Recipient Committee							COVER PAGE
Campaign Statement Cover Page Government Code Sections 84200-842	16.5)				City of San C	amp Hemente	CALIFORNIA 460
Government Gode Sections 64200-642	10.5)	Sta	tement covers period	Date of election if applicable	JAN 28	2021	1
		from _	10/18/2020	(Month, Day, Year)			Page1 of8
					City Clerk De	partment	For Official Use Only
SEE INSTRUCTIONS ON REVERSE		through	112/31/2020	_			
1. Type of Recipient Committe	e: All Committees –	Complete Par	ts 1, 2, 3, and 4.	2. Type of Statement:			
 X Officeholder, Candidate Controlle State Candidate Election Com Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Commit 	mittee	Committee Controll Sponso (Also Complete Primarily Fo	ored Part 6) ormed Candidate/ or Committee	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Amendment (Explain	nt t Termination)	☐ Spec	terly Statement ial Odd-Year Report Ilemental Preelection ment - Attach Form 495
3. Committee Information		I.D. NUMBER 1413366	3	Treasurer(s)	**************************************	t a sin of the section of the sectio	
COMMITTEE NAME (OR CANDIDATE'S N		E)	\$18.54.50 A.	NAME OF TREASURER			
Gene James for City Counci.	L 2020			Jen Slater			
				MAILING ADDRESS			
OTDEET ADDRESS (NO DO DOV)		Commission of the control of the con		9070 Irvine Center D	rive #150		
STREET ADDRESS (NO P.O. BOX)				CITY Irvine		ATE ZIP CO	
CITY	STATE ZIP	CODE	AREA CODE/PHONE	NAME OF ASSISTANT TREASU	JRER. IF ANY	A 926	18
San Clemente	CA 92	673					
MAILING ADDRESS (IF DIFFERENT) NO	. AND STREET OR P.O	BOX		MAILING ADDRESS			
CITY	STATE ZIP	CODE	AREA CODE/PHONE	CITY	STA	ATE ZIP CO	DDE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS				OPTIONAL: FAX / E-MAIL ADD	DRESS		
V-::::							
 Verification I have used all reasonable diligence in 	preparing and review	ing this state	mont and to the heet of my k	nowledge the information contained h	oroin and in the atte	achad achadu	log is true and complete. Leartify
under penalty of perjury under the law				1 awiedge the information contained in	erem and in the atta	acried scriedu	les is true and complete. Teerthy
Evented on 01/21/20	21		D.,				
Executed onDate			Ву		reasurer		
Executed on01/21/20							
Date			e of C	Controlling Office Measure P	roponent or Responsible C	Officer of Sponsor	
Executed on				Signature of Candidate,	State Measure Proponent		
			Du	Sandado			
Executed on			Ву	Signature of Controlling Officeholder, Candidate,	State Measure Proponent		

NAME OF OFFICEHOLDER OR CANDIDATE		N/	AME OF BALLOT MEASURE				
Gene James							
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NU	IMBER IF APPLICABLE)	B/	ALLOT NO. OR LETTER	JURISDICTIO	V		SUPPORT
City Council Member City of San Clemente						1 —	OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY	STATE ZIP	Id	lentify the controlling offic	eholder, can	didate, or state me	easure p	roponent, if ar
		N/	AME OF OFFICEHOLDER, CAND	IDATE, OR PRO	PONENT		
Related Committees Not Included in this Statem		_	FFICE SOUGHT OR HELD	<u>- 14 12 </u>	1		
not included in this statement that are controlled by you or are contributions or make expenditures on behalf of your candidate		OI	FFICE SOUGHT OR HELD		DISTR	ICT NO. IF	ANY
COMMITTEE NAME I.D.	NUMBER						
				Asset Line			
		7 D	rimarily Formed Cand	idata/Offica	holder Commit	ttoo Lie	4
	NTROLLED COMMITTEE?	7. P	rimarily Formed Cand	idate/Office for which this	holder Commit committee is prima	ttee Lis	t names of ed.
		of	rimarily Formed Cand fficeholder(s) or candidate(s)	for which this	committee is prima	rily forme	ed.
		of	fficeholder(s) or candidate(s)	for which this	committee is prima	rily forme	t names of od.
		ot N/	fficeholder(s) or candidate(s)	for which this	committee is prima	rily forme	SUPPORT OPPOSE
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Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

	SUMMARY PAGE		
Statement covers period	CALIFORNIA 160		
from10/18/2020	FORM 400		
through12/31/2020	Page3 of8		
	LD NUMBER		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Gene James for City Council 2020

Gene James for City Council 2020			1413366
Contributions Received	Column A TOTALTHIS PERIOD (FROMATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions		\$ 22,649.00	
2. Loans Received Schedule B, Line 3		0.00	1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2		\$22,649.00	20. Contributions Received \$ \$
4. Nonmonetary Contributions	0.00	0.00	21. Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED	\$ 825.00	\$22,649.00	Made \$ \$
Expenditures Made			Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$4,041.83	\$31,880.49	Candidates
7. Loans Made Schedule H, Line 3	0.00	0.00	
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 4,041.83	\$31,880.49	22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)	0.00	0.00	Date of Election Total to Date
10. Nonmonetary Adjustment	0.00	0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$4,041.83	\$31,880.49	\$
Current Cash Statement			\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$5,319.26	To calculate Column B. add	
13. Cash Receipts	825.00	amounts in Column A to the corresponding amounts	
14. Miscellaneous Increases to Cash Schedule I, Line 4		from Column B of your last	*Amounts in this section may be different from amounts reported in Column B.
15. Cash Payments	4,041.83	report. Some amounts in Column A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$2,102.43	figures that should be	
If this is a termination statement, Line 16 must be zero.		subtracted from previous period amounts. If this is	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$0.00	the first report being filed for this calendar year, only carry over the amounts	
Cash Equivalents and Outstanding Debts		from Lines 2, 7, and 9 (if any).	
18. Cash Equivalents	\$0.00	wing ()	
19. Outstanding Debts	\$		

FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772)

EE INSTRUCTIONS ON REVERSE AME OF FILER Gene James for City Council 2020 DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CONTRIBUTOR CODE * CONTRIBUTOR OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) OF BUSINESS) THOM	Schedule		Amoun	ts may be rounded	04-4			SCHEDULE
AME OF PILER PERCE JURISS FOR City Council 2020 PULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR COORDER PULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR COORDER POWER CONTRIBUTOR COORDER POWER CONTRIBUTOR COORDER POWER COORDER PO	wonetary	Contributions Received	to	whole dollars.	10/10/10			
AME OF PILER PERCE JURISS FOR City Council 2020 DETERMINED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR COUNTRIES, AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR OF COUNTRIES, AND ZIP CODE OF CONTRIBUTOR OF COUNTRIES, AND ZIP CODE OF CONTRIBUTOR COUNTRIES, AND ZIP CODE OF CONTRIBUTOR OF COUNTRIES, AND ZIP COUNTRIES, AND ZIP CODE OF CONTRIBUTOR OF COUNTRIES, AND ZIP COUNTRIES, A	CEE INCTRUCTIO				through 12/31/2	020	Page	4 of 8
Section Superior	NAME OF FILER	ONS ON REVERSE			tinough _====			
DATE RECEIVED DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE CONTRIBUTOR CODE CONTRIBUTOR COCCUPATION AND EMPLOYER PERFORM COMMITTAL ASDRIFRELD MARKETS CONTRIBUTOR COCCUPATION AND EMPLOYER PERFORM COMMITTAL COMMITTA							I.D. NUM	BER
CONTRIBUTION CONT	Gene James	for City Council 2020	 	T		· · · · · ·	141336	6
Salt Cremente, CA 926/2 Control			. OOM INDO FOR	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME	RECEIVED THIS	CALENDAR Y	EAR	TO DATE
Salt Clemente, CA 926/2	10/28/2020	Cindy Vangell			100.00		100.00	· · · · · · · · · · · · · · · · · · ·
PY SCC Sates for Senate 2018 (ID# 1374577) ND 700.00 7		San Clemente, CA 92672		Recifed				
Schedule A Summary Substance Substan			PTY		*			
SOUND Tryine Center Dr			□scc					
Schedule A Summary Amount received this period – unitemized monetary contributions of less than \$100 Amount received this period – unitemized monetary contributions of less than \$100 Amount received this period – unitemized monetary contributions of less than \$100 Schedule A Summary Amount received this period – unitemized monetary contributions of less than \$100 Schedule A Summary Amount received this period – unitemized monetary contributions of less than \$100 Schedule A Summary Amount received this period – unitemized monetary contributions of less than \$100 Schedule A Summary Schedule A Summary Amount received this period – unitemized monetary contributions of less than \$100 Schedule A Summary Sched	10/30/2020				700.00		700.00	
SCC IND COM OTH PTY SCC IND COM OTH PTY SCC IND COM OTH PTY SCC SUBTOTAL\$ 800.00 Contidude A Summary Amount received this period – itemized monetary contributions of less than \$100\$ 800.00 Contidude A Summary contributions received this period – unitemized monetary contributions of less than \$100\$ 25.00 TH – Other (e.g., business entity) PTY – Political Party PT		Irvinel, CA 92618						
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COM OTH OTH OTH OTH OTH SCC SUBTOTAL\$ 800.00 Common of the second			PTY					
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SUBTOTAL\$ 800.00 Com			□ОТН					
SUBTOTAL\$ SUBTOTAL\$ *Contributor Codes IND – Individual COM – Recipient Committee (Include all Schedule A subtotals.) Amount received this period – unitemized monetary contributions of less than \$100 Amount received this period – unitemized monetary contributions of less than \$100 Total monetary contributions received this period.								
SUBTOTAL\$ 800.00 Schedule A Summary Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) Amount received this period – unitemized monetary contributions of less than \$100 Total monetary contributions received this period. \$ 25.00 *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								
SUBTOTAL\$ 800.00 Schedule A Summary Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) Amount received this period – unitemized monetary contributions of less than \$100 \$\frac{800.00}{25.00}\$ Total monetary contributions received this period. \$\frac{100.00}{25.00}\$ \$\frac{100.00}{25.00								
*Contributor Codes IND – Individual COM – Recipient Committee (other than PTY or SCC) Amount received this period – unitemized monetary contributions of less than \$100 **Total monetary contributions received this period. **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								
Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) Amount received this period – unitemized monetary contributions of less than \$100 \$ 25.00 OTH – Other (e.g., business entity) PTY – Political Party Total monetary contributions received this period.				SUBTOTAL	\$ 800.00	100 miles (100 miles)		
Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) Amount received this period – unitemized monetary contributions of less than \$100 \$ 25.00 IND – Individual COM – Recipient Committee (other than PTY or SCC) OTH – Other (e.g., business entity) PTY – Political Party SCC – Small Contributor Committee	Schedule	A Summary				(*Con	tributor Cod	tes
. Amount received this period – unitemized monetary contributions of less than \$100	1. Amount re	ceived this period – itemized monetary contributions.			800.00	IND-	Individual	
PTY – Political Party Total monetary contributions received this period. PTY – Political Party SCC – Small Contributor Committee						ОТН	•	
			o or less tridire	ψ 100 Ψ <u> </u>	23.00	PTY-	- Political P	arty
			ımn Aline 1	2 IATOT	825.00	000	- Small Col	in bator Committee

Schedule E Payments Made	Amounts may be rounded	Statement covers period	CALIFORNIA 46
	to whole dollars.	from 10/18/2020	FORM 40
SEE INSTRUCTIONS ON REVERSE		through12/31/2020	Page5 of8
NAME OF FILER			I.D. NUMBER
Gene James for City Council 2020			1413366

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 supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings MBR member of meetings MFC office expection of petition of petition of phone bar petition o	RAD radio airtime and production c RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and produ TRC candidate travel, lodging, and TRS staff/spouse travel, lodging, ar TSF transfer between committees VOT voter registration WEB information technology costs (ction costs meals nd meals of the same candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DES	CRIPTION OF PAYMENT	AMOUNT PAID
Facebook Inc 1 Hacker Way Menlo Park, CA 94025	WEB		35.0
Facebook Inc 1 Hacker Way Menlo Park, CA 94025	WEB		16.1
Facebook Inc 1 Hacker Way Menlo Park, CA 94025	WEB		50.0
* Payments that are contributions or independent expenditures must also be sur	mmarized on Schedule D.	SUB	TOTAL\$ 101.1
Schedule E Summary			
1. Itemized payments made this period. (Include all Schedule E subtotals.)			4,006.74
2. Unitemized payments made this period of under \$100		······································	\$ 35.09
3. Total interest paid this period on loans. (Enter amount from Schedule B. Pa	art 1. Column (e)		\$ 0.00

Schedule E (Continuation Sheet) Payments Made

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE	E (CONT)
SCHEDULE	

	Statement covers period	CALIFORNIA 460
	from10/18/2020 through12/31/2020	Page6 of8
1		i.D. NUMBER
		1413366

Gene James for City Council 2020

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs campaign consultants CNS meetings and appearances returned contributions contribution (explain nonmonetary)* office expenses campaign workers' salaries CVC civic donations petition circulating t.v. or cable airtime and production costs candidate filing/ballot fees РНО phone banks candidate travel, lodging, and meals fundraising events POL polling and survey research staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) voter registration campaign literature and mailings PRT : print ads information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
San Clemente Times/Community Publications 34932 Calle del Sol Capistrano Beach, CA 92624	PRT		574.00
Capisciano Beach, CA 92024			
Campaign Compliance Group 9070 Irvine Center Drive, #150 Irvine, CA 92618	PRO		576.25
GLF Consulting 21771 Tahoe Lane Lake Forest, CA 92630	РНО	Automated Calls	675.69
Capitol Tech Solutions 2831 G Street, #120 Sacramento, CA 95816	OFC		5.38
Pacific Technical Group 203 Via Socorro San Clemente, CA 92672	WEB		1,387.50

 $[^]st$ Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

3,218.82

Schedule E
(Continuation Sheet)
Payments Made

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

~				
	Statement covers period	CALIFORNIA 460		
	from 10/18/2020	FORM TOO		
	through12/31/2020	Page 7 of 8		
		I.D. NUMBER		
		1413366		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Gene James for City Council 2020

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

campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs campaign consultants CNS meetings and appearances returned contributions CTB contribution (explain nonmonetary)* office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating t.v. or cable airtime and production costs candidate filing/ballot fees PHO phone banks candidate travel, lodging, and meals

FND fundraising events

FND polling and survey research

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

LEG legal defense PRO professional services (legal, accounting) VOT volume campaign literature and mailings PRT print ads

VOT voter registration

WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Red Fox Lounge 220 S El Camino Real San Clemente, CA 92672	OFC	11/3 Election Night Reception	338.00
Facebook Inc 1 Hacker Way Menlo Park, CA 94025	WEB		58.81
Campaign Compliance Group 9070 Irvine Center Drive, #150 Irvine, CA 92618	PRO		290.00

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

SUBTOTAL \$

686.81

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)	Amounts may be rounded to whole dollars.	Statement covers period from 10/18/2020	california 460 form
SEE INSTRUCTIONS ON REVERSE		through 12/31/2020	Page8 of8
NAME OF FILER			I.D. NUMBER
Gene James for City Council 2020			1413366

GLF Consulting

CO	DES: If one of the following codes accurately desci	ibes the	payment, you may enter the code.	Otherwi	se, describe the payment.
CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	o radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	
	contribution (explain nonmonetary)*			SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	
FIL	candidate filing/ballot fees	PHO	phone banks	TRO	· · · · · · · · · · · · · · · · · · ·
FND	fundraising events	POL	polling and survey research	TRS	
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	
· LEG	legal defense	PRO	professional services (legal, accounting)	VO	voter registration

LIT campaign literature and mailings PRT print ads

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	AMOUNT PAID	
PDI - Political Data Inc. 12501 Imperial Hwy, Ste 200 Norwalk, CA 90650	POL Voter Data	325.69	

^{*} 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.

Attach additional information on appropriately labeled continuation sheets.

325.69

TOTAL* \$

WEB information technology costs (internet, e-mail)