Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)		RECEIVED  CITY OF GARDEN GROV	
,	Statement covers period from10/23/2016	Date of election if applicable: (Month, Day, Year) 2017 JM 30 M II:	Page 1 of 13
SEE INSTRUCTIONS ON REVERSE	through12/31/2016	11/08/2016	
1. Type of Recipient Committee: All Committees  X Officeholder, Candidate Controlled Committee State Candidate Election Committee Recall (Also Complete Part 5)  General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee	- Complete Parts 1, 2, 3, and 4.  Primarily Formed Ballot Measure Committee ○ Controlled ○ Sponsored (Also Complete Part 6)  Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	2. Type of Statement:  Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination) Amendment (Explain below)	<ul><li>☐ Quarterly Statement</li><li>☐ Special Odd-Year Report</li><li>☐ Supplemental Preelection</li><li>Statement - Attach Form 495</li></ul>
3. Committee Information	I.D. NUMBER 1389674	Treasurer(s)	
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITS Stephanie Klopfenstein City Council Distr	TEE)	NAME OF TREASURER Stephanie Klopfenstein MAILING ADDRESS	
STREET ADDRESS (NO P.O. BOX)		CITY STATE Garden Grove CA	ZIP CODE AREA CODE/PHONE 92840
CITY STATE ZI	P CODE AREA CODE/PHONE	NAME OF ASSISTANT TREASURER, IF ANY	and the second s
	92840		
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P	O. BOX	MAILING ADDRESS	
PO BOX 1185 CITY STATE ZI	P CODE AREA CODE/PHONE	CITY STATE	ZIP CODE AREA CODE/PHONE
	92842	OIT STAIL	ZII GODE AREA GODEFFAONE
OPTIONAL: FAX / E-MAIL ADDRESS vote4stephanie@gmail.com		OPTIONAL: FAX / E-MAIL ADDRESS	
4. Verification  I have used all reasonable diligence in preparing and revie under penalty of perjury under the laws of the State of Calif.  Executed on   01/24/2017  Date  Executed on  01/24/2017  Date  Executed on  Date  Executed on  Date	By  Signature of Cor  By  By  By  By  By  By  By  By	Signature of Treasurer of Assistant/Treasurer	of Sponsor
			FPPC Form 460 (Jan/2016)

**COVER PAGE** 

## Recipient Committee Campaign Statement Cover Page — Part 2

-	COVE	R PAGI	E-PA	RT 2
CALIF	ORN	A /	10	$\cap$
FC	RM			$\cup$
	one of the second			
Page _	2	of	13	

5. Officeholder or Candidate Controlled Committee		6.	Primarily Formed Ballo	ot Measure	Committee	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE	The state of the s	The state of the s	
Stephanie Klopfenstein						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRI	CT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTI	ON	SUPPORT
City Council Member: City of Garden Grove D	istrict 5					OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	STATE ZIP		Identify the controlling off	iceholder ca	ndidata or stato moss	cure proponent if any
Gá	arden Grove CA 92840		No.			sure proponent, it any.
			NAME OF OFFICEHOLDER, CAN	NDIDATE, OR PE	ROPONENT	
Related Committees Not Included in this St. not included in this statement that are controlled by you contributions or make expenditures on behalf of your ca	or are primarily formed to receive		OFFICE SOUGHT OR HELD		DISTRICT	NO. IF ANY
COMMITTEE NAME	I.D. NUMBER			*********		
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Can officeholder(s) or candidate(s	didate/Offices) for which thi	eholder Committe s committee is primarily	<b>e</b> List names of rformed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. E	OX)		NAME OF OFFICEHOLDER OR (	CANDIDATE	OFFICE SOUGHT OR H	ELD SUPPORT OPPOSE
CITY STATE ZIP (	CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR (	CANDIDATE	OFFICE SOUGHT OR H	ELD SUPPORT
COMMITTEE NAME	I.D. NUMBER					
			NAME OF OFFICEHOLDER OR (	CANDIDATE	OFFICE SOUGHT OR H	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR C	CANDIDATE	OFFICE SOUGHT OR HI	ELD SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. B	OX)				TARREST TARRES	
CITY STATE ZIP C	ODE AREA CODE/PHONE		Attac	ch continuatio	on sheets if necessary	′
					•	

## Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

Statem	ent covers period	CALIFORNIA A CO
from	10/23/2016	CALIFORNIA 460 FORM
through _	12/31/2016	Page3 of13
		I.D. NUMBER

CLIMANADYDACE

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Stephanie Klopfenstein City Council District 5 2016 1389674 Column A Calendar Year Summary for Candidates Column B Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE **General Elections** 4,050.00 21,550.00 1/1 through 6/30 7/1 to Date Loans Received ...... Schedule B, Line 3 -850.00 0.00 20. Contributions SUBTOTAL CASH CONTRIBUTIONS ...... Add Lines 1 + 2 \$ 3,200.00 21,550.00 Received Nonmonetary Contributions ...... Schedule C. Line 3 0.00 0.00 21. Expenditures \$\_\_\_\_\_\$ 3,200.00 Made 21,550.00 **Expenditures Made Expenditure Limit Summary for State Candidates** 7. Loans Made ...... Schedule H, Line 3 0.00 22. Cumulative Expenditures Made\* (If Subject to Voluntary Expenditure Limit) 0.00 Date of Election Total to Date (mm/dd/yy) 10. Nonmonetary Adjustment ...... Schedule C, Line 3 0.00 0.00 **Current Cash Statement** To calculate Column B, add 3,200.00 amounts in Column A to the corresponding amounts \*Amounts in this section may be different from amounts 677.09 14. Miscellaneous Increases to Cash ...... Schedule I, Line 4 from Column B of your last reported in Column B. report. Some amounts in 4,421.82 Column A may be negative 9,669.80 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 \$ 19. Outstanding Debts ...... Add Line 2 + Line 9 in Column B above \$ FPPC Form 460 (Jan/2016)

FPPC Advice: advice@fppc.ca.gov (866/275-3772)

www.fnnc.ca.dov

Schedule	Α	
Monetary	Contributions	Received

Amounts may be rounded to whole dollars.

	SCHEDULE A
nt covers period	CALIFORNIA 1 CO
/23/2016	FORM TOU

Sta	tement covers period	CALIFORNIA 160
from _	10/23/2016	FORM 40U
throug	jh <u>12/31/2016</u>	Page4 of13
-		I.D. NUMBER

NAME OF FILER

SEE INSTRUCTIONS ON REVERSE

Stephanie Kl	389674					
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 DA CALENDAR YEAR (JAN. 1 - DEC. 31)	TO DATE
10/25/2016	Southwest Reginal Council of Carpenters PAC (ID# 870169) 533 S Fremont Ave, #501 Los Angeles, CA 90071	□IND □COM □OTH □PTY ☑SCC		3,000.00	. 3,000	.00
11/04/2016	Jeffrey A. Kaplan 10877 Wilshire Blvd, #1520 Los Angeles, CA 90024	XIND COM OTH PTY SCC	Partner Tatum-Kaplan Financia	125.00	125	.00
11/04/2016	Meadowlark Estates 9597 Central Ave Montclair, CA 91763	□IND □COM 図OTH □PTY □SCC		150.00	150	.00
11/04/2016	Thomas T. Tatum 10877 Wilshire Blvd, #1520 Los Angeles, CA 90024	IND  COM  OTH  PTY  SCC	Partner Tatum-Kaplan Financia	125.00	125	.00
11/07/2016	MHET PAC (ID# 820165) 9070 Irvine Center Dr #150 Irvine, CA 92618	□IND ☑COM □OTH □PTY □SCC		500.00	500	.00
			SUBTOTAL\$	3,900.00		

## Schedule A Summary

- 1. Amount received this period itemized monetary contributions. (Include all Schedule A subtotals.) ......\$ 3,900.00
- 2. Amount received this period unitemized monetary contributions of less than \$100 ......\$ 150.00
- 3. Total monetary contributions received this period. 4,050.00

\*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 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772)

MANAN FRANCES HOW

Loans Received	Amounts may be rounded  to whole dollars.  from				CALIFORNIA 460			
SEE INSTRUCTIONS ON REVERSE					through <u>12/3</u>	31/2016	Page5	of <u>13</u>
NAME OF FILER							I.D. NUMBER	7000
Stephanie Klopfenstein City Council Di	strict 5 2016						1389674	
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 FORGIVI THIS PERIC	EN. CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTION TO DATE
Mike and Marla Beihl 12351 Pine St Garden Grove, CA 92840	Construction Beihl Construction	T Set VISE		X PAID  \$ 850.0  ☐ FORGIVEN	0.00	0.00 %	\$850.00	\$300.00
<sup>†</sup> ⊠ IND □ COM □ OTH □ PTY □ SCC		\$850.00	\$0.00	\$0.0	DATE DUE	\$0.00	09/09/2016 DATE INCURRED	\$
				\$ FORGIVEN	\$	% RATE	\$	\$PER ELECTION
†□ IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
				PAID	\$	%	\$	CALENDAR YEAR
				FORGIVEN		RATE		PER ELECTION*
†   IND   COM   OTH   PTY   SCC		•	<b>3</b>	\$	DATE DUE	\$	DATE INCURRED	\$
		SUBTOTALS \$	0.00\$	\$ 850.	00\$ 0.00	\$ 0.0	0	
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
Loans received this period  (Total Column (b) plus unitemized loans				\$	0.00	_	Contributor Codes	;
Loans paid or forgiven this period     (Total Column (c) plus loans under \$100 (Include loans paid by a third party that	) paid or forgiven.) t are also itemized on Sched	dule A.)					ND – Individual COM – Recipient Co (other than OTH – Other (e.g., TY – Political Party	PTY or SCC) business entity)
3. Net change this period. ( <b>Subtract</b> Line Enter the net here and on the Summar	2 from Line 1.)y Page, Column A, Line 2.			NET \$	-850.00 (May be a negative number)	1	CC – Small Contrib	,

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

\*\* If required.

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)

Daymonie wado		nay be rounded ole dollars.			Statement covers period from10/23/2016			ALIFOR FORN	
SEE INSTRUCTIONS ON REVERSE				thro	ugh	12/31/2016	6 P	age6	of13
NAME OF FILER				1,	<del></del>	······································	I	D. NUMBE	R
Stephanie Klopfenstein City Council District 5 2016					22.6mmmi = 24.19-12.7mm			389674	
CODES: If one of the following codes accurately described campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  FND fundraising events  IND independent expenditure supporting/opposing others (explain)*  LEG legal defense  LIT campaign literature and mailings	MBR member com MTG meetings an OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, del	munication d appearan uses lating s survey rese ivery and n	s ces	RAD RFD SAL TEL TRC TRS TSF VOT	radio a returne campai t.v. or c candida staff/sp transfe voter re	irtime and production ign workers' scable airtime attention to the course travel, locations are travel, locations and travel, locations and productions are travel, locations are travel, locations and productions are travel.	oduction cost ns salaries and productic ging, and me lodging, and mmittees of	n costs als meals the same	candidate/sponsor ail)
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	до на применя на приме На применя на применя н	CODE	OR	DESCRIPTION	OF PAY	MENT			AMOUNT PAID
Office Depot 11100 Garden Grove Blvd Garden Grove, CA 92843		OFC							49.0
ASAP Sign & Trophy 13199 Brookhurst Street Garden Grove, CA 92843		СМР	Outdoor Sign	S					250.0
ASAP Sign & Trophy 13199 Brookhurst Street Garden Grove, CA 92843		СМР	Outdoor Sign	s					200.0
* Payments that are contributions or independent expenditures	must also be summa	arized on	Schedule D.	V - 12		440%	SUBTO	TAL\$	499.0
Schedule E Summary						hitte for the section of the section			and the second s

2. Unitemized payments made this period of under \$100 ......\$\_\_\_\_\_\_\$

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)......\$

174.03

4,421.82

## Schedule E

(Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.			St from	atement covers pe	VALIFO	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Stephanie Klopfenstein City Council District 5 2016				throu	gh <u>12/31/2016</u>	Page	
CODES: If one of the following codes accurately described campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events ND independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member com MTG meetings and OFC office expen PET petition circul PHO phone banks POL polling and s POS postage, deli	munication d appearar ses lating urvey rese very and r	s ices	RAD RFD SAL TEL TRC TRS TSF VOT	radio airtime and preturned contribut campaign workers t.v. or cable airtim candidate travel, lostaff/spouse travel transfer between voter registration	production costs ions s' salaries e and production costs	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION	N OF PAYMENT		AMOUNT PAID
Campaign Compliance Group 1070 Irvine Center Drive, #150 rvine, CA 92618		PRO					250.00
Office Depot 1100 Garden Grove Blvd Garden Grove, CA 92843		OFC					32.37
S Postmaster lain Station anta Ana, CA 92704		POS		A. Contains			94.00
erek Espinoza 741 Halekulani arden Grove, CA 92841		CMP		270-2			70.00
ffice Depot 1100 Garden Grove Blvd arden Grove, CA 92843		OFC					29.03
Payments that are contributions or independent expenditures must als	so be summarized on S	chedule D				SUBTOTAL \$	475.40
							*,~***

Schedule		
(Continuat	tion	Sheet)
<b>Payments</b>	Mad	le

SCHEDULE E	E (CONT.)
------------	-----------

Schedule E (Continuation Sheet)  Payments Made  SEE INSTRUCTIONS ON REVERSE NAME OF FILER  Stephanie Klopfenstein City Council District 5 2016		e rounded ollars.		Statement covers period  from 10/23/2016  through 12/31/2016	CALIFORNIA 460  Page 8 of 13  I.D. NUMBER	
CODES: If one of the following codes accurately described campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  FND fundraising events  IND independent expenditure supporting/opposing others (explain)*  LEG legal defense  campaign literature and mailings	MBR member com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and POS postage, del	nmunication d appearar nses llating s survey rese ivery and r	s ces	RAD radio airtime and production RAD radio airtime and production RFD returned contributions SAL campaign workers' salaried TEL t.v. or cable airtime and production TRC candidate travel, lodging, a staff/spouse travel, lodging TSF transfer between committed voter registration WEB information technology cost	on costs es oduction costs and meals g, and meals ees of the same cand	lidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DES	SCRIPTION OF PAYMENT	АМО	UNT PAID
US Postmaster Main Station Santa Ana, CA 92704		POS				141.00
US Postmaster Main Station Santa Ana, CA 92704		POS				141.0
Maureen Blackmun 12381 Meade St Garden Grove, CA 92841	· .	MTG	See Schedule G fo	or Details		159.52
Jonathon Swaim 12221 Peacock Court Apt 7 Garden Grove, CA 92841		OFC		·		15.95
Jonathon Swaim 12221 Peacock Court Apt 7 Garden Grove, CA 92841		CNS				1,000.00

SUBTOTAL \$

1,457.47

						sometimes of the second	
Schedule E						5	SCHEDULE E (CONT.)
(Continuation Sheet) Amounts may		e rounded		Stater	nent covers period	CALIFO	RNIA 460
Payments Made	to whole do			from	10/23/2016	FØR	M 40U
SEE INSTRUCTIONS ON REVERSE				through	12/31/2016	Page	9 of <u>13</u>
NAME OF FILER						I.D. NUMB	ER
Stephanie Klopfenstein City Council District 5 2016						1389674	4
CODES: If one of the following codes accurately describe	es the payment, y	ou mav e	nter the code.	Otherwise, de	scribe the paymen	ìt	
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings		d appearance lating s survey resea ivery and me		RFD retrescolors SAL carescolors TEL t.v. TRC carescolors TRS states TSF train VOT vot	io airtime and production in and production in a paign workers' salarie or cable airtime and producte travel, lodging, aff/spouse travel, lodging isfer between committeer registration in and production in a paid product in a pai	es roduction costs and meals g, and meals ees of the san	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION OF	PAYMENT		AMOUNT PAID
American Express 200 Vesey New York, NY 10285		POS	,				53.27
Stephanie Klopenstein 12511 Pine Street Garden Grove, CA 92840		FIL					1,192.00
Doug's Downtown Grill 12900 Main Street Garden Grove, CA 92840		MTG	11/18 Thank	you Reception			175.00
Campaign Compliance Group 9070 Irvine Center Drive, #150 Irvine, CA 92618		PRO					250.00

CMP

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

Derek Espinoza 9741 Halekulani

Garden Grove, CA 92841

SUBTOTAL \$

1,710.27

Schedule	enen enen	
(Continuat	ion	Sheet)
Payments	Mad	e

SCH	EDU	II F	F	CONT.

(Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.				m10/23/2016	CALIFO FOR	ORNIA 460
SEE INSTRUCTIONS ON REVERSE				thr	ough12/31/2016	Page _	10 of 13
NAME OF FILER				77		I.D. NUME	BER
Stephanie Klopfenstein City Council District 5 2016			The first of the second of the			138967	4
CODES: If one of the following codes accurately describe compaign paraphernalia/misc.  CNS campaign consultants contribution (explain nonmonetary)* civic donations  FIL candidate filing/ballot fees  FND fundraising events independent expenditure supporting/opposing others (explain)*  LEG legal defense  LIT campaign literature and mailings	MBR member com MTG meetings and OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, deli	munications d appearan ses lating survey rese very and n	ces	RA RFI SA TEI TRI TRI	D radio airtime and production returned contributions campaign workers' salaried t.v. or cable airtime and production candidate travel, lodging, a staff/spouse travel, lodging transfer between committed voter registration	on costs  es roduction cost and meals g, and meals ees of the sai	me candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPT	TION OF PAYMENT		AMOUNT PAID
US Postmaster Main Station Santa Ana, CA 92704		POS					17.00
Maureen Blackmun 12381 Meade St Garden Grove, CA 92841		OFC					88.59

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

105.59

SUBTOTAL \$

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

Amounts may be rounded to whole dollars.

	SUREDULE G
Statement covers period	CALIFORNIA / CO
from10/23/2016	FORM 40U
through	Page 11 of 13
	I.D. NUMBER

1389674

COULDING

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LEG

Stephanie Klopfenstein City Council District 5 2016

NAME OF AGENT OR INDEPENDENT CONTRACTOR

American Express

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 CNS campaign consultants MTG meetings and appearances CTB contribution (explain nonmonetary)\* OFC office expenses CVC civic donations PET petition circulating candidate filing/ballot fees PHO phone banks fundraising events POL polling and survey research IND independent expenditure supporting/opposing others (explain)\* POS postage, delivery and messenger services

independent expenditure supporting/opposing others (explain)\* POS postage, delivery and messenger service legal defense PRO professional services (legal, accounting) campaign literature and mailings 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

TRS 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)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE (	DR	DESCRIPTION OF PAYMENT	AMOUNT F	PAID
Federal Express 3610 Hacks Cross Memphis, TN 38125	POS				53.27

Attach additional information on appropriately labeled continuation sheets.

TOTAL\* \$

<sup>\*</sup> 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.

Schedule G	
Payments N	lade by an Agent or Independent
Contractor (	on Behalf of This Committee)

Amounts may be rounded to whole dollars.

	SUMEDULE G
Statement covers period	CALIFORNIA 160
from10/23/2016	FORM 46U
through	- Page <u>12</u> of <u>13</u>
	I.D. NUMBER

1389674

COLIEDIUE

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Stephanie Klopfenstein City Council District 5 2016

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Maureen Blackmun

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

print ads

PRT

CMP campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)\*
CVC civic donations
FIL candidate filing/ballot fees
FND fundraising events
IND independent expenditure supporting/conceing others (explain)\*

IND independent expenditure supporting/opposing others (explain)\*
LEG legal defense

LIT campaign literature and mailings

MBR member communications

RAD radio airtime and production costs

MTG meetings and appearances RFD returned contributions
OFC office expenses SAL campaign workers' salaries
PET petition circulating TEL t.v. or cable airtime and proc

PET petition circulating
TEL t.v. or cable airtime and production costs
PHO phone banks
TRC candidate travel, lodging, and meals
POL polling and survey research
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the sam

postage, delivery and messenger services professional services (legal, accounting)

TRS stan/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor voter registration

VOT 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 PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Carolinas 12045 Chapman Ave Garden Grove, CA 92840		11/5 Pizzas for Volunteers	100.13
Copy4Less 7084 Edinger Ave Huntington Beach, CA 92647	OFC		23.24
	The state of the s		

Attach additional information on appropriately labeled continuation sheets.

\* 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.

TOTAL\* \$

Schedule I Miscellaneous Increases to Cash		A manufa man ha manudad	SCHEDULI	
		Amounts may be rounded to whole dollars.	Statement covers period from10/23/2016	FORM 460
	ONS ON REVERSE		through 12/31/2016	Page13 of13
NAME OF FILER Stephanie K	lopfenstein City Council District 5 2016			I.D. NUMBER 1389674
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DE	ESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
12/30/2016	City of Garden Grove 11222 Acacia Pkwy Garden Grove, CA 92840	Refund of Filin	g Fees	627.0
Attach add	itional information on appropriately labeled continuation sheets.		SUBTOTAL	- \$ 627.00
	Summary ncreases to cash this period.		\$ 627.0	0
	d increases to cash of under \$100 this period			<del></del>
	interest received this period on loans made to others. (Sche			_

4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the

FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772)