# Instructions for Schedule G Payments Made by an Agent or Independent Contractor

Report payments made on your behalf during the reporting period by an agent or independent contractor (such as a campaign management firm or an advertising agency) on Schedule G.

Schedule G may be completed by the agent or independent contractor and provided to you or Schedule G may be completed by you from information provided by the agent or independent contractor.

Report expenditures of \$500 or more (other than expenditures for the agent's or independent contractor's overhead and normal operating expenses) made on your behalf during the reporting period.

Once a subvendor payment has been itemized on Schedule E, F, or G, it does not need to be itemized again. For example, if a subvendor payment is reported on Schedule F or G as part of an accrued expense, the subvendor information does not need to be reported again on subsequent reports.

### Code or Description of Payment:

If one of the expenditure codes listed on Schedule G fully describes the payment, enter the code. A full description of each code is provided on the back of the Schedule E Continuation Sheet. If none of the codes fully explains the expenditure, enter a brief description of the payment instead.

*Important:* Officeholders and candidates may reimburse an agent or independent contractor for expenditures made on their behalf only if all of the following criteria are met:

- There is a written contract between the officeholder or candidate and the agent or independent contractor that provides for the reimbursement;
- The treasurer is provided with a dated receipt and written description of each expenditure prior to reimbursement; and
- Reimbursement is paid within 45 calendar days after the agent or independent contractor makes the expenditures.

Generally, if reimbursement is not paid within 45 calendar days, report the expenditure as a nonmonetary contribution on Schedule C.

Refer to the FPPC <u>Campaign Disclosure Manual</u> for your type of committee for additional instructions.

Schedule G
Payments Made by an Agent or Independent
Contractor (on Behalf of This Committee)

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period from 1-1-13 CALIFORNIA 46 FORM 46 through 12-31-13 Page 18 of 18

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ARLES RAMSEY FOR MAYOR OF RICHMOND 2014

1359035

NAME OF AGENT OR INDEPENDENT CONTRACTOR

PHIL GIARRIZZO CAMPAIGN CONSULTING

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

MBR member communications

office expenses

MTG meetings and appearances

CMP campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)\*
CVC civic donations

candidate filing/ballot fees

FND fundraising events

IND independent expenditure supporting/opposing others (explain)\*

IND independent expenditure supporting/opposing
LEG legal defense
LIT campaign literature and mailings

OFC PET PHO POL

olain)\*

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)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CODE OR DESCRIPTION OF PAYMENT			
ALLIED PRINTING 1021. O STREET SACRAMENTO, CA 95811	eggg 2000 - 300 <sup>1</sup> a 5 660 5 H dit20	217	SUPPORT CARDS		221.99	
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	Menay, value	on hore to		e e mandany dan mening	- 646 1 <b>5 265</b>	

Attach additional information on appropriately labeled continuation sheets.

TOTAL\* \$ 221.99

<sup>\*</sup> 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.

# Codes:

**CMP:** Campaign paraphernalia/misc. Lawn signs, buttons, bumper stickers, T-shirts, potholders, etc. Includes costs of election night event.

CNS: Campaign consultants. Fees and commissions paid to professional campaign management or consulting firms.

CTB: Contributions. Contributions made to other candidates and committees. Use "CTB" for direct monetary contributions. For nonmonetary (in-kind) contributions, use "CTB" and, if one of the other codes accurately describes the expenditure, you may enter that code also. Otherwise, describe the payment. Also provide the name of the candidate or committee that received the nonmonetary contribution in the "Description of Payment" column.\*

**CVC:** Civic donations. Donations to civic, nonprofit or education organizations; payments for community events.

FIL: Candidate Filing/Ballot Fees. Payments to election officials for candidate filing fees and fees charged for publication of a ballot statement.

FND: Fundraising events. Expenditures associated with holding a fundraising event, including payments for event space to hotels or halls, payments for food and beverages to restaurants, caterers and other vendors, and payments for speakers, entertainment, and decorations. Includes costs of house parties. (Use "LIT" for costs of invitations, brochures, and solicitations associated with fundraising events.)

IND: Independent expenditures. Payments for communications that support/oppose other candidates or measures that are not made in consultation or coordination with the candidates or a ballot measure committee. Use "IND" and, if one of the other codes accurately describes the independent expenditure, you may enter that code

also. Otherwise, describe the payment. Also provide the name of the candidate or ballot measure supported or opposed by the expenditure.\*

**LEG: Legal Defense.** Attorney or other fees paid for legal defense.

LIT: Campaign literature and mailings.
Preparation, production, and distribution of campaign literature, direct mail pieces, fundraising solicitations, and door hangers. Includes costs of mailing lists, design/graphics, copy and layout, printing and photocopying. Includes payments to be on a slate mailer, and for absentee ballot mailers.

MBR: Member Communications. Payments for communications to members, employees, or shareholders of an organization, or their family members, for the purpose of supporting or opposing a candidate or ballot measure.

MTG: Meetings and appearances. Costs associated with meetings, press conferences, town halls, constituent meetings, etc.

**OFC:** Office expenses. Expenditures for office rent; utilities (including cellular phone service); purchase or rental of office equipment (computer, fax, photocopier, etc.) and furniture; office supplies, etc.

**PET: Petition circulating.** Includes payments for printing petitions and payments to signature gathering firms for ballot measure qualification drives.

PHO: Phone banks. Costs of phone banks.

**POL:** Polling and survey research. Costs of designing and conducting polls, reports on election trends, voter surveys, etc.

POS: Postage, delivery and messenger services. Includes U.S. Postal Service, Federal Express, United Parcel Service, and other delivery and courier services.

**PRO:** Professional services. Includes legal, accounting, and bookkeeping services.

**PRT:** Print space and production costs. Includes advertising space in newspapers, magazines and other publications, and billboard ads.

RAD: Radio airtime and production costs.

RFD: Returned contributions.

**SAL: Campaign workers salaries.** Includes state and federal payroll taxes.

TEL: Television or cable airtime and video production costs.

**TRC:** Candidate travel. Payments or reimbursements for travel, lodging, and meals of a candidate.

TRS: Staff/spouse travel. Payments or reimbursements for travel, lodging, and meals of a candidate's representative (staff), or member of the candidate's household.

**TSF:** Transfers. Only use this code to report the transfer of funds to another authorized committee of the same candidate or sponsoring organization. Report funds this committee gives to other committees on Schedule E, as contributions ("CTB") to those committees, not as transfers.

VOT: Voter registration costs.

**WEB:** Information technology costs. Includes payments for website design, e-mail, internet access, production of website and e-mail advertising.

\*Payments that are contributions or independent expenditures to support or oppose other candidates, measures, and committees must also be summarized on Schedule D.

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

SEE INSTRUCTIONS ON REVERSE

campaign paraphernalia/misc.

campaign consultants

NAME OF FILER

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

Statement covers period

**CALIFORNIA FORM** 

SCHEDULE E (CONT.)

radio airtime and production costs

returned contributions

RAD

RFD

OF RICHMOND RAMSEY

MBR member communications

MTG meetings and appearances

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

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

CNS CTB CVC FIL FND IND LEG LIT	contribution (explain nonmonetary)*  civic donations  candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)*  OFC petition circ phone bank polling and postage, de	enses culating ks survey resea elivery and me	SAL campaign workers' salaries TEL t.v. or cable airtime and production cos TRC candidate travel, lodging, and meals	s ame candidate/sponsor
	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
9.	PAULA BLACKWELL 967 APBAR ST. OAKLAND, CA 94608	OFC WEB	STAMPS, FILE FOLDERS, ENDORSEMENT STAMP, TONER, INDEX CARDS, COMPUTER MONITOR, PRINTER INTERNET CONNECTION	1216.30
die	PHIL GIARRIZZO CAMPAIGN CONSULTING 1215 - 19 <sup>TH</sup> ST. 2ND FLOOR SACRAMENTO, CA 95811	LIT	SUPPORT CARDS  CONSULTANT FEE	4221.99
	SHEET METAL WORKERS' LOCAL UNION NO. 104 2610 CROW CANYON ROAD, SUITE 300 SAN RAMON, CA 94583 ZD# 850381	FND	GOLF FUNDRAISER SPONORSHIP	500.00
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	taud partikaanisiinna eentee mieriju: maa Calabraad oo arrommaa od adla grassa Loase ja oos pedloo erloon	in has your distance of the control	Acute of the major of \$1.50 for the general sectors of \$1.50 for the sec	esimacetat di diagniti vi indi acmi a e ascidi occadinaliono necessassimitali

SUBTOTAL \$ 5938,

Report payments on Schedule E (other than loans).

For each payment of \$100 or more made during the period, report the name and street address, city, state, and zip code of the payee or creditor, and the amount paid during the period. Payments of less than \$100 during the period are reported as a lump sum on Line 2 of the Schedule E Summary. However, if two or more payments under \$100 were made for a single product or service and the total paid during the period was \$100 or more, itemize the total amount paid during the period.

Report on Schedule E payments made on expenses that were reported on a previous statement as accrued expenses. Also report the required information on Schedule F.

### Code or Description of Payment:

If one of the codes listed on Schedule E fully describes the payment, enter the code. A full description of each code is provided on the back of the Schedule E-Continuation Sheet. If none of the codes fully explains the payment, leave the "Code" column blank and enter a brief description of the goods or services purchased in the "Description of Payment" column.

#### Candidates:

All payments in connection with your campaign must be made from the campaign bank account. To use personal funds for campaign purposes, you must first deposit the funds in the campaign bank account.

### **Credit Card Payments:**

Disclose the name, address, and amount paid to the credit card company during the period. Also disclose the name, address, amount paid, and code or description of payment for each vendor paid \$100 or more. You may disclose the vendor payments on Schedule E or Schedule G.

# Payments by Agents and Independent Contractors:

When an agent or independent contractor (e.g., campaign worker, advertising agency, campaign management firm) makes payments on your behalf ("subvendor payments"), disclose the name, address, amount paid, and code or description of payment for each vendor paid \$500 or more.

Disclose payments to the agent or independent contractor on Schedule E. You may disclose the subvendor payments on Schedule E or Schedule G.

### Ownership Interests or Business Employment:

A ballot measure committee that makes a payment to any business entity (1) which is owned 50 percent or more by any of the individuals listed below, or (2) in which any of the individuals listed below is an officer, partner, consultant or employee, must report that individual's name, relationship to the committee, and a description of the ownership interest or position with the business entity. Individuals covered by (1) and (2) above include:

 A candidate or person controlling the committee; or

- An officer or employee of the committee; or
- -- The spouse of any of the above.

#### Loans:

Report interest paid on loans received on Line 3 of the Schedule E Summary (from Schedule B, Part 1, Column (e)).

Do not report payments made on loans received on Schedule E. Report loan repayments on Schedule B.

Do not report loans made to others on Schedule E. Report loans made on Schedule H.

# Savings Accounts/Certificates of Deposit/Money Market Accounts:

Do not report transfers of campaign funds into savings accounts, certificates of deposit, money market accounts, or the purchase of any other asset that can readily be converted to cash on Schedule E. Continue reporting these amounts as part of your cash on hand on the Summary Page.

### Additional Important Information:

Refer to the FPPC <u>Campaign Disclosure Manual</u> for your type of committee for important information about recordkeeping, returning contributions, prohibitions on cash expenditures, permissible uses of campaign funds, and more.

# Schedule E Payments Made

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period from	california 460				
through	Page 16 of 18				
	I.D. NUMBER				

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CHARLES RAMSEY FOR MAYOR OF RICHMOND 2014

1359035

CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	OFC office experiments PET petition circle PHO phone bank POL polling and POS postage, de	d appearances nses llating	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 candi VOT voter registration WEB information technology costs (internet, e-mail)	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	seroje aterijas milane sa vone	CODE OR DESC	CRIPTION OF PAYMENT	AMOUNT PAID
CHARLES RAMSEY 214. 21st STREET	Seeday, on especially and seeday.	MTG	the sound summary equal to a sound summary equal to the sound summary and the sound	1453.69

214. 21ST STREET RICHMOND, CA 94804	MTG	red expenses. Also replicates address, amount paint on expenses and surprise of the second of sexpending each von	1453.69
SECRETARY OF STATE 1500 11 TH STREET, ROOM 495 SACRAMENTO, CA 95814	neugo ann neugo Assi en tulius no	ANNUAL RECIPIENT COMMITTEE FEE 2013 - \$50  ANNUAL RECIPIENT COMMITTEE FEE 2014 - \$50	100.00
CENTRAL LABOR COUNCIL OF CONTRA COSTA COUNTY LABOR 2 LABOR GO EARP EVENTS AND FUNDRAISING 4200 PARK BLUD # 128 0 AKLAND, CA 94602	DZF FO ZASS	PROGRAM BUDKLET AD LABOR 2 LABOR FUNDRAISER DINNER	950.00

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

SUBTOTAL\$ 2503.69

Schedule	E	Sumr	nary

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

	Statement covers period	CALIFORNIA 460
	from 7-1-13	FORM 40U
	through 12-3/-13	Page 15 of 18
-		I.D. NUMBER

NAME OF FILER	CHARLES RAMSEY FOR	MAYOR	OF RICHMONZ	2014	135	59035
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		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)
12/28/13	ISMAIL RAMSEY 803 HEARST AVE. BERKELEY, CA 94710	☐ÍND ☐COM ☐OTH ☐PTY ☐SCC	ATTORNOY CO-FOUNDER RAMSEY AND EHRICH	500		
9/15/13	#BEW 180 PAC 720 B TECHNOLOGY WAY NAPA, CA 94558 FD # 1259083	□IND □COM □OTH □PTY □SCC	,	500		)
2		□IND □COM □OTH □PTY □SCC		ý.		
		□IND □COM □OTH □PTY □SCC				
		□IND □COM □OTH □PTY □SCC	•			
-			SUPTOTAL	1 1100	TOTAL CONTRACTOR	

\*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

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

california 460
Page

NAME OF FILER 1359035 CHARLES RAMSEY FOR MAYOR OF RICHMOND 2014 PER ELECTION AMOUNT CUMULATIVE TO DATE IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR TO DATE DATE RECEIVED THIS CALENDAR YEAR OCCUPATION AND EMPLOYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE \* (IF REQUIRED) RECEIVED (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN. 1 - DEC. 31) OF BUSINESS) PLUMBERS STEAMFITTERS,
REFRIDGERATION FITTERS
LUCAL 393 POLITICAL ACTION FUND IND. THEOM 11/21/13 1500 ПОТН 555 CAPITUL MALL STE 1425 **TPTY** SACRAMENTO CA 95814 ED# 851452 SCC DIND SHEET METAL WORKERS LOCAL 206 PAC COM 12/10/13 4594 MISSION GORGE PLACE 1000 ПОТН SAN DIEGO, CA 92120 ☐ PTY □ SCC ED# 1300663 ANDREA ELSBETH POWELL FAIND ARCHITECT ПСОМ 311 OAK STREET, APT. 331 POWELL AND PARTNERS 250 12/16/13 ПОТН ARCHITEKTS OAKLAND, CA 94607 **□PTY** □SCC AMANCO, INC TIND 750 ALFRED NOBEL DRIVE COM 12/10/13 2500 HTOF HERCULES, CA 94547 **PTY** □SCC EVA YARMO 2776 HILGARD AVE MIND ПСОМ 250 ПОТН BERKELEY. CA 94709 **PTY** □SCC SUBTOTAL\$ 5500

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

SCHEDULE A (CONT.)

Statement covers period from 7-1-13	california 460
through 12-3/-/3	Page /3 of /8
	ID NUMBER

NAME OF FILER	CHARLES RAMSEY FOR	MAYOR	OF RICHMONZ	2014	135	59035
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		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)
11/12/13	RENE J. FLORES 1236 LINDA VISTA AVE. PASADENA, CA 91103	□ÍND □COM □OTH □PTY □SCC	OWNER SEVILLE GROUP	2500		¥
11/12/13	U.A. LOCAL 38 COPE FUND 1621 MARKET ST. SAN FRANCISCO, CA 94103	□IND □COM □OTH □PTY □SCC		1500	e .	Y
11/15/13	LUCAL UNION 440 TBEW 1405 SPRUCE STREET STE. G. RIVERSIDE, CA 92507  TD # 1302490	☐IND ☐COM ☐OTH ☐PTY ☐SCC		1000	, ,	
11/18/13	LOS ANGELES   ORANGE COUNTIES BLOG. AND CONSTRUCTION TRADES COUNCIL 1626 BEVERLY BLUD. 165 ANGELES, CA 90026	DIND, COM OTH PTY SCC		200		·
11/19/13	DIVINAGERS AND STEAM EITTERS	□IND □EOM □OTH □PTY □SCC		500		
			SUBTOTAL	\$ 5700		

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Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from 7-1-13	california 460
through 12-3/-/3	Page 12 of 18
	ID NUMBER

NAME OF FILER CHARLES RAMSEY FOR 1359035 MAYOR OF RICHMOND 2014 AMOUNT CUMULATIVE TO DATE PER ELECTION IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR DATE RECEIVED THIS CALENDAR YEAR TO DATE OCCUPATION AND EMPLOYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE \* RECEIVED (IF SELF-EMPLOYED, ENTER NAME PERIOD (IF REQUIRED) (JAN. 1 - DEC. 31) OF BUSINESS) PLUMBERS AND STEAM FITTERS COM OTH 1519 ROLLINS ROAD BURLINGAME, CA 94010 782481 **PTY** □SCC PLUMBERS AND PIPEFITTERS LOCAL 447 TIND MOSS 5841 NEWNAN COURT 2500 **MOTH** SACRAMENTO, CA 95819 **PTY** ID# 822258 SCC V.A. LOCAL 246 COPE COMMITTEE TIND PLUMBERS AND PIPEFITTERS T4COM 1303 N. RABE AVE. STE. 202 2500 ПОТН **PTY** FRESNO, CA 93727 ID# 870601 □SCC PLUMBERS AND STEAM FITTERS DIND ID# 890053 THEOM. 8590 UTICA AVE. STE. 200 ПОТН 250 **PTY** RANCHO CUCAMONGA, CA 91730 □ SCC NAPA-SOLANO BUILDING TRADES COUNCIL IND Z-COM 2540 NORTH WATNEY WAY ПОТН FAIRFIELD, CA 94533 **TPTY** ID# 941707 □SCC SUBTOTAL\$

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

SCHEDULE A (CONT.) Statement covers period CALIFORNIA 7-1-13 **FORM** through 12-3/-13

NAME OF FILER MAYOR OF RICHMOND CHARLES RAMSEY FOR 1359035 CUMULATIVE TO DATE PER ELECTION IF AN INDIVIDUAL, ENTER **AMOUNT** FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR DATE RECEIVED THIS CALENDAR YEAR TO DATE OCCUPATION AND EMPLOYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE \* RECEIVED (IF REQUIRED) (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN, 1 - DEC, 31) OF BUSINESS) SHEET METAL WORKERS LOCAL 273 PAC **TIND** COM 1794 GOODYEAR AVE. 10/17/13 500 ПОТН VENTURA, CA 93003 **PTY** FD# 1303120 SCC 10/17/13 HENRY RAMSEY, JR.
2955 AVALON AVE.
BERKELEY. CA 94705 ZIND RETIRED ПСОМ 1000 ПОТН □ PTY □SCC MICHAEL C. GELLAR MIND PRESIDENT ПСОМ C.C. CHAPTER NECA 5310 KILKENNY ROAD 250 10/17/13 VACAVILLE, CA 95687 ПОТН (NAT'L ELEC. PTY CONTRACTOR ASSOC) □ SCC IBEW 413 PAC -UIND THE COM 100 THOMAS ROAD 500 TOTH BUELLTON, CA 93427 **TPTY** □SCC □IND THE COM ПОТН PTY ID# 990208 □SCC SUBTOTAL\$ 4750

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

SCHEDULE A (CONT.)

Statement covers period from 7-1-13	california 460
through 12-3/-13	Page 10 of 18
	I.D. NUMBER

NAME OF FILER 1359035 CHARLES RAMSEY FOR MAYOR OF RICHMOND 2014 PER ELECTION AMOUNT CUMULATIVE TO DATE IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR TO DATE RECEIVED THIS CALENDAR YEAR OCCUPATION AND EMPLOYER DATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) (IF REQUIRED) CODE \* PERIOD (JAN. 1 - DEC. 31) (IF SELF-EMPLOYED, ENTER NAME RECEIVED OF BUSINESS) FINTERNATIONAL BROTHERHOOD OF TIND ELECTRICAL WORKERS LOCAL 569 COM 2500 555 CAPITOL MALL, STE. 1425 □ OTH **PTY** SACRAMENTO, CA 95814 = 1342714 □scc ☐IND INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS LU 477 COM 2500 1855 S. BUSINESS CENTER DRIVE ПОТН 9/23/13 **□PTY** SAN BERNARDINO, CA 92408 □SCC ED# 1301934 ☐IND SHEET METAL WORKERS INT'L. ASSN ПСОМ LOCAL UNION NO. 88 1000 **WOTH** 2560 MARCO STREET **PTY** LAS VEGAS NEVADA □ SCC DIND LOCAL TH COM 555 CAPITOL MARL STE. 1425 11100 10/2/13 MOTH SACRAMENTO, CA 95814 ☐ PTY □SCC ED# 1309647 INTERNATIONAL BROTHERITOOD OF ELECTRICAL □IND □IND 1500 WORKERS LOCAL SSI PAC 555 CAP, FOL MALL, STE, 1425 ПОТН **PTY** SAC NAMENTO, CA 95814 **□SCC** 8 500 SUBTOTAL\$

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OTH - Other (e.g., business entity)

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Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period from 7-1-13 CALIFORNIA FORM 460

through 12-3/-13 Page 9 of 18

I.D. NUMBER

NAME OF FILER	CHARLES RAMSE)	FOR I	MAYOR	OF RI	CHMONZ	2014	139	59035
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIV OCCUPATION (IF SELF-EMPLO	IDUAL, ENTER AND EMPLOYER DYED, ENTER NAME USINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/17/13	INT, 'L BROTHERHOOD OF EL WORKERS LOCAL S95 6250 VILLAGE PARKWAY DUBLIN, CA 94568 ID# 12		□IND □COM □OTH □PTY □SCC			2500		
9/17/13	SHEET METAL WORKERS INT LOCAL UNION 105 POL'T EDUC 2120 AUTO CENTRE DR. STE GLENDORA CA 91740	L ASSOC. FUND 105	□IND □COM □OTH □PTY □SCC			2500		ì
9/19/13	THE PLUMBING, PIPING AND ME CONTRACTORS PAC 1123 L STREET	CHANICAL	□IND □COM □OTH □PTY □SCC			2000	,	,
9/23/13	SACRAMENTO, CA 95819 ID 12  TBEW LUCAL UNION 234  10300 MERRITT STREET  CASTROVILLE, CA 95012  TD# 13/65	PAC	□IND □COM □OTH □PTY □SCC			234	-	
9/23/13	TBEW 332 EDUCATION FU 2125 CANOES GARDEN AVE SAN JOSE, CA 95125 ED# 1298	E STE 100	□IND □COM □OTH □PTY □SCC	•		2500		
					SUBTOTAL	\$ 9734		

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OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

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

SCHEDULE A (CONT.)

Statement covers period from 7-1-13	california 460
through 12-3/-13	Page 8 of 18
	I.D. NUMBER

NAME OF FILER CHARLES RAMSEY FOR MAYOR OF RICHMOND 2014 1359035 **AMOUNT** CUMULATIVE TO DATE PER ELECTION IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR DATE OCCUPATION AND EMPLOYER RECEIVED THIS CALENDAR YEAR TO DATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE \* RECEIVED (IF SELF-EMPLOYED, ENTER NAME PERIOD (IF REQUIRED) (JAN. 1 - DEC. 31) OF BUSINESS) SPRINKLER FITTERS AND APPRENTICIES TIND, LOCAL 483 PAC THEOM 555 CAPITOL MALL STE 1425 OTH 1250 SACRAMENTO, CA 95814 ID# 1298012 **PTY** □scc MIND ATTORNEY REGINALD TERRELL ПСОМ 2500 1736 FRANKLIN ST. FLUOR 10 **TOTH** TERREU LAW □ PTY OAKLAND, CA 94612 GROUP □SCC POWELL AND PARTNERS TIND COM 807 BROADWAY, STE. 200 9/12/13 2500 **₩**OTH OAKLAND. CA 94607 **PTY □**SCC INTERNATIONAL BROTHERHOOD OF TIND THE COM ELECTRICAL WORKERS LUG 2500 ПОТН 55 FILLMONE STREET **PTY** SCC SAN FRANCISCO, CA 94117 25 921730 SAN MATEO BUILDING TRADES ☐ IND TH'COM 1153 CHESS DRIVE, STE. 206 250 TOTH **PTY** FOSTER CIFY CA 24404 55 870669 SCC SUBTOTAL\$

\*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

9000

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

SCHEDULE A (CONT.) Statement covers period CALIFORNIA **FORM** 

NAME OF FILER	CHARLES RAMSEY FOR	MAYOR	OF RICHMONZ	D 2014	1.5.00	59035
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)
8/26/13	INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS LUCAL UNION NO. 11 297 N. MARENGO AVE. PASADENA, CA 91101 TD# 822725	□IND □COM □OTH □PTY □SCC		2500		
8/31/13	PASADENA, CA 91101 ED# 822725 IBEW LOCAL 639 PAC 6363 EDNA ROAD SAN LUIS OBISPO, CA 93401 ID# 1273957	□IND □EOM □OTH □PTY □SCC		500		7
8/31/13	2840 EL CENTRO ROAD STE. 115	□IND □COM □OTH □PTY □SCC		500		
	DOUGLAS DAVIS 45 MISSION SPGS HERCULES, CA 94547	☐MÓ ☐COM ☐OTH ☐PTY ☐SCC	PRINCIPAL ARCHITECT AE3 PARTNERS	2500		
9/5/13	RICKY DUMAS II EMBARCADERO WEST, STE 205 OAKLAND, CA 94607	IND COM OTH SCC	ARCHITECT AE3	2500		
			SUBTOTAL	\$ 8500		

\*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

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from 7-1-13	california 460 form
through 12-3/-13	Page 6 of 18
	I.D. NUMBER

NAME OF FILER 1359035 MAYOR OF RICHMOND 2014 CHARLES RAMSEY FOR PER ELECTION CUMULATIVE TO DATE AMOUNT IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR TO DATE DATE OCCUPATION AND EMPLOYER RECEIVED THIS CALENDAR YEAR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE \* **PERIOD** (IF REQUIRED) (JAN. 1 - DEC. 31) RECEIVED (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) SANTA CLARA AND SAN BENITO COUNTIES IND BUILDING AND CONSTRUCTION THADES COUNCIL COM 1250 8/13/13 2102 ALMADEN ROAD SUITE 101 ПОТН **PTY** □scc □IND □IND SHEET METAL WORKERS' INT.'L ASSOC LOCAL # 104 2500 2610 CROW CANYON ROAD, STE 300 ПОТН **PTY** SAN RAMON, CA 94583 □ SCC 850381 CONSULTANT MIND 905 SIERRA VISTA DR. ПСОМ 8/19/13 2500 JACK SCHRODER, ПОТН REDDING, CA 96001 CONSULTANT **PTY** □scc LOS ANGELES COUNTY ELECTRICAL □IND CONTRACTORS PAC THEOM 750 100 E. CORSON ST., STE 410 ПОТН **PTY** PASADENA, CA 91103 790359 □SCC PLUMBING INDUSTRY CONSUMER □ N/D PROTECTION FUND UALOCAL NO. 159 COM 2500 ПОТН 1308 ROMAN WAY **PTY** MARTINEZ, CA 94553 FD# 862085 □ SCC

\*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

SUBTOTAL\$ 9 5 0 0

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

			141	through 12-3	1-13	Page_	5 of 18
NAME OF FILER	CHARLES RAMSEY FOR	MAYOR	OF RICHMONZ	2014		1.D. NU	MBER 59035
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 CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
1/25/13	STEVE KWOK 636 STH STREET SANTA ROSA, CA 95404	□scc	ARCHITECT OWNER QUATTROCCHI KWOK ARCHITECTS, INC.	2500			
8/5/13	ELEANOR MASON RAMSEY, PLD. 2955 AVALON BERKELEY. CA 94705	□#ND □COM □OTH □PTY □SCC	PRESIDENT ON NER MASON TILLMAN ASSOCIATES, LTD	2500			1
8/6/13	NORTHERN CALIFORNIA CHAPTER NECA 6300 VILLAGE PARKWAY DUBLIN, CA 94568 ID 960734	□IND □COM □OTH □PTY □SCC		2500			er
8/8/13	TBEW  302 COMMUNITY CANDIDATES PAC  555 CAPITOL MALL, SUITE 1425  SACRAMENTO, CA 95814 TD 1300752	□IND □COM □OTH □PTY □SCC		2500			
8/13/13	WESTERN STATES COUNCIL OF SHEET METAL WORKERS PAC 555 CAPITOL MALL, SUITE 1425 SACRAMENTO, CA 95814 20 851706	□IND □COM □OTH □PTY □SCC		2500			s

SUBTOTAL\$

\*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

Report monetary contributions (except loans) received during the reporting period on Schedule A. Also report on Schedule A if a contributor forgives a loan for you or a third party pays a loan for you. Loans received during the period are reported on Schedule B. Certain transfers between a state candidate's controlled committees are also disclosed on Schedule A. (See FPPC Campaign Disclosure Manual 1.)

If a total of \$100 or more is received from a single contributor during a calendar year, report the name, street address, city, state and zip code of the contributor, the amount contributed this period, and the cumulative amount received from the contributor since January 1 of the current calendar year.\* Include monetary and nonmonetary contributions and loans when reporting the cumulative amount.

Contributions totaling less than \$100 received from a single contributor during a calendar year are reported as a lump sum on Line 2 of the Schedule A Summary.

\*There are exceptions to the calendar year "cumulation period" for candidate elections and ballot measure elections held in January and early February, and for ballot measure qualification activities. (See the FPPC Campaign Disclosure Manuals for candidates and ballot measure committees.)

#### **Date Received:**

A monetary contribution has been received when the candidate or committee, or an agent of the candidate or committee, receives or obtains control of the check or other negotiable instrument. There are special rules for reporting the date contributions are received by a committee that collects contributions through employee payroll deductions or membership dues.

#### Contributor Codes:

For each itemized contributor, check the applicable contributor code:

IND--contributions from any individual's personal funds.

COM--contributions from other committees that receive contributions. These committees will have an identification number assigned by the Secretary of State. Examples: political action committees, other candidates' committees. (State committees should use PTY or SCC when appropriate.)

OTH--business entities and other contributors.

PTY--contributions from political parties (including state and county central committees).

SCC-contributions from small contributor committees (applicable only to state candidates and committees).

#### Contributions from Individuals:

When itemizing a contribution from an individual, also disclose the contributor's occupation and the name of his or her employer. If the contributor is self-employed, provide the name of his or her business. If the contributor is not employed, enter "none."

It is not necessary to enter occupation and employer information for other types of contributors (such as business entities).

Missing Contributor Information: A contribution of \$100 or more must be returned to the contributor within 60 days if the recipient does not obtain the contributor's address, occupation and employer.

#### **Contributions from Committees:**

When itemizing a contribution from another recipient committee, disclose the identification number assigned to that committee by the Secretary of State in addition to its name and address. If no ID number has been assigned, provide the name and address of that committee's treasurer.

#### Intermediaries:

If you receive a contribution through an intermediary (i.e., you have received a contribution check from a person other than the true source of the funds), disclose all of the required information for both the intermediary and the actual contributor.

#### Per Election to Date:

Candidates subject to state contribution limits (or if required by local ordinance) must disclose the cumulative amount received from each contributor during the limitation cycle in addition to the calendar year cumulative amount. (Candidates for elective state office should refer to FPPC <u>Campaign Disclosure Manual 1</u>.)

### Additional Important Information:

Refer to the FPPC <u>Campaign Disclosure Manual</u> for your type of committee for important information about aggregating monetary and nonmonetary contributions, recordkeeping, prohibitions on cash contributions, returning contributions, and more.

# Schedule A **Monetary Contributions Received**

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

SCHEDULE A

Statement covers period

menotary continuous received		10	whole dollars.	from <u>7-1-</u>	13	FORM 46U		
SEE INSTRUCTIO	INS ON REVERSE			through <u>12-3</u>	1-13	Page _	4 of 18	
NAME OF FILER CHAR	LES RAMSEY FOR MAYOR OF	Rich	4MOND 2014	e sevigio	ota nii buhaqiin Na comillingani	1.D. NUM /35	BER 19035	
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 D CALENDAR YEA (JAN. 1 - DEC. 3	AR	PER ELECTION TO DATE (IF REQUIRED)	
7/27/13	EMPLOYERS ADVOCATE INC. 1646 N. CALIFORNIA BLVD'STE 500 WALNUT CREEK. CA. 94596	□IND □COM DOTH □PTY □SCC	Lungasa mari su teutudi (1 tub - 6 sir narita mari sayus dili, mas - 10	2,500	inc I spylakini.			
7/12/13	WALLACE BOYD GORDON 1640 BAY STREET #303 SAN FRANCISCO, CA 94123	COM COM OTH PTY Scc	ARCHITECT DLM ARCHITECTURE	2500	en succe gis in s en schi i suuman sun modus — s musumenna iuma	s rikel po Šviji Osa III Blio set	n de de estado d	
7/16/13	HIBSER YAMAUCHI 300 27TH ST. 2ND FLOOR OAKLAND, CA 94612	DIND COM OTH PTY SCC	ARCHITECT OWNER HIBSER YAMAUCHI ARCHITECTS, INC	2500	e daluma i en lacetativai escushosk	580 F.		
7/23/13	ALADEGBAMI ADEGBAYEGA 318 ROTHBURY WAY SAN RAMON, CA 94582	DAND COM OTH PTY SCC	CONSULTANT OWNER AEKO CONSULTANTS	2500	gaundbraish e n ng na eiras d	u oi co	y and the state of	
1/25/13	JOSE VILAR 1150 CRAGMONT AVE. BERKELEY. CA 94706	DIND COM OTH PTY SCC	ARCHITECT CO-OWNER BAKER VILAR ARCHITECT S	2500		9M 92   E	(1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
nai 5 do a	ry rom utinha secondades in , pibrida		SUBTOTAL	\$ 12,500.				
Amount red     (Include all	A Summary ceived this period – itemized monetary contributions. Schedule A subtotals.)	naeke ar ilini Mari V. Jaa	\$_	95,934.00	) IND – Ir COM –	(other tha	Committee an PTY or SCC)	
3 Total mone	ceived this period – unitemized monetary contributions tary contributions received this period. 1 and 2. Enter here and on the Summary Page, Colur		de Importante al politico la Marcia	35, 934. 00	PTY-F	Political Pa	g., business entity) arty stributor Committee	

The Summary Page provides an overview of the committee's financial activities and is completed for each filing.

Column A reflects activities during the current reporting period as reported on Schedules A through H. It is not necessary to attach a blank schedule if there has been no reportable activity during the period, but it is necessary to enter a zero or the word "none" on the appropriate line in Column A of the Summary Page.

Column B figures should reflect the cumulative total since January 1 of the current calendar year.\* Add the totals from Column B of the committee's last campaign statement (if any) to the corresponding amounts in Column A. If this is the first report being filed for a calendar year, only carry forward the amounts reported on Lines 2, 7, and 9 of Column B (if any) from the committee's last statement. (Note: The amounts reported on Lines 2, 7, and 9 of Column B should be the same as the total outstanding amounts disclosed in column (d) of Schedules B, F, and H, respectively, of the current report.)

When loans (Schedules B and H) and accrued expenses (Schedule F) are paid, the figures to be carried from the schedules to Lines 2, 7, and 9 of Column A may be negative numbers. In this case, be sure to show them as negative figures on the Summary Page (e.g., with a minus sign (-) or in parentheses), and subtract them when totaling Columns A and B.

\*There are exceptions to the calendar year "cumulation period" for candidate elections and ballot measure elections held in January and early February, and for ballot measure qualification activities. Consult the FPPC Campaign Disclosure

<u>Manual</u> for your type of committee for additional information.

#### **Current Cash Statement:**

Lines 12-16 of the Summary Page should accurately reflect your current cash position. Beginning and ending cash balances should include the total amount of funds in your campaign checking and savings accounts, plus any investments that can be readily converted to cash, such as certificates of deposit, money market accounts, stocks and bonds, etc. (Officeholders and candidates are subject to bank account restrictions, and all committees should read the <a href="FPPC Campaign Disclosure Manual">FPPC Campaign Disclosure Manual</a> regarding appropriate uses of campaign funds.)

Line 12 (Beginning Cash Balance) must be the same as the ending cash balance reported on Line 16 of your previous statement's Summary Page. If this is your first campaign statement, enter zero on Line 12.

Line 16 (Ending Cash Balance) is the total of Lines 12, 13, and 14, **minus** Line 15.

If you are filing a termination statement, Line 16 must be zero.

## Cash Equivalents:

"Cash equivalents" include investments that cannot be readily converted to cash, as well as the balance due on all outstanding loans the committee has made to others (from Line 7 of Column B of the Summary Page). Investments that can be readily converted to cash, such as certificates of deposit or money market funds, should be included in the cash on hand figures on Lines 12 and 16 of the Summary Page.

# Summary for Primary and General Elections (Lines 20 and 21):

This section is only for committees that are:

- Controlled by a candidate who is being voted on in both the state primary and general elections (does not apply to controlled ballot measure committees); or
- Primarily formed to support or oppose candidates being voted on in both the state primary and general elections.

Complete this summary on the preelection and semi-annual statements for the general election, covering periods during the last six months of the year (July 1-December 31).

# Expenditure Ceiling Summary for State Candidates (Line 22):

Candidates for elective state office who have accepted the voluntary expenditure ceiling for a particular election must disclose the total amount of expenditures made through the end of the reporting period that are subject to the expenditure ceiling for the election. Report the date of the election and total amount expended for that election. Report totals for the primary and general elections separately. This information is no longer required if the expenditure ceiling has been lifted. (See FPPC Campaign Disclosure Manual 1.)

# Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CHARLES RAMSEY FOR MAYOR OF RICHMOND 2014

1.D. NUMBER 1359035

CHARLES NAMOET POR MITTE	OK OF KICH	MOND 2017	1327032
Contributions Received  1. Monetary Contributions	** 95 934. 00 \$ 95 934. 00 \$	* 95, 934. %  \$ 95, 934. %  \$ 95, 934. %	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 \$ \$  21. Expenditures Made \$ \$
Expenditures Made  6. Payments Made  7. Loans Made  8. SUBTOTAL CASH PAYMENTS  9. Accrued Expenses (Unpaid Bills)  10. Nonmonetary Adjustment  11. TOTAL EXPENDITURES MADE  Schedule E, Line 4  Schedule E, Line 3  Add Lines 6 + 7  Schedule F, Line 3	\$ 8481.47 \$ 8481.47 \$ 0	\$\\\ \\$\\\ \\$\\\\ \\$\\\\\\\\\\\\\\\\\\	Expenditure Limit Summary for State Candidates  22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)  Date of Election Total to Date (mm/dd/yy)
Current Cash Statement  12. Beginning Cash Balance	95,434,00 8481.47 87,452.53	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	*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	s	for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).	FPPC Form 460 (January/05 FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772

# Officeholder or Candidate Controlled Committee:

Candidates must have a separate bank account and committee to run for different elective offices. A candidate who is required to file campaign statements in connection with more than one elective office but is only receiving contributions and making expenditures for one of the offices, may include both offices on one Form 460. In Part 5 of the cover page, enter the candidate's name and under "Office Sought or Held," identify each office, and state whether the candidate is seeking or holding the office. The Form 460 must be filed with the appropriate filing officer(s) for each office.

For example, a city councilmember is raising funds to run for the county board of supervisors. She has no committee and is not raising or spending funds in connection with the city office, and has formed a controlled committee for the county office. To comply with the requirements to file campaign statements for both her city office and her county candidacy, she may complete one Form 460 each campaign reporting period, which she will file with the city clerk and the county elections department. In Part 5 of the Form 460 Cover Page, under "Office Sought or Held," she will state that she is holding the office of city councilmember (including the name of the city) and that she is seeking a seat on the board of supervisors (including the name of the county).

#### **Ballot Measure Committee:**

Part 6 of the Form 460 Cover Page must be completed by committees that are primarily formed to support or oppose the qualification or passage of a single ballot measure or two or more measures being voted on in the same city, county, multicounty, or state election. A "general purpose" ballot measure committee (one that supports or opposes a variety of state and/or local ballot measures) is not required to complete Part 6.

5.	Officeholder or Candidate Controlled Commi	ttee	6.	Primarily Formed Ball	lot Measure	Committee	9 5 5 7 5 7		
	NAME OF OFFICEHOLDER OR CANDIDATE  CHARLES TILLMAN	PAMCEY		NAME OF BALLOT MEASURE		100 N AND 200			
	OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRIC	TNUMBER IF APPLICABLE)  CALIFORNIA		BALLOT NO. OR LETTER	JURISDICTI	ON	Mais.		
	RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CI	Identify the controlling officeholder, candidate, or state measure proponent, if any							
	214-21ST STREET RICHMOND	NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT							
	Related Committees Not Included in this Sta not included in this statement that are controlled by you of contributions or make expenditures on behalf of your can	r are primarily formed to receive		OFFICE SOUGHT OR HELD	lu el e	15 (10 5) 1	DISTRICT NO.	IF ANY	
	NAME OF TREASURER	I.D. NUMBER  CONTROLLED COMMITTEE?  YES NO	7.	Primarily Formed Car officeholder(s) or candidate	(s) for which the	is committee i	ommittee L s primarily form	ned.	
	COMMITTEE ADDRESS STREET ADDRESS (INC F.O. BC	OX)		NAME OF OTTION DESCRIPTION	. C			SUPPORT OPPOSE	
	CITY STATE ZIP CO	DDE AREĄ CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT OPPOSE	
	COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT OPPOSE	
	NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT OPPOSE	
	COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BO			Atta	ach continuati	on sheets if	necessary	1 2 (9 (1)	

## Period Covered by a Statement:

The "period covered" by a campaign statement begins the day after the closing date of the last campaign statement you filed. For example, if the closing date of the last statement was September 30, the beginning date of the next statement will be October 1.

If this is the committee's first campaign statement, begin with January 1 of the current calendar year.

The closing date of the statement depends on the type of statement you are filing.

#### Date of Election:

If you are filing this statement as a preelection statement in connection with an election, enter the date of the election.

### Type of Recipient Committee:

Check one box to indicate the type of committee filing the statement. General descriptions are provided on the cover sheet to this form, or contact your filing officer or the FPPC for assistance. Following are some additional guidelines:

#### **Controlled Committee**

 A controlled committee is one that is controlled by a candidate, officeholder or, in the case of a state ballot measure committee, by the proponent of the measure. A committee is "controlled" if the candidate, officeholder, or proponent, his or her agent, or any other committee he or she controls, has a significant influence on the actions or decisions of the committee.

#### **Sponsored Committees**

 A sponsored committee is one that has a sponsor—a business entity, organization, union, or other entity—that meets certain criteria.
 Sponsored ballot measure committees and general purpose committees must include the name of the sponsor in the name of the committee.

#### **Small Contributor Committees**

 This term is significant only if the committee makes contributions to candidates running for elective state office.

## Type of Statement:

Check the appropriate box(es) to indicate the type of statement you are filing (or amending).

Amendments: If you are filing an amendment to a previously filed statement, give a brief explanation of the amendment and list the schedules being amended. Include an amended summary page, if applicable. Be sure to enter the period covered of the statement you are amending.

**Termination:** A committee must continue filing campaign statements each year until it is eligible to terminate and files a Form 410 Termination. Most officeholders must continue filing campaign statements until they have terminated all controlled committees and have left office.

#### Committee I.D. Number:

If the committee has not yet received an identification number from the Secretary of State,

enter "Not Yet Received." File Form 410 to obtain an I.D. Number.

#### Verification:

The statement must be signed by the committee treasurer or the assistant treasurer named on the committee's Statement of Organization (Form 410). An officeholder, candidate, or state measure proponent who controls the committee must also sign the statement. If two or three officeholders, candidates, or proponents control the committee, each must sign the statement. If more than three control the committee, one may sign on behalf of the others.

Under certain circumstances, the responsible officer of a sponsoring organization must sign the statement.

# Additional Important Information:

Refer to the FPPC Campaign Disclosure Manual for your type of committee for information about:

- When, where, and what type of statements the committee is required to file.
- · Closing date of campaign statements.
- · Sponsored committee criteria.
- · Termination criteria.
- Recordkeeping requirements and prohibitions.

Recipient Committee Campaign Statement Cover Page	Type or print in	ink.	Date Stamp	CALIFORNIA FORM 460	
(Government Code Sections 84200-84216.5)  SEE INSTRUCTIONS ON REVERSE	Statement covers period from 7-1-13 through 12-31-13	Date of election if applicable: (Month, Day, Year)	memen	For Official Use Only	
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 Term Amendment (Explain below	Spec Supp	terly Statement ial Odd-Year Report lemental Preelection ment - Attach Form 495	
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  STREET ADDRESS (NO P.O. BOX)  CITY  STATE  STATE  ZIP C  MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.  CITY  STATE  ZIP C  STATE  ZIP C	ODE (510) AREA CODE/PHONE BOX	Treasurer(s)  NAME OF TREASURER  MAILING ADDRESS  CITY  MAILING ADDRESS  MAILING ADDRESS  CITY	R, IF ANY  STATE ZIP C	ODE AREA CODE/PHONE 14608 (510) 655-963	
OPTIONAL: FAX / E-MAIL ADDRESS  4. Verification I have used all reasonable diligence in preparing and reviewir under penalty of perjury under the laws of the State of Californ  Executed on  Executed on  Date	By	optional: FAX / E-MAIL ADDRE	in and in the attached schedules are seasurer nent or Responsible Officer of Sponsor	eles is true and complete. I certify	

Executed on \_

COVER PAGE