

Recipient Committee Campaign Statement Cover Page

COVER PAGE

Date Stamp RECEIVED CITY OF BEVERLY HILLS 2017 MAR 20 P 4:19 CITY CLERK'S OFFICE	CALIFORNIA FORM 460
	Page <u>1</u> of <u>11</u> For Official Use Only indexed 3/20/17/bp

Statement covers period from <u>February 19, 2017</u> through <u>June 30, 2017</u>	Date of election if applicable: (Month, Day, Year) <u>March 7 2017</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 <small>(Also Complete Part 5)</small> <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 Ballot Measure Committee <input type="checkbox"/> Controlled <input type="checkbox"/> Sponsored <small>(Also Complete Part 6)</small> <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee <small>(Also Complete Part 7)</small>	2. Type of Statement: <input type="checkbox"/> Preelection Statement <input type="checkbox"/> Semi-annual Statement <input checked="" type="checkbox"/> Termination Statement <small>(Also file a Form 410 Termination)</small> <input type="checkbox"/> Amendment (Explain below) <input type="checkbox"/> Quarterly Statement <input type="checkbox"/> Special Odd-Year Report
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3. Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) <u>Nancy Krasne for Beverly Hills City Council 2017</u> STREET ADDRESS (NO P.O. BOX) <u>917 Oxford Way</u> CITY STATE ZIP CODE AREA CODE/PHONE <u>Beverly Hills CA 90210 (310) 550-1265</u> MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX <u>917 Oxford Way-SAME</u> CITY STATE ZIP CODE AREA CODE/PHONE <u>Beverly Hills CA 90210 (310) 550-1265</u> OPTIONAL: FAX / E-MAIL ADDRESS	I.D. NUMBER <u>1388561</u> Treasurer(s) NAME OF TREASURER <u>Bill Neiman</u> MAILING ADDRESS <u>9440 Santa Monica Blvd #610</u> CITY STATE ZIP CODE AREA CODE/PHONE <u>Beverly Hills CA 90210 (310) 786-2100</u> NAME OF ASSISTANT TREASURER, IF ANY <u>Nancy Krasne</u> MAILING ADDRESS <u>9440 Santa Monica Blvd #610</u> CITY STATE ZIP CODE AREA CODE/PHONE <u>Beverly Hills CA 90210 (310) 550-1265</u> OPTIONAL: FAX / E-MAIL ADDRESS
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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 <u>March 20, 2017</u> Date	By <u>Bill Neiman</u> Signature of Treasurer or Assistant Treasurer
Executed on <u>March 20, 2017</u> Date	By <u>Nancy Krasne</u> 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

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

CALIFORNIA FORM	460
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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE				
Nancy Krasne				
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)				
Beverly Hills City Council				
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP	

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
Nancy Krasne for BH City Council 2017	1388561
NAME OF TREASURER	CONTROLLED COMMITTEE?
Bill Neiman	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
9440 Santa Monica Blvd #610	
CITY	STATE ZIP CODE AREA CODE/PHONE
Beverly Hills	CA 90210 (310) 786-2100

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
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 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**

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>February 19, 2017</u> through <u>June 30, 2017</u>	CALIFORNIA FORM 460
Page <u>3</u> of <u>11</u>	I.D. NUMBER <u>1388561</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Nancy Krasne

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions..... Schedule A, Line 3	\$ <u>\$11,750.00</u>	\$ <u>\$26,363.00</u>
2. Loans Received..... Schedule B, Line 3	\$ <u>\$0.00</u>	\$ <u>\$0.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1 + 2	\$ <u>\$11,750.00</u>	\$ <u>\$26,363.00</u>
4. Nonmonetary Contributions..... Schedule C, Line 3	\$ <u>0.00</u>	\$ <u>0.00</u>
5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4	\$ <u>\$11,750.00</u>	\$ <u>\$26,363.00</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	\$ <u>\$26,363.00</u>	\$ <u>\$0.00</u>
21. Expenditures Made	\$ <u>\$62,140.27</u>	\$ <u>\$7,292.11</u>

Expenditures Made

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made..... Schedule E, Line 4	\$ <u>\$13,331.43</u>	\$ <u>\$69,432.38</u>
7. Loans Made..... Schedule H, Line 3	\$ <u>\$0.00</u>	\$ <u>\$0.00</u>
8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7	\$ <u>\$13,331.43</u>	\$ <u>\$69,432.38</u>
9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3	\$ <u>\$0.00</u>	\$ <u>\$0.00</u>
10. Nonmonetary Adjustment..... Schedule C, Line 3	\$ <u>\$0.00</u>	\$ <u>\$0.00</u>
11. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10	\$ <u>\$13,331.43</u>	\$ <u>\$69,432.38</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
<u>03 / 07 / 17</u>	\$ <u>\$69,432.38</u>
<u> / / </u>	\$ <u> </u>

Current Cash Statement

12. Beginning Cash Balance..... Previous Summary Page, Line 16	\$ <u>\$38,516.05</u>
13. Cash Receipts..... Column A, Line 3 above	\$ <u>\$11,750.00</u>
14. Miscellaneous Increases to Cash..... Schedule I, Line 4	\$ <u>\$0.00</u>
15. Cash Payments..... Column A, Line 8 above	\$ <u>-\$13,331.43</u>
16. ENDING CASH BALANCE..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>101,000.00</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.

Cash Equivalents and Outstanding Debts

17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2	\$ <u>\$80,000.00</u>
18. Cash Equivalents..... See instructions on reverse	\$ <u>0.00</u>
19. Outstanding Debts..... Add Line 2 + Line 9 in Column B above	\$ <u> </u>

**Schedule A
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from	February 19, 2017	
through	June 30, 2017	Page <u>4</u> of <u>11</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Nancy Krasne	I.D. NUMBER 1388561
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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)
2/20/17	Westland Development Group 3172 S. Barrington Ave., No 101 Los Angeles, CA 90066	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Iris Assil Real Estate	\$450.00		\$450.00
2/20/17	Crex Barrington LLC 3172 S. Barrington Ave., No 101 Los Angeles, CA 90066	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Abraham Assil Real Estate	\$450.00		\$450.00
2/20/17	Robert Anderson 604 N. Arden Drive Beverly Hills, California 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Arden Reality/ Investor	\$400.00		\$400.00
2/22/17	Bette Hayman 6950 Wildlife Road Malibu, California 90265	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$250.00		\$250.00
2/22/17	Frances Shloss 124-A South Maple Drive Beverly Hills, California 90212	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Architect/ Retired	\$100.00		\$100.00
SUBTOTAL \$				\$1,650.00		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.)	\$ 11,750.00
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 \$ 11,750.00

*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 A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>February 19, 2017</u> through <u>June 30, 2017</u>	CALIFORNIA FORM 460
	Page <u>5</u> of <u>11</u>
	I.D. NUMBER <u>1388561</u>

NAME OF FILER

Nancy Krasne

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)
2/23/17	Peter Ostroff 1234 Lago Vista Beverly Hills, California 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney	\$250.00		\$250.00
2/23/17	David Loftus 800 N. Whittier Drive Beverly Hills, California 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Businessman	\$250.00		\$250.00
2/23/17	Laurie Konheim 163 South Rodeo Drive Beverly Hills, California 90212	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker/ Philanthropist	\$450.00		\$450.00
2/23/17	Lyn Konheim 163 South Rodeo Drive Beverly Hills, California 90212	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real estate Management	\$450.00		\$450.00
2/28/17	Kathy Javor 609 N. Roxbury Drive Beverly Hills, CA 90210	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real estate Management	\$450.00		\$450.00
SUBTOTAL \$				\$1,850.00		

*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 A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>February 19, 2017</u> through <u>June 30, 2017</u>	CALIFORNIA FORM 460
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NAME OF FILER Nancy Krasne	I.D. NUMBER 1388561
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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)
3/2/17	Joseph & Shiva Daneshgar 821 N. Whittier Drive Beverly Hills, California 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate/ Maxxam Enterprises Housewife	\$900.00		\$900.00
3/2/17	George & Soheila Daneshgar 1027 N. Roxbury Drive Beverly Hills, California 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Investor 3D Investments, LLC Housewife	\$900.00		\$900.00
3/2/17	Nader & Sophia Daneshgar 1021 Cove Way Beverly Hills, California 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Investor 3D Investments, LLC Housewife	\$900.00		\$900.00
3/2/17	Michael & Elizabeth Soroudi 515 N. Beverly Drive Beverly Hills, California 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate/ Maxxam Enterprises Housewife	\$900.00		\$900.00
3/2/17	Mehdi & Shohreh Soroudi 732 N. Camden Drive Beverly Hills, California 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate/ Maxxam Enterprises Housewife	\$900.00		\$900.00
SUBTOTAL \$				\$4,500.00		

*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 A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>February 19, 2017</u> through <u>June 30, 2017</u>	CALIFORNIA FORM 460
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NAME OF FILER Nancy Krasne	I.D. NUMBER 1388561
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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)
3/2/17	Behrouz & Nora Soroudi 519 N. Rodeo Drive Beverly Hills, California 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Investor Maxxam Enterprises Homemaker	\$900.00		\$900.00
3/2/17	Herb & Felice Reston 1136 Calle Vista Drive Beverly Hills, California 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Builder / Reston-Sinco Homemaker	\$150.00		\$150.00
3/2/17	Madeline Gussman 909 N. Whittier Drive Beverly Hills, California 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner/ Marin Group	\$450.00		\$450.00
3/2/17	Richard Neu 250 N. Canon Drive, 3rd Floor Beverly Hills, California 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Businessman/ ships Real estate investor	\$200.00	\$450.00	\$450.00
3/4/17	Building Owners & Managers Association of Greater LA, PAC 700 S. Flower Street, 1408, LA CA 90017	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PAC FPPC ID# 922454	\$450.00		\$450.00
SUBTOTAL \$				\$2,150.00		

*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 A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>February 19, 2017</u> through <u>June 30, 2017</u>	CALIFORNIA FORM 460
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I.D. NUMBER 1388561	

NAME OF FILER

Nancy Krasne

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)
3/3/17	California Real Estate PAC California Association of Realtors 525 S. Virgil Avenue, LA ,CA 90020	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PAC FPPC ID # 890106	\$450.00		\$450.00
3/5/17	Herb Nadel 1990 S. Bundy Drive, 4th Floor Los Angeles, California 90025	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Architect	\$250.00		\$250.00
3/7/17	Gabriel Frem 240 N. Beverly Drive, ste 300 Beverly Hills, CA 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Businessman	\$450.00		\$450.00
3/7/17	Jessica Frem 240 N. Beverly Drive, ste 300 Beverly Hills, CA 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker	\$450.00		\$450.00
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$				\$1,600.00		

*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**

Amounts may be rounded
to whole dollars.

Statement covers period from <u>February 19, 2017</u> through <u>June 30, 2017</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nancy Krasne

I.D. NUMBER

1388561

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
Nancy & James Krasne 917 Oxford Way Beverly Hills, CA 90210 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Vice Mayor Attorney	\$ <u>50,000.</u>	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ <u>50,000.</u> DATE DUE _____	<u>0.00</u> % RATE \$ _____	\$ <u>50,000.</u> DATE INCURRED _____	CALENDAR YEAR \$ <u>50,000.</u> . PER ELECTION** \$ _____
Nancy & James Krasne 917 Oxford Way Beverly Hills, CA 90210 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Vice Mayor Attorney	\$ <u>\$30,000.</u>	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ <u>\$30,000.</u> DATE DUE _____	_____% RATE \$ _____	\$ _____ DATE INCURRED <u>1/1/2017</u>	CALENDAR YEAR \$ <u>\$30,000.</u> PER ELECTION** \$ <u>\$80,000.</u>
 † <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE _____	_____% RATE \$ _____	\$ _____ DATE INCURRED _____	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
SUBTOTALS \$								

Schedule B Summary

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

- Loans received this period \$ ~~80,000.00~~ 0.00
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period \$ ~~-43,065.38~~ -36,934.62
(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 \$ ~~-80,000.00~~ -36,934.62
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

Amounts may be rounded
to whole dollars.

Statement covers period
from February 19, 2017
through June 30, 2017
CALIFORNIA FORM 460
Page 10 of 11
I.D. NUMBER 1388561

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nancy Krasne

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

- CMP campaign paraphernalia/misc.
CNS campaign consultants
CTB 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 member communications
MTG meetings and appearances
OFC office expenses
PET petition circulating
PHO phone banks
POL polling and survey research
POS postage, delivery and messenger services
PRO professional services (legal, accounting)
PRT print ads
RAD radio airtime and production costs
RFD returned contributions
SAL campaign workers' salaries
TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
WEB information technology costs (internet, e-mail)

Table with 4 columns: NAME AND ADDRESS OF PAYEE, CODE OR, DESCRIPTION OF PAYMENT, AMOUNT PAID. Rows include Gridiron Communications (Renters Mailer, Invoice 2244) and Time Warner- Ads.est.payment@TWCable (TV Ads).

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

SUBTOTAL \$ 9,735.05

Schedule E Summary

Summary table with 2 columns: Description, Amount. Rows include Itemized payments, Unitemized payments, Total interest paid, and Total payments made this period.

**Schedule E
(Continuation Sheet)
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>February 19, 2017</u> through <u>June 30, 2017</u>	CALIFORNIA FORM 460
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	I.D. NUMBER 1388561

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nancy Krasne

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
Facebook Ad Campaign	WEB	Facebook ads	\$836.36
IWS Integrated Web Strategy 5330 N. 12Street Phoenix Arizona 85014	WEB	E-Mail sends /February Templates for messages	\$974.98
GOOGLE *ADWS1038699421 1600 Amphitheatre Pkwy, CA 94043	WEB	E-Mail advertising	\$500.00
Justin Janes 3700 S. Sepulveda Blvd, #313 Los Angeles, CA 90034	WEB	Editing Commercials	\$1,000.00
Sweet Beverly 240 N. Beverly Drive, # 150 Beverly Hills, CA 90210	OFC	Food	\$263.44

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

SUBTOTAL \$ 3,574.78