Recipient Committee Campaign Statement Cover Page

COVER PAGE

Date Stamp: RECEIVED OCT 05 2018 BELMONT CITY CLERK

CALIFORNIA FORM 460

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For Official Use Only

SEE INSTRUCTIONS ON REVERSE

Statement covers period from 08/15/18 through 09/22/18

Date of election if applicable: (Month, Day, Year) 11/06/18

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- [x] 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:

- [x] Preelection Statement
- [ ] Semi-annual Statement
- [ ] Termination Statement (Also file a Form 410 Termination)
- [x] Amendment (Explain below)
- [ ] Quarterly Statement
- [ ] Special Odd-Year Report

Omitted expenditures and contributions

3. Committee Information

I.D. NUMBER: 1409823

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Deniz Bolbol for Belmont City Council 2018

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Belmont	CA	94002	(

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE
San Mateo	CA	94402	

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER
Tran Tran

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
San Mateo	CA	94402	

NAME OF ASSISTANT TREASURER, IF ANY

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 10/4/18 (Date) — By Tran Tran (Signature of Treasurer or Assistant Treasurer)

Executed on 10/4/18 (Date) — By Deniz Bolbol (Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor)

Executed on _____ (Date) — By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Executed on _____ (Date) — By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Deniz Marie Bolbol

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

Belmont City Council

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

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? ☐ YES ☐ 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? ☐ YES ☐ 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	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	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statement covers period from 08/15/18 through 09/22/18

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Deniz Bolbol for Belmont City Council 2018

I.D. NUMBER
1409823

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	*Schedule A, Line 3*	$ 7,444	$ 7,444
2. Loans Received	*Schedule B, Line 3*	3,000	3,000
3. SUBTOTAL CASH CONTRIBUTIONS	*Add Lines 1 + 2*	$ 10,444	$ 10,444
4. Nonmonetary Contributions	*Schedule C, Line 3*	1,008	1,008
5. TOTAL CONTRIBUTIONS RECEIVED	*Add Lines 3 + 4*	$ 11,452	$ 11,452

Expenditures Made

6. Payments Made	*Schedule E, Line 4*	$ 1,900	$ 1,900
7. Loans Made	*Schedule H, Line 3*		
8. SUBTOTAL CASH PAYMENTS	*Add Lines 6 + 7*	$ 1,900	$ 1,900
9. Accrued Expenses (Unpaid Bills)	*Schedule F, Line 3*		
10. Nonmonetary Adjustment	*Schedule C, Line 3*	1,008	1,008
11. TOTAL EXPENDITURES MADE	*Add Lines 8 + 9 + 10*	$ 2,908	$ 2,908

Current Cash Statement

12. Beginning Cash Balance	*Previous Summary Page, Line 16*	$ 0
13. Cash Receipts	*Column A, Line 3 above*	10,444
14. Miscellaneous Increases to Cash	*Schedule I, Line 4*	
15. Cash Payments	*Column A, Line 8 above*	1,900
16. **ENDING CASH BALANCE**	*Add Lines 12 + 13 + 14, then subtract Line 15*	$ 8,544

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

17. LOAN GUARANTEES RECEIVED *Schedule B, Part 2* $

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	*See instructions on reverse*	$ 8,544
19. Outstanding Debts	*Add Line 2 + Line 9 in Column B above*	$ 3,000

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).

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	$	$

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
/ /	$
/ /	$

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

Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period
from August 15, 2018
through Sept 22, 2018

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Deniz Bolbol for Belmont City Council 2018

I.D. NUMBER
1409823

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/15/18	William Larsen [redacted] Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	none	500	500	
8/15/18	Jacquelyn Larsen Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	none	500	500	
8/21/18	Tiffany Lyon [redacted] San Jose, CA 95125	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	The Property Network; realtor	500	500	
8/22/18	George Green Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	none	500	500	
8/28/18	Carol Wilhemy 2[redacted]enue Santa Cruz, CA 95060	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	none	500	500	
			SUBTOTAL $	2,500		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 5,975
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 1,469
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL $** 7,444

*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 August 15, 2018
through Sept 22, 2018

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NAME OF FILER
Deniz Bolbol for Belmont City Council 2018

I.D. NUMBER
1409823

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)
8/29/18	Tracey DeMartini Monterey, CA 93940	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Five Currents; personal assistant	100	100	
9/4/18	Marie O'Donnell Grass Valley, CA 95945	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	none	500	500	
9/4/18	Tim Strinden Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	none	100	100	
9/5/18	Dave Warden a Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Software Essentials; owner	250	250	
9/8/18	Coralin Feierbach Rd. Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	none	275	400	
			SUBTOTAL $	1,225		

*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 August 15, 2018
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NAME OF FILER
Deniz Bolbol for Belmont City Council 2018

I.D. NUMBER
1409823

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)
9/10/18	Jennifer Lien 2 Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	nonw	500	500	
9/10/18	Ken Lien 2 ,t. Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Darly Trading Co; Manager	500	500	
9/15/18	Timothy Robertson Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	none	250	250	
9/18/18	Sandra Schneider Altscher Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	none	100	100	
9/20/15	Joseph Brennan Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	none	100	100	
			SUBTOTAL $	1,450		

*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 August 15, 2018
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NAME OF FILER
Deniz Bolbol for Belmont City Council 2018

I.D. NUMBER
1409823

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)
9/21/18	Ed Mitchell Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	none	500	500	
9/7/18	Alberto Rossi 7 Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Rossi Aircraft Inc. Aviation Manager	200	200	
9/7/18	Carol Rossi Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Los Altos School District; speech language pathologist	100	100	
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
			SUBTOTAL $	800		

*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 B – Part 1
Loans Received

Amounts may be rounded to whole dollars.

SCHEDULE B - PART 1

Statement covers period
from August 15, 2018
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NAME OF FILER
Deniz Bolbol for Belmont City Council 2018

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FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (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 RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD *	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Deniz Bolbol 1 Belmont, CA 94002 †☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Deniz Bolbol; consultant	$ 0	$ 3,000	☐ PAID $ ____ ☐ FORGIVEN $ ____	$ 3,000 1/1/19 DATE DUE	0 % RATE $ none	$ 3,000 9/10/18 DATE INCURRED	CALENDAR YEAR $ 3,640 PER ELECTION** $ ____
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$ ____	$ ____	☐ PAID $ ____ ☐ FORGIVEN $ ____	$ ____ DATE DUE	____ % RATE $ ____	$ ____ DATE INCURRED	CALENDAR YEAR $ ____ PER ELECTION** $ ____
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$ ____	$ ____	☐ PAID $ ____ ☐ FORGIVEN $ ____	$ ____ DATE DUE	____ % RATE $ ____	$ ____ DATE INCURRED	CALENDAR YEAR $ ____ PER ELECTION** $ ____
	SUBTOTALS	$ 3,000	$ 0		$ 3,000	$ 0		

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

Schedule B Summary

1. Loans received this period ..... $ 3,000
   (Total Column (b) plus unitemized loans of less than $100.)
2. Loans paid or forgiven this period ..... $ 0
   (Total Column (c) plus loans under $100 paid or forgiven.)
   (Include loans paid by a third party that are also itemized on Schedule A.)
3. Net change this period. (**Subtract** Line 2 from Line 1.) ..... NET $ 3,000
   Enter the net here and on the Summary Page, Column A, Line 2.
   (May be a negative number)

†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

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

Schedule C
Nonmonetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE C

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1409823

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)
8/15/18	Coralin Feierbach Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	none	voter registration list	125	125	
8/15/18	Deniz Bolbol t. Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Deniz Bolbol; consulant	campaign signs	486	486	
8/27/18	Deniz Bolbol Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Deniz Bolbol; Consultant	Website registration	12	498	
9/21/18	Kristin Mercer Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	None	donation envelopes	121	121	

Attach additional information on appropriately labeled continuation sheets. **SUBTOTAL $** 744

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) ..... $ 1,008
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $ _____
3. 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 $** 1,008

*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 C
Nonmonetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE C
CALIFORNIA FORM 460

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Deniz Bolbol for Belmont City Council 2018

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1409823

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)
9/21/18	Kristin Mercer Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	none	event flyer	121	242	
9/4/18	Deniz Bolbol Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Deniz Bolbol Consultant	event reservation	143	143	
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
Attach additional information on appropriately labeled continuation sheets.				**SUBTOTAL $**	264		

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions.
   (Include all Schedule C subtotals.) ..... $ 1,008
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $ _____
3. 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 $** 1,008

*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 E
Payments Made

Amounts may be rounded to whole dollars.

SCHEDULE E

Statement covers period
from August 15, 2018
through Sept 22, 2018

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Deniz Bolbol for Belmont City Council 2018

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1409823

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
Signrocket 340 Broadway Ave Saint Paul, MN 55071	CMP	campaign yard signs	451
Costco 2300 Middlefield Rd Redwood City, CA 94063	LIT	Campaign flyers	300
Vista Print 95 Hayden Ave Lexington, MA 02421	LIT	Doorhangers	396

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

SUBTOTAL $ 1,147

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 1,647
2. Unitemized payments made this period of under $100 ..... $ 253
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ..... $ _____
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ..... **TOTAL $** 1,900

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from August 15, 2018
through Sept 22, 2018

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Deniz Bolbol for Belmont City Council 2018

I.D. NUMBER
1409823

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
Saier Services 77 Claremont Avenue Redwood City, CA 94062	FND	PA system for event	500

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

SUBTOTAL $ 500