

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

Date Stamp		CALIFORNIA FORM 460	
CITY OF SAN LEANDRO		Page <u>1</u> of <u>10</u>	For Official Use Only
JUL 31 2013			
CITY CLERK'S OFFICE			

Statement covers period from <u>1/1/2013</u> through <u>6/30/2013</u>	Date of election if applicable: (Month, Day, Year) <u>11/6/2012</u>
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SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.

- | | |
|---|--|
| <input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee
<input type="checkbox"/> State Candidate Election Committee
<input type="checkbox"/> Recall
<i>(Also Complete Part 5)</i> | <input type="checkbox"/> Primarily Formed Ballot Measure Committee
<input type="checkbox"/> Controlled
<input type="checkbox"/> Sponsored
<i>(Also Complete Part 6)</i> |
| <input type="checkbox"/> General Purpose Committee
<input type="checkbox"/> Sponsored
<input type="checkbox"/> Small Contributor Committee
<input type="checkbox"/> Political Party/Central Committee | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee
<i>(Also Complete Part 7)</i> |

2. Type of Statement:

- | | |
|---|---|
| <input type="checkbox"/> Preelection Statement | <input type="checkbox"/> Quarterly Statement |
| <input checked="" type="checkbox"/> Semi-annual Statement | <input type="checkbox"/> Special Odd-Year Report |
| <input type="checkbox"/> Termination Statement
<i>(Also file a Form 410 Termination)</i> | <input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
| <input type="checkbox"/> Amendment (Explain below) | |

3. Committee Information

I.D. NUMBER
1348446

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Benny Lee for City Council District 4 2012

STREET ADDRESS (NO P.O. BOX)
2238 Mariner Way

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>San Leandro</u>	<u>CA</u>	<u>94579</u>	<u>510-813-8033</u>

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER
Rose Ng

MAILING ADDRESS
2238 Mariner Way

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>San Leandro</u>	<u>CA</u>	<u>94579</u>	<u>510-813-8033</u>

NAME OF ASSISTANT TREASURER, IF ANY
N/A

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

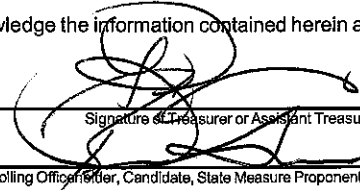
I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 6/30/2013
Date

Executed on 6/30/2013
Date

Executed on _____
Date

Executed on _____
Date

By 
Signature of Treasurer or Assistant Treasurer

By _____
Signature of Controlling Officer, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

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

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA
FORM **460**

Page 2 of 10

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
Benny Lee

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
City Council member, District 4

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
2238 Mariner Way San Leandro, CA 94579

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
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE
COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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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 *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

Attach continuation sheets if necessary

**Campaign Disclosure Statement
Summary Page**

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

SUMMARY PAGE

Statement covers period from <u>1/1/2013</u>	CALIFORNIA FORM 460
through <u>6/30/2013</u>	
Page <u>3</u> of <u>10</u>	I.D. NUMBER <u>1348446</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Benny Lee for City Council District 4 2012

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions <i>Schedule A, Line 3</i>	\$ <u>850</u>	\$ <u>850</u>
2. Loans Received <i>Schedule B, Line 3</i>	<u>512.41</u>	<u>13,069.41</u>
3. SUBTOTAL CASH CONTRIBUTIONS <i>Add Lines 1 + 2</i>	\$ <u>1,362.41</u>	\$ <u>13,919.41</u>
4. Nonmonetary Contributions <i>Schedule C, Line 3</i>	<u>-0-</u>	<u>-0-</u>
5. TOTAL CONTRIBUTIONS RECEIVED <i>Add Lines 3 + 4</i>	\$ <u>1,362.41</u>	\$ <u>13,919.41</u>

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

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

Expenditures Made

	Column A	Column B
6. Payments Made <i>Schedule E, Line 4</i>	\$ <u>1,419.41</u>	\$ <u>1,419.41</u>
7. Loans Made <i>Schedule H, Line 3</i>	<u>-0-</u>	<u>-0-</u>
8. SUBTOTAL CASH PAYMENTS <i>Add Lines 6 + 7</i>	\$ <u>1,419.41</u>	\$ <u>1,419.41</u>
9. Accrued Expenses (Unpaid Bills) <i>Schedule F, Line 3</i>	<u>-\$1,369.41</u>	<u>7,660.05</u>
10. Nonmonetary Adjustment <i>Schedule C, Line 3</i>	<u>-0-</u>	<u>-0-</u>
11. TOTAL EXPENDITURES MADE <i>Add Lines 8 + 9 + 10</i>	\$ <u>50</u>	\$ <u>9,079.46</u>

**Expenditure Limit Summary for State
Candidates**

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

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

Current Cash Statement

12. Beginning Cash Balance <i>Previous Summary Page, Line 16</i>	\$ <u>36.53</u>
13. Cash Receipts <i>Column A, Line 3 above</i>	<u>1,362.41</u>
14. Miscellaneous Increases to Cash <i>Schedule I, Line 4</i>	<u>785.53</u>
15. Cash Payments <i>Column A, Line 8 above</i>	<u>1,419.41</u>
16. ENDING CASH BALANCE <i>Add Lines 12 + 13 + 14, then subtract Line 15</i>	\$ <u>765.06</u>

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

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.

17. LOAN GUARANTEES RECEIVED *Schedule B, Part 2* \$ -0-

Cash Equivalents and Outstanding Debts

18. Cash Equivalents <i>See instructions on reverse</i>	\$ <u>-0-</u>
19. Outstanding Debts <i>Add Line 2 + Line 9 in Column B above</i>	\$ <u>20,729.46</u>

**Schedule A
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>1/1/2013</u>	CALIFORNIA FORM 460
through <u>6/30/2013</u>	
Page <u>4</u> of <u>10</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Benny Lee for City Council District 4 2012

I.D. NUMBER

1348446

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)
2/3/2013	Carl Basuino 239 Santa Ana, San Leandro, CA 94579	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retiree	\$100		\$200
3/18/2013	Tom Silva POB 126, San Lorenzo, CA 94580	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Realtor, Eden Realty	\$250		\$500
4/12/2013	Steve Song 800 Davis St., San Leandro, CA 94577	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner F H Dailey	\$500		
		<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				
SUBTOTAL \$				850		

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 850
- 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 \$** 850

***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 B – Part 1
Loans Received**

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

Statement covers period from <u>1/1/2013</u>	CALIFORNIA FORM 460
through <u>6/30/2013</u>	
Page <u>5</u> of <u>10</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Benny Lee for City Council District 4 2012

I.D. NUMBER

1348446

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD *	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Tony Santos 14495 Nassau Rd San Leandro, CA 94578 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retiree	\$ 300	\$	<input checked="" type="checkbox"/> PAID \$ 300 <input type="checkbox"/> FORGIVEN	\$ -0- DATE DUE	-0- % RATE	\$ 300 11/2/12 DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$
Rose Ng 2238 Mariner Way San Leandro, CA 94579 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$ 257	\$	<input checked="" type="checkbox"/> PAID \$ 257 <input type="checkbox"/> FORGIVEN	\$ -0- DATE DUE	-0- % RATE	\$ 257 12/14/12 DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$
Benny Lee 2238 Mariner Way San Leandro, CA 94579 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self	\$	\$ 1,069.41	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN	\$ 1,069.41 DATE DUE	-0- % RATE	\$ 1069.41 1/11/13 DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$
SUBTOTALS \$		1,069.41 \$	557 \$	13,069.41 \$	-0-			

(Enter (e) on
Schedule E, Line 3)

Schedule B Summary

- Loans received this period \$ 1,069.41
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period \$ 557
(Total Column (c) plus loans under \$100 paid or forgiven.)
(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 \$** 512.41
Enter the net here and on the Summary Page, Column A, Line 2. (May be a negative number)

†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

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

**Schedule B – Part 1
Loans Received**

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

Statement covers period from <u>1/1/2013</u>	CALIFORNIA FORM 460
through <u>6/30/2013</u>	
Page <u>6</u> of <u>10</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Benny Lee for City Council District 4 2012

I.D. NUMBER

1348446

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE	
Rose Ng 2238 Mariner Way San Leandro, CA 94579 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self	\$ 2,000	\$	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN	\$ 2,000 DATE DUE	-0- % RATE	\$ 2,000 6/26/12 DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$	
Benny Lee 2238 Mariner Way San Leandro, CA 94579 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self	\$ 5,000	\$	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN	\$ 5,000 DATE DUE	-0- % RATE	\$ 5,000 9/11/12 DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$	
Benny Lee 2238 Mariner Way San Leandro, CA 94579 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self	\$ 5,000	\$	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN	\$ 5,000 DATE DUE	-0- % RATE	\$ 5,000 9/28/12 DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$	
SUBTOTALS \$							\$	\$ carryovers \$	

Schedule B Summary

(Enter (e) on
Schedule E, Line 3)

- Loans received this period \$ _____
(Total Column (b) plus unitemized loans of less than \$100.)
- 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.)
- Net change this period. (**Subtract** Line 2 from Line 1.) **NET \$** _____
Enter the net here and on the Summary Page, Column A, Line 2. (May be a negative number)

†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

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

**Schedule E
Payments Made**

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

SCHEDULE E

Statement covers period from <u>1/1/2013</u>	CALIFORNIA FORM 460
through <u>6/30/2013</u>	
Page <u>7</u> of <u>18</u>	I.D. NUMBER 1348446

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Benny Lee for City Council District 4 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.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
PoliticalCalling.com 204 F St. #A-1, Davis, CA 94516	PHO		\$1,069.41
Charles Gilcrest 1271 Washington Ave., #284, San Leandro, CA 94577	CNS		\$200
Careful Design 926 Scudero Circle, Pittsburg, CA 94565	LIT		\$100

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

SUBTOTAL \$ 1,369.41

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$	<u>1,369.41</u>
2. Unitemized payments made this period of under \$100	\$	<u>50.00</u>
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$	<u>-0-</u>
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$	<u>1,419.41</u>

**Schedule F
Accrued Expenses (Unpaid Bills)**

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

Statement covers period from <u>1/1/2013</u>	CALIFORNIA FORM 460
through <u>6/30/2013</u>	
Page <u>8</u> of <u>10</u>	I.D. NUMBER 1348446

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Benny Lee for City Council District 4 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.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Autumn Press 945 Camelia St., Berkeley, CA 94710	LIT	\$2,860.05			\$2,860.05
Charles Gilcrest 1271 Washington Ave., #284, San Leandro, CA 94577	CNS	\$5,000		\$200	\$4,800
Politicalcalling.com 204 F St., #A-1 Davis, CA 94516	LIT	\$1,069.41		\$1,069.41	

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

SUBTOTALS \$ 9,029.46 \$ -0- \$ 1,369.41 \$ 7,660.05

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) **INCURRED TOTALS \$ -0-**
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) **PAID TOTALS \$ 1,369.41**
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$ -1,369.41**
May be a negative number

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

SCHEDULE F (CONT.)

Statement covers period from <u>1/1/2013</u>	CALIFORNIA FORM 460
through <u>6/30/2013</u>	
Page <u>9</u> of <u>10</u>	

NAME OF FILER Benny Lee for City Council District 4 2012	I.D. NUMBER 1348446
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CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- | | | |
|---|---|---|
| CVP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, e-mail) |

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

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Careful Design 926 Scudero Circle, Pittsburg, CA 94565	LIT	\$100		\$100	-0-
SUBTOTALS \$		100 \$	\$	100 \$	-0-

**Schedule I
Miscellaneous Increases to Cash**

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

SCHEDULE I

Statement covers period
from 1/1/2013
through 6/30/2013

**CALIFORNIA
FORM 460**

Page 10 of 10

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Benny Lee for City Council District 4 2012

I.D. NUMBER

1348446

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
2/20/13	City of San Leandro 835 E 14th St., San Leandro, CA 94577	Refund - candidate statement	\$785.53

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$

\$785.53

Schedule I Summary

1. Itemized increases to cash this period.	\$ <u>785.53</u>
2. Unitemized increases to cash of under \$100 this period.	\$ <u>-0-</u>
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)	\$ <u>-0-</u>
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)	TOTAL \$ <u>785.53</u>