Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in i	nk.	Date Stamp	C:ALIFORNIA 46	
SEE INSTRUCTIONS ON REVERSE	Statement covers period 02/15/15 through06/30/15	Date of election if applicable: (Month, Day, Year) 11/03/15 By_	FRESHOTOCHEY	For Official Use Only	
				DENUIT	
 State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee 	omplete Parts 1, 2, 3, and 4. 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 To Amendment (Explain b	ermination)	Quarterly Statement Special Odd-Year Report Supplemental Preelection Statement - Attach Form 495	
	D. NUMBER 370153	Treasurer(s)			_
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE STREET ADDRESS (NO P.O. BOX)		NAME OF TREASURER ERIC SCHMIDT MAILING ADDRESS CITY	STATE	ZIP CODE AREA CODE/PHO	ONE
		FRESNO	CA	93721 559.268.3372	
FRESNO CA 9372 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. E	1 559.268.3372	NAME OF ASSISTANT TREASUI	RER, IF ANY		
CITY STATE ZIP CO	DDE AREA CODE/PHONE	CITY FRESNO	STATE CA	ZIP CODE AREA CODE/PHO 93721 559.268.3372	
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDR	RESS		
4. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of Californi Executed on	a that the foregoing is By By Signature of Cont	Medge the information contained he rolling Officeholder, Candidate, State Measure Pro	pponent or Responsible Officer of	·	ify
Executed on	Ву	Signature of Controlling Officeholder, Candidate, S	itate Measure Proponent		

Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

		SUMMARY PAGE
Statem	ent covers period	CALIFORNIA 460
from	02/15/15	FORM 400
through _	06/30/15	Page of
		I.D. NUMBER
		870153

0.....

SEE INSTRUCTIONS ON REVERSE NAME OF FILER FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE Column A Column B **Calendar Year Summary for Candidates** Contributions Received TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) CALENDAR YEAR TOTALTO DATE Running in Both the State Primary and **General Elections** 9,019.00 1/1 through 6/30 7/1 to Date 20. Contributions 6,916.50 9,019.00 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ Received Nonmonetary Contributions Schedule C, Line 3 21. Expenditures 6.916.50 9.019.00 Made TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 \$ **Expenditures Made Expenditure Limit Summary for State** 9.000.00 9,000.00 Candidates 6. Payments Made Schedule E, Line 4 22. Cumulative Expenditures Made* 9,000.00 9,000.00 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy) 9.000.00 9.000.00 **Current Cash Statement** 26,250.60 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ To calculate Column B. add 6.916.50 amounts in Column A to the 13. Cash Receipts Column A, Line 3 above corresponding amounts *Amounts in this section may be different from amounts from Column B of your last reported in Column B. 9.000.00 report. Some amounts in Column A may be negative 24,167.10 figures that should be 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ subtracted from previous If this is a termination statement. Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ __ carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). FPPC Form 460 (January/05) 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A

Type or print in ink.

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SCH		 •
SUF	ᇆᇇ	•

Monetary	Contributions Received		is may be rounded whole dollars.	from	15/15		FORNIA 460
SEE INSTRUCTIO	ONS ON REVERSE			through	6/30/15	Page	of
NAME OF FILER						I.D. NI	JMBER
FRESNO	DEPUTY SHERIFF'S ASSOCIATION POLITICAL AC	CTION COMM	IITTEE			8701	53
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)
02/20/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND □COM □OTH □PTY □SCC		705.00			
03/04/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND ☑COM □OTH □PTY □SCC		711.50			
03/23/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND ☑COM □OTH □PTY □SCC		710.00			
04/08/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND ☑COM □OTH □PTY □SCC		705.00			
04/16/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND ☑COM □OTH □PTY □SCC		700.00			
			SUBTOTAL\$	3,531.50			
l . Amount re (Include al	A Summary ceived this period – itemized monetary contributions. I Schedule A subtotals.)				IND- COM	(other	
	ceived this period – unitemized monetary contributions	oi iess than \$) IUU \$ <u></u>		PTY	– Politica	l Party
	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colu	mn A. Line 1.)	TOTAL \$	6,916.50	SCC	- Small (Contributor Committee

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 CALIFORNIA 02/15/15 **FORM**

870153

from 06/30/15 through. I.D. NUMBER

NAME OF FILER

FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE

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)
05/05/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☐COM ☐OTH ☐PTY ☐SCC		685.00		
05/12/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☐COM ☐OTH ☐PTY ☐SCC		682.50		
05/29/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☑COM ☐OTH ☐PTY ☐SCC		675.00		
06/10/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☑COM ☐OTH ☐PTY ☐SCC		670.00		
06/25/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☐COM ☐OTH ☐PTY ☐SCC		672.50		
			SUBTOTAL \$	3,385.00		

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

Schedule E **Payments Made**

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

	SCHEDULEE
Statement covers period	CALIFORNIA / CO
from02/15/15	FORM 400
through06/30/15	Page of
	I.D. NUMBER
	870153

SEE INSTRUCTIONS ON REVERSE NAME OF FILER FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications CMP campaign paraphernalia/misc. RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries petition circulating CVC civic donations PET TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals FIL candidate filing/ballot fees phone banks FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals ND independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services transfer between committees of the same candidate/sponsor legal defense PRO professional services (legal, accounting) VOT voter registration LEG 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 DESCRIP	TION OF PAYMENT	AMOUNT PAID
BRIAN PACHECO FOR SUPERVISOR FPPC# 1360246 PO BOX 12451 FRESNO, CA 93777		CONTRIBUTION		2,500.00
JIM PATTERSON FOR ASSEMBLY FPPC# 1374569 SACRAMENTO, CA 95814		CONTRIBUTION		1,000.00
BUDDY MENDES FOR SUPERVISOR FPPC# 1359863 PO BOX 387 RIVERDALE, CA 93656		CONTRIBUTION		2,000.00
* Payments that are contributions or independent expenditures must also	be summarized on	Schedule D.	SUBTOTAL\$	5,500.00

Schedule E Summary 9.000.00 1. Itemized payments made this period. (Include all Schedule E subtotals.)......\$ 2. Unitemized payments made this period of under \$100\$ 9,000.00

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

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

SCHEDULE E (CONT.

Statement covers period	CALIFORNIA ACO
from02/15/15	FORM 400
through06/30/15	Page of
	I.D. NUMBER
	870153

FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE **CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphemalia/misc. MBR member communications RAD radio airtime and production costs campaign consultants meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* **OFC** office expenses SAL campaign workers' salaries petition circulating t.v. or cable airtime and production costs CVC civic donations PET candidate filing/ballot fees PHO phone banks candidate travel, lodging, and meals fundraising events polling and survey research staff/spouse travel, lodging, and meals FND POL independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor ND VOT voter registration LEG legal defense professional services (legal, accounting) campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail) NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID

(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DECOMP NOT OF TATMENT	AWOUNTAB
ANDREAS BORGEAS FOR SUPERVISOR FPPC# 1336479	CONTRIBUTION	1,000.00
FRESNO, CA 93711		1,000.00
HENRY R. PEREA FOR SUPERVISOR FPPC# 1253628 PO BOX 4529 FRESNO, CA 93728	CONTRIBTUTION	2,500.00

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

SUBTOTAL \$

3,500.00

D				P		COVER PAGE
Recipient Committee Campaign Statement Cover Page		Type or print in	s ink.	Date Stamp		FORM 460
(Government Code Sections 84200-84216.5)	fı	Statement covers period on 01/01/15	Date of election if applicab (Month, Day, Year)	Hou vy		For Official Use Only
SEE INSTRUCTIONS ON REVERSE	ti	06/30/15 hrough	11/03/15	FRESNO COUNT	Y CLERK	
1. Type of Recipient Committee: A	I Committees – Comp	lete Parts 1, 2, 3, and 4.	2. Type of Statement	:		
 ☐ Officeholder, Candidate Controlled Com ☐ State Candidate Election Committee ☐ Recall (Also Complete Part 5) ☑ General Purpose Committee ☑ Sponsored ☐ Small Contributor Committee ☐ Political Party/Central Committee 	Com O C O S (Also I) Prim Offici	narily Formed Ballot Measure Imittee Controlled Sponsored Complete Part 6) Inarily Formed Candidate/ Seholder Committee Complete Part 7)	☐ Preelection Stateme ☐ Semi-annual Stateme ☐ Termination Stateme (Also file a Form 41 ☐ Amendment (Explai Original statement	ent ent 0 Termination)	Supplement Statement -	-Year Report al Preelection Attach Form 495
3. Committee Information		UMBER	Treasurer(s)		•	
COMMITTEE NAME (OR CANDIDATE'S NAME IF)153	NAME OF TREASURER			· · · · · · · · · · · · · · · · · · ·
FRESNO DEPUTY SHERIFF'S A POLITICAL ACTION COMMITTE			ERIC SCHMIDT MAILING ADDRESS			
STREET ADDRESS (NO P.O. BOX)			CITY FRESNO	STATE CA	ZIP CODE 93721	AREA CODE/PHONE 559.289.3910
CITY	STATE ZIP CODE		NAME OF ASSISTANT TREA	ASURER, IF ANY		
FRESNO	CA 93721	559.289.3910	ISAAC TORRES			
MAILING ADDRESS (IF DIFFERENT) NO. AND	STREET OR P.O. BOX		MAILING ADDRESS			
CITY	STATE ZIP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
			FRESNO	CA	93721	559.289.3910
OPTIONAL: FAX / E-MAIL ADDRESS			OPTIONAL: FAX / E-MAIL A	DDRESS		<u> </u>
4. Verification I have used all reasonable diligence in prepare under penalty of perjury under the laws of the Executed on Date Executed on Date	ring and reviewing the State of California th	By	nowledge the information contained controlling Officeholder, Candidate, State Measur Signature of Controlling Officeholder, Candidate	reasurer re Proponent or Responsible Officer		ue and complete. I certify
Executed on		Ву	Signature of Controlling Officeholder, Candida	ate. State Measure Proponent		

Campaign Disclosure Statement Summary Page

Type or print in ink.
Amounts may be rounded

SUMMARY PAGE Statement covers period CALIFORNIA 01/01/15 **FORM** from _ 06/30/15 through . I.D. NUMBER

to whole dollars. SEE INSTRUCTIONS ON REVERSE NAME OF FILER FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE 870153

			070100
Contributions Received	Column A TOTAL THIS PERIOD (FROMATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and
Monetary Contributions	\$9,019.00	\$9,019.00	General Elections 1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 9,019.00	\$ 9,019.00	20. Contributions Received \$\$
4. Nonmonetary Contributions	\$ 9,019.00	\$ 9,019.00	21. Expenditures Made \$ \$
Expenditures Made	9,000,00	\$ 9,000.00	Expenditure Limit Summary for State
6. Payments Made	\$	\$9,000.00	Candidates
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$9,000.00	\$9,000.00	22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)			Date of Election Total to Date (mm/dd/yy)
11. TOTAL EXPENDITURES MADE		\$ 9,000.00	\$
Current Cash Statement			\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 24,198.10	To calculate Column B, add	
13. Cash Receipts Column A, Line 3 above	9,019.00	amounts in Column A to the corresponding amounts	*Amounts in this section may be different from amounts
14. Miscellaneous Increases to Cash	9,050.00	from Column B of your last report. Some amounts in	reported in Column B.
15. Cash Payments	24 167 10	Column A may be negative figures that should be	
If this is a termination statement, Line 16 must be zero.	Ψ	subtracted from previous period amounts. If this is	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	the first report being filed for this calendar year, only carry over the amounts	
Cash Equivalents and Outstanding Debts		from Lines 2, 7, and 9 (if any).	
18. Cash Equivalents			
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$		FPPC Form 460 (Januar FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3

Schedule A **Monetary Contributions Received**

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

SCHEDULE A

Statement covers period **CALIFORNIA** 01/01/15 **FORM** from 06/30/15 through I.D. NUMBER 870153

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

FRESNO DEPUTY SHERIFF'S ASSOCIATON POLITICAL ACTION COMMITTEE

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)
01/09/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☐COM ☐OTH ☐PTY ☐SCC		702.50		
01/23/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☐COM ☐OTH ☐PTY ☐SCC		697.50		
02/05/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND □COM □OTH □PTY □SCC		702.50		
02/20/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND ☑COM □OTH □PTY □SCC		705.00		
03/04/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND □COM □OTH □PTY □SCC		711.50		
			SUBTOTAL\$	3,519.00	erio	

Schedule A Summary

- 1. Amount received this period itemized monetary contributions. 9,019.00 (Include all Schedule A subtotals.)\$ ___ 2. Amount received this period – uniternized monetary contributions of less than \$100\$
- 3. Total monetary contributions received this period. 9,019.00

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC) OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (January/05)

Schedule A (Continuation Sheet)

Type or print in ink.

SCHEDULE A (CONT.)

Monetary Contributions Received	Amounts may be to whole do		Statement covers period from			CALIFORNIA 460		
			through	06/30/15	Page .	of		
NAME OF FILER		1		· · · <u>· · · · · · · · · · · · · · · · </u>	I.D. NU	JMBER		
FRESNO DEPUTY SHERIFF'S ASSOCIATON POLITI	CAL ACTION COMMITT	EE			8701	53		
		IF AN INDIVIDUAL ENTER	AMOUNT	01/14/1/1/47	VE TO 0.475	DED ELEGISON		

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. 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)
03/23/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND □COM □OTH □PTY □SCC		710.00		
04/08/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☑COM ☐OTH ☐PTY ☐SCC		705.00		
04/16/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND ☑COM □OTH □PTY □SCC		700.00		
05/05/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☑COM ☐OTH ☐PTY ☐SCC		685.00		
05/12/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☑COM ☐OTH ☐PTY ☐SCC		682.50		
			SUBTOTAL\$	3,482.50		

*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

Type or print in ink.

Amounts may be rounded

SCHEDULE A	(CONT.)
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Monetary Contributions Received	to whole dollars.	Statement covers period	CALIFORNIA 460
		from01/01/15	FORM 400
		through06/30/15	Page of
NAME OF FILER			I.D. NUMBER
FRESNO DEPUTY SHERIFF'S ASSOCIATON POLIT	ICAL ACTION COMMITTEE		870153

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)
05/29/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND □COM □OTH □PTY □SCC		675.00		
06/10/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND □COM □OTH □PTY □SCC		670.00		
06/25/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☐COM ☐OTH ☐PTY ☐SCC		672.50		
		□IND □COM □OTH □PTY □SCC				
		□IND □COM □OTH □PTY □SCC				
	1.0010000000000000000000000000000000000		SUBTOTAL\$	2,017.50		

*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**

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

	SCHEDULEE
Statement covers period	CALIFORNIA 160
from01/01/15	FORM 400
through06/30/15	Page of
	I.D. NUMBER
	870153

SEE INSTRUCTIONS ON REVERSE NAME OF FILER FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs MBR member communications campaign paraphernalia/misc. returned contributions MTG meetings and appearances CNS campaign consultants SAL campaign workers' salaries office expenses CTB contribution (explain nonmonetary)* OFC TEL t.v. or cable airtime and production costs PET petition circulating CVC civic donations TRC candidate travel, lodging, and meals phone banks FIL candidate filing/ballot fees PHO staff/spouse travel, lodging, and meals polling and survey research FND fundraising events transfer between committees of the same candidate/sponsor postage, delivery and messenger services independent expenditure supporting/opposing others (explain)* professional services (legal, accounting) VOT voter registration PRO legal defense LEG WEB information technology costs (internet, e-mail) PRT print ads campaign literature and mailings NAME AND ADDRESS OF PAYEE AMOUNT PAID CODE OR DESCRIPTION OF PAYMENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CONTRIBUTION BRIAN PACHECO FOR SUPERVISOR FPPC# 1360246 2,500.00 PO BOX 12451 **FRESNO, CA 93777** CONTRIBUTION JIM PATTERSON FOR ASSEMBLY FPPC# 1374569 1.000.00 SACRAMENTO, CA 95814 CONTRIBUTION **BUDDY MENDES FOR SUPERVISOR FPPC# 1359863** 2,000.00 PO BOX 387 RIVERDALE, CA 93656 * Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL\$ 5.500.00 Schedule E Summary 9.000.00 1. Itemized payments made this period. (Include all Schedule E subtotals.) 50.00 2. Unitemized payments made this period of under \$100\$ 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)......\$ 9.050.00

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

CMP campaign paraphernalia/misc.

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

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.

	COLIED DE LE (COLLIE
Statement covers period	CALIFORNIA 160
from01/01/15	FORM 400
through06/30/15	- Page of
	I.D. NUMBER
	870153

RAD radio airtime and production costs

RFD returned contributions

SEE INSTRUCTIONS ON REVERSE NAME OF FILER FRESNO DEPUTY SHERIFF'S ASSOCIATON POLITICAL ACTION COMMITTEE

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 PET PHO POL	phone banks polling and s postage, deli	ses ating urvey rese very and r	earcl mes:		SAL TEL TRC TRS TSF VOT	campaign workers' salaries t.v. or cable airtime and production candidate travel, lodging, and meal staff/spouse travel, lodging, and m transfer between committees of th voter registration information technology costs (inter	s eals e same ca	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CODE	0	R	DESCRIPTIO	ON OF PAYMENT	A	MOUNT PAID
ANDREAS BORGEAS FOR SUPERVISOR FPPC# 133647	'9				CONTRIBIL	UTION			1,000.00
FRESNO, CA 93711									
HENRY R. PEREA FOR SUPERVISOR FPPC# 1253628 PO BOX 4529 FRESNO, CA 93728					CONTRIBU	TION			2,500.00
			Cabadula				SUBTO	TAL \$	3,500.00

Desired Committee		_			COVER PAGE		
Recipient Committee Campaign Statement Cover Page	Type or print in	FORM 460					
(Government Code Sections 84200-84216.5)	Statement covers period 7/01/15	Date of election if applicable: (Month, Day, Year)	OCT 2 1	2015 Page	For Official Use Only		
SEE INSTRUCTIONS ON REVERSE	through10/17/15	11/03/15	FRESIO COU	NTY CLERK	Đ		
1. Type of Recipient Committee: All Committees - Co	implete Parts 1, 2, 3, and 4.	2. Type of Statement:		OLI UI	-10-		
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee Also Complete Part 7)	✓ Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te Amendment (Explain be	•	Quarterly Sta Special Odd- Supplementa Statement - A	Year Report		
	D. NUMBER 370153	Treasurer(s)					
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)		NAME OF TREASURER					
FRESNO DEPUTY SHERIFF'S ASSOCIATION		ERIC SCHMIDT					
POLITICAL ACTION COMMITTEE		MAILING ADDRESS					
STREET ADDRESS (NO P.O. BOX)		CITY	STATE	ZIP CODE	AREA CODE/PHONE		
STREET AUURESS INC E.U. BOX		FRESNO	CA	93721	559.268.3372		
FRESNO CA 9372		NAME OF ASSISTANT TREASUR ISAAC TORRES					
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. E	BOX	MAII ING ADDDESS					
CITY STATE ZIP CO	DDE AREA CODE/PHONE	CITY FRESNO	STATE CA	ZIP CODE 93721	AREA CODE/PHONE 559.268.3372		
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRI	ESS				
A Marie and a							
4. Verification I have used all reasonable diligence in preparing and reviewing		audadaa tha information contained her	in and in the attache	d aabadules is tru	e and complete. I certify		
under penalty of perjury under the laws of the State of Californi	a that the foregoing is true a						
Executed on DINIS	Ву						
Executed on	BySignature of Co	ontrolling Officeholder, Candidate, State Measure Prop	onent or Responsible Officer	of Sponsor			
Executed on	Ву	Signature of Controlling Officeholder, Candidate, Sta	ite Measure Proponent				
Executed on	Ву	Signature of Controlling Officeholder, Candidate, Sta	ite Measure Proponent	 · 	EDDO Farm 400 / January 405		

Campaign Disclosure Statement Summary Page

19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$

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

SUMMARY PAGE Statement covers period **CALIFORNIA FORM** 7/01/15 10/17/15 through I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER FRESNO DEPUTY SHERIFF'S ASSOCIATION POLTICAL ACTION COMMITTEE 870153 Column B Calendar Year Summary for Candidates Column A Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE **General Elections** 5,480.50 14.499.50 1. Monetary Contributions Schedule A, Line 3 \$ 1/1 through 6/30 7/1 to Date 20. Contributions 5.480.50 14.499.50 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ Received 4. Nonmonetary Contributions Schedule C, Line 3 21. Expenditures 14.499.50 5,480.50 Made 5 TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 \$ **Expenditures Made Expenditure Limit Summary for State** 9.300.00 300.00 Candidates 7. Loans Made Schedule H. Line 3 22. Cumulative Expenditures Made* 300.00 9.300.00 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy) 10. Nonmonetary Adjustment Schedule C, Line 3 300.00 9.300.00 **Current Cash Statement** 24.167.10 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ To calculate Column B, add 5.480.50 amounts in Column A to the corresponding amounts *Amounts in this section may be different from amounts 14. Miscellaneous Increases to Cash Schedule I. Line 4 from Column B of your last reported in Column B. report. Some amounts in 300.00 15. Cash Payments Column A, Line 8 above Column A may be negative 29.347.60 figures that should be 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ carry over the amounts from Lines 2, 7, and 9 (if **Cash Equivalents and Outstanding Debts** any). 18. Cash Equivalents See instructions on reverse \$

> FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A **Monetary Contributions Received**

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

SCHEDULE A Statement covers period 7/01/15 from

SEE INSTRUCTIONS ON REVERSE Page of	of <u>5</u>
NAME OF FILER I.D. NUMBER	

FRESNO DEPUTY SHERIFF'S ASSOCIATION POLTICAL ACTION COMMITTEE

870153

		Ī				
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)
07/08/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☐COM ☐OTH ☐PTY ☐SCC		666.50		
07/23/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☐COM ☐OTH ☐PTY ☐SCC		672.50		
08/05/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☐COM ☐OTH ☐PTY ☐SCC		679.00		
08/19/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND ☑COM □OTH □PTY □SCC		686.50		
09/04/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☑COM ☐OTH ☐PTY ☐SCC		686.00		
			SUBTOTAL\$	3,390.50		
					(+2, +1, +1, +1, +1, +1, +1, +1, +1, +1, +1	

Schedule A Summary

- 1. Amount received this period itemized monetary contributions. 5.480.50 (Include all Schedule A subtotals.)\$
- 2. Amount received this period unitemized monetary contributions of less than \$100\$
- 3. Total monetary contributions received this period. 5,480.50

*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

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.

Amounts may be rounded to whole dollars.

CALIFORNIA

FORM

Statement covers period

from

SUBTOTAL\$

2,090.00

7/01/15

				through10/	17/15	Page_	4 of 5
NAME OF FILER FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE						1.D. NUI 87015	
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)
09/16/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND ☑COM □OTH □PTY □SCC		692.50			
09/29/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND □COM □OTH □PTY □SCC		692.50		:	
10/14/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND ICOM □OTH □PTY □SCC		705.00			
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □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

Schedule E Payments Made

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

			SCHEDULEE
	Statement covers period		CALIFORNIA 160
ŀ	from	7/01/15	FORM 400
	through _	10/17/15	Page <u>5</u> of <u>5</u>
			I.D. NUMBER
			870153

to whole donars.		fro	m	7701713				
SEE INSTRUCTIONS ON REVERSE				thr	ough _	10/17/15	Page _	5 of 5
AME OF FILER							I.D. NU	MBER
FRESNO DEPUTY SHERIFF'S ASSOCIATION POLTICAL ACTION COMMITTEE							87015	3
CODES: If one of the following codes accurately describes	s the payment, yo	u may en	ter the code. O	therwise,	describ	e the payment.		
CMP campaign paraphernalia/misc.	MBR member.com					airtime and production	costs	
CNS campaign consultants	MTG meetings and OFC office expen		es	RFD SAI		ed contributions		
CTB contribution (explain nonmonetary)* CVC civic donations	PET petition circu				SAL campaign workers' salaries TEL t.v. or cable airtime and production costs			ts
FIL candidate filing/ballot fees	PHO phone banks	_		TRC		late travel, lodging, an		
FND fundraising events ND independent expenditure supporting/opposing others (explain)*	POL polling and s POS postage, deli		rch essenger services	TRS TSF		pouse travel, lodging, er hetween committee		me candidate/sponsor
LEG legal defense			gal, accounting)			registration		
LIT campaign literature and mailings	PRT print ads			WEE	3 inform	ation technology costs	s (internet,	e-mail)
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION	ON OF PA	YMENT		AMOUNT PAID
MARGARET MIMS FOR SHERIFF FPPC# 1283613 504 VAN NESS AVE FRESNO, CA 93721			CONTRIBU	TION				300.00
* Payments that are contributions or independent expenditures r	nust also be summ	arized on S	Schedule D.			SU	JBTOTAL:	\$ 300.00
Schedule E Summary								
Itemized payments made this period. (Include all Schedule E subtotals.)								300.00
2. Unitemized payments made this period of under \$100								
	. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)							300.00
. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)						TO	TAL \$_	300.00

Recipient Committee Campaign Statement Cover Page		F	Date Stamp		COVER PAGE LIFORNIA 460 FORM
SEE INSTRUCTIONS ON DEVERSE	Statement covers period 10/18/15 12/31/15	Date of election if applicable: (Month, Day, Year)	JAN 2 5 2016 RESMO COUNTY C	LERK	For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through			DEPUTY	
1. Type of Recipient Committee: All Committees - Co	omplete Parts 1, 2, 3, and 4.	2. Type of Statement:	J		
O State Candidate Election Committee O Recall (Also Complete Part 5) ☐ General Purpose Committee Sponsored O Small Contributor Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	☐ Preelection Statement ☐ Semi-annual Statement ☐ Termination Statement (Also file a Form 410 Te ☐ Amendment (Explain be	•	Quarterly Sta	
	D. NUMBER 870153	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)	070100	NAME OF TREASURER			
FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE	I	ERIC SCHMIDT MAILING ADDRESS			
STREET ANNRESS (NIC DO ROY)		CITY FRESNO	STATE CA	ZIP CODE 93721	AREA CODE/PHONE 559-268-3372
FRESNO CA 9372		NAME OF ASSISTANT TREASURER ISAAC TORRES	R, IF ANY		
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX		MAILING ADDRESS			
CITY STATE ZIP CO	DDE AREA CODE/PHONE	CITY FRESNO	STATE CA	ZIP CODE 93721	AREA CODE/PHONE 559-268-3372
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRESS			
Verification I have used all reasonable diligence in preparing and review certify under penalty of perjury under the laws of the State or			ı and in the attac	hed schedules i	s true and complete. I
Executed on	Ву		er.		
Executed onDate	BySignature of Conf	rolling Officeholder, Candidate, State Measure Pro	ponent or Responsible Officer	of Sponsor	
Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, St	ate Measure Proponent	····	
Executed on	Ву	Signature of Controlling Officeholder, Candidate, St	ate Measure Proponent		

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Summary Page	to whole dollars.	Stat	ement covers period 10/18/15	california 460
SEE INSTRUCTIONS ON REVERSE		through	12/31/15	Page of4
NAME OF FILER FRESNO DEPUTY SHERIFF'S ASSOCIATION F	POLITICAL ACTION COMMITTEE			I.D. NUMBER 870153
Contributions Received	Column A	Column B	Calendar Year Sun	mary for Candidates

Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and
1. Monetary Contributions Schedule A, Line 3 2. Loans Received Schedule B, Line 3 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 4. Nonmonetary Contributions Schedule C, Line 3 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 3,573.50 0	\$ \frac{18,073.00}{0} \\ \$ \frac{18,072.00}{0}	General Elections 1/1 through 6/30 7/1 to Date 20. Contributions Received \$
Expenditures Made 6. Payments Made	\$ 4,900.00 \$ 4,900.00 \$ 4,900.00 \$ 29,347.60 3,573.50 0 4,900.00	\$ 14,200.00 \$ 14,200.00 \$ 14,200.00 \$ 14,200.00 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	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) \$
17. LOAN GUARANTEES RECEIVED	\$0	this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).	FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

Schedule A Monetary Contributions Received		Amoun	ts may be rounded			SCHEDULE			
			whole dollars.	Statement cov	ers period 18/15	CALIFORNIA 460			
SEE INSTRUCTIO	NS ON REVERSE			through12	/31/15	Page		of	
NAME OF FILER		7.01.00144				I.D. NUI			
FRESNO	DEPUTY SHERIFF'S ASSOCIATION POLITICAL AC	HON COMMI				87015	3		
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	то	LECTION DATE QUIRED)	
10/29/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☑COM ☐OTH ☐PTY ☐SCC		702.50					
11/10/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND IZ COM ☐OTH ☐PTY ☐SCC		712.50					
11/24/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND □COM □OTH □PTY □SCC		711.50					
12/09/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☑COM ☐OTH ☐PTY ☐SCC		719.00					
12/23/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☑COM ☐OTH ☐PTY ☐SCC		728.00					
			SUBTOTAL \$	3,573.50					
Schedule A	A Summary				*Con	tributor C	odes		

1. Amount received this period – itemized monetary contributions. 3,573.50 (Include all Schedule A subtotals.)\$ __

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

3. Total monetary contributions received this period. 3,573.50 (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.).....TOTAL \$ __

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.			Statem	ent covers period 10/18/15	CALIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE NAME OF FILER FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITIC	CAL ACTION COM	MITTEE		through	12/31/15	Page 4 of 4 I.D. NUMBER 870153		
CODES: If one of the following codes accurately describ CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings and OFC office expens PET petition circul PHO phone banks POL polling and s	nmunications d appearances ses lating urvey research ivery and messeng	ger services	RAD radio : RFD return SAL campa TEL t.v. or TRC candid TRS staff/s TSF transfe VOT voter i	airtime and productioned contributions aign workers' salaries cable airtime and product travel, lodging, a pouse travel, lodging, a	on costs s coduction costs and meals g, and meals es of the same candidate/sponsor		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DES	CRIPTION OF PA	YMENT	AMOUNT PAID		
PATTERSON FOR ASSEMBLY 2016 FPPC# 1374569		С	ONTRIBUTION			2 500 00		

PACHECO FOR SUPERVISOR 2018 FPPC# 1360246 PO BOX 12451 FRESNO, CA 93777		CONTRIBUTION		2,400.00
* Payments that are contributions or independent expenditures must also be summarized on Sc		SUBTOTAL \$	4,900.00	
Schedule E Summary				
1. Itemized payments made this period. (Include all Schedule E subtotals.)			\$	4,900.00
2. Unitemized payments made this period of under \$100				0
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)				0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and o		4,900.00		

SACRAMENTO, CA 95814

Recipient Committee Campaign Statement Cover Page		JAN 2	pate Stamp	COVER PAGE CALIFORNIA 460 FORM Page 1 of 6
SEE INSTRUCTIONS ON REVERSE	Statement covers period 07/01/15 12/31/15	Date of election if applicable: (Month, Day, Year) By	DEPUTY	For Official Use Only
○ State Candidate Election Committee ○ Recall (Also Complete Part 5) ☐ General Purpose Committee ② Sponsored ○ Small Contributor Committee	Implete Parts 1, 2, 3, and 4. Primarily Formed Ballot Measure Committee Controlled Sponsored Use Complete Part 6) Primarily Formed Candidate/ Officeholder Committee Use Complete Part 7)	2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination) Amendment (Explain below)		terly Statement sial Odd-Year Report
	D. NUMBER 370153	Treasurer(s) NAME OF TREASURER ERIC SCHMIDT MAILING ADDRESS CITY FRESNO	STATE ZIP CO CA 9372	
CITY STATE ZIP CO FRESNO CA 9372 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX CITY STATE ZIP CO	1 559-268-3372	NAME OF ASSISTANT TREASURER, IF ANY ISAAC TORRES MAILING ADDRESS CITY FRESNO	STATE ZIP CO	DDE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS 1. Verification I have used all reasonable diligence in preparing and reviewicertify under penalty of perjury under the laws of the State of	ng this statement and to the best of mv California that the foregoing	OPTIONAL: FAX / E-MAIL ADDRESS knowledge the information contained herein and	in the attached sch	nedules is true and complete. I
Executed on	•	asurer trolling Officeholder, Candidate, State Measure Proponent or Res		or
Date Executed on	Bu	Signature of Controlling Officeholder, Candidate, State Measure Signature of Controlling Officeholder, Candidate, State Measure		

Campaign Disclosure Statement

Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period **CALIFORNIA** 07/01/15 **FORM** from 12/31/15 through I.D. NUMBER

Summary Page SEE INSTRUCTIONS ON REVERSE NAME OF FILER FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE 870153 Calendar Year Summary for Candidates Column B Column A

Contributions Received	TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	CALENDAR YEAR TOTAL TO DATE	Running in Both the State Primary and
1. Monetary Contributions	\$ 9,054.00	\$\frac{18,073.00}{0}\$ \$\frac{18,073.00}{0}\$ \$\frac{118,073.00}{0}\$	General Elections 1/1 through 6/30 7/1 to Date 20. Contributions Received \$ \$ 21. Expenditures Made \$ \$
Expenditures Made 6. Payments Made	\$	\$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	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	\$ 28,021.10	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	*Amounts in this section may be different from amounts reported in Column B.
Cash Equivalents and Outstanding Debts 18. Cash Equivalents See instructions on reverse 19. Outstanding Debts Add Line 2 + Line 9 in Column B above	^	from Lines 2, 7, and 9 (if any).	FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

Schedule A ontributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A

Monetary Contributions Received		to	whole dollars.	from	01/15	california 460		
	NIO ON DEVERSE			through12	/31/15	Page	3 of 6	
NAME OF FILER	NS ON REVERSE						JMBER	
FRESNO I	DEPUTY SHERIFF'S ASSOCIATION POLITICAL AC	TION COMM	ITTEE	<u>,</u>		87015	53	
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)	
07/08/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ICOM ☐OTH ☐PTY ☐SCC		666.50				
07/23/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☐COM ☐OTH ☐PTY ☐SCC		672.50				
08/05/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☐COM ☐OTH ☐PTY ☐SCC		679.00				
08/19/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☑COM ☐OTH ☐PTY ☐SCC		686.50				
09/04/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		686.00				
			SUBTOTAL	\$ 3,390.50				
Schedule	A Summary					ntributor		
1. Amount re	eceived this period – itemized monetary contributions		¢	9,054.00			pient Committee	
•	Il Schedule A subtotals.)			0	ТОТ	•	r than PTY or SCC) (e.g., business entity)	
	eceived this period – unitemized monetary contributio	ns of less thai	n \$100\$ —			′ – Politic C – Small	al Party Contributor Committee	
Total mon (Add Line)	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Co	lumn A, Line 1	l.) TOTAL \$	9,054.00			PPC Form 460 (Jan/2016)	

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA FORM

Statement covers period

from

07/01/15

				through12/	31/15	Page_	
NAME OF FILER FRESNO D	EPUTY SHERIFF'S ASSOCIATION POLITICAL ACT	TION COMMI	TTEE			1.D. NU 87015	
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)
09/16/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND ☑COM □OTH □PTY □SCC		692.50			
09/29/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☑COM ☐OTH ☐PTY ☐SCC		692.50			
10/14/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		705.00			
10/29/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND □COM □OTH □PTY □SCC		702.50			
11/10/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC		712.50		-	
			SUBTOTAL	\$ 3,505,00			

*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA FORM

Statement covers period

from

07/01/15

				through12/	31/15	Page _		of	3	
NAME OF FILER						I.D. NU	MBER			
FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE							870153			
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 YI (JAN. 1 - DEC.	EAR		R ELECT TO DATE REQUIR		
11/24/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND COM OTH PTY SCC		711.50						
12/09/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND □COM □OTH □PTY □SCC		719.00						
12/23/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND □COM □OTH □PTY □SCC		728.00						
		□IND □COM □OTH □PTY □SCC								
		□IND □COM □OTH □PTY □SCC								
			SUBTOTAL \$	2,158.50						

*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.

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE

CODES: If one of the following codes accurately describes	the	payment, you may enter the code.	Otherwise,	describe the payment.
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR MTG OFC PET PHO POL POS	member communications meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting) print ads	RAD RFD SAL TEL TRO TRS TSF VOT	radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION	OF PAYMENT AMOUNT PAID	
MARGARET MIMS FOR SHERIFF FPPC# 1283613 504 VAN NESS AVE FRESNO, CA 93721	CONTRIBUTION	300.00	
PATTERSON FOR ASSEMBLY 2016 FPPC# 1374569 1127 11TH STREET, SUITE 310 SACRAMENTO, CA 95814	CONTRIBUTION	2,500.00	
PACHECO FOR SUPERVISOR 2018 FPPC# 1360246 PO BOX 12451 FRESNO, CA 93777	CONTRIBUTION	2,400.00	
* Payments that are contributions or independent expenditures must also be summarized on Schedule D. * SUBTOTA			

Recipient Committee Campaign Statement Cover Page			RECEIVED	CALIFORNIA 460 FORM
	Statement covers period from10/18/15	(Month, Day, Year)	JAN 2 5 2016 resno County Elections	For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through12/31/15		resilo oddity Liections	
1. Type of Recipient Committee: All Committee	es – Complete Parts 1, 2, 3, and 4.	2. Type of Statement:		
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)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 T Amendment (Explain b	ermination)	terly Statement ial Odd-Year Report
3. Committee Information	I.D. NUMBER 870153	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMIT	TEE)	NAME OF TREASURER		
FRESNO DEPUTY SHERIFF'S ASSOCIA POLITICAL ACTION COMMITTEE	ATION	ERIC SCHMIDT MAILING ADDRESS :		
STREET ADDRESS (NO P.O. BOX)		CITY FRESNO	STATE ZIP CO CA 9372	
CITY STATE	ZIP CODE AREA CODE/PHONE	NAME OF ASSISTANT TREASURE	R, IF ANY	
FRESNO CA MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.C.	93721 559-268-3372 D. BOX	ISAAC TORRES MAILING ADDRESS		
CITY STATE	ZIP CODE AREA CODE/PHONE	CITY FRESNO	STATE ZIP CO	
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRE		333-200-3372
4. Verification I have used all reasonable diligence in preparing and certify under penalty of perjury under the laws of the S Executed on	State of California that the foregoing By By Signature of By	of Controlling Officeholder, Candidate, State Measure Position of Controlling Officeholder, Candidate,	r roponent or Responsible Officer of Sponso State Measure Proponent	edules is true and complete. I
Executed onDate	Ву	Signature of Controlling Officeholder, Candidate,	State Measure Proponent	460 (low/2016)

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period **CALIFORNIA** 10/18/15 **FORM** from 12/31/15 through_ I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE 870153 Calendar Year Summary for Candidates Column B Column A CALENDAR YEAR TOTAL THIS PERIOD
(FROM ATTACHED SCHEDULES) **Contributions Received** Running in Both the State Primary and TOTAL TO DATE **General Elections** 18,073.00 3.573.50 1. Monetary Contributions...... Schedule A, Line 3 7/1 to Date 1/1 through 6/30 0 2. Loans Received Schedule B, Line 3 20. Contributions 18.072.00 3.573.50 SUBTOTAL CASH CONTRIBUTIONS...... Add Lines 1 + 2 \$ Received 0 21. Expenditures Nonmonetary Contributions...... Schedule C, Line 3 Made 18.072.00 3.573.50 TOTAL CONTRIBUTIONS RECEIVED......Add Lines 3 + 4 \$ **Expenditure Limit Summary for State Expenditures Made** 14.200.00 4,900.00 **Candidates** 6. Payments Made...... Schedule E, Line 4 \$ 7. Loans Made...... Schedule H, Line 3 22. Cumulative Expenditures Made* 4.900.00 14.200.00 (If Subject to Voluntary Expenditure Limit) SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7 \$ 9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 Total to Date Date of Election (mm/dd/yy) 10. Nonmonetary Adjustment...... Schedule C, Line 3 4,900.00 14.200.00 **Current Cash Statement** 29.347.60 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ To calculate Column B. 3,573.50 add amounts in Column 13. Cash Receipts Column A, Line 3 above A to the corresponding *Amounts in this section may be different from amounts 14. Miscellaneous Increases to Cash Schedule I, Line 4 amounts from Column B reported in Column B. 4.900.00 of your last report. Some 15. Cash Payments Column A, Line 8 above amounts in Column A may 28,021.10 be negative figures that 16. ENDING CASH BALANCEAdd Lines 12 + 13 + 14, then subtract Line 15 \$ should be subtracted from If this is a termination statement, Line 16 must be zero. previous period amounts. If this is the first report being filed for this calendar year. 17 I OAN GUARANTEES RECEIVED Schedule B, Part 2 \$ ____ only carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). 18. Cash Equivalents...... See instructions on reverse \$ _____ FPPC Form 460 (Jan/2016) 19. Outstanding Debts...... Add Line 2 + Line 9 in Column B above \$ ____ FPPC Advice: advice@fppc.ca.gov (866/275-3772)

www.fppc.ca.gov

Schedule Monetary	A Contributions Received		ts may be rounded whole dollars.	from	18/15	CALIF FO	RM +OC
SEE INSTRUCTIO	INS ON REVERSE			through12	/31/15	Page _	3 of 4
NAME OF FILER		· · · · · · · · · · · · · · · · · · ·		 		I.D. NUM	
FRESNO	DEPUTY SHERIFF'S ASSOCIATION POLITICAL AC	TION COMM	ITTEE			870153	
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)
10/29/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND □COM □OTH □PTY □SCC		702.50			
11/10/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND □OTH □PTY □SCC		712.50			
11/24/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	□IND □COM □OTH □PTY □SCC		711.50			
12/09/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☑COM ☐OTH ☐PTY ☐SCC		719.00			
12/23/15	FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE FPPC# 870153	☐IND ☐COM ☐OTH ☐PTY ☐SCC		728.00			
			SUBTOTAL \$	3,573.50			
Schedule	A Summary				(*Con	tributor Cod	des

1. Amount received this period – itemized monetary contributions. 3,573.50 (Include all Schedule A subtotals.)\$ _

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

3. Total monetary contributions received this period. 3,573.50 (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)......TOTAL \$ ___

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

through 12/31/15 Page 4 of 4 I.D. NUMBER 870153
the code. Otherwise, describe the payment. 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 TRS transfer between committees of the same candidate/sponse counting) VOT voter registration WEB information technology costs (internet, e-mail)
DESCRIPTION OF PAYMENT AMOUNT PAID
CONTRIBUTION 2,500.0
CONTRIBUTION 2,400.0
SUBTOTAL \$ 4,900.0
en a

1. Itemized payments made this period. (Include all Schedule E subtotals.) 2. Unitemized payments made this period of under \$100......\$ ___ 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)......\$

FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

4,900.00

4,900.00