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

Statement covers period from 01/01/2011 through 06/30/2011

Date of Election if applicable: 2011 AUG - 1 A 10:51

1. Type of Recipient Committee:
☐ Officeholder, Candidate Controlled Committee
☐ Ballot Measure Committee
☐ State Candidate Election Committee
☐ Primarily Formed
☐ Controlled
☐ Sponsored
☐ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☐ Political Party/Central Committee
☐ Primarily Formed Candidate
☐ Officeholder Committee

2. Type of Statement:
☐ Pre-election Statement
☐ Semi-annual Statement
☐ Termination Statement
☐ Amendment (Explain below)
☐ Quarterly Statement
☐ Special Odd-Year Report
☐ Supplemental Pre-election Statement - Attach Form 495

3. Committee Information

COMMITTEE NAME
Bill Brough For Dana Point City Council 2010

STREET ADDRESS (NO P.O. BOX)

CITY
STATE
ZIP CODE
AREA CODE/PHONE

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

CITY
STATE
ZIP CODE
AREA CODE/PHONE

OPTIONAL FAX/EMAIL 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 8-1-2011
Executed on 1 AUB 11

By
Signature of Treasurer or Assistant Treasurer

STATE OF CALIFORNIA
Fair Political Practices Commission

COVER PAGE
California Form 460
Page 1 of 6
A For Official Use Only

EXECUTED ON

DATE

S/CCW - PCAP011202012217 (Rev. January/05)
5. Officeholder or Candidate Controlled Committee

**NAME OF OFFICEHOLDER OR CANDIDATE**

William Brough

**OFFICE Sought OR Held (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)**

City Council Member, Dana Point

**RESIDENTIAL/BUSINESS ADDRESS (NO AND STREET) CITY**

State ZIP Code

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**Related Committees Not Included in this Statement:** List any committees not included in this consolidated statement that are controlled by you or which are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

**COMMITTEE NAME**

**I.D. NUMBER**

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6. Primarily Formed Ballot Measure Committee

**NAME OF BALLOT MEASURE**

**BALLOT NO. OR LETTER JURISDICTION**

**Enter Box**

**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**

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7. Primarily Formed Candidate/Officeholder Committee

**NAME OF OFFICEHOLDER OR CANDIDATE**

**OFFICE Sought OR Held**

**SUPPORT**

**OPPOSE**

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**Contributions Received**

1. Monetary Contributions .................................. Schedule A, Line 3 $ 890.00 $ 890.00
2. Loans Received .................................................. Schedule B, Line 7 0.00 0.00
3. SUBTOTAL CASH CONTRIBUTIONS .................. Add Lines 1 + 2 $ 890.00 $ 890.00
4. Nonmonetary Contributions ............................ Schedule C, Line 3 0.00 0.00
5. TOTAL CONTRIBUTIONS RECEIVED .................. Add Lines 3 + 4 $ 890.00 $ 890.00

**Expenditures Made**

6. Cash Payments .................................................. Schedule E, Line 4 $ 479.00 $ 479.00
7. Loans Made ......................................................... Schedule H, Line 7 0.00 0.00
8. SUBTOTAL CASH PAYMENTS .......... Add Lines 6 + 7 $ 479.00 $ 479.00
9. Accrued Expenses (Unpaid Bills) ............ Schedule F, Line 3 0.00 4,017.65
10. Nonmonetary Adjustment ................. Schedule C, Line 3 0.00 0.00
11. TOTAL EXPENDITURES MADE .................. Add Lines 8 + 9 + 10 $ 479.00 $ 4,496.65

**Current Cash Statement**

12. Beginning Cash Balance .......... Previous Summary Page, Line 16 $ 370.92
13. Cash Receipts ........................................ Column A, Line 3 above 890.00
14. Miscellaneous Increases to Cash .......... Schedule I, Line 4 0.00
15. Cash Payments ........................................ Column A, Line 8 above 479.00
16. ENDING CASH BALANCE ........ Lines 12+13+14, less Line 15 $ 781.92

*If this is a Termination Statement, Line 16 must be zero.*

17. LOAN GUARANTEES RECEIVED Schedule B, Part 1, Column (b) 0.00

**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents ............................................. 0.00
19. Outstanding Debts .......... Add Line 2 + Line 9 in Column C above $ 4,017.65

S/CCW - PCAP01120262217 (Rev. January/05)
**Schedule A**  
**Monetary Contributions Received**

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR</th>
<th>CONTRIBUTOR CODE</th>
<th>IF AN INDIVIDUAL ENTER OCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>06/27/2011</td>
<td>Cox Communications</td>
<td></td>
<td></td>
<td>640.00</td>
<td>640.00</td>
<td></td>
</tr>
<tr>
<td>04/01/2011</td>
<td>Hennesseys Inc.</td>
<td></td>
<td></td>
<td>250.00</td>
<td>250.00</td>
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</tbody>
</table>

**SUBTOTAL** $890.00

**Schedule A Summary**

1. Amount received this period - itemized monetary contributions.  
   (Include all Schedule A subtotals.) ........................................... $ 890.00

2. Amount received this period – unitemized monetary contributions of less than $100.  
   .................................................................................................................. $ 0.00

3. Total monetary contributions received this period.  
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .......... TOTAL $ 890.00
Schedule E
Payments Made

NAME OF FILER  William Brough,  Bill Brough For Dana Point City Council 2010

NAME AND ADDRESS OF PAYEE OR CREDITOR

Dana Point Historical Society

<table>
<thead>
<tr>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>CVC</td>
<td></td>
<td>300.00</td>
</tr>
</tbody>
</table>

SUBTOTAL $ 300.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) .............................................. $ 300.00
2. Unitemized payments made this period of under $100. ............................................................ $ 179.00
3. Total interest paid this period on outstanding loans. (Enter amount from Schedule B, Part 1, Column(e).) ................................. $ 0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) .... TOTAL $ 479.00
Schedule F
Accrued Expenses (Unpaid Bills)

NAME OF FILER: William Brough, Bill Brough For Dana Point City Council 2010

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

- CMP: campaign paraphernalia/wise
- CNS: campaign consultants
- CTR: 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
- MBR: membership communications
- MTG: mailings and advertisements
- OFC: office expenses
- PET: petition circulating
- PEO: phone banks
- POL: polling and survey research
- POS: postage, delivery and messenger services
- PRO: professional services (legal, accounting)
- PRT: print ads
- RAD: radio airline and production costs
- RFD: returned contributions
- SAL: campaign workers' salaries
- TEL: tv or cable airline and production costs
- TRC: candidate travel, lodging and meals (explain)
- TRS: staff/facility travel, lodging and meals (explain)
- TSP: transfer between committees of the same candidate/sponsor
- VOT: voter registration
- WEB: information technology costs (internet, e-mail)

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE OR CREDITOR</th>
<th>CODE OR DESCRIPTION OF PAYMENT</th>
<th>(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD</th>
<th>(b) AMOUNT INCURRED THIS PERIOD</th>
<th>(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON A)</th>
<th>(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
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<tbody>
<tr>
<td>Visteva</td>
<td>LIT</td>
<td>4,017.65</td>
<td>0.00</td>
<td>0.00</td>
<td>4,017.65</td>
</tr>
</tbody>
</table>

SUBTOTALS $ 4,017.65 $ 0.00 $ 0.00 $ 4,017.65

Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for payments for accrued expenses of $100 or more, plus total unitemized accrued expenses under $100.) INCURRED TOTAL $ 0.00

2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for accrued expenses of $100 or more, plus total unitemized payments on accrued expenses under $100.) PAID TOTAL $ 0.00

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference and on the Summary Page, Column A, Line 9.) NET $ 0.00