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

Statement covers period
from 01/01/2022
through 06/30/2022

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

Redlands City Clerk

Date Stamp
JUL 14 2022

CALIFORNIA
FORM 460

Page 1 of 9

For Official Use Only

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.
X Officeholder, Candidate Controlled Committee
☐ State Candidate Election Committee
☐ Recall
(Also Complete Part 5)
☐ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☐ Political Party/Central Committee
☐ Primarily Formed Ballot Measure Committee
☐ Controlled
☐ Sponsored
(Also Complete Part 6)
☐ Primarily Formed Candidate/Officeholder Committee
(Also Complete Part 7)

2. Type of Statement:
☐ Prelection Statement
☐ Semi-annual Statement
☐ Termination Statement
(Also file a Form 410 Termination)
☐ Amendment (Explain below)
☐ Quarterly Statement
☐ Special Odd-Year Report
☐ Supplemental Prelection Statement - Attach Form 405

3. Committee Information

I.D. NUMBER
1369662

COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE)
Barich for City Council 2018

STREET ADDRESS (NO P.O. BOX)

CITY
Redlands
STATE
CA
ZIP CODE
92373
AREA CODE/PHONE

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
PO Box 9355
CITY
Redlands
STATE
CA
ZIP CODE
92373
AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS
(949)858-6807 / info@campaign-compliance.com

Treasurer(s)

NAME OF TREASURER
Jen Slater
MAILING ADDRESS
9070 Irvine Center Drive, #150
CITY
Irvine
STATE
CA
ZIP CODE
92618
AREA CODE/PHONE
(949)858-7448

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 07/07/2022

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

Executed on 07/10/2022

By
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on

By
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on

By
Signature of Controlling Officeholder, Candidate, State Measure Proponent
5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Paul Thomas Barich

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
City Council Member City of Redlands

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Redlands CA 92373

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.

<table>
<thead>
<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>NAME OF TREASURER</th>
<th>CONTROLLED COMMITTEE?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐ YES ☐ NO</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>COMMITTEE ADDRESS</th>
<th>STREET ADDRESS (NO P.O. BOX)</th>
</tr>
</thead>
</table>

CITY STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

<table>
<thead>
<tr>
<th>BALLOT NO. OR LETTER</th>
<th>JURISDICTION</th>
</tr>
</thead>
</table>

IDENTIFY THE CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROONENT, IF ANY.

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER, CANDIDATE, OR PROONENT</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>OFFICE SOUGHT OR HELD</th>
<th>DISTRICT NO. IF ANY</th>
</tr>
</thead>
</table>

7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
</tr>
</thead>
</table>

Attach continuation sheets if necessary
### Contributions Received

<table>
<thead>
<tr>
<th>Item</th>
<th>Column A (TOTAL FOR PERIOD)</th>
<th>Column B (CALENDAR YEAR TOTAL TO DATE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Monetary Contributions</td>
<td>$1,000.00</td>
<td>$1,000.00</td>
</tr>
<tr>
<td>2. Loans Received</td>
<td>$0.00</td>
<td>$25,000.00</td>
</tr>
<tr>
<td>3. SUBTOTAL CASH CONTRIBUTIONS</td>
<td>$1,000.00</td>
<td>$26,000.00</td>
</tr>
<tr>
<td>4. Nonmonetary Contributions</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>5. TOTAL CONTRIBUTIONS RECEIVED</td>
<td>$1,000.00</td>
<td>$26,000.00</td>
</tr>
</tbody>
</table>

### Expenditures Made

<table>
<thead>
<tr>
<th>Item</th>
<th>Column A (TOTAL FOR PERIOD)</th>
<th>Column B (CALENDAR YEAR TOTAL TO DATE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Payments Made</td>
<td>$454.20</td>
<td>$454.20</td>
</tr>
<tr>
<td>7. Loans Made</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>8. SUBTOTAL CASH PAYMENTS</td>
<td>$454.20</td>
<td>$454.20</td>
</tr>
<tr>
<td>9. Accrued Expenses (Unpaid Bills)</td>
<td>$0.00</td>
<td>$6,600.12</td>
</tr>
<tr>
<td>10. Nonmonetary Adjustment</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>11. TOTAL EXPENDITURES MADE</td>
<td>$454.20</td>
<td>$7,054.32</td>
</tr>
</tbody>
</table>

### Current Cash Statement

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>12. Beginning Cash Balance</td>
<td>$4,620.73</td>
</tr>
<tr>
<td>13. Cash Receipts</td>
<td>$1,000.00</td>
</tr>
<tr>
<td>14. Miscellaneous Increases to Cash</td>
<td>$0.00</td>
</tr>
<tr>
<td>15. Cash Payments</td>
<td>$454.20</td>
</tr>
<tr>
<td><strong>ENDING CASH BALANCE</strong></td>
<td>$5,166.53</td>
</tr>
</tbody>
</table>

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).

### Expenditure Limit Summary for State Candidates

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)</td>
<td>$</td>
</tr>
</tbody>
</table>

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

### Cash Equivalents and Outstanding Debts

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>18. Cash Equivalents</td>
<td>$0.00</td>
</tr>
<tr>
<td>19. Outstanding Debts</td>
<td>$31,600.12</td>
</tr>
</tbody>
</table>

### Notes
- Campaign Disclosure Statement Summary Page
- Amounts may be rounded to whole dollars.
- Statement covers period from 01/01/2022 through 06/30/2022.
- California Form 460
- I.D. NUMBER 1369662
- Barich for City Council 2018
## Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ................................................................. $ 1,000.00

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 $ 1,000.00

---

**Schedule A**

**Monetary Contributions Received**

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION 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>06/23/2022</td>
<td>Christopher Glaze</td>
<td>X IND</td>
<td>Retired</td>
<td>500.00</td>
<td>500.00</td>
<td>G2022 5500.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td>COM</td>
<td></td>
<td></td>
<td>500.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>OTH</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>PTY</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>SCC</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>06/23/2022</td>
<td>Lori Glaze</td>
<td>X IND</td>
<td>Retired</td>
<td>500.00</td>
<td>500.00</td>
<td>G2022 5500.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td>COM</td>
<td></td>
<td></td>
<td>500.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>OTH</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>PTY</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>SCC</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTAL $ 1,000.00**

*Contributor Codes

IND – Individual
COM – Recipient Committee
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

**FPPC Form 460 (Jan/2016)**

FPPC Advice: advice@fppc.ca.gov (866/275-3772) | www.fppc.ca.gov
## Schedule B Part 1
### Loans Received

---

**Name of Filer:** Berich for City Council 2018

**Full Name, Street Address and Zip Code of Lender:**

<table>
<thead>
<tr>
<th>Lender Name</th>
<th>Address</th>
<th>Amounts Paid or Forgiven</th>
<th>Outstanding Balance at Close of This Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Berich &amp; Associates Inc.</td>
<td>Redlands, CA 92373</td>
<td>$5,000.00</td>
<td>$-5,000.00</td>
</tr>
<tr>
<td>Berich &amp; Associates Inc.</td>
<td>Redlands, CA 92373</td>
<td>$5,000.00</td>
<td>$-5,000.00</td>
</tr>
<tr>
<td>Berich &amp; Associates Inc.</td>
<td>Redlands, CA 92373</td>
<td>$5,000.00</td>
<td>$-5,000.00</td>
</tr>
</tbody>
</table>

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**Statement Covers Period:**

- From: 01/01/2022
- Through: 06/30/2022

---

**Schedule B Summary**

1. Loans received this period
   - (Total Column (b) plus unitemized loans of less than $100.)
   - $0.00

2. 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.)
   - $0.00

3. Net change this period. (Subtract Line 2 from Line 1.)
   - NET $0.00

---

**Notes:**

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

---

**FPPC Form 460 (Jan/2016)**

FPPC Advice: advice@fppc.ca.gov (888/275-3772)

[www.fppc.ca.gov](http://www.fppc.ca.gov)
## Schedule B – Part 1 (Continuation Sheet)

**Loans Received**

**Amounts may be rounded to whole dollars.**

<table>
<thead>
<tr>
<th>NAME OF FILER</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD</th>
<th>(b) AMOUNT RECEIVED THIS PERIOD</th>
<th>(c) AMOUNT PAID OR FORGIVEN THIS PERIOD</th>
<th>(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
<th>(e) INTEREST PAID THIS PERIOD</th>
<th>(f) ORIGINAL AMOUNT OF LOAN</th>
<th>(g) CUMULATIVE CONTRIBUTIONS TO DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barich for City Council 2018</td>
<td>Barich &amp; Associates Inc., Redlands, CA 92373</td>
<td>$5,000.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$5,000.00</td>
<td>0.00%</td>
<td>$0.00</td>
<td>$5,000.00</td>
</tr>
<tr>
<td></td>
<td>President Barich &amp; Associates Inc., Redlands, CA 92373 Loan</td>
<td>$5,000.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$5,000.00</td>
<td>0.00%</td>
<td>$0.00</td>
<td>$5,000.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTALS**

$0.00

$0.00

$10,000.00

$0.00

---

**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

**FPPC** Form 460 (Jan/2016)

**FPPC Advice:** advice@fppc.ca.gov (888/775-3777)

---

*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 01/01/2022 through 06/30/2022

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Barich for City Council 2018

I.D. NUMBER
1369662

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

CNP campaign paraphernalia/misc.
CNS campaign consultants
CTC contribution (credit 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
MER 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)
PRINT 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>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>OR</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Campaign Compliance Group, Inc.</td>
<td>PRO</td>
<td></td>
<td></td>
<td>300.00</td>
</tr>
<tr>
<td>6070 Irvine Center Drive, #130</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Irvine, CA 92618</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

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 ........................................................................... $ 154.20
3. Total interest paid this period on 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 $ 454.20
## Schedule F
### Accrued Expenses (Unpaid Bills)

**NAME OF FILER**
Barich for City Council 2018

**I.D. NUMBER**
1369662

### CODES:
- CMP campaign paraphernalia/misc.
- CNS campaign consultants
- CTB contribution (explain nonmonetary)*
- CVC civic donations
- FLD 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)

### NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)

<table>
<thead>
<tr>
<th>NAME OF 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 E)</th>
<th>(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paul Barich</td>
<td>FIL</td>
<td>1,130.00</td>
<td>0.00</td>
<td>0.00</td>
<td>1,130.00</td>
</tr>
<tr>
<td>Redlands, CA 92373</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Barich &amp; Associates Inc.</td>
<td>LIT</td>
<td>1,786.04</td>
<td>0.00</td>
<td>0.00</td>
<td>1,786.04</td>
</tr>
<tr>
<td>Redlands, CA 92373</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Barich &amp; Associates Inc.</td>
<td>PRT</td>
<td>1,150.00</td>
<td>0.00</td>
<td>0.00</td>
<td>1,150.00</td>
</tr>
<tr>
<td>Redlands, CA 92373</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**SUBTOTALS**

<table>
<thead>
<tr>
<th></th>
<th>$</th>
<th>$</th>
<th>$</th>
<th>$</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a)</td>
<td>4,066.04</td>
<td>0.00</td>
<td>0.00</td>
<td>4,066.04</td>
</tr>
<tr>
<td>(d)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Schedule F Summary**

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

May be a negative number
### Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>SCHEDULE F (CONT.)</th>
<th>CALIFORNIA FORM 460</th>
</tr>
</thead>
<tbody>
<tr>
<td>Statement covers period from</td>
<td></td>
</tr>
<tr>
<td>through</td>
<td></td>
</tr>
<tr>
<td>Page 9 of 9</td>
<td>I.D. NUMBER 1369652</td>
</tr>
</tbody>
</table>

**NAME OF FILER**
Barich for City Council 2018

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

- CMN: campaign paraphernalia/misc.
- CNM: 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
- PHT: 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)

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

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CODE OR DESCRIPTION OF PAYMENT</th>
<th>AMOUNT INCURRED THIS PERIOD</th>
<th>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
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<tbody>
<tr>
<td>Barich &amp; Associates, Inc.</td>
<td>FND</td>
<td>1,284.08</td>
<td>1,284.08</td>
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<tr>
<td>Joann Barich</td>
<td>WEB</td>
<td>1,250.00</td>
<td>1,250.00</td>
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**SUBTOTALS** $ 2,534.08 $ 0.00 $ 0.00 $ 2,534.08