Recipient Committee Campaign Statement Cover Page

Date Stamp

CALIFORNIA FORM 460

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For Official Use Only

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 7/01/15
through 12/31/15

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

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)
- ☐ Quarterly Statement
- ☐ Special Odd-Year Report

3. Committee Information

I.D. NUMBER: 1377930

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Ask Belmont Citizens

STREET ADDRESS (NO P.O. BOX)
1516 Folger Drive

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Belmont	CA	94002	(650) 344-9351

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER
Tran Tran

MAILING ADDRESS
1755 Valley View Avenue

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Belmont	CA	94002	(650) 302-0890

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 2/1/16 (Date) By [signature] (Signature of Treasurer or Assistant Treasurer)

Executed on _____ (Date) By _____ (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)

Campaign Disclosure Statement
Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statement covers period
from 7/01/15
through 12/31/15

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ask Belmont Citizens

I.D. NUMBER
1377930

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	*Schedule A, Line 3*	$ 3,130.00	$ 4,103.20
2. Loans Received	*Schedule B, Line 3*		
3. SUBTOTAL CASH CONTRIBUTIONS	*Add Lines 1 + 2*	$ 3,130.00	$ 4,103.20
4. Nonmonetary Contributions	*Schedule C, Line 3*		201.14
5. TOTAL CONTRIBUTIONS RECEIVED	*Add Lines 3 + 4*	$ 3,130.00	$ 4,304.34

Expenditures Made

6. Payments Made	*Schedule E, Line 4*	$ 2,042.27	$ 2,809.89
7. Loans Made	*Schedule H, Line 3*		
8. SUBTOTAL CASH PAYMENTS	*Add Lines 6 + 7*	$ 2,042.27	$ 2,809.89
9. Accrued Expenses (Unpaid Bills)	*Schedule F, Line 3*		
10. Nonmonetary Adjustment	*Schedule C, Line 3*		201.14
11. TOTAL EXPENDITURES MADE	*Add Lines 8 + 9 + 10*	$ 2,042.27	$ 3,011.03

Current Cash Statement

12. Beginning Cash Balance	*Previous Summary Page, Line 16*	$ 4.44
13. Cash Receipts	*Column A, Line 3 above*	3,130.00
14. Miscellaneous Increases to Cash	*Schedule I, Line 4*	
15. Cash Payments	*Column A, Line 8 above*	2,042.27
16. **ENDING CASH BALANCE**	*Add Lines 12 + 13 + 14, then subtract Line 15*	$ 1,092.17

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*	$ 1,092.17
19. Outstanding Debts	*Add Line 2 + Line 9 in Column B above*	$

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 7/01/15
through 12/31/15

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ask Belmont Citizens

I.D. NUMBER
1377930

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)
8/11/15	Kristin Mercer 2535 Somerset Drive, Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self-employed: Technical Writer	100	199	
8/11/15	Michael O'Neill 1516 Folgers Drive, Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self-employed: Musician	60	159	
8/12/15	Coralin Feierbach 3206 E Laurel Creek Road, Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	None	51.5	126.50	
8/12/15	Gary Feierbach 3206 E Laurel Creek Road, Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	None	51.5	126.50	
8/17/15	Carol Rossi 76 Ralston Ranch Road, Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Los Altos School District: Speech-language pathologist	279	279	
			SUBTOTAL $	542		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 1,891
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 1,239
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL $** 3,130

*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 7/01/15
through 12/31/15

CALIFORNIA FORM 460

NAME OF FILER
Ask Belmont Citizens

I.D. NUMBER
1377930

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)
8/18/15	Mike Cunneen 2732 Waltham Cross Street, Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Signet Products: Owner	199	298	
8/20/15	Steve Erickson 1934 Oak Knoll Drive, Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	None	100	100	
8/20/15	George Zabelle 2711 Wemberly Drive, Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	None	100	100	
12/28/15	Danielle Pierce 3406 Lodge Drive, Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Celgene Corp: Biologist	400	400	
12/28/15	Tucuong Lien 2 Paddington Ct, Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Darly Trading Company: importer	200	200	
			SUBTOTAL $	999		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
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NAME OF FILER
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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)
7/26/15	Perry Kennan 1039 Continentals Way #202 Belmont, CA 94002	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	None	350	350	
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
			SUBTOTAL $	350		

*Contributor Codes
IND – Individual
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Schedule E
Payments Made

Amounts may be rounded to whole dollars.

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CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
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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
Stuart Flashman 5626 Ocean View Avenue Oakland, CA 94618	LEG	Counsel on repeal of ordinance	300.00
Pacific Printing 1002 South 2nd Street San Jose, CA 95112	LIT	Committee newsletter	573.20
Kristin Mercer, 2535 Somerset Drive, Belmont, CA 94002 (Pacific Printing, 1002 South 2nd Street, San Jose, CA 95112)	LIT	Reimburse for deposit on committee newsletter	710.00

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

SUBTOTAL $ 1,583.20

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 1,933.20
2. Unitemized payments made this period of under $100 ..... $ 109.07
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 $** 2,042.47

Schedule E
(Continuation Sheet)
Payments Made

SEE INSTRUCTIONS ON REVERSE

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FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
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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
Perry Kennan 1039 Continentals Way #202 Belmont, CA 94002	RFD	Returned contribution	350

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

SUBTOTAL $ 350