

Recipient Committee Campaign Statement Cover Page

Statement covers period from 09/23/2018 through 10/20/2018

Date of election if applicable: 11/06/2018



CALIFORNIA FORM 460 Page 1 of 19 For Official Use Only

- 1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. Includes checkboxes for Officeholder, State Candidate Election Committee, Recall, General Purpose Committee, etc.

- 2. Type of Statement: Includes checkboxes for Preelection Statement, Semi-annual Statement, Termination Statement, Amendment, Quarterly Statement, and Special Odd-Year Report.

3. Committee Information. I.D. NUMBER 1407507. COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Mahmoud El-farra For Mission Viejo City Council 2018. Includes fields for Street Address, City, State, ZIP Code, and Area.

Treasurer(s). NAME OF TREASURER Norm Heidner. MAILING ADDRESS [Redacted]. CITY CODE/PHONE Mission Viejo, CA 92692. STATE ZIP CODE AREA. Includes fields for Assistant Treasurer information.

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 10-23-18 DATE
Executed on 10-23-18 DATE
Executed on DATE
Executed on DATE

By [Signature] Signature of Treasurer or Assistant Treasurer
By [Signature] Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor
By [Signature] Signature of Controlling Officeholder, Candidate, State Measure Proponent
By [Signature] Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Recipient Committee  
Campaign Statement  
Cover Page - Part 2**

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE  
**Mahmoud El-Farra**

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)  
**City Council Member**      **LOCATION: Local City**

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)      CITY      STATE      ZIP  
[REDACTED]      **Mission Viejo, CA 92691**

**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
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY CODE/PHONE	STATE      ZIP CODE      AREA
COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY CODE/PHONE	STATE      ZIP CODE      AREA

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT
		<input type="checkbox"/> OPPOSE

**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	<input type="checkbox"/> SUPPORT
		<input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT
		<input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT
		<input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT
		<input type="checkbox"/> OPPOSE

**Campaign Disclosure Statement  
Summary Page**

Amounts may be rounded  
to whole dollars.

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	09/23/2018	
through	10/20/2018	Page <u>3</u> of <u>19</u>
NAME OF FILER		I.D. NUMBER
Mahmoud El-farra For Mission Viejo City Council 2018		1407507

SEE INSTRUCTIONS ON REVERSE

**Contributions Received**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions ..... Schedule A, Line 3	\$ 6,606.56	\$ 11,094.84
2. Loans Received ..... Schedule B, Line 3	.00	.00
3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1 + 2	\$ 6,606.56	\$ 11,094.84
4. Nonmonetary Contributions ..... Schedule C, Line 3	.00	.00
5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4	\$ 6,606.56	\$ 11,094.84

**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	\$ .00	\$ .00
21. Expenditures Made	\$ .00	\$ .00

**Expenditures Made**

	Column A	Column B
6. Payments Made ..... Schedule E, Line 4	\$ 6,669.04	\$ 9,509.57
7. Loans Made ..... Schedule H, Line 3	.00	.00
8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7	\$ 6,669.04	\$ 9,509.57
9. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3	200.00	200.00
10. Nonmonetary Adjustment ..... Schedule C, Line 3	.00	.00
11. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10	\$ 6,869.04	\$ 9,709.57

**Expenditures Limit Summary for State  
Candidates**

**22. Cumulative Expenditures Made\***  
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

**Current Cash Statement**

12. Beginning Cash Balance ..... Previous Summary Page, Line 16	\$ 1,676.75
13. Cash Receipts ..... Column A, Line 3 above	6,606.56
14. Miscellaneous Increases to Cash ..... Schedule I, Line 4	72.00
15. Cash Payments ..... Column A, Line 8 above	6,669.04
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 1,686.27
<i>If this is a termination statement, Line 16 must be zero.</i>	
17. LOAN GUARANTEES RECEIVED..... Schedule B, Line 2	\$ .00

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.

**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents ..... See instructions on reverse	\$ 1,676.75
19. Outstanding Debts ..... Add Line 2 + Line 9 in Column B above	\$ 200.00

**Schedule A**  
**Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A

Statement covers period from <u>09/23/2018</u> through <u>10/20/2018</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

**Mahmoud El-farra For Mission Viejo City Council 2018**

I.D. NUMBER  
**1407507**

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF 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)
09/25/2018	Moutif M. Assaf [REDACTED] Lake Fores, CA 92679	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Business Owner Shell Gas Station	100.00	100.00	100.00 G-2018
09/25/2018	Amer Boukai [REDACTED] Trabuco Canyon, CA 92679	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Continental Food Management	250.00	250.00	250.00 G-2018
09/25/2018	Ghada Boukai [REDACTED] Coto de Caza, CA 92679	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Vice President Continental Food Management	250.00	250.00	250.00 G-2018
09/26/2018	Canyon Democrats 11 Crystallaire Rancho Santa Margarita, CA 92688 ID: 1340996	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,500.00	1,500.00 G-2018
09/27/2018	Laborers International Union of North America Local 652 1532 East Chestnut Avenue Santa Ana, CA 92701 ID: 1251912	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,500.00	2,500.00	2,500.00 G-2018

**SUBTOTAL \$ 4,100.00**

**Schedule A**  
**Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A

Statement covers period		<b>CALIFORNIA</b> <b>FORM</b> <b>460</b>
from	09/23/2018	
through	10/20/2018	Page <u>5</u> of <u>19</u>
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Mahmoud El-farra For Mission Viejo City Council 2018		1407507

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF 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)
09/27/2018	Planned Parenthood of Orange and San Bernardino Counties 555 Capitol Mall Sacramento, CA 95814 ID: 1282464	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	1,000.00 G-2018
09/29/2018	Elizabeth Triana [REDACTED] Mission Viejo, CA 92692	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired  Retired	104.48	104.48	104.48 G-2018
10/02/2018	Muhammad M. Akhter [REDACTED] Mission Viejo, CA 92692	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Management  Asend Tools	100.00	100.00	100.00 G-2018
10/05/2018	Hala Jaroudi [REDACTED] Laguna Niguel, CA 92677	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker  None	100.00	100.00	100.00 G-2018
10/05/2018	John M. Quinlan [REDACTED] Laguna Niguel, CA 92677	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Educator  Saddleback Community College	100.00	100.00	100.00 G-2018

**SUBTOTAL \$ 1,404.48**

**Schedule A**  
**Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A

Statement covers period from <u>09/23/2018</u> through <u>10/20/2018</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE  
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**Mahmoud El-farra For Mission Viejo City Council 2018**

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF 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)
10/06/2018	Canyon Democrats 11 Crystalaire Rancho Santa Margarita, CA 92688 ID: 1340996	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	2,000.00	2,000.00 G-2018
10/08/2018	Muhammad M. Akhter [REDACTED] Mission Viejo, CA 92692	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Management Asend Tools	100.00	200.00	200.00 G-2018
10/11/2018	Doug Harding [REDACTED] Mission Viejo, CA 92692	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	50.00	152.40	152.40 G-2018
10/13/2018	Robert Woodley [REDACTED] Chicago, IL 60602	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Programmer DRW Trading	250.00	250.00	250.00 G-2018
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			.00	

**SUBTOTAL \$ 900.00**

**Schedule A  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A

Statement covers period from <u>09/23/2018</u> through <u>10/20/2018</u>	<b>CALIFORNIA FORM 460</b>
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**Mahmoud El-farra For Mission Viejo City Council 2018**

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF 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)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			.00	

**Schedule A Summary**

1. Amount received this period - itemized monetary contributions. (Include all Schedule A subtotals.)	\$ <u>6,404.48</u>
2. Amount received this period - unitemized monetary contributions of less than \$100	\$ <u>202.08</u>
3. Total monetary contributions received this period. (add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)	<b>TOTAL \$ <u>6,606.56</u></b>

\* 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

<b>SUBTOTAL \$</b>	<b>.00</b>
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**Schedule B - Part 2**  
**Loans Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE B - PART 2

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**Mahmoud El-farra For Mission Viejo City Council 2018**

FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER <hr/> DATE <hr/>		CALENDAR DATE \$ _____ PER ELECTION (IF REQUIRED)	

**SUBTOTAL \$**

Enter on Summary  
Page. Line 17 only.

**Schedule C  
Nonmonetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE C

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NAME OF FILER

**Mahmoud El-farra For Mission Viejo City Council 2018**

I.D. NUMBER

**1407507**

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

**Schedule C Summary**

1. Amount received this period - itemized nonmonetary contributions.  
(Include all Schedule C subtotals.) ----- \$ .00

2. Amount received this period - unitemized nonmonetary contributions of less than \$100\_ ----- \$ .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** \$ .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

**SUBTOTAL \$**

**Schedule D**  
**Summary of Expenditures**  
**Supporting/Opposing Other**  
**Candidates, Measures, and Committees**

Amounts may be rounded  
to whole dollars.

SCHEDULE D

Statement covers period from <u>09/23/2018</u> through <u>10/20/2018</u>	<b>CALIFORNIA FORM 460</b> Page <u>11</u> of <u>19</u>
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NAME OF FILER <b>Mahmoud El-farra For Mission Viejo City Council 2018</b>	I.D. NUMBER <b>1407507</b>
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					

**SCHEDULE D SUMMARY**

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) ----- \$ .00

2. Unitemized contributions and independent expenditures made this period of under \$100 ----- \$ .00

3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ----- **TOTAL \$** .00

<b>SUBTOTAL \$</b>	
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**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E

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**Mahmoud El-farra For Mission Viejo City Council 2018**

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
California Families Vote Green 249 East Ocean Boulevard Suite 685 Long Beach, CA 90802 ID: 1408055	LIT	Slate Mailers	600.04
Families First Education Voter Guide 249 East Ocean Boulevard Suite 685 Long Beach, CA 90802 ID: 1398433	LIT	Slate Mailers	699.45
Latino Family Voter Guide 249 East Ocean Boulevard Suite 685 Long Beach, CA 90802 ID: 1386464	LIT	Slate Mailers	199.76
SchoolsFirst MasterCard 27826 Santa Margarita Parkway Mission Viejo, CA 92691	OFC	CC Balance Payoff	621.72

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

**SUBTOTAL \$ 2,120.97**

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mahmoud El-farra For Mission Viejo City Council 2018

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
SchoolsFirst MasterCard 27826 Santa Margarita Parkway Mission Viejo, CA 92691	OFC	CC Balance Payoff	804.89
Your Community Voter Guide 249 East Ocean Boulevard Suite 685 Long Beach, CA 90802 ID: 1408057	LIT	Slate Mailer	300.03
Heidner Computer Services 21782 Santa Pola Mission Viejo, CA 92692	PRO	Accounting	100.00
Calsal Voter Guide 22410 Hawthorne Boulevard Torrance, CA 90505 ID: 1368249	LIT	Slate Mailer Cost	1,475.00

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

**SUBTOTAL \$ 2,679.92**

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E

Statement covers period		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER

Mahmoud El-farra For Mission Viejo City Council 2018

I.D. NUMBER

1407507

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
Election Digest 22410 Hawthorne Boulevard Torrance, CA 90505 ID: 1345303	LIT	Slate Costs	1,161.00
City of Mission Viejo 200 Civic Center Mission Viejo, CA 92691	OFC	Sign Removal Deposit	250.00
Heidner Computer Services 21782 Santa Pola Mission Viejo, CA 92692	PRO	Postage and Copies	14.38
SchoolsFirst MasterCard 27826 Santa Margarita Parkway Mission Viejo, CA 92691	PRT	Balance Payoff	359.00
<b>SUBTOTAL \$</b>			<b>1,784.38</b>

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

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	09/23/2018	
through	10/20/2018	Page 15 of 19
NAME OF FILER		I.D. NUMBER
Mahmoud El-farra For Mission Viejo City Council 2018		1407507

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NAME OF FILER

Mahmoud El-farra For Mission Viejo City Council 2018

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

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)	-----	\$ 6,585.27
2. Unitemized payments made this period of under \$100.	-----	\$ 83.77
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	-----	\$ .00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	-----	<b>TOTAL \$ 6,669.04</b>

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

**SUBTOTAL \$ .00**

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

Amounts may be rounded  
to whole dollars.

SCHEDULE F

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	09/23/2018	
through	10/20/2018	Page 16 of 19
NAME OF FILER		I.D. NUMBER
Mahmoud El-farra For Mission Viejo City Council 2018		1407507

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NAME OF FILER

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 CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Heidner Computer Services 21782 Santa Pola Mission Viejo, CA 92692	PRO Accounting	.00	300.00	100.00	200.00

**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.) \_\_\_\_\_ **INCURRED TOTALS \$** 300.00
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.) \_\_\_\_\_ **PAID TOTALS \$** 100.00
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 \$** 200.00

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

<b>SUBTOTALS</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>
------------------	-----------	-----------	-----------	-----------



**Schedule G**

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

Amounts may be rounded to whole dollars.

SCHEDULE G

Statement covers period from <u>09/23/2018</u> through <u>10/20/2018</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER

**Mahmoud El-farra For Mission Viejo City Council 2018**

NAME OF AGENT OR INDEPENDENT CONTRACTOR

**SchoolsFirst MasterCard**

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
S&S Printers 2100 West Lincoln Avenue Anaheim, CA 92801	PRT	Sign Prints	804.89
S&S Printers 2100 West Lincoln Avenue Anaheim, CA 92801	PRT	Postcards	621.72

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

**TOTAL \* \$ 1,426.61**

\*\* 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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**Schedule H  
Loans Made to Others\***

Amounts may be rounded  
to whole dollars.

SCHEDULE H

Statement covers period from <u>09/23/2018</u> through <u>10/20/2018</u>	<b>CALIFORNIA FORM 460</b>
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**Mahmoud El-farra For Mission Viejo City Council 2018**

I.D. NUMBER

**1407507**

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD *	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____  _____ DATE DUE	_____ % RATE \$ _____	\$ _____  _____ DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION**

**SUBTOTALS**    \$                    \$                    \$                    \$

\*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

**Schedule I  
Miscellaneous Increases to Cash**

Amounts may be rounded  
to whole dollars.

SCHEDULE I

Statement covers period from <u>09/23/2018</u> through <u>10/20/2018</u>	<b>CALIFORNIA FORM 460</b>
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**Mahmoud El-farra For Mission Viejo City Council 2018**

I.D. NUMBER  
**1407507**

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

**Schedule I Summary**

1. Itemized increases to cash this period.....	\$	<u>.00</u>
2. Unitemized increases to cash of under \$100 this period.....	\$	<u>72.00</u>
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).).....	\$	<u>.00</u>
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.).....	<b>TOTAL \$</b>	<u>72.00</u>

**SUBTOTAL \$**