISDICTI	JN		SUPPORT OPPOSE
Mayor, City of Torrance RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CI	TY STATE ZIP						
,			Identify the controlling of	iceholder, ca	ndidate, or stat	te measure p	proponent, if any
Torrance	Ca 90504		NAME OF OFFICEHOLDER, CAI	NDIDATE, OR PR	ROPONENT		
Related Committees Not Included in this State	tement: List any committees						
not included in this statement that are controlled by you o contributions or make expenditures on behalf of your can	r are primarily formed to receive		OFFICE SOUGHT OR HELD			DISTRICT NO. I	FANY
COMMITTEE NAME	I.D. NUMBER						

NAME OF TREASURER	CONTROLLED COMMITTEE?	7	 Primarily Formed Can officeholder(s) or candidate(s) 				
	☐ YES ☐ NO				TOFFICE SOUGH		
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BC	X)		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGI	HI OK HELD	SUPPORT OPPOSE
CITY STATE ZIP CO	DDE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	HT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	HT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	HT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BO	DX)		-				
CITY STATE ZIP C	ODE AREA CODE/PHONE		Atta	ch continuati	on sheets if ne	eressarv	
	· · · · · · · · · · · · · · · · · · ·		Alla	on commutati	on succes ii iid	ocooai y	

Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1355747 Patrick J. Furey **Calendar Year Summary for Candidates** Column A Column B **Contributions Received** TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE **General Elections** 63,532.50 10.199.00 1. Monetary Contributions Schedule A, Line 3 1/1 through 6/30 7/1 to Date 30,000.00 20. Contributions 10.199.00 93,532,50 SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ Received 2,350.84 Nonmonetary Contributions Schedule C, Line 3 21. Expenditures 10,199.00 95,883.34 Made TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 \$ _ **Expenditures Made Expenditure Limit Summary for State** 77,484.00 **Candidates** 6. Payments Made Schedule E. Line 4 Loans Made Schedule H. Line 3 22. Cumulative Expenditures Made* 77.484.00 16.534.11 SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy) 0 10. Nonmonetary Adjustment Schedule C, Line 3 16,534.11 77,484.00 **Current Cash Statement** 24,421.61 To calculate Column B. add 10,199.00 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 1,000.00 14. Miscellaneous Increases to Cash Schedule I, Line 4 from Column B of your last reported in Column B. report. Some amounts in 16.534.11 15. Cash Payments Column A, Line 8 above Column A may be negative 19.086.50 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 the first report being filed for this calendar year, only 17. LOAN GUARANTEES RECEIVED Schedule B. Part 2 \$ ____ carry over the amounts from Lines 2, 7, and 9 (if **Cash Equivalents and Outstanding Debts** any). 18. Cash Equivalents See instructions on reverse \$ ___ 30,000.00 FPPC Form 460 (January/05) 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A Monetary Contributions Received

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A

CALIFORNIA

Statement covers period

				from05/18	3/2014	FOR	RESIDENCE A REAL PROPERTY AND A SECOND
SEE INSTRUCTION	DNS ON REVERSE			through06/5	30/2014	Page	4 of12
NAME OF FILER						I.D. NUMBE	ER
Patrick J.	Furey					1355747	
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 CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
5/21/14	Laborers International Union of North America Local 1309 PAC 3919 Paramount Blvd. Lakewood, Ca 90712	☐IND ☐COM ☐OTH ☐PTY ☐SCC		1,000.00			1,000.00
5/21/14	Harry H. Joh Construction, Inc. 7303 Somerset Blvd. Paramount, Ca 90723	□IND □COM ☑OTH □PTY □SCC		100.00			100.00
5/21/14	Sergio Carillo Wilmington, Ca 90744	☑IND □COM □OTH □PTY □SCC	Chief Strategist Carillo Strategies	100.00			100.00
5/21/14	Chris Bouroughs Hermosa Beach, Ca 90254	☑IND □COM □OTH □PTY □SCC	Labor Relations Manager M.L. Johnson & Associates	100.00			100.00
5/28/14	Muratsuchi for Assembly 2014 ID#1353738 6380 Wilshire Blvd., #1612 Los Angeles, Ca 90048	□IND COM □OTH □PTY □SCC		1,000.00			1,000.00
*			SUBTOTAL\$	2,300.00			
 Amount re (Include a Amount re Total mone 	A Summary eceived this period – itemized monetary contributions. Ill Schedule A subtotals.) eceived this period – unitemized monetary contributions etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colu	s of less than	\$100 \$	8,900.00 1,299.00 10,199.00	IND- COM OTH PTY-	– Other (e.g - Political Pa	Committee n PTY or SCC) ., business entity)

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 **CALIFORNIA** 05/18/2014 **FORM** from_ 06/30/2014 5 through

NAME OF FILER			*			I.D. NUI	MBER
Patrick J. F	urey					13557	47
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 CALENDAR Y (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)
5/22/14	David Serato Torrance, Ca 90501	IND □COM □OTH □PTY □SCC	Longshoreman	50.00			100.00
5/23/14	Marilyn Katherman Torrance, Ca 90501	☑IND □COM □OTH □PTY □SCC	Public Relations Katherman Company	100.00			100.00
5/28/14	District Council of Irn Workers Political Action League ID #831693 1660 SanPablo Avenue, Suite C Pinole, Ca 94564	☐IND ☐COM ☐OTH ☐PTY ☐SCC		1,000.00			1,000.00
5/29/14	Amanda Alvarez Torrance, Ca 90501	☑IND □COM □OTH □PTY □SCC	Student	50.00			250.00
5/29/14	Laborers International Union of North America Laborers Local 652 Political Action Committee 15323 East Chestnut Avenue Santa Ana, Ca 92701	☐IND ☐COM ☐OTH ☐PTY ☐SCC		500.00			500.00
			SUBTOTAL	\$ 1,700.00			

*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

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. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

from.

05/18/2014

NAME OF FILER				through 06/3	0/2014	Page .	
Patrick J. Fu	urey					13557	747
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 CALENDAR Y (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)
5/30/14	Hall for Senate 2016 ID# 1354418 c/o David Gould Company 3700 Wilshire Blvd., Ste. 1050B Los Angeles Ca 90010	□IND □COM □OTH □PTY □SCC		500.00			500.00
5/30/14	Yellow Cab of South Bay Cooperative, Inc. 2129 Roscrans Avenue Gardena, Ca 90249	□IND □COM ☑OTH □PTY □SCC		250.00			250.00
5/30/14	South Bay Cooperative, Inc. DBA United Checker, Inc. 2129 Roscrans Avenue Gardena, Ca 90249	☐IND ☐COM ØOTH ☐PTY ☐SCC		250.00			250.00
5/30/14	AD Plastering PO Box 7000 Torrance, Ca 90504	□IND □COM ☑OTH □PTY □SCC		1,000.00			1,000.00
5/31/14	Gary Shiohama Carson, Ca 90745	☑IND □COM □OTH □PTY □SCC	Pastor South Bay Church	200.00		5	200.00
		\$ 2,200.00					

*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.)
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State	ment covers period	CALIFORNIA ACO
from	05/18/2014	FORM 460
through_	06/30/2014	Page 7 of 12
		I.D. NUMBER
		1355747

NAME OF FILER

Patrick J. F	urey				13557	[47			
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)			
5/31/14	Gary Fukumoto Gardena, Ca 90248	☑IND □COM □OTH □PTY □SCC	Retired	100.00		100.00			
5/30/14	Randolph Shepard Torrance, Ca 90504	☑IND □COM □OTH □PTY □SCC	Executive Western Federal Credit Union	100.00		100.00			
6/02/14	BNSF Railway Company 2500 Menk Drive, AOB-3 Fort Worth, TX 76131	□IND □COM ☑OTH □PTY □SCC		500.00		500.00			
6/02/14	Citizens For Waters c/o David L. Gould Company 3700 Wilshire Blvd., Suite 1050B Los Angeles, Ca 90010-3015	□IND □COM □OTH □PTY □SCC		1,000.00		1,000.00			
6/05/14	Sprinkler Fitters United Ass'n 709 PAC ID#901643 12140 Rivera Road Whittier, Ca 90606	☐IND ☐COM ☐OTH ☐PTY ☐SCC		1,000.00		1,000.00			
SUBTOTAL\$ 2,700.00									

*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

Sched	ule	B –	P	art	1
Loans	Red	eiv	ed		

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

** If required.

Type or print in ink. Amounts may be rounded

	- PART 1

Statement covers period

Schedule B – Part 1 Loans Received	Amounts may be rounded to whole dollars.				Statement cov	•	CALIFORNIA 460		
Loans Received		to whole dollar	.		from05/1	8/2014	FORM	700	
SEE INSTRUCTIONS ON REVERSE					through06/	30/2014	Page 8	of12	
NAME OF FILER				1	-		I.D. NUMBER		
Patrick J. Furey							1355747		
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	(c) AMOUNT PA OR FORGIVE THIS PERIO	EN CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE	
Patrick J. Furey 18716 Cranbrook Avenue Torrance, Ca 90504	Principal Deputy County Counsel County of Los Angeles			PAID \$FORGIVEN	_ \$15,000	RATE %	\$15,000	\$\frac{15,000}{PER ELECTION**	
†☑IND □ COM □ OTH □ PTY □ SCC		\$15,000	\$	s	DATE DUE	\$	01/31/13 DATE INCURRED	\$15,000	
Teresa K. Furey * Torrance, Ca 90504	Job Developer Torrance Unified School	G		PAID \$	_ s10,000	RATE	\$_10,000	calendar year s 10,000	
* Community Property with spouse/ candidate †☑ IND □ COM □ OTH □ PTY □ SCC	District	s10,000	\$	FORGIVEN	DATE DUE	\$	06/28/13 DATE INCURRED	s 10,000	
Teresa K. Furey *	Job Developer			PAID				CALENDAR YEAR	
Torrance, Ca 90504 * Community Property with spouse/	Torrance Unified School District			\$ FORGIVEN	_ \$10,000	% RATE	\$5,000	\$5,000 PER ELECTION**	
candidate †☑ IND □ COM □ OTH □ PTY □ SCC		\$5,000	s	\$	DATE DUE	\$	12/30/13 DATE INCURRED	\$5,000	
		SUBTOTALS \$		\$	\$ 30,000	\$	Hz A		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)			
Loans received this period (Total Column (b) plus unitemized loan		****************	*************	\$	0	_	Contributor Codes		
 Loans paid or forgiven this period (Total Column (c) plus loans under \$100 (Include loans paid by a third party that) 	0 paid or forgiven.)		MATALLAN MALIES LE LA E	\$ _	<u> </u>	- C	ID – Individual OM – Recipient Co (other than ITH – Other (e.g., TY – Political Part	PTY or SCC) business entity)	
3. Net change this period. (Subtract Line Enter the net here and on the Summar			****************	NET \$ _	(May be a negative number)		CC – Small Contril	outor Committee	

Schodule F

Type or print in ink.

Charles and a second and a	SCHEDULE
Statement covers period from05/18/2014	FORM 460
through06/30/2014	Page9 of12
t.,	I.D. NUMBER
	1355747

Payments Made	Amounts may be rounded to whole dollars.	from05/18/2014	FORM 460
SEE INSTRUCTIONS ON REVERSE		through06/30/2014	Page9 of12
NAME OF FILER		110	I.D, NUMBER
Patrick J. Furey			1355747
CODES: If one of the following codes accurately of	describes the payment, you may enter the code	e. 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	

CNS CTB CVC FIL FND IND LEG LIT	contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)*	office expen petition circu phone banks polling and s postage, deli	ses lating survey rese ivery and n		VOT	t.v. or cable airtime and production cos candidate travel, lodging, and meals	ame candidate/sponsor
	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTIO	ON OF PAYMENT	AMOUNT PAID
Los	Angeles County Democratic Party	•					

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Los Angeles County Democratic Party FPPC #1355623 3550 Wilshire Blvd. #1203 Los Angeles, Ca 90010	LIT			1,000.00
Industry Sports Bar 22735 Hawthorne Blvd. Torrance, Ca 90505	FND		=	899.22
El Segundo Herald 312 E. Imperial Avenue El Segundo, Ca 90245	LIT			750.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTAL\$	2,649.22
Schedule E Summary		
Itemized payments made this period. (Include all Schedule E subtotals.)	\$	15,010.22
2. Unitemized payments made this period of under \$100	\$	1,523.89
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ <u></u>	0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$	16,534.11

Schedule E	
(Continuation She	et)
Payments Made	

Type or print in ink.

Amounts may be rounded to whole dollars.

	001122022 2 (001111
Statement covers period	CALIFORNIA 460
from05/18/2014	FORM 400
through 06/30/2014	Page
	I,D. NUMBER
	l

 SEE INSTRUCTIONS ON REVERSE
 through
 06/30/2014
 Page
 10
 of
 12

 NAME OF FILER
 Patrick J. Furey

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Liberty Campaign Solutions PO Box 631 Torrance, Ca 90508	SAL		2,016.00
Liberty Campaign Solutions PO Box 631 Torrance, Ca 90508	CNS		10,000.00
United States Post Office Torrance, Ca 90504	POS		245.00
Democratic Municipal Officers 1431 West Fargo Avenue Chicago, Il 60626	CVC		100.00

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

SUBTOTAL \$

12,361.00

Schedule F	
Accrued Expenses	(Unpaid Bills)

Type or print in ink. Amounts may be rounded

CALIFORNIA Statement covers period

Accrued Expenses (Unpaid Bills)	to whole dollars.	from05/18/2014	FORIVI
SEE INSTRUCTIONS ON REVERSE		through06/30/2014	Page 11 of 12
NAME OF FILER		Ţ.	I.D. NUMBER
Patrick J. Furey			1355747

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications RAD radio airtime and production costs CMP campaign paraphernalia/misc. CNS campaign consultants MTG meetings and appearances RFD returned contributions office expenses SAL campaign workers' salaries CTB contribution (explain nonmonetary)* petition circulating TEL t.v. or cable airtime and production costs CVC civic donations phone banks TRC candidate travel, lodging, and meals candidate filing/ballot fees staff/spouse travel, lodging, and meals polling and survey research fundraising events postage, delivery and messenger services transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)* TSF ND professional services (legal, accounting) VOT voter registration legal defense WEB information technology costs (internet, e-mail) campaign literature and mailings PRT print ads (d) CODE OR OUTSTANDING AMOUNT INCURRED AMOUNT PAID OUTSTANDING NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) DESCRIPTION OF PAYMENT **BALANCE BEGINNING** THIS PERIOD THIS PERIOD **BALANCE AT CLOSE** (ALSO REPORT ON E) OF THIS PERIOD OF THIS PERIOD Herald Publications PRT 312 East Imperial Avenue El Segundo, Ca 90245 750.00 0 750.00 0

* Payments that are contributions or independent expenditures must also be 750.00 \$ **SUBTOTALS \$** 0 \$ 750.00 \$ summarized on Schedule D.

Schedule F Summary

- 1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for
- 2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on 750.00
- 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 \$

 -/50.00

 May be a negative number

8				
Schedule Misceiiane see Instruction NAME OF FILER	eous Increases to Cash Amout	pe or print in ink. nts may be rounded o whole dollars.	Statement covers period from05/18/2014 through06/30/2014	CALIFORNIA FORM 460 Page 12 of 12
Patrick J. Fu	rey			1355747
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DE	ESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
6/23/14	Inspired Venutes, LLC 11640 San Vincente Blvd., #205 Los Angeles, Ca 90049	Return of Secur	rity Deposit for Campaign HQ	1,000.00
		a		
8				
7.				
Attach add	litional information on appropriately labeled continuation sheets.		SUBTOTAL	1,000.00
Schedule	I Summary			

1. Itemized increases to cash 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

2. Unitemized increases to cash of under \$100 this period.

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

1,000.00

1,000.00