

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from January 1, 2010
through September 30, 2010

Date of election (if applicable):
(Month, Day, Year)
NOVEMBER 2, 2010

RECEIVED
CITY CLERK'S OFFICE
SOUTH LAKE TAHOE

COVER PAGE
CALIFORNIA
2001/02
FORM
Page 1 of 8
For Official Use Only

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

- Officeholder, Candidate Controlled Committee
- Ballot Measure Committee
- State Candidate Election Committee
- Primarily Formed
- Recall
- Controlled
- Sponsored
- General Purpose Committee
- Primarily Formed Candidate/Officeholder Committee
- Small Contributor Committee
- Political Party/Central Committee

2. Type of Statement:

- Preelection Statement
- Quarterly Statement
- Semi-annual Statement
- Special Odd-Year Report
- Termination Statement
- Supplemental Preelection Statement - Attach Form 495
- Amendment (Explain below)

3. Committee Information

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Joy Curry for South Lake Tahoe City Council 2010

Treasurer(s)

NAME OF TREASURER
Daniel B. Norem
MAILING ADDRESS
2163 Harvard Avenue
CITY South Lake Tahoe STATE CA ZIP CODE 96150 AREA CODE/PHONE 775-345-9837

STREET ADDRESS (NO P.O. BOX)
2163 Harvard Avenue
CITY South Lake Tahoe STATE CA ZIP CODE 96150 AREA CODE/PHONE 530-545-9837
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
CITY _____ STATE _____ ZIP CODE _____ AREA CODE/PHONE _____

OPTIONAL: FAX / E-MAIL ADDRESS
JUCMail@aol.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 10/3/10 Date
Executed on 10/3/10 Date
Executed on _____ Date
Executed on _____ Date

By [Signature] Signature of Treasurer or Assistant Treasurer
By [Signature] Signature of Controlling Officer/holder, Candidate, State Measure Proponent or Responsible Officer of Sponsor
By _____ Signature of Controlling Officer/holder, Candidate, State Measure Proponent

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

Type or print in ink.

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
Joy Curry

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
South Lake Tahoe City Council

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
2163 Harvard Ave, South Lake Tahoe, CA 96150

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.

COMMITTEENAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="radio"/> YES <input type="radio"/> NO
COMMITTEEADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE
COMMITTEENAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="radio"/> YES <input type="radio"/> NO
COMMITTEEADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

6. Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input checked="" type="radio"/> SUPPORT <input type="radio"/> 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 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 checked="" type="radio"/> SUPPORT <input type="radio"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input checked="" type="radio"/> SUPPORT <input type="radio"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input checked="" type="radio"/> SUPPORT <input type="radio"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input checked="" type="radio"/> SUPPORT <input type="radio"/> OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Joy Curry for South Lake Tahoe City Council 2010

Statement covers period
from January 1, 2010
through September 30, 2010

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1332019

SUMMARY PAGE

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	1,117	1,117
2. Loans Received	3,500	3,500
3. SUBTOTAL CASH CONTRIBUTIONS	4,617	4,617
4. Nonmonetary Contributions	0	0
5. TOTAL CONTRIBUTIONS RECEIVED	4,617	4,617

Expenditures Made

6. Payments Made	4,352	4,352
7. Loans Made	0	0
8. SUBTOTAL CASH PAYMENTS	4,352	4,352
9. Accrued Expenses (Unpaid Bills)	0	0
10. Nonmonetary Adjustment	0	0
11. TOTAL EXPENDITURES MADE	4,352	4,352

Current Cash Statement

12. Beginning Cash Balance	0	0
13. Cash Receipts	4,617	4,617
14. Miscellaneous Increases to Cash	0	0
15. Cash Payments	4,352	4,352
16. ENDING CASH BALANCE	265	265

Cash Equivalents and Outstanding Debts

17. LOAN GUARANTEES RECEIVED	0	0
18. Cash Equivalents	0	0
19. Outstanding Debts	3,500	3,500

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

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

Expenditure Limit Summary for State Candidates

Date of Election (mm/dd/yy)	Total to Date
1/1/10	\$ _____
2/1/10	\$ _____
3/1/10	\$ _____
4/1/10	\$ _____
5/1/10	\$ _____
6/1/10	\$ _____
7/1/10	\$ _____
8/1/10	\$ _____
9/1/10	\$ _____

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.

Schedule A
Monetary Contributions Received

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

Statement covers period
from January 1, 2010
through September 30, 2010

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SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Joy Curry for South Lake Tahoe City Council 2010

I.D. NUMBER
1332019

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)
8/15/2010	Tom Linden 2581 Waverly Drive Newport Beach, Ca 92663	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Employed Investor - Linco Investment Co.	\$100	\$100	\$100
8/15/2010	Karen Linden 2581 Waverly Drive Newport Beach, Ca 92663	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	\$100
9/7/2010	Robert M. Henderson 591 Tahoe Keys Blvd South Lake Tahoe, Ca 96150	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney - Rollston, Henderson, Crabb & Johnson Law Offices	\$100	\$100	\$100
SUBTOTAL \$						

Schedule A Summary

- Amount received this period – contributions of \$100 or more.
(Include all Schedule A subtotals) \$ 300
- Amount received this period – unitemized contributions of less than \$100 \$ 817
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 1,117

*Contributor Codes
IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other
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 January 1, 2010
through September 30, 2010

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SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Joy Curry for South Lake Tahoe City Council 2010

FULL NAME, STREET ADDRESS AND ZIP CODE <small>(IF COMMITTEE ALSO ENTER I.D. NUMBER)</small>	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	(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
Joy Curry 2163 Harvard Ave South Lake Tahoe, Ca 96150	Candidate - Retired		0	<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	3,500	0%	3,500 9/2/10	CALENDAR YEAR 3,500 PER ELECTION ** 3,500
<input checked="" 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		RATE % DATE DUE	DATE INCURRED CALENDAR YEAR	PER ELECTION ** CALENDAR YEAR
<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		RATE % DATE DUE	DATE INCURRED CALENDAR YEAR	PER ELECTION ** CALENDAR YEAR
SUBTOTALS \$								

Schedule B Summary

- Loans received this period \$ 3,500
(Total Column (b) plus unfertilized loans less than \$100.)
- Loans paid or forgiven this period \$ 0
(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 \$** 3,500
(May be a negative number)

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

^t Contributor Codes
IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

**Schedule E
Payments Made**

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

SCHEDULE E

Statement covers period from <u>January 1, 2010</u> through <u>September 30, 2010</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Joy Curry for South Lake Tahoe City Council 2010

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 |
| FLI | 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
Mountain News P.O. Box 8974 South Lake Tahoe, Ca 96158	PRT			\$200
California Voter Guide 1954 W. Carson Street, Suite B Torrance, Ca 90501	LIT			750
KOWL Radio 276 Kingsbury Grade, Suite 203 Stallline, Nv 89449	RAD			1,000
SUBTOTAL \$				1,950

* 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.) \$ 3,940.50
 2. Unitemized payments made this period of under \$100 \$ 411.45
 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) \$ 0
 4. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) \$ 4,351.95
- TOTAL \$**

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

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

SCHEDULE E (CONT.)

Statement covers period from <u>January 1, 2010</u> through <u>September 30, 2010</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Joy Curry for South Lake Tahoe City Council 2010

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 (# COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
COPS Voter Guide 705-2 E. Bidwell Street Folsom, CA 95630	LIT			200
Pine Tree Printing 290 Kingsbury Grade, #17 Stateline, NV 89449	LIT			105
Lake Tahoe News P.O. Box 13406 South Lake Tahoe, Ca 96151	PRT			400
Signs of Tahoe 854 D Emerald Bay Rd South Lake Tahoe, Ca 96150	CMP			635.50
Mountain News P.O. Box 8974 South Lake Tahoe, Ca 96158	PRT			200

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

SUBTOTAL \$ 1,540.50

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

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

SCHEDULE E (CONT')

Statement cover's period from <u>January 1, 2010</u> through <u>September 30, 2010</u>	CALIFORNIA FORM 460
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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
Target Advertising P.O. Box 246 Gardnerville, Nv 89410	CMP			150
Anchor Design P.O. Box 7602 South Lake Tahoe, Ca 96158	CMP			300

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

SUBTOTAL \$ 450

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC