Recipient Committee Campaign Statement Cover Page

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CITY OF GARDEN GROVE

CITY CLERK'S OFFICE

CALIFORNIA	4.00
FORM	460
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COVER PAGE

8 of Page. Statement covers period Date of election if applicable: JUL 22 M 8:53 For Official Use Only (Month, Day, Year) January 1, 2019 from June 30, 2019 SEE INSTRUCTIONS ON REVERSE through 2. Type of Statement: 1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. ☐ Preelection Statement Officeholder, Candidate Controlled Committee Primarily Formed Ballot Measure **Quarterly Statement** Committee Semi-annual Statement State Candidate Election Committee ☐ Special Odd-Year Report O Recall O Controlled ☐ Termination Statement O Sponsored (Also Complete Part 5) (Also file a Form 410 Termination) (Also Complete Part 6) Amendment (Explain below) General Purpose Committee Primarily Formed Candidate/ O Sponsored Officeholder Committee O Small Contributor Committee (Also Complete Part 7) O Political Party/Central Committee I.D. NUMBER Treasurer(s) 3. Committee Information 1410419 NAME OF TREASURER COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Lisa Brietigam Friends of George Brietigam for Garden Grove City Council (2022) MAILING ADDRESS AREA CODE/PHONE STREET ADDRESS (NO PO BOY) ZIP CODE CITY CA 92845 Garden Grove NAME OF ASSISTANT TREASURER, IF ANY STATE ZIP CODE CITY Garden Grove CA 92845 George E. Brietigam MAILING ADDRESS MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX ZIP CODE STATE ZIP CODE CITY STATE AREA CODE/PHONE CITY CA 92845 Garden Grove OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS 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 confect July 16, 2019 Executed on -July 16, 2019 Executed on .

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (Jan/2016)

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2
CALIFORNIA 460
Page 2 of 8

Officeholder or Candidate Controlled	Committee			6.	Primarily Formed Balle	ot Measure C	Committee	
NAME OF OFFICEHOLDER OR CANDIDATE		<u></u>			NAME OF BALLOT MEASURE			
George Stephen Brietigam III		,						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND		APPLICABLE	≣)		BALLOT NO. OR LETTER	JURISDICTION	I	SUPPORT OPPOSE
Garden Grove City Council, District No.							<u> </u>	
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREE		STATE	ZIP		Identify the controlling offic	eholder, candid	iate, or state measure pro	ponent, If any.
	Garden Grove	CA	92845		NAME OF OFFICEHOLDER, CAN	NDIDATE, OR PRO	PONENT	
Related Committees Not included in t not included in this statement that are controlled to contributions or make expenditures on behalf of y	by you or are primari				OFFICE SOUGHT OR HELD		DISTRICT NO). IF ANY
COMMITTEE NAME	I.D. NUMBI	ER	-					
NAME OF TREASURER	CONTROL	LED COMMIT	TEE?	7.	Primarily Formed Can	didate/Office	eholder Committee	List names of
	☐ YES	Пио						
COMMITTEE ADDRESS STREET ADDRESS (I	NO P.O. BOX)				NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
					George Stephen Brietig	gam III	City Council Dist No	o. 1 OPPOSE
CITY STATE	ZIP CODE	AREA COD	E/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMB	ER			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HELI	SUPPORT OPPOSE
NAME OF TREASURER		LED COMMIT			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO PO BOX)	□ NO						OPPOSE
	101.0.000)						<u></u>	***************************************
COMMITTEE ADDITION CONTENTS (

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period CALIFORNIA January 1, 2019 FORM from_ 3 June 30, 2019 through LD NUMBER

NAME OF FILER Friends of George Brietigam for Garden Grove City Council (2022)	2)		1410419
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and
1. Monetary Contributions	3,000,00	\$ 3,000.00 \$ 3,000.00 \$ 3,000.00	General Elections 1/1 through 6/30 7/1 to Date 20. Contributions Received \$\$ 21. Expenditures Made \$\$
Expenditures Made 6. Payments Made	\$ 2,879.00 \$ 2,879.00 2,879.00 0	\$ 0 2,879.00 \$ 2,879.00 2,879.00 0 \$ 5,758.00	Expenditure Limit Summary for State Candidates 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy)
Current Cash Statement 12. Beginning Cash Balance	3,000.00 0 2,879.00 \$ 258.61	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	*Amounts in this section may be different from amounts reported in Column B.
Cash Equivalents and Outstanding Debts 18. Cash Equivalents		any).	FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.go

Schedule	A		its may be rounded				SCHEDULE A
	Contributions Received	to	whole dollars.	Statement covers period from January 1, 2019			FORNIA 460
SEE INSTRUCTIO	NS ON REVERSE		¥	through June	30, 2019	Page	4 of8
IAME OF FILER						I.D. NU	JMBER
Friends of	George Brietigam for Garden Grove City Council (20	22)				14104	119
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)
2/13/19	Garden Grove Police Association PAC 11301 Acacia Parkway Garden Grove, CA. 92840	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	PAC	3,000.00	3,000	.00	
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					18
		☐IND ☐COM ☐OTH ☐PTY ☐SCC	2				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
			SUBTOTAL	3,000.00			
Schedule .	A Summary				*Cor	ntributor (Codes
1. Amount re	ceived this period – itemized monetary contributions.		\$	3,000.00			ual pient Committee r than PTY or SCC)
•	eceived this period – unitemized monetary contributio			3,000.00		l – Öther	(e.g., business entity)
3. Total mone	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Col			3,000.00			Contributor Committee
•							NC C 4CO [] [2016]

	Λm	ounts may be ro	unded				SCHE	DULE B - PART 1
Schedule B – Part 1	AIII	to whole dollar		Γ	Statement cov	ers period	CALIFORN	^{IA} 460
Loans Received					from January	1, 2019	FORM	400
DEF INSTRUCTIONS ON DENTES					through June	30, 2019	Page 5	of8
SEE INSTRUCTIONS ON REVERSE NAME OF FILER							I.D. NUMBER	
Friends of George Brietigam for Garden G	Grove City Council (2022)						1410419	
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 PAID OR FORGIVED THIS PERIOD	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE
George Stephen Brietigam III 5841 Ludlow Avenue Garden Grove, CA. 92845	Police Sergeant Los Angeles Police Department				s 0.0	O %	\$5,879.00	\$ 0 PER ELECTION**
† IND COM OTH PTY SCC		\$_2,879.00	s0	s	None DATE DUE	\$	8/16/18 DATE INCURRED	s <u>0</u>
		•	ę	PAID S FORGIVEN	s	RATE	\$	S CALENDAR YEAR S PER ELECTION **
TO IND COM OTH PTY SCC				PAID S——— FORGIVEN	DATE DUE	RATE %	\$	CALENDAR YEAR \$ PER ELECTION**
† IND COM OTH PTY SCC		s	\$	s	DATE DUE	s	DATE INCURRED	\$
		SUBTOTALS S	;	\$	\$	\$		
Schedule B Summary 1. Loans received this period				\$	0	(Enter (e) on Schedule E, Line 3	3)	
 (Total Column (b) plus unitemized loar Loans paid or forgiven this period (Total Column (c) plus loans under \$10 (Include loans paid by a third party that Net change this period. (Subtract Line) 	00 paid or forgiven.) at are also itemized on Sche	edule A.)					Contributor Codes ND – Individual COM – Recipient C (other than OTH – Other (e.g., PTY – Political Pari SCC – Small Contr	committee PTY or SCC) business entity) ty

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

Enter the net here and on the Summary Page, Column A, Line 2.

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www.fppc.ca.gov

(May be a negative number)

						SCHEDULE E
Schedule E	Amounts may b			Statement covers pe	riod CALIFO	ORNIA 460
Payments Made				from January 1, 20)19 FOR	M 400
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				through June 30, 20	019 Page	
Friends of George Brietigam for Garden Grove City Coun	cil (2022)				1410419	,
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants contribution (explain nonmonetary)* CVC civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense campaign literature and mallings	MBR member com MTG meetings and OFC office expens PET petition circul PHO phone banks	munications I appearances es ating urvey research very and messenge	er services	RAD radio airtime and processor returned contribution SAL campaign workers's TEL t.v. or cable airtime a candidate travel, lod TRS staff/spouse travel, li	oduction costs as salaries and production costs ging, and meals odging, and meals mmittees of the same	•
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESC	CRIPTION OF PAYMENT		AMOUNT PAID
* Payments that are contributions or independent expenditures must also b	pe summarized on Sche	dule D.			SUBTOTAL \$	0.0
Schedule E Summary			-			
Itemized payments made this period. (Include all Schedu	le E subtotals.)				\$ <u></u>	0
2. Unitemized payments made this period of under \$100						0
3. Total interest paid this period on loans. (Enter amount fro						0
zi i tetal iliterega paia tillo polloa orribalioi (millo) allibalit llo		,	-,			

				SCHEDULE
Schedule F Accrued Expenses (Unpaid Bills)	Amounts may be round to whole dollars.	led	Statement covers period from January 1, 2019	FOR. 40V
SEE INSTRUCTIONS ON REVERSE			through June 30, 2019	Page 7 of 8
NAME OF FILER Friends of George Brietigam for Garden Grove City Counc	il (2022)			1.D. NUMBER 1410419
CODES: If one of the following codes accurately describe	s the payment, you may	enter the code. Oth	erwise, describe the payme	nt.
CMP campaign paraphemalia/misc.	MBR member communication		RAD radio airtime and product	ion costs
CNS campaign consultants	MTG meetings and appearar OFC office expenses	nces	RFD returned contributions SAL campaign workers' salari	96
CTB contribution (explain nonmonetary)* CVC civic donations	OFC office expenses PET petition circulating		TEL t.v. or cable airtime and p	
FIL candidate filing/ballot fees	PHO phone banks		TRC candidate travel, lodging,	
FND fundraising events	POL polling and survey rese	arch	TRS staff/spouse travel, lodgir	
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and n			tees of the same candidate/sponsor
LEG legal defense LIT campaign literature and mailings	PRO professional services (I PRT print ads	egal, accounting)	VOT voter registration WEB information technology co	osts (internet, e-mail)
NAME AND ADDRESS OF CREDITOR	CODE OR	(a)	(b)	(c) (d)

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
George S. Brietigam III 5841 Ludlow Avenue Garden Grove, CA. 92845	Loan Repayment	\$2,879.00	0	\$2,879.00	0.0
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS \$		\$,	•

Schedule F Summary

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.)	0
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.)	2 970 00

Schedule H Summary	
1. Loans made this period\$ (Total Column (b) plus unitemized loans of less than \$100.)	**If Required
Payments received on loans	
3. Net change this period. (Subtract Line 2 from Line 1.)	