

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

Date Stamp RECEIVED CITY OF WEST HOLL 08 JUL 30 PM 1:02 OFFICE OF THE CITY CLERK	CALIFORNIA 2001/02 FORM 460
	Page <u>1</u> of <u>29</u> For Official Use Only

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	Date of election if applicable: (Month, Day, Year) <u>03/10/2009</u>
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SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee
<input type="checkbox"/> State Candidate Election Committee
<input type="checkbox"/> Recall
(Also Complete Part 5) | <input type="checkbox"/> Ballot Measure Committee
<input type="checkbox"/> Primarily Formed
<input type="checkbox"/> Controlled
<input type="checkbox"/> Sponsored
(Also Complete Part 6) |
| <input type="checkbox"/> General Purpose Committee
<input type="checkbox"/> Sponsored
<input type="checkbox"/> Small Contributor Committee
<input type="checkbox"/> Political Party/Central Committee | <input type="checkbox"/> Primarily Formed Candidate/
Officeholder Committee
(Also Complete Part 7) |

2. Type of Statement:

- | | |
|---|--|
| <input type="checkbox"/> Preelection Statement
<input checked="" type="checkbox"/> Semi-annual Statement
<input type="checkbox"/> Termination Statement
<input type="checkbox"/> Amendment (Explain below) | <input type="checkbox"/> Quarterly Statement
<input type="checkbox"/> Special Odd-Year Report
<input type="checkbox"/> Supplemental Preelection
Statement - Attach Form 495 |
|---|--|

3. Committee Information

I.D. NUMBER 1236094

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Duran For City Council

STREET ADDRESS (NO P.O. BOX)
1212 S Victory Bl

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Burbank</u>	<u>CA</u>	<u>91502</u>	<u>(818) 260-0669</u>

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
1212 S Victory Bl

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Burbank</u>	<u>CA</u>	<u>91502</u>	

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER
Kinde Durkee

MAILING ADDRESS
1212 S Victory Bl

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Burbank</u>	<u>CA</u>	<u>91502</u>	<u>(818) 260-0669</u>

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

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 07/09/2008
Date

Executed on 07/09/2008
Date

Executed on _____
Date

Executed on _____
Date

By Kinde Durkee
Signature of Treasurer or Assistant Treasurer

By John Duran
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

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

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA FORM	460
Page <u>2</u> of <u>29</u>	

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE			
John Duran			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)			
City Council Member, City Of West Hollywood, District: n/a			
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP
1212 S Victory Bl	Burbank	CA	91502

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	STATE ZIP CODE AREA CODE/PHONE

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	STATE ZIP CODE AREA CODE/PHONE

6. 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 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

Attach continuation sheets if necessary

**Campaign Disclosure Statement
Summary Page**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	CALIFORNIA FORM 460
	Page <u>3</u> of <u>29</u>
NAME OF FILER Duran For City Council	I.D. NUMBER 1236094

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Duran For City Council

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL O DATE
1. Monetary Contributions Schedule A, Line 3	\$ <u>33958.00</u>	\$ <u>33958.00</u>
2. Loans Received Schedule B, Line 7	<u>0.00</u>	<u>0.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ <u>33958.00</u>	\$ <u>33958.00</u>
4. Nonmonetary Contributions Schedule C, Line 3	<u>0.00</u>	<u>0.00</u>
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ <u>33958.00</u>	\$ <u>33958.00</u>

**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	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

Expenditures Made

	Column A	Column B
6. Payments Made Schedule E, Line 4	\$ <u>24708.75</u>	\$ <u>24708.75</u>
7. Loans Made Schedule H, Line 7	<u>0.00</u>	<u>0.00</u>
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ <u>24708.75</u>	\$ <u>24708.75</u>
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	<u>0.00</u>	<u>0.00</u>
10. Nonmonetary Adjustment Schedule C, Line 3	<u>0.00</u>	<u>0.00</u>
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ <u>24708.75</u>	\$ <u>24708.75</u>

**Expenditure 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	\$ <u>20742.54</u>
13. Cash Receipts Column A, Line 3 above	<u>33958.00</u>
14. Miscellaneous Increases to Cash Schedule I, Line 4	<u>3.88</u>
15. Cash Payments Column A, Line 8 above	<u>24708.75</u>
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>29995.67</u>

If this is a termination statement, Line 16 must be zero.

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).

17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ <u>0.00</u>
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse	\$ <u>0.00</u>
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ <u>0.00</u>

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

**Schedule A
Monetary Contributions Received**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	CALIFORNIA FORM 460
	Page <u>4</u> of <u>29</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Duran For City Council	I.D. NUMBER 1236094
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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)
03/21/2008	Ace Outdoor Adverstising LLC 4205 Parkview Dr Salt Lake City UT 84124	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1000.00	1000.00	\$1000.00 P2009
05/22/2008	Amalgamated Transit Union 1277 PAC 3200 Wilshire Blvd., #1100 Los Angeles CA 90010 841627	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	\$1000.00 P2009
05/30/2008	Alfred Balderrama 532 Monterey Pass Rd Monterey Park CA 91754	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Mayor Pro Tempore City Of Monterey Park	1000.00	1000.00	\$1000.00 P2009
05/30/2008	Barbakow & Ribet 301 N Canon Dr #303 Beverly Hills CA 90210	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		150.00	150.00	\$900.00 P2009 \$300.00 P2005
05/30/2008	Kathleen Bartolo 8990 Lloyd Pl Los Angeles CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Manning, Selvage & Lee	500.00	500.00	\$1000.00 P2009
SUBTOTAL \$				3150.00		

Schedule A Summary

- Amount received this period – contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ 33275.00
- Amount received this period – unitemized contributions of less than \$100 \$ 683.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 33958.00

*Contributor Codes
IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other
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.)

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	CALIFORNIA FORM 460
	Page <u>5</u> of <u>29</u>

NAME OF FILER Duran For City Council	I.D. NUMBER 1236094
--	-------------------------------

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)
04/08/2008	Alan Bernstein 935 N Harper Av Los Angeles CA 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Property Management Alan J Bernstein	500.00	500.00	\$1000.00 P2009 \$250.00 P2005
04/22/2008	Beverly Hills Transit Cooperative Inc. 6102 Venice Bl Los Angeles CA 90034-2222	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00	250.00	\$1000.00 P2005 \$500.00 P2009
05/16/2008	Maria Bonacci 1414 N Harper Av #10 Los Angeles CA 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant Moss & Co.	1000.00	1000.00	\$1000.00 P2009
04/08/2008	Michael Cavalluzzi 9200 Sunset Bl #807 Los Angeles CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Cavalluzzi & Cavalluzzi	400.00	400.00	\$1000.00 P2009
01/10/2008	Chris Cox & Associates Po Box 3411 Los Angeles CA 90078	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1000.00	1000.00	\$1000.00 P2009
SUBTOTAL \$				3150.00		

*Contributor Codes
IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other
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.)

Statement covers period from <u>01/01/2008</u>	CALIFORNIA FORM 460
through <u>06/30/2008</u>	
Page <u>6</u> of <u>29</u>	

NAME OF FILER Duran For City Council	I.D. NUMBER 1236094
--	-------------------------------

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)
01/04/2008	Joseph Clapsaddle 1013 Carol Dr West Hollywood CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Producer Joseph M Clapsaddle	250.00	250.00	\$100.00 P2005 \$350.00 P2009
05/30/2008	Bruce Cohen 16055 Ventura Bl #535 Encino CA 91436	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Film Producer The Jinks Cohen Co	500.00	500.00	\$750.00 P2009 \$500.00 P2005
04/02/2008	Richard Colbert 8205 Santa Monica Bl #1490 Los Angeles CA 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	TV Executive Program Partners	250.00	250.00	\$250.00 P2005 \$500.00 P2009
05/30/2008	Community Campaigns 2149 E Garvey Av #A11 West Covina CA 91791	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	\$500.00 P2009
05/16/2008	Councilwoman Jan Perry's Officeholder Account 777 S Figueroa St #4050 Los Angeles CA 90017 1223341	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		125.00	125.00	\$125.00 P2009
SUBTOTAL \$				1625.00		

*Contributor Codes
 IND – Individual
 COM – Recipient Committee
 (other than PTY or SCC)
 OTH – Other
 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.)

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	CALIFORNIA FORM 460
	Page <u>7</u> of <u>29</u>

NAME OF FILER Duran For City Council	I.D. NUMBER 1236094
--	-------------------------------

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)
04/01/2008	Todd Dickey 800 Westbourne Dr West Hollywood CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney USC	250.00	250.00	\$600.00 P2009
06/25/2008	Thomas Doherty 825 Huntley Dr West Hollywood CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sales Director McGraw Hill Co	250.00	250.00	\$750.00 P2009
05/30/2008	Carmen Duran 11203 Roxabel St Santa Fe Springs CA 90670	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	150.00	150.00	\$150.00 P2009
05/30/2008	David Eichman 9200 Sunset Bl #505 West Hollywood CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Law Offices Of David Mason Eichman	250.00	250.00	\$750.00 P2009
01/16/2008	Charles Fuentes 2240 Verde Oak Dr Los Angeles CA 90068	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant Charles P. Fuentes	100.00	100.00	\$100.00 P2009
SUBTOTAL \$				1000.00		

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IND – Individual
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(other than PTY or SCC)
OTH – Other
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.)

Statement covers period from <u>01/01/2008</u>	CALIFORNIA FORM 460
through <u>06/30/2008</u>	
Page <u>8</u> of <u>29</u>	

NAME OF FILER Duran For City Council	I.D. NUMBER 1236094
--	-------------------------------

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)
06/02/2008	Ron Galperin 499 N Canon Dr #208 Beverly Hills CA 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Ron S Galperin	250.00	250.00	\$250.00 P2009
05/22/2008	Philip Greider 7428 Mulholland Dr Los Angeles CA 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Philip A Greider	250.00	250.00	\$350.00 P2009
05/30/2008	Victor Grimm Po Box 481309 Los Angeles CA 90048	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Victor Grimm	300.00	300.00	\$300.00 P2009
04/10/2008	Ira Handelman 20528 Vista Del Oro Pl Woodland Hills CA 91364	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant Handelman Consulting Inc	500.00	500.00	\$500.00 P2005 \$1000.00 P2009
05/30/2008	Marc Hauptert 4138 W Franklin Av Burbank CA 91505	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant Marc W Hauptert	150.00	150.00	\$150.00 P2009
SUBTOTAL \$				1450.00		

*Contributor Codes
 IND – Individual
 COM – Recipient Committee
 (other than PTY or SCC)
 OTH – Other
 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.)

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	CALIFORNIA FORM 460
	Page <u>9</u> of <u>29</u>

NAME OF FILER Duran For City Council	I.D. NUMBER 1236094
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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)
05/30/2008	John Heilman 1155 La Cienega Bl #1202 West Hollywood CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Professor Whittier Law School	300.00	300.00	\$500.00 P2005 \$550.00 P2009
06/26/2008	Charles Henry 1200 Poinsettia Dr Los Angeles CA 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Developer Charles L Henry CLH LLC	500.00	500.00	\$500.00 P2005 \$500.00 P2009
04/15/2008	Independent Taxi Owners Association 700 N Virgil Av Los Angeles CA 90029	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	\$500.00 P2009 \$250.00 P2005
05/01/2008	Matthew Jacobs 7979 Pinnacle Peak Av Las Vegas NV 89113	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Developer Turnberry Regent LLC	500.00	500.00	\$500.00 P2009
04/15/2008	James Jensvold 6325 Topanga Cyn Bl #435 Woodland Hills CA 91367	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Oral Surgeon James Jensvold	500.00	500.00	\$1000.00 P2009 \$250.00 P2005
SUBTOTAL \$				2300.00		

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
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.)

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	CALIFORNIA FORM 460
	Page <u>10</u> of <u>29</u>

NAME OF FILER Duran For City Council	I.D. NUMBER 1236094
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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)
04/16/2008	Kahuna Restaurant Group LLC 8865 Santa Monica Bl West Hollywood CA 90069	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	\$200.00 P2005 \$835.00 P2009
05/30/2008	Fred Karger 2745 Woodstock Rd. Los Angeles CA 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	150.00	150.00	\$250.00 P2009
05/30/2008	William Kysella PO Box 2414 Los Angeles CA 90078	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney City Of LA	250.00	250.00	\$250.00 P2009
05/23/2008	LA Checker Cab Cooperative Inc 11003 Hawthorne Bl Lennox CA 90304	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	\$1000.00 P2009
01/24/2008	Lapolt Law P.C. 9000 Sunset Bl #800 West Hollywood CA 90069	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00	250.00	\$250.00 P2009
SUBTOTAL \$				1650.00		

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 (other than PTY or SCC)
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 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.)

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	CALIFORNIA FORM 460
	Page <u>11</u> of <u>29</u>

NAME OF FILER Duran For City Council	I.D. NUMBER 1236094
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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)
04/25/2008	Ryan Leaderman 11815 Laurelwood Dr #14 Studio City CA 91604	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Lawyer DLA Piper	250.00	250.00	\$250.00 P2005 \$450.00 P2009
05/30/2008	Mark Lehman 9200 Sunset Bl #1212 West Hollywood CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Mark E. Lehman	250.00	250.00	\$500.00 P2005 \$500.00 P2009
05/22/2008	Sam Leslie 6310 San Vicente Bl #320 Los Angeles CA 90048	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Accountant Sam S Leslie	150.00	150.00	\$400.00 P2009
05/30/2008	Eugene Levin 5020 Tilden Av #C Sherman Oaks CA 91423	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director ASJE	250.00	250.00	\$250.00 P2009
05/27/2008	Stuart Leviton 1010 N La Jolla Av West Hollywood CA 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Leviton Law Group	150.00	150.00	\$350.00 P2009
SUBTOTAL \$				1050.00		

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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 from <u>01/01/2008</u>	CALIFORNIA FORM 460
through <u>06/30/2008</u>	
Page <u>12</u> of <u>29</u>	

NAME OF FILER Duran For City Council	I.D. NUMBER 1236094
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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)
04/02/2008	Michael Libow 516 N Walden Dr Beverly Hills CA 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Coldwell Banker	250.00	250.00	\$680.00 P2009 \$380.00 P2005
05/30/2008	James Litz 8617 Rugby Ln West Hollywood CA 90069-504	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant James Ward Litz	100.00	100.00	\$200.00 P2009 \$100.00 P2005
04/15/2008	Local 770 United Food And Commercial Workers Union PAC 630 Shatto Pl Los Angeles CA 90005 921242	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		500.00	500.00	\$1000.00 P2009
04/30/2008	Los Angeles County Firefighters Lo. 1014 3460 Fletcher Av El Monte CA 91731 742008	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00	250.00	\$250.00 P2009
05/30/2008	Scott Mann 1308 Havenhurst Dr #21 West Los Angeles CA 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Political Strategist Bedrock Strategies	150.00	150.00	\$150.00 P2009
SUBTOTAL \$				1250.00		

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**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 from <u>01/01/2008</u> through <u>06/30/2008</u>	CALIFORNIA FORM 460
	Page <u>13</u> of <u>29</u>

NAME OF FILER Duran For City Council	I.D. NUMBER 1236094
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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)
02/22/2008	Peter Massey 1117 Allen Ave #302 Glendale CA 91201	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director Tree Perdue	100.00	100.00	\$100.00 P2009
01/30/2008	Douglas May 214 Calle Miramar Redondo Beach CA 90277	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	1000.00	1000.00	\$1000.00 P2009
05/22/2008	Michael McNeilly 1320 Summit Dr Beverly Hills CA 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Artist Sky Tag Inc	1000.00	1000.00	\$1000.00 P2009
05/16/2008	Mark Miller 3230 Overland Av #337 Los Angeles CA 90034	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Engineer Associated Press	1000.00	1000.00	\$1000.00 P2009
04/08/2008	David Mixner 152 Turkey Hollow Ln Livingston Manor NY 12758	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Writer David B. Mixner	250.00	250.00	\$250.00 P2005 \$350.00 P2009
SUBTOTAL \$				3350.00		

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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 from <u>01/01/2008</u>	CALIFORNIA FORM 460
through <u>06/30/2008</u>	
Page <u>14</u> of <u>29</u>	

NAME OF FILER Duran For City Council	I.D. NUMBER 1236094
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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)
05/08/2008	Thomas Nelson 888 N West Knoll Dr #105 Los Angeles CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Fitness Trainer Muscle Mechanics L.A.	1000.00	1000.00	\$1000.00 P2009
05/22/2008	Lorcan O'Herlihy 5709 Mesmer Av Culver City CA 90230	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Architect Lorcan O'Herlihy Architects	150.00	150.00	\$150.00 P2009
06/05/2008	Alexander Ponder 340 N Hayworth Av #301 Los Angeles CA 90048	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	District Director Assemblyman Mike Fauer	100.00	100.00	\$100.00 P2009
05/30/2008	Michael Ralke 611 S Palm Canyon Dr #7-462 Palm Springs CA 92264	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Michael E. Ralke	150.00	150.00	\$150.00 P2009
03/14/2008	Robert Silverberg ESQ Silverberg Law Corporation 1925 Century Park East #2120 Los Angeles CA 90067	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1000.00	1000.00	\$1000.00 P2009
SUBTOTAL \$				2400.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
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 to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	CALIFORNIA FORM 460
	Page <u>15</u> of <u>29</u>

NAME OF FILER Duran For City Council	I.D. NUMBER 1236094
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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)
06/26/2008	Shirley Roberts 1422 N Sweetzer Ave #209 West Hollywood CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	500.00	500.00	\$500.00 P2005 \$750.00 P2009
04/15/2008	Rockin Horse Inc 9015 Sunset Bl Los Angeles CA 90069	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00	250.00	\$500.00 P2009
06/03/2008	Michael Ross 3037 Franklin Cyn Dr Beverly Hills CA 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Business Affairs The WB Network	200.00	200.00	\$350.00 P2005 \$450.00 P2009
04/28/2008	Erik Sanjurjo 1820 Canyon Dr # 103 Los Angeles CA 90028	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Council Deputy City Of Los Angeles	100.00	100.00	\$100.00 P2009
05/22/2008	Max Schneider 3311 E Kirkwood Av Orange CA 92869	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Doctor Max A. Schneider	100.00	100.00	\$100.00 P2009 \$50.00 P2005
SUBTOTAL \$				1150.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
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 to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	CALIFORNIA FORM 460
	Page <u>16</u> of <u>29</u>

NAME OF FILER Duran For City Council	I.D. NUMBER 1236094
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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)
05/21/2008	Link Schrader 1264 N Sweetzer Av #305 Los Angeles CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Teacher LAUSD	150.00	150.00	\$100.00 P2005 \$150.00 P2009
04/08/2008	Linda Schwarz 12011 Theta Rd Santa Ana CA 92705	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	100.00	100.00	\$100.00 P2009
04/03/2008	Gregory Seller 1601 Dunham Rd Palm Springs CA 92264	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sr Vice President Great West	500.00	500.00	\$1000.00 P2009
03/14/2008	Jeffrey Seymour 32487 Snowpeak Dr Westlake Village CA 91361	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Govt Relations Jeffrey A Seymour	1000.00	1000.00	\$1000.00 P2009
04/08/2008	Dan Shook 8219 Norton Ave #9 Los Angeles CA 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Project Analyst Healthcare	500.00	500.00	\$750.00 P2009 \$75.00 P2005
SUBTOTAL \$				2250.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Type or print in ink.
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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	CALIFORNIA FORM 460
	Page <u>17</u> of <u>29</u>

NAME OF FILER Duran For City Council	I.D. NUMBER 1236094
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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)
05/30/2008	Starbuzz Inc 7475 Santa Monica Bl Los Angeles CA 90046	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	\$1000.00 P2009
06/05/2008	Julie Summers 1425 N Crescent Heights #307 Los Angeles CA 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Julie D Summers	150.00	150.00	\$300.00 P2005 \$150.00 P2009
04/01/2008	Sunset Cantina LLC Cabo Cantina 8278 W Sunset Bl Los Angeles CA 90046	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00	250.00	\$585.00 P2009 \$200.00 P2005
04/16/2008	Sunset Lounge LLC 8280 Sunset Bl Los Angeles CA 90046	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00	250.00	\$100.00 P2005 \$580.00 P2009
06/25/2008	Tea & Sympathy Inc 7825 Santa Monica Bl Los Angeles CA 90046	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		400.00	400.00	\$1000.00 P2009
SUBTOTAL \$				1550.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	CALIFORNIA FORM 460
	Page <u>18</u> of <u>29</u>

NAME OF FILER Duran For City Council	I.D. NUMBER 1236094
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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)
05/23/2008	The Law Offices Of Henry Glowa 8075 W Third St #404 Los Angeles CA 90048	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	\$500.00 P2009
04/30/2008	Ruth Tittle 8578 Santa Monica Bl Los Angeles CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO Capitol Drugs Inc	250.00	250.00	\$500.00 P2005 \$1000.00 P2009
05/30/2008	Alan Uphold 110 S Martel Los Angeles CA 90036	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Vice-President Cause Force	150.00	150.00	\$400.00 P2009
05/30/2008	Robert Vautherine Po Box 1857 Beverly Hills CA 90213	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Accountant Robert W Vautherine	150.00	150.00	\$100.00 G2009 \$150.00 P2009
05/27/2008	Allison Weathers 2586 Sutton Dr Beverly Hills CA 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Art Director Sky Tag	1000.00	1000.00	\$1000.00 P2009
SUBTOTAL \$				2050.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	CALIFORNIA FORM 460
	Page <u>19</u> of <u>29</u>

NAME OF FILER Duran For City Council	I.D. NUMBER 1236094
--	-------------------------------

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)
06/30/2008	WEHO PAC 8581 Santa Monica Bl #504 Los Angeles CA 90069 1248664	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1000.00	1000.00	\$1000.00 P2009 \$1000.00 P2005
05/22/2008	West Hollywood Medical Management & Marketing Inc 1201 Larrabee St #106 West Hollywood CA 90069	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		150.00	150.00	\$150.00 P2009
04/30/2008	West Los Angeles Health PAC - State 555 S Flower St #4210 Los Angeles CA 90071 801508	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	\$1000.00 P2009
02/07/2008	Scott Westerfield 12 Sunset Cove Newport Coast CA 92657-19	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sales Celtic Leasing Corp	100.00	100.00	\$100.00 P2009
04/14/2008	Westhollywoodrentals.Com 2752 Bayshare Dr Newport Beach CA 92663	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1000.00	1000.00	\$1000.00 P2009

SUBTOTAL \$ 2750.00

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2008	
through	06/30/2008	Page 20 of 29

NAME OF FILER Duran For City Council	I.D. NUMBER 1236094
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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)
04/11/2008	Weston, Benshoof, Rochefort, Rubalcava & Mac Cuish LLP 333 S Hope St 16th Fl Los Angeles CA 90071	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	\$1000.00 P2005 \$1000.00 P2009
05/30/2008	William S Kroger Jr Attorney At Law 8888 Olympic Bl First Floor Beverly Hills CA 90211	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		150.00	150.00	\$150.00 P2009
05/22/2008	Russell Wilson 8914 Santa Monica Bl West Hollywood CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retail Koontz Hardware	250.00	250.00	\$250.00 P2005 \$250.00 P2009
05/30/2008	Anthony Zehenni 8730 Sunsetblvd., Ste. 400 West Hollywood CA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Aladdin Developers, Inc.	250.00	250.00	\$750.00 P2009
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$				1150.00		

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**Schedule E
Payments Made**

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	CALIFORNIA FORM 460
	Page <u>21</u> of <u>29</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Duran For City Council

I.D. NUMBER
1236094

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
Applegate Consulting 1901 Av Of The Stars #1025 Los Angeles CA 90067	CNS		2928.00
Applegate Consulting 1901 Av Of The Stars #1025 Los Angeles CA 90067	CNS		1490.53
Applegate Consulting 1901 Av Of The Stars #1025 Los Angeles CA 90067	CNS		3510.46

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

SUBTOTAL \$ 7928.99

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$ <u>24708.75</u>
2. Unitemized payments made this period of under \$100	\$ <u>0</u>
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ <u>0</u>
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$ <u>24708.75</u>

**Schedule E
(Continuation Sheet)
Payments Made**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	CALIFORNIA FORM 460
	Page <u>22</u> of <u>29</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Duran For City Council

I.D. NUMBER

1236094

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
Applegate Consulting 1901 Av Of The Stars #1025 Los Angeles CA 90067	CNS		1847.35
Applegate Consulting 1901 Av Of The Stars #1025 Los Angeles CA 90067	CNS		1792.96
Applegate Consulting 1901 Av Of The Stars #1025 Los Angeles CA 90067	CNS		7464.50
US Postmaster 5800 W Century Blvd Los Angeles CA 90009	POS		Memo: 90.20
Applegate Consulting 1901 Av Of The Stars #1025 Los Angeles CA 90067	CNS		2225.25

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

SUBTOTAL \$ 13330.06

**Schedule E
(Continuation Sheet)
Payments Made**

SCHEDULE E (CONT.)

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	CALIFORNIA FORM 460
	Page <u>23</u> of <u>29</u>
	I.D. NUMBER 1236094

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NAME OF FILER
Duran For City Council

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 ID NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Bank Card Center Po Box 569200 Dallas TX 75356	OFC		1031.60
Eleven Restaurant Los Angeles CA 90025 Maison	OFC		Memo: 101.90
Beverly Hills CA 90210	OFC		Memo: 114.44
Melrose Bar & Grill Los Angeles CA 90025	OFC		Memo: 121.72
Smoke House Restaurant 4420 Lakeside Dr Burbank CA 91505	OFC		Memo: 104.68

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

SUBTOTAL \$ 1031.60

**Schedule E
(Continuation Sheet)
Payments Made**

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	CALIFORNIA FORM 460
	Page <u>24</u> of <u>29</u>
	I.D. NUMBER 1236094

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NAME OF FILER
Duran For City Council

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
Speakeasy Seattle WA 98101	OFC		Memo: 122.85
Speakeasy Seattle WA 98101	OFC		Memo: 122.85
The Republic Prana Cafe Los Angeles CA 90025	OFC		Memo: 118.00
Bankcard Center PO Box 569200 Dallas TX 75356	OFC		1439.57
The Republic Prana Cafe Los Angeles CA 90025	TRC		Memo: 693.47

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

SUBTOTAL \$ 1439.57

**Schedule E
(Continuation Sheet)
Payments Made**

SCHEDULE E (CONT.)

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	CALIFORNIA FORM 460
	Page <u>25</u> of <u>29</u>
	I.D. NUMBER 1236094

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Duran For City Council

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
US Postmaster 5800 W Century Blvd Los Angeles CA 90009 Bankcard Center	POS		Memo: 410.00
PO Box 569200 Dallas TX 75356	OFC		125.53
Nova Information Systems Inc/Durkee & Associates 5601 E Slauson Av City Of Commerce CA 90040	OFC		80.00
Nova Information Systems Inc/Durkee & Associates 5601 E Slauson Av City Of Commerce CA 90040	OFC		40.00
Nova Information Systems Inc/Durkee & Associates 5601 E Slauson Av City Of Commerce CA 90040	OFC		92.00

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

SUBTOTAL \$ 337.53

**Schedule E
(Continuation Sheet)
Payments Made**

SCHEDULE E (CONT.)

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	CALIFORNIA FORM 460
	Page <u>26</u> of <u>29</u>
	I.D. NUMBER 1236094

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Duran For City Council

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
Nova Information Systems Inc/Durkee & Associates 5601 E Slauson Av City Of Commerce CA 90040	OFC		42.00
Nova Information Systems Inc/Durkee & Associates 5601 E Slauson Av City Of Commerce CA 90040	OFC		40.00
Nova Information Systems Inc/Durkee & Associates 5601 E Slauson Av City Of Commerce CA 90040	OFC		84.00
Nova Information Systems Inc/Durkee & Associates 5601 E Slauson Av City Of Commerce CA 90040	OFC		4.00
Nova Information Systems Inc/Durkee & Associates 5601 E Slauson Av City Of Commerce CA 90040	OFC		20.00

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

SUBTOTAL \$ 190.00

**Schedule E
(Continuation Sheet)
Payments Made**

Type or print in ink.
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to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	CALIFORNIA FORM 460
	Page <u>27</u> of <u>29</u>
	I.D. NUMBER 1236094

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NAME OF FILER
Duran For City Council

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
Nova Information Systems Inc/Durkee & Associates 5601 E Slauson Av City Of Commerce CA 90040	OFC		20.00
Nova Information Systems Inc/Durkee & Associates 5601 E Slauson Av City Of Commerce CA 90040	OFC		80.00
Nova Information Systems Inc/Durkee & Associates 5601 E Slauson Av City Of Commerce CA 90040	OFC		104.00
Nova Information Systems Inc/Durkee & Associates 5601 E Slauson Av City Of Commerce CA 90040	OFC		80.00
Nova Information Systems Inc/Durkee & Associates 5601 E Slauson Av City Of Commerce CA 90040	OFC		4.00

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

SUBTOTAL \$ 288.00

**Schedule E
(Continuation Sheet)
Payments Made**

Type or print in ink.
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to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	CALIFORNIA FORM 460
	Page <u>28</u> of <u>29</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Duran For City Council

I.D. NUMBER
1236094

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
Nova Information Systems Inc/Durkee & Associates 5601 E Slauson Av City Of Commerce CA 90040 Visa	OFC		20.00
PO Box 30131 Tampa FL 33630	OFC		143.00

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

SUBTOTAL \$ 163.00

**Schedule I
Miscellaneous Increases to Cash**

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period
from 01/01/2008
through 06/30/2008

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Duran For City Council

I.D. NUMBER
1236094

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

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$

Schedule I Summary

1. Increases to cash of \$100 or more this period.	\$ <u>0</u>
2. Unitemized increases to cash under \$100 this period.	\$ <u>3.88</u>
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).).....	\$ <u>0</u>
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)	TOTAL \$ <u>3.88</u>