Recipient Committee
Campaign Statement
Cover Page
(Government Code Sections 84200-84216.5)

SEE INSTRUCTIONS ON REVERSE

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 6)
   - [ ] 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:
   - [ ] Pre-election Statement
   - [ ] Semi-annual Statement
   - [ ] Termination Statement (Also file a Form 410 Termination)
   - [ ] Amendment (Explain below)
   - [ ] Quarterly Statement
   - [ ] Special Odd-Year Statement
   - [ ] Supplemental Pre-election Statement - Attach Form 495

3. Committee Information
   I.D. NUMBER 1287867
   COMMITTEE NAME: Chuck Della Sala for Mayor
   STREET ADDRESS (NO P.O. BOX): 799 Pacific Street
   CITY: Monterey
   STATE: CA
   ZIP CODE: 93940
   AREA CODE/PHONE: (831) 373-8451
   MAILING ADDRESS: (IF DIFFERENT) NO AND STREET OR P.O. BOX
   CITY: Monterey
   STATE: CA
   ZIP CODE: 93940
   AREA CODE/PHONE: (831) 373-8451

Treasurer(s)
NAME OF TREASURER: Michael A. Russo
MAILING ADDRESS: 273 Eldorado
CITY: Monterey
STATE: CA
ZIP CODE: 93940
AREA CODE/PHONE: (831) 644-9108
NAME OF ASSISTANT TREASURER, IF ANY:
MAILING ADDRESS:
CITY:
STATE:
ZIP CODE:
AREA CODE/PHONE:

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 10-4-08
By Michael A. Russo
Signature of Treasurer/Assistant Treasurer

Executed on 10-4-08
By Chuck Della Sala
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Director of Sponsor

Executed on __________
By __________________________
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on __________
By __________________________
Signature of Controlling Officeholder, Candidate, State Measure Proponent

FFPC Form 460 (January/06)
FFPC Toll-Free Helpline: 888/ASK-FFPC (888/276-3773)
State of California
5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
Chuck Della Sala (Charles Della Sala Jr.)

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
Mayor, City of Monterey

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)  CITY  STATE  ZIP
799 Pacific Street, Monterey, CA  93940

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?

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
### Contributions Received

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monetary Contributions</td>
<td>$8045.54</td>
<td>$8045.54</td>
</tr>
<tr>
<td>Loans Received</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>SUBTOTAL CASH CONTRIBUTIONS</td>
<td>$8045.54</td>
<td>$8045.54</td>
</tr>
<tr>
<td>Nonmonetary Contributions</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>TOTAL CONTRIBUTIONS RECEIVED</td>
<td>$8045.54</td>
<td>$8045.54</td>
</tr>
</tbody>
</table>

### Expenditures Made

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payments Made</td>
<td>$6,454.54</td>
<td>$6,454.54</td>
</tr>
<tr>
<td>Loans Made</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>SUBTOTAL CASH PAYMENTS</td>
<td>$6,454.54</td>
<td>$6,454.54</td>
</tr>
<tr>
<td>Accrued Expenses (Unpaid Bills)</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Nonmonetary Adjustment</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>TOTAL EXPENDITURES MADE</td>
<td>$6,454.54</td>
<td>$6,454.54</td>
</tr>
</tbody>
</table>

### Current Cash Statement

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginning Cash Balance</td>
<td>$4,414.82</td>
</tr>
<tr>
<td>Cash Receipts</td>
<td>$8,045.54</td>
</tr>
<tr>
<td>Miscellaneous Increases to Cash</td>
<td>$6,454.54</td>
</tr>
<tr>
<td>Cash Payments</td>
<td>$2,035.28</td>
</tr>
<tr>
<td>ENDING CASH BALANCE</td>
<td>$0</td>
</tr>
</tbody>
</table>

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

### Cash Equivalents and Outstanding Debts

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash Equivalents</td>
<td>$0</td>
</tr>
<tr>
<td>Outstanding Debts</td>
<td>$0</td>
</tr>
</tbody>
</table>

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).
### Schedule A

**Monetary Contributions Received**

**NAME OF FILER**: Chuck Bella Sala for Mayor  
**CITY CLERK’S OFFICE**

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
</table>
| 7/18/08       | Anna Apostrophe  
Monterey, CA 93940                                                                                 | IND             | Apartment Proprietor                                                              | $200.00                     | $200.00                                        |                                  |
| 7/28/08       | Conigli Family Trust  
Peter J. Conigli, TTEE  
Monterey, CA 93940  
Monterey, CA 93940 | IND             | Conigli Family Trust                                                              | $500.00                     | $500.00                                        |                                  |
| 8/4/08        | Richard Pagnillo  
Monterey, CA 93940                                                                                   | IND             | "none"                                                                            | $100.00                     | $100.00                                        |                                  |
| 8/24/08       | Salvatore J Rappa  
Monterey, CA 93940                                                                                 | IND             | "none"                                                                            | $100.00                     | $100.00                                        |                                  |

**SUBTOTAL**: $900.00

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**Schedule A Summary**

1. Amount received this period — itemized monetary contributions.  
   (Include all Schedule A subtotals.) ................................................................. $900.00

2. Amount received this period — unitemized monetary contributions of less than $100 ................................................................. $714.5

3. Total monetary contributions received this period.  
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ................................................................. TOTAL $8045.00

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*Contributor Codes
- IND — Individual
- COM — Recipient Committee
- 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 E**

**Payments Made**

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

**Statement covers period from** _July 1, 2008_ **through** _Sept. 30, 2008_  
**CALIFORNIA FORM 460**

**NAME OF FILER**

Chuck Della Sala For Mayor

**I.D. NUMBER**

1287887

**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 member communications  
- MTG meetings and appearances  
- OFC office expenses  
- PET petition circulating  
- PHO phone banks  
- POL polling and survey research  
- POS postage, delivery and messenger services  
- PRO professional services (legal, accounting)  
- PRT print ads  
- RAD radio airtime and production costs  
- RFD returned contributions  
- SAL campaign workers' salaries  
- TEL t.v. or cable airtime and production costs  
- TRC candidate travel, lodging, and meals  
- TRS staff/spouse travel, lodging, and meals  
- TSF transfer between committees of the same candidate/spONSor  
- VOT voter registration  
- WEB information technology costs (Internet, e-mail)

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Netgirl Enterprises Web Design 2467 S. Yakima Street Pahranagat, NV 89048</td>
<td>WEB</td>
<td></td>
<td>$295.25</td>
</tr>
<tr>
<td>Rapid Printers of Monterey 201 Foam Street Monterey, CA 93940</td>
<td>LIT</td>
<td></td>
<td>$582.37</td>
</tr>
<tr>
<td>Postmaster Monterey Post Office</td>
<td>POS</td>
<td></td>
<td>$210.75</td>
</tr>
</tbody>
</table>

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

**SUBTOTALS** $1087.37

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.) ................................................................. $6454.54
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 (d).) ................................................................. $0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ................................................................. TOTAL $6454.54

FPCC Form 460 (January/09)  
FPCC Toll-Free Helpline: 866/ASK-FPCC (866/275-3772)
Schedule E  
(Continuation Sheet)  
Payments Made

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER  
Chuck Della Sala for Mayor

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

<table>
<thead>
<tr>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPM</td>
<td>campaign paraphernalia/misc.</td>
</tr>
<tr>
<td>CSM</td>
<td>campaign consultants</td>
</tr>
<tr>
<td>CTB</td>
<td>contribution (explain nonmonetary)*</td>
</tr>
<tr>
<td>CVC</td>
<td>civic donations</td>
</tr>
<tr>
<td>PIL</td>
<td>candidate filing/ballot fees</td>
</tr>
<tr>
<td>FND</td>
<td>fundraising events</td>
</tr>
<tr>
<td>IND</td>
<td>independent expenditure supporting/opposing others (explain)*</td>
</tr>
<tr>
<td>LEG</td>
<td>legal defense</td>
</tr>
<tr>
<td>LT</td>
<td>campaign literature and mailings</td>
</tr>
<tr>
<td>MBR</td>
<td>member communications</td>
</tr>
<tr>
<td>MTG</td>
<td>meetings and appearances</td>
</tr>
<tr>
<td>OFC</td>
<td>office expenses</td>
</tr>
<tr>
<td>PET</td>
<td>petition circulating</td>
</tr>
<tr>
<td>PHO</td>
<td>phone banks</td>
</tr>
<tr>
<td>POL</td>
<td>polling and survey research</td>
</tr>
<tr>
<td>POS</td>
<td>postage, delivery and messenger services</td>
</tr>
<tr>
<td>PRO</td>
<td>professional services (legal, accounting)</td>
</tr>
<tr>
<td>PRT</td>
<td>print ads</td>
</tr>
<tr>
<td>RAD</td>
<td>radio airtime and production costs</td>
</tr>
<tr>
<td>RFD</td>
<td>returned contributions</td>
</tr>
<tr>
<td>SAL</td>
<td>campaign workers' salaries</td>
</tr>
<tr>
<td>TEL</td>
<td>l.v. or cable airtime and production costs</td>
</tr>
<tr>
<td>TRC</td>
<td>candidate travel, lodging, and meals</td>
</tr>
<tr>
<td>TRS</td>
<td>staff/spouse travel, lodging, and meals</td>
</tr>
<tr>
<td>TSP</td>
<td>transfer between committees of the same candidate/sponsor</td>
</tr>
<tr>
<td>VOT</td>
<td>voter registration</td>
</tr>
<tr>
<td>WEB</td>
<td>information technology costs (internet, e-mail)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Voter Information Guide  408 13701 Riverside Dr. Ste. 604</td>
<td>LIT</td>
<td></td>
<td>$550.76</td>
</tr>
<tr>
<td>Shermans Oaks, CA 91423</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Citizens For Good Government 728 W. Edna Place</td>
<td>LIT</td>
<td></td>
<td>$140.76</td>
</tr>
<tr>
<td>Covina, CA 91722</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>California Voter Guide 1954 W. Carson Street, Suite B</td>
<td>LIT</td>
<td></td>
<td>$850.76</td>
</tr>
<tr>
<td>Torrance, CA 90501</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Democratic Voters Guide 728 W. Edna Place</td>
<td>LIT</td>
<td></td>
<td>$230.76</td>
</tr>
<tr>
<td>Covina, CA 91722</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aason Thomas Assc., Inc. 9260 Owensmouth Avenue</td>
<td>LIT</td>
<td></td>
<td>$3,597.76</td>
</tr>
<tr>
<td>Chatsworth, CA 91311</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

SUBTOTAL $5,367.76

FPPC Form 460 (January/06)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)