

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

RECEIVED stamp with date 2001 JAN 23 P 4: 33 and California Form 460 information.

Type or print in ink.

Date of election if applicable: (Month, Day, Year) and Statement covers period from 3-4-01, 2006 through DEC 31, 2006

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. Includes checkboxes for Officeholder, Candidate Controlled Committee, etc.

2. Type of Statement: Prelection Statement, Semi-annual Statement, etc. Includes checkboxes and fields for Treasurer(s) and Committee Information.

3. Committee Information: STREET ADDRESS (NO P.O. BOX) FRIENDS OF RUBY NETZLEY, 34072 CALLE LA PRIMAVERA, DANA POINT, CA 92629-2676

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.

Type or print in ink.

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

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE  
Ruby L. Netzeley  
 OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)  
City Council Member, Dana Point, Ca.  
 RESIDENT/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP  
34072 Calle La Primavera, Dana Point Ca 92629-2176

**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  
FRIENDS OF RUBY NETZELEY 1225438  
 NAME OF TREASURER JENN SANSAL (Deceased) CONTROLLED COMMITTEE?  YES  NO  
 COMMITTEE ADDRESS (NO P.O. BOX) STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE AREA CODE/PHONE  
Ruby Netzeley (deceased) 34072 Calle La Primavera Dana Point, Ca. 92629 (949) 248-7444

NAME OF TREASURER  
 COMMITTEE ADDRESS (NO P.O. BOX) 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 officeholders(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	<input type="checkbox"/>	<input type="checkbox"/>
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/>	<input type="checkbox"/>
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/>	<input type="checkbox"/>
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/>	<input type="checkbox"/>

Attach continuation sheets if necessary

**Campaign Disclosure Statement  
Summary Page**

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

SUMMARY PAGE

CALIFORNIA  
FORM **460**

Statement covers period  
from Jan 1, 2006  
through Dec 31, 2006  
Page 3 of 5

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

ID. NUMBER  
1225438

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

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
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	\$	\$

1/1 through 6/30 7/1 to Date  
20. Contributions Received \$  
21. Expenditures Made \$

**Expenditures Made**

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

**Expenditure Limit Summary for State  
Candidates**

22. Cumulative Expenditures Made\*  
(If Subject to Voluntary Expenditure Limit)

Date of Election \_\_\_\_\_ Total to Date  
(mm/dd/yy) \_\_\_\_\_ \$ \_\_\_\_\_

**Current Cash Statement**

12. Beginning Cash Balance ..... Previous Summary Page, Line 16	\$
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	\$
16. ENDING CASH BALANCE ..... Add Lines 12 + 13 + 14, then subtract Line 15	\$

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**

17. LOAN GUARANTEES RECEIVED ..... Schedule B, Part 2	\$
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**Cash Equivalents and Outstanding Debts**

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

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

**Schedule A  
Monetary Contributions Received**

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

FRIENDS OF RUBY NETZLEY

I.D. NUMBER  
1225438

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)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
				<b>SUBTOTAL \$</b>		

**Schedule A Summary**

- Amount received this period - itemized monetary contributions. (Include all Schedule A subtotals.) ..... \$ 0
- Amount received this period - unitemized monetary contributions of less than \$100 ..... \$ 0
- Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$** 0

\*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

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

**Schedule B - Part 1**  
**Loans Received**

Statement covers period  
from JULY 1, 2006  
through DEC 31, 2006

CALIFORNIA **460**  
FORM

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SEE INSTRUCTIONS ON REVERSE

I.D. NUMBER  
1225438

FRIENDS OF RUBY NETZLEY

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF INDIVIDUAL, ENTER NAME OF BUSINESS)	OUTSTANDING BALANCE AT BEGINNING OF 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	PER ELECTION**	
									DATE INCURRED	PER ELECTION**
Ruby L. Netzley 34072 Calle La Princesa Dana Point, Ca 92629 <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$ 3866.44			\$ 3866.44		\$ 4,920.00			
SUBTOTALS \$ 0 \$ - \$ 3866.44 \$ 0.								(Enter #1 on Schedule E, Line 2)		

**Schedule B Summary**

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