

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

RECEIVED CITY OF WEST HOLLYWOOD 09 JAN 29 11:05 AM OFFICE OF THE CITY CLERK CALIFORNIA FORM 460 Page 1 of 32 For Official Use Only

Statement covers period from 7-1-08 through 12-31-08 Date of election if applicable: (Month, Day, Year) 3-3-09

SEE INSTRUCTIONS ON REVERSE

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

- Officeholder, Candidate Controlled Committee (checked)
State Candidate Election Committee
Recall
General Purpose Committee
Sponsored
Small Contributor Committee
Political Party/Central Committee
Primarily Formed Ballot Measure Committee
Controlled
Sponsored
Primarily Formed Candidate/Officeholder Committee

2. Type of Statement:

- Preelection Statement
Semi-annual Statement (checked)
Termination Statement
Amendment
Quarterly Statement
Special Odd-Year Report
Supplemental Preelection Statement - Attach Form 495

3. Committee Information

I.D. NUMBER 970426

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Mayor Jeffrey Prang Committee

STREET ADDRESS (NO P.O. BOX)

7985 Santa Monica Bl #590

CITY STATE ZIP CODE AREA CODE/PHONE

West Hollywood CA 90046 323-654-8433

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

Esther Baum

MAILING ADDRESS

1265 N. Harper Ave. #9

CITY STATE ZIP CODE AREA CODE/PHONE

West Hollywood CA 90046 323-656-8231

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 1-20-09 Date

Executed on 1-20-09 Date

Executed on Date

Executed on Date

By Esther Baum Signature of Treasurer or Assistant Treasurer

By 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 2 of 32

ID # 970426

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Mayor Jeffrey Prang

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

West Hollywood City Council

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

7985 Santa Monica Bl #590 West Hollywood CA 90046

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?

YES NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

N/A

COMMITTEE NAME I.D. NUMBER

NAME OF TREASURER CONTROLLED COMMITTEE?

YES NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER

JURISDICTION

SUPPORT
 OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

N/A

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT
 OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT
 OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT
 OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT
 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>7-1-08</u>	CALIFORNIA FORM 460
through <u>12-31-08</u>	
Page <u>3</u> of <u>32</u>	I.D. NUMBER <u>970426</u>

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Mayor Jeffrey Prang Committee

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions Schedule A, Line 3	\$ <u>39727.00</u>	\$ <u>84446.00</u>
2. Loans Received Schedule B, Line 3	\$ <u>0</u>	\$ <u>0</u>
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ <u>39727.00</u>	\$ <u>84446.00</u>
4. Nonmonetary Contributions Schedule C, Line 3	\$ <u>0</u>	\$ <u>0</u>
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ <u>39727.00</u>	\$ <u>84446.00</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	\$ <u>N/A</u>	\$ _____
21. Expenditures Made	\$ _____	\$ _____

Expenditures Made

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made Schedule E, Line 4	\$ <u>19273.56</u>	\$ <u>29102.63</u>
7. Loans Made Schedule H, Line 3	\$ <u>0</u>	\$ <u>0</u>
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ <u>19273.56</u>	\$ <u>29102.63</u>
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	\$ <u>0</u>	\$ <u>0</u>
10. Nonmonetary Adjustment Schedule C, Line 3	\$ <u>0</u>	\$ <u>0</u>
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ <u>19273.56</u>	\$ <u>29102.63</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
<u>1/1/08</u>	\$ <u>N/A</u>
<u>1/1/08</u>	\$ _____

Current Cash Statement

12. Beginning Cash Balance Previous Summary Page, Line 16	\$ <u>55787.75</u>
13. Cash Receipts Column A, Line 3 above	\$ <u>39727.00</u>
14. Miscellaneous Increases to Cash Schedule I, Line 4	\$ <u>0</u>
15. Cash Payments Column A, Line 8 above	\$ <u>19273.56</u>
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>76241.19</u>

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

17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ <u>0</u>
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse	\$ <u>0</u>
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ <u>0</u>

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

*Amounts in this section may be different from amounts reported in Column B.

**Schedule A
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>7-1-08</u> through <u>12-31-08</u>	CALIFORNIA FORM 460 Page <u>4</u> of <u>32</u>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER <u>Mayor Jeffrey Prang Committee</u>	I.D. NUMBER <u>970426</u>
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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)
8/12/08	Candlewood Property 7095 Hollywood Bl LA 90028	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	1,000.00
8/12/08	Isaac Cohanad 11711 Ohio Ave #100 LA 90025	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RE Developer - Self Isaac Cohanad	500.00	500.00	500.00
8/12/08	Fabritex, Inc 2301 E. 7th St LA 90023	<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
8/12/08	Mousa Namyar 12121 Wilshire Blvd #1400 LA 90025	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Namco Invest- ment Services - owner	1000.00	1000.00	1000.00
8/16/08	Daryoush Dayan 2301 E. 7th St LA 90023	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RE Developer - Self Daryoush Dayan	1000.00	1000.00	1000.00

SUBTOTAL \$ 4500.00

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 38700.00
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 1027.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 39727.00

*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 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>7-1-08</u>	CALIFORNIA FORM 460
through <u>12-31-08</u>	
Page <u>5</u> of <u>32</u>	
I.D. NUMBER <u>970426</u>	

NAME OF FILER
Mayor Jeffrey Prang Committee

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)
8/12/08	George Eshughian 16200 Ventura Blvd. Ste 228 Encino, CA 91436	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Loan Consultant Self George Eshughian	200.00	200.00	200.00
8/14/08	Ruth Williams 7548 Lexington Ave # 8 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	NCJW- Advocacy	100.00	200.00	200.00
8/22/08	Iraj Kattan 3055 Elvidor Dr. Brentwood, CA 90049	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Jewish Federation Retired	250.00	250.00	250.00
8/22/08	Nobels Neurodiagnostic Medical 10306 N. Sepulveda Bl Group Mission Hills, CA 91345	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00	100.00	100.00
9/5/08	Neman Brothers + Assoc, Inc. 1525 S Broadway St. LA 90015	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		260.00	260.00	260.00

SUBTOTAL \$ 910.00

*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 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>7-1-08</u> through <u>12-31-08</u>		CALIFORNIA FORM 460
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		I.D. NUMBER <u>970426</u>

NAME OF FILER

Mayor Jeffrey Brang Committee

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)
9/19/08	Ezatollah Delijani 1231 Laurel way 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 Investor - self Ezatollah Delijani	1000.00	1000.00	100.00
9/14/08	Jeffrey Mangels Bullen, Harman LLP 1900 Ave of the stars 7th FLR LA 90067	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	1060.00	1000.00
9/19/08	Rastegara Family Trust 1005 Schuyler Rd 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	150.00
9/19/08	Sunset View Plaza LLC 2000 S Alameda LA 90058	<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
7/7/08	Weho Poe 8581 Santa Monica Bl. #504 West Hollywood, CA 90069 ID #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
SUBTOTAL \$3,150.00						

*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 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>7-1-08</u> through <u>12-31-08</u>	CALIFORNIA FORM 460
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I.D. NUMBER <u>970426</u>	

NAME OF FILER

Mayor Jeffrey Prang Committee

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)
11/17/08	Hollywood Temple Beth El 1317 N. Crescent Heights Blvd. 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	500.00
11/17/08	Khorravian Group Architects, Inc 4741 Laurel Canyon Bl. #202 No. Hollywood, CA 91607	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	1,000.00
11/17/08	Excel Property Management PO Box 5357 Beverly Hills, CA 90209	<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	400.00
11/17/08	Kamran Broukhim 1762 Westwood Blvd #300 Los Angeles, CA 90024	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician - Self Kamran Broukhim	200.00	200.00	200.00
11/17/08	Global Investment + Development, LLC 3470 Wilshire Blvd #1020 Los Angeles, CA 90010	<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

SUBTOTAL \$ 2250.00

*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 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>7-1-08</u> through <u>12-31-08</u>	CALIFORNIA FORM 460 Page <u>8</u> of <u>32</u>
I.D. NUMBER <u>970426</u>	

NAME OF FILER

Mayor Jeffrey Prang, Committee

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)
11/17/08	<u>Westside Wholesale Electric Lighting PMB 587 LA 90036</u>	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<u>1000.00</u>	<u>1000.00</u>	<u>1000.00</u>
11/17/08	<u>Nuri Nehorai 10433 Wilshire Blvd #804 LA 90024</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>Sales - Self Nuri Nehorai</u>	<u>1000.00</u>	<u>1000.00</u>	<u>1000.00</u>
11/17/08	<u>Henry Nehorai 10724 Wilshire Blvd #1206 LA 90024</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>Retail - Self Henry Nehorai</u>	<u>1000.00</u>	<u>1000.00</u>	<u>1000.00</u>
11/17/08	<u>Nematollah Rahmanpour 1029 S. Sherbourne Dr. #2 Los Angeles, CA 90035</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>Real Estate Investor Self Nematollah Rahmanpour</u>	<u>260.00</u>	<u>260.00</u>	<u>260.00</u>
11/17/08	<u>(ALABS) Association LA Deputy Sheriffs 2 Cupania Circle Monterey Park, CA 91755 PAR ID #822506</u>	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<u>1000.00</u>	<u>1000.00</u>	<u>1000.00</u>
SUBTOTAL \$				<u>4260.00</u>		

***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 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>7-1-08</u> through <u>12-31-08</u>		CALIFORNIA FORM 460
Page <u>9</u> of <u>32</u>		
NAME OF FILER <u>Mayor Jeffrey Prang Committee</u>		I.D. NUMBER <u>970426</u>

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)
11/17/08	Julie Summers 1425 N. Crescent Hgts Bl #308 WH 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate - Self Julie Summers	100.00	350.00	350.00
11/17/08	Law Office of Mark Lehman 9200 Sunset Bl, PH 2 weho 90069	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00	500.00	500.00
11/17/08	Cusden Properties, LLC 9090 Wilshire Bl 3rd Flr. 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		500.00	1000.00	1000.00
11/17/08	James Kazakos Living Trust 1010 Hammond St. weho 90069	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00	200.00	200.00
11/17/08	Olivito & Associates, Inc. 8119 Somerset Bl. Paramount, CA 90273	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00	100.00	100.00

SUBTOTAL \$ 1050.00

***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 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>7-1-08</u>		CALIFORNIA FORM 460
through <u>12-31-08</u>		
		Page <u>10</u> of <u>32</u>
		I.D. NUMBER <u>970426</u>

NAME OF FILER

Mayor Jeffrey Prang Committee

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)
11/17/08	Dapeer, Rosenthal + Litvak, LLP 2770 E. Slauson Ave Huntington Park, CA 90255	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00	100.00	100.00
11/17/08	Oschin Partners Inc. 16060 Ventura Blvd. 105-329 Encino, CA 91436	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00	100.00	100.00
11/17/08	Beverly Patients Group Inc. 7213 Santa Monica Blvd LA 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	250.00
11/17/08	Frank Meister 9000 Cynthia St. WH 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	100.00	200.00	200.00
11/17/08	Jonathan Friedman 1800 S. Robertson Pl #400 LA 90035	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Friedman Consulting Financial Analyst	100.00	100.00	100.00

SUBTOTAL \$ 650.00

*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 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>7-1-08</u> through <u>12-31-08</u>	CALIFORNIA FORM 460
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	I.D. NUMBER <u>970426</u>

NAME OF FILER

Mayor Jeffrey Prang Committee

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)
11/17/08	West LA Health PAC 555 S. Flower St LA 90071	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00	750.00	750.00
11/17/08	Gabriel Azoulay 863 Westbourne Dr Wetho 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	BH Premier - Tour operator	500.00	500.00	500.00
11/17/08	David Pierce 9005 Cynthia St. #371 Wetho 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney - Self David Pierce	100.00	100.00	100.00
11/17/08	Efim Nutz 7526 Fountain Ave #8 Wetho 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	veterans WWII - UP	100.00	200.00	200.00
11/17/08	Ruth Galanter PO Box 66494 LA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired - LA City Council	100.00	100.00	100.00

SUBTOTAL \$ 1050.00

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(other than PTY or SCC)
OTH - Other (e.g., business entity)
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>7-1-08</u> through <u>12-31-08</u>	CALIFORNIA FORM 460
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	I.D. NUMBER <u>970426</u>

NAME OF FILER

Mayor Jeffrey Prang Committee

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)
11/17/08	Emsen International, LLC 8431 Santa Monica Bl Weho 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
11/17/08	Meir Shamy PO Box 6 Weho 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Dentist - Self Meir Shamy	500.00	500.00	500.00
11/17/08	Wayne Case 7985 Santa Monica Bl #72 Weho 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	50.00	100.00	100.00
11/17/08	Carole Ellis 540 N. San Vicente Bl. weho 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RE - Gayle Wilson + Assoc.	50.00	100.00	100.00
11/17/08	Madeleine Rackley 1201 Larabee St. #104 Weho 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	LA City - Sr. Admin Analyst	100.00	100.00	100.00

SUBTOTAL \$ 950.00

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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>7-1-08</u> through <u>12-31-08</u>	CALIFORNIA FORM 460
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	I.D. NUMBER <u>970426</u>

NAME OF FILER

Mayor Jeffrey Prang Committee

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)
11/17/08	Simon Pastucha 426 S. Berkeley Ave. Pasadena, CA 91107	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Urban Designer - Self Simon Pastucha	100.00	100.00	100.00
11/17/08	Donald Elmblad 805 N. Huntley Dr Weho 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Housing Provider - Self Donald Elmblad	250.00	250.00	250.00
11/17/08	Diane Sherman-Smith 1120 Angelo 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	Retired - Volunteer	100.00	200.00	200.00
11/17/08	Dawson Telen + Gole 9454 Wilshire Bl PH Beverly Hills, CA 90212	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00	350.00	350.00
11/17/08	Paula Kent-Meehan Trust 499 N. Canon Dr 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		250.00	250.00	250.00

SUBTOTAL \$ 950.00

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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>7-1-08</u> through <u>12-31-08</u>		CALIFORNIA FORM 460
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NAME OF FILER
Mayor Jeffrey Prang Committee

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)
11/17/08	William Cunningham 413 Via Malibu 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	Cunningham Develop- ment Co, Inc - owner	1000.00	1000.00	1000.00
11/24/08	Hertsel Saghian 175 N. Clark Dr BH 90211 CA	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	General Contractor - Self Hertsel Saghian	1000.00	1000.00	1000.00
11/24/08	Frah Saghian 175 N. Clark Dr BH 90211 CA	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Housewife	1000.00	1000.00	1000.00
11/24/08	Chabad Lubavitch Russian Synagogue 149 S. Detroit St. LA 90036	<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
11/24/08	Michael John Horne 1129 N. Crescent Heights Bl WH 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	owner - MJs Silverdale	1000.00	1000.00	1000.00

SUBTOTAL \$ 5000.00

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

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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>7-1-08</u> through <u>12-31-08</u>	CALIFORNIA FORM 460
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I.D. NUMBER <u>970426</u>	

NAME OF FILER: Mayor Jeffrey Prang Committee

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)
11/24/08	Russ Wilson Po Box 69889 WeHo 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Moontz Hardware - owner	250.00	500.00	500.00
11/24/08	Rockin Horse Farm 9015 Sunset Bl WeHo 90069	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00	500.00	500.00
11/24/08	Howard Jacobs 1125 N. Ogden Dr #5 WeHo 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Save the Children - Advocacy	250.00	250.00	750.00
11/24/08	Allan Hoffenblum 1230 Horn Ave #530 WeHo 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Political Consultant Allan Hoffenblum + Assoc.	250.00	250.00	250.00
11/24/08	Michael Borin 313 Milreal Ave #10 Venice, CA 90291	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City of LA - Council Chief of Staff	200.00	200.00	200.00

SUBTOTAL \$ 1200.00

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

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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>7-1-08</u> through <u>12-31-08</u>	CALIFORNIA FORM 460
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NAME OF FILER <u>Mayor Jeffrey Prang Committee</u>	I.D. NUMBER <u>970426</u>
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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)
11/24/08	Denise Ng Consulting, Inc 12304 Wardman St. Whittier, CA 90602	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00	100.00	100.00
11/24/08	Law office of David Eickman 9200 Sunset Bl Ste 505 WeHo 90069	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00	100.00	100.00
11/24/08	Bob Gilliam 7258 Willoughby Ave Los Angeles 90036	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Story Producer - Self Bob Gilliam	100.00	100.00	100.00
11/24/08	CA Good Government Fund 5555 S. Flower St Los Angeles 90071	<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
11/24/08	Mary Norton 949 N. Kings Rd #215 Weho 90069	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired - Attorney	50.00	100.00	100.00

SUBTOTAL \$ 1350.00

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

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period from <u>7-1-08</u> through <u>12-31-08</u>	CALIFORNIA FORM 460
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	I.D. NUMBER <u>970426</u>

NAME OF FILER
Mayor Jeffrey Prang Committee

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)
12/4/08	Goldrich, Nest, Hirscht Stearn, LLC 5150 Overland Ave Culver City, CA 90230	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00	100.00	100.00
12/4/08	Christopher Braum 1180 S. Beverly Dr Ste 310 LA 90035	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DC-Chiropractor - Self Christopher Braum	100.00	100.00	100.00
12/4/08	Barry Mason Enterprises, Inc. 7065 Lexington Ave LA 90038	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00	100.00	100.00
12/4/08	Daniel Kovatch 7336 Santa Monica Pl #444 LA 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Insurance Sales - Self Daniel Kovatch	100.00	100.00	100.00
12/4/08	Bred Tolgan 927 N. Kings Rd #220 Weho 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney - Trunor + Elliott	100.00	100.00	100.00

SUBTOTAL \$ 500.00

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

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period from <u>7-1-08</u> through <u>12-31-08</u>		CALIFORNIA FORM 460
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NAME OF FILER
Mayor Jeffrey Prang Committee

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)
12/4/08	Steven Zimmer 6344 Lexington Ave LA 90038	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	LAUSD Teacher	100.00	100.00	100.00
12/4/08	Stuart Leviton 1010 N. La Jolla Ave WeHo 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 Firm	100.00	200.00	200.00
12/4/08	Ed Buck 1234 N. Laurel Ave #17 WeHo 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	100.00	350.00	350.00
12/4/08	Michael Poles 1202 Greenacre Ave. WeHo 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	MP Group - owner	100.00	100.00	100.00
12/4/08	Esther Baum 1265 N. Harper Ave. #9 WeHo 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Bookkeeper - Southern CA oral	100.00	150.00	150.00

SUBTOTAL \$ 500.00

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

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SCHEDULE A (CONT.)

Statement covers period from <u>7-1-08</u> through <u>12-31-08</u>	CALIFORNIA FORM 460
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NAME OF FILER
Mayor Jeffrey Prang Committee

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)
12/4/08	Ron Stone 1926 Parnell Ave LA 90025	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney/Strategic Government Affairs	100.00	350.00	350.00
12/4/08	A.J. Rotella 18543 Devonshire St #350 Northridge, CA 91324	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	LASD Teacher	100.00	200.00	200.00
12/4/08	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 - Self Michael Libow	180.00	380.00	380.00
12/4/08	APPM Inc. 3949 Sunset Blvd. Ste 205 WeHo 90069	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		200.00	200.00	200.00
12/4/08	Nahum + Ref 2350 Hidalgo Ave. LA 90039	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		200.00	200.00	200.00

SUBTOTAL \$ 780.00

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

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SCHEDULE A (CONT.)

Statement covers period from <u>7-1-08</u> through <u>12-31-08</u>	CALIFORNIA FORM 460
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I.D. NUMBER <u>970426</u>	

NAME OF FILER
Mayor Jeffrey Prang, Committee

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)
12/4/08	KVR Productions 7301 Florence Ave #525 Downey, CA 90240	<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
12/4/08	Lewis + Company, Inc 2149 E. Garvey Ave N Ste A-4 W. Covina, CA 91791	<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
12/4/08	Arthur Fullerton 733 Huntley Dr. #3 ireHo 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant - Self Arthur Fullerton	250.00	350.00	350.00
12/4/08	Ted Sroka 1116 N. Olive Dr #201 LA 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Associate Producer Self Ted Sroka	250.00	250.00	250.00
12/4/08	Jeff Haben 515 S. Flower St. 25th FLR LA 90071	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney - Paul, Hastings, Janofsky + Walker LLP	250.00	500.00	500.00

SUBTOTAL \$ 1,250.00

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Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>7-1-08</u> through <u>12-31-08</u>	CALIFORNIA FORM 460
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NAME OF FILER
Mayor Jeffrey Prang Committee

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)
12/4/08	Guyon McCormack 721 Ramage St. WeHo 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	LA City - Council Deputy	250.00	350.00	350.00
12/4/08	Nathan Goller 655 N. Robertson Blvd WeHo 90069	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney - Self Nathan Goller	250.00	750.00	750.00
12/4/08	William Raffel 601 N. Roxbury Dr Beverly Hills 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired - R. N.	300.00	600.00	600.00
12/4/08	Laborers' Local 300 515 Shatto Pl LA 90020	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	1000.00	1000.00
12/4/08	Alston + Bird LLP 333 S. Hope St. 16th FLR LA 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	500.00

SUBTOTAL \$ 1800.00

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

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SCHEDULE A (CONT.)

Statement covers period from <u>7-1-08</u> through <u>12-31-08</u>	CALIFORNIA FORM 460 Page <u>26</u> of <u>32</u>
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NAME OF FILER <u>Mayor Jeffrey Prang Committee</u>	I.D. NUMBER <u>970426</u>
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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)
12/14/08	San Gabriel Transit Inc 7955 San Fernando Rd. Sun Valley, CA 91352	<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
12/14/08	Karma Development LLC 11640 San Vicente Blvd #205 LA 90049	<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
12/14/08	Monarch Investment Fund Mgmt, 7727 Herschel Ave CO LLC La Jolla, CA 92037	<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
12/22/08	Te Van Aroutamian 619 E. Elmwood Ave Unit 6 Burbank, CA 91501	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	LACSD - Special Assistant to the Sheriff	100.00	100.00	100.00
12/22/08	Vahan Saroians 14610 Eagle Ridge Lane Porter Ranch, CA 91326	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RE Broker - Self Vahan Saroians	100.00	100.00	100.00
SUBTOTAL \$				2700.00		

*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 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>7-1-08</u> through <u>12-31-08</u>	CALIFORNIA FORM 460
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NAME OF FILER <u>Mayor Jeffrey Prang Committee</u>	I.D. NUMBER <u>970426</u>
---	------------------------------

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)
12/22/08	United Independent Taxi Drivers, Inc 900 N. Alvarado St. LA 90026	<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
12/26/08	Yefim Stolyansky 1035 N. Harper Ave #9 LA 90046	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Pres. - Veterans WW II	100.00	100.00	100.00
12/24/08	Gabriel Courcy 222 N. Columbus Dr. Apt. 3301 Chicago, IL 60601	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney - Retired	200.00	200.00	200.00
12/24/08	Shame S. Quee Hee 923 Levering Ave Apt 102 LA 90024	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	UCLA Professor	100.00	100.00	100.00
12/31/08	Fred Golban 3044 Dona Marta Drive 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	Insurance Sales - Self Fred Golban	1000.00	1000.00	1000.00
SUBTOTAL \$				<u>1,900.00</u>		

*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 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>7-1-08</u> through <u>12-31-08</u>	CALIFORNIA FORM 460
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I.D. NUMBER <u>970426</u>	

NAME OF FILER
Mayor Jeffrey Prang Committee

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)
12/31/08	Pari Golbar 3044 Donna Martin Drive 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	Insurance Sales - Self Pari Golbar	1,000.00	1000.00	1000.00
9/11/08	Manochehr Nazarian 2122 Beverly Blvd unit A LA 90036	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	west side wholesaler Retail	1,000.00	1000.00	1000.00
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				

SUBTOTAL \$ 2000.00

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

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

Statement covers period
from 7-1-08
through 12-31-08

SCHEDULED
CALIFORNIA FORM **460**
Page 25 of 32
I.D. NUMBER
970426

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mayor Jeffrey Prang Committee

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
<u>12/15/08</u>	<u>Stonewall Democratic Club</u>	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		<u>300.00</u>	<u>300.00</u>	<u>N/A</u>
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
<u>12/28/08</u>	<u>SFV Young Dems</u>	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		<u>250.00</u>	<u>250.00</u>	<u>N/A</u>
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
<u>12/4/08</u>	<u>Re-elect Jan Perry</u>	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		<u>250.00</u>	<u>250.00</u>	<u>N/A</u>
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL \$ 800.00

Schedule D Summary

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) \$ 2375.00
- Unitemized contributions and independent expenditures made this period of under \$100 \$ 140.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL \$ 2515.00**

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

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

Statement covers period from <u>7-1-08</u>	CALIFORNIA FORM 460
through <u>12-31-08</u>	
Page <u>26</u> of <u>32</u>	

NAME OF FILER <u>Mayor Jeffrey Prang Committee</u>	I.D. NUMBER <u>970426</u>
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/20/08	Braun Election Fund	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		100.00	100.00	N/A
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
7/3/08	(LACDP) Los Angeles County Democratic Party	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		100.00	100.00	N/A
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
7/14/08	LA League of Conservation Voters	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		25.00	275.00	N/A
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
12/20/08	Webb Terms	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		50.00	300.00	N/A
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$ <u>275.00</u>						

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

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

SCHEDULED (CONT.)

Statement covers period from <u>7-1-08</u> through <u>12-31-08</u>	CALIFORNIA FORM 460
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I.D. NUMBER <u>970426</u>	

NAME OF FILER

Mayor Jeffrey Prang Committee

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/22/08	Gloria Gray - West Basin Water Board <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		100.00	100.00	N/A
8/4/08	Bonnie Lowenthal For 54th A.D. <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		100.00	100.00	N/A
10/20/08	Equally For All - No on 8 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		1000.00	1000.00	N/A
10/20/08	Elections Committee, County of Orange <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		100.00	100.00	N/A
SUBTOTAL \$ 1300.00						

**Schedule E
Payments Made**

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

Statement covers period		CALIFORNIA FORM 460
from	7-1-08	
through	12-31-08	Page 28 of 32
NAME OF FILER		I.D. NUMBER
Mayor Jeffrey Franz Committee		970426

SEE INSTRUCTIONS ON REVERSE

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 | FET 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
House of Printing 3336 E. Colorado Blvd Pasadena, CA 91107	LIT	12/31 3674.01 10/20 3079.71	
Star Mailing 3050 Rosslyn St. LA 90065	LIT	12/23 4455.24 11/3 1887.46	
CCCA Sacramento 2009 819 Somerset Blvd Paramount, CA 90723	MTG		325.00

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

SUBTOTAL \$ 13421.42

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 18862.03
2. Unitemized payments made this period of under \$100	\$ 411.53
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ 0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$ 19273.56

**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>7-1-08</u> through <u>12-31-08</u>	CALIFORNIA FORM 460 Page <u>29</u> of <u>32</u>
	I.D. NUMBER <u>970426</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mayor Jeffrey Prang Committee

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
<u>Norman Chromoff 8221 DeLongpre Ave West Hollywood, CA 90046</u>	<u>CNS</u>		<u>750.00</u>
<u>Equality for All - Norm S 4107 Magnolia Blvd Burbank, CA 91505</u>	<u>CTB</u>		<u>1000.00</u>
<u>Elections Committee, County of Orange 2321 E. 4th St. Ste C438 Santa Ana, CA 92705 ID # 822380</u>	<u>CTB</u>		<u>100.00</u>
<u>Braun Election Fund 1450 Harvard St. Unit 1 Santa Ana, CA 90404</u>	<u>CTB</u>		<u>100.00</u>
<u>Saving Lives Gala - The Jewish Federation 6505 Wilshire Blvd, Ste 10001DR LA 90048</u>	<u>CVC</u>		<u>600.00</u>

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

SUBTOTAL \$ 2550.00

**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>7-1-08</u> through <u>12-31-08</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mayor Jeffrey Prang Committee

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
Stonewall Democratic Club PO Box #325 - 7985 Santa Monica Blvd West Hollywood, CA 90046	CTB		300.00
SFU Young Dems PO Box 7656 Van Nuys, CA 91409	CTB		250.00
Clear Corners, Corp 4107 W. Magnolia Blvd Burbank, CA 91505	WEB		190.00
Re-elect Jan Perry 1531 Purdue Ave. LA 90025	CTB		250.00
SimpleRent, Inc. 333 S. Grand Ave LA 90071	WEB		1000.00

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

SUBTOTAL \$ 1990.00

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

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

Statement covers period from <u>7-1-08</u> through <u>12-31-08</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mayor Jeffrey Prang Committee

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 |
| LT 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
<i>Providence Trinity Care Hospice Services 16600 Sherman Way, Ste 266 Van Nuys, CA 91406</i>	<i>CVC</i>		<i>100.00</i>
<i>AFRIAT Consulting Group 4107 Magnolia Blvd. Burbank, CA 91505</i>	<i>CNS</i>		<i>392.61</i>
<i>Gloria Gray - West Basin Water Board 555 S. Flower St - Ste 4210 LA 90071 ID #1289214</i>	<i>CTB</i>		<i>100.00</i>
<i>Bonnie Lowenthal for 54th A.D. 4647 Long Beach Blvd. Long Beach, CA 90805 ID #1296945</i>	<i>CTB</i>		<i>100.00</i>
<i>Weho Mail 7985 Santa Monica Blvd # West Hollywood, CA 90046</i>	<i>OFC</i>		<i>108.00</i>

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

SUBTOTAL \$ *800.61*

**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>7-1-08</u> through <u>10-31-08</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Mayor Jeffrey Pray Committee

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

- | | | |
|--|--|--|
| OMP 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
<i>LACDP - Internship Fund 3550 Wilshire Blvd LA 90010</i>	<i>CTB</i>			<i>100.00</i>

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

SUBTOTAL \$ *100.00*