

**Recipient Committee
Campaign Statement
Cover Page**

Date Stamp RECEIVED CITY OF PALM SPRINGS OFFICE OF THE CITY CLERK	Page _____ of _____
	For Official Use Only

CALIFORNIA FORM 460

Statement covers period
from JAN 1, 2017
through JUN 30, 2017

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

SEE INSTRUCTIONS ON REVERSE

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:

Preelection Statement
 Semi-annual Statement
 Termination Statement
(Also file a Form 410 Termination)
 Amendment (Explain below)
One individual monetary contribution on Sch A was overlooked. That contribution has been added in (See pg 2 of 2 on Sch A)

3. Committee Information I.D. NUMBER 1393406

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Committee to Save Osuit Canyon

STREET ADDRESS (NO P.O. BOX)
[REDACTED]

CITY STATE ZIP CODE AREA CODE/PHONE
Palm Springs CA 92264 [REDACTED]

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
POB 4785

CITY STATE ZIP CODE AREA CODE/PHONE
Palm Springs CA 92263

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER
MARK K SMITH

MAILING ADDRESS
[REDACTED]

CITY STATE ZIP CODE AREA CODE/PHONE
Palm Springs CA 92264 [REDACTED]

NAME OF ASSISTANT TREASURER, IF ANY
n/a

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 29 SEP 2017
Date

Executed on _____
Date

Executed on _____
Date

Executed on _____
Date

By [REDACTED]
Signature of Treasurer or Assistant Treasurer

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

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

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

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
n/a

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

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

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.*

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

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

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER n/a JURISDICTION

SUPPORT
 OPPOSE

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

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 <u>n/a</u>	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

Attach continuation sheets if necessary

**Campaign Disclosure Statement
Summary Page**

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>1 JAN 2017</u> through <u>30 JUN 2017</u>	CALIFORNIA FORM 460
Page _____ of _____	I.D. NUMBER <u>1393406</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

MARK K SMITH

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions..... Schedule A, Line 3	\$ _____	\$ <u>38,730.00</u>
2. Loans Received..... Schedule B, Line 3	\$ _____	\$ _____
3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1 + 2	\$ _____	\$ <u>38,730.00</u>
4. Nonmonetary Contributions..... Schedule C, Line 3	\$ _____	\$ _____
5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4	\$ _____	\$ <u>38,730.00</u>

**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	\$ <u>NA</u>	\$ _____
21. Expenditures Made	\$ _____	\$ <u>R</u>

Expenditures Made

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made..... Schedule E, Line 4	\$ _____	\$ <u>13,657.00</u>
7. Loans Made..... Schedule H, Line 3	\$ _____	\$ _____
8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7	\$ _____	\$ <u>13,657.00</u>
9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3	\$ _____	\$ _____
10. Nonmonetary Adjustment..... Schedule C, Line 3	\$ _____	\$ _____
11. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10	\$ _____	\$ <u>13,657.00</u>

**Expenditure Limit Summary for State
Candidates**

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

Date of Election (mm/dd/yy)	Total to Date
<u>1/1/17</u>	\$ _____
<u>1/1/19</u>	\$ _____

Current Cash Statement

12. Beginning Cash Balance..... Previous Summary Page, Line 16	\$ _____
13. Cash Receipts..... Column A, Line 3 above	\$ <u>38,730.00</u>
14. Miscellaneous Increases to Cash..... Schedule I, Line 4	\$ _____
15. Cash Payments..... Column A, Line 8 above	\$ <u>13,657.00</u>
16. ENDING CASH BALANCE..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>25,072.00</u>

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

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).

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

17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2 \$ _____

Cash Equivalents and Outstanding Debts

18. Cash Equivalents..... See instructions on reverse	\$ _____
19. Outstanding Debts..... Add Line 2 + Line 9 in Column B above	\$ _____

**Schedule A
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period from <u>1 JAN 2017</u> through <u>30 JUN 2017</u>	CALIFORNIA FORM 460
Page <u>1</u> of <u>2</u>	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

MARK K SMITH

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)
9 JAN	Nolly Bondhus [REDACTED] Palm Springs, CA 92264	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	self-employed	\$ 2500	\$ 2500	/
24 JAN	Mark K Smith [REDACTED] Palm Springs, CA 92264	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	\$ 2500	\$ 2500	/
24 JAN	Glenn Hessel [REDACTED] Palm Springs, CA 92264	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	\$ 1000	\$ 1000	/
23 JAN	Sheri Diamond [REDACTED] Palm Springs CA 92264	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	\$ 1000	\$ 1000	/
7 Jan	Lucie Arnez-Luckinbill [REDACTED] Palm Springs CA 92264	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	actress	\$ 1000	\$ 1000	/

SUBTOTAL \$ 8000

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 10,760.00
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 1,125.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 11,885.00

*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

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>1 JAN 2017</u> through <u>30 JAN 2017</u>	CALIFORNIA FORM 460
	Page <u>2</u> of <u>2</u>

NAME OF FILER MARK K SMITH I.D. NUMBER 1393406

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)
7 JAN	Sandu Edolstein [REDACTED] Palm Springs CA 92262	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Mortgage Loan Originator	\$250	\$250	
3 JAN	Clifford Hopkins Palo Alto, CA	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Mktg Dir at Instagram (Menlo Park, CA)	\$510	\$510	
23 JAN	Wil Stiles [REDACTED] Palm Springs CA 92264	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	self-employed	\$2000	\$2000	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$				<u>2760</u>		

*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

For Schedule A Monetary Contributions Rcv'd

Oswit First Half 2017 Individual Contributions

WeCaring Donations:

\$50	Donna Krause	\$100	Anonymous
Jan 15, 2017		May 10, 2017	
\$20	scott scott	\$15	Alexander Nowik
Jan 12, 2017	We have great momentum to carry this important mission. Though I protect this amazing & unique area in Palm Springs.	Apr 27, 2017	
\$25	Lisa Jamieson	\$50	Mark Leonard
Jan 12, 2017		Mar 3, 2017	
\$1,000	Lucie Amaz- Luckinbill	\$100	Harrison Hart
Jan 7, 2017		Mar 3, 2017	Thanks for your work. We love the trail.
\$250	Sandy Edelstein	\$50	Mark Fichandler
Jan 7, 2017	This is a critical moment for Palm Springs.	Mar 2, 2017	I'm only in PS for a few weeks here and there, but LOVE hiking especially Lykken.
\$100	Barbara Cooper	\$50	Bunny Goodrich
Jan 5, 2017		Mar 2, 2017	Save the canyon, save ecotourism, save ourselves!!
\$100	Iori Therault	\$50	Linda Ficere
Jan 4, 2017		Jan 29, 2017	
\$510	Clifford Hopkins	\$1,000	Sheri Diamond
Jan 3, 2017		Jan 23, 2017	We have to keep fighting to preserve this beautiful area!
\$25	Leslie Walker	\$100	Michael Stoltzman
Jan 3, 2017	I appreciate what you are doing. I think it is important and kind.	Jan 17, 2017	This is an extraordinary cause - the land must be saved for all to use - keep Palm Springs a treasure for everyone!
\$40	markku lahdesmaki		
Jan 3, 2017			

For Jan-Jun 2017:

1. WeCaring contributions over \$100 =	\$2760
2. WeCaring contributions UNDER \$100 =	\$1125

3. Non- WeCaring contributions over \$100 =	\$6000
4. Non-WeCaring contributions under \$100 =	\$0
	\$9885
	11

Wil Stiles non WeCaring contribution added in (see Sch A p. 2 of 2)

**Schedule C
Nonmonetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period		CALIFORNIA FORM 460
from _____	through _____	
Page _____ of _____		I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

n/a

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)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
Attach additional information on appropriately labeled continuation sheets.						SUBTOTAL \$	

Schedule C Summary

- Amount received this period – itemized nonmonetary contributions.
(Include all Schedule C subtotals.).....\$ _____
- Amount received this period – unitemized nonmonetary contributions of less than \$100\$ _____
- 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

**Schedule D
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Amounts may be rounded
to whole dollars.

SCHEDULE D

Statement covers period from _____ through _____	CALIFORNIA FORM 460
Page _____ of _____	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

n/a

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
SUBTOTAL \$						

Schedule D Summary

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)..... \$ _____
- Unitemized contributions and independent expenditures made this period of under \$100..... \$ _____
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)..... **TOTAL.. \$** _____

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period from _____ through _____	CALIFORNIA FORM 460
	Page _____ of _____
I.D. NUMBER	

NAME OF FILER

W/R

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
SUBTOTAL \$						

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period from _____	CALIFORNIA FORM 460
through _____	
Page _____ of _____	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER _____

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
<i>See attached one page spreadsheet. It has a 'Sch E' coded column.</i>			

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

SUBTOTAL \$ _____

Schedule E Summary

- Itemized payments made this period. (Include all Schedule E subtotals.) \$ _____
- Unitemized payments made this period of under \$100..... \$ _____
- Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)..... \$ _____
- Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)..... **TOTAL \$** _____

Committee to Save Oswit Canyon Statement 2017

JUNE 2017

Date	Check	Desc	Dep	W/D	Balance	Notes	Sch E Code
6-Jan		Deposit	\$ 100.00		\$ 100.00		
9-Jan		Xfer from Previous Bank Acct	\$ 1,650.00		\$ 1,750.00		
9-Jan		Deposit	\$ 2,600.00		\$ 4,350.00	Molly Bundhus \$2500	
17-Jan		Xfer from Previous Bank Acct	\$ 1,839.20		\$ 6,189.20		
17-Jan	1005	John Burkett (Signature gatherer)		\$ 2,904.00	\$ 3,285.20		PET
18-Jan	1004	John Burkett (Signature gatherer)		\$ 2,000.00	\$ 1,285.20		PET
23-Jan		Deposit	\$ 2,000.00		\$ 3,285.20	Wit Stiles \$2000	
24-Jan		Deposit	\$ 4,025.00		\$ 7,310.20	Mark Smith \$2500, Glenn Hessel \$1000	
27-Jan	1006	John Burkett (Signature gatherer)		\$ 3,132.00	\$ 4,178.20		PET
17-Feb		eDeposit	\$ 240.00		\$ 4,418.20		
21-Feb		Square Test	\$ 0.01		\$ 4,418.21		
21-Feb		Square Test		\$ 0.01	\$ 4,418.20		WEB
22-Feb	1001	Crayons Catering		\$ 3,000.00	\$ 1,418.20		MTG
23-Feb		eDeposit	\$ 1,320.00		\$ 2,738.20		
23-Feb	1003	Crayons Catering		\$ 1,998.63	\$ 739.57		MTG
27-Feb		Square Deposit (Lucy Arnaz auction event)	\$ 7,293.75		\$ 8,033.32		
27-Feb		eDeposit (artwork sold at H3K Event?)	\$ 820.00		\$ 8,853.32		
27-Feb	1014	Maria Vasquez (H3K cleanup)		\$ 100.00	\$ 8,753.32		OFC
2-Mar		eDeposit	\$ 150.00		\$ 8,903.32		
6-Mar		WePay Deposit	\$ 48.25		\$ 8,951.57		
6-Mar		WePay Deposit	\$ 145.05		\$ 9,096.62		
6-Mar		TicketDerby Deposit (Lucy Arnaz Event tix sales)	\$ 10,565.10		\$ 19,661.72		
6-Mar	1002	Canyon Copy and Print		\$ 68.30	\$ 19,593.42		POS
9-Mar		WePay Deposit	\$ 48.25		\$ 19,641.67		
9-Mar	1001	Canyon Copy and Print		\$ 61.53	\$ 19,580.14		POS
3-Apr		TicketDerby Deposit (Extra)	\$ 1,173.90		\$ 20,754.04		
6-Apr	1015	Robert Bell		\$ 97.86	\$ 20,656.18		PRO
12-Apr	1016	Ace Hotel		\$ 250.00	\$ 20,406.18		MTG
1-May		WePay Deposit	\$ 14.26		\$ 20,420.44		
12-May		WePay Deposit	\$ 96.80		\$ 20,517.24		
8-Jun	1005	US Postal Svc (for mailbox)		\$ 45.00	\$ 20,472.24		POS
22-Jun		Paypal Xfer	\$ 4,600.00		\$ 25,072.24	Mistaken xfer to our acct. Should have gone to Jane's acct instead.	
						Check back to Jane written 7-13 to correct acct.	
			\$ 38,729.57	\$ 13,657.33	\$ 25,072.24		

*eDeposits are from previous acct from before we started using Wepay.

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

Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from _____ through _____	CALIFORNIA FORM 460
	Page _____ of _____
	I.D. NUMBER _____

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER _____

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

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

SUBTOTAL \$

Schedule F
Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

Statement covers period
from
through

CALIFORNIA FORM 460

Page of

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Handwritten initials 'mla'

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
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)

Table with 6 columns: NAME AND ADDRESS OF CREDITOR, CODE OR DESCRIPTION OF PAYMENT, (a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD, (b) AMOUNT INCURRED THIS PERIOD, (c) AMOUNT PAID THIS PERIOD, (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD.

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

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 \$
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 \$
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 \$

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded
to whole dollars.

SCHEDULE F (CONT.)

Statement covers period from _____ through _____	CALIFORNIA FORM 460
	Page _____ of _____
I.D. NUMBER	

NAME OF FILER

n/a

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) |

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

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
SUBTOTALS \$			\$	\$	\$

**Schedule H
Loans Made to Others***

Amounts may be rounded to whole dollars.

Statement covers period
from _____
through _____

CALIFORNIA FORM 460
Page _____ of _____
I.D. NUMBER _____

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

n/a

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*		(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				<input type="checkbox"/> PAID	<input type="checkbox"/> FORGIVEN				
		\$ _____	\$ _____	\$ _____	\$ _____	DATE DUE _____	_____% RATE	\$ _____ DATE INCURRED _____	CALENDAR YEAR _____ PER ELECTION** _____
		\$ _____	\$ _____	\$ _____	\$ _____	DATE DUE _____	_____% RATE	\$ _____ DATE INCURRED _____	CALENDAR YEAR _____ PER ELECTION** _____
		SUBTOTALS	\$ _____	\$ _____	\$ _____	\$ _____			

*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.

(Enter (e) on Schedule I, Line 3)

Schedule H Summary

- Loans made this period.....\$ _____
(Total Column (b) plus unitemized loans of less than \$100.)
- Payments received on loans.....\$ _____
(Total Column (c) plus unitemized payments of less than \$100.)
- Net change this period. (Subtract Line 2 from Line 1.).....NET \$ _____
(Enter the net here and on the Summary Page, Column A, Line 7.)

****if Required**

**Schedule I
Miscellaneous Increases to Cash**

Amounts may be rounded
to whole dollars.

SCHEDULE I

Statement covers period from _____ through _____	CALIFORNIA FORM 460
	Page _____ of _____
I.D. NUMBER	

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

[Handwritten scribble]

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
	see attached spreadsheet which summarizes this committee's bank acct.		

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$

Schedule I Summary

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

Committee to Save Oswit Canyon Statement 2017

JUNE 2017

Date	Check	Desc	Dep	W/D	Balance	Notes	Sch E Code
6-Jan		Deposit	\$ 100.00		\$ 100.00		
9-Jan		Xfer from Previous Bank Acct	\$ 1,650.00		\$ 1,750.00		
9-Jan		Deposit	\$ 2,600.00		\$ 4,350.00	Molly Bundhus \$2500	
17-Jan		Xfer from Previous Bank Acct	\$ 1,839.20		\$ 6,189.20		
17-Jan	1005	John Burkett (Signature gatherer)		\$ 2,904.00	\$ 3,285.20		PET
18-Jan	1004	John Burkett (Signature gatherer)		\$ 2,000.00	\$ 1,285.20		PET
23-Jan		Deposit	\$ 2,000.00		\$ 3,285.20	W/H Stiles \$2000	
24-Jan		Deposit	\$ 4,025.00		\$ 7,310.20	Mark Smith \$2500, Glenn Hessel \$1000	
27-Jan	1006	John Burkett (Signature gatherer)		\$ 3,132.00	\$ 4,178.20		PET
17-Feb		Deposit	\$ 240.00		\$ 4,418.20		
21-Feb		Square Test	\$ 0.01		\$ 4,418.21		
21-Feb		Square Test		\$ 0.01	\$ 4,418.20		WEB
22-Feb	1001	Crayons Catering		\$ 3,000.00	\$ 1,418.20		MTG
23-Feb		Deposit	\$ 1,320.00		\$ 2,738.20		
23-Feb	1003	Crayons Catering		\$ 1,998.63	\$ 739.57		MTG
27-Feb		Square Deposit (Lucy Arnaz auction event)	\$ 7,293.75		\$ 8,033.32		
27-Feb		Deposit (Lucy Arnaz auction event)	\$ 820.00		\$ 8,853.32		
27-Feb	1014	Maria Vasquez (H3K cleanup)		\$ 100.00	\$ 8,753.32		OFC
2-Mar		Deposit	\$ 150.00		\$ 8,903.32		
6-Mar		WePay Deposit	\$ 48.25		\$ 8,951.57		
6-Mar		WePay Deposit	\$ 145.05		\$ 9,096.62		
6-Mar		TicketDerby Deposit (Lucy Arnaz Event tix sales)	\$ 10,565.10		\$ 19,661.72		
6-Mar	1002	Canyon Copy and Print		\$ 68.30	\$ 19,593.42		POS
9-Mar		WePay Deposit	\$ 48.25		\$ 19,641.67		
9-Mar	1001	Canyon Copy and Print		\$ 61.53	\$ 19,580.14		POS
3-Apr		TicketDerby Deposit (Extra)	\$ 1,173.90		\$ 20,754.04		
6-Apr	1015	Robert Bell		\$ 97.86	\$ 20,656.18		PRO
12-Apr	1016	Ace Hotel		\$ 250.00	\$ 20,406.18		MTG
1-May		WePay Deposit	\$ 14.26		\$ 20,420.44		
12-May		WePay Deposit	\$ 96.80		\$ 20,517.24		
8-Jun	1005	US Postal Svc (for mailbox)		\$ 45.00	\$ 20,472.24		POS
22-Jun		Paypal Xfer	\$ 4,600.00		\$ 25,072.24	Mistaken xfer to our acct. Should have gone to Jane's acct instead.	
						Check back to Jane written 7-13 to correct acct.	
			\$ 38,729.57	\$ 13,657.33	\$ 25,072.24		

* Deposits are from previous acct from before we started using Wepay.