Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)		CITY	RECEIVED Stamp OF GARDEN GROVE CLERK'S OFFICE	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE	Statement covers period from04/24/2016 through05/21/2016	Date of election if applicable: (Month, Day, Year) 7016	IUN 21 PM 3: 47	Page 1 of 8  For Official Use Only
<ul> <li>State Candidate Election Committee</li> <li>Recall</li> <li>(Also Complete Part 5)</li> <li>General Purpose Committee</li> <li>Sponsored</li> <li>Small Contributor Committee</li> </ul>	rimarily Formed Ballot Measure committee () Controlled () Sponsored (so Complete Part 6) (rimarily Formed Candidate/ fficeholder Committee (so Complete Part 7)	2. Type of Statement:	ermination)	Quarterly Statement Special Odd-Year Report Supplemental Preelection Statement - Attach Form 495
3. Committee Information  COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Phat Bui for Garden Grove Council 2014  STREET ADDRESS (NO P.O. BOX)  MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX	NUMBER	Treasurer(s)  NAME OF TREASURER  Phat Bui  MAILING ADDRESS  MAILING ADDRESS	cerq ii rucc	
OPTIONAL: FAX / E-MAIL ADDRESS phat@phatbui.com	DE AREA CODE/PHONE	OPTIONAL: FAX / E-MAIL ADDR	STATE	ZIP CODE AREA CODE/PHONE
4. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California  Executed on	that the foregoing is true and correct  By  By  Signature of Control  By  By	Signature of Treasurer or Assistant olling Officeholder, Candidate, State Measure Proling atture of Controlling Officeholder, Candidate, State Measure Proling atture of Controlling Officeholder, Candidate, State Measure Proling atture of Controlling Officeholder, Candidate, State Measure Proling Atturbute Officeholder, Candidate, State Officehold	Treasurer  ponent or Responsible Officer of S  tate Measure Proponent	

COVER PAGE

## Recipient Committee Campaign Statement Cover Page — Part 2

OOVEN	MOL TAINE
CALIFORNIA FORM	460

Page \_\_\_\_2 of \_\_\_8

Ombelloider of Calididat	ficeholder or Candidate Controlled Committee			Primarily Formed Ball	ot Measure	Committee		
NAME OF OFFICEHOLDER OR CAN	IDIDATE			NAME OF BALLOT MEASURE				
Phat Bui								
OFFICE SOUGHT OR HELD (INCLUI	DE LOCATION AND DIS	STRICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTI	ON		SUPPORT
City Council Member							L	OPPOSE
RESIDENTIAL/BUSINESS ADDRESS	(NO. AND STREET)	CITY STATE ZIP		Identify the controlling of	ficeholder, ca	ndidate, or st	ate measure	proponent, if an
				NAME OF OFFICEHOLDER, CA	NDIDATE, OR PI	ROPONENT		
	at are controlled by	Statement: List any committees you or are primarily formed to receive ar candidacy.		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(				
COMMITTEE ADDRESS STR	REET ADDRESS (NO P	P.O. BOX)		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	SHT OR HELD	SUPPORT OPPOSE
CITY	STATE	ZIP CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME		I.D. NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
				NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	
NAME OF TREASURER		CONTROLLED COMMITTEE?		NAME OF OFFICEROUSER OR	CANDIDATE			SUPPORT
	REET ADDRESS (NO P	☐ YES ☐ NO		MANUE OF OFFICEROLDER OR	OANDIDAIL			SUPPORT OPPOSE

## Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statement covers period

om 04/24/2016

CALIFORNIA FORM

FORM

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Phat Bui for Garden Grove Council 2014

Contributions Received	(1	Column A TOTAL THIS PERIOD FROMATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and
1. Monetary Contributions Schedule A, Line 3	\$	500.00	\$	2,500.00	General Elections
2. Loans Received Schedule B, Line 3		-5,200.00		119,410.36	1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$		\$	121,910.36	20. Contributions Received \$\$
4. Nonmonetary Contributions Schedule C, Line 3		0.00		0.00	21 Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	-4,700.00	\$	121,910.36	Made \$ \$
Expenditures Made					Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$	0.00	\$	50.00	Candidates
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	0.00	\$	50.00	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)		0.00		1,975.00	Date of Election Total to Date
10. Nonmonetary Adjustment		0.00		0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$	0.00	\$	2,025.00	\$
Current Cash Statement					\$
12. Beginning Cash Balance	\$	4,894.75	То	calculate Column B, add	
13. Cash Receipts		-4,700.00	E .	nounts in Column A to the rresponding amounts	
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	m Column B of your last	*Amounts in this section may be different from amounts reported in Column B.
15. Cash Payments		0.00		oort. Some amounts in plumn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	194.75	fig	ures that should be btracted from previous	
If this is a termination statement, Line 16 must be zero.			ре	riod amounts. If this is e first report being filed	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for	this calendar year, only rry over the amounts	
Cash Equivalents and Outstanding Debts			fro an	m Lines 2, 7, and 9 (if y).	
18. Cash Equivalents See instructions on reverse	\$	0.00			
19. Outstanding Debts Add Line 2 + Line 9 in Column B above					

Schedule A Monetary Contributions Received		Amoun	ts may be rounded	Γ		SCHEDULE /			
			whole dollars.	Statement covers period from04/24/2016		CALIFORNIA 460			
SEE INSTRUCTION	DNS ON REVERSE			through05/21/2	016	Page	4 of8		
NAME OF FILER						I.D. NI	JMBER		
Phat Bui fo	r Garden Grove Council 2014			,					
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)		
05/11/2016	Son T. Nguyen 19582 Beach Blvd, #316 Huntington Beach, CA 92648	IND  COM  OTH  PTY  SCC	Internal Medicine Son T. Nguyen, MD	500.00		500.00			
		☐IND ☐COM ☐OTH ☐PTY ☐SCC							
		□IND □COM □OTH □PTY □SCC							
		□IND □COM □OTH □PTY □SCC							
		☐IND ☐COM ☐OTH ☐ PTY ☐ SCC			1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				
			SUBTOTALS	500.00					
1. Amount re	A Summary ceived this period – itemized monetary contributions. Il Schedule A subtotals.)		\$	500.00	IND-		1		
2. Amount re	ceived this period – unitemized monetary contributions	of less than §	\$100 \$	0.00			(e.g., business entity)		
3. Total mone	etary contributions received this period.						Contributor Committee		

500.00

COL	HED!	11 1	_ D	_ D	ADT
201	コヒレバ	JU		- P	MK!

Schedule B – Part 1			Г	04-4	!!	SOFIEDOLE B-FART		
	ounts may be ro to whole dollar			Statement cov	ers perioa	CALIFORN	<sup>A</sup> 460	
Loans Received		to whole dollar	3.		from04/2	4/2016	FORM	
SEE INSTRUCTIONS ON REVERSE					through05/2	1/2016	Page5	of8
NAME OF FILER							I.D. NUMBER	
Phat Bui for Garden Grove Council 2014								
Phat Bul for Garden Grove Council 2014	<u> </u>	(a)	(b)	(c)	(d)	(e)	(f)	(g)
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	AMOUNT RECEIVED THIS PERIOD	AMOUNT PAIR OR FORGIVE THIS PERIOD	N CLOSE OF THIS	INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE
Phat Bui	President	7 211100		PAID	1 EINO			CALENDAR YEAR
	NetResult			0.00	\$ 30,000.00	0.00%	\$ 30,000.00	s -25,200.00
				FORGIVEN	-	RATE	3	PER ELECTION**
<sup>†</sup> ⊠ IND □ COM □ OTH □ PTY □ SCC		\$ _30,000.00	\$0.00	\$0.00	DATE DUE	\$	DATE INCURRED	\$
Phat Bui	President			PAID				CALENDAR YEAR
	NetResult			0.00	\$ 40,000.00	0.00% %	s_40,000.00	\$ -25,200.00
				FORGIVEN		RATE	\$ 407000.00	PER ELECTION **
		40.000.00						
TIND □ COM □ OTH □ PTY □ SCC		\$ 40,000.00	\$0.00	\$0.00	DATE DUE	\$	09/29/2012 DATE INCURRED	\$
Phat Bui	President			☐ PAID		9		CALENDAR YEAR
	NetResult							
				\$0.00	\$8,000.00	RATE	\$ 28,000.00	\$ -25,200.00 PER ELECTION**
				PORGIVEN				PERELECTION
†☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$8,000.00	\$0.00	\$0.00	DATE DUE	\$	11/23/2012 DATE INCURRED	\$
AND COM COM CALL CALL					DATEBOL		DATE INCORRED	
		SUBTOTALS \$	0.00	0.0	78,000.00	\$ 0.00		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)	A contraction of the contraction	
Loans received this period				\$	0.00			
(Total Column (b) plus unitemized loan						( to	ontributor Codes	
				•	5 200 00	IN	D – Individual	
Loans paid or forgiven this period  (Total Column (a) plus loans under \$100			•••••	\$	5,200.00	CC	OM – Recipient Co other than F	mmittee
(Total Column (c) plus loans under \$100 (Include loans paid by a third party that		ule A )				01	H - Other (e.g.,	business entity)
(oudo localo pala b) a tilia palty tilal	a a aloo komizoa on oonoa					PT	Y - Political Party	'
<ol><li>Net change this period. (Subtract Line</li></ol>				NET \$	-5 , 200 • 00 May be a negative number)	Csc	C – Small Contrib	utor Committee
Enter the net here and on the Summar	y Page, Column A, Line 2.			(1	, Jo a negative number)			
*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)

Schedule	B - Part	1	(Continuation	Sheet)
Loane Pag	havia			

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

\*\* If required.

Statement covers period

oans Received  Amounts may be rounded to whole dollars.					from04/2	ers period	CALIFORNI FORM	<sup>^</sup> 460
SEE INSTRUCTIONS ON REVERSE through								of8
NAME OF FILER						741	I.D. NUMBER	
Phat Bui for Garden Grove Council 2014	1							
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 PAI OR FORGIVE THIS PERIO	N. CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Phat Bui	President NetResult			X PAID				CALENDAR YEAR
				\$	0 \$1,895.00	0.00% RATE	\$7,095.00	\$ -25,200.00 PER ELECTION**
†⊠ IND □ COM □ OTH □ PTY □ SCC		\$7,095.00	\$0.00	\$0.0	DATE DUE	\$0.00	01/01/2014 DATE INCURRED	\$
Phat Bui	President NetResult			☐ PAID				CALENDAR YEAR
				\$0.0	500.00	0.00% RATE	\$ 500.00	\$ -25,200.00 PERELECTION **
†⊠ IND □ COM □ OTH □ PTY □ SCC		\$500.00	\$	\$0.0	DATE DUE	\$	08/04/2014 DATE INCURRED	\$
Phat Bui	President NetResult			PAID				CALENDAR YEAR
				\$0.0	3,000.00	0.00% RATE	\$ _3,000.00	\$ -25,200.00 PER ELECTION **
†⊠ IND □ COM □ OTH □ PTY □ SCC		\$3,000.00	\$0.00	\$0.0	DATE DUE	\$0.00	08/08/2014 DATE INCURRED	\$
Minh Bui 12101 Travertine Ct Poway, CA 92064	Engineer Cadence Design System			PAID	\$	0.00% % RATE	\$_1,000.00	\$0.00
				FORGIVEN		RAIE		PER ELECTION **
† IND □ COM □ OTH □ PTY □ SCC		\$1,000.00	\$0.00	\$0.0	DATE DUE	\$	08/19/2014 DATE INCURRED	\$
		SUBTOTALS \$	0.00\$	5,200.	00\$ 6,395.00	\$ 0.00		

†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	B-Part 1	(Continuation	Sheet)
Loone Do	no is cod		

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

\*\* If required.

Amounts may be rounded to whole dollars.

SCHEDULE B - PA	ART 1 (CONT.)	
CALIFORNIA	460	

Statement covers period

Loans Received	to whole utiliars.			from04/24/2016		FORM TOO		
SEE INSTRUCTIONS ON REVERSE					through05/2	1/2016	Page7	of8
NAME OF FILER				1_			I.D. NUMBER	
Phat Bui for Garden Grove Council 2014	ı							
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 PAIL OR FORGIVER THIS PERIOD	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Dzung Bui 8924 Xerxes Circle S. Minneapolis, MN 55431	Manager IBM Corporation			\$0.00	\$5,000.00	0.00% RATE	\$ _5,000.00	\$ 0.00 PER ELECTION**
<sup>†</sup> ⊠ IND □ COM □ OTH □ PTY □ SCC		\$5,000.00	\$0.00	\$0.00	DATE DUE	\$0.00	09/23/2014 DATE INCURRED	\$
Phat Bui	President NetResult			\$0.00	\$_20,000.00	0.00% RATE	\$ <u>20,000.00</u>	S25,200.00 PER ELECTION **
†⊠ IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$0.00	DATE DUE	\$	10/06/2014 DATE INCURRED	\$
Phat Bui	President NetResult			PAID \$ 0.00 FORGIVEN	\$_10,000.00	0.00% RATE	\$_10,000.00	CALENDAR YEAR \$ -25,200.00 PER ELECTION **
† <sub>☑</sub> IND □ COM □ OTH □ PTY □ SCC		\$10,000.00	\$0.00	\$0.00	DATE DUE	s <u>0.00</u>	DATE INCURRED	\$
				PAID  \$ FORGIVEN	\$	% RATE	\$	\$ PER ELECTION **
† IND COM OTH PTY SCC		s	\$	\$	DATE DUE	s	DATE INCURRED	\$
SUBTOTALS \$ 0.00\$ 0.00\$ 35,000.00\$ 0.00								
			<del></del>					

†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 F Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

Statement covers period CALI
om \_\_\_\_04/24/2016

CALIFORNIA 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

through \_\_\_05/21/2016

Page \_\_8 \_\_ of \_\_8

I.D. NUMBER

Phat Bui for Garden Grove Council 2014

CODES: If one of the following codes accurately describe	es the payment, you may	enter the code. Ot	therwise, describe tl	he payment.		
CMP campaign paraphernalia/misc.	MBR member communication		RAD radio airtime and production costs			
CNS campaign consultants	MTG meetings and appearar	nces	RFD returned contributions			
CTB contribution (explain nonmonetary)* CVC civic donations	OFC office expenses		SAL campaign work TEL t.v. or cable air			
FIL candidate filing/ballot fees	PET petition circulating PHO phone banks			time and production costs I, lodging, and meals	5	
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 ODERSTOR	CODE OR	(a)	(b)	(c)	(d)	
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF PAYMENT	OUTSTANDING BALANCE BEGINNING	AMOUNT INCURRED THIS PERIOD	AMOUNT PAID THIS PERIOD	OUTSTANDING BALANCE AT CLOSE	
		OF THIS PERIOD	THIST ENGE	(ALSO REPORT ON E)	OF THIS PERIOD	
Phat Bui	FIL	1,975.00	0.00	0.00	1,975.00	
				:		
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS \$	1,975.00\$	0.00\$	0.00\$	1,975.00	

## 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.)	0.00
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.)	0.00
Net change this period. ( <b>Subtract</b> Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)	0.00 May be a negative number