Brewer (Council 2010)
Form 460 – Semi Annual Statement
7/01/09 – 12/31/09
January 31, 2010

City of Torrance

FPPC CAMPAIGN DISCLOSURE STATEMENT

Tom Brewer
23424 Evalyn Ave.
Torrance, CA. 90505-4512
310 530-1365
tccbre@ucla.edu

Office Sought: **Councilmember**, Torrance **2010**
Committee ID #: **1318486**
Name of Committee:
Re-elect Tom Brewer to City Council 2010
Treasurer: Helen A. Nowatka 310-530-1365

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DISCLAIMER: The information contained in these pages is information as submitted by the candidates to the City Clerk as required by the Political Reform Act of 1974 (amended). The City Clerk does not certify the accuracy of any information contained in these pages.

The City Clerk reserves the right to modify, update, change or make improvements at any time, without notice, and assumes no liability for damages incurred directly or indirectly as a result of errors, omissions or discrepancies.

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FORM	PERIOD COVERED	DATE DUE	DATE FILED
Form 501 Candidate Intention Statement Councilmember 2010	2010 General Municipal Election	N/A	5/20/2009
Form 410 (Copy) Statement of Organization	2010 General Municipal Election	N/A	5/20/2009
Form 410 (Copy) Statement of Organization Amendment – Change Committee Name	2010 General Municipal Election	N/A	5/29/2009
Form 410 (Copy) Statement of Organization from Secretary of State Not qualified yet	2010 General Municipal Election	N/A	6/1/2009
Form 410 (Copy) Statement of Organization – Amendment from Secretary of State Change Committee Name - Qualify	2010 General Municipal Election	N/A	7/13/2009
Form 410 (Copy) Statement of Organization Amendment Add Bank Account	2010 General Municipal Election	N/A	8/6/09
Form 410 (Copy) Statement of Organization – Amendment from Secretary of State Add Bank Account	2010 General Municipal Election	N/A	10/1/09
Form 460 Semi- Annual Campaign Statement	July 1, 2009 – December 31, 2009	1/31/2010	1/7/2010

Form(s) posted in BOLD posted on torranceca.gov **DATE**

City of Torrance

FPPC CAMPAIGN DISCLOSURE STATEMENT

Tom Brewer
23424 Evalyn Ave.
Torrance, CA. 90505-4512
310 530-1365
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Committee ID #: **1318486**
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Re-elect Tom Brewer to City Council 2010
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Form 460 Semi- Annual Campaign Statement	July 1, 2009 – December 31, 2009	1/31/2010	1/7/2010

Form(s) posted in BOLD posted on torranceca.gov **DATE**

COVER PAGE

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

SEE INSTRUCTIONS ON REVERSE

Type or print in ink.

Date Stamp: RECEIVED 2010 JAN -7 AM 11:56

CALIFORNIA FORM 460

Page 1 of 14

For Official Use Only

COPY

Statement covers period
from 07/01/09
through 12/31/09

Date of election if applicable: (Month, Day, Year)
06/08/2010

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:

- [ ] Preelection Statement
- [x] 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: 1318486

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Re-Elect Tom Brewer to City Council 2010

STREET ADDRESS (NO P.O. BOX)
23020 Crenshaw Blvd

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Torrance	CA	90505	310 530-1365

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS
310 530-1413

Treasurer(s)

NAME OF TREASURER
Helen A. Nowatka

MAILING ADDRESS
23020 Crenshaw Blvd

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Torrance	CA	90505	310 530-1365

NAME OF ASSISTANT TREASURER, IF ANY
Tom Brewer

MAILING ADDRESS
20320 Crenshaw Bl

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Torrance	CA	90505	310 530-1365

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 tru

Executed on 1/5/10 (Date) By [redacted]

Executed on 1-5-10 (Date) By [redacted] Officer of Sponsor

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

Tom Brewer

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

Torrance City Council

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP
23020 Crenshaw Bl	Torrance	CA	90505

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 07/01/09
through 12/31/09

CALIFORNIA FORM 460

Page 3 of 14

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Re-Elect Tom Brewer to City Council 2010

I.D. NUMBER
1318486

Contributions Received

		Column A (TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)	Column B (CALENDAR YEAR TOTAL TO DATE)
1. Monetary Contributions	*Schedule A, Line 3*	$ 8,743.00	$ 8,743.00
2. Loans Received	*Schedule B, Line 3*	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS	*Add Lines 1 + 2*	$ 8,743.00	$ 8,743.00
4. Nonmonetary Contributions	*Schedule C, Line 3*	1,076.01	1,076.01
5. TOTAL CONTRIBUTIONS RECEIVED	*Add Lines 3 + 4*	$ 9,819.01	$ 9,819.01

Expenditures Made

6. Payments Made	*Schedule E, Line 4*	$ 3,471.53	$ 3,471.53
7. Loans Made	*Schedule H, Line 3*	0.00	0.00
8. SUBTOTAL CASH PAYMENTS	*Add Lines 6 + 7*	$ 3,471.53	$ 3,471.53
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*	$ 3,471.53	$ 3,471.53

Current Cash Statement

12. Beginning Cash Balance	*Previous Summary Page, Line 16*	$ 0.00
13. Cash Receipts	*Column A, Line 3 above*	8,743.00
14. Miscellaneous Increases to Cash	*Schedule I, Line 4*	.50
15. Cash Payments	*Column A, Line 8 above*	3,471.53
16. **ENDING CASH BALANCE**	*Add Lines 12 + 13 + 14, then subtract Line 15*	$ 5,271.97

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*	$ 0.00

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	$ 0.00	$ 0.00
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.

SCHEDULE A

Statement covers period
from 07/01/09
through 12/31/09

CALIFORNIA FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Re-Elect Tom Brewer to City Council 2010

I.D. NUMBER
1318486

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)
7/22/09	Ann Smisek [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	200.00	200.00	200.00
8/3/09	Sandi Monda [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	250.00	250.00	250.00
8/3/09	Kurt Weideman [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00	100.00	100.00
8/3/09	Michael Wermers [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Self GPSD,Inc	100.00	100.00	100.00
8/10/09	Ray Uchima [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Real Estate Broker Uchima Co	100.00	100.00	100.00
			SUBTOTAL $	750.00		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 4,940.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 3,803.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL $** 8,743.00

*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 07/01/09
through 12/31/09

CALIFORNIA FORM 460

Page 5 of 14

NAME OF FILER
Re-Elect Tom Brewer to City Council 2010

I.D. NUMBER
1318486

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/20/09	Frank Stapleton [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	50.00	50.00	50.0
8/27/09	Susan Rhilinger [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00	100.00	100.00
8/27/09	Robert VanLingen [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Owner VanLingen Towing	500.00	500.00	500.00
8/31/09	Richard Johnson [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Software Eng. Mgr. The Aerospace Corp	100.00	100.00	100.00
8/31/09	Gerry Rische [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00	100.00	100.00
			SUBTOTAL $	850.00		

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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 07/01/09
through 12/31/09

CALIFORNIA FORM 460

Page 6 of 14

NAME OF FILER
Re-Elect Tom Brewer to City Council 2010

I.D. NUMBER
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9/9/09	Ann Smisek [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00	300.00	300.0
9/9/09	Donna Spreitzer [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Homemaker	100.00	100.00	100.00
9/10/09	William Dundore [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	150.00	150.00	150.00
9/11/09	Steve Fechner P.O. Box 3217 Torrance, CA 90510	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Property Mgmt. Surf Mgmt. Co.	500.00	500.00	500.00
9/11/09	Pat Furey [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Co. of Los Angeles	100.00	100.00	100.00
			SUBTOTAL $	950.00		

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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 07/01/09
through 12/31/09

CALIFORNIA FORM 460

Page 7 of 14

NAME OF FILER
Re-Elect Tom Brewer to City Council 2010

I.D. NUMBER
1318486

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/11/09	Kirk Rossberg [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Owner Torrance Bakery	100.00	100.00	100.0
9/11/09	Jon Schoen [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Management A & M Network	100.00	100.00	100.00
9/17/09	Ralph Martin [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Owner Torrance Flight Park	500.00	500.00	500.00
9/17/09	Frank Stapleton [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	90.00	140.00	140.00
9/18/09	Bronco Popovich P.O. Box 463 Torrance, Ca 90508	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Inspector Los Angeles USD	500.00	500.00	500.00
			SUBTOTAL $	1,290.00		

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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 07/01/09
through 12/31/09

CALIFORNIA FORM 460

Page 8 of 14

NAME OF FILER
Re-Elect Tom Brewer to City Council 2010

I.D. NUMBER
1318486

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/21/09	Terry Ragins [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Self Occupational Therapist	100.00	100.00	100.0
9/23/09	Robert Gerber [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	President/CEO Gerber Ambulance	500.00	500.00	500.00
10/07/09	Earl Plummer [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00	100.00	100.00
10/28/09	Paul Jacobsen [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Project Mgr Hewlett-Packard	100.00	100.00	100.00
11/12/09	Carol Dean [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Self Market Res. Consultant	100.00	100.00	100.00
			SUBTOTAL $	900.00		

*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 07/01/09
through 12/31/09

CALIFORNIA FORM 460

Page 9 of 14

NAME OF FILER
Re-Elect Tom Brewer to City Council 2010

I.D. NUMBER
1318486

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/16/09	Michael Wermers [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Self GPSD, Inc	100.00	200.00	200.0
12/21/09	TPSA 3031 Torrance Blvd Torrance, CA 90503	☐IND ☐COM ☑OTH ☐PTY ☐SCC		100.00	100.00	100.00
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
			SUBTOTAL $	200.00		

*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 C
Nonmonetary Contributions Received

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

SCHEDULE C

Statement covers period
from 07/01/09
through 12/31/09

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Re-Elect Tom Brewer to City Council 2010

I.D. NUMBER
1318486

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)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
8/28/09	Sandi Monda [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	Supplies for fund raiser	122.45	122.45	122.45
8/28/09	Arun Bhumita [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Owner Arjay Telecom	Food for fund raiser	653.56	653.56	653.56
8/28/09	Arun Bhumita [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Owner Arjay Telecom	Use of hall for fund raiser	300.00	953.56	953.56
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					

Attach additional information on appropriately labeled continuation sheets. **SUBTOTAL $** 1,076.01

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) ..... $ 1,076.01
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $ 0.00
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) ..... **TOTAL $** 1,076.01

*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 E
Payments Made

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

SCHEDULE E

Statement covers period
from 07/01/09
through 12/31/09

CALIFORNIA FORM 460

Page 11 of 14

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Re-Elect Tom Brewer to City Council 2010

I.D. NUMBER
1318486

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
US Post Office Marcelina Ave Torrance, CA 90503	POS	4 rolls stamps	176.00
Personally Done 40730 W Walker Way Maricopa, AZ 85238	LIT	Printing Envelopes	285.00
Personally Done 40730 W Walker Way Maricopa, AZ 85238	LIT	Printing Letterhead	175.00

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

SUBTOTAL $ 636.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 3,185.28
2. Unitemized payments made this period of under $100 ..... $ 286.25
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 $** 3,471.53

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period
from 07/01/09
through 12/31/09

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Re-Elect Tom Brewer to City Council 2010

I.D. NUMBER
1318486

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
Sandi Monda [redacted]	FND	Re-imburse fpr supplies for fund raiser	203.24
Nowatka & Associates 23020 Crenshaw Blvd Torrance, CA 90505	FND	Printing tickets for fund raiser	154.13
Personally Done 40730 W Walker Way Maricopa, AZ 85238Nowatka & Associates	LIT	Rush Order-remits & #10 envelopes	320.00
Nowatka & Associates 23020 Crenshaw Blvd Torrance, CA 90505	CNS	Consulting Fee	1,000.00
Harry's BBQ 25501 Narbonne Ave Lomita, CA 90717	FND	Food for fund raiser	271.91

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

SUBTOTAL $ 1,949.28

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period
from 07/01/09
through 12/31/09

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
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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
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LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Nowatka & Associates 23020 Crenshaw Blvd Torrance, CA 90505	CNS	October consulting	200.00
Nowatka & Associates 23020 Crenshaw Blvd Torrance, CA 90505	CNS	November consulting	200.00
Nowatka & Associates 23020 Crenshaw Blvd Torrance, CA 90505	CNS	December consulting	200.00

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

SUBTOTAL $ 600.00

Schedule I
Miscellaneous Increases to Cash

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

SCHEDULE I

Statement covers period
from 07/01/09
through 12/31/09

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Re-Elect Tom Brewer to City Council 2010

I.D. NUMBER

1318486

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL $

Schedule I Summary

1. Itemized increases to cash this period. ..... $
2. Unitemized increases to cash of under $100 this period. ..... $ .50
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.) ..... **TOTAL** $ .50