

# Supplemental Independent Expenditure Report

(Government Code Section 84203.5)

SEE INSTRUCTIONS ON REVERSE

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

SUPPLEMENTAL INDEPENDENT EXPENDITURE

Report covers period from <u>7/1/04</u> through <u>9/30/04</u>	Date Stamp <u>7/1/04</u>	CALIFORNIA FORM <b>465</b>
Date of election if applicable: (Month, Day, Year) <u>11/2/04</u>		

**Amendment** (Explain Below)  
Correction of clerical error; legal interpretation

## 1. Committee/Filer Information

COMMITTEE/FILER'S NAME

Headlands Reserve LLC

STREET ADDRESS (NO P.O. BOX)

24549 Del Prado

CITY

STATE

ZIP CODE

AREA CODE/PHONE

Dana Point CA 92629 9494888800

OPTIONAL: FAX / E-MAIL ADDRESS

I.D. NUMBER (If recipient committee)

## Treasurer (If recipient committee)

NAME OF TREASURER

MAILING ADDRESS

CITY

STATE

ZIP CODE

AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

## 2. Name of Candidate or Measure Supported or Opposed

NAME OF CANDIDATE

April O Connor

NAME OF BALLOT MEASURE

OFFICE SOUGHT OR HELD AND DISTRICT, IF APPLICABLE

Dana Point City Council

BALLOT NO./LETTER

JURISDICTION

CHECK ONE

SUPPORT

OPPOSE

SUPPORT

OPPOSE

## 3. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	NAME AND ADDRESS OF PAYEE	DESCRIPTION OF EXPENDITURE	AMOUNT	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)
7/19/04	Citizens for Representative Gov't 9000 Sunset Blvd #707 Los Angeles CA 90069	State mailer	412.00	3742.00
7/23/04	Council of concerned women voters 2350 Hidalgo Ave Los Angeles CA 90039	state mailer	269.00	4011.00
7/23/04	Coalition for senior citizen security 2350 Hidalgo Ave Los Angeles CA 90039	state mailer	414.00	4425.00

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<u>7/23/04</u>	<u>Your Ballot + Guide 15030 Ventura Blvd. #530 Sherman Oaks CA 91403</u>	<u>State mailer</u>	<u>500.00</u>	<u>4925.00</u>
<u>8/6/04</u>	<u>CA Senior Voter Guide 2999 Overland Ave Ste 210 Los Angeles CA 90064</u>	<u>State mailer</u>	<u>363.50</u>	<u>5288.50</u>
<u>8/13/04</u>	<u>Save Prop 13 5405 Arton Pkwy 5A-380 Irvine CA 92604</u>	<u>State mailer</u>	<u>560.00</u>	<u>5848.50</u>

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**Treasurer** (If recipient committee)

COMMITTEE/FILER'S NAME

NAME OF TREASURER

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OPTIONAL: FAX / E-MAIL ADDRESS

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## 2. Name of Candidate or Measure Supported or Opposed

CHECK ONE

NAME OF CANDIDATE <u>April O'Connor</u>	OFFICE SOUGHT OR HELD AND DISTRICT, IF APPLICABLE <u>Dana Point City Council</u>	SUPPORT <input checked="" type="checkbox"/>	OPPOSE <input type="checkbox"/>
NAME OF BALLOT MEASURE	BALLOT NO./LETTER	JURISDICTION	SUPPORT <input type="checkbox"/>
			OPPOSE <input type="checkbox"/>

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8/13/04	OWPS Voter Guide 705-2E Bidwell St #258 Folsom CA 95630	slate mailer	500.00	6348.50
8/13/04	Republican Voter Checklist 19300 S. Hamilton Ave Ste. 175 Gardena CA 90248	slate mailer	250.00	6598.50
8/13/04	Independent Voters League 924 16th St. Hermosa Beach CA 90254	slate mailer	125.00	6723.50

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<u>8/13/04</u>	<u>Parents and Teachers for a Better CA 924 16th St. Hermosa Beach CA 90254</u>	<u>State mailer</u>	<u>125.00</u>	<u>6848.50</u>
<u>8/13/04</u>	<u>Team California 400 Capital Mall # 1560 Sacramento CA 95814</u>	<u>State mailer</u>	<u>50.00</u>	<u>6898.50</u>
<u>9/15/04</u>	<u>OC Firefighter Voter Guide 5405 Alton Pkwy Ste 5A-380 Irvine CA 92604</u>	<u>State mailer</u>	<u>1000.00</u>	<u>7898.50</u>

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DATE	NAME AND ADDRESS OF PAYEE	DESCRIPTION OF EXPENDITURE	AMOUNT	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)
9/2/04	South Coast Sign Company 641 Camino de Losmares Ct San Clemente CA 92673	campaign banners	750.00	8648.50
9/16/04	COGS 3309 S. Main St. Santa Ana CA 92707	campaign signs	563.00	9211.50
9/16/04	POST International 31441 Santa Margarita Pkwy A206 Rancho Santa Margarita CA 92688	campaign signs	312.50	9524.00

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NAME OF BALLOT MEASURE	BALLOT NO./LETTER	JURISDICTION	OPPOSE

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DATE	NAME AND ADDRESS OF PAYEE	DESCRIPTION OF EXPENDITURE	AMOUNT	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)
<u>5/24, 7/17 7/21, 8/20 9/29</u>	<u>Brian Park Consulting Inc. 5405 HILTON PKWY 5A-380 IRVINE CA 92604</u>	<u>consulting</u>	<u>4733.33</u>	<u>14,257.33</u>
<u>9/10/04</u>	<u>Probolsky Research 23276 SOUTH POINTE DR STE 200 LAGUNA HILLS CA 92653</u>	<u>voter survey</u>	<u>4316.67</u>	<u>18,574.00</u>

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	Page <u>7</u> of <u>7</u>
I.D. NUMBER (if recipient com.)	

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NAME OF FILER Headlands Reserve LLC

## 4. Summary

- 1. Total independent expenditures of \$100 or more made this period. (Part 3.) ..... \$ 15,244.00
- 2. Total independent expenditures under \$100 made this period. (Not itemized.) ..... \$ \_\_\_\_\_
- 3. Total independent expenditures made this period (Add Lines 1 + 2.) ..... **TOTAL** \$ 15,244.00

## 5. Filing Officers *Enter the name and address of each filing officer with whom the filer's most recent campaign statements (Form 450, 460 or 461) have been filed.*

<p>1) NAME OF FILING OFFICER _____</p> <p>ADDRESS _____ (NO. AND STREET)</p> <p>CITY _____ STATE _____ ZIP CODE _____</p>	<p>3) NAME OF FILING OFFICER _____</p> <p>ADDRESS _____ (NO. AND STREET)</p> <p>CITY _____ STATE _____ ZIP CODE _____</p>
<p>2) NAME OF FILING OFFICER _____</p> <p>ADDRESS _____ (NO. AND STREET)</p> <p>CITY _____ STATE _____ ZIP CODE _____</p>	<p>4) NAME OF FILING OFFICER _____</p> <p>ADDRESS _____ (NO. AND STREET)</p> <p>CITY _____ STATE _____ ZIP CODE _____</p>

## 6. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein 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 <u>10/20/04</u> DATE	By <u>[Signature]</u> SIGNATURE OF TREASURER OR ASSISTANT TREASURER
Executed on _____ DATE	By _____ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT, OR RESPONSIBLE 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