

ORIGINAL

Recipient Committee
Campaign Statement
Cover Page

COVER PAGE

CALIFORNIA
FORM 460

Date Stamp

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Page 1 of 10

For Official Use Only

Statement covers period

from 10/01/2012

through 10/20/2012

Date of Election if applicable

11/06/2012

(Month, Day, Year)

1. Type of Recipient Committee

- ☐ Officeholder, Candidate Controlled Committee
☐ 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

- ☒ Pre-election Statement
☐ Semi-Annual Statement
☐ Termination Statement
☐ Amendment
- ☐ Quarterly Statement
☐ Special Odd-Year Statement
☐ Supplemental Pre-election Statement - Attach Form 495

3. Committee Information

I.D. Number 1351592

COMMITTEE NAME

No on Z, with Major Funding by the Lincoln Club of San Diego County

Treasurer(s)

NAME OF TREASURER
C. April Boling

STREET ADDRESS (NO PO BOX)

CITY STATE ZIP CODE AREA CODE/PHONE
San Diego CA 92119

MAILING ADDRESS (IF DIFFERENT)

CITY STATE ZIP CODE

OPTIONAL: FAX / E-MAIL ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
San Diego CA 92119

NAME OF ASSISTANT TREASURER, IF ANY

STREET 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 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 10/24/2012

By

SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on

By

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

Executed on

By

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on

By

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

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

COVER PAGE - PART 2

**CALIFORNIA
FORM 460**

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Statement covers period

from 10/01/2012

through 10/20/2012

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

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

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

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 STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME I.D. NUMBER

NAME OF TREASURER CONTROLLED COMMITTEE ?
☐ YES ☐ NO

COMMITTEE STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE
Proposition Z

BALLOT NO. OR LETTER JURISDICTION
Z San Diego Unified School District

☐ SUPPORT
☒ OPPOSE

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

NAME OF OFFICEHOLDER OR CANDIDATE OR PROPONENT

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

Campaign Disclosure Statement Summary Page

SUMMARY PAGE

Statement covers period		CALIFORNIA FORM 460
from	10/01/2012	
through	10/20/2012	Page 3 of 10

NAME OF FILER No on Z, with Major Funding by the Lincoln Club of San Diego County

I.D. NUMBER
1351592

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions Schedule A, Line 3	\$ 110,000.00	\$ 127,000.00
2. Loans Received Schedule B, Line 3	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 110,000.00	\$ 127,000.00
4. Nonmonetary Contributions Schedule C, Line 3	616.25	616.25
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 110,616.25	\$ 127,616.25

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

6. Payments Made Schedule E, Line 4	\$ 70,025.98	\$ 70,040.05
7. Loans Made Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 70,025.98	\$ 70,040.05
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	-13,000.00	7,000.00
10. Nonmonetary Adjustment Schedule C, Line 3	616.25	616.25
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 57,642.23	\$ 77,656.30

Current Cash Statement

12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 16,985.93
13. Cash Receipts Column A, Line 3 above	110,000.00
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00
15. Cash Payments Column A, Line 8 above	70,025.98
16. ENDING CASH BALANCE . Add Lines 12 + 13 + 14, then subtract Line 15	\$ 56,959.95
17. LOAN GUARANTEES RECEIVED. Schedule B, Part 2	\$ 0.00

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	\$ 0.00
19. Outstanding Debts. Add Lines 2 + Line 9 in Column B above	\$ 7,000.00

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made *
(If Subject to Voluntary Expenditure Limits)

\$ _____
\$ _____

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

Schedule A Monetary Contributions Received

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER No on Z, with Major Funding by the Lincoln Club of San Diego County

I.D. NUMBER

1351592

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/16/2012	California Association of Realtors - Issues Mobilization PAC (CAR-IMPAC) [REDACTED] Los Angeles, CA 90020	COM	ID No. 782560	20,000.00	20,000.00	
10/12/2012	National Association of Realtors [REDACTED] Chicago, IL 60611	OTH		20,000.00	20,000.00	
10/16/2012	The Lincoln Club of San Diego County [REDACTED] San Diego, CA 92119	COM	ID No. 831561	5,000.00	70,000.00	
10/19/2012	The Lincoln Club of San Diego County [REDACTED] San Diego, CA 92119	COM	ID No. 831561	65,000.00	70,000.00	

SUBTOTAL \$ 110,000.00

Schedule A Summary

1. Amount received this period - itemized contributions (Includes all Schedule A subtotals)	\$ 110,000.00
2. Amount received this period - unitemized	\$ 0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A Line 1)	TOTAL \$ 110,000.00

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

FPPC Form 460(Jan/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule C
Nonmonetary Contributions Received

SCHEDULE C

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER No on Z, with Major Funding by the Lincoln Club of San Diego County

I.D. NUMBER
1351592

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR	CONTRIBUTOR CODE	OCCUPATION & EMPLOYER OR COMMITTEE ID NO.	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/18/2012	San Diego County Taxpayers Association [REDACTED] San Diego, CA 92101	OTH		Graphic Arts work	616.25	616.25	

SUBTOTAL \$ 616.25

Schedule C Summary

- Amount received this period - itemized contributions
(Includes all Schedule C subtotals) \$ 616.25
- Amount received this period - unitemized \$ 0.00
- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page. Column A Lines 4 and 10.) **TOTAL \$** 616.25

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

FPPC Form 460 (Jan/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule E Payments Made

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER No on Z, with Major Funding by the Lincoln Club of San Diego County		I.D. NUMBER 1351592

CODES: If one of the following 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 production costs
FIL candidate filing / ballot fees	PHO phone banks	TRC candidate travel, lodging and meals
FND fundraising expenses	POL polling and survey research	TRS staff/spouse travel, lodging and meals
IND independent expenditures supporting/opposing others	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	CODE or	DESCRIPTION OF PAYMENT	AMOUNT PAID
Competitive Edge [REDACTED] San Diego, CA 92101	POL		20,000.00
Gateway Media [REDACTED] Sacramento, CA 95833	RAD		49,997.50

SUBTOTAL \$ 69,997.50

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 69,997.50
2. Unitemized payments made this period of under \$100	\$ 28.48
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ 0.00
4. Total payments made this period. (Add Line 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$ 70,025.98

Schedule F
Accrued Expenses (Unpaid Bills)

SCHEDULE F

Statement covers period		CALIFORNIA FORM 460
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CODES: If one of the following 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
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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 CREDITOR	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
C. April Boling [REDACTED] San Diego, CA 92119	PRO	0.00	2,000.00	0.00	2,000.00
Competitive Edge [REDACTED] San Diego, CA 92101	See Schedule E for codes or descriptions.	20,000.00	0.00	20,000.00	0.00
SUBTOTALS \$		20,000.00	\$ 2,000.00	\$ 20,000.00	\$ 2,000.00

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) **INCURRED TOTALS \$** 7,000.00
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) **PAID TOTALS \$** 20,000.00
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, column A, Line 9.) **NET \$** -13,000.00

Schedule F (Continuation Sheet)
Accrued Expenses (Unpaid Bills)

SCHEDULE F

Statement covers period		CALIFORNIA FORM 460
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through	10/20/2012	Page 8 of 10
NAME OF FILER No on Z, with Major Funding by the Lincoln Club of San Diego County		I.D. NUMBER 1351592

CODES: If one of the following 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 production costs
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LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet,e-mail)

NAME AND ADDRESS OF CREDITOR	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
The Schuman Group [REDACTED] La Jolla, CA 92037	CNS	0.00	5,000.00	0.00	5,000.00

SUBTOTALS \$ 0.00 \$ 5,000.00 \$ 0.00 \$ 5,000.00

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

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER No on Z, with Major Funding by the Lincoln Club of San Diego County

I.D. NUMBER

1351592

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Gateway Media

CODES: If one of the following 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 production costs
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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)

*** Payments that re contributions or independent expenditures are also summarized on Schedule D**

NAME AND ADDRESS OF PAYEE OR CREDITOR	CODE OR	DESCRIPTON OF PAYMENT	AMOUNT PAID
KEMP FM [REDACTED] San Diego, CA 92111	RAD		6,778.75
KGB FM [REDACTED] San Diego, CA 92123	RAD		3,795.25
KHTS FM [REDACTED] San Diego, CA 92123	RAD		5,510.13
KIFM FM [REDACTED] San Diego, CA 92108	RAD		4,383.75

TOTAL \$ 20,467.88

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

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER No on Z, with Major Funding by the Lincoln Club of San Diego County

I.D. NUMBER
1351592

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Gateway Media

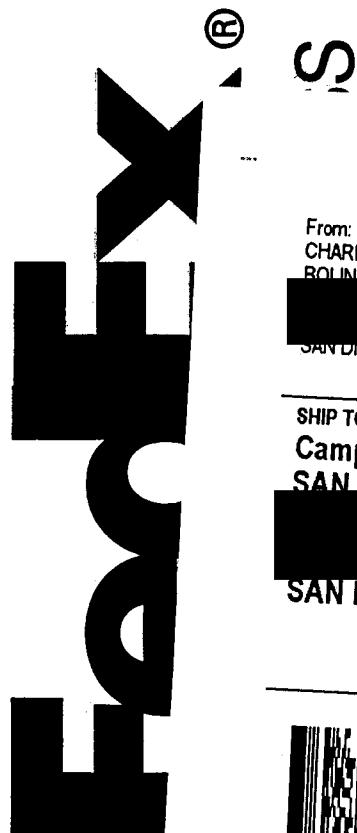
CODES: If one of the following accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
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* Payments that re contributions or independent expenditures are also summarized on Schedule D

NAME AND ADDRESS OF PAYEE OR CREDITOR	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
KSON FM [REDACTED] San Diego, CA 92108	RAD		6,162.50
KYXY FM [REDACTED] San Diego, CA 92111	RAD		4,186.25
XHRM FM [REDACTED] San Diego, CA 92123	RAD		4,462.50
XPRS FM [REDACTED] San Diego, CA 92122	RAD		7,118.75

TOTAL \$ 21,930.00



Extremely Urgent

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Campaign Finance Reporting
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Service
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