

# Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in Ink.

SEE INSTRUCTIONS ON REVERSE

|                                                                                |                                                                            |
|--------------------------------------------------------------------------------|----------------------------------------------------------------------------|
| Statement covers period<br>from <u>11/01/2013</u><br>through <u>12/31/2013</u> | Date of election if applicable:<br>(Month, Day, Year)<br><u>11/05/2013</u> |
|--------------------------------------------------------------------------------|----------------------------------------------------------------------------|

Date Stamp  
**RECEIVED AND**  
In the office of the Secretary of State  
of the State of California  
**FEB 03 2014**

CALIFORNIA  
2001/02  
FORM  
**460**

Page 1 of 6  
For Official Use Only

### 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
- Ballot Measure Committee
- Primarily Formed
- Controlled
- Sponsored (Also Complete Part 5)
- Primarily Formed Candidate/Officeholder Committee (Also Complete Part 7)

### 2. Type of Statement:

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

### 3. Committee Information

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
Michael Verdone for City Council 2013

IP NUMBER  
1357916

### Treasurer(s)

NAME OF TREASURER  
Monica Jacinto

MAILING ADDRESS  
512 7th Avenue

STREET ADDRESS (NO P.O. BOX)  
1848 Bellurn Drive

CITY Belmont STATE CA ZIP CODE 94002 AREA CODE/PHONE (650) 921-7203

CITY San Bruno STATE CA ZIP CODE 94066 AREA CODE/PHONE (650) 291-8558

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

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

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 12/1/2014

Executed on 01/27/14

Executed on \_\_\_\_\_

Executed on \_\_\_\_\_

By [Signature] Signature of Treasurer or Assistant Treasurer

By [Signature] 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**

Type or print in ink.

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE  
**Michael Verdone**

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)  
**City Council, City of Belmont, CA**

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP  
**1848 Belburn Drive, Belmont, CA 94002**

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

CITY STATE ZIP CODE AREA CODE/PHONE

**6. Ballot Measure Committee**

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER 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 Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.**

| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | SUPPORT<br>OR<br>OPPOSE                                       |
|-----------------------------------|-----------------------|---------------------------------------------------------------|
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="radio"/> SUPPORT<br><input type="radio"/> OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="radio"/> SUPPORT<br><input type="radio"/> OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="radio"/> SUPPORT<br><input type="radio"/> OPPOSE |

Attach continuation sheets if necessary.

# Campaign Disclosure Statement Summary Page

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Michael Verdone, Michael Verdone for City Council 2013

Statement covers period  
11/01/2013  
from 12/31/2013 through

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CALIFORNIA FORM 460

SUMMARY PAGE

ID NUMBER  
1357916

## Contributions Received

|                              | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|------------------------------|------------------------------------------------------------|--------------------------------------------|
| Monetary Contributions       | Schedule A, Line 3<br>4,534.36                             | 0.00                                       |
| Loans Received               | Schedule B, Line 3<br>(1,465.64)                           | 9899.36                                    |
| SUBTOTAL CASH CONTRIBUTIONS  | Add Lines 1 + 2<br>0.00                                    | 0.00                                       |
| Nonmonetary Contributions    | Schedule C, Line 3<br>(1,465.64)                           | 9899.36                                    |
| TOTAL CONTRIBUTIONS RECEIVED | Add Lines 3 + 4                                            |                                            |

### 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

|                                 |                                |           |
|---------------------------------|--------------------------------|-----------|
| Payments Made                   | Schedule E, Line 4<br>1,253.70 | 11,365.12 |
| Loans Made                      | Schedule H, Line 3<br>0.00     | 0.00      |
| SUBTOTAL CASH PAYMENTS          | Add Lines 6 + 7<br>1,253.70    | 11,365.12 |
| Accrued Expenses (Unpaid Bills) | Schedule F, Line 3<br>0.00     | 0.00      |
| Nonmonetary Adjustment          | Schedule G, Line 3<br>0.00     | 0.00      |
| TOTAL EXPENDITURES MADE         | Add Lines 8 + 9 + 10           | 11,365.12 |

### Expenditure Limit Summary for State Candidates

| 22. Cumulative Expenditures Made* | Date of Election (mm/dd/yy) | Total to Date |
|-----------------------------------|-----------------------------|---------------|
| \$                                | / /                         | \$            |
| \$                                | / /                         | \$            |
| \$                                | / /                         | \$            |
| \$                                | / /                         | \$            |
| \$                                | / /                         | \$            |

## Current Cash Statement

|                                    |                                                       |  |
|------------------------------------|-------------------------------------------------------|--|
| 2. Beginning Cash Balance          | Previous Summary Page, Line 16<br>211.94              |  |
| 3. Cash Receipts                   | Column A, Line 3 above<br>(1,465.64)                  |  |
| 4. Miscellaneous Increases to Cash | Schedule I, Line 4<br>0.00                            |  |
| 5. Cash Payments                   | Column A, Line 8 above<br>1,253.70                    |  |
| 6. ENDING CASH BALANCE             | Add Lines 12 + 13 + 14, then subtract Line 15<br>0.00 |  |

*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).

## LOAN GUARANTEES RECEIVED

|                             |                            |  |
|-----------------------------|----------------------------|--|
| 7. LOAN GUARANTEES RECEIVED | Schedule B, Part 2<br>0.00 |  |
|-----------------------------|----------------------------|--|

## Cash Equivalents and Outstanding Debts

|                      |                                               |  |
|----------------------|-----------------------------------------------|--|
| 8. Cash Equivalents  | See instructions on reverse<br>0.00           |  |
| 9. Outstanding Debts | Add Line 2 + Line 9 in Column B above<br>0.00 |  |

\*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

# Schedule A Monetary Contributions Received

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

Statement covers period  
from 11/01/2013  
through 12/31/2013

CALLIFORNIA  
FORM 460

SCHEDULE

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I.D. NUMBER  
1357916

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Michael Verdone, Michael Verdone for City Council 2013

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(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) |
|--------------------|------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------|-----------------------------------------------------|------------------------------------|
| 11/05/2013         | Dennis J. Pantano<br>[REDACTED]                                                                | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Real Estate broker<br>Pantano Real Estate                                                  | 250.00                      |                                                     | 250.00                             |
| 12/30/2013         | Michael Verdone<br>[REDACTED]                                                                  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Broker<br>Economic Concepts                                                                | 4,284.36                    |                                                     | 4,284.36                           |
| <b>SUBTOTAL \$</b> |                                                                                                |                                                                                                                                                                         |                                                                                            | 4,534.36                    |                                                     |                                    |

## Schedule A Summary

Amount received this period – contributions of \$100 or more.

(Include all Schedule A subtotals.) ..... \$ 4,534.36

4,534.36

Amount received this period – unitemized contributions of less than \$100

..... \$ 0.00

0.00

Total monetary contributions received this period:

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$** 4,534.36

4,534.36

\*Contributor Codes  
IND – Individual  
COM – Recipient Committee  
(other than PTY or SCC)  
OTH – Other  
PTY – Political Party  
SCC – Small Contributor Committee



**Schedule E  
Payments Made**

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Michael Verdone, Michael Verdone for City Council 2013

**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
- FL candidate filing/ballot fees
- FND fundraising events
- IND independent expenditure supporting/opposing others (explain)\*
- LEG legal defense
- LT campaign literature and mailings
- MER 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 tv. or cable airtime and production costs
- TRC candidate travel, lodging, and meals
- TRS staff/spouse travel, lodging, and meals
- TSF transfer between committees of the same candidate/sponsor
- VOT voter registration
- WEB information technology costs (internet, e-mail)

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---------------------------------------------------------------------|------|----|------------------------|-------------|
| Precise Mailing                                                     | PRT  |    | Printing               | 1,109.70    |
| San Mateo County Elections Office                                   | LIT  |    | Mailing List           | 125.00      |
| <b>SUBTOTAL \$</b>                                                  |      |    |                        |             |

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

**Schedule E Summary**

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) ..... \$ 1,128.70
2. Unitemized payments made this period of under \$100 ..... \$ 19.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ..... \$ 0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ..... **TOTAL \$** 1,253.70