1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.
   - [X] Officerholder, 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 5)
   - [ ] Primarily Formed Candidate/
     Officeholder Committee
     (Also Complete Part 7)

2. Type of Statement:
   - [ ] Preliminary Statement
   - [ ] Semi-annual Statement
   - [ ] Termination Statement
     (Also file a Form 410 Termination)
   - [ ] Amendment (Explain below)

3. Committee Information
   - I.D. NUMBER: 135 15-49
   - COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE): Renee Murphy for City Council 2013
   - STREET ADDRESS AND OFFICE: [Redacted]
   - CITY: [Redacted]
   - STATE: CA
   - ZIP CODE: 90712
   - Mailing Address (if different) No. and Street or P.O. Box:
   - CITY: [Redacted]
   - STATE: CA
   - ZIP CODE: 90712
   - NAME OF TREASURER: [Redacted]
   - NAME OF ASSISTANT TREASURER, IF ANY: [Redacted]
   - Mailing Address:
     - CITY: [Redacted]
     - STATE: CA
     - ZIP CODE: 90712
     - AREA CODE/PHONE:
   - 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 and schedules is true and complete. I certify
   [Redacted]
   [Redacted]
   [Redacted]
   [Redacted]
   [Redacted]
   [Redacted]
   [Redacted]

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
State of California
5. Officeholder or Candidate Controlled Committee

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Office Sought or Held (include location and district number if applicable)</td>
<td></td>
</tr>
<tr>
<td>Residential/Business Address (No. and street)</td>
<td>City</td>
</tr>
</tbody>
</table>

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.

<table>
<thead>
<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
<th>CONTROLLED COMMITTEE?</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF TREASURER</td>
<td>CONTROLLED COMMITTEE?</td>
<td></td>
</tr>
<tr>
<td>COMMITTEE ADDRESS</td>
<td>STREET ADDRESS (NO P.O. BOX)</td>
<td></td>
</tr>
<tr>
<td>CITY</td>
<td>STATE</td>
<td>ZIP CODE</td>
</tr>
</tbody>
</table>

6. Primarily Formed Ballot Measure Committee

<table>
<thead>
<tr>
<th>NAME OF BALLOT MEASURE</th>
<th>BALLOT NO. OR LETTER</th>
<th>JURISDICTION</th>
<th>SUPPORT</th>
<th>OPPOSE</th>
</tr>
</thead>
</table>

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

| NAME OF OFFICEHOLDER, CANDIDATE, OR PROпонENT |
| 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.

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
<th>SUPPORT</th>
<th>OPPOSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
<td>SUPPORT</td>
<td>OPPOSE</td>
</tr>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
<td>SUPPORT</td>
<td>OPPOSE</td>
</tr>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
<td>SUPPORT</td>
<td>OPPOSE</td>
</tr>
</tbody>
</table>

Area Code/Phone

Attach continuation sheets if necessary
### Contributions Received

1. Monetary Contributions .......................................... Schedule A, Line 3 $  
2. Loans Received ...................................................... Schedule B, Line 3 $ -1,500  
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 $ -1,500  
4. Nonmonetary Contributions ........................................ Schedule C, Line 3 $  
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 $ -1,500  

### Expenditures Made

6. Payments Made .................................................. Schedule E, Line 4 $ 418  
7. Loans Made ....................................................... Schedule H, Line 3 $  
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 $ 418  
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 $  
10. Nonmonetary Adjustment ........................................ Schedule C, Line 3 $  
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10 $ 418  

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

<table>
<thead>
<tr>
<th>Description</th>
<th>From 1/1 through 6/30</th>
<th>7/1 to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contributions Received</td>
<td>$ 7,500</td>
<td>$ 7,500</td>
</tr>
<tr>
<td>Expenditures Made</td>
<td>$ 7,178</td>
<td>$ 7,178</td>
</tr>
</tbody>
</table>

### Expenditure Limit Summary for State Candidates

<table>
<thead>
<tr>
<th>Description</th>
<th>Date of Election</th>
<th>Total to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>22. Cumulative Expenditures Made*</td>
<td>1/1</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>1/1</td>
<td>$</td>
</tr>
</tbody>
</table>

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

### Current Cash Statement

12. Beginning Cash Balance Previous Summary Page, Line 16 $ 2,246  
13. Cash Receipts ................. Column A, Line 3 above $ -1,500  
14. Miscellaneous Increases to Cash Schedule I, Line 4 $ 418  
15. Cash Payments .................. Column A, Line 8 above $ 418  
16. ENDING CASH BALANCE ........... Add Lines 12 + 13 + 14, then subtract Line 15 $ 322  

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

### Cash Equivalents and Outstanding Debts

18. Cash Equivalents See Instructions on reverse $  
19. Outstanding Debts .............. Add Line 2 + Lines 9 in Column B above $ 7,500  

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 8 (if any).
### Schedule B - Part 1

**Loans Received**

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

**NAME OF FILER:**

**FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER**

- **Ricardo Murphy**
- **FOR CITY COUNCIL 2012**
- **325/1549**

<table>
<thead>
<tr>
<th>Occupation</th>
<th>Amount Received This Period</th>
<th>Amount Paid or Forgiven This Period</th>
<th>Outstanding Balance at Close of This Period</th>
<th>Interest Paid This Period</th>
<th>Original Amount of Loan</th>
<th>Cumulative Contributions to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-Employed</td>
<td>$9000</td>
<td>$1800</td>
<td>$7500</td>
<td>Rate %</td>
<td>$</td>
<td>CALENDAR YEAR</td>
</tr>
<tr>
<td>IND</td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>Rate %</td>
<td>$</td>
<td>PER ELECTION**</td>
</tr>
<tr>
<td>OTH</td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>Rate %</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

**SUBTOTALS**

- $1500
- $7500

### Schedule B Summary

1. Loans received this period
   - (Total Column (b) plus unitemized loans of less than $100.)

2. Loans paid or forgiven this period
   - (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.)
   - Enter the net here and on the Summary Page, Column A, Line 2.

**NET $ -1500**

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

**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 Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) $339
2. Unitemized payments made this period of under $100 $79
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e.).) $0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) TOTAL $418

---

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attack called Press</td>
<td>LIT</td>
<td>campaign literature and mailings</td>
<td>[339]</td>
</tr>
</tbody>
</table>

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL $339

---

**SCHEDULEE**

PAYMENTS MADE

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ricardo Neeley for City Council 2012

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

- 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
- MEB member communications
- MTG meetings and appearances
- OFC office expenses
- PET petition circulating
- PHO phone banks
- POL polling and survey research
- POS postage, delivery and messenger services
- PRO professional services (legal, accounting)
- PRT print ads
- RAD radio airtime and production costs
- RTD returned contributions
- SAL campaign workers' salaries
- TEL l.v. or cable airline and production costs
- TRC candidate travel, lodging, and meals
- TRS staff/spouse travel, lodging, and meals
- TSF transfer between committees of the same candidate/sponsor
- VOT voter registration
- WEB information technology costs (internet, e-mail)

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**CALIFORNIA FORM 460**

Statement covers period from 10-31-12 through 11-31-12 Page 5 of 5

ID. NUMBER 1351549