| Recipient Committee<br>Campaign Statement<br>Cover Page<br>(Goverment Code Sections 84200-84216.5)   | aign Statement Type or print in ini<br>Page |  | RECEIV<br>OS ANGELE<br>2015 JUL 14                 |                 | 2001/02 400   |
|--|---|--|--|-----------------|---|
|  | Statement covers period from 10/1/2014      | Date of election if applicable:<br>(Month, Day, Year)  | CAMPAIGN   |                 | FORM<br>Fage 1 of 76<br>For Official Use Only   |
|  | through 10/18/2014                          | 11/4/2014  |  |                 |   |
| □ State Candidate Election Committee       Committee         □ Recali       □ Conmittee         (Also Complete Part 5)       □ Spo         □ General Purpose Committee       (Also Complete Part 6)         □ Sponsored       ☑ Primaril         □ Smatt Contributor Committee       Officeh | y Formed Ballot Measure<br>ttee<br>trolled  | 2. Type of States<br>Preelection States<br>Semi-annual States<br>Termination States<br>(Also file a Form 410<br>Amendment (Expl.<br>Schedule I   | nent<br>ment<br>ment<br>Termination)<br>ain below) | Specia          | erly Statement<br>al Odd-Year Report<br>emental Preelection<br>ment-Attach Form 495<br>Schedule G Amended |
| 3. Committee Information<br>COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)<br>Local Experience We Trust for our Communities - A Coa<br>Men and Women, Nurses, Teachers, Firefighters and Pub<br>Organizations for Sheila Kuehl for Supervisor 2014                                     | 49<br>lition of Working                     | Treasurer(s)   | STATE  | ZIP CODE        | AREA CODE/PHONE   |
| STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE A   | REA CODE/PHONE                              | NAME OF ASSISTANT TREA   |  |                 |   |
| MAILING ADDRESS (IF DIFFERENT) NO, AND STREET OR P.O. BOX  | AREA CODE/PHONE                             | CITY   | STATE  | ZIP CODE        | AREA CODE/PHONE   |
| 4. Verification I have used all reasonable diligence in preparing and review<br>under pepality of perjuty under the laws of the State of Califo  | omia that the foregoing is true and         |  |  | ne attached sch | edules is true and complete. I certify  |
| Executed on 07/10/2015 By<br>DATE Executed on By<br>DATE   | ,   | SIGNATURE OF TREASURER OR ASSIS  |  |                 | FPPC Form 460 (January/05)<br>FPPC Toil-Free Heipline:<br>ROPONENT 866/ASK-FPPC                           |
| Executed on By Executed on By DATE By DATE By DATE   | SIGNATURE OF                                | OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT, OR RESPONSIBLE OFFICER OF PROPONENT  666/A (866/ (86 |  |                 |   |

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Type or print in ink

COVER PAGE-PART 2

| CALIF<br>FO | ORN<br>RM | IA <b>Z</b> | 160 |
|-------------|-----------|-------------|-----|
| Page        | 2         | of          | 76  |

| NAME OF OFFICEHOLDER OR CANDIDATE   | the second s | 6.Primarily Formed Ballot Measure Committee  |   |   |  |  |
|---|--|--|---|---|--|--|
|   |  |  |   |   |  |  |
| OFFICE SOUGHT OR HELD(INCLUDE LOCATION AND DISTRICT NU  | MBER IF APPLICABLE)  | BALLOT NO. OR LETTER   | JURISDICTION  | SUPPORT   |  |  |
|   |  |  |   | OPPOSE  |  |  |
| RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY  | STATE ZIP  | Identify the controlling offi  | iceholder, candidate, or  | state measure proponent, if an                            |  |  |
|   |  | NAME OF OFFICEHLOLDER, CAN   | NDIDATE, OR PROPONENT   | andarda Processing Constants and Andrews                  |  |  |
| Related Committees Not Included in this Statement   | -  | OFFICE SOUGHT OR HELD  |   | DISTRICT NO. IF ANY                                       |  |  |
| not included in this statement that are controlled by you or are prim.<br>contributions or make expenditures on behalf of your candidacy.                                       | -  |  |   | older Committee List names                                |  |  |
| not included in this statement that are controlled by you or are prim<br>contributions or make expenditures on behalf of your candidacy.<br>COMMITTEE NAME<br>NAME OF TREASURER | I.D. NUMBER  | 7. Primarily Formed Ca   | which this committee is primarily                               |   |  |  |
| not included in this statement that are controlled by you or are prim<br>contributions or make expenditures on behalf of your candidacy.<br>COMMITTEE NAME                      | I.D. NUMBER<br>CONTROLLED COMMITTEE?   | 7. Primarily Formed Ca<br>officeholder(s) or candidate(s) for w                              | which this committee is primarily<br>ANDIDATE OFFICE S<br>Board | older Committee List names<br>y formed.                   |  |  |
| not included in this statement that are controlled by you or are prim<br>contributions or make expenditures on behalf of your candidacy.<br>COMMITTEE NAME<br>NAME OF TREASURER | I.D. NUMBER<br>CONTROLLED COMMITTEE?   | 7. Primarily Formed Ca<br>officeholder(s) or candidate(s) for w<br>NAME OF OFFICEHOLDER OR C | which this committee is primarily<br>ANDIDATE OFFICE S<br>Board | older Committee List names<br>y formed.<br>SOUGHT OR HELD |  |  |

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772) State of California

| Campaign Disclosure Statement   | Type or print                                  | in ink.   |   | SUMMARY PAGE                             |
|---|--|---|---|--|
| Summary Page  | Amounts may be<br>to whole do                  |   | Statement covers period                 | CALIFORNIA 460                           |
| Summary Fage  |  |   | from 10/1/2014                          | FORM 400                                 |
|   |  |   | through 10/18/2014                      | Page <u>3</u> of <u>76</u>               |
| NAME OF FILER   |  |   |   | I.D. NUMBER                              |
| Local Experience We Trust for our Communities - A Coalitio<br>Public Safety Officers Organizations for Sheila Kuehl for |  | omen, Nurses, Teach   | hers, Firefighters and                  | 1371649                                  |
| Contributions Received  | Column A                                       | Column B  |   | nmary for Candidates                     |
|   | Total This Period<br>(FROM ATTACHED SCHEDULES) | CALENDAR YEAR<br>TOTAL TO DATE                                | Running in Both th<br>General Elections | e State Primary and                      |
| 1. Monetary Contributions Schedule A, Line 3  | \$997,000.00                                   | \$1,772,000.  | 00                                      | 1/1 through 6/30 7/1 to Date             |
| 2. Loans Received Schedule B, Line 3  | \$0.00   | \$0.  | 00 20. Contributions                    |  |
| 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1+ 2   | \$997,000.00                                   | \$1,772,000.  |   |  |
| 4. Nonmonetary Contributions Schedule C, Line 3   | \$229,000.00                                   | \$229,000.  | 00 21. Expenditures                     |  |
| 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4   | \$1,226,000.00                                 | \$2,001,000.  |   |  |
| Expenditures Made   |  |   | Expenditure Limit<br>Candidates         | Summary for State                        |
| 6. Payments Made Schedule E, Line 4   | \$1,250,131.60                                 | \$1,714,450.  | 71                                      |  |
| 7. Loans Made Schedule H, Line 3  | \$0.00   | \$0.  | 00                                      | e Expenditures Made *                    |
| 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7   | \$1,250,131.60                                 | \$1,714,450.  | 71 (If Subject to V                     | oluntary Expenditure Limit)              |
| 9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3   | \$18,285.11                                    | \$320,106.  | 83 Date of Election                     | Total to Date                            |
| 10. Nonmonetary Adjustment Schedule C, Line 3   | \$229,000.00                                   | \$229,000.  | 00 (mm/dd/yyyy)                         |  |
| 11. TOTAL EXPENDITURES MADE Add Lines 8 +9 + 10   | \$1,497,416.71                                 | \$2,263,557.  | 54                                      |  |
| Current Cash Statement  | · · · · · · · · · · · · · · · · · · ·          |   |   |  |
| 12. Beginning Cash Balance Previous Summary Page, Line 16   | \$310,680.89                                   | To calculate Column B, add                                    |   |  |
| 13. Cash Receipts Column A, Line 3 above  | \$997,000.00                                   | amounts in Column A to the<br>corresponding amounts from      | 1                                       |  |
| 14. Miscellaneous Increases to Cash Schedule I, Line 4  | \$50,000.00                                    | Column 8 of your last report.<br>Some amounts in Column A     |   |  |
| 15. Cash Payments Column A, Line 8 above  | \$1,250,131.60                                 | may be negative figures that<br>should be subtracted from     |   | tion may be different from amounts       |
| 16. ENDING CASH BALANCE Add Lines 12+13+14, then subtract Line 15   | \$107,549.29                                   | previous period amounts. If<br>this is the first report being |   |  |
| If this is a termination statement, Line 16 must be zero.   |  | filed for this calendar year,<br>only carry over the amounts  |   |  |
| 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2   | \$0.00   | from Lines 2, 7, and 9 (if any).                              |   |  |
| Cash Equivalents and Outstanding Debts  |  |   |   |  |
|   | 4.0.00   |   |   |  |
| 18. Cash Equivalents See instructions on reverse  |  |   |   |  |
| 19. Outstanding Debts Add Line 2+Line 9 in Column B above   | \$320,106.83                                   |   |   | FPPC Form 460 (January/05)               |
|   |  |   | FPPC Toll-Fr                            | ee Helpline: 866/ASK-FPPC (666/275-3772) |

| Schedule A<br>Monetary Contributions Received |   | Amo                           | ype or print in ink.<br>unts may be rounded<br>to whole dollars.                                    | Statement covers                  | CALIFORNIA<br>FORM 460 |                                       |      |                                |
|---|---|-------------------------------|---|-----------------------------------|------------------------|---------------------------------------|------|--------------------------------|
|   |   |                               |   | from 10/1/2<br>through 10/18/2    |                        | Page                                  | 4 of |                                |
|   | e We Trust for our Communities - A Coalition of Working<br>or Sheila Kuehl for Supervisor 2014  | Men and Women,                | Nurses, Teachers, Firefighters  | and Public Safety (               | Officers               | I.D. NUMBER                           |      |                                |
| DATE<br>RECEIVED                              | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR<br>CODE *         | IF AN INDIVIDUAL, ENTER<br>OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME<br>OF BUSINESS) | AMOUNT<br>RECEIVED THIS<br>PERIOD | CALEN                  | IVE TO DATE<br>DAR YEAR<br>1-DEC. 31) | Т    | ELECTION<br>D DATE<br>EQUIRED) |
| 10/03/2014                                    | AFSCME CA District Council 36 PAC   | ☐ IND<br>✓ СОМ<br>ОТН<br>РТҮ  |   | \$25,000.00                       | \$150,                 | ,000.00                               |      |                                |
| 10/09/2014                                    | ID: 747152<br>AFSCME CA District Council 36 PAC   | SCC<br>ND<br>COM<br>OTH       |   | \$25,000.00                       | \$150                  | ,000.00                               |      |                                |
| 10/03/2014                                    | ID: 747152  |                               |   | +20,000100                        | <i>\</i> 1007          |                                       |      |                                |
| 10/17/2014                                    | AFSCME CA District Council 36 PAC   |                               |   | \$50,000.00                       | \$150,                 | ,000.00                               |      |                                |
| ,   | ID: 747152<br>AFSCME  |                               |   |                                   |                        |                                       | 1    |                                |
| 10/01/2014                                    | ID: 745604  | ✓ сом<br>Оотн<br>Пртү<br>Пscc |   | \$150,000.00                      | \$150,                 | ,000.00                               |      |                                |

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| 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     .00 |
|  |

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

| Schedule A<br>Monetary C | Contributions Received  | Amo                             | ype or print in ink.<br>unts may be rounded<br>to whole dollars.                                    | Statement covers<br>from10/1/2<br>through10/18/2 | 2014 <b>FO</b>  |  |
|--------------------------|---|---------------------------------|---|--|---|--|
| Local Experienc          | e We Trust for our Communities - A Coalition of Working<br>or Sheila Kuehl for Supervisor 2014  | Men and Women,                  | Nurses, Teachers, Firefighters  | and Public Safety                                | Officers I.D. NUMBE                                     |  |
| DATE<br>RECEIVED         | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR<br>CODE *           | IF AN INDIVIDUAL, ENTER<br>OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME<br>OF BUSINESS) | AMOUNT<br>RECEIVED THIS<br>PERIOD                | CUMULATIVE TO DATI<br>CALENDAR YEAR<br>(JAN. 1-DEC. 31) | E PER ELECTION<br>TO DATE<br>(IF REQUIRED) |
| 10/03/2014               | Association for LA Deputy Sheriffs<br>State PAC<br>ID: 1359227                                  |                                 |   | \$125,000.00                                     | \$500,000.00  |  |
| 10/09/2014               | Association for LA Deputy Sheriffs<br>State PAC<br>ID: 1359227                                  |                                 |   | \$125,000.00                                     | \$500,000.00  |  |
| 10/03/2014               | CA Assn. of Professional Employees<br>PAC   | IND<br>COM<br>OTH<br>PTY<br>SCC |   | \$25,000.00                                      | \$100,000.00  |  |
| 10/09/2014               | ID: 761351<br>CA Assn. of Professional Employees<br>PAC   | IND<br>COM<br>OTH<br>PTY<br>SCC |   | \$25,000.00                                      | \$100,000.00  |  |
|                          | ID: 761351  |                                 | ·   | -  | -   |  |

| SUBTOTAL  | \$300,000.00 |   |
|---|--------------|---|
| Schedule A Summary  |              | *Contributor Codes  |
| <ol> <li>Amount received this period -itemized monetary contributions.</li> </ol>     |              | IND- Individual   |
| (Include all Schedule A subtotals.)   | \$997,000.00 | COM- Recipient Committee                                      |
| 2. Amount received this period -uniternized monetary contributions of less than \$100 | \$0.00       | (other than PTY or SCC)<br>OTH- Other (e.g., business entity) |
| 3. Total monetary contributions received this period.                                 |              | PTY- Political Party<br>SCC- Small Contributor Committee      |
| (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.)                | \$997,000.00 | FPPC Form 460 (January/05)                                    |

FPPC Toll-Free Helpline: 666/ASK-FPPC (866/275-3772)

| Schedule A       |  | T   | ype or print in ink.  |                                   | SCHEDULE A                           |                                       |  |  |  |
|------------------|--|---|---|-----------------------------------|--------------------------------------|---------------------------------------|--|--|--|
|                  |  |   | unts may be rounded to whole dollars.   | Statement covers                  | s period C                           | CALIFORNIA 460                        |  |  |  |
| Monetary C       | Contributions Received   |   | to whole donars.  | from 10/1/2014                    |                                      | FORM                                  | 400                                      |  |  |
|                  |  |   |   | through 10/18/2                   | 2014 P                               | age 6                                 | <b>of</b> 76                             |  |  |
|                  | e We Trust for our Communities - A Coalition of Working<br>or Sheila Kuehl for Supervisor 2014   | g Men and Women,                          | Nurses, Teachers, Firefighters  |                                   | Officers I.D                         | NUMBER                                |  |  |  |
| DATE<br>RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  | CONTRIBUTOR<br>CODE *                     | IF AN INDIVIDUAL, ENTER<br>OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME<br>OF BUSINESS) | AMOUNT<br>RECEIVED THIS<br>PERIOD | CUMULATIVE<br>CALENDAR<br>(JAN. 1-DE | TO DATE<br>YEAR                       | PER ELECTION<br>TO DATE<br>(IF REQUIRED) |  |  |
| 10/01/2014       | Glen Dake  | VIND<br>COM<br>OTH<br>PTY<br>SCC          | Landscape Architect<br>GDML   | \$10,000.00                       | \$10,00                              | 00.00                                 |  |  |  |
| 10/09/2014       | LA County Firefighters Local 1014<br>Firefighters Organized Ready &<br>Committeed In Emergencies | IND<br>COM<br>OTH<br>PTY<br>SCC           |   | \$125,000.00                      | \$500,00                             | 00.00                                 |  |  |  |
|                  | ID: 1279318  |   | T   | - <u>-</u>                        |                                      |                                       |  |  |  |
| 10/09/2014       | LA County Firefighters Local 1014<br>Firefighters Organized Ready &<br>Committeed In Emergencies | ☐ IND<br>✓ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC |   | \$125,000.00                      | \$500,00                             | 00.00                                 |  |  |  |
|                  | ID: 1279318  |   |   |                                   |                                      |                                       |  |  |  |
| 10/17/2014       | LA County Probation Officers Union<br>AFSCME, Local 685 Political Action<br>Fund                 |   |   | \$50,000.00                       | \$100,00                             | 00.00                                 |  |  |  |
|                  | ID: 744558   |   |   |                                   |                                      |                                       |  |  |  |
|                  |  |   |   |                                   | The second second                    |                                       |  |  |  |
|                  |  |   | SUBTOTAL  | \$310,000.00                      |                                      |                                       |  |  |  |
| Schedule         | A Summary  |   |   |                                   | <b>Г</b> •0-                         | ntributor Codes                       |  |  |  |
|                  | ved this period -itemized monetary contributions.  |   |   | \$997,000.0                       | IND                                  | - Individual<br>M- Recipient Co       |  |  |  |
|                  | ived this period -unitemized monetary contributions of less th                                   |   |   | \$0.0                             | ~                                    | (other than PT<br>H- Other (e.g., bi  |  |  |  |
|                  | ry contributions received this period.   |   |   |                                   |                                      | - Political Party<br>C- Small Contrib |  |  |  |
|                  | and 2. Enter here on the Summary Page, Column A, Line 1.)  |   | TOTAL   | \$997,000.0                       | 1                                    |                                       | form 460 (January/                       |  |  |

| Schedule A<br>Monetary ( | A<br>Contributions Received   | Amo                             | ype or print in ink.<br>unts may be rounded<br>to whole dollars.                                    | Statement covers<br>from <u>10/1/</u><br>through <u>10/18/</u> | 2014     | CALIFO<br>FOR<br>Page                 | RNIA | <b>460</b>                     |
|--------------------------|---|---------------------------------|---|--|----------|---------------------------------------|------|--------------------------------|
|                          | e We Trust for our Communities - A Coalition of Working<br>or Sheila Kuehl for Supervisor 2014  | Men and Women,                  | Nurses, Teachers, Firefighters  | and Public Safety  | Officers | I.D. NUMBER<br>1371649                |      |                                |
| DATE<br>RECEIVED         | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR<br>CODE *           | IF AN INDIVIDUAL, ENTER<br>OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME<br>OF BUSINESS) | AMOUNT<br>RECEIVED THIS<br>PERIOD                              | CALEN    | IVE TO DATE<br>DAR YEAR<br>1-DEC. 31) | Т    | ELECTION<br>O DATE<br>EQUIRED) |
| 10/03/2014               | LA County Professional Peace<br>Officers' Assn. Independent<br>Expenditure Cmte.<br>ID: 810614  | IND<br>COM<br>OTH<br>PTY<br>SCC |   | \$62,500.00  | \$250,   | ,000.00                               | •    |                                |
| 10/09/2014               | LA County Professional Peace<br>Officers' Assn. Independent<br>Expenditure Cmte.<br>ID: 810614  | IND<br>COM<br>OTH<br>PTY<br>SCC |   | \$62,500.00  | \$250,   | ,000.00                               |      |                                |
| 10/09/2014               | LA League of Conservation Voters<br>(LALCV)   | IND<br>COM<br>OTH<br>PTY<br>SCC |   | \$10,000.00  | \$10,    | ,000.00                               |      |                                |
| 10/10/2014               | Howard Welinsky   |                                 | Senior Vice<br>President<br>Warner Bros.  | \$2,000.00   | \$2,     | ,000.00                               |      |                                |

| SUBTO   | TAL | \$137,000.00 |  |
|---|-----|--------------|--|
| Schedule A Summary  |     |              | *Contributor Codes   |
| 1. Amount received this period -itemized monetary contributions.<br>(Include all Schedule A subtotals.)   |     | \$997,000.00 | IND- Individual<br>COM- Recipient Committee<br>(other than PTY or SCC) |
| 2. Amount received this period -unitemized monetary contributions of less than \$100  |     | \$0.00       | OTH- Other (e.g., business entity)<br>PTY- Political Party             |
| <ol> <li>Total monetary contributions received this period.</li> <li>(Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.)</li></ol> | L   | \$997,000.00 | SCC- Small Contributor Committee FPPC Form 460 (January/05)            |

FPPC Toil-Free Helpline: 866/ASK-FPPC (866/275-3772)

| Sehedule C                                       | Type or print in Ink.                       |                                      | SCHEDULE C  |
|--|---|--------------------------------------|---|
| Schedule C<br>Nonmonetary Contributions Received | Amounts may be rounded<br>to whole dollars. | Statement covers period              | CALIFORNIA 460  |
|  |   | from 10/1/2014<br>through 10/18/2014 | FORM         FOO           Page         8         of         76 |
| NAME OF FILER                                    |   |                                      | I.D. NUMBER   |

## NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649 Organizations for Sheila Kuehl for Supervisor 2014

| DATE<br>RECEIVED | FULL NAME, STREET ADDRESS AND ZIP<br>CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR<br>CODE * | IF AN INDIVIDUAL, ENTER<br>OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF<br>BUSINESS) | DESCRIPTION OF<br>GOODS OR<br>SERVICES | AMOUNT/FAIR<br>MARKET VALUE | CUMULATIVE TO DATE<br>CALENDAR YEAR<br>(JAN. 1-DEC. 31) | PER ELECTION<br>TO DATE<br>(IF REQUIRED) |
|------------------|--|-----------------------|---|--|-----------------------------|---|--|
| 10/10/2014       | Service Employees<br>International Union<br>Local 721, CTW, CLC<br>Workers' Strength<br>Committee  |                       |   | Positive<br>Telvision<br>Ad            | \$229,000.<br>00            | \$229,000.00  |  |

| SUBTOTAL   | \$229,000.00           |  |
|--|------------------------|--|
| Schedule C Summary         1. Amount received this period -itemized nonmonetary contributions.         (Include all Schedule C subtotals.) | \$229,000.00<br>\$0.00 | *Contributor Codes<br>IND- Individual<br>COM- Recipient Committee<br>(other than PTY or SCC)<br>OTH- Other (e.g., business entity)<br>PTY- Political Party<br>SCC- Small Contributor Committee |
| (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Lines 4 and 10.)   | \$229,000.00           | FPPC Form 460 (January/05)   |

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

| Supporting                        | f Expenditures<br>/Opposing Other<br>, Measures and Committees   | ,                        | Type or print in ink.<br>Amounts may be rounded<br>to whole dollars. | from 10                     | 2000 200 200 200 200 200 200 200 200 20 | CALIF<br>FO<br>Page |                                    | 60<br>76 |
|-----------------------------------|--|--------------------------|--|-----------------------------|---|---------------------|------------------------------------|----------|
| NAME OF FILER<br>Local Experience | We Trust for our Communities - A Coalition of Wor<br>r Sheila Kuehl for Supervisor 2014                      | king Men and Wome        | n, Nurses, Teachers, Firefight                                       | through 10/                 |   | I.D. NUMB<br>137164 |                                    |          |
| DATE                              | NAME OF CANDIDATE, OFFICE, AND<br>DISTRICT, OR MEASURE NUMBER OR<br>LETTER AND JURISDICTION, OR<br>COMMITTEE | TYPE OF<br>PAYMENT       | DESCRIPTION<br>(IF REQUIRED)   | AMOUNT/FAIR<br>MARKET VALUE | CUMULATIVE<br>CALENDAR<br>(JAN. 1-DE    | YEAR                | PER ELECTIO<br>DATE<br>(IF REQUIRE |          |
| 10/02/2014                        | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose                         | Monetary<br>Contribution | TEL  | \$300,800.00                | \$2,131,                                | 939.16              |                                    |          |
|                                   |  |                          |  | 471 000 00                  | 40.101                                  | 000 10              |                                    |          |

| 10/02/2014 | Board of Supervisors County:<br>Los Angeles County                                   | Normonetary<br>Contribution   | TEL                      | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | <i>42,101,555.10</i> |  |
|------------|--|---|--------------------------|---|----------------------|--|
| 10/10/2014 | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose | Monetary<br>Contribution<br>Nonmonetary<br>Contribution<br>Independent<br>Expenditure | TEL                      | \$71,800.00                             | \$2,131,939.16       |  |
| 10/10/2014 | Sheila Kueh1<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose | Monetary<br>Contribution  | Memo: \$229000.00<br>TEL | \$0.00                                  | \$2,131,939.16       |  |

| SUBTOTAL  | \$601,600.00   |
|---|----------------|
| Schedule D Summary  |                |
| 1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)          | \$1,491,634.83 |
| 2. Unitemized contributions and independent expenditures made this period of under \$100                              | \$0.00         |
| 3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary | Page.)         |

SCHEDULE D

| Schedule D<br>Summary of Expenditures<br>Supporting/Opposing Other<br>Candidates, Measures and Committees |  |                          | Type or print in ink.<br>Amounts may be rounded<br>to whole dollars. |                             | /1/2014<br>18/2014 Pa                                 | CALIFORNIA 460<br>FORM Page 10 of 76 |  |
|---|--|--------------------------|--|-----------------------------|---|--------------------------------------|--|
| Local Experience  | We Trust for our Communities - A Coalition of Wo<br>r Sheila Kuehl for Supervisor 2014                       | orking Men and Wome      | en, Nurses, Teachers, Firefi   | ghters and Public Saf       |   | 71649                                |  |
| DATE  | NAME OF CANDIDATE, OFFICE, AND<br>DISTRICT, OR MEASURE NUMBER OR<br>LETTER AND JURISDICTION, OR<br>COMMITTEE | TYPE OF<br>PAYMENT       | DESCRIPTION<br>(IF REQUIRED)   | AMOUNT/FAIR<br>MARKET VALUE | CUMULATIVE TO D.<br>CALENDAR YEAR<br>(JAN. 1-DEC. 31) |                                      |  |
| 10/17/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County   | Monetary<br>Contribution | TEL  | \$305,400.00                | \$2,131,939   | .16                                  |  |
|   | Support Oppose   | Expenditure              |  |                             |   |                                      |  |
| 10/10/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County   | Monetary<br>Contribution | Field Program  | \$2,198.16                  | \$2,131,939   | .16                                  |  |
| 10/10/2014  | Support Oppose<br>Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose       | Monetary<br>Contribution | Field Program  | \$1,575.00                  | \$2,131,939   | .16                                  |  |
|   |  |                          | SUBTOTAL   | \$309,173.16                |   |                                      |  |
| Schedule D  | Summary<br>putions and independent expenditures made this perio  | d. (Include all Sched    | iule D subtotals.)   |                             |   | \$1,491,634.83                       |  |

\$1,491,634.83 

\$0.00

| SCHEDULE D | SCHEDULE | ΞD |
|------------|----------|----|
|------------|----------|----|

| Supporting/<br>Candidates,<br>NAME OF FILER<br>Local Experience | f Expenditures<br>Opposing Other<br>Measures and Committees<br>We Trust for our Communities - A Coalition of Wor<br>sheila Kuehl for Supervisor 2014 |                          | Type or print in ink.<br>Amounts may be rounded<br>to whole dollars.<br>en, Nurses, Teachers, Firefigh | from 10,<br>through 10/2    | /1/2014<br>18/2014                      | CALIF<br>FO<br>Page<br>I.D. NUMBE<br>137164 | RM 4600                                  |
|---|--|--------------------------|--|-----------------------------|---|---|--|
| DATE  | NAME OF CANDIDATE, OFFICE, AND<br>DISTRICT, OR MEASURE NUMBER OR<br>LETTER AND JURISDICTION, OR<br>COMMITTEE   | TYPE OF<br>PAYMENT       | DESCRIPTION<br>(IF REQUIRED)   | AMOUNT/FAIR<br>MARKET VALUE | CUMULATIVE T<br>CALENDAR<br>(JAN. 1-DEC | YEAR  | PER ELECTION TO<br>DATE<br>(IF REQUIRED) |
| 10/01/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose   | Monetary<br>Contribution | LIT  | \$4,814.26                  | \$2,131,9                               | 939.16                                      |  |
| 10/01/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose   | Monetary<br>Contribution | LIT  | \$7,847.71                  | \$2,131,9                               | 939.16                                      |  |
| 10/03/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose   | Monetary<br>Contribution | LIT  | \$7,847.71                  | \$2,131,9                               | 939.16                                      |  |

| SUBTOTAL  | \$20,509.68    |
|---|----------------|
| Schedule D Summary  |                |
| 1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)            | \$1,491,634.83 |
| 2. Unitemized contributions and independent expenditures made this period of under \$100                                | \$0.00         |
| 3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary P | Page.)         |

| SCHEDULE | D |
|----------|---|
|----------|---|

| Schedule D<br>Summary of Expenditures<br>Supporting/Opposing Other<br>Candidates, Measures and Committees |  | Type or print in ink.<br>Amounts may be rounded<br>to whole dollars. |                              |                             | /1/2014  | CALIFORNIA<br>FORM 460<br>Page 12 of 76 |  |
|---|--|--|------------------------------|-----------------------------|--|---|--|
|   | We Trust for our Communities - A Coalition of Wo<br>r Sheila Kuehl for Supervisor 2014                       | rking Men and Wome   | n, Nurses, Teachers, Firef   | fighters and Public Sa      |  | D. NUMBER<br>371649                     |  |
| DATE  | NAME OF CANDIDATE, OFFICE, AND<br>DISTRICT, OR MEASURE NUMBER OR<br>LETTER AND JURISDICTION, OR<br>COMMITTEE | TYPE OF<br>PAYMENT   | DESCRIPTION<br>(IF REQUIRED) | AMOUNT/FAIR<br>MARKET VALUE | CUMULATIVE TO (<br>CALENDAR YE/<br>(JAN. 1-DEC. 31 |   |  |
| 10/03/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose                         | Monetary<br>Contribution   | POS                          | \$4,814.26                  | \$2,131,93   | 9.16                                    |  |
| 10/03/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose                         | Monetary<br>Contribution   | POS                          | \$11,098.60                 | \$2,131,93   | 9.16                                    |  |
| 10/03/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County   | Monetary<br>Contribution   | LIT                          | \$17,613.26                 | \$2,131,93   | 9.16                                    |  |

| SUBTOTAL  | \$33,526.12                        |
|---|------------------------------------|
| Schedule D Summary  |                                    |
| 1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)            | \$1,491,634.83                     |
| 2. Unitemized contributions and independent expenditures made this period of under \$100                                | \$0.00                             |
| 3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary F | Page.) <b>TOTAL</b> \$1,491,634.83 |

| Supporting/<br>Candidates,<br>NAME OF FILER<br>Local Experience<br>Organizations for | f Expenditures<br>Opposing Other<br>Measures and Committees<br>We Trust for our Communities - A Coalition of Wor<br>Sheila Kuehl for Supervisor 2014 | king Men and Wome   |                              | from 10/<br>through 10/1    | /1/2014<br>18/2014<br>ety Officers      | FO<br>Page<br>I.D. NUMB<br>137164 | ORNIA<br>RM<br>13 º |                             | 0 |
|--|--|---|------------------------------|-----------------------------|---|-----------------------------------|---------------------|-----------------------------|---|
| DATE   | NAME OF CANDIDATE, OFFICE, AND<br>DISTRICT, OR MEASURE NUMBER OR<br>LETTER AND JURISDICTION, OR<br>COMMITTEE   | TYPE OF<br>PAYMENT  | DESCRIPTION<br>(IF REQUIRED) | AMOUNT/FAIR<br>MARKET VALUE | CUMULATIVE 1<br>CALENDAR<br>(JAN. 1-DEC | YEAR                              | 0                   | ECTION TO<br>ATE<br>QUIRED) | , |
| 10/03/2014   | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose   | Monetary<br>Contribution  | LIT                          | \$41,128.81                 | \$2,131,5                               | 939.16                            |                     |                             |   |
| 10/03/2014   | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose   | Monetary<br>Contribution<br>Nonmonetary<br>Contribution<br>Independent<br>Expenditure | POS                          | \$34,707.69                 | \$2,131,9                               | 939.16                            |                     |                             |   |
| 10/07/2014   | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose   | Monetary<br>Contribution<br>Nonmonetary<br>Contribution<br>Independent<br>Expenditure | POS                          | \$11,098.60                 | \$2,131,9                               | 939.16                            |                     |                             |   |

| SUBTOTAL  | \$86,935.10                           |                |  |  |
|---|---------------------------------------|----------------|--|--|
| Schedule D Summary  | · · · · · · · · · · · · · · · · · · · |                |  |  |
| 1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)            |                                       | \$1,491,634.83 |  |  |
| 2. Unitemized contributions and independent expenditures made this period of under \$100                                |                                       | \$0.00         |  |  |
| 3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary P | age.)                                 | \$1,491,634.83 |  |  |

| Schedule D<br>Summary of Expenditures<br>Supporting/Opposing Other<br>Candidates, Measures and Committees |  |   | Type or print in ink.<br>Amounts may be rounded<br>to whole dollars.<br>from 10/1/20<br>through 10/18/20 |             | /1/2014<br>L8/2014 | FORM 460 |                              |  |
|---|--|---|--|-------------|--------------------|----------|------------------------------|--|
|   | We Trust for our Communities - A Coalition of Wo<br>r Sheila Kuehl for Supervisor 2014<br>NAME OF CANDIDATE, OFFICE, AND<br>DISTRICT, OR MEASURE NUMBER OR | rking Men and Wome<br>TYPE OF<br>PAYMENT  | DESCRIPTION<br>(IF REQUIRED)   | AMOUNT/FAIR | CUMULATIVE         |          | 9<br>PER ELECTION TO<br>DATE |  |
|   | LETTER AND JURISDICTION, OR<br>COMMITTEE   |   | (11)22011227   |             | (JAN. 1-DEC. 31)   |          | (IF REQUIRED)                |  |
| 10/07/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose   | Monetary<br>Contribution  | LIT  | \$17,613.26 | \$2,131,9          | 939.16   |                              |  |
| 10/07/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County   | Monetary<br>Contribution  | POS  | \$4,814.26  | \$2,131,9          | 939.16   |                              |  |
| 10/07/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>VSupport Oppose  | Monetary<br>Contribution<br>Nonmonetary<br>Contribution<br>Independent<br>Expenditure | LIT  | \$7,847.71  | \$2,131,           | 939.16   |                              |  |
|   |  |   | SUBTOTAL   | \$30,275.23 |                    |          |                              |  |

## Schedule D Summary

| 1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)                 | \$1,491,634.83 |
|--|----------------|
| 2. Unitemized contributions and independent expenditures made this period of under \$100                                     | \$0.00         |
| 3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) | \$1,491,634.83 |

\$30,275.23

| SCHEDU | JLE D |
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|--------|-------|

| Schedule D<br>Summary of Expenditures<br>Supporting/Opposing Other<br>Candidates, Measures and Committees |  | · ,                      | Type or print in ink.<br>Amounts may be rounded<br>to whole dollars. | from 10,                    | Statement covers periodCALIFORNIfrom10/1/2014FORMthrough10/18/2014Page15 |                      |  |
|---|--|--------------------------|--|-----------------------------|--|----------------------|--|
|   | We Trust for our Communities - A Coalition of Wo<br>r Sheila Kuehl for Supervisor 2014                       | rking Men and Wome       | n, Nurses, Teachers, Firefigh  | ters and Public Saf         | ety Officers   | I.D. NUMBE<br>137164 |  |
| DATE  | NAME OF CANDIDATE, OFFICE, AND<br>DISTRICT, OR MEASURE NUMBER OR<br>LETTER AND JURISDICTION, OR<br>COMMITTEE | TYPE OF<br>PAYMENT       | DESCRIPTION<br>(IF REQUIRED)   | AMOUNT/FAIR<br>MARKET VALUE | CUMULATIVE 1<br>CALENDAR<br>(JAN. 1-DEC                                  | YEAR                 | PER ELECTION TO<br>DATE<br>(IF REQUIRED) |
| 10/07/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose                         | Monetary<br>Contribution | POS  | \$34,707.69                 | \$2,131,9  | 939.16               |  |
| 10/07/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose                         | Monetary<br>Contribution | LIT  | \$39,052.34                 | \$2,131,9  | 939.16               |  |
| 10/09/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose                         | Monetary<br>Contribution | POS  | \$11,098.60                 | \$2,131,5  | 939.16               |  |

| SUBTOTAL  | \$84,858.63    |
|---|----------------|
| Schedule D Summary  |                |
| 1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)            | \$1,491,634.83 |
| 2. Unitemized contributions and independent expenditures made this period of under \$100                                | \$0.00         |
| 3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary F | Page.)         |

| SCHEDULE | ΞD |
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|----------|----|

| Schedule D<br>Summary of Expenditures<br>Supporting/Opposing Other<br>Candidates, Measures and Committees |  | ,                        | Type or print in ink.<br>Amounts may be rounded<br>to whole dollars. | from 10                             | Statement covers period       from     10/1/2014       from     10/18/2014   Page |                      |  |
|---|--|--------------------------|--|-------------------------------------|---|----------------------|--|
|   | We Trust for our Communities - A Coalition of Wo<br>r Sheila Kuehl for Supervisor 2014                       | rking Men and Wome       | n, Nurses, Teachers, Firef   | fighters and Public Saf             | ety Officers  | I.D. NUMBE<br>137164 |  |
| DATE  | NAME OF CANDIDATE, OFFICE, AND<br>DISTRICT, OR MEASURE NUMBER OR<br>LETTER AND JURISDICTION, OR<br>COMMITTEE | TYPE OF<br>PAYMENT       | DESCRIPTION<br>(IF REQUIRED)   | AMOUNT/F <b>AIR</b><br>MARKET VALUE | CUMULATIVE<br>CALENDAR<br>(JAN. 1-DEC   | YEAR                 | PER ELECTION TO<br>DATE<br>(IF REQUIRED) |
| 10/09/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose                         | Monetary<br>Contribution | LIT  | \$17,613.26                         | \$2,131,9   | 939.16               |  |
| 10/10/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose                         | Monetary<br>Contribution | LIT  | \$41,128.81                         | \$2,131,9   | 939.16               |  |
| 10/10/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose                         | Monetary<br>Contribution | FOS  | \$34,707.69                         | \$2,131,  | 939.16               |  |

| SUBTOTAL  | \$93,449.76    |
|---|----------------|
| Schedule D Summary  |                |
| 1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)            | \$1,491,634.83 |
| 2. Unitemized contributions and independent expenditures made this period of under \$100                                | \$0.00         |
| 3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary F | Page.)         |

SCHEDULE D

| Schedule D<br>Summary of Expenditures<br>Supporting/Opposing Other<br>Candidates, Measures and Committees |  | ,                        | Type or print in ink.<br>Amounts may be rounded<br>to whole dollars. |                             | /1/2014                                   | CALIF(<br>FOI<br>Page |  |
|---|--|--------------------------|--|-----------------------------|---|-----------------------|--|
|   | We Trust for our Communities - A Coalition of Wo<br>r Sheila Kuehl for Supervisor 2014                       | orking Men and Wome      | en, Nurses, Teachers, Firef  | ighters and Public Saf      | ety Officers                              | 1.D. NUMBE            |  |
| DATE  | NAME OF CANDIDATE, OFFICE, AND<br>DISTRICT, OR MEASURE NUMBER OR<br>LETTER AND JURISDICTION, OR<br>COMMITTEE | TYPE OF<br>PAYMENT       | DESCRIPTION<br>(IF REQUIRED)   | AMOUNT/FAIR<br>MARKET VALUE | CUMULATIVE T<br>CALENDAR \<br>(JAN. 1-DEC | YEAR                  | PER ELECTION TO<br>DATE<br>(IF REQUIRED) |
| 10/10/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose                         | Monetary<br>Contribution | POS  | \$4,814.26                  | \$2,131,9                                 | 939.16                |  |
| 10/10/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose                         | Monetary<br>Contribution | LIT  | \$7,847.71                  | \$2,131,9                                 | 939.16                |  |
| 10/13/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose                         | Monetary<br>Contribution | CNS  | \$7,333.33                  | \$2,131,9                                 | 939.16                |  |

| Schedule D<br>Summary of Expenditures<br>Supporting/Opposing Other<br>Candidates, Measures and Committees |  | Å                  | Type or print in ink.<br>Amounts may be rounded<br>to whole dollars. | Distance course available   |                                      |                     | RM 400                                   |
|---|--|--------------------|--|-----------------------------|--------------------------------------|---------------------|--|
|   | We Trust for our Communities - A Coalition of Wor<br>Sheila Kuehl for Supervisor 2014                        | king Men and Wome  | n, Nurses, Teachers, Firefigh  | ters and Public Saf         | ety Officers                         | I.D. NUMB<br>137164 |  |
| DATE  | NAME OF CANDIDATE, OFFICE, AND<br>DISTRICT, OR MEASURE NUMBER OR<br>LETTER AND JURISDICTION, OR<br>COMMITTEE | TYPE OF<br>PAYMENT | DESCRIPTION<br>(IF REQUIRED)   | AMOUNT/FAIR<br>MARKET VALUE | CUMULATIVE<br>CALENDAR<br>(JAN. 1-DE | YEAR                | PER ELECTION TO<br>DATE<br>(IF REQUIRED) |
|   |  | Monetary           |  |                             |                                      |                     |  |

| DATE       | NAME OF CANDIDATE, OFFICE, AND<br>DISTRICT, OR MEASURE NUMBER OR<br>LETTER AND JURISDICTION, OR<br>COMMITTEE | TYPE OF<br>PAYMENT  | DESCRIPTION<br>(IF REQUIRED) | AMOUNT/FAIR<br>MARKET VALUE | CUMULATIVE TO DATE<br>CALENDAR YEAR<br>(JAN. 1-DEC. 31) | PER ELECTION TO<br>DATE<br>(IF REQUIRED) |
|------------|--|---|------------------------------|-----------------------------|---|--|
| 10/14/2014 | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose                         | Monetary<br>Contribution<br>Nonmonetary<br>Contribution<br>Independent<br>Expenditure | LIT                          | \$41,128.81                 | \$2,131,939.16  |  |
| 10/14/2014 | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose                         | Monetary<br>Contribution  | POS                          | \$34,707.69                 | \$2,131,939.16  |  |
| 10/14/2014 | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose                         | Monetary<br>Contribution  | LIT                          | \$17,613.26                 | \$2,131,939.16  |  |

| SUBTOTAL   | \$93,449.76 |
|--|-------------|
| Schedule D Summary   |             |
| 1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) |             |
| 2. Unitemized contributions and independent expenditures made this period of under \$100                     | \$0.00      |

\$1,491,634.83 

| Supporting/<br>Candidates,<br>NAME OF FILER<br>Local Experience | f Expenditures<br>Opposing Other<br>Measures and Committees<br>We Trust for our Communities - A Coalition of Wo<br>sheila Kuehl for Supervisor 2014 |                          | Type or print in ink.<br>Mounts may be rounded<br>to whole dollars.<br>n, Nurses, Teachers, Firef | through 10/1                | /1/2014<br>18/2014                             | SCHEDULE D<br>ALIFORNIA 460<br>FORM 76<br>Page 19 of 76<br>D. NUMBER<br>371649 |
|---|---|--------------------------|---|-----------------------------|--|--|
| DATE  | NAME OF CANDIDATE, OFFICE, AND<br>DISTRICT, OR MEASURE NUMBER OR<br>LETTER AND JURISDICTION, OR<br>COMMITTEE  | TYPE OF<br>PAYMENT       | DESCRIPTION<br>(IF REQUIRED)  | AMOUNT/FAIR<br>MARKET VALUE | CUMULATIVE TO<br>CALENDAR YE<br>(JAN. 1-DEC. 3 | AR DATE  |
| 10/14/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose  | Monetary<br>Contribution | POS   | \$11,098.60                 | \$2,131,93                                     | 9.16   |
| 10/14/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose  | Monetary<br>Contribution | LIT   | \$7,847.71                  | \$2,131,93                                     | 9.16   |
| 10/14/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose  | Monetary<br>Contribution | POS   | \$4,814.26                  | \$2,131,93                                     | 9.16   |

| SUBTOTAL  | \$23,760.57                 |
|---|-----------------------------|
| Schedule D Summary  |                             |
| 1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)            | \$1,491,634.83              |
| 2. Unitemized contributions and independent expenditures made this period of under \$100                                | \$0.00                      |
| 3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary F | Page.) TOTAL \$1,491,634.83 |

SCHEDULE D

| Supporting/ | f Expenditures<br>Opposing Other<br>Measures and Committees  | ,                        | Type or print in ink.<br>Amounts may be rounded<br>to whole dollars. |                             | overs period<br>/1/2014<br>18/2014      | CALIF<br>FO<br>Page  |                                 | <b>460</b> |
|-------------|--|--------------------------|--|-----------------------------|---|----------------------|---------------------------------|------------|
|             | We Trust for our Communities - A Coalition of Wo<br>r Sheila Kuehl for Supervisor 2014                       | rking Men and Wome       | n, Nurses, Teachers, Firefigh  | nters and Public Saf        | ety Officers                            | I.D. NUMBE<br>137164 |                                 |            |
| DATE        | NAME OF CANDIDATE, OFFICE, AND<br>DISTRICT, OR MEASURE NUMBER OR<br>LETTER AND JURISDICTION, OR<br>COMMITTEE | TYPE OF<br>PAYMENT       | DESCRIPTION<br>(IF REQUIRED)   | AMOUNT/FAIR<br>MARKET VALUE | CUMULATIVE 1<br>CALENDAR<br>(JAN. 1-DEC | YEAR                 | PER ELECTI<br>DATE<br>(IF REQUI |            |
| 10/17/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose                         | Monetary<br>Contribution | LIT  | \$7,847.71                  | \$2,131,5                               | 939.16               |                                 |            |
| 10/17/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose                         | Monetary<br>Contribution | POS  | \$4,814.26                  | \$2,131,5                               | 939.16               |                                 |            |
| 10/17/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose                         | Monetary<br>Contribution | LIT  | \$41,128.81                 | \$2,131,5                               | 939.16               |                                 |            |

| SUBTO  | TAL       | \$53,790.78 |                |
|--|-----------|-------------|----------------|
| Schedule D Summary   |           |             |                |
| 1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)     |           |             | \$1,491,634.83 |
| 2. Unitemized contributions and independent expenditures made this period of under \$100                         |           |             | \$0.00         |
| 3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Su | immary Pa | age.) TOTAL | \$1,491,634.83 |

SCHEDULE D

| Supporting/<br>Candidates,<br>NAME OF FILER<br>Local Experience | f Expenditures<br>Opposing Other<br>Measures and Committees<br>We Trust for our Communities - A Coalition of Wor<br>sheila Kuehl for Supervisor 2014 |   | Type or print in ink.<br>Amounts may be rounded<br>to whole dollars.<br>en, Nurses, Teachers, Firefight | from 10<br>through 10/      | /1/2014<br>18/2014                      | CALIFO<br>FOI<br>Page<br> | RM 400                                   |
|---|--|---|---|-----------------------------|---|---------------------------|--|
| DATE  | NAME OF CANDIDATE, OFFICE, AND<br>DISTRICT, OR MEASURE NUMBER OR<br>LETTER AND JURISDICTION, OR<br>COMMITTEE   | TYPE OF<br>PAYMENT  | DESCRIPTION<br>(IF REQUIRED)  | AMOUNT/FAIR<br>MARKET VALUE | CUMULATIVE 1<br>CALENDAR<br>(JAN. 1-DEC | YEAR                      | PER ELECTION TO<br>DATE<br>(IF REQUIRED) |
| 10/17/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose   | Monetary<br>Contribution<br>Nonmonetary<br>Contribution<br>Independent<br>Expenditure | POS   | \$34,707.69                 | \$2,131,5                               | 939.16                    |  |
| 10/15/2014  | Sheila Kuehl<br>Board of Supervisors County:<br>Los Angeles County<br>Support Oppose   | Monetary<br>Contribution  | TEL   | \$5,603.05                  | \$2,131,9                               | 939.16                    |  |

| SUBTOTAL  | \$40,310.74    |
|---|----------------|
| Schedule D Summary  |                |
| 1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)            | \$1,491,634.83 |
| 2. Unitemized contributions and independent expenditures made this period of under \$100                                | \$0.00         |
| 3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary F | Page.)         |

|  |   | Type or print in ink.   |                                 |  |   | SCHEDULE E                 |  |  |
|--|---|---|---------------------------------|--|---|----------------------------|--|--|
| Schedule E<br>Payments Made  |   | Amounts   | may be rounded<br>nole dollars, | Statement covers period<br>from 10/1/2014<br>through 10/18/2014  | CALIFOR<br>FORM<br>Page 2   |                            |  |  |
| VAME OF FILER<br>Local Experience We Trust for our Communities - A (<br>Organizations for Sheila Kuehl for Supervisor 2014   | Coalition of Working Men ar   | nd Women, Nurs  | es, Teachers, Firefighters      | and Public Safety Officers   | I.D. NUMBER<br>1371649  |                            |  |  |
| CODES: If one of the following codes accura  | tely describes the paym   | ient, you ma  | y enter the code. Otherw        | ise, describe the payment  | t.  |                            |  |  |
| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MBR member comr<br>MTG meetings and<br>OFC office expense<br>PET petition circula<br>PHO phone banks<br>POL polling and su<br>POS postage, deliv<br>PRO professional s<br>PRT print ads | l appearances<br>es<br>ating<br>rvey research<br>very and messeng |                                 | RAD radio airtime and produ<br>RFD returned contributions<br>SAL campaign workers' sala<br>TEL t.v. or cable airtime and<br>TRC candidate travel, lodgin<br>TRS staff/spouse travel, lodg<br>TSF transfer between comm<br>VOT voter registration<br>WEB information technology | ries<br>production costs<br>g, and meals<br>ging, and meals<br>littees of the sam | ne candidate/sponsor       |  |  |
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  |   | CODE (  | DR E                            | ESCRIPTION OF PAYMENT  |   | AMOUNT PAID                |  |  |
| Canal Partners Media LLC   |   | IND   | TEL, Sheila Kueh                | l, Support   |   | \$300,800.00               |  |  |
| Canal Partners Media LLC   |   | IND   | TEL, Sheila Kueh                | l, Support   |   | \$71,800.00                |  |  |
| Canal Partners Media LLC   |   | IND   | Memo: \$229000.00               | TEL, Sheila Kuehl,   | Support   | \$0.00                     |  |  |
| * Payments that are contributions or independent expend  | itures must also be summariz  | zed on Schedul  | ə D.                            | \$   | BUBTOTAL  | \$372,600.00               |  |  |
| Schedule E Summary<br>1. Itemized payments made this period. (Include all Sch<br>2. Unitemized payments made this period of under \$100  | 0   |   |                                 |  |   | \$1,249,991.60<br>\$140.00 |  |  |
| 3. Total interest paid this period on loans. (Enter amoun  |   |   |                                 |  |   | \$0.00                     |  |  |
| 4. Total payments made this period. (Add Lines 1, 2, an  | d 3. Enter here and on the Su   | ummary Page,  | Column A, Line 6.)              | Τ  | OTAL  | \$1,250,131.60             |  |  |

| Schedule E   |   | Type or print in ink.  |                                  |               |                                 | SCHEDUL   |  |   |              |  |
|--|---|--|----------------------------------|---------------|---------------------------------|---|--|---|--------------|--|
| Payments Made  |   |  | s may be round<br>vhole dollars. | əd            | from                            | 10/1/201<br>10/1/201  | FORM   |   | IA 460       |  |
| NAME OF FILER<br>Local Experience We Trust for our Communities - A (<br>Organizations for Sheila Kuehl for Supervisor 2014   | Coalition of Working Men an   | nd Women, Nur  | ses, Teacher                     | s, Firefighte | ers and Pub                     | olic Safety Offic   | 1  | UMBER<br>1649                                   |              |  |
| CODES: If one of the following codes accura  | tely describes the paym   | ent, you ma  | ay enter the                     | code. Othe    | erwise, de                      | scribe the payr   | ment.  |   |              |  |
| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MBR member comm<br>MTG meetings and<br>OFC office expense<br>PET petition circular<br>PHO phone banks<br>POL polling and sur<br>POS postage, delive<br>PRO professional so<br>PRT print ads | appearances<br>es<br>ting<br>rvey research<br>ery and messen |                                  |               | R<br>S<br>T<br>T<br>T<br>V<br>V | AD radio airtime and<br>FD returned contribu<br>AL campaign worker<br>EL t.v. or cable airtim<br>RC candidate travel,<br>RS staff/spouse trave<br>SF transfer between<br>DT voter registration<br>EB information tech | itions<br>is' salaries<br>ne and produc<br>lodging, and r<br>el, lodging, an<br>committees o | tion costs<br>meals<br>d meals<br>f the same ca |              |  |
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  |   | CODE   | OR                               |               | DESCRIPT                        | ION OF PAYMENT  |  |   | AMOUNT PAID  |  |
| Canal Partners Media LLC   |   | IND  | TEL, S                           | heila Kue     | ehl, Sup                        | port  |  | 5   | \$305,400.00 |  |
| David Binder Research  |   | IND  | POL, S                           | heila Kue     | ehl, Sup                        | pport   |  |   | \$1,958.00   |  |
| David Binder Research  |   | IND  | POL, S                           | heila Kue     | ehl, Sug                        | pport   |  |   | \$23,760.00  |  |
| * Payments that are contributions or independent expend  | itures must also be summariz  | ed on Schedu   | le D.                            | ·····         |                                 |   | SUBTC  | TAL   | \$331,118.0  |  |
| Schedule E Summary 1. Itemized payments made this period. (Include all Sch   | eduie E subtotais.)   |  |                                  |               |                                 |   |  | \$1   | ,249,991.6(  |  |
| 2. Unitemized payments made this period of under \$100   |   |  |                                  |               |                                 |   |  |   | \$140.00     |  |
| 3. Total interest paid this period on loans. (Enter amoun  | t from Schedule B, Part 1, Co   | lumn (e).)   |                                  |               |                                 |   |  |   | \$0.00       |  |
| 4. Total payments made this period. (Add Lines 1, 2, and   | d 3. Enter here and on the Su   | Immary Page  | , Column A, Li                   | ne 6.)        |                                 |   | TOTAL  | \$1,  | ,250,131.60  |  |

| Schedule E  |  | Туре   | or print in lnk.                |  | SCHEDULE E   |                           |  |  |  |
|---|--|--|---------------------------------|--|--|---------------------------|--|--|--|
| Payments Made   |  | Amounts  | may be rounded<br>hole dollars. | Statement covers period<br>from 10/1/2014<br>through 10/18/2014  | CALIFO<br>FOR<br>Page  |                           |  |  |  |
|   |  |  |                                 | through 10/18/2014   |  |                           |  |  |  |
| VAME OF FILER<br>Local Experience We Trust for our Communities - A (<br>Organizations for Sheila Kuehl for Supervisor 2014  | Coalition of Working Men   | and Women, Nur:  | ses, Teachers, Firefighters     | and Public Safety Officers   | I.D. NUMBEF<br>1371649   | 1                         |  |  |  |
| CODES: If one of the following codes accura   | ately describes the payr   | nent, you ma   | y enter the code. Otherw        | vise, describe the paymen  | t.   |                           |  |  |  |
| CMP campaign paraphemalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MBR member con<br>MTG meetings an<br>OFC office expen<br>PET petition circu<br>PHO phone banks<br>POL polling and s<br>POS postage, del<br>PRO professional<br>PRT print ads | d appearances<br>ses<br>lating<br>s<br>urvey research<br>ivery and messeng |                                 | RAD radio airtime and prod<br>RFD returned contributions<br>SAL campaign workers' sali<br>TEL t.v. or cable airtime and<br>TRC candidate travel, lodgi<br>TRS staff/spouse travel, lod<br>TSF transfer between comm<br>VOT voter registration<br>WEB information technolog | aries<br>d production cos<br>ng, and meals<br>Igling, and meals<br>nittees of the sa | 3<br>me candidate/sponsor |  |  |  |
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)   |  | CODE   | OR C                            | DESCRIPTION OF PAYMENT   |  | AMOUNT PAID               |  |  |  |
| David Binder Research   |  | IND  | POL, Sheila Kueh                | l, Support   |  | \$13,200.0                |  |  |  |
| David Binder Research   |  | IND  | POL, Sheila Kueh                | l, Support   |  | \$13,200.0                |  |  |  |
| The Strategy Group, Inc.  |  | IND  | LIT, Sheila Kueh                | l, Support   | <u></u>  | \$4,814.2                 |  |  |  |
| * Payments that are contributions or independent expend   | litures must also be summar  | ized on Schedul  | e D.                            |  | SUBTOTAL   | \$31,214.                 |  |  |  |
| Schedule E Summary  |  |  |                                 |  |  | ¢1 040 001 0              |  |  |  |
| 1. Itemized payments made this period. (Include all Sch   |  |  |                                 |  |  | \$1,249,991.6<br>\$140.0  |  |  |  |
| 2. Unitemized payments made this period of under \$100  |  |  |                                 |  |  |                           |  |  |  |
| <ol><li>Total interest paid this period on loans. (Enter amoun</li></ol>  |  |  |                                 |  |  |                           |  |  |  |
| 4. Total payments made this period. (Add Lines 1, 2, an   | d 3. Enter here and on the S   | Summary Page,  | Column A, Line 6.)              |  |  | \$1,250,131.6             |  |  |  |

| Schedule E<br>Payments Made   |  | Amounts   | or print in ink.<br>1 may be rounded<br>hole dollars. | from 10/1/2014  | CALIFOR<br>FORM<br>Page 25  | 400                      |
|---|--|---|---|---|---|--------------------------|
| NAME OF FILER<br>Local Experience We Trust for our Communities - A<br>Organizations for Sheila Kuehl for Supervisor 2014  |  | nd Women, Nur   | ses, Teachers, Firefighters                           | 1   | D.NUMBER<br>371649  |                          |
| CODES: If one of the following codes accura   | ately describes the paym   | nent, you ma  | y enter the code. Otherv                              | vise, describe the payment.   |   |                          |
| CMP campaign paraphemalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MBR member com<br>MTG meetings and<br>OFC office expensi<br>PET petition circula<br>PHO phone banks<br>POL polling and su<br>POS postage, delly<br>PRO professional s<br>PRT print ads | appearances<br>es<br>ating<br>invey research<br>very and messen | -   | RAD radio airtime and production<br>RFD returned contributions<br>SAL campaign workers' salaries<br>TEL t.v. or cable airtime and pro<br>TRC candidate travel, lodging,<br>TRS staff/spouse travel, lodging<br>TSF transfer between committe<br>VOT voter registration<br>WEB information technology co | s<br>oduction costs<br>and meals<br>g, and meals<br>les of the same |                          |
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)   |  | CODE  | OR [  | DESCRIPTION OF PAYMENT  |   | AMOUNT PAID              |
| The Strategy Group, Inc.  |  | IND   | LIT, Sheila Kueh                                      | l, Support  |   | \$7,847.71               |
| The Strategy Group, Inc.  |  | IND   | LIT, Sheila Kueh                                      | l, Support  |   | \$7,847.71               |
| The Strategy Group, Inc.  |  | IND   | POS, Sheila Kueh                                      | l, Support  |   | \$4,814.26               |
| * Payments that are contributions or independent expendent  | litures must also be summaria  | zed on Schedu   | e D.  | SUI   | BTOTAL  | \$20,509.68              |
| Schedule E Summary 1. Itemized payments made this period. (Include all Sch 2. Unitemized payments made this period of under \$10  | 0  |   |   |   | ······ <u></u>  | 1,249,991.60<br>\$140.00 |
| 3. Total interest paid this period on loans. (Enter amour   |  |   |   |   |   | \$0.00                   |
| 4. Total payments made this period. (Add Lines 1, 2, an   | id 3. Enter here and on the Si   | ummary Page,  | Golumn A, Line 6.)                                    | тот   | AL <u></u>  | 1,250,131.60             |

| Organizations for Sheila Kuehl for Supervisor 2014   | to whole dollars.<br>from 10/1/2014<br>through 10/18/2014<br>or our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Office   |   |              | through 10/18/2014<br>and Public Safety Officers  | FORM         460           Page         26         of         76           I.D. NUMBER         I.D. NUMBER         I.D. NUMBER         I.D. NUMBER |  |  |
|--|---|---|--------------|---|--|--|--|
| CODES: If one of the following codes accurately d<br>CMP campaign paraphemalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | escribes the payment,<br>MBR member communica<br>MTG meetings and appea<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey re<br>POS postage, delivery an<br>PRO professional service<br>PRT print ads | ations<br>arances<br>asearch<br>ad messenger services |              | RAD radio airtime and produ<br>RFD returned contributions<br>SAL campaign workers' sala<br>TEL t.v. or cable airtime and<br>TRC candidate travel, lodgir<br>TRS staff/spouse travel, lod<br>TSF transfer between comm<br>VOT voter registration<br>WEB information technology | uction costs<br>aries<br>I production cos<br>ng, and meals<br>gling, and meals<br>nittees of the sam   | me candidate/sponsor<br>, e-mail)                      |  |
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  | c   | CODE OR   | D            | ESCRIPTION OF PAYMENT   |  | AMOUNT PAID  |  |
| The Strategy Group, Inc.   | IND   | POS, S  | Sheila Kuehl | , Support   |  | \$11,098.60  |  |
| The Strategy Group, Inc.   | IND   | LIT, S  | Sheila Kuehl | , Support   |  | \$17,613.26  |  |
| The Strategy Group, Inc.   | IND   | ) LIT, S  | Sheila Kuehl | , Support   |  | \$41,128.81  |  |
| * Payments that are contributions or independent expenditures i  | nust also be summarized or  | n Schedule D.   |              |   | SUBTOTAL   | \$69,840.67  |  |
| <ol> <li>Schedule E Summary</li> <li>Itemized payments made this period. (Include all Schedule E</li> <li>Unitemized payments made this period of under \$100</li> <li>Total interest paid this period on loans. (Enter amount from \$4. Total payments made this period. (Add Lines 1, 2, and 3. Enter</li> </ol>                           | Schedule B, Part 1, Column  | n (e).)   |              |   |  | \$1,249,991.60<br>\$140.00<br>\$0.00<br>\$1,250,131.60 |  |

| Schedule E   |   | Туре  | or print in ink.                  | SCHEDULE E  |  |                 |             |  |  |
|--|---|---|-----------------------------------|---|--|-----------------|-------------|--|--|
| Payments Made  |   | Amounts   | i may be rounded<br>hole dollars. | Statement covers period<br>from 10/1/2014   | CALIFO<br>FOR<br>Page  | RM              | <b>460</b>  |  |  |
|  |   |   |                                   | through 10/18/2014  |  |                 |             |  |  |
| NAME OF FILER<br>Local Experience We Trust for our Communities - A C<br>Organizations for Sheila Kuehl for Supervisor 2014   | calition of Working Men   | and Women, Nur  | ses, Teachers, Firefighte         | rs and Public Safety Officers   | I.D. NUMBE   |                 |             |  |  |
| CODES: If one of the following codes accurat   | ely describes the payr  | ment, you ma  | y enter the code. Othe            | rwise, describe the paymen  | t.   |                 |             |  |  |
| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundralsing events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MBR member cor<br>MTG meetings ar<br>OFC office expen<br>PET petition circu<br>PHO phone bank<br>POL polling and s<br>POS postage, del<br>PRO professional<br>PRT print ads | nd appearances<br>ses<br>flating<br>s<br>survey research<br>livery and messen |                                   | RAD radio airtime and produ<br>RFD returned contributions<br>SAL campaign workers' sala<br>TEL t.v. or cable airtime and<br>TRC candidate travel, lodgir<br>TRS staff/spouse travel, lod<br>TSF transfer between comm<br>VOT voter registration<br>WEB information technology | aries<br>d production co<br>ng, and meals<br>ging, and mea<br>nittees of the s | ils<br>ame cano |             |  |  |
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  |   | CODE  | OR                                | DESCRIPTION OF PAYMENT  |  |                 | AMOUNT PAID |  |  |
| The Strategy Group, Inc.   |   | IND   | POS, Sheila Kue                   | hl, Support   |  | \$              | 34,707.69   |  |  |
| The Strategy Group, Inc.   |   | IND   | LIT, Sheila Kue                   | hl, Support   |  |                 | \$6,567.87  |  |  |
| The Strategy Group, Inc.   |   | IND   | POS, Sheila Kue                   | hl, Support   |  |                 | \$4,827.68  |  |  |
| * Payments that are contributions or independent expend  | tures must also be summa  | rized on Schedu   | le D.                             |   | SUBTOTAL   |                 | \$46,103.24 |  |  |
| Schedule E Summary 1. Itemized payments made this period. (Include all Sche  | dule E subtotals.)  |   |                                   |   |  | \$1,2           | 49,991.60   |  |  |
| 2. Unitemized payments made this period of under \$100   |   |   |                                   |   |  |                 | \$140.00    |  |  |
| 3. Total interest paid this period on loans. (Enter amount   |   |   |                                   |   |  |                 | \$0.00      |  |  |
| 4. Total payments made this period. (Add Lines 1, 2, and   |   |   |                                   |   |  |                 | 50,131.60   |  |  |

| Schedule E   |                         | Туре  | or print in ink.  |             | SCHEDULE E  |   |                          |                |              |  |
|--|-------------------------|---|-------------------|-------------|---|---|--------------------------|----------------|--------------|--|
| Payments Made  |                         | Amounts may be rounded<br>to whole dollars. |                   |             | Statement covers period<br>from 10/1/2014<br>through 10/18/2014   | CALIF<br>FC<br>Page   | ORNI<br>RM<br>28         | A 46           |              |  |
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Co<br>Organizations for Sheila Kuehl for Supervisor 2014  | alition of Working Men  | and Women, Nur:                             | ses, Teachers, Fi | irefighters |   | 1.D. NUME<br>137164   |                          |                |              |  |
| CODES: If one of the following codes accurate  | ely describes the pay   | ment, you ma                                | y enter the cod   | le. Otherw  | ise, describe the paymer  | nt.   |                          |                |              |  |
| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings |                         | nd appearances<br>nses<br>ulating<br>ks     |                   |             | RAD radio airtime and proc<br>RFD returned contributions<br>SAL campaign workers' sa<br>TEL t.v. or cable airtime an<br>TRC candidate travel, lodg<br>TRS staff/spouse travel, lod<br>TSF transfer between com<br>VOT voter registration<br>WEB information technolog | laries<br>d production<br>ing, and mea<br>dging, and me<br>mittees of the | ls<br>eals<br>: same car |                | sor          |  |
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  |                         | CODE  | OR                | D           | ESCRIPTION OF PAYMENT   |   |                          | AMOUNT P       | AID          |  |
| The Strategy Group, Inc.   |                         | IND   | LIT, Shei         | la Kuehl    | ., Support  |   |                          | \$6,567        | .87          |  |
| The Strategy Group, Inc.   |                         | IND   | POS, Shei         | la Kuehl    | ., Support  |   |                          | \$4,827        | .68          |  |
| The Strategy Group, Inc.   |                         | IND   | LIT, Shei         | la Kuehl    | l, Support  |   |                          | \$45,738       | .11          |  |
| * Payments that are contributions or independent expendit  | ures must also be summa | rized on Schedul                            | le D.             |             |   | SUBTOTA   | L                        | \$57,13        | 3.6          |  |
| Schedule E Summary<br>1. Itemized payments made this period. (Include all Sched<br>2. Unitemized payments made this period of under \$100.   |                         |   |                   |             |   |   | <u></u>                  | \$140          | 0.00         |  |
| <ol> <li>Total interest paid this period on loans. (Enter amount</li> <li>Total payments made this period. (Add Lines 1, 2, and</li> </ol>   |                         |   |                   |             |   |   |                          | \$0<br>250,131 | ).00<br>L.60 |  |

| Schedule E   |   | Type or print in ink.   |              |            | SCHEDULE E |  |                     |                  |           |            |
|--|---|---|--------------|------------|------------|--|---------------------|------------------|-----------|------------|
| Payments Made  |   |   |              |            |            | Statement covers period<br>from10/1/2014   | CALIF<br>FC<br>Page | ORN<br>DRM<br>29 |           | <b>460</b> |
| NAME OF FILER  | /,  |   |              |            |            | through 10/18/2014   | I.D. NUM            |                  |           |            |
| Local Experience We Trust for our Communities - A Co<br>Organizations for Sheila Kuehl for Supervisor 2014   | alition of Working Men  | and Women, Nurs   | ses, Teacher | rs, Firefi | ghters     | and Public Safety Officers   | 13716               | 49               |           |            |
| CODES: If one of the following codes accurate  | ely describes the pay   | ment, you ma  | ly enter the | e code. O  | therw      | ise, describe the payme  | nt.                 |                  |           |            |
| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MTG meetings ar<br>OFC office exper<br>PET petition circu<br>PHO phone bank<br>POL polling and<br>POS postage, de | PRO professional services (legal, accounting)     VOT voter registration       PRT print ads     WEB information technology |              |            |            | aries<br>d production costs<br>ing, and meals<br>dging, and meals<br>mittees of the same candidate/sponsor |                     |                  | i/sponsor |            |
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  |   | CODE  | OR           |            | D          | ESCRIPTION OF PAYMENT  |                     |                  | AMO       | UNT PAID   |
| The Strategy Group, Inc.   |   | IND   | POS, S       | Sheila I   | Kuehl      | , Support  |                     |                  | \$34,     | 707.69     |
| The Strategy Group, Inc.   |   | IND   | POS, S       | Sheila 1   | Kuehl      | ., Support   |                     |                  | \$34,     | 707.69     |
| The Strategy Group, Inc.   |   | IND   | LIT, S       | Sheila 1   | Kuehl      | ., Support   |                     |                  | \$41,     | 128.81     |
| * Payments that are contributions or Independent expendit  | ures must also be summa   | rized on Schedul  | le D.        |            |            |  | SUBTOTA             | L                | \$110     | ,544.19    |
| Schedule E Summary 1. Itemized payments made this period. (Include all Scher   | dule E subtotals.)  |   |              |            |            |  |                     | \$1,             | 249,      | 991.60     |
| 2. Unitemized payments made this period of under \$100.  |   |   |              |            |            |  | _                   |                  |           | \$140.00   |
| 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 Lines 1, 2, and   | 3. Enter here and on the  | Summary Page,   | Column A, I  | Line 6.)   |            |  | TOTAL               | \$1,             | 250,      | 131.60     |

| Schedule E<br>Payments Made  |  | Amounts  | or print in ink.<br>I may be rounded<br>hole dollars. | Statement covers period<br>from 10/1/2014<br>through 10/18/2014   | CALIFOR<br>FORM<br>Page 3  |                            |
|--|--|--|---|---|--|----------------------------|
| NAME OF FILER<br>Local Experience We Trust for our Communities - A C<br>Organizations for Sheila Kuehl for Supervisor 2014   | Coalition of Working Men a   | and Women, Nur   | ses, Teachers, Firefighter:                           |   | I.D. NUMBER<br>1371649   |                            |
| CODES: If one of the following codes accura  | tely describes the payn  | nent, you ma   | y enter the code. Other                               | wise, describe the payment.   |  |                            |
| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MBR member com<br>MTG meetings an<br>OFC office expense<br>PET petition circul<br>PHO phone banks<br>POL polling and s<br>POS postage, dell<br>PRO professional<br>PRT print ads | d appearances<br>ses<br>lating<br>s<br>urvey research<br>ivery and messeng |   | RAD radio airtime and product<br>RFD returned contributions<br>SAL campaign workers' salarie<br>TEL t.v. or cable airtime and pr<br>TRC candidate travel, lodging,<br>TRS staff/spouse travel, lodgin<br>TSF transfer between committ<br>VOT voter registration<br>WEB information technology c | es<br>roduction costs<br>and meals<br>ng, and meals<br>ees of the same | e candidate/sponsor        |
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  |  | CODE   | OR  | DESCRIPTION OF PAYMENT  |  | AMOUNT PAID                |
| The Strategy Group, Inc.   |  | IND  | POS, Sheila Kueh                                      | l, Support  |  | \$11,098.60                |
| The Strategy Group, Inc.   |  | IND  | LIT, Sheila Kueh                                      | l, Support  |  | \$17,613.26                |
| The Strategy Group, Inc.   |  | IND  | POS, Sheila Kueh                                      | l, Support  |  | \$4,814.26                 |
| * Payments that are contributions or independent expend  | itures must also be summar   | ized on Schedul  | e D.  | SU  | IBTOTAL  | \$33,526.12                |
| Schedule E Summary 1. Itemized payments made this period. (Include all Sche 2. Unitemized payments made this period of under \$100   |  |  |   |   |  | \$1,249,991.60<br>\$140.00 |
| 3. Total interest paid this period on loans. (Enter amoun  | t from Schedule B, Part 1, C   | Column (e).)   |   |   | ·····  | \$0.00                     |
| 4. Total payments made this period. (Add Lines 1, 2, and   | d 3. Enter here and on the S   | Summary Page,  | Column A, Line 6.)                                    | то  | TAL\$  | 51,250,131.60              |

| Schedule E<br>Payments Made  |                            | from <u>10/1/2014</u><br>through <u>10/18/2014</u> |                             |  |  | SCHEDULE E<br>FORNIA<br>ORM 460 |  |  |
|--|----------------------------|--|-----------------------------|--|--|---------------------------------|--|--|
| NAME OF FILER<br>Local Experience We Trust for our Communities - A (<br>Organizations for Sheila Kuehl for Supervisor 2014   |                            | and Women, Nur                                     | ses, Teachers, Firefighters | and Public Safety Officers   | I.D. NUMBER<br>1371649   |                                 |  |  |
| CODES: If one of the following codes accura  | itely describes the pay    | ment, you ma                                       | y enter the code. Otherw    | vise, describe the payment   |  |                                 |  |  |
| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings |                            | nd appearances<br>nses<br>ulating<br>ks            |                             | RAD radio airtime and produ<br>RFD returned contributions<br>SAL campaign workers' sala<br>TEL t.v. or cable airtime and<br>TRC candidate travel, lodgin<br>TRS staff/spouse travel, lodg<br>TSF transfer between comm<br>VOT voter registration<br>WEB information technology | ries<br>production costs<br>g, and meals<br>aing, and meals<br>ittees of the sam | e candidate/sponsor             |  |  |
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  |                            | CODE   | OR C                        | DESCRIPTION OF PAYMENT   |  | AMOUNT PAID                     |  |  |
| The Strategy Group, Inc.   |                            | IND  | LIT, Sheila Kueh            | l, Support   |  | \$7,847.71                      |  |  |
| The Strategy Group, Inc.   |                            | ,<br>IND   | POS, Sheila Kueh            | l, Support   |  | \$34,707.69                     |  |  |
| The Strategy Group, Inc.   |                            | IND  | LIT, Sheila Kueh            | l, Support   |  | \$39,052.34                     |  |  |
| * Payments that are contributions or independent expend  | litures must also be summa | rized on Schedul                                   | e D.                        | S  | UBTOTAL  | \$81,607.74                     |  |  |
| Schedule E Summary 1. Itemized payments made this period. (Include all Sch 2. Unitemized payments made this period of under \$100  | D                          |  |                             |  | ······ <u> </u>  | \$1,249,991.60<br>\$140.00      |  |  |
| 3. Total interest paid this period on loans. (Enter amoun  |                            | . , ,  |                             |  |  |                                 |  |  |
| 4. Total payments made this period. (Add Lines 1, 2, an  | d 3. Enter here and on the | Summary Page,                                      | Column A, Line 6.)          | T  | OTAL   | \$1,250,131.60                  |  |  |

| Schedule E<br>Payments Made  |                          | $\frac{\text{from } \frac{10/1/2014}{10/18/2014}}{\text{through } \frac{10/18/2014}{2014}}$ |                             |   |   | SCHEDULE E<br>RNIA 460<br>12 of 76   |
|--|--------------------------|---|-----------------------------|---|---|--------------------------------------|
| NAME OF FILER<br>Local Experience We Trust for our Communities - A C<br>Organizations for Sheila Kuehl for Supervisor 2014   | oalition of Working Men  | and Women, Nur  | ses, Teachers, Firefighters | and Public Safety Officers  | I.D. NUMBER<br>1371649  |                                      |
| CODES: If one of the following codes accurate  | ely describes the pay    | ment, you ma  | ay enter the code. Other    | vise, describe the paymen   | t.  |                                      |
| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundralsing events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings |                          | nd appearances<br>nses<br>ulating<br>s  |                             | RAD radio airtime and produ<br>RFD returned contributions<br>SAL campaign workers' sala<br>TEL t.v. or cable airtime and<br>TRC candidate travel, lodgir<br>TRS staff/spouse travel, lod<br>TSF transfer between comm<br>VOT voter registration<br>WEB information technology | rries<br>production costs<br>ng, and meals<br>ging, and meals<br>hittees of the sam | e candidate/sponsor                  |
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  |                          | CODE  | OR                          | DESCRIPTION OF PAYMENT  |   | AMOUNT PAID                          |
| The Strategy Group, Inc.   |                          | IND   | POS, Sheila Kueh            | l, Support  |   | \$11,098.60                          |
| The Strategy Group, Inc.   |                          | IND   | LIT, Sheila Kueh            | l, Support  |   | \$17,613.26                          |
| The Strategy Group, Inc.   |                          | IND   | POS, Sheila Kueh            | l, Support  |   | \$4,814.26                           |
| * Payments that are contributions or independent expendi   | tures must also be summa | rized on Schedu   | le D.                       |   | SUBTOTAL  | \$33,526.12                          |
| Schedule E Summary 1. Itemized payments made this period. (Include all Sche 2. Unitemized payments made this period of under \$100 3. Total interest paid this period on loans. (Enter amount  |                          |   |                             |   |   | \$1,249,991.60<br>\$140.00<br>\$0.00 |
| 4. Total payments made this period. (Add Lines 1, 2, and   |                          |   |                             |   | -   | \$1,250,131.60                       |

| Schedule E   |   |  | or print in ink.                  |  | SCHEDULE E  |             |  |
|--|---|--|-----------------------------------|--|---|-------------|--|
| ayments Made   |   |  | ı may be rounded<br>hole dollars. | Statement covers period<br>from $\frac{10/1/2014}{10/18/2014}$   | CALIFORN<br>FORM<br>Page 33   | IA 460      |  |
| WAME OF FILER<br>ocal Experience We Trust for our Communities - A<br>organizations for Sheila Kuehl for Supervisor 2014  |   | and Women, Nur   | ses, Teachers, Firefighter:       |  | I.D. NUMBER<br>1371649  |             |  |
| CODES: If one of the following codes accura  | ately describes the payr  | nent, you ma   | y enter the code. Other           | vise, describe the payment.  |   |             |  |
| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MBR member con<br>MTG meetings an<br>OFC office expens<br>PET petition circul<br>PHO phone banks<br>POL polling and s<br>POS postage, dell<br>PRO professional<br>PRT print ads | d appearances<br>ses<br>lating<br>s<br>urvey research<br>ivery and messeng |                                   | RAD radio airtime and product<br>RFD returned contributions<br>SAL campaign workers' salarie<br>TEL t.v. or cable airtime and p<br>TRC candidate travel, lodging,<br>TRS staff/spouse travel, lodgin<br>TSF transfer between committ<br>VOT voter registration<br>WEB information technology c | es<br>roduction costs<br>, and meals<br>ng, and meals<br>tees of the same c |             |  |
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  |   | CODE   | OR                                | DESCRIPTION OF PAYMENT   |   | AMOUNT PAID |  |
| The Strategy Group, Inc.   |   | IND  | LIT, Sheila Kueh                  | 1, Support   |   | \$7,847.71  |  |
| The Strategy Group, Inc.   |   | IND  | CNS, Sheila Kueh                  | l, Support   |   | \$7,333.33  |  |
| Three Point Media, LLC   |   | IND  | TEL, Sheila Kueh                  | l, Support   |   | \$23,543.44 |  |
| Payments that are contributions or independent expend  | litures must also be summar   | ized on Schedul  | e D.                              | SU   | JBTOTAL   | \$38,724.48 |  |
| Schedule E Summary I. Itemized payments made this period. (Include all Sch   |   |  |                                   |  |   |             |  |
| 2. Unitemized payments made this period of under \$10  |   |  |                                   |  |   | \$140.00    |  |
| <ol><li>Total interest paid this period on loans. (Enter amour</li></ol>   |   |  |                                   |  |   | \$0.00      |  |
| 4. Total payments made this period. (Add Lines 1, 2, ar  | d 3. Enter here and on the S  | Summary Page,  | Column A, Line 6.)                | TO   | <b>TAL</b> \$1  | ,250,131.60 |  |

| Schedule E   | Туре   | e or print in ink.                  | SCHEDU  |  |  |  |  |
|--|--|-------------------------------------|---|--|--|--|--|
| Payments Made  |  | ts may be rounded<br>whole dollars. | Statement covers period   | CALIFORNIA 460   |  |  |  |
|  |  |                                     | from 10/1/2014<br>through 10/18/2014  | FORM         FOO           Page         34 of         76   |  |  |  |
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Coalitio<br>Organizations for Sheila Kuehl for Supervisor 2014  | of Working Men and Women, Nu   | rses, Teachers, Firefighters        | and Public Safety Officers  | I.D. NUMBER<br>1371649   |  |  |  |
| CODES: If one of the following codes accurately de   | cribes the payment, you m  | ay enter the code. Otherw           | ise, describe the payment   | t.   |  |  |  |
| CMP campaign paraphernalia/misc,<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundralsing events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MBR member communications<br>MTG meetings and appearances<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey research<br>POS postage, delivery and messer<br>PRO professional services (legal, a<br>PRT print ads |                                     | RAD radio airtime and produ<br>RFD returned contributions<br>SAL campaign workers' sala<br>TEL t.v. or cable airtime and<br>TRC candidate travel, lodgir<br>TRS staff/spouse travel, lod<br>TSF transfer between comm<br>VOT voter registration<br>WEB Information technology | aries<br>production costs<br>ng, and meals<br>ging, and meals<br>littees of the same candidate/sponsor |  |  |  |
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER 1.D. NUMBER)  | CODE   | OR D                                | ESCRIPTION OF PAYMENT   | AMOUNT PAID  |  |  |  |
| Three Point Media, LLC   | IND  | TEL, Sheila Kuehl                   | ., Support  | \$23,543.44  |  |  |  |

| * Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUB           | TOTAL | \$23,543.44    |
|--|-------|----------------|
| Schedule E Summary   |       |                |
| 1. Itemized payments made this period. (Include all Schedule E subtotals.)   |       | \$1,249,991.60 |
| 2. Unitemized payments made this period of under \$100   |       | \$140.00       |
| 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 Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) | L     | \$1,250,131.60 |

| Schedule F<br>Accrued Expenses (Unpaid Bills)  |  | Type or print in ink.<br>nounts may be rounded<br>to whole dollars. | Statement cove<br>from10/1,<br>through10/18,   | /2014 <b>FO</b>  |  |  |  |
|--|--|---|--|--|--|--|--|
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Co<br>Organizations for Sheila Kuehl for Supervisor 2014  | alition of Working Men and Women,  | , Nurses, Teachers, Firefig   | ghters and Public Safety   | Officers 137164  |  |  |  |
| CODES: If one of the following codes accurate  | ely describes the payment, you   | u may enter the code. O   | therwise, describe the   | e payment.   |  |  |  |
| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MBR member communication<br>MTG meetings and appearant<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey reseat<br>POS postage, delivery and me<br>PRO professional services (le | ces<br>rch<br>essenger services                                     | RFD returned<br>SAL campaign<br>TEL t.v. or cab<br>TRC candidate<br>TRS staff/spou<br>TSF transfer b<br>VOT voter regi | RAD radio airtime and production costs<br>RFD returned contributions<br>SAL campaign workers' salaries<br>TEL t.v. or cable airtime and production costs<br>TRC candidate travel, lodging, and meals<br>TRS staff/spouse travel, lodging, and meals<br>TSF transfer between committees of the same candidate/sponse<br>VOT voter registration<br>WEB information technology costs (Internet, e-mail) |  |  |  |
| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)   | CODE OR DESCRIPTION OF<br>PAYMENT  | (a)<br>OUTSTANDING BALANCE<br>BEGINNING OF THIS<br>PERIOD           | (b)<br>AMOUNT INCURRED<br>THIS PERIOD  | (c)<br>AMOUNT PAID THIS<br>PERIOD<br>(ALSO REPORT ON E)  | (d)<br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD |  |  |
| David Binder Research  | IND, POL, Sheila<br>Kuehl, Support   | \$52,118.00   | \$0.00   | \$52,118.00  | \$0.00   |  |  |
| The Card Service Center  | IND, Field Program,<br>Sheila Kuehl,<br>Support  | \$0.00  | \$2,198.16   | \$0.00   | \$2,198.16   |  |  |
| The Card Service Center  | IND, Field Program,<br>Sheila Kuehl,<br>Support  | \$0.00  | \$1,575.00   | \$0.00   | \$1,575.00   |  |  |
| Payments that are contributions or independent expenditures must also be<br>unmarized on Schedule D.   | SUBTOTALS  | \$52,118.00   | \$3,773.16   | \$52,118.00  | \$3,773.16   |  |  |
| Schedule F Summary   |  |   |  |  |  |  |  |
| <ol> <li>Total accrued expenses incurred this period. (Include a<br/>accrued expenses of \$100 or more, plus total unitemized</li> </ol>   |  |   |  | CURRED TOTALS  | \$296,563.39   |  |  |
| 2. Total accrued expenses paid this period. (Include all So<br>accrued expenses of \$100 or more, plus total unitemized  | chedule F, Column (c) subtotals for p<br>payments on accrued expenses und  | eyments on<br>ler \$100.)   |  | PAID TOTALS  | \$278,278.28   |  |  |
| 3. Net change this period. (Subtract Line 2 from Line 1. En<br>and on the Summary Page, Column A, Line 9.)   | nter the difference here   |   |  | NET  | \$18,285.11<br>(May be a negative number)                |  |  |

| Schedule F   |  |  |   | 5   | SCHEDULE F           |       |  |
|--|--|--|---|---|----------------------|-------|--|
| Accrued Expenses (Unpaid Bills)  |  |  |   | /2014   | ALIFO<br>FORI<br>age |       | <b>460</b>                                     |
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Co<br>Organizations for Sheila Kuehl for Supervisor 2014  | alition of Working Men and Women,  | , Nurses, Teachers, Firefi   | ghters and Public Safet                                 |   | NUMBER               |       |  |
| CODES: If one of the following codes accurate  | ely describes the payment, you   | u may enter the code. O  | therwise, describe the                                  | e payment.                                    |                      |       |  |
| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | RFD returned<br>SAL campaign<br>TEL t.v. or cat<br>TRC candidat<br>TRS staff/spor<br>TSF transfer b<br>VOT voter reg | n workers' salaries<br>ole airtime and prod<br>e travel, lodging, ar<br>use travel, lodging,<br>petween committees | luction costs<br>and meals<br>and meals<br>s of the sam | ne candid                                     | ate/sponsor          |       |  |
| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)   | CODE OR DESCRIPTION OF<br>PAYMENT  | (8)<br>OUTSTANDING BALANCE<br>BEGINNING OF THIS<br>PERIOD  | (b)<br>AMOUNT INCURRED<br>THIS PERIOD                   | (c)<br>AMOUNT PAID<br>PERIOD<br>(ALSO REPORT) |                      | BALAN | (d)<br>ISTANDING<br>ICE AT CLOSE<br>HIS PERIOD |
| The Strategy Group, Inc.   | IND, POS, Sheila<br>Kuehl, Support   | \$34,707.69  | \$0.00  | \$34,7  | 07.69                |       | \$0.00   |
| The Strategy Group, Inc.   | IND, LIT, Sheila<br>Kuehl, Support   | \$45,738.11  | \$0.00  | \$45,7  | 38.11                |       | \$0.00   |
| The Strategy Group, Inc.   | IND, POS, Sheila<br>Kuehl, Support   | \$4,827.68   | \$0.00  | \$4,8   | 27.68                |       | \$0.00   |
| *Payments that are contributions or independent expenditures must also be<br>summarized on Schedule D.   | SUBTOTALS  | \$85,273.48  | \$0.00  | \$85,2  | 73.48                |       | \$0.00   |
| Schedule F Summary 1. Total accrued expenses incurred this period. (Include a accrued expenses of \$100 or more, plus total unitemized   |  |  | in  | CURRED TOTA                                   | LS                   | \$29  | 6,563.39                                       |
| 2. Total accrued expenses paid this period. (Include all Se accrued expenses of \$100 or more, plus total unitemized   | chedule F, Column (c) subtotals for p  | ayments on   |   | ΡΑΙΟ ΤΟΤΑ                                     | LS                   | \$27  | 8,278.28                                       |
| 3. Net change this period. (Subtract Line 2 from Line 1. E and on the Summary Page, Column A, Line 9.)   |  |  |   | NE  |                      |       | 8,285.11<br>alive number)                      |

· ----

|  |  | Type or print in ink                                      |                                       |   | SCHEDULE F   |
|--|--|---|---------------------------------------|---|--|
| Schedule F<br>Accrued Expenses (Unpaid Bills)  | Type or print in ink.<br>Amounts may be rounded<br>to whole dollars.   |   |                                       | /2014<br>CALIFO<br>FOR<br>Page  |  |
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Co<br>Organizations for Sheila Kuehl for Supervisor 2014  | valition of Working Men and Women,   | Nurses, Teachers, Firefic                                 | ghters and Public Safety              | I.D. NUMBER<br>Officers 1371649   | R  |
| CODES: If one of the following codes accurate  | ely describes the payment, you   | u may enter the code. O                                   | therwise, describe the                | e payment.  |  |
| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MBR member communications<br>MTG meetings and appearances<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey research<br>POS postage, delivery and messenger services<br>PRO professional services (legal, accounting)<br>PRT print ads |   |                                       | ime and production costs<br>contributions<br>workers' salarles<br>ble airtime and production costs<br>travel, lodging, and meals<br>use travel, lodging, and meals<br>tetween committees of the sa<br>istration<br>ion technology costs (Internet | s<br>me candidate/sponsor                                |
| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)   | CODE OR DESCRIPTION OF<br>PAYMENT  | (a)<br>OUTSTANDING BALANCE<br>BEGINNING OF THIS<br>PERIOD | (b)<br>AMOUNT INCURRED<br>THIS PERIOD | (c)<br>AMOUNT PAID THIS<br>PERIOD<br>(ALSO REPORT ON E)   | (d)<br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD |
| The Strategy Group, Inc.   | IND, LIT, Sheila<br>Kuehl, Support   | \$6,567.87  | \$0.00                                | \$6,567.87  | \$0.00   |
| The Strategy Group, Inc.   | IND, POS, Sheila<br>Kuehl, Support   | \$4,827.68  | \$0.00                                | \$4,827.68  | \$0.00   |
| The Strategy Group, Inc.   | IND, LIT, Sheila<br>Kuehl, Support   | \$6,567.87  | \$0.00                                | \$6,567.87  | \$0.00   |
| *Payments that are contributions or independent expenditures must also be summarized on Schedule D.  | SUBTOTALS  | \$17,963.42   | \$0.00                                | \$17,963.42   | \$0.00   |
| Schedule F Summary<br>1. Total accrued expenses incurred this period. (Include a<br>accrued expenses of \$100 or more, plus total uniternized  | all Schedule F, Column (b) subtotals   | for<br>ler \$100.)  |                                       | CURRED TOTALS   | \$296,563.39   |
| 2. Total accrued expenses paid this period. (Include all S accrued expenses of \$100 or more, plus total unitemized  | chedule F, Column (c) subtotals for p  | payments on   |                                       | PAID TOTALS   | \$278,278.28   |
| 3. Net change this period. (Subtract Line 2 from Line 1. E and on the Summary Page, Column A, Line 9.)   | inter the difference here  |   |                                       | NET   | \$18,285.11  |

| Cabadula C   |   | Type or print in ink.                                     |   |  |   | s          | CHEDULE F                                     |
|--|---|---|---|--|---|------------|---|
| Schedule F<br>Accrued Expenses (Unpaid Bills)  |   | to whole doilars.   | Statement cover<br>from 10/1<br>through 10/18   | /2014  | CALIFO<br>FOR<br>Page   |            | <b>460</b>                                    |
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Co<br>Organizations for Sheila Kuehl for Supervisor 2014  | alition of Working Men and Women,   | Nurses, Teachers, Firefiq                                 |   | 1  | D. NUMBER   |            |   |
| CODES: If one of the following codes accurate  | ely describes the payment, you  | u may enter the code. O                                   | therwise, describe th   | e payment.   |   |            |   |
| CMP campaign paraphernalla/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MBR member communication<br>MTG meetings and appearance<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey resear<br>POS postage, delivery and me<br>PRO professional services (lep<br>PRT print ads | ces<br>rch<br>essenger services                           | RFD returned<br>SAL campaign<br>TEL t.v. or cat<br>TRC candidat<br>TRS staff/spor<br>TSF transferb<br>VOT voter reg | n workers' salarie<br>ble airtime and pr<br>e travel, lodging,<br>use travel, lodgin<br>between committe | es<br>roduction cos<br>and meals<br>ig, and meals<br>ees of the sar | ne candida | ite/sponsor                                   |
| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)   | CODE OR DESCRIPTION OF<br>PAYMENT   | (a)<br>OUTSTANDING BALANCE<br>BEGINNING OF THIS<br>PERIOD | (b)<br>AMOUNT INCURRED<br>THIS PERIOD   | (c)<br>AMOUNT PA<br>PERIC<br>(ALSO REPOR   | DD  | BALAN      | (d)<br>ISTANDING<br>CE AT CLOSE<br>HIS PERIOD |
| The Strategy Group, Inc.   | IND, LIT, Sheila<br>Kuehl, Support  | \$41,128.81   | \$0.00  | \$41,  | 128.81  |            | \$0.00  |
| The Strategy Group, Inc.   | IND, POS, Sheila<br>Kuehl, Support  | \$34,707.69   | \$0.00  | \$34,  | 707.69  |            | \$0.00  |
| The Strategy Group, Inc.   | IND, LIT, Sheila<br>Kuehl, Support  | \$0.00  | \$41,128.81   |  | \$0.00  | \$41       | 1,128.81                                      |
| *Payments that are contributions or independent expenditures must also be<br>summarized on Schedule D.   | SUBTOTALS   | \$75,836.50   | \$41,128.81   | \$75,  | 836.50  | \$4        | 1,128.81                                      |
| Schedule F Summary<br>1. Total accrued expenses incurred this period. (Include a<br>accrued expenses of \$100 or more, plus total uniternized  | ill Schedule F, Column (b) subtotals payments on accrued expenses und   | for<br>ler \$100.)  | IN  | CURRED TOT   | TALS  | \$296      | 5,563.39                                      |
| 2. Total accrued expenses paid this period. (Include all So accrued expenses of \$100 or more, plus total unitemized   | chedule F, Column (c) subtotals for p<br>payments on accrued expenses und   | eayments on<br>ler \$100.)                                |   |  | TALS  | \$278      | 3,278.28                                      |
| 3. Net change this period. (Subtract Line 2 from Line 1. E and on the Summary Page, Column A, Line 9.)   |   |   |   | 1  | NET   |            | 3,285.11<br>ative number)                     |

| Schedule F   |  | Type or print in ink.  |                                       |   | SCHEDULE F   |  |
|--|--|--|---------------------------------------|---|--|--|
|  | Amounts may be rounded   |  |                                       | ers period CALIFO                                       | RNIA ACO   |  |
| Accrued Expenses (Unpaid Bills)  |  | to whole dollars.  | 10/1                                  | FOR   |  |  |
|  |  |  | 10/10                                 | 72014 Baga  | 39 of 76   |  |
|  |  |  | through 10/18                         | /2014   |  |  |
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Co<br>Organizations for Sheila Kuehl for Supervisor 2014  | oalition of Working Men and Women,   | , Nurses, Teachers, Firefig  | ghters and Public Safety              | Officers 1371649  |  |  |
| CODES: If one of the following codes accurat   | ely describes the payment, you   | u may enter the code. O  | therwise, describe the                | e payment.  |  |  |
| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mallings | MTG meetings and appearant<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey resea<br>POS postage, delivery and me | PET petition circulatingTEL t.v. or cable airtime and productionPHO phone banksTRC candidate travel, lodging, and meanPOL polling and survey researchTRS staff/spouse travel, lodging, and meanPOS postage, delivery and messenger servicesTSF transfer between committees of thePRO professional services (legal, accounting)VOT voter registration |                                       |   |  |  |
| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)   | CODE OR DESCRIPTION OF<br>PAYMENT  | (a)<br>OUTSTANDING BALANCE<br>BEGINNING OF THIS<br>PERIOD  | (b)<br>AMOUNT INCURRED<br>THIS PERIOD | (c)<br>AMOUNT PAID THIS<br>PERIOD<br>(ALSO REPORT ON E) | (d)<br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD |  |
| The Strategy Group, Inc.   | IND, POS, Sheila<br>Kuehl, Support   | \$0.00   | \$34,707.69                           | \$0.00  | \$34,707.69  |  |
| The Strategy Group, Inc.   | MBR  | \$0.00   | \$1,726.63                            | \$0.00  | \$1,726.63   |  |
| The Strategy Group, Inc.   | MBR  | \$0.00   | \$3,915.25                            | \$0.00  | \$3,915.25   |  |
| *Payments that are contributions or independent expenditures must also be  | SUBTOTALS  | \$0.00   | \$40,349.57                           | ¢0.00   | <u> </u>   |  |
| summarized on Schedule D,  | 308101AL3  | \$0.00   | \$40,349.57                           | \$0.00  | \$40,349.57  |  |
| Schedule F Summary   |  |  |                                       |   |  |  |
| 1. Total accrued expenses incurred this period. (Include a accrued expenses of \$100 or more, plus total unitemized  |  |  | IN                                    | CURRED TOTALS   | \$296,563.39   |  |
| 2. Total accrued expenses paid this period. (Include all S accrued expenses of \$100 or more, plus total unitemized  |  |  |                                       | PAID TOTALS   | \$278,278.28   |  |
| 3. Net change this period. (Subtract Line 2 from Line 1. E and on the Summary Page, Column A, Line 9.)   | Inter the difference here  |  |                                       | NET   | \$18,285.11  |  |
| ,  |  |  |                                       | (M  | ay be a negative number)                                 |  |

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| Only data E  |  | Type or print in ink.                                     |                                       |  |   | sc                      | HEDULE F                                 |
|--|--|---|---------------------------------------|--|---|-------------------------|--|
| Schedule F<br>Accrued Expenses (Unpaid Bills)  | Amounts may be rounded to whole dollars.   |   |                                       | /2014  | ALIFOR<br>FORM  |                         | <b>460</b>                               |
|  |  |   | through 10/18                         | 572014                                       |   |                         |  |
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Co<br>Organizations for Sheila Kuehl for Supervisor 2014  | alition of Working Men and Women,  | Nurses, Teachers, Firefig                                 | hters and Public Safet                |  | NUMBER  |                         |  |
| CODES: If one of the following codes accurate  | ely describes the payment, you   | u may enter the code. Of                                  | herwise, describe th                  | e payment.                                   |   |                         |  |
| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MBR<br>member communicationsRAD<br>radio airtime and productionMTG<br>meetings and appearancesRFD<br>returned contributionsOFC<br>office expensesSAL<br>campaign workers' salariesPET<br>petition circulatingTEL<br>t.v. or cable airtime and productPHO<br>phone banksTRC<br>candidate travel, lodging, and<br>TRS<br>staff/spouse travel, lodging, and<br>POS<br>postage, delivery and messenger servicesPRO<br>professional services (legal, accounting)VOT<br>VOT<br>voter registrationPRT<br>print adsWEB<br>information technology costs |   |                                       |  | duction costs<br>and meals<br>and meals<br>s of the sam | ne candidate<br>e-mail) |  |
| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)   | CODE OR DESCRIPTION OF<br>PAYMENT  | (a)<br>OUTSTANDING BALANCE<br>BEGINNING OF THIS<br>PERIOD | (b)<br>AMOUNT INCURRED<br>THIS PERIOD | (C)<br>AMOUNT PAID<br>PERIOD<br>(ALSO REPORT |   | OUTS<br>BALANCE         | (d)<br>FANDING<br>E AT CLOSE<br>S PERIOD |
| The Strategy Group, Inc.   | IND, LIT, Sheila<br>Kuehl, Support   | \$0.00  | \$41,128.81                           |  | \$0.00  | \$41,                   | 128.81                                   |
| The Strategy Group, Inc.   | IND, POS, Sheila<br>Kuehl, Support   | \$0.00  | \$34,707.69                           |  | \$0.00  | \$34,                   | 707.69                                   |
| The Strategy Group, Inc.   | IND, LIT, Sheila<br>Kuehl, Support   | \$0.00  | \$17,613.26                           |  | \$0.00  | \$17,                   | 613.26                                   |
| *Payments that are contributions or independent expenditures must also be<br>summarized on Schedule D.   | SUBTOTALS  | \$0.00  | \$93,449.76                           |  | \$0.00  | \$93                    | ,449.76                                  |
| Schedule F Summary   |  |   |                                       |  |   |                         |  |
| 1. Total accrued expenses incurred this period. (Include a accrued expenses of \$100 or more, plus total unitemized  | Il Schedule F, Column (b) subtotals payments on accrued expenses und   | for<br>ler \$100.)  |                                       | CURRED TOTA                                  | LS  | \$296,                  | 563.39                                   |
| 2. Total accrued expenses paid this period. (Include all S accrued expenses of \$100 or more, plus total unitemized  | chedule F, Column (c) subtotals for p<br>payments on accrued expenses und  | payments on<br>ler \$100.)                                |                                       | PAID TOTA                                    | LS  | \$278,                  | 278.28                                   |
| 3. Net change this period. (Subtract Line 2 from Line 1. E<br>and on the Summary Page, Column A, Line 9.)  |  |   |                                       | NE   |   |                         | 285.11                                   |
|  |  |   |                                       |  | (Ma   | ay be a negativ         | /e number)                               |

|  |  | Type or print in ink.                                       |  |  |  | SCHEDULE  |
|--|--|---|--|--|--|---|
| Schedule F<br>Accrued Expenses (Unpaid Bills)  | Am   | Statement cover<br>from <u>10/1</u><br>through <u>10/18</u> | /2014  | CALIFO<br>FORI<br>Page   |  |   |
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Co<br>Organizations for Sheila Kuehl for Supervisor 2014  | alition of Working Men and Women,  | Nurses, Teachers, Firefig                                   | hters and Public Safety  | y Officers   | I.D. NUMBER<br>1371649   |   |
| CODES: If one of the following codes accurate  | ely describes the payment, you   | u may enter the code. Ot                                    | herwise, describe the  | e payment.   |  |   |
| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MBR member communications<br>MTG meetings and appearance<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey resear<br>POS postage, delivery and me<br>PRO professional services (leg<br>PRT print ads | rch<br>essenger services                                    | RFD returned<br>SAL campaign<br>TEL t.v. or cat<br>TRC candidat<br>TRS staff/spor<br>TSF transfer b<br>VOT voter reg | n workers' salari<br>ble airtime and p<br>e travel, lodging<br>use travel, lodgi<br>between commit | es<br>production cost<br>, and meals<br>ng, and meals<br>tees of the sam | ne candidate/sponsor                                    |
| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)   | CODE OR DESCRIPTION OF<br>PAYMENT  | (a)<br>OUTSTANDING BALANCE<br>BEGINNING OF THIS<br>PERIOD   | (b)<br>AMOUNT INCURRED<br>THIS PERIOD  | (c)<br>AMOUNT P<br>PERI<br>(ALSO REPO  | AID THIS<br>IOD  | (d)<br>OUTSTANDING<br>BALANCE AT CLOS<br>OF THIS PERIOD |
| The Strategy Group, Inc.   | IND, POS, Sheila<br>Kuehl, Support   | \$0.00  | \$11,098.60  |  | \$0.00   | \$11,098.6  |
| The Strategy Group, Inc.   | IND, LIT, Sheila<br>Kuehl, Support   | \$0.00  | \$7,847.71   |  | \$0.00   | \$7,847.7   |
| The Strategy Group, Inc.   | IND, POS, Sheila<br>Kuehl, Support   | \$0.00  | \$4,814.26   |  | \$0.00   | \$4,814.2   |
| Payments that are contributions or independent expenditures must also be<br>summarized on Schedule D.  | SUBTOTALS  | \$0.00  | \$23,760.57  |  | \$0.00   | \$23,760.   |
| Schedule F Summary<br>1. Total accrued expenses incurred this period. (Include a<br>accrued expenses of \$100 or more, plus total unitemized   | payments on accrued expenses und   | ler \$100.)   | IN   | CURRED TO  | TALS   | \$296,563.3   |
| <ol> <li>Total accrued expenses paid this period. (Include all So<br/>accrued expenses of \$100 or more, plus total uniternized</li> <li>Net change this period. (Subtract Line 2 from Line 1. E</li> </ol>  | payments on accrued expenses und   | ler \$100.)   |  | PAID TO  |  | \$278,278.2   |
| and on the Summary Page, Column A, Line 9.)  |  |   |  |  | NET  | \$18,285.1<br>ay be a negative number)                  |

| Schedule F  |   | Type or print in ink.  |   |   |                | S           | CHEDULE F                                    |
|---|---|--|---|---|----------------|-------------|--|
|   |   |  |   | cA CA   | LIFOR          | NIA         | 460  |
| Accrued Expenses (Unpaid Bills)   |   |  | from 10/1   | /2014   | FORM           |             | 400  |
|   |   |  | $\frac{\text{from } 10/1}{\text{through } 10/18}$ | /2014 Pag   | <b>je</b> 4    | 2 <b>of</b> | 76   |
|   |   |  | through 10710                                     |   |                |             |  |
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Co.<br>Organizations for Sheila Kuehl for Supervisor 2014  | alition of Working Men and Women  | , Nurses, Teachers, Firefig  | hters and Public Safety                           |   | IUMBER<br>1649 |             |  |
| CODES: If one of the following codes accurate   | ely describes the payment, you  | u may enter the code. O  | therwise, describe the                            | e payment.  |                |             |  |
| CMP campaign paraphemalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MBR member communication<br>MTG meetings and appearant<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey resea<br>POS postage, delivery and m<br>PRO professional services (le<br>PRT print ads | RAD radio airtime and production costs<br>RFD returned contributions<br>SAL campaign workers' salaries<br>TEL t.v. or cable airtime and production costs<br>TRC candidate travel, lodging, and meals<br>TRS staff/spouse travel, lodging, and meals<br>TSF transfer between committees of the sam<br>VOT voter registration<br>WEB information technology costs (Internet, |   |   | e candida      |             |  |
| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  | CODE OR DESCRIPTION OF<br>PAYMENT   | (a)<br>OUTSTANDING BALANCE<br>BEGINNING OF THIS<br>PERIOD  | (b)<br>AMOUNT INCURRED<br>THIS PERIOD             | (C)<br>AMOUNT PAID T<br>PERIOD<br>(ALSO REPORT ON |                | BALAN       | (d)<br>STANDING<br>CE AT CLOSE<br>HIS PERIOD |
| The Strategy Group, Inc.  | IND, LIT, Sheila<br>Kuehl, Support  | \$0.00   | \$7,847.71  | \$1   | 0.00           | \$7         | ,847.71                                      |
| The Strategy Group, Inc.  | IND, POS, Sheila<br>Kuehl, Support  | \$0.00   | \$4,814.26  | Ş   | 0.00           | \$4         | ,814.26                                      |
| The Strategy Group, Inc.  | IND, LIT, Sheila<br>Kuehl, Support  | \$0.00   | \$41,128.81                                       | ş   | 0.00           | \$41        | ,128.81                                      |
| *Payments that are contributions or independent expenditures must also be summarized on Schedule D.   | SUBTOTALS   | \$0.00   | \$53,790.78                                       | \$  | 0.00           | \$5         | 3,790.78                                     |
| Schedule F Summary  |   |  |   |   |                |             |  |
| 1. Total accrued expenses incurred this period. (Include a accrued expenses of \$100 or more, plus total unitemized   | Il Schedule F, Column (b) subtotals payments on accrued expenses und  | for<br>ler \$100.)   | in  | CURRED TOTAL                                      | s              | \$296       | 5,563.39                                     |
| 2. Total accrued expenses paid this period. (Include all So accrued expenses of \$100 or more, plus total unitemized  | chedule F, Column (c) subtotals for p<br>payments on accrued expenses und   | payments on<br>der \$100.)   |   | PAID TOTAL  | s              | \$278       | 8,278.28                                     |
| 3. Net change this period. (Subtract Line 2 from Line 1. En and on the Summary Page, Column A, Line 9.)   | nter the difference here  |  |   | NET   |                |             | ,285.11                                      |

(May be a negative number)

FPPC Form 460 (January/05) FPPC Toll-Free Heipline: 866/ASK-FPPC (666/275-3772)

| <b>. .</b>   |  | Type or print in ink.                                     |   |  | SCHEDULE F   |
|--|--|---|---|--|--|
| Schedule F<br>Accrued Expenses (Unpaid Bills)  | Amounts may be rounded<br>to whole dollars.  |   | Statement cove<br>from <u>10/1</u><br>through 10/18   | /2014 FOR  |  |
| VAME OF FILER<br>Local Experience We Trust for our Communities - A Co<br>Drganizations for Sheila Kuehl for Supervisor 2014  | alition of Working Men and Women,  | Nurses, Teachers, Firefig                                 |   | I.D. NUMBER  |  |
| CODES: If one of the following codes accurate  | ely describes the payment, you   | u may enter the code. Of                                  | therwise, describe the  | e payment.   |  |
| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MBR member communications<br>MTG meetings and appearance<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey resear<br>POS postage, delivery and me<br>PRO professional services (leg<br>PRT print ads | ces<br>rch<br>essenger services                           | RFD returned<br>SAL campaign<br>TEL t.v. or cat<br>TRC candidate<br>TRS staff/spor<br>TSF transfer b<br>VOT voter reg | n workers' salaries<br>ole airtime and production co-<br>e travel, lodging, and meals<br>use travet, lodging, and meal<br>between committees of the sa | s<br>ime candidate/sponsor                               |
| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)   | CODE OR DESCRIPTION OF<br>PAYMENT  | (a)<br>OUTSTANDING BALANCE<br>BEGINNING OF THIS<br>PERIOD | (b)<br>AMOUNT INCURRED<br>THIS PERIOD   | (G)<br>AMOUNT PAID THIS<br>PERIOD<br>(ALSO REPORT ON E)  | (d)<br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD |
| The Strategy Group, Inc.   | IND, POS, Sheila<br>Kuehl, Support   | \$0.00  | \$34,707.69   | \$0.00   | \$34,707.69  |
| Three Point Media, LLC   | IND, TEL, Sheila<br>Kuehl, Support   | \$70,630.32   | \$0.00  | \$47,086.88  | \$23,543.44  |
| Three Point Media, LLC   | IND, TEL, Sheila<br>Kuehl, Support   | \$0.00  | \$5,603.05  | \$0.00   | \$5,603.05   |
| "Payments that are contributions or independent expenditures must also be<br>summarized on Schedule D.   | SUBTOTALS  | \$70,630.32   | \$40,310.74   | \$47,086.88  | \$63,854.18  |
| Schedule F Summary<br>1. Total accrued expenses incurred this period. (Include a<br>accrued expenses of \$100 or more, plus total uniternized  | ill Schedule F, Column (b) subtotals payments on accrued expenses und  | for<br>ler \$100.)  | IN  | CURRED TOTALS  | \$296,563.39   |
| <ol><li>Total accrued expenses paid this period. (Include all S<br/>accrued expenses of \$100 or more, plus total uniternized</li></ol>  | chedule F, Column (c) subtotals for p<br>payments on accrued expenses und  | eayments on<br>ler \$100.)                                |   | PAID TOTALS  | \$278,278.28   |
| 3. Net change this period. (Subtract Line 2 from Line 1. E and on the Summary Page, Column A, Line 9.)   | nter the difference here   |   |   | NET  | \$18,285.11<br>May be a negative number)                 |

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FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 666/ASK-FPPC (866/275-3772)

| Schedule G  | Type or print in ink.                       |                                       |          | 5           | SCHEDU | JLE G |
|---|---|---------------------------------------|----------|-------------|--------|-------|
| Payments Made by an Agent or Independent  | Amounts may be rounded<br>to whole dollars. | Statement covers period               | CALI     | FORNIA      | 46     | 0     |
| Contractor (on Behalf of This Committee)  |   | from 10/1/2014                        |          | ORM         |        |       |
|   |   | through 10/18/2014                    | Page     | <u>44</u> o | f      | 6     |
| NAME OF FILER   |   | · · · · · · · · · · · · · · · · · · · | I.D. NUM | BER         |        |       |
| Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649 |   |                                       |          |             |        |       |
| NAME OF AGENT OR INDEPENDENT CONTRACTOR   |   |                                       |          |             |        |       |

| CMP   | campaign paraphernalia/misc.        | MBR m   |
|-------|-------------------------------------|---------|
| CNS   | campaign consultants                | MTG m   |
| CTB   | contribution (explain nonmonetary)* | OFC of  |
| CVC   | civic donations                     | PET pe  |
| FIL C | andidate filing/ballot fees         | PHO ph  |
| FND   | fundraising events                  | POL po  |
| IND i | ndependent expenditure              | POS po  |
| LEG   | legal defense                       | PRO pr  |
| LIT C | ampaign literature and mailings     | PRT pri |
|       |                                     |         |

IBR member communications ITG meetings and appearances IFC office expenses ET petition circulating HO phone banks OL polling and survey research OS postage, delivery and messenger services RO professional services (legal, accounting) RT print ads RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (Internet, e-mail)

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID     |
|---|---------|------------------------|-----------------|
| Asendia   | IND     | POS                    | \$3,876.93      |
| Continental Colorcraft  | IND     | LIT                    | \$13,987.<br>60 |
| Fortified Design  | IND     | LIT                    | \$1,056.00      |
| Political Data, Inc.  | IND     | Voter Data             | \$544.64        |

| Schedule G  | Type or print in ink.                       | SCHEDULE G  |                                 |  |  |  |
|---|---|---|---------------------------------|--|--|--|
| Payments Made by an Agent or Independent<br>Contractor (on Behalf of This Committee)  | Amounts may be rounded<br>to whole dollars. | Statement covers period<br>from 10/1/2014<br>through 10/18/2014 | CALIFORNIA<br>FORM460Page45of76 |  |  |  |
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Coalition of Working Men<br>Organizations for Sheila Kuehl for Supervisor 2014 | I.D. NUMBER<br>1371649                      |   |                                 |  |  |  |

| 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             | 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)           |

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

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE O | R DESCRIPT | ION OF PAYMENT | AMOUNT PAID     |
|---|--------|------------|----------------|-----------------|
| United States Postal Service  | IND    | POS        |                | \$30,830.<br>76 |
|   |        |            |                |                 |

Attach additional information on appropriately labeled continuation sheets.

TOTAL\*

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E. FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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

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SCHEDULE G

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| Contractor (on Behalf of This Committee)   | from 10/1/2014             | F0F        | < IVI       |      |
|--|----------------------------|------------|-------------|------|
|  | through 10/18/2014         | Page       | 46 <b>o</b> | f 76 |
| NAME OF FILER  |                            | I.D. NUMBE | R           |      |
| Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters | and Public Safety Officers | 1371649    | )           |      |
| Organizations for Sheila Kuehl for Supervisor 2014<br>NAME OF AGENT OR INDEPENDENT CONTRACTOR                        | AT                         |            |             |      |

The Strategy Group, Inc.

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

| CMP campaign paraphernalia/misc.        | MBR member communications                     |
|---|---|
| CNS campaign consultants                | MTG meetings and appearances                  |
| CTB contribution (explain nonmonetary)* | OFC office expenses                           |
| CVC civic donations                     | PET petition circulating                      |
| FIL candidate filing/ballot fees        | PHO phone banks                               |
| FND fundraising events                  | POL polling and survey research               |
| IND independent expenditure             | POS postage, delivery and messenger services  |
| LEG legal defense                       | PRO professional services (legal, accounting) |
| LIT campaign literature and mailings    | PRT print ads                                 |

RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (Internet, e-mail)

CALIFORNIA

Statement covers period

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| Asendia   | IND     | POS                    | \$1,172.58  |
| Asendia   | IND     | POS                    | \$3,876.93  |
| Asendia   | IND     | POS                    | \$1,172.58  |
| Asendia   | IND     | POS                    | \$1,749.26  |

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| Schedule G<br>Payments Made by an Agent or Independent<br>Contractor (on Behalf of This Committee)   | Amounts may be rounded to whole dollars. | Statement covers period              | CALIFORNIA             | 460       |
|  |  | from 10/1/2014<br>through 10/18/2014 | FORM<br>Page 47 of     |           |
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Coalition of Working Men<br>Organizations for Sheila Kuehl for Supervisor 2014<br>NAME OF AGENT OR UNDEPENDENT CONTRACTOR | and Women, Nurses, Teachers, Firefighte  | rs and Public Safety Officers        | I.D. NUMBER<br>1371649 |           |

### The Strategy Group, Inc.

## 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             | 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 OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| Asendia   | IND     | POS                    | \$1,172.58  |
| Asendia   | IND     | POS                    | \$3,876.93  |
| Asendia   | IND     | POS                    | \$1,749.26  |
| Asendia   | IND     | POS                    | \$1,749.26  |

| Schedule G   | Type or print in ink.   |                                      |            |           | SC | HEDU | LE G |
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| Payments Made by an Agent or Independent<br>Contractor (on Behalf of This Committee)   | Amounts may be rounded to whole dollars.  | Statement covers period              | CALIFORNIA |           |    | 460  |      |
|  |   | from 10/1/2014<br>through 10/18/2014 | FC<br>Page | 0RM<br>48 | of | 76   |      |
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Coalition of Working Men<br>Organizations for Sheila Kuehl for Supervisor 2014<br>NAME OF AGENT OR INDEPENDENT CONTRACTOR | orking Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers |                                      |            | BER<br>49 |    |      |      |

#### The Strategy Group, Inc.

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 POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor PRO professional services (legal, accounting) VOT voter registration LEG legal defense LIT campaign literature and mailings PRT print ads WEB information technology costs (Internet, e-mail)

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| Asendia   | IND     | POS                    | \$1,172.58  |
| Asendia   | IND     | POS                    | \$3,876.93  |
| Asendia   | IND     | POS                    | \$1,172.58  |
| Asendia   | IND     | POS                    | \$1,749.26  |

| Schedule G  | Type or print in ink.                       |                         |            |           | SC       | HEDULE | G |
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| Payments Made by an Agent or Independent<br>Contractor (on Behalf of This Committee)  | Amounts may be rounded<br>to whole dollars. | Statement covers period | CALIFORNIA |           |          | 460    |   |
|   |   | from 10/1/2014          | FO         | RM        |          | 400    |   |
| Contractor (on Benañ or This Committee)   |   | through 10/18/2014      | Page -     | 49        | _ of<br> | 76     | - |
| Local Experience We Mayot for our Communities - 3 Coslition of Working Man and Woman Numeran Manchene Einstighters and Public Safety Officers |   |                         |            | IER<br>19 |          |        | _ |
| NAME OF AGENT OR INDEPENDENT CONTRACTOR   |   |                         |            |           |          |        | - |
| The Strategy Group, Inc.  |   |                         |            |           |          |        |   |

| CMP campaign paraphernalia/misc.        | MBR member communications                     |
|---|---|
| CNS campaign consultants                | MTG meetings and appearances                  |
| CTB contribution (explain nonmonetary)* | OFC office expenses                           |
| CVC civic donations                     | PET petition circulating                      |
| FIL candidate filing/ballot fees        | PHO phone banks                               |
| FND fundraising events                  | POL polling and survey research               |
| IND independent expenditure             | POS postage, delivery and messenger services  |
| LEG legal defense                       | PRO professional services (legal, accounting) |
| LIT campaign literature and mailings    | PRT print ads                                 |

RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (Internet, e-mail)

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| Asendia   | IND     | POS                    | \$3,876.93  |
| Asendia   | IND     | POS                    | \$1,172.58  |
| BridgeAmerica, Inc.   | IND     | LIT                    | \$3,52.00   |
| BridgeAmerica, Inc.   | IND     | LIT                    | \$352.00    |

| Schedule G        |                                 |
|-------------------|---------------------------------|
| <b>Payments M</b> | lade by an Agent or Independent |
| Contractor (      | on Behalf of This Committee)    |

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to whole dollars.

SCHEDULE G

| ded |              | Stat     | 10(1(2014          | CALIF<br>FO | ORNI/<br>RM | 4  | 460 |
|-----|--------------|----------|--------------------|-------------|-------------|----|-----|
|     |              | from     | 10/1/2014          | Page        | 50          | of | 76  |
| rs, | Firefighters | and Publ | ic Safety Officers | I.D. NUMB   |             |    |     |

NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teache Organizations for Sheila Kuehl for Supervisor 2014. NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, Inc.

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 commun        |
|---|-----|----------------------|
| CNS campaign consultants                | MTG | meetings and app     |
| CTB contribution (explain nonmonetary)* | OFC | office expenses      |
| CVC civic donations                     | PET | petition circulating |
| FIL candidate filing/ballot fees        | PHO | phone banks          |
| FND fundraising events                  | POL | polling and survey   |
| IND independent expenditure             | POS | postage, delivery    |
| LEG legal defense                       | PRO | professional serv    |
| LIT campaign literature and mailings    | PRT | print ads            |
|   |     |                      |

communications and appearances irculating nd survey research delivery and messenger services onal services (legal, accounting)

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (Internet, e-mail)

...

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| BridgeAmerica, Inc.   | IND     | LIT                    | \$352.00    |
| BridgeAmerica, Inc.   | IND     | LIT                    | \$352.00    |
| BridgeAmerica, Inc.   | IND     | LIT                    | \$352.00    |
| BridgeAmerica, Inc.   | IND     | LIT                    | \$352.00    |

| Schedule G  | Type or print in ink.                    |   |            |     | SC  | HEDULE G |
|---|--|---|------------|-----|-----|----------|
|   | Amounts may be rounded to whole dollars. | Statement covers period                                     | CALIFORNIA |     | 460 |          |
| Payments Made by an Agent or Independent  | to whole dollars.                        | from 10/1/2014  |            | ORM |     | 400      |
| Contractor (on Behalf of This Committee)  |  | $\frac{\text{from } 10/172014}{\text{through } 10/18/2014}$ | Page       | 51  | of  | 76       |
|   |  | through 10/10/2011  |            |     |     |          |
| NAME OF FILER   |  |   | I.D. NUM   | BER |     |          |
| Local Experience We Trust for our Communities - A Coalition of Working Men                    | and Women, Nurses, Teachers, Firefighter | s and Public Safety Officers                                | 13716      | 49  |     |          |
| Organizations for Sheila Kuehl for Supervisor 2014<br>NAME OF AGENT OR INDEPENDENT CONTRACTOR |  |   |            |     |     |          |

The Strategy Group, Inc.

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 commonstance

   CNS campaign consultants
   MTG meetings and

   CTB contribution (explain nonmonetary)\*
   OFC office expense

   CVC civic donations
   PET petition circula

   FIL candidate filing/ballot fees
   PHO phone banks

   FND fundraising events
   POL polling and su

   IND independent expenditure
   POS postage, deliv

   LIT campaign literature and mailings
   PRT print ads
  - MBR
     member communications

     MTG
     meetings and appearances

     OFC
     office expenses

     PET
     petition circulating

     PHO
     phone banks

     POL
     polling and survey research

     POS
     postage, delivery and messenger services

     PRO
     professional services (legal, accounting)

     PRT
     mint ads

RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (Internet, e-mail)

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID     |
|---|---------|------------------------|-----------------|
| Continental Colorcraft  | IND     | LIT                    | \$2,841.70      |
| Continental Colorcraft  | IND     | LIT                    | \$13,987.<br>60 |
| Continental Colorcraft  | IND     | LIT                    | \$2,841.70      |
| Continental Colorcraft  | IND     | LIT                    | \$4,593.60      |

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| Schedule G<br>Payments Made by an Agent or Independent  | Amounts may be rounded to whole dollars. | Statement covers period                            | CALIFORNIA<br>FORM |  |      | 460    |  |
| Contractor (on Behalf of This Committee)  |  | from <u>10/1/2014</u><br>through <u>10/18/2014</u> | Deed               |  | of _ | 76     |  |
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Coalition of Working Men<br>Organizations for Sheila Kuehl for Supervisor 2014 | and Women, Nurses, Teachers, Firefight   | ers and Public Safety Officers                     | I.D. NUME          |  |      | ······ |  |
| NAME OF AGENT OR INDEPENDENT CONTRACTOR   |  |  |                    |  |      |        |  |

### The Strategy Group, Inc.

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                     | RA |
|---|---|----|
| CNS campaign consultants                | MTG meetings and appearances                  | RF |
| CTB contribution (explain nonmonetary)* | OFC office expenses                           | SA |
| CVC civic donations                     | PET petition circulating                      | TE |
| FIL candidate filing/ballot fees        | PHO phone banks                               | TR |
| FND fundraising events                  | POL polling and survey research               | TR |
| IND independent expenditure             | POS postage, delivery and messenger services  | TS |
| LEG legal defense                       | PRO professional services (legal, accounting) | VO |
| LIT campaign literature and mailings    | PRT print ads                                 | WE |
|   |   |    |

RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (Internet, e-mail)

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID     |
|---|---------|------------------------|-----------------|
| Continental Colorcraft  | IND     | LIT                    | \$2,841.70      |
| Continental Colorcraft  | IND     | LIT                    | \$14,227.<br>40 |
| Continental Colorcraft  | IND     | LIT                    | \$4,593.60      |
| Continental Colorcraft  | IND     | LIT                    | \$4,593.60      |

| Schedule G                               |
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| Payments Made by an Agent or Independent |
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| Payments Made by an Agent or Independent<br>Contractor (on Behalf of This Committee) | to whole dollars.                                | trom 10/1/2014                       | FO         |    |    | 460 |   |
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| Contractor (on Benañ or This Committee)  |  | from 10/172014<br>through 10/18/2014 | Page       | 53 | of | 76  |   |
|  |  |                                      |            |    |    |     |   |
| NAME OF FILER  |  |                                      | I.D. NUMBE | ER |    |     |   |
| Local Experience We Trust for our Communities - A Coalition of Worki                 | ng Men and Women, Nurses, Teachers, Firefighters | and Public Safety Officers           | 137164     | 9  |    |     |   |
| Organizations for Sheila Kuehl for Supervisor 2014                                   |  |                                      | 201201     |    |    |     | - |
| NAME OF AGENT OR INDEPENDENT CONTRACTOR  |  |                                      |            |    |    |     |   |

Statement covers period

The Strategy Group, Inc.

Organizations for Sheila Kuehl for Supervisor 2014 NAME OF AGENT OR INDEPENDENT CONTRACTOR

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

CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)\* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure LEG legal defense LIT campaign literature and mailings

MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads

RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (Internet, e-mail)

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| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID     |
|---|---------|------------------------|-----------------|
| Continental Colorcraft  | IND     | LIT                    | \$2,841.70      |
| Continental Colorcraft  | IND     | LIT                    | \$13,987.<br>60 |
| Continental Colorcraft  | IND     | LIT                    | \$2,841.70      |
| Continental Colorcraft  | IND     | LIT                    | \$4,593.60      |

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

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| to    | whole   | dollars.  |     |

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CALIFORNIA

FORM

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Page

I.D. NUMBER

#### NAME OF FILER

Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649 Arganizations for Shella Kuehl for Supervisor 2014 NAME OF AGENT OR INDEPENDENT CONTRACTOR

#### The Strategy Group, Inc.

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

| CMP campaign paraphemalia/misc.         | MBR member communicati     |
|---|----------------------------|
| CNS campaign consultants                | MTG meetings and appear    |
| CTB contribution (explain nonmonetary)* | OFC office expenses        |
| CVC civic donations                     | PET petition circulating   |
| FIL candidate filing/ballot fees        | PHO phone banks            |
| FND fundraising events                  | POL polling and survey res |
| IND independent expenditure             | POS postage, delivery and  |
| LEG legal defense                       | PRO professional services  |
| LIT campaign literature and mailings    | PRT print ads              |
|   |                            |

tions arances esearch d messenger services s (legal, accounting)

RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (Internet, e-mail)

Statement covers period

through 10/18/2014

from

10/1/2014

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID     |
|---|---------|------------------------|-----------------|
| Continental Colorcraft  | IND     | LIT                    | \$13,987.<br>60 |
| Continental Colorcraft  | IND     | LIT                    | \$3,541.91      |
| Fortified Design  | IND     | LIT                    | \$1,056.00      |
| Fortified Design  | IND     | LIT                    | \$1,056.00      |

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

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| Amounts may be rounded |  |
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| to whole dollars.      |  |

SCHEDULE G

| Payments Made by an Agent or Independent<br>Contractor (on Behalf of This Committee)  | to whole dollars.                             | from 10/1/2014      | FORM                |    |     | 460 |  |
|---|---|---------------------|---------------------|----|-----|-----|--|
| Contractor (on Benañ or This Committee)   |   | through 10/18/2014  | Page _              | 55 | _of | 76  |  |
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Coalition of Working M<br>Organizations for Sheila Kuehl for Supervisor 2014 | ien and Women, Nurses, Teachers, Firefighters | and public Cofeture | I.D. NUMB<br>137164 |    |     |     |  |

Statement covers period

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, Inc.

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

| CMP campaign paraphernalia/misc.        |
|---|
| CNS campaign consultants                |
| CTB contribution (explain nonmonetary)* |
| CVC civic donations                     |
| FIL candidate filing/ballot fees        |
| FND fundraising events                  |
| IND independent expenditure             |
| LEG legal defense                       |
| LIT campaign literature and mailings    |

MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads

RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (Internet, e-mail)

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| Fortified Design  | IND     | LIT                    | \$1,056.00  |
| Fortified Design  | IND     | LIT                    | \$1,056.00  |
| Fortified Design  | IND     | LIT                    | \$1,056.00  |
| Fortified Design  | IND     | LIT                    | \$1,056.00  |

| Schedule G<br>Payments Made by an Agent or Independent<br>Contractor (on Behalf of This Committee)   | Type or print in ink.<br>Amounts may be rounded<br>to whole dollars. | Statement covers period<br>from 10/1/2014<br>through 10/18/2014 | CALIF<br>FO         | ORNI<br>RM<br>56 | HEDUL<br>46(<br>76 | 1 |
|--|--|---|---------------------|------------------|--------------------|---|
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers<br>Organizations for Sheila Kuehl for Supervisor 2014 |  |   | 1.D. NUMB<br>137164 |                  |                    |   |
| NAME OF AGENT OR INDEPENDENT CONTRACTOR<br>The Strategy Group, Inc.  |  |   |                     |                  |                    |   |

| CMP campaign paraphernalia/misc.        | MBR |
|---|-----|
| CNS campaign consultants                | MTG |
| CTB contribution (explain nonmonetary)* | OFC |
| CVC civic donations                     | PET |
| FIL candidate filing/ballot fees        | PHO |
| FND fundraising events                  | POL |
| IND independent expenditure             | POS |
| LEG legal defense                       | PRO |
| LIT campaign literature and mailings    | PRT |
|   |     |

BR member communications TG meetings and appearances FC office expenses ET petition circulating HO phone banks DL polling and survey research DS postage, delivery and messenger services RO professional services (legal, accounting) RT print ads RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (Internet, e-mail)

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| Fortified Design  | IND     | LIT                    | \$1,056.00  |
| Fortified Design  | IND     | LIT                    | \$1,056.00  |
| Fortified Design  | IND     | LIT                    | \$1,056.00  |
| Fortified Design  | IND     | LIT                    | \$1,056.00  |

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

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SCHEDULE G

| State   | Statement covers period |      |    |     | 460 |
|---------|-------------------------|------|----|-----|-----|
| from    | 10/1/2014               |      |    |     |     |
| through | 10/18/2014              | Page | 57 | _of | 76  |

NAME OF FILER

I.D. NUMBER Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649 Organizations for Sheila Kuehl for Supervisor 2014

NAME OF AGENT OR INDEPENDENT CONTRACTOR The Strategy Group, Inc.

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

CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)\* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure LEG legal defense LIT campaign literature and mailings

MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads

RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (Internet, e-mail)

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| HP Associates   | IND     | LIT                    | \$1,056.00  |
| HP Associates   | IND     | LIT                    | \$1,056.00  |
| HP Associates   | IND     | LIT                    | \$1,056.00  |
| HP Associates   | IND     | LIT                    | \$1,056.00  |

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

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| Payments Made by an Agent or Independent  | Amounts may be rounded<br>to whole dollars. | Statement covers period              | CALIFORNIA<br>FORM |    |    | 460 |  |
|---|---|--------------------------------------|--------------------|----|----|-----|--|
| Contractor (on Behalf of This Committee)  |   | from 10/1/2014<br>through 10/18/2014 | Page               | 58 | of | 76  |  |
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Coalition of Working Men<br>Organizations for Sheila Kuehl for Supervisor 2014 | n and Women, Nurses, Teachers, Firefighter  | s and Public Safety Officers         | 1.D. NUME          |    |    |     |  |
| NAME OF AGENT OR INDEPENDENT CONTRACTOR   |   |                                      |                    |    |    |     |  |

The Strategy Group, Inc.

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

CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)\* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure LEG legal defense LIT campaign literature and mailings

MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads

RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (Internet, e-mail)

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| Political Data, Inc.  | IND     | Voter Data             | \$403.89    |
| Political Data, Inc.  | IND     | Voter Data             | \$544.64    |
| Political Data, Inc.  | IND     | Voter Data             | \$403.89    |
| Political Data, Inc.  | IND     | Voter Dața             | \$368.49    |

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

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NAME OF FILER I.D. NUMBER Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649 Arganizations for Sheila Kuehl for Supervisor 2014 NAME OF AGENT OR INDEPENDENT CONTRACTOR

#### The Strategy Group, Inc.

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

| CMP campaign paraphernalia/misc.        |
|---|
| CNS campaign consultants                |
| CTB contribution (explain nonmonetary)* |
| CVC civic donations                     |
| FIL candidate filing/ballot fees        |
| FND fundraising events                  |
| IND independent expenditure             |
| LEG legal defense                       |
| LIT campaion literature and mailings    |

MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads

RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (Internet, e-mail)

CALIFORNIA

FORM

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Page

Statement covers period

through 10/18/2014

from

10/1/2014

SCHEDULE G

460

76

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| Political Data, Inc.  | IND     | Voter Data             | \$403.89    |
| Political Data, Inc.  | IND     | Voter Data             | \$544.64    |
| Political Data, Inc.  | IND     | Voter Data             | \$368.49    |
| Political Data, Inc.  | IND     | Voter Data             | \$368.49    |

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

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| Amounts may be rounded<br>to whole dollars.        | Statement covers period                | CALIFORNIA<br>FORM 460 |
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|  | through $\frac{10/172014}{10/18/2014}$ | Page 60 of 76          |
| king Men and Women, Nurses, Teachers, Firefighters | and Public Safety Officers             | I.D. NUMBER            |

NAME OF FILER Local Experience We Trust for our Communities - A Coalition of Work Organizations for Sheila Kuehl for Supervisor 2014 NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, Inc.

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

| CMP campaign paraphemalia/misc.         |
|---|
| CNS campaign consultants                |
| CTB contribution (explain nonmonetary)* |
| CVC civic donations                     |
| FIL candidate filing/ballot fees        |
| FND fundraising events                  |
| IND independent expenditure             |
| LEG legal defense                       |
| LIT campaign literature and mailings    |

MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads

RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (Internet, e-mail)

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| Political Data, Inc.  | IND     | Voter Data             | \$403.89    |
| Political Data, Inc.  | IND     | Voter Data             | \$544.64    |
| Political Data, Inc.  | IND     | Voter Data             | \$403.89    |
| Political Data, Inc.  | IND     | Voter Data             | \$368.49    |

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| Schedule G<br>Payments Made by an Agent or Independent   | Amounts may be rounded to whole dollars. | Statement covers period         | CALI       |           | A  | 460 |  |  |
| Contractor (on Behalf of This Committee)   |  | from 10/1/2014                  | 0          | DRM<br>61 | of | 76  |  |  |
|  |  | through 10/18/2014              |            |           |    |     |  |  |
| NAME OF FILER  |  |                                 | I.D. NUM   |           |    |     |  |  |
| Local Experience We Trust for our Communities - A Coalition of Working Men<br>Organizations for Sheila Kuehl for Supervisor 2014 | and women, Nurses, Teachers, Firerign    | ters and Public Safety Officers | 13716      | 49        |    |     |  |  |
| NAME OF AGENT OR INDEPENDENT CONTRACTOR  |  |                                 |            |           |    |     |  |  |

#### The Strategy Group, Inc.

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

| CMP campaign paraphernalia/misc.        |
|---|
| CNS campaign consultants                |
| CTB contribution (explain nonmonetary)* |
| CVC civic donations                     |
| FIL candidate filing/ballot fees        |
| FND fundraising events                  |
| IND independent expenditure             |
| LEG legal defense                       |
| LIT campaign literature and mailings    |

MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (internet, e-mail)

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CÒDE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID     |
|---|---------|------------------------|-----------------|
| Political Data, Inc.  | IND     | Voter Data             | \$544.64        |
| Political Data, Inc.  | IND     | Voter Data             | \$403.89        |
| United States Postal Service  | IND     | POS                    | \$3,641.68      |
| United States Postal Service  | IND     | POS                    | \$30,830.<br>76 |

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

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from

10/1/2014

through 10/18/2014

| SCHEDULE G |
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CALIFORNIA

FORM

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Page

NAME OF FILER Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers Organizations for Sheila Kuehl for Supervisor 2014 NAME OF AGENT OR INDEPENDENT CONTRACTOR

### The Strategy Group, Inc.

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

| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal datase | MBR member communications<br>MTG meetings and appearances<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey research<br>POS postage, delivery and messenger services<br>PBO professional services (legal accountion) | RAD radio airtime and production costs<br>RFD returned contributions<br>SAL campaign workers' salaries<br>TEL t.v. or cable airtime and production costs<br>TRC candidate travel, lodging, and meals<br>TRS staff/spouse travel, lodging, and meals<br>TSF transfer between committees of the same candidate/sponsor |
|---|--|--|
| IND independent expenditure   | 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 OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID     |
|---|---------|------------------------|-----------------|
| United States Postal Service  | IND     | POS                    | \$3,641.68      |
| United States Postal Service  | IND     | POS                    | \$9,349.26      |
| United States Postal Service  | IND     | POS                    | \$3,641.68      |
| United States Postal Service  | IND     | POS                    | \$30,830.<br>76 |

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

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76

10/1/2014 from through 10/18/2014 Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers

Statement covers period

1371649

Page

I.D. NUMBER

CALIFORNIA

FORM

63 **of** 

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Organizations for Sheila Kuehl for Supervisor 2014

The Strategy Group, Inc.

NAME OF FILER

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

CMP campaion paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)\* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure LEG legal defense LIT campaign literature and mailings

MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads

RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (Internet, e-mail)

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID     |
|---|---------|------------------------|-----------------|
| United States Postal Service  | IND     | POS                    | \$9,349.26      |
| United States Postal Service  | IND     | POS                    | \$9,349.26      |
| United States Postal Service  | IND     | POS                    | \$3,641.68      |
| United States Postal Service  | IND     | POS                    | \$30,830.<br>76 |

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

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SCHEDULE G

| Payments Made by an Agent or Independent<br>Contractor (on Behalf of This Committee)  | Amounts may be rounded to whole dollars.    | 10/1/2014                            | CALIF<br>FC        | ORN<br>DRM | A  | 46 | D |
|---|---|--------------------------------------|--------------------|------------|----|----|---|
| Contractor (on Benair of This Committee)  |   | from 10/1/2014<br>through 10/18/2014 | Page               | 64         | of | 76 | _ |
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Coalition of Working Mer<br>Organizations for Sheila Kuehl for Supervisor 2014 | n and Women, Nurses, Teachers, Firefighters | and Public Safety Officers           | I.D. NUME<br>13716 |            |    |    |   |

Organizations for Sheila Kuchl for Supervi NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Strategy Group, Inc.

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

| CMP campaign paraphernalia/misc.        |
|---|
| CNS campaign consultants                |
| CTB contribution (explain nonmonetary)* |
| CVC civic donations                     |
| FIL candidate filing/ballot fees        |
| FND fundraising events                  |
| IND independent expenditure             |
| LEG legal defense                       |
| LIT campaign literature and mailings    |

MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads

RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (internet, e-mail)

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

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE O | R DESCRIPTION OF PAYMENT | AMOUNT PAID     |
|---|--------|--------------------------|-----------------|
| United States Postal Service  | IND    | POS                      | \$3,641.68      |
| United States Postal Service  | IND    | POS                      | \$9,349.26      |
| United States Postal Service  | IND    | POS                      | \$30,830.<br>76 |
| United States Postal Service  | IND    | POS                      | \$3,641.68      |
| Attach additional information on appropriately labeled continuation sheets.     |        | TOTAL*                   | \$327,397.28    |

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

| Schedule G<br>Payments Made by an Agent or Independent<br>Contractor (on Behalf of This Committee)   | Type or print in ink.<br>Amounts may be rounded<br>to whole dollars. | Statement covers period              | CALIFORNIA 460         |  |  |
|--|--|--------------------------------------|------------------------|--|--|
| Contractor (on Behalf of This Committee)   |  | from 10/1/2014<br>through 10/18/2014 | FORM Page 65 of        |  |  |
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Coalition of Working Men<br>Organizations for Sheila Kuehl for Supervisor 2014<br>NAME OF AGENT OR INDEPENDENT CONTRACTOR | and Women, Nurses, Teachers, Firefighters                            | and Public Safety Officers           | I.D. NUMBER<br>1371649 |  |  |
| Canal Partners Media LLC   |  |                                      |                        |  |  |

CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)\* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure LEG legal defense LIT campaign literature and mailings 

 MBR
 member communications

 MTG
 meetings and appearances

 OFC
 office expenses

 PET
 petition circulating

 PHO
 phone banks

 POL
 polling and survey research

 POS
 postage, delivery and messenger services

 PRO
 professional services (legal, accounting)

 PRT
 print ads

RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (Internet, e-mail)

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID     |
|---|---------|------------------------|-----------------|
| KABC - TV   | IND     | TEL                    | \$64,260.<br>00 |
| KABC - TV   | IND     | TEL                    | \$62,815.<br>00 |
| KCAL - TV   | IND     | TEL                    | \$5,440.00      |
| KCAL - TV   | IND     | TEL                    | \$5,440.00      |

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

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| Agent or Independent<br>of This Committee)                         |  |                                      | CALIF<br>FC       | ORNI.<br>DRM | A   | 460 |   |
|--|--|--------------------------------------|-------------------|--------------|-----|-----|---|
| i mis committee)   |  | from 10/1/2014<br>through 10/18/2014 | Page              | 66           | _of | 76  | _ |
| r Communities - A Coalition of Working Men a<br>or Supervisor 2014 | und Women, Nurses, Teachers, Firefighter | s and Public Safety Officers         | I.D. NUM<br>13716 |              |     |     |   |

NAME OF FILER Local Experience We Trust for our

Organizations for Sheila Kuehl fo NAME OF AGENT OR INDEPENDENT CONTRACTOR

## Canal Partners Media LLC

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

CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)\* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure LEG legal defense LIT campaign literature and mailings

MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads

RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (Internet, e-mail)

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID     |
|---|---------|------------------------|-----------------|
| KCBS - TV   | IND     | TEL                    | \$29,580.<br>00 |
| KCBS - TV   | IND     | TEL                    | \$30,770.<br>00 |
| KNBC - TV   | IND     | TEL                    | \$28,815.<br>00 |
| KNBC - TV   | IND     | TEL                    | \$30,175.<br>00 |

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| Payments Made by an Agent or Independent  | Amounts may be rounded<br>to whole dollars. | Statement covers period    | CALIF     | ORNI | A  | 460      |
| Contractor (on Behalf of This Committee)  |   | from 10/1/2014             | FO        | RM   |    | 100      |
| Contractor (on Benañ or Tins Continutee)  |   | through 10/18/2014         | Page -    | 67   |    | 76       |
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Coalition of Working Mer | and Manage Manage Trinsfictory              | and Bublic Safatu Officana | I.D. NUMB |      |    |          |
| Organizations for Sheila Kuehl for Supervisor 2014  | and women, Nurses, Teachers, Firefighters   | and public safety officers | 137164    | 9    |    |          |
| NAME OF AGENT OR INDEPENDENT CONTRACTOR   |   |                            |           |      |    |          |
| Canal Partners Media LLC  |   |                            |           |      |    |          |

| CMP campaign paraphernalia/misc.        | MBR 1 | member    |
|---|-------|-----------|
| CNS campaign consultants                | MTG I | meetings  |
| CTB contribution (explain nonmonetary)* | OFC d | office ex |
| CVC civic donations                     | PET p | etition c |
| FIL candidate filing/ballot fees        | PHO p | phone ba  |
| FND fundraising events                  | POL p | olling ar |
| IND independent expenditure             | POS p | postage,  |
| LEG legal defense                       | PRO p | professio |
| LIT campaign literature and mailings    | PRT p | print ads |
|   |       |           |

BR member communications TG meetings and appearances FC office expenses ET petition circulating HO phone banks DL polling and survey research DS postage, delivery and messenger services RO professional services (legal, accounting) RT print ads

- RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals
- TSF transfer between committees of the same candidate/sponsor
- VOT voter registration
- WEB information technology costs (Internet, e-mail)

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID     |
|---|---------|------------------------|-----------------|
| KTLA - TV   | IND     | TEL                    | \$14,237.<br>50 |
| KTLA - TV   | IND     | TEL                    | \$14,237.<br>50 |
| KTTV - TV   | IND     | TEL                    | \$6,375.00      |
| KTTV - TV   | IND     | TEL                    | \$6,375.00      |

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

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| Payments Made by an Agent or Independent<br>Contractor (on Behalf of This Committee)      | 10/1/2014                                     |                                | CALIFORN<br>FORM | IIA | 460 |
|---|---|--------------------------------|------------------|-----|-----|
| Contractor (on Benan of This Committee)   |   | $\frac{10/172014}{10/18/2014}$ | Page 68          | of  | 76  |
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Coalition of Working ! | Men and Women. Nurses, Teachers, Firefighters | and Public Safety Officers     | I.D. NUMBER      |     |     |
| Organizations for Sheila Kuehl for Supervisor 2014  | ion and somen, survey, reachers, receigneers  | and fabile ballety officers    | 1371649          |     |     |

Organizations for Sheila Kuehl for Supervi NAME OF AGENT OR INDEPENDENT CONTRACTOR

Canal Partners Media LLC

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

CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)\* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure LEG legal defense LIT campaign literature and mailings

MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads

- RAD radio airtime and production costs
- RFD returned contributions
- SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (Internet, e-mail)

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OF | DESCRIPTION OF PAYMENT | AMOUNT PAID      |
|---|---------|------------------------|------------------|
| NCC - Cable TV System   | IND     | TEL                    | \$114,107.<br>40 |
| NCC - Cable TV System   | IND     | TEL                    | \$114,107.<br>40 |
| Three Point Media, LLC  | IND     | TEL                    | \$7,560.00       |
| Three Point Media, LLC  | IND     | TEL                    | \$640.00         |

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

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

|   | SCHEDULE | G |
|---|----------|---|
| ١ | 460      |   |

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CALIFORNIA

FORM

 Contractor (on Behalf of This Committee)
 from
 10/1/2014
 Page
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 of

 NAME OF FILER
 Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers
 I.D. NUMBER

 Organizations for Sheila Kuehl for Supervisor 2014
 NAME OF FILER
 1371649

Canal Partners Media LLC

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

CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)\* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure LEG legal defense LIT campaign literature and mailings 

 MBR
 member communications

 MTG
 meetings and appearances

 OFC
 office expenses

 PET
 petition circulating

 PHO
 phone banks

 POL
 polling and survey research

 POS
 postage, delivery and messenger services

 PRO
 professional services (legal, accounting)

 PRT
 print ads

RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (Internet, e-mail)

Statement covers period

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OF | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| Three Point Media, LLC  | IND     | TEL                    | \$3,480.00  |
| Three Point Media, LLC  | IND     | TEL                    | \$3,390.00  |
| Three Point Media, LLC  | IND     | TEL                    | \$1,675.00  |
| Three Point Media, LLC  | IND     | TEL                    | \$750.00    |

| Schedule G  | Type or print in ink.                       |                                |                      |       | SCI | HEDULE G |
|---|---|--------------------------------|----------------------|-------|-----|----------|
| Payments Made by an Agent or Independent  | Amounts may be rounded<br>to whole dollars. | Statement covers period        | CALIF                | ORNI/ | A   | 460      |
| Contractor (on Behalf of This Committee)  |   | from 10/1/2014                 | FO                   | RM    |     | 400      |
| Contractor (on Denan of This Committee)   |   | through 10/18/2014             | Page -               | 70    | _of | 76       |
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Coalition of Working Men<br>Organizations for Sheila Kuehl for Supervisor 2014 | and Women, Nurses, Teachers, Firefighte     | ers and Public Safety Officers | I.D. NUMBI<br>137164 |       |     |          |
| NAME OF AGENT OR INDEPENDENT CONTRACTOR<br>Canal Partners Media LLC   |   |                                |                      |       |     |          |

| CMP campaign paraphernalia/misc.        |  |
|---|--|
| CNS campaign consultants                |  |
| CTB contribution (explain nonmonetary)* |  |
| CVC civic donations                     |  |
| FIL candidate filing/ballot fees        |  |
| FND fundraising events                  |  |
| IND independent expenditure             |  |
| LEG legal defense                       |  |
| LIT campaign literature and mailings    |  |

MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads RAD radio airtime and production costs RFD returned contributions SAL campaign workers' sataries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (Internet, e-mail)

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID     |
|---|---------|------------------------|-----------------|
| Three Point Media, LLC  | IND     | TEL                    | \$13,424.<br>40 |
| Three Point Media, LLC  | IND     | TEL                    | \$13,424.<br>40 |
| Three Point Media, LLC  | IND     | TEL                    | \$1,579.34      |
| Three Point Media, LLC  | IND     | TEL                    | \$185.80        |

| Sahadula C   | Type or print in ink.                    |                                      |           |      | SC | HEDULE G |
|--|--|--------------------------------------|-----------|------|----|----------|
| Schedule G<br>Payments Made by an Agent or Independent<br>Contractor (on Behalf of This Committee)                               | Amounts may be rounded to whole dollars. | Statement covers period              | CALIF     | ORNI | A  | 460      |
|  |  | from 10/1/2014                       | FO        | RM   |    | 400      |
|  |  | from 10/1/2014<br>through 10/18/2014 | Page -    | 71   | of | 76       |
| NAME OF FILER  | and Marton Nurses Meashars Direfighter   | a and Bublic Safaty Officers         | I.D. NUME |      |    |          |
| Local Experience We Trust for our Communities - A Coalition of Working Men<br>Organizations for Sheila Kuehl for Supervisor 2014 | and women, Nurses, Teachers, Firerighter | s and Public Safety Officers         | 137164    | 19   |    |          |
| NAME OF AGENT OR INDEPENDENT CONTRACTOR  |  |                                      |           |      |    |          |
| Canal Partners Media LLC   |  |                                      |           |      |    |          |

CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)\* CVC civic donations FIL candidate filing/ballot fees FND fundralsing events IND independent expenditure LEG legal defense LIT campaign literature and mailings 

 MBR
 member communications

 MTG
 meetings and appearances

 OFC
 office expenses

 PET
 petition circulating

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 postage, delivery and messenger services

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 print ads

RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (Internet, e-mail)

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID     |
|---|---------|------------------------|-----------------|
| Three Point Media, LLC  | IND     | TEL                    | \$21.86         |
| Three Point Media, LLC  | IND     | TEL                    | \$2.57          |
| Three Point Media, LLC  | IND     | TEL                    | \$0.30          |
| Three Point Media, LLC  | IND     | TEL                    | \$0.04          |
| Attach additional information on appropriately labeled continuation sh          | eets.   | ΤΟΤΑΙ                  | L* \$572,868.52 |

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

Type or print in ink. Amounts may be rounded SCHEDULE G

| Payments Made by an Agent or Independent<br>Contractor (on Behalf of This Committee)   | Amounts may be rounded<br>to whole dollars. | Statement covers period<br>from $10/1/2014$<br>through $10/18/2014$ | CALIFORNIA<br>FORM<br>Page 72 or | <b>46</b> |
|--|---|---|----------------------------------|-----------|
| NAME OF FILER  |   |   | I.D. NUMBER                      |           |
| Local Experience We Trust for our Communities - A Coalition of Working Mer<br>Organizations for Sheila Kuehl for Supervisor 2014 | n and Women, Nurses, Teachers, Firefighters | and Public Safety Officers  | 1371649                          |           |
| NAME OF AGENT OR INDEPENDENT CONTRACTOR  |   |   |                                  |           |

Three Point Media, LLC

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

CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)\* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure LEG legal defense LIT campaign literature and mailings

MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads

RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (Internet, e-mail)

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

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OF | R DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|--------------------------|-------------|
| Baker Sound Studios, Inc.   | IND     | TEL                      | \$374.80    |
| Extreme Reach   | IND     | TEL                      | \$570.00    |
| Shine Creative, LLC   | IND     | TEL                      | \$2,500.00  |
| Talent Paymaster  | IND     | TEL                      | \$2,158.25  |
| Attach additional information on appropriately labeled continuation sheets.     |         | TOTAL*                   | \$5,603.05  |

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

| Schedule G<br>Payments Made by an Agent or Independent<br>Contractor (on Behalf of This Committee)   | Type or print in ink.<br>Amounts may be rounded<br>to whole dollars. | Statement covers period<br>from 10/1/2014<br>through 10/18/2014 | CALIF<br>FO<br>Page | ORNI<br>RM<br>73 | <b>460</b> |
|--|--|---|---------------------|------------------|------------|
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Coalition of Working Mer<br>Organizations for Sheila Kuehl for Supervisor 2014<br>NAME OF AGENT OR INDEPENDENT CONTRACTOR | and Women; Nurses, Teachers, Firefighters                            | and Public Safety Officers                                      | I.D. NUMB<br>137164 |                  |            |

The Card Service Center

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

CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)\* CVC civic donations FIL candidate filing/ballot fees FND fundralsing events IND independent expenditure LEG legal defense LIT campaign literature and mailings 

 MBR
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 office expenses

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 petition circulating

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 print ads

RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (Internet, e-mail)

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| AT&T  | IND     | Field Program          | \$500.00    |
| AT&T  | IND     | Field Program          | \$800.00    |
| AT&T  | IND     | Field Program          | \$500.00    |
| AT&T  | IND     | Field Program          | \$1,200.00  |

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

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

|  |  | <br>_ |  |
|--|--|-------|--|

Statement covers period

from

CALIFORNIA 460FORM 10/1/2014 Page 74 of through 10/18/2014 76

SCHEDULE G

NAME OF FILER I.D. NUMBER Local Experience We Trust for our Communities - A Coalition of Working Men and Women, Nurses, Teachers, Firefighters and Public Safety Officers 1371649 Organizations for Sheila Kuehl for Supervisor 2014 NAME OF AGENT OR INDEPENDENT CONTRACTOR

#### The Card Service Center

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

CMP campaign paraphernalia/misc. MBR member communications CNS campaign consultants MTG meetings and appearances OFC office expenses CTB contribution (explain nonmonetary)\* CVC civic donations PET petition circulating FIL candidate filing/ballot fees PHO phone banks FND fundraising events POL polling and survey research IND independent expenditure POS postage, delivery and messenger services PRO professional services (legal, accounting) LEG legal defense PRT print ads LIT campaign literature and mailings

RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (Internet, e-mail)

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| AT&T  | IND     | Field Program          | \$325.00    |
| Fry's Electronic's  | IND     | OFC                    | \$49.03     |
| Fry's Electronic's  | IND     | OFC                    | \$64.78     |
| Fry's Electronic's  | IND     | OFC                    | \$163.43    |

| Schedule G<br>Payments Made by an Agent or Independe<br>Contractor (on Behalf of This Committee)   | Type or print in ink.<br>Amounts may be rounded<br>to whole dollars. | Statement covers period<br>from 10/1/2014<br>through 10/18/2014 |                        | 460<br>76 |
|--|--|---|------------------------|-----------|
| NAME OF FILER<br>Local Experience We Trust for our Communities - A Coalition<br>Organizations for Sheila Kuehl for Supervisor 2014<br>NAME OF AGENT OR INDEPENDENT CONTRACTOR<br>The Card Service Center | of Working Men and Women, Nurses, Teachers, Firefighters             | and Public Safety Officers                                      | I.D. NUMBER<br>1371649 |           |
| CODES: If one of the following codes accurately des  | cribes the payment, you may enter the code. Otherw                   | vise, describe the paymen                                       | t.                     |           |
| CMP campaign paraphernalia/misc.<br>CNS campaign consultants   | MBR member communications<br>MTG meetings and appearances            | RAD radio airtime and produ<br>RFD returned contributions       |                        |           |

CVS campaign consultants CTB contribution (explain nonmonetary)\* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure LEG legal defense LIT campaign literature and mailings MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals

- TRS staff/spouse travel, lodging, and meals
- TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (Internet, e-mail)

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

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OF | २   | DESCRIPTION OF PAYMENT |       | AMOUNT PAID |
|---|---------|-----|------------------------|-------|-------------|
| Fry's Electronic's  | IND     | OFC |                        |       | \$120.92    |
| Attach additional information on appropriately labeled continuation sheets.     |         | J   | тс                     | DTAL* | \$3,723.16  |

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

| Schedule I<br>Miscellane | ous increases to Cash   | Type or print in ink.<br>Amounts may be rounded<br>to whole dollars. | Statement covers period<br>from 10/1/2014<br>through 10/18/2014 | CALIFORNIA 460<br>FORM Page 76 of 76                    |
|--------------------------|---|--|---|---|
|                          | Ce We Trust for our Communities - A Coalition of Working Men and<br>FOR Sheila Kuehl for Supervisor 2014<br>FULL NAME AND ADDRESS OF SOURCE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) |  | rs and Public Safety Officers                                   | I.D. NUMBER<br>1371649<br>AMOUNT OF<br>INCREASE TO CASH |
| 10/09/2014               | GroundWorks Campaigns, Inc.   | Refund   |   | \$50,000.00   |

| Attach additional information on appropriately labeled continuation sheets.       SUB                                       | TOTAL  | \$50,000.00           |
|---|--------|-----------------------|
| Schedule I Summary  |        |                       |
| 1. Itemized increases to cash this period.  |        | \$50,000.00           |
| 2. Unitemized increases to cash of under \$100 this period  |        | \$0.00                |
| 3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)                            |        | \$0.00                |
| 4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) |        | \$50,000.00           |
|   | FPPC F | Form 460 (January/05) |