

Recipient Committee  
**Campaign Statement**  
 Cover Page  
 (Government Code Sections 84200-84216.5)

COVER PAGE

Date Stamp  
**RECEIVED**  
 CALIFORNIA 460  
 200102 FORM  
 2007 JAN 30 P 12:08 of 2  
 For Official Use Only  
 CITY OF BANA POINT

Type or print in ink.

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

Statement covers period  
 from 7/1/06  
 through 12/31/06

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.
- Officer, Candidate Controlled Committee
  - State Candidate Election Committee
  - Recall (See Complete Part 5)
  - General Purpose Committee
  - Sponsored
  - Small Contributor Committee
  - Political Party/Central Committee
- Officer, Candidate Controlled Committee
- Primary Formed
  - Controlled
  - Sponsored (See Complete Part 6)
  - Primary Formed Candidate/Officer Committee (See Complete Part 7)
2. Type of Statement:
- Prediction Statement
  - Semi-annual Statement
  - Termination Statement
  - Amendment (Explain below)
  - Quarterly Statement
  - Special Odd-Year Report
  - Supplemental Prediction
  - Statement - Attach Form 495

3. Committee Information

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Clean Beaches Coalition

I.D. NUMBER 226177

STREET ADDRESS (NO P.O. BOX) 24843 Del Prado Ste 262

CITY Dana Point STATE CA ZIP CODE 92629 AREA CODE/PHONE (949)489-0502

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

Treasurer(s)  
 NAME OF TREASURER Everett David Busk  
 MAILING ADDRESS PO Box 3660  
 CITY Dana Point STATE CA ZIP CODE 92629 AREA CODE/PHONE (949)489-6502  
 NAME OF ASSISTANT TREASURER, IF ANY \_\_\_\_\_  
 MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ 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 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 1/26/07 Date

By David Busk Signature of Candidate/Officer, Candidate, State Measure Proponent

By \_\_\_\_\_ Signature of Controlling Officer/Candidate, State Measure Proponent

By \_\_\_\_\_ Signature of Controlling Officer/Candidate, State Measure Proponent

By \_\_\_\_\_ Signature of Controlling Officer/Candidate, State Measure Proponent

PPS Form 460 (Unaudited)  
 PPS Form 460/rev 10/06  
 State of California

**Campaign Disclosure Statement  
Summary Page**

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

SUMMARY PAGE

CALIFORNIA **460**  
FORM

Statement covers period  
from 7/1/06  
through 12/31/06

Page 2 of 2  
I.D. NUMBER  
1226179

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

Clean Beaches Coalition

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

Column B  
CALENDAR YEAR  
TOTAL TO DATE

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

**Contributions Received**

Column A  
TOTAL RECEIPTS  
(FROM ATTACHED SCHEDULES)

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 \$ -0-

**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 G, Line 3 \$ \_\_\_\_\_  
11. TOTAL EXPENDITURES MADE ..... Add Lines 8 + 9 + 10 \$ -0-

**Current Cash Statement**

12. Beginning Cash Balance ..... Previous Summary Page, Line 16 \$ 162.79  
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 \$ 162.79  
*If this is a termination statement, Line 16 must be zero.*

**LOAN GUARANTEES RECEIVED**

17. 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 \$ \_\_\_\_\_

**Expenditure Limit Summary for State  
Candidates**

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

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

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).

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