

# Recipient Committee Campaign Statement Cover Page

DATE STAMP: RECEIVED CITY OF LOS ANGELES 18 JUL -3 PM 12:55

CALIFORNIA FORM 460

Page 1 of 6

For Official Use Only

Date of election if applicable: (Month, Day, Year)

Statement covers period from 1/1/18 through 6/30/18

SEE INSTRUCTIONS ON REVERSE

- 1. Type of Recipient Committee:** All Committees - Complete Parts 1, 2, 3, and 4.
- Officerholder, Candidate Controlled Committee
  - State Candidate Election Committee
  - Recall (Also Complete Part 8)
  - 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/Officerholder Committee (Also Complete Part 7)

- 2. Type of Statement:**
- Prelection Statement
  - Semi-annual Statement
  - Termination Statement (Also file a Form 410 Termination)
  - Amendment (Explain below)
  - Quarterly Statement
  - Special Odd-Year Report

**3. Committee Information**

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
Troy Edgar for City Council 2014

I.D. NUMBER  
1288438

**Treasurer(s)**

NAME OF TREASURER  
Gary Coppel

MAILING ADDRESS  
[REDACTED]

CITY STATE ZIP CODE  
Long Beach Ca 90808

NAME OF ASSISTANT TREASURER, IF ANY  
Troy Edgar

MAILING ADDRESS  
[REDACTED]

CITY STATE ZIP CODE  
Los Alamitos Ca 90720

OPTIONAL: FAX / E-MAIL ADDRESS

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

CITY STATE ZIP CODE  
Los Alamitos Ca 90720

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

CITY STATE ZIP CODE  
[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 7/2/18 Date

Executed on 7/2/18 Date

Executed on \_\_\_\_\_ Date

Executed on \_\_\_\_\_ Date

By \_\_\_\_\_ Assistant Treasurer

By \_\_\_\_\_ Proponent or Responsible Officer of Sponsor

By \_\_\_\_\_ Candidate, State Measure Proponent

By \_\_\_\_\_ Signature of Controlling Officerholder, Candidate, State Measure Proponent

**Recipient Committee  
Campaign Statement  
Cover Page — Part 2**

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE  
**Troy Edgar**

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

City Council Member- Los Alamitos

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP  
Los Alamitos Ca. 90720

**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? <input type="checkbox"/> YES <input type="checkbox"/> 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? <input type="checkbox"/> YES <input type="checkbox"/> 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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> 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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

Attach continuation sheets if necessary

# Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

CALIFORNIA FORM **460**

Statement covers period from 1/1/18 through 6/30/18 Page 3 of 6

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER  
**Troy Edgar for City Council 2014**  
I.D. NUMBER  
**1289438**

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

Column B  
CALENDAR YEAR  
TOTAL TO DATE

Column A  
TOTAL THIS PERIOD  
(FROM ATTACHED SCHEDULES)

1/1 through 6/30 7/1 to Date

20. Contributions Received \$ \_\_\_\_\_

21. Expenditures Made \$ \_\_\_\_\_

Schedule A, Line 3 \$ 41000

Schedule B, Line 3 \$ 41000

Add Lines 1 + 2 \$ \_\_\_\_\_

Schedule C, Line 3 \$ 41000

Add Lines 3 + 4 \$ \_\_\_\_\_

## Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made\*  
(if subject to Voluntary Expenditure Limit)

Date of Election \_\_\_\_\_ Total to Date \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

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

## Contributions Received

- 1. Monetary Contributions ..... Schedule A, Line 3 \$ \_\_\_\_\_
- 2. Loans Received ..... Schedule B, Line 3 \$ \_\_\_\_\_
- 3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1 + 2 \$ \_\_\_\_\_
- 4. Nonmonetary Contributions ..... Schedule C, Line 3 \$ \_\_\_\_\_
- 5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 + 4 \$ \_\_\_\_\_

## Expenditures Made

- 6. Payments Made ..... Schedule E, Line 4 \$ 0
- 7. Loans Made ..... Schedule H, Line 3 \$ 0
- 8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7 \$ \_\_\_\_\_
- 9. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3 \$ \_\_\_\_\_
- 10. Nonmonetary Adjustment ..... Schedule G, Line 3 \$ \_\_\_\_\_
- 11. TOTAL EXPENDITURES MADE ..... Add Lines 8 + 9 + 10 \$ \_\_\_\_\_

## Current Cash Statement

- 12. Beginning Cash Balance ..... Previous Summary Page, Line 16 \$ 863
  - 13. Cash Receipts ..... Column A, Line 3 above \$ \_\_\_\_\_
  - 14. Miscellaneous Increases to Cash ..... Schedule I, Line 4 \$ \_\_\_\_\_
  - 15. Cash Payments ..... Column A, Line 8 above \$ 863
  - 16. ENDING CASH BALANCE ..... Add Lines 12 + 13 + 14, then subtract Line 15 \$ \_\_\_\_\_
- If this is a termination statement, Line 16 must be zero.*

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).

## LOAN GUARANTEES RECEIVED

Schedule B, Part 2 \$ \_\_\_\_\_

## Cash Equivalents and Outstanding Debts

- 18. Cash Equivalents ..... See instructions on reverse \$ \_\_\_\_\_
- 19. Outstanding Debts ..... Add Line 2 + Line 9 in Column B above \$ 41000

Amounts may be rounded to whole dollars.

**Schedule B - Part 1  
Loans Received**

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER: **Troy Edgar for City Council 2014**  
Statement covers period from **1/1/18** through **6/30/18**  
Page **4** of **6**  
I.D. NUMBER: **1289438**

IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	IF COMMITTEE, ALSO ENTER I.D. NUMBER	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT RECEIVED THIS PERIOD	AMOUNT PAID OR FORGIVEN THIS PERIOD*	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE
		(a)	(b)	(c)	(d)	(e)	(f)	(g)
President & CEO Global Conductor, Inc.	[REDACTED] LOS Alamitos, Ca. 90720	\$ 2000	\$	<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	\$ 2000 DATE DUE	0 % RATE	\$ 2000 8/24/06 DATE INCURRED	\$ PER ELECTION** \$
President & CEO Global Conductor, Inc.	[REDACTED] LOS Alamitos, Ca. 90720	\$ 3000	\$	<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	\$ 3000 DATE DUE	0 % RATE	\$ 3000 9/27/06 DATE INCURRED	\$ PER ELECTION** \$
President & CEO Global Conductor, Inc.	[REDACTED] Los Alamitos, Ca. 90720	\$ 3000	\$	<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	\$ 3000 DATE DUE	0 % RATE	\$ 3000 10/04/06 DATE INCURRED	\$ PER ELECTION** \$
		<b>SUBTOTALS \$</b>		<b>\$</b>	<b>\$ 8000</b>	<b>\$</b>		

(Enter (e) on Schedule E, Line 3)

- Schedule B Summary**
- Loans received this period ..... \$ 0  
(Total Column (b) plus unfertilized loans of less than \$100.)
  - Loans paid or forgiven this period ..... \$ 0  
(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 \$** 0  
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**

Amounts may be rounded to whole dollars.

Statement covers period  
from 1/1/18  
through 6/30/18

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

**Troy Edgar for City Council 2014**

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)	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT RECEIVED THIS PERIOD	AMOUNT PAID OR FORGIVEN THIS PERIOD*	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE
Troy Edgar LOS ANGELES, Ca. 90720	President & CEO Global Conductor, Inc.	\$ 6000	\$	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN \$	\$ 6000 DATE DUE	0 % RATE	\$ 6000 DATE INCURRED 12/08/06	\$ PER ELECTION**
Troy Edgar LOS ANGELES, Ca. 90720	President & CEO Global Conductor, Inc.	\$ 10000	\$	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN \$	\$ 10000 DATE DUE	0 % RATE	\$ 10000 DATE INCURRED 10/01/08	\$ PER ELECTION**
Troy Edgar LOS ANGELES, Ca. 90720	President & CEO Global Conductor, Inc.	\$ 10000	\$	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN \$	\$ 10000 DATE DUE	0 % RATE	\$ 10000 DATE INCURRED 11/12/08	\$ PER ELECTION**
<b>SUBTOTALS \$</b>								\$ 26000

(Enter (b) on Schedule E, Line 3)

**Schedule B Summary**

- Loans received this period ..... \$ 0  
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period ..... \$ 0  
(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 \$ 0  
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**

Amounts may be rounded to whole dollars.

Statement covers period from 1/1/18 through 6/30/18

Page 6 of 6

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Troy Edgar for City Council 2014

I.D. NUMBER  
1289438

FULL NAME, STREET ADDRESS AND ZIP CODE <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT RECEIVED THIS PERIOD	AMOUNT PAID OR FORGIVEN THIS PERIOD*	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE
Troy Edgard LOS ANGELES, CA 90020	President & CEO Global Conductor, Inc.	3500		<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	3500	0 %	3500	10/21/10
Troy Edgard LOS ANGELES, CA 90020	President & CEO Global Conductor, Inc.	2500		<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	2500	0 %	2500	11/19/10
<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
<b>SUBTOTALS</b>		\$ 1000	\$ 7000	\$ 0	\$ 0	0 %	\$ 1000	04/16/11

**Schedule B Summary**

- Loans received this period ..... \$ 0  
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period ..... \$ 0  
(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 \$ 0  
(May be a negative number)

†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.