SEE INSTRUCTIONS ON REVERSE (Government Code Sections 84200-84216.5) Cover Page Campaign Statement Recipient Committee under penalty of perjury under the laws of the State of California that the foregoing is true and 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 Verification CITY Committee Information ☐ General Purpose Committee Officeholder, Candidate Controlled Committee STREET ADDRESS (NO P.O. BOX) OPTIONAL: FAX / E-MAIL ADDRESS MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. **EL CENTRO** PO BOX 969 **DISTRICT DIRECTOR DIVISION #2** COMMITTEE TO ELECT BRUCE KUHN FOR IMPERIAL IRRIGATION Small Contributor Committee
 Political Party/Central Committee (Also Complete Part 5) Sponsored O Recall State Candidate Election Committee Executed on Executed on Executed on Date 맒 STATE STATE S 92244 ZIP CODE ZIP CODE 1.D. NUMBER 1348223 Primarily Formed Candidate/ Officeholder Committee Primarity Formed Ballot Measure (Also Complete Parl 6) Sponsored Committee Controlled from through Statement covers period 760-353-0050 AREA CODE/PHONE AREA CODE/PHONE 10/21/2012 2/31/2012 Type or print in ink engnature of Controlling Officeholder, Candidate, State Measure Proponentor Responsible Officer of Sponsor Signature of Controlling Officeholder, Candidate, State Measure Proponent Signature of Controlling Officeholder, Candidate, State Measure Proponent Date of election if applicable: (Month, Day, Year) Ņ MAILING ADDRESS NAME OF ASSISTANT TREASURER, IF ANY OPTIONAL: FAX / E-MAIL ADDRESS 189 W BIANCA CT ANGELA SUCHMA **EL CENTRO** MAILING ADDRESS NAME OF TREASURER IMPERIAL 1474 HWY 86 KRISTY CURRY Treasurer(s) .... 🔽 Type of Statement: Preelection Statement Amendment (Explain below) Semi-annual Statement (Also file a Form 410 Termination) Termination Statement Treasurer or Assistant Treasurer Received W County ROV 3 Date Stamp STATE STATE SA S ÷ 38 92251 92243 ZIP CODE ZIP CODE Supplemental Preelection Special Odd-Year Report Quarterly Statement Statement - Attach Form 495 Page \_\_\_ CALIFORNIA For Official Use Only AREA CODE/PHONE AREA CODE/PHONE 앜 460 COVER PAGE

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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

Statement covers period

10/21/2012

CALIFORNIA 460

19. Outstanding Debts ..... Cash Equivalents and Outstanding Debts 16. ENDING CASH BALANCE ....... Add Lines 12 + 13 + 14, then subtract Line 15 15. Cash Payments ...... Column A, Line 8 above 14. Miscellaneous Increases to Cash ...... Schedule I, Line 4 13. Cash Receipts ..... Column A, Line 3 above **Current Cash Statement** 11. TOTAL EXPENDITURES MADE 9 φ 7 Ġ 4. ယ 'n 18. Cash Equivalents ..... 17. LOAN GUARANTEES RECEIVED ..... 12. Beginning Cash Balance ..... 10. Nonmonetary Adjustment ...... Schedule C, Line 3 Expenditures Made Contributions Received SEE INSTRUCTIONS ON REVERSE NAME OF FILER BRUCE KUHN Loans Made..... Accrued Expenses (Unpaid Bills) ......Schedule F, Line 3 SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7 Nonmonetary Contributions ..... If this is a termination statement, Line 16 must be zero Payments Made..... SUBTOTAL CASH CONTRIBUTIONS ..... TOTAL CONTRIBUTIONS RECEIVED Loans Received ..... Monetary Contributions ..... Add Line 2 + Line 9 in Column B above Previous Summary Page, Line 16 See instructions on reverse Add Lines 8 + 9 + 10 Schedule H, Line 3 Schedule A, Line 3 Schedule B, Part 2 Schedule E, Line 4 Schedule C, Line 3 Schedule B, Line 3 Add Lines 1 + 2 (A) 49 Column A
TOTALTHIS PERIOD
(FROMATTACHED SCHEDULES) 60,000.00 1,347.00 3,300.29 1,750.11 1,750.11 1,347.00 1,347.00 1,450.18 850.11 ,347.00 ,750.11 þ þ þ þ þ þ subtracted from previous amounts in Column A to the S from Lines 2, 7, and 9 (if carry over the amounts for this calendar year, only the first report being filed figures that should be Column A may be negative report. Some amounts in To calculate Column B, add 69 period amounts. If this is from Column B of your last corresponding amounts Column B
CALENDAR YEAR
TOTAL TODATE 67,657.57 67,657.57 67,657.57 60,000.00 71,019.00 10,869.00 70,869.00 150.00 from through þ þ þ reported in Column B. \*Amounts in this section may be different from amounts Candidates **Expenditure Limit Summary for State** 21. Expenditures 20. Contributions **General Elections** Running in Both the State Primary and Calendar Year Summary for Candidates FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772) Received 12/31/2012 Date of Election (mm/dd/yy) 22. Cumulative Expenditures Made\* (If Subject to Voluntary Expenditure Limit) 1/1 through 6/30 Page 1348223 I.D. NUMBER Total to Date 7/1 to Date 으

# Schedule A (Continuation Sheet) Monetary Contributions Received

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

Statement covers period

10/21/2012

CALIFORNIA 460

SCHEDULE A (CONT.)

FORM

NAME OF FILER BRUCE KUHN from\_ through. 12/31/2012 Page\_ 1348223 I.D. NUMBER 으

		\$1,000.00	SUBTOTAL \$			
				SCCOM		
\$1,000.00	\$1,000.00	\$1,000.00	N/A	OSC COM	MICHAEL B. COX 249 ANDRITA PLACE BRAWLEY, CA 92227	11/5/2012
\$500.00	\$500.00	-0-	N/A	OSC COM	JOHN KUHN AUGUSTA (SHEA) PORCHER KUHN EL CENTRO, CA 92244	10/12/2012
\$500.00	\$500.00	-0-	N/A	OTH SCC	PREECE FARMS 2646 E. DEALWOOD EL CENTRO, CA 92243	9/14/2012
\$500.00	\$500.00	-0-	N/A	DIND COM OTH SCC	WEST-GRO FARMS, INC. P.O. BOX 1748 EL CENTRO, CA 92244	9/11/2012
PER ELECTION TODATE (IF REQUIRED)	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	AMOUNT RECEIVED THIS PERIOD	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SEU-EMPLOYED, ENTER NAME OF BUSINESS)	CONTRIBUTOR CODE *	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTER LD. NUMBER) CODE *	DATE RECEIVED

\*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 **Monetary Contributions Received**

NAME OF FILER

BRUCE KUHN

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

	12/31/2012	nt covers period 10/21/2012	
I.D. NUMBER	Page of	CALIFORNIA 460	SCHEDULE A

1348223

through

from -

Statement cov

3. Total moneta	2. Amount rece	Schedule A Summary  1. Amount received this peri  (Include all Schedule A su		9/25/2012	7/6/2012	4/27/2012	4/4/2012	4/5/2012	DATE RECEIVED
Total monetary contributions received this period.	2. Amount received this period - unitemized monetary contributions of less than \$100	Schedule A Summary  1. Amount received this period – itemized monetary contributions.  (Include all Schedule A subtotals.)		JOE BARANA	THE FRITZ W AND MADELINE L KUHN TRUST A DTD 47417 MEDINA DR W PALM DESERT, CA 92260-5855	MADJAC FARMS PO BOX 2135 EL CENTRO, CA 92243	JERRY BARANA 2230 SANDLEWOOD EL CENTRO, CA 92243	MICHAEL & KERRI ABATII 1205 AURORA DR. EL CENTRO, CA 92243	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSOENTER ID. NUMBER)
	of less than \$			COM SCC	□ IND □ IND □ COM □ PTY □ SCC	DOTH SCC	DIND COM	DIND OTH SCC	CONTRIBUTOR CODE *
	100\$	\$	SUBTOTAL\$	N/A	N/A	N/A	N/A	MIKE ABATTI FARMS	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER IIF SELF-EMPLOYED, ENTER NAME OF BUSINESS)
	\$347.00	\$1,000.00	-0-	-0-	-0-	-0-	-0-	-0-	AMOUNT RECEIVED THIS PERIOD
SCC – Small Contribu	OTH - Other	*Contributor Codes IND – Individual COM – Recipient Co		\$200.00	\$1,000.00	\$5,000.00	\$100.00	\$1,500.00	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)
SCC – Small Contributor Committee	OTH - Other (e.g., business entity)	*Contributor Codes IND – Individual COM – Recipient Committee		\$200.00	\$1,000.00	\$5,000.00	\$100.00	\$1,500.00	PER ELECTION TO DATE (IF REQUIRED)

\$1,347.00

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		]					of less than \$100 )	(Total Column (b) plus unitemized loans of less than \$100.)
			-0-	چه ا				1. Loans received this period
		(Enter (e) on Schedule E, Line 3)						Schedule B Summary
		-0-	60,000 <b>\$</b>	45	-0-\$	SUBTOTALS \$		
5	DATE INCURRED	\$	DATE DUE	Š	5			†□ IND □ COM □ OTH □ PTY □ SCC
PER ELECTION ***		RATE %		FORGIVEN		ra-19-8		
CALENDAR YEAR				□ PAID				
	DATE INCURRED	5	DATE DUE	S	Š	Î		TO IND COM OTH PTY SCC
PERELECTION**	Í	RATE %	5	S				
CALENDAR YEAR				PAID				
\$ 60,000	4/4/2012 DATE INCURRED	, -0-	12/31/12 DATE DUE	Í	-0-	\$ 60,000		TEZ IND □ COM □ OTH □ PTY □ SCC
PER ELECTION**	<b>(</b>	SATE %	\$ 00,000	FORGIVEN			רם להבוא <i>פ</i>	EL CENTRO, CA 92243
CALENDAR YEAR	þ	<b>&gt;</b>	80 000	PAID			KUHN LAND	BRUCE KUHN
(g) CUMULATIVE CONTRIBUTIONS TO DATE	ORIGINAL AMOUNT OF LOAN	(e) INTEREST PAID THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	AMOUNT RECEIVED THIS PERIOD	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER LD. NUMBER)
	1348223							BRUCE KUHN
	1.D. NUMBER							NAME OF FILER
of 	Page	12/31/2012	through12/3	=				SEE INSTRUCTIONS ON REVERSE
<b>^ 460</b>	CALIFORNIA 460	t covers period 10/21/2012	Statement covers period 10/21/2012 from	<b>=</b>	ounded rs.	Amounts may be rounded to whole dollars.	Amo	Schedule B – Part 1 Loans Received

ώ	is	<del>. `</del>
3. Net change this period. (Subtract Line 2 from Line 1.)	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.)	Loans received this period\$  (Total Column (b) plus unitemized loans of less than \$100.)
1		
(May be a regalive number)	-0-	-0-

IND -- Individual
COM -- Recipient Committee
(other than PTY or SCC)
OTH -- Other (e.g., business entity)
PTY -- Political Party
SCC -- Small Contributor Committee †Contributor Codes

### Schedule E (Continuation Payments Ma

Type or print in ink.

SCHEDULE E (CONT.)

(Continuation Sheet)  Amounts may be rounded	Statement covers period	CALIFORNIA A CO
	from 10/21/2012	FORM 400
SEE INSTRUCTIONS ON REVERSE	through 12/31/2012	Page of
NAME OF FILER		I.D. NUMBER
BRUCE KUHN		1348223
CODES: If one of the following codes accurately describes the payment, you may enter the code. Other	nerwise, describe the payment.	

			0.000	
DES: If one of the following codes accurately describes the	you may en	-	i	
P P P P P P P P P P P P P P P P P P P	member communications meetings and appearances office expenses petition circulating phone banks polling and survey research	RAD SAL I판 IRS	ts on costs als meals	
legal defense PRO campaign literature and mailings	services (leg	posage, delivery and messenger services (legal, accounting)  VOT voter registration  print ads  WEB information technology costs (internet, e-mail)	ernet, e-mail)	incloate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE C	OR DESCRIPTION OF PAYMENT	AI	AMOUNT PAID
IMPERIAL VALLEY LIVING	PRT	PRINT NEWPAPER SPACE		\$310.00
ROBERT RITORTO	SAL	WALKER		\$136.00
CHEVALA WONG	SAL	WALKER		\$200.00
JULIO CARINO	SAL	WALKER		\$136.00
ANTONIO CARINO	SAL	WALKER		\$128.00
*Payments that are contributions or independent expenditures must also be summarized on Schedule D.	Schedule D.	SUBTOTAL \$	)TAL \$	\$910.00

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

82

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Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period

SCHEDULE E (CONT.)

CALIFORNIA

S S S S S \* Payments that are contributions or independent expenditures must also be summarized on Schedule D. CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, SEE INSTRUCTIONS ON REVERSE **LISA ROMERO** ADRIANA ROMERO **BRINCOLINAS** CHRIS BOWEN LIDIA ARCELI RUBY **BRUCE KUHN** independent expenditure supporting/opposing others (explain)\* candidate filing/ballot fees civic donations contribution (explain nonmonetary)\* campaign consultants campaign paraphernalia/misc. legal defense fundraising events campaign literature and mailings NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) ŖŖŖŖŖŖŖ ŇBR office expenses meetings and appearances member communications professional services (legal, accounting) polling and survey research phone banks petition circulating postage, delivery and messenger services CODE SAL CVC SAL SAL SAL WALKER WALKER CIVIC DONATION WALKER WALKER DESCRIPTION OF PAYMENT WEB SERVE from through describe the payment. returned contributions radio airtime and production costs t.v. or cable airtime and production costs campaign workers' salaries information technology costs (internet, e-mail) voter registration transfer between committees of the same candidate/sponsor staff/spouse travel, lodging, and meals candidate travel, lodging, and meals 10/21/2012 12/31/2012 SUBTOTAL \$ Page 1348223 I.D. NUMBER FORM AMOUNT PAID 앜 \$328.00 \$128.00 \$32.00 \$80.00 \$40.00 \$48.00

### Schedule E (Continuatio Payments Ma

SCHEDULE E (CONT.)

971000	SUBTOTAL		zed on Schedule D	*Payments that are contributions or independent expenditures must also be summarized on Schedule D.
\$112.00		WALKER	SAL	LIDIA ARCECELI RUBY
\$180.00		WALKER	SAL	PEDRO CARINO
\$180.00		WALKER	SAL	JULIO CARINO
\$40.00		WALKER	SAL	ROBERT RITORTO
AMOUNT PAID	DESCRIPTION OF PAYMENT	OR	CODE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)
s ne candidate/sponsor mail)	Otherwise, describe the payment.  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)	payment, you may enter the code. Otherwise, member communications RAD meetings and appearances SAL petition circulating phone banks postage, delivery and messenger services professional services (legal, accounting) WEB	payment, you may enter the code member communications meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger service professional services (legal, accounting) print ads	CODES: If one of the following codes accurately describes the paymen CMP campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  FND fundraising events  ND independent expenditure supporting/opposing others (explain)*  POS postage, LEG legal defense  LIT campaign literature and mailings
3ER	I.D. NUMBER 1348223			BRUCE KUHN
of	through 12/31/2012 Page			SEE INSTRUCTIONS ON REVERSE
CALIFORNIA 460	Statement covers period CALIFO from 10/21/2012 FOR		Type or print in ink. Amounts may be rounded to whole dollars.	(Continuation Sheet)  Payments Made

#### Recipient Committee Cover Page Campaign Statement

RECEIVED Date Stamp

CALIFORNIA 460

COVER PAGE

through 12/31/14	Statement covers period from 1/1/14
T	Date of elec (Mont

ction if applicable: th, Day, Year) 4

REGISTRAR OF VOTERS ERIAL COUNTY APR 2 0 2016

Page \_ For Official Use Only 다 니

SEE INSTRUCTIONS ON REVERSE

#	15 1823 15 1823	3. Committee Information
	☐ Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	General Purpose Committee     Sponsored     Small Contributor Committee     Political Party/Central Committee
	Controlled Sponsored (Also Camplele Part 5)	(Also Complete Part 5)
	Primarily Formed Ballot Measure Committee	Officeholder, Candidate Controlled Committee  O State Candidate Election Committee
2.	ses - Complete Parts 1, 2, 3, and 4.	1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.

Ņ Type of Statement:

Semi-annual StatementTermination Statement Semi-annual Statement Preelection Statement

Quarterly Statement Special Odd-Year Report

(Also file a Form 410 Termination)

Amendment (Explain below)

Treasurer(s)

NAME OF TREASURER

MAILING ADDRESS

STATE

ZIP CODE

AREA CODE/PHONE

of Bruce Kunn for

STREET ADDRESS (NO P.O. BOX)

banh xag

STATE

ZIP CODE

AREA CODE/PHONE

COMMITTEE NAME (OR CANDIDATE'S NAME)

miperal Impation

uchma

STATE

AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

#### Verification

OPTIONAL: FAX / E-MAIL ADDRESS

STATE

AREA CODE/PHONE

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

Executed on Executed on Date

Date

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

Signature of Controlling Officaholder, Candidate, State Measure Proponent

FPPC Advice: advice@fppc.ca.gov (866/275-3772) FPPC Form 460 (Jan/2016) www.fppc.ca.gov

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Summary Page	to whole dollars.	Sta	Statement covers period	CALIFORNIA 460
		through		Page of
IAME OF FILER				I.D. NUMBER
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and	Calendar Year Summary for Candidates Running in Both the State Primary and
Monetary Contributions	0 0 0	\$ 10869.00 \$ 60,000.00 \$ 70869.00 \$ 150.00 \$ 71019.00	General Elections 1/1 th 20. Contributions Received \$ 21. Expenditures Made \$	ns 1/1 through 6/30 7/1 to Date 0 \$
S	\$ 200.00 0 \$ 200.00	\$ 67991.82 0 \$ 67991.82	Expenditure Limit Summary for State Candidates  22. Cumulative Expenditures Made (if Subject to Voluntary Expenditure Limit)  Date of Election Total to	e Limit Summary for State  Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) lection  Total to Date
0. Nonmonetary Adjustment	\$ 200.00	\$ 67991.82	(animuayy)	<b>⇔</b>
2. Beginning Cash Statement 2. Beginning Cash Balance	\$ 666.11 0 0 0 0 466.11	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		\$\$ *Amounts in this section may be different from amounts reported in Column B.
7. LOAN GUARANTEES RECEIVED Schedule B, Part 2  Cash Equivalents and Outstanding Debts  8. Cash Equivalents	\$ 0	filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).		
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	0	0	FPPC Advice: advi	FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

#### Payments Made Schedule E

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

Statement covers period CALIFORNIA 460 SCHEDULE E

from.

7/1/14

through

12/31/14

Page \_ I.D. NUMBER

9

Fil Filing Fees

#### Campaign Statement Cover Page Recipient Committee

SEE INSTRUCTIONS ON REVERSE from. Statement covers period 12/31/15 Date of election if applicable: (Month, Day, Year) REGISTRAR OF VOTERS INFERIAL COUNTY MAY 0 6 2016 Date Stamp RECEIVED Page. CALIFORNIA 460 FORM For Official Use Only 으 COVER PAGE

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OPTIONAL: FAX / E-MAIL ADDRESS	HALLING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX  TO BOX 969  STATE ZIPO  CITY  CITY  CITY  CITY  CITY  CITY  CITY  CITY  CITY  A  THE CITY  THE CI	STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP	Omni 1+ tec to thect but Distinct Division #2	3. Committee Information	1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.  Officeholder, Candidate Controlled Committee Ostate Candidate Election Committee Ostate Election Committee Election Committee Ostate Election Committee Election Committee Ostate Election Committee Ostate Election Committee Ostate Election Committee Election Committee Ostate Election Committee Ostate Election Committee Election Committee Election Committee Election Committee Ostate Election Committee Ostate Election	The Control of the Co
	BOX 212-CODE 7224-	ZIP CODE	32	I.D. NUMBER	Primarily Fr. Complete Parl Primarily Fr. Control Sponso (Also Complete P	=
			2	ABER	Implete Parts 1, 2, 3, and Primarily Formed Ballot Committee Committee Controlled Sponsored (Ass Complete Part 8) Primarily Formed Candi Officeholder Committee (Ass Complets Part 7)	
	AREA CODE/PHONE	AREA CODE/PHONE	Star word		Complete Parts 1, 2, 3, and 4.  Primarily Formed Ballot Measure Committee Controlled Sponsored (Aso Complete Part 6)  Primarily Formed Candidate/ Officeholder Committee (Aso Complete Part 7)	
OPTIONAL: FAX / E-MAIL ADDRESS	MAILING ADDRESS	H ANTO	MALLING ADDRESS	Treasurer(s)	2. Type of Statement:  Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination) Amendment (Explain below)	
RESS		RER, IF AN	whma		ement ement atement tement 1410 Terminati plain below)	
	STATE	STATE	~			
	ZIP CODE	1000E			Quarterly Special C	
		4			Quarterly Statement Special Odd-Year Report	
	AREA CODE/PHONE	AREA CODE/PHONE			Report 1	

#### 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 free and corpect.

Executed on Executed on Executed on. Executed on Date

> of Controlling Officeholder, Carafidate, State Measure Proposient or Responsible Officer of Sponsor Signature of Controlling Officeholder, Candidate, State Measure Proponent rer or Assistant Trensure:

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Amounts may be rounded

SUMMARY PAGE

Summary Page	to whole dollars.	Stan	Statement covers period	CALIFORNIA ASO
		from	6/30/15	FORM
		through _	12/31/15	Page of
SEE INSTRUCTIONS ON REVERSE				
NAME OF FILER				.O. NOSBERX
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and	Calendar Year Summary for Candidates Running in Both the State Primary and
			General Flections	

FPPC Advice: advice@fppc.ca.gov (866/275-3)			13. CUSTALIGHTS DEDIS ADULINE 4 TELLE 3 HI CUBIRI D SUVE
		0	
	from Lines 2, 7, and 9 (if any).		Cash Equivalents and Outstanding Debts
	filed for this calendar year, only carry over the amounts	\$0	17. LOAN GUARANTEES RECEIVED Schedule B, Part 2
	previous period amounts. If		If this is a termination statement, Line 16 must be zero.
	be negative figures that	\$ 466.11	dd Lines 12 + 13 +
reported in Column B.	of your last report. Some	0	15. Cash Payments
*Amounts in this section may be different from amounts		0	13. Cash Receipts Column A, Line 3 above
	To calculate Column B.	\$ 466.11	Previous
\$			Current Cash Statement
\$	\$ 67991.82	\$ 0	11. TOTAL EXPENDITURES MADE
	0	0	ب
Date of Election Total to Date	0	0	Accrued Expenses (Unpaid Bills)
22. Cumulative Expenditures Made*  [If Subject to Voluntary Expenditure Limit]	\$ 67991.82	<b>s</b>	SUBTOTAL CASH PAYMENTS.
			7 I cane Made Schedule H Line 3
Expenditure Limit Summary for State Candidates	\$ 67991.82	0	xpenditures Made
	\$	\$	5. TOTAL CONTRIBUTIONS RECEIVED
21. Expenditures 200.00	7101000		
20. Contributions 0 \$	\$ 70869.00	\$	SUBTOTAL CASH CONTRIBUTIONS
a madaga gada	60,000.00	0	Loans Received
General Elections	10869.00	0	1. Monetary Contributions Schedule A, Line 3
Running in Both the State Primary and	COLENDAR YEAR TOTAL TO DATE	TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Contributions Received

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Summary Page	to whole dollars.	State	Statement covers period	CALIFORNIA 460
		from		
SEE INSTRUCTIONS ON REVERSE		through_	6/30/15	Page of
NAME OF FILER				I.D. NUMBER
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B Calendar year Total to date	Calendar Year Summary for Candidates Running in Both the State Primary and General Flortions	nary for Candidates State Primary and
Monetary Contributionssc  Loans Receivedsc  SUBTOTAL CASH CONTRIBUTIONS	0 0	\$ 10869.00 \$ 60,000.00 \$ 70869.00	ons s	1/1 through 6/30 7/1 to Date  0 \$
3. SUBTOTAL CASH CONTRIBUTIONS	5 0		Received \$ 21. Expenditures Made \$	200.00 \$
Expenditures Made  6. Payments Made	0 0	\$ 67991.82 0 67991.82	Expenditure Limit S Candidates  22. Cumulativ	e Limit Summary for State  Cumulative Expenditures Made*
Accrued Expenses (Unpaid Bills)Sc  D. Nonmonetary AdjustmentSc  TOTAL EXPENDITURES MADEAdd	0 0		Date of Election (mm/dd/yy)	Total to Date
Current Cash Statement  12. Beginning Cash Balance	\$ 466.11	To calculate Column B, add amounts in Column A to the corresponding		\$
14. Miscellaneous Increases to Cash	0 466.11	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	reported in Column B.	reported in Column B.
17. LOAN GUARANTEES RECEIVED Schedule B, Pert 2	\$0	filed for this calendar year, only carry over the amounts		
Cash Equivalents and Outstanding Debts  18 Cash Equivalents	iso	from Lines 2, 7, and 9 (if any).		
	\$ 0		FPPC Advice: advi	FPPC Advice: advice@fppc.ca.gov (866/275-3772)

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