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

Statement covers period
from 1 1 1 1
through 1 2 2 1

Date of election if applicable:
(Month, Day, Year)
3 1 8 2 0 1 1

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

   [Space for information]

   [Signature of City Clerk]

   [City of West Hollywood]

3. Committee Information
   ID NUMBER: 1 3 2 4 7 6 5

   FRIENDS OF MITO AVILES FOR WEST
   CITY COUNCIL
   1 3 5 3 N. ORANGE GROVE AVE
   WEST HOLLYWOOD, CA 9 0 1 1 6

   CITY OF WEST HOLLYWOOD
   STREET ADDRESS (NO P.O. BOX)
   1 3 5 3 N. ORANGE GROVE AVE
   CITY OF WEST HOLLYWOOD
   ZIP CODE: 9 0 1 1 6
   AREA CODE/PHONE: 3 2 3 - 3 5 0 - 8 5 6

   NAME OF TREASURER
   MIKE MORRIS
   1 3 5 3 N. ORANGE GROVE AVE
   WEST HOLLYWOOD, CA 9 0 1 1 6
   ZIP CODE: 9 0 1 1 6
   AREA CODE/PHONE: 3 2 3 - 3 5 0 - 8 5 6

   NAME OF ASSISTANT TREASURER, IF ANY

   MAILING ADDRESS

   CITY
   STATE
   ZIP CODE
   AREA CODE/PHONE

   OPTIONAL: FAX / E-MAIL ADDRESS
   m i t o @ m i t o a v i l e s . c o m

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.

   [Signature of Treasurer or Assistant Treasurer]
   Executed on 2 1 1
   Executed on 2 1 1
   Executed on 2 1 1

   [Signature of Controlling Officer, Candidate, State Measure Proponent or Responsible Officer of Sponsor]
   Executed on 2 1 1
   Executed on 2 1 1
   Executed on 2 1 1

   [Signature of Controlling Officer, Candidate, State Measure Proponent]

   [Signature of Controlling Officer, Candidate, State Measure Proponent]

   FPPC Form 460 (January/06)
   FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3773)
   State of California
5. Officeholder or Candidate Controlled Committee

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>Mita Aviles</th>
</tr>
</thead>
<tbody>
<tr>
<td>OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)</td>
<td>West Hollywood City Council Member</td>
</tr>
<tr>
<td>RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)</td>
<td>1053 N. Orange Grove Ave, West Hollywood, CA 90046</td>
</tr>
</tbody>
</table>

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>
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</thead>
<tbody>
<tr>
<td>NAME OF TREASURER</td>
<td>CONTROLLED COMMITTEE?</td>
</tr>
<tr>
<td>COMMITTEE ADDRESS</td>
<td>STREET ADDRESS (NO P.O. BOX)</td>
</tr>
<tr>
<td>CITY</td>
<td>STATE</td>
</tr>
<tr>
<td>COMMITTEE NAME</td>
<td>I.D. NUMBER</td>
</tr>
<tr>
<td>NAME OF TREASURER</td>
<td>CONTROLLED COMMITTEE?</td>
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<td>STREET ADDRESS (NO P.O. BOX)</td>
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<tr>
<td>CITY</td>
<td>STATE</td>
</tr>
</tbody>
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6. Primarily Formed Ballot Measure Committee

<table>
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<tr>
<th>NAME OF BALLOT MEASURE</th>
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<tbody>
<tr>
<td>BALLOT NO. OR LETTER</td>
</tr>
<tr>
<td>SUPPORT</td>
</tr>
</tbody>
</table>

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

| NAME OF OFFICEHOLDER, CANDIDATE, OR PROPOSER |
| OFFICE SOUGHT OR HELD | DISTRICT NO. IF ANY |
| SUPPORT | OPPOSE |

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 |
| SUPPORT | OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD |
| SUPPORT | OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD |
| SUPPORT | OPPOSE |

Attach continuation sheets if necessary
**Contributions Received**

1. Monetary Contributions ........................................... Schedule A, Line 3 $100.00 $100.00
2. Loans Received .................................................. Schedule B, Line 3 $59.99 $59.99
3. SUBTOTAL CASH CONTRIBUTIONS ......................... Add Lines 1 + 2 $159.99 $159.99
4. Nonmonetary Contributions ................................. Schedule C, Line 3 $0.00 $0.00
5. TOTAL CONTRIBUTIONS RECEIVED ....................... Add Lines 3 + 4 $159.99 $159.99

**Expenditures Made**

6. Payments Made ................................................. Schedule E, Line 4 $279.36 $279.36
7. Loans Made ...................................................... Schedule H, Line 3 $0.00 $0.00
8. SUBTOTAL CASH PAYMENTS ................................. Add Lines 6 + 7 $279.36 $279.36
9. Accrued Expenses (Unpaid Bills) ......................... Schedule F, Line 3 $0.00 $0.00
10. Nonmonetary Adjustment .................................. Schedule C, Line 3 $0.00 $0.00
11. TOTAL EXPENDITURES MADE ............................. Add Lines 8 + 9 + 10 $279.36 $279.36

**Current Cash Statement**

12. Beginning Cash Balance .............................. Previous Summary Page, Line 16 $745.54 $745.54
13. Cash Receipts ................................................................. Column A, Line 3 above $5.00 $5.00
14. Miscellaneous Increases to Cash ........................ Schedule I, Line 4 $279.36 $279.36
15. Cash Payments ................................................................. Column A, Line 8 above $605.18 $605.18
16. ENDING CASH BALANCE .......... Add Lines 12 + 13 + 14, then subtract Line 15 $279.36 $279.36

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

17. LOAN GUARANTEES RECEIVED ................................. Schedule B, Part 2 $0.00 $0.00

**Cash Equivalents and Outstanding Debts**

19. Outstanding Debts ............................................................. Add Line 2 + Line 9 in Column B above $0.00 $0.00

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).

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

1. Statement covers period from 1/1/11 through 12/31/11
2. Contributions Received 1/1 through 6/30 $0.00 7/1 to Date $0.00
3. Expenditures Made $0.00

**Expenditure Limit Summary for State Candidates**

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

<table>
<thead>
<tr>
<th>Date of Election (mm/dd/yy)</th>
<th>Total to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

*Amounts in this section may be different from amounts reported in Column B.
### Schedule A Summary

1. Amount received this period – itemized monetary contributions.
   
   (Include all Schedule A subtotals.) ........................................... $ 0

2. Amount received this period – unitemized monetary 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 $ 0

---

**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 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Schedule B – Part 1
Loans Received

**Type or print in ink. 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</th>
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</thead>
<tbody>
<tr>
<td>Friends of Mito Aviles for West Hollywood City Council</td>
<td>CM Squared Designs 1253 N. Orange Grove Ave West Hollywood, CA 90046</td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>Lender</th>
<th>Occupation and Employer Name of Business</th>
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<tr>
<td></td>
<td>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER NAME OF BUSINESS</td>
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<tr>
<th>Lender</th>
<th>Outstanding Balance Beginning This Period</th>
<th>Amount Received This Period</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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**Schedule B Summary**

1. Loans received this period
   (Total Column (b) plus unitemized loans of less than $100.) $99. -

2. Loans paid or forgiven this period
   (Total Column (c) plus loans under $100 paid or forgiven.) $99. -

3. Net change this period. (Subtract Line 2 from Line 1.) Net $0
   Enter the net here and on the Summary Page, Column A, Line 2.

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

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

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
### Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions.
   (Include all Schedule C subtotals.) .................................................. $ 

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

3. Total nonmonetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) .............................................. TOTAL $ 

*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 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Schedule D Summary

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) .......................................................... $  

2. Unitemized contributions and independent expenditures made this period of under $100 .......................................................... $  

3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ........... TOTAL $  

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
<table>
<thead>
<tr>
<th>DATE</th>
<th>NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE</th>
<th>TYPE OF PAYMENT</th>
<th>DESCRIPTION (IF REQUIRED)</th>
<th>AMOUNT THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN 1-DEC 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
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<td>Monetary Contribution</td>
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<td>Independent Expenditure</td>
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<td>Monetary Contribution</td>
<td>Nonmonetary Contribution</td>
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<td>Independent Expenditure</td>
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<td>Monetary Contribution</td>
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<td>Nonmonetary Contribution</td>
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<td>Independent Expenditure</td>
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<td>Support</td>
<td>Oppose</td>
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</tbody>
</table>

**SUBTOTAL $**

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
**Schedule E Payments Made**

**NAME OF FILER**
Friends of Mito Aviles for West Hollywood City Council 2011

**I.D. NUMBER**
1324765

**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
- MTC 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>OR</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>2405 Tulip Ave. LA CA 90068</td>
<td>OFC</td>
<td></td>
<td></td>
<td>$100.00</td>
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</tbody>
</table>

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

**Schedule E Summary**

1. Payments made this period of $100 or more. (Include all Schedule E subtotals.) ................................................................. $100.00
2. Unitized payments made this period of under $100 ................................................................. $179.36
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ................................................................. $8
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ................................................................. TOTAL $279.36
## Schedule F

**Accrued Expenses (Unpaid Bills)**

### NAME OF FILER
Friends of Mito Avila for West Hollywood City Council 2011

### I.D. NUMBER
1324765

### CODES:
- CHP: 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)

### CODE OR DESCRIPTION OF PAYMENT

### OUTSTANDING BALANCE BEGINNING OF THIS PERIOD

### AMOUNT INCURRED THIS PERIOD

### AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)

### OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD

### SUBTOTALS $ 0

### 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.)**

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.)**

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

### INCURRED TOTALS $ 0

### PAID TOTALS $ 0

### NET $ 0

---

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

---

**FPPC Form 460 (January/06)**

FPPC Toll-Free Helpline: 888/ASK-FPPC (886/275-3772)
### Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

**SEE INSTRUCTIONS ON REVERSE**

**NAME OF FILER:**

**NAME OF AGENT OR INDEPENDENT CONTRACTOR:**

**STATEMENT COVERS PERIOD**
- From 11/11/11
- Through 12/31/11

**CALIFORNIA FORM 460**
- Page 12 of 14
- I.D. NUMBER: 1324 765

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

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

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

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE OR CREDITOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</td>
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<table>
<thead>
<tr>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
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Attach additional information on appropriately labeled continuation sheets.

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

**TOTAL** $ D

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Schedule H
Loans Made to Others

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Friends of Mifs Aviles for West Hollywood City Council 2011

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)

<table>
<thead>
<tr>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>OUTSTANDING BALANCE BEGINNING THIS PERIOD</th>
<th>AMOUNT LOANED THIS PERIOD</th>
<th>REPAYMENT OR FORGIVENESS THIS PERIOD*</th>
<th>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
<th>INTEREST RECEIVED</th>
<th>ORIGINAL AMOUNT OF LOAN</th>
<th>CUMULATIVE LOANS TO DATE</th>
</tr>
</thead>
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</tbody>
</table>

*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.

SUBTOTALS $0 $0 $0 $0

(Schedule H, Line 3)

Schedule H Summary

1. Loans made this period .......................................................... $0 .......................................................... $0
   (Total Column (b) plus unitemized loans of less than $100.)

2. Payments received on loans ............................................. $0
   (Total Column (c) plus unitemized payments of less than $100.)

3. Net change this period. (Subtract Line 2 from Line 1.) ............ NET $0
   (Enter the net here and on the Summary Page, Column A, Line 7.)

   **If Required

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
### Schedule I Summary

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