

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200 - 84216.5)

COVER PAGE

**RECEIVED**

Date Stamp: **2010 JUL 29 PM 2:27**

**CALIFORNIA FORM 460**

Page 1 of 5

CITY OF TORRANCE  
CITY CLERK'S OFFICE

For Official Use Only

<b>Statement covers period</b>	<b>Date of Election if applicable:</b>
from <u>05/23/2010</u>	(Month, Day, Year)
through <u>06/30/2010</u>	<u>06/08/2010</u>

**1. Type of Recipient Committee:**

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee | <input type="checkbox"/> Ballot Measure Committee   |
| <input type="checkbox"/> State Candidate Election Committee                      | <input type="checkbox"/> Primarily Formed           |
| <input type="checkbox"/> Recall  | <input type="checkbox"/> Controlled                 |
|  | <input type="checkbox"/> Sponsored                  |
| <input type="checkbox"/> General Purpose Committee                               |   |
| <input type="checkbox"/> Sponsored   | <input type="checkbox"/> Primarily Formed Candidate |
| <input type="checkbox"/> Small Contributor Committee                             | Officeholder Committee                              |
| <input type="checkbox"/> Political Party/Central Committee                       |   |

**2. Type of Statement:**

- |   |  |
|---|--|
| <input type="checkbox"/> Pre-election Statement           | <input type="checkbox"/> Quarterly Statement       |
| <input type="checkbox"/> Semi-annual Statement            | <input type="checkbox"/> Special Odd-Year Report   |
| <input checked="" type="checkbox"/> Termination Statement | <input type="checkbox"/> Supplemental Pre-election |
| <input type="checkbox"/> Amendment (Explain below)        | Statement - Attach Form 495                        |

**3. Committee Information**

I.D. NUMBER: 1320247

COMMITTEE NAME  
Friends of Dick Browning for Council 2010

STREET ADDRESS (NO P.O. BOX)  
[REDACTED]

CITY STATE ZIP CODE AREA CODE/PHONE  
Torrance CA 90505-7143 (213) 489-4792

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

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX/E-MAIL ADDRESS  
(213) 489-4818/

**Treasurer(s)**

NAME OF TREASURER  
David L. Gould

MAILING ADDRESS  
555 S. Flower Street, Ste. 4210

CITY STATE ZIP CODE AREA CODE/PHONE  
Los Angeles CA 90071 (213) 489-4792

NAME OF ASSISTANT TREASURER, IF ANY  
Michelle Moore Sanders

MAILING ADDRESS  
555 South Flower Street, Suite 4210

CITY STATE ZIP CODE AREA CODE/PHONE  
Los Angeles CA 90071 (213) 489-4792

OPTIONAL: FAX/E-MAIL ADDRESS

**4. Verification**

I have used all reasonable diligence in preparing and reviewing the information on this statement and the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the information on this statement and the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the information on this statement and the attached schedules is true and complete.

Executed on 07/20/2010  
DATE

Executed on 07/20/2010  
DATE

Executed on \_\_\_\_\_  
DATE

Executed on \_\_\_\_\_  
DATE

By \_\_\_\_\_

By \_\_\_\_\_

By \_\_\_\_\_

By \_\_\_\_\_

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Recipient Committee  
 Campaign Statement  
 Cover Page - Part 2

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OF CANDIDATE

Richard "Dick" Browning

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

City Council Member, Torrance

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

[REDACTED] Torrance CA 90505-7143

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

COMMITTEE NAME I.D. NUMBER

NAME OF TREASURER CONTROLLED COMMITTEE?

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?

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**

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD  SUPPORT

OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD  SUPPORT

OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD  SUPPORT

OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD  SUPPORT

OPPOSE

Campaign Disclosure Statement  
Summary Page

SUMMARY PAGE

Statement covers period from <u>05/23/2010</u> through <u>06/30/2010</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>3</u> of <u>5</u>
I.D. NUMBER 1320247	

NAME OF FILER Richard "Dick" Browning, Friends of Dick Browning for Council 2010

**Contributions Received**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions ..... <i>Schedule A, Line 3</i>	\$ <u>0.00</u>	\$ <u>625.00</u>
2. Loans Received ..... <i>Schedule B, Line 7</i>	\$ <u>(3,178.15)</u>	\$ <u>11,821.85</u>
3. SUBTOTAL CASH CONTRIBUTIONS ..... <i>Add Lines 1 + 2</i>	\$ <u>(3,178.15)</u>	\$ <u>12,446.85</u>
4. Nonmonetary Contributions ..... <i>Schedule C, Line 3</i>	\$ <u>0.00</u>	\$ <u>0.00</u>
5. TOTAL CONTRIBUTIONS RECEIVED ..... <i>Add Lines 3 + 4</i>	\$ <u>(3,178.15)</u>	\$ <u>12,446.85</u>

**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 ..... \$	<u>0</u>	<u>0</u>
21. Expenditures Made ..... \$	<u>0</u>	<u>0</u>

**Expenditures Made**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Cash Payments ..... <i>Schedule E, Line 4</i>	\$ <u>23.88</u>	\$ <u>6,852.21</u>
7. Loans Made ..... <i>Schedule H, Line 7</i>	\$ <u>0.00</u>	\$ <u>0.00</u>
8. SUBTOTAL CASH PAYMENTS ..... <i>Add Lines 6 + 7</i>	\$ <u>23.88</u>	\$ <u>6,852.21</u>
9. Accrued Expenses (Unpaid Bills) ..... <i>Schedule F, Line 3</i>	\$ <u>0.00</u>	\$ <u>(0.50)</u>
10. Nonmonetary Adjustment ..... <i>Schedule C, Line 3</i>	\$ <u>0.00</u>	\$ <u>0.00</u>
11. TOTAL EXPENDITURES MADE ..... <i>Add Lines 8 + 9 + 10</i>	\$ <u>23.88</u>	\$ <u>6,851.71</u>

**Expenditure Limit Summary for State  
Candidates**

**22. Cumulative Expenditure 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.

**Current Cash Statement**

12. Beginning Cash Balance ..... <i>Previous Summary Page, Line 16</i>	\$ <u>3,202.03</u>
13. Cash Receipts ..... <i>Column A, Line 3 above</i>	\$ <u>(3,178.15)</u>
14. Miscellaneous Increases to Cash ..... <i>Schedule I, Line 4</i>	\$ <u>0.00</u>
15. Cash Payments ..... <i>Column A, Line 8 above</i>	\$ <u>23.88</u>
16. <b>ENDING CASH BALANCE</b> ..... <i>Lines 12+13+14, less Line 15</i>	\$ <u>0.00</u>

*If this is a Termination Statement, Line 16 must be zero.*

17. LOAN GUARANTEES RECEIVED *Schedule B, Part 1, Column (b)* \$ 0.00

**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents .....	\$ <u>0.00</u>
19. Outstanding Debts ..... <i>Add Line 2 + Line 9 in Column C above</i>	\$ <u>11,821.35</u>

**Schedule B - Part I  
Loans Received**

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>05/23/2010</u>	<b>Page</b> <u>4</u> <b>of</b> <u>5</u>
through <u>06/30/2010</u>	

<b>NAME OF FILER</b> Richard "Dick" Browning, Friends of Dick Browning for Council 2010	<b>I.D. NUMBER</b> 1320247
---	-------------------------------

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
Richard "Dick" Browning [REDACTED] Torrance, CA 90505-7143  <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired  Richard Browning	\$ 10,000	\$ 0	<input type="checkbox"/> PAID \$ 0 <input type="checkbox"/> FORGIVEN \$ 0	\$ 10,000  08/17/2010 DATE DUE	0.000 % RATE \$ 0	\$ 10,000  08/17/2009 DATE INCURRED	CALENDAR YEAR \$ 5,000 PER ELECTION \$ 15,000 P10
Richard "Dick" Browning (Continued)  <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ 5,000	\$ 0	<input checked="" type="checkbox"/> PAID \$ 3,178 <input type="checkbox"/> FORGIVEN \$ 0	\$ 1,821  01/27/2011 DATE DUE	0.000 % RATE \$ 0	\$ 5,000  01/27/2010 DATE INCURRED	CALENDAR YEAR \$ 5,000 PER ELECTION \$ 15,000 P10
		\$	\$	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN \$	  DATE DUE	% RATE \$	  DATE INCURRED	CALENDAR YEAR \$ PER ELECTION \$
<b>SUBTOTAL \$</b>								
		0.00	\$ 3,178.15	\$ 11,821.85	\$	0.00		

**Schedule B Summary**

- Loans received this period ..... \$ 0.00  
(Total Column (b) plus unitemized loans less than \$100.)
- Loans paid or forgiven this period ..... \$ 3,178.15  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (Subtract Line 2 from Line 1.) ..... **NET \$** (3,178.15)  
Enter the net here and on the Summary Page, Column A, Line 2 .

**Schedule E  
Payments Made**

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>05/23/2010</u>	<b>Page</b> <u>5</u> <b>of</b> <u>5</u>
through <u>06/30/2010</u>	

NAME OF FILER <u>Richard "Dick" Browning, Friends of Dick Browning for Council 2010</u>	I.D. NUMBER <u>1320247</u>
---	-------------------------------

**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 (explain)             |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging and meals (explain)          |
| 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 OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)				
	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID

**SUBTOTAL \$ 0.00**

**Schedule E Summary**

- |  |                 |
|--|-----------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.) .....   | \$ <u>0.00</u>  |
| 2. Unitemized payments made this period of under \$100. ....   | \$ <u>23.88</u> |
| 3. Total interest paid this period on outstanding loans. (Enter amount from Schedule B, Part 1, Column(e).) .....                    | \$ <u>0.00</u>  |
| 4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) .... <b>TOTAL</b> | \$ <u>23.88</u> |