Recipient Committee
Campaign Statement
Cover Page
(Government Code Sections 84203-84216.5)

SEE INSTRUCTIONS ON REVERSE

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 Candidate/Officeholder Committee (Also Complete Part 7)

2. Type of Statement:
   X Preelection Statement
   - Quarterliy Statement
   - Special Odd-Year Report
   - Supplemental Preelection Statement - Attach Form 495
   - Semi-annual Statement
   - Termination Statement
   - Amendment (Explain below)

3. Committee Information
   COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
   Tristan Schukraft For West Hollywood City Council 2013

   STREET ADDRESS (NO P.O. BOX)
   8581 Santa Monica Blvd., #225
   CITY West Hollywood
   STATE CA
   ZIP CODE 90069
   AREA CODE/PHONE 310.651.8106

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

   CITY
   STATE
   ZIP CODE
   AREA CODE/PHONE

   OPTIONAL: FAX / E-MAIL ADDRESS
   support@tristan2013.com

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 February 21, 2013
   By ____________________________
   Signature of Treasurer or Assistant Treasurer

   Executed on February 21, 2013
   By ____________________________
   Signature of Controlling Officer/Holder, Candidate, State Measure Propor or Responsible Officer of Sponsor

   Executed on ____________________________
   By ____________________________
   Signature of Controlling Officer/Holder, Candidate, State Measure Proponent

   Executed on ____________________________
   By ____________________________
   Signature of Controlling Officer/Holder, Candidate, State Measure Proponent

   Executed on ____________________________
   By ____________________________
   Signature of Controlling Officer/Holder, Candidate, State Measure Proponent

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
State of California
5. Officeholder or Candidate Controlled Committee

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>Tristan Schukraft</th>
</tr>
</thead>
<tbody>
<tr>
<td>OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)</td>
<td>Member of the City Council, West Hollywood, CA</td>
</tr>
<tr>
<td>RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)</td>
<td>8581 Santa Monica Blvd., #225, West Hollywood, CA 90069</td>
</tr>
</tbody>
</table>

6. Ballot Measure Committee

<table>
<thead>
<tr>
<th>NAME OF BALLOT MEASURE</th>
<th>BALLOT NO. OR LETTER</th>
<th>JURISDICTION</th>
</tr>
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<tbody>
<tr>
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<table>
<thead>
<tr>
<th>OFFICE SOUGHT OR HELD</th>
<th>DISTRICT NO. IF ANY</th>
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</table>

Identify the controlling officeholder, candidate, or state measure proponent, if any.

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

7. Primarily Formed 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>
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<tbody>
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</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

Attach continuation sheets if necessary
## Contributions Received
1. Monetary Contributions ........................................... Schedule A, Line 3 $500.00 $500.00
2. Loans Received .................................................... Schedule B, Line 3 1212.29 2473.70
3. SUBTOTAL CASH CONTRIBUTIONS .............................. Add Lines 1 + 2 $1712.29 $2973.70
4. Nonmonetary Contributions ...................................... Schedule C, Line 3 0 0
5. TOTAL CONTRIBUTIONS RECEIVED ....................... Add Lines 3 + 4 $1712.29 $2973.70

## Expenditures Made
6. Payments Made .................................................. Schedule E, Line 4 $1712.29 $2973.70
7. Loans Made ........................................................ 0 0
8. SUBTOTAL CASH PAYMENTS .................................... Add Lines 6 + 7 $1712.29 $2973.70
9. Accrued Expenses (Unpaid Bills) ............................ Schedule F, Line 3 0 0
10. Nonmonetary Adjustment ....................................... Schedule C, Line 3 0 0
11. TOTAL EXPENDITURES MADE ................................. Add Lines 8 + 9 + 10 $1712.29 $2973.70

## Current Cash Statement
12. Beginning Cash Balance ....................................... Previous Summary Page, Line 16 $500
13. Cash Receipts .................................................... Column A, Line 3 above $1712.29
14. Miscellaneous Increases to Cash ............................. Schedule I, Line 4 0
15. Cash Payments .................................................. Column A, Line 8 above 1712.29
16. ENDING CASH BALANCE ...................................... Add Lines 12 + 13 + 14, then subtract Line 15 $500

### Current Cash Statement Notes
- If this is a termination statement, Line 16 must be zero.

## Cash Equivalents and Outstanding Debts
17. LOAN GUARANTEES RECEIVED ............................... Schedule B, Part 2 $0
18. Cash Equivalents ................................................ See instructions on reverse $0
19. Outstanding Debts .............................................. Add Line 2 + Line 9 in Column B above $0

## 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 $0
  - 21. Expenditures Made $0

## 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

### Expenditure Limit Summary Notes
- 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).
- *Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

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FFPC Form 460 (June/01)
FFPC Toll-Free Helpline: 855/ASK-FPPC
## Schedule A
### Monetary Contributions Received

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

**Statement covers period**

- **from:** January 20, 2013
- **through:** February 16, 2013

**Tristan Schukraft For West Hollywood City Council 2013**

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <em>(IF COMMITTEE, ALSO ENTER ID NUMBER)</em></th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <em>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</em></th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR <em>(JAN. 1 - DEC. 31)</em></th>
<th>PER ELECTION TO DATE <em>(IF REQUIRED)</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>25 JAN 13</td>
<td>Dan Hess, 1220 N Orange Grove Ave, #4, West Hollywood, CA 90046</td>
<td>☑ IND</td>
<td>self/employed</td>
<td>$500.00</td>
<td>$500.00</td>
<td>$500.00</td>
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### Schedule A Summary

1. **Amount received this period – contributions of $100 or more.**
   
   (Include all Schedule A subtotals.) .......................................................... $ 500.00

2. **Amount received this period – unitemized contributions of less than $100.** ...................................................................................... $ 0

3. **Total monetary contributions received this period.**
   
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..................................................................................................................... TOTAL $ 500.00
Schedule B – Part 1
Loans Received

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

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Tristan Schukraft For West Hollywood City Council 2013

<table>
<thead>
<tr>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER</th>
<th>AMOUNT PAID OR FORGIVEN THIS PERIOD</th>
<th>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
<th>INTEREST PAID THIS PERIOD</th>
<th>ORIGINAL AMOUNT OF LOAN</th>
<th>CUMULATIVE CONTRIBUTIONS TO DATE</th>
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</thead>
<tbody>
<tr>
<td>Tristan Schukraft</td>
<td>Technology Entrepreneur</td>
<td>□ $0</td>
<td>$1212.29</td>
<td>0%</td>
<td>$1212.29</td>
<td>$2473.70</td>
</tr>
<tr>
<td>8581 Santa Monica Blvd., #225</td>
<td>West Hollywood, CA 90069</td>
<td>□ $0</td>
<td>N/A</td>
<td>$0</td>
<td>$1212.29</td>
<td>$4595.73</td>
</tr>
<tr>
<td>IND  COM  OTH  PTY  SCC</td>
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<tr>
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<td>□ $0</td>
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<td>□ $0</td>
<td>$1212.29</td>
<td>0%</td>
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<td>$2473.70</td>
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<tr>
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<td>West Hollywood, CA 90069</td>
<td>□ $0</td>
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</table>

SUBTOTALS $1212.29

Schedule B Summary

1. Loans received this period
   (Total Column (b) plus unitemized loans less than $1000.) $1212.29
2. Loans paid or forgiven this period
   (Total Column (c) plus loans under $100 paid or forgiven.) $0
   (Include loans paid by a third party that are also itemized on Schedule A.)
3. Net change this period. (Subtract Line 2 from Line 1.) NET $1212.29
   Enter the net here and on the Summary Page, Column A, Line 2.

† Contributor Codes
IND – Individual  COM – Recipient Committee (other than PTY or SCC)  OTH – Other  PTY – Political Party  SCC – Small Contributor Committee

FFPC Form 460 (June/01)
FFPC Toll-Free Helpline: 866/ASK-FPPC
## Schedule E
### Payments Made

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

**Tristan Schukraft For West Hollywood City Council 2013**

**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
- MTO: 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>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>KAI KARENIN</td>
<td>PRO</td>
<td></td>
<td>$310.00</td>
</tr>
<tr>
<td>USA Printing</td>
<td>PRT</td>
<td></td>
<td>$216.91</td>
</tr>
<tr>
<td>7925 Santa Monica Blvd, West Hollywood, CA 90069</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Glen Archer</td>
<td>WEB</td>
<td></td>
<td>$225.00</td>
</tr>
<tr>
<td>1518 E 3rd Street, #21, Long Beach, CA 90802</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

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

**SUBTOTAL:** $535.00

**Schedule E Summary**

1. Payments made this period of $100 or more. (Include all Schedule E subtotals.) .......................................................... $1035
2. Unitizedized payments made this period of under $100 .......................................................... $677.29
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e)). .......................................................... $0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) .......................................................... TOTAL $1712.29

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
### Schedule E
(Continuation Sheet)
Payments Made

**NAME OF FILER**
Tristan Schukraft For West Hollywood City Council 2013

**I.D. NUMBER**
1354427

** Statement covers period from January 20, 2013 through February 16, 2013 **

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- TSF transfer between committees of the same candidate/sponsor
- VOT voter registration
- WEB information technology costs (internet, e-mail)

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<tr>
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<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arabelia Barkow</td>
<td>CNS</td>
<td></td>
<td>$500.00</td>
</tr>
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</table>

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

**SUBTOTAL $**
$500