Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

SEE INSTRUCTIONS ON REVERSE

Type or print in ink.

Date Stamp: RECEIVED MAY 20 PM 2:00 CITY OF TORRANCE CITY CLERK'S OFFICE

CALIFORNIA FORM 460

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For Official Use Only

Statement covers period from 3/18/2014 through 5/17/2014

Date of election if applicable: (Month, Day, Year) 06/03/2014

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

- [x] Officeholder, Candidate Controlled Committee
  - ○ State Candidate Election Committee
  - ○ Recall (Also Complete Part 5)
- [ ] General Purpose Committee
  - ○ Sponsored
  - ○ Small Contributor Committee
  - ○ Political Party/Central Committee
- [ ] Primarily Formed Ballot Measure Committee
  - ○ Controlled
  - ○ Sponsored (Also Complete Part 6)
- [ ] Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)

2. Type of Statement:

- [x] Preelection Statement
- [ ] Semi-annual Statement
- [ ] Termination Statement (Also file a Form 410 Termination)
- [ ] Amendment (Explain below)
- [ ] Quarterly Statement
- [ ] Special Odd-Year Report
- [ ] Supplemental Preelection Statement - Attach Form 495

3. Committee Information

I.D. NUMBER: 1359520

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

Kurt Weideman for City Council 2014

STREET ADDRESS (NO P.O. BOX)

[redacted]

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Torrance	CA	90504	[redacted]

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

[redacted]

Treasurer(s)

NAME OF TREASURER: Helen A. Nowatka

MAILING ADDRESS

[redacted]

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Torrance	CA	90501	[redacted]

NAME OF ASSISTANT TREASURER, IF ANY: Kurt Weideman

MAILING ADDRESS

[redacted]

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Torrance	CA	90504	[redacted]

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 5/19/14 (Date) By [redacted] (Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor)

Executed on 5/19/14 (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Recipient Committee Campaign Statement Cover Page — Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA FORM 460

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Kurt Weideman

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

Torrance City Council

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

[redacted] | Torrance | CA | 90504

Related Committees Not Included in this Statement: ***List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.***

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? ☐ YES ☐ NO

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

CITY | STATE | ZIP CODE | AREA CODE/PHONE

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? ☐ YES ☐ NO

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

CITY | STATE | ZIP CODE | AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	☐ SUPPORT ☐ OPPOSE

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

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement
Summary Page

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

SUMMARY PAGE

Statement covers period
from 3/18/14
through 5/17/14

CALIFORNIA FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Kurt Weideman for City Council 2014

I.D. NUMBER
1359520

Contributions Received

		Column A (TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)	Column B (CALENDAR YEAR TOTAL TO DATE)
1. Monetary Contributions	*Schedule A, Line 3*	$ 11,731.00	$ 13,679.00
2. Loans Received	*Schedule B, Line 3*	10,000.00	10,000.00
3. SUBTOTAL CASH CONTRIBUTIONS	*Add Lines 1 + 2*	$ 21,731.00	$ 23,379.00
4. Nonmonetary Contributions	*Schedule C, Line 3*	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED	*Add Lines 3 + 4*	$ 21,731.00	$ 23,679.00

Expenditures Made

6. Payments Made	*Schedule E, Line 4*	$ 18,782.74	$ 28,621.28
7. Loans Made	*Schedule H, Line 3*	0.00	0.00
8. SUBTOTAL CASH PAYMENTS	*Add Lines 6 + 7*	$ 18,782.74	$ 28,621.28
9. Accrued Expenses (Unpaid Bills)	*Schedule F, Line 3*	0.00	0.00
10. Nonmonetary Adjustment	*Schedule C, Line 3*	0.00	0.00
11. TOTAL EXPENDITURES MADE	*Add Lines 8 + 9 + 10*	$ 18,782.74	$ 28,621.28

Current Cash Statement

12. Beginning Cash Balance	*Previous Summary Page, Line 16*	$ 7,218.84
13. Cash Receipts	*Column A, Line 3 above*	21,731.00
14. Miscellaneous Increases to Cash	*Schedule I, Line 4*	0.00
15. Cash Payments	*Column A, Line 8 above*	18,782.74
16. **ENDING CASH BALANCE**	*Add Lines 12 + 13 + 14, then subtract Line 15*	$ 10,167.10

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

17. LOAN GUARANTEES RECEIVED — *Schedule B, Part 2* — $ 0.00

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	*See instructions on reverse*	$ 0.00
19. Outstanding Debts	*Add Line 2 + Line 9 in Column B above*	$ 20,619.00

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

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contributions Received	$	$
21. Expenditures Made	$	$

Expenditure Limit Summary for State Candidates

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

Date of Election (mm/dd/yy)	Total to Date
/ /	$
/ /	$

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

Schedule A
Monetary Contributions Received

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

Statement covers period
from 03/18/2014
through 05/17/2014

SCHEDULE A
CALIFORNIA FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Kurt Weideman for City Council 2014

I.D. NUMBER
1359520

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/19/14	Robert Van Lingen [redacted] Torrance, CA 90505	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	250.00	250.00	250.00
3/19/14	Pam Popovich [redacted] Redondo Beach, CA 90277	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00	100.00	100.00
3/22/14	Dennis Johnson [redacted] Torrance, CA 90503	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00	100.00	100.00
3/22/14	David Sargent [redacted] Redondo Beach, CA 90277	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	99.00	99.00	194.00
3/24/14	Jerry Ronan\ [redacted] Torrance, CA 90501	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	50.00	50.00	150.00
			SUBTOTAL $	599.00		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 10,063.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 1,668.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL $** 11,731.00

*Contributor Codes
IND – Individual
COM – Recipient Committee (other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

Statement covers period
from 03/18/2014
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NAME OF FILER
Kurt Weideman for City Council 2014

I.D. NUMBER
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/26/14	Lynda Kraemer [redacted] Torrance, CA 90503	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	50.00	50.00	100.00
3/26/14	Frank Corbett [redacted] Redondo Beach, CA 90277	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self Contractor	120.00	120.00	120.00
3/26/14	Ernest Acosta [redacted] Los Angeles, CA 90039	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	50.00	50.00	100.00
3/27/14	Flo Stapleton [redacted] Torrance, CA 90503	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	149.00	149.00	249.00
3/27/14	Diana McClure [redacted] Torrance, CA 90504	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	100.00	100.00	100.00
			SUBTOTAL $	469.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

Statement covers period
from 03/18/2014
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NAME OF FILER
Kurt Weideman for City Council 2014

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3/27/14	Howard Orpe [redacted] Torrance, CA 90503	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Self Howard Orpe Painting & Decorating	99.00	99.00	199.00
3/26/14	Bronco Popovich [redacted] Torrance, CA 90501	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Inspector LA School District	50.00	50.00	250.00
3/31/14	Mikko Henson [redacted] Redondo Beach, CA 90277	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Homemaker	99.00	99.00	194.00
3/31/14	Fern Ruiz [redacted] Torrance, CA 90501	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00	100.00	150.00
3/31/14	Mary Ann Kendall [redacted] Torrance, CA 90501	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	50.00	50.00	145.00
			SUBTOTAL $	398.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period
from 03/18/2014
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3/31/14	Mike Terre [redacted] Redondo Beach, CA 90277	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	100.00	100.00	100.00
4/2/14	Eric Saruwatari [redacted] Torrance, CA 90503	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Claims Inspetor Auro Club of So. CA	100.00	100.00	200.00
4/2/14	Glen Terry [redacted] Torrance, CA 90503	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	100.00	100.00	200.00
4/2/14	Jeannine Frandsen [redacted] Torrance, CA 90505	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	100.00	100.00	100.00
3/31/14	Bruno Scolini [redacted] Torrance, CA 90504	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	100.00	100.00	100.00
			SUBTOTAL $	500.00		

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SCHEDULE A (CONT.)

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
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Statement covers period
from 03/18/2014
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CALIFORNIA FORM 460

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3/31/14	Armida Silva [redacted] Hacienda Heights, CA 91745	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	99.00	99.00	129.00
3/31/14	Rosemary Zettler [redacted] Redondo Beach, CA 90277	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	99.00	99.00	294.00
4/2/14	Dennis Johnson [redacted] Torrance, CA 90503	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	50.00	150.00	150.00
4/2/14	Joann Frisch [redacted] Torrance, CA 90504	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	50.00	50.00	150.00
4/2/14	Ken Miller [redacted] Torrance, CA 90501	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	100.00	200.00	200.00
			SUBTOTAL $	398.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period
from 03/18/2014
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CALIFORNIA FORM **460**

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4/3/14	Muratsuchi for Assembly 2014 [redacted] Los Angeles, CA 90048	☐IND ☑COM ☐OTH ☐PTY ☐SCC	FPPC 1353738	250.00	250.00	250.00
4/5/14	Flo Stapleton [redacted] Torrance, CA 90503	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	50.00	199.00	299.00
4/6/14	Ann Strong [redacted] Torrance, CA 90501	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Teacher Torrance Unified School District	100.00	100.00	195.00
4/6/14	Paul Maddox [redacted] Torrance, CA 90503	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Business Systems Analyst Lisi Aerospace	200.00	200.00	400.00
4/6/14	Maureen O'Donnell [redacted] Torrance, CA 90501	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	50.00	150.00	150.00
			SUBTOTAL $	650.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
4/6/14	Dee Hardison [redacted] Torrance, CA 90501	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00	100.00	150.00
4/6/14	Gerry Rische [redacted] Torrance, CA 90505	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	50.00	50.00	150.00
4/6/14	Jean Adelsman [redacted] Redondo Beach, CA 90277	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00	100.00	200.00
4/6/14	Ellen Kircher [redacted] Torrance, CA 90503	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Homemaker	200.00	250.00	300.00
4/6/14	Richard Crisa [redacted] Redondo Beach, CA 90278	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Business Manager Chemeing Energetis	99.00	99.00	194.00
			SUBTOTAL $	549.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period
from 3/18/2014
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NAME OF FILER
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
4/6/14	Gene Barnett [redacted] Torrance, CA 90501	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	100.00	100.00	100.00
4/6/14	Jamie Watson [redacted] Torrance, CA 90501	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	50.00	50.00	149.00
4/6/14	Craig Weideman [redacted] Rindge, NH 03461	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Transfer Station W.M., Inc	250.00	250.00	950.00
4/6/14	Pat Furey [redacted] Torrance, CA 90504	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	100.00	100.00	100.00
4/15/14	Jon Kaji [redacted] Gardena, CA 90248	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self-Real Estate Kaji & Assocs.	250.00	250.00	250.00
			SUBTOTAL $	750.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

Statement covers period
from 3/18/2014
through 5/17/2014

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NAME OF FILER
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4/15/14	Gerber Ambulance Service 19801 Mariner Avenue Torrance, CA 90503	☐IND ☐COM ☑OTH ☐PTY ☐SCC	Buiness	1,000.00	1,000.00	1,000.00
4/15/14	Michael Maiuri [redacted] Torrance, CA 90503	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	500.00	500.00	500.00
4/15/14	Hazel Taniguchi [redacted] Torrance, CA 90503	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	50.00	50.00	100.00
4/18/14	Russell Lefevre [redacted] Redondo Beach, CA 90277	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Self Engineer	100.00	200.00	300.00
4/1814	Richard Root [redacted] Redondo Beach, CA 90277	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00	100.00	100.00
			SUBTOTAL $	1,750.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from 03/18/2014
through 05/17/2014

CALIFORNIA FORM **460**

NAME OF FILER
Kurt Weideman for City Council 2014

I.D. NUMBER
1359520

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
4/18/14	Stephen Wolowiez [redacted] Rancho Palos Verdes, CA 90275	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00	100.00	100.00
4/19/14	Postal Solutions, Inc. 4729 Torrance Blvd. Torrance, CA 90503	☐IND ☐COM ☑OTH ☐PTY ☐SCC	Business	100.00	100.00	100.00
4/22/14	Ann Gallagher [redacted] Torrance, CA 90503	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00	100.00	195.00
4/29/14	Jean Adelsman [redacted] Redondo Beach, CA 90277	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00	200.00	300.00
4/30/14	League of Conservation Voters 9112C E. Fairview Avenue San Gabriel, CA 91775	☐IND ☑COM ☐OTH ☐PTY ☐SCC	ID #810317	1,000.00	1,000.00	1,000.00
			SUBTOTAL $	1,400.00		

*Contributor Codes
IND – Individual
COM – Recipient Committee (other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from 3/18/14
through 5/17/14

CALIFORNIA FORM **460**

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NAME OF FILER
Kurt Weideman for City Council 2014

I.D. NUMBER
1359520

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
4/2/14	Irma Maggio [redacted] Torrance, CA 90505	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00	100.00	150.00
5/3/14	Dick Rossberg [redacted] Redondo Beach, CA 90277	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	200.00	200.00	550.00
5/5/14	Mary Ann Weideman [redacted] Louisville, CO 80027	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Assistant Manager City of Boulder	1,000.00	1,000.00	1,000.00
5/5/14	Brett Weideman [redacted] Louisville, CO 80027	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	1,000.00	1,000.00	1,000.00
5/11/14	Cliff Numark [redacted] Redondo Beach, CA 90277	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Executive American Red Cross	100.00	100.00	100.00
			SUBTOTAL $	2,400.00		

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PTY – Political Party
SCC – Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from 3/18/14
through 5/17/14

CALIFORNIA FORM **460**

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NAME OF FILER
Kurt Weideman for City Council 2014

I.D. NUMBER
1359520

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
4/7/14	Nancy Mateyka [redacted] Torrance, CA 90505	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00	100.00	250.00
5/15/14	Russell Lafevre [redacted] Redondo Beach, CA 90277	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Self Engineer	100.00	300.00	400.00
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
			SUBTOTAL $	200.00		

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Schedule B – Part 1
Loans Received

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

Statement covers period
from 03/18/2014
through 05/17/2014

CALIFORNIA FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Kurt Weideman for City Council 2014

I.D. NUMBER

1359520

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Kurt Weideman [redacted] Torrance, CA 90504 †☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$ 10,619.00	$ 10,000.00	☐ PAID $ 0.00 ☐ FORGIVEN $ 0.00	$ 10,000.00 6/3/14 DATE DUE	0.00 % RATE $ 0.00	$ 10,000.00 4/30/14 DATE INCURRED	CALENDAR YEAR $ 20,619.00 PER ELECTION** $ 20,619.00
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$	$	☐ PAID $ ☐ FORGIVEN $	$ DATE DUE	% RATE $	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION** $
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$	$	☐ PAID $ ☐ FORGIVEN $	$ DATE DUE	% RATE $	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION** $
		SUBTOTALS $ 10,000.00		$ 0.00	$ 10,000.00	$ 0.00 (Enter (e) on Schedule E, Line 3)		

Schedule B Summary

1. Loans received this period ..... $ 10.000.00
   (Total Column (b) plus unitemized loans of less than $100.)
2. Loans paid or forgiven this period ..... $ 0.00
   (Total Column (c) plus loans under $100 paid or forgiven.)
   (Include loans paid by a third party that are also itemized on Schedule A.)
3. Net change this period. (**Subtract** Line 2 from Line 1.) ..... NET $ 10,000.00
   (May be a negative number)
   Enter the net here and on the Summary Page, Column A, Line 2.

†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

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.

Schedule B – Part 1
Loans Received

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

Statement covers period
from 03/18/2014
through 05/17/2014

CALIFORNIA FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Kurt Weideman for City Council 2014

I.D. NUMBER
1359520

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD *	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Kurt Weideman [redacted] Torrance, CA 90504 † ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$ 2,019.00	$ 0.00	☐ PAID $ 0.00 ☐ FORGIVEN $ 0.00	$ 2,019.00 6/3/14 DATE DUE	0 % RATE $ 0.00	$ 2,019.00 8/5/13 DATE INCURRED	CALENDAR YEAR $ 20,619.00 PER ELECTION** $ 20,619.00
Kurt Weideman [redacted] Torrance, CA 90504 † ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$ 3,600.00	$ 0.00	☐ PAID $ 0.00 ☐ FORGIVEN $ 0.00	$ 3,600.00 6/3/14 DATE DUE	0 % RATE $ 0.00	$ 3,600.00 8/8/14 DATE INCURRED	CALENDAR YEAR $ 20,619.00 PER ELECTION** $ 20,619.00
Kurt Weideman [redacted] Torrance, CA 90504 † ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$ 5,000.00	$ 0.00	☐ PAID $ 0.00 ☐ FORGIVEN $ 0.00	$ 5,000.00 6/3/14 DATE DUE	0 % RATE $ 0.00	$ 5,000.00 12/4/14 DATE INCURRED	CALENDAR YEAR $ 20,619.00 PER ELECTION** $ 20,619.00
	SUBTOTALS	$ 0.00		$ 0.00	$ 10,619.00	$ 0.00 (Enter (e) on Schedule E, Line 3)		

Schedule B Summary

1. Loans received this period ..... $ 0.00
   (Total Column (b) plus unitemized loans of less than $100.)
2. Loans paid or forgiven this period ..... $ 0.00
   (Total Column (c) plus loans under $100 paid or forgiven.)
   (Include loans paid by a third party that are also itemized on Schedule A.)
3. Net change this period. (**Subtract** Line 2 from Line 1.) ..... **NET** $ 0.00
   (May be a negative number)
   Enter the net here and on the Summary Page, Column A, Line 2.

†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

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.

SCHEDULE E

Schedule E
Payments Made

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

Statement covers period
from 03/18/2014
through 05/17/2014

CALIFORNIA FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Kurt Weideman for City Council 2014

I.D. NUMBER
1359520

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

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Office Depot 19800 Hawthorne Blvd #248 Torrance, CA 90503	CMP	Printing	141.70
Printing Graphics 21236 S Western Avenue Torrance, CA 90501	CMP	Remits	190.75
AMAC LLC 114 S. Catalina Avenue #101 Redondo Beach, CA 90277	LIT	Tri Fold Brochure	1,253.50

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

SUBTOTAL $ 1,585.95

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 18,355.55
2. Unitemized payments made this period of under $100 ..... $ 427.55
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.) ..... **TOTAL $** 18,782.74

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period
from 03/18/2014
through 05/17/2014

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Kurt Weideman for City Council 2014

I.D. NUMBER
1359520

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

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Lomelis Italian Restar 2223 W. Redondo Beach Blvd. Gardena, CA 90247	FND	Food for fundraiser	308.99
Total Wine 1505 Hawthorne Blvd. Redondo Beach, CA 90278	FND	Beverages for fundraiser	103.35
AMAC LLC 114 S. Catalina Avenue #101 Redondo Beach, CA 90277	CMP	Wire frame hangers	184.76
Nowatka & Associates 607 Acacia Avenue Torrance, CA 90501	CNS	Apr Consulting	500.00
Nowatka & Associates 607 Acacia Avenue Torrance, CA 90501	CMP	Walk Sjeets	168.00

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

SUBTOTAL $ 1,265.10

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period
from 03/18/2014
through 05/17/2014

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Kurt Weideman for City Council 2014

I.D. NUMBER
1359520

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

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
AMAC LLC 114 S. Catalina Avenue #101 Redondo Beach, CA 90277	LIT	Literature	14,679.50
Nowatka & Associates 607 Acacia Avenue Torrance, CA 90501	CNS	May Consulting	500.00
Easy Reader 2200 Pacific Coast Hwy #101 Hermosa Beach, CA 90254	PRT	Print Ad	325.00

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

SUBTOTAL $ 15,504.50