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

STATEMENT COVERS PERIOD

from July 1, 2010

through December 31, 2010

TYPE OF RECIPIENT COMMITTEE:

☐ 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)

TYPE OF STATEMENT:

☐ Preelection Statement

☐ Semi-annual Statement

☐ Termination Statement
    (Also file a Form 410 Termination)

☐ Amendment (Explain below)

TREASURER(S):

NAME OF TREASURER

Michael A. Russo

MAILING ADDRESS

276 E. Dona

Montara, CA 94037

(831) 373-8484

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

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 1/24/11

By ________________________________

Signature of Treasurer or Assistant Treasurer

Executed on 1/24/11

By ________________________________

Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on __________________________

By ________________________________

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on __________________________

By ________________________________

Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
State of California
5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
Charles Sala

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

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
794 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? 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

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPOINENT

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

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

Attach continuation sheets if necessary
**Contributions Received**

<table>
<thead>
<tr>
<th></th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Monetary Contributions</td>
<td>$\text{\textit{Schedule A, Line 3}}$</td>
<td>$\text{\textit{Column C, Line 3}}$</td>
</tr>
<tr>
<td>2. Loans Received</td>
<td>$\text{\textit{Schedule B, Line 3}}$</td>
<td>$\text{\textit{Column C, Line 3}}$</td>
</tr>
<tr>
<td>3. SUBTOTAL CASH CONTRIBUTIONS</td>
<td>$\text{\textit{Add Lines 1 + 2}}$</td>
<td>$\text{\textit{Column C, Line 3}}$</td>
</tr>
<tr>
<td>4. Nonmonetary Contributions</td>
<td>$\text{\textit{Schedule C, Line 3}}$</td>
<td>$\text{\textit{Column C, Line 3}}$</td>
</tr>
<tr>
<td>5. TOTAL CONTRIBUTIONS RECEIVED</td>
<td>$\text{\textit{Add Lines 3 + 4}}$</td>
<td>$\text{\textit{Column C, Line 3}}$</td>
</tr>
</tbody>
</table>

**Expenditures Made**

<table>
<thead>
<tr>
<th></th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Payments Made</td>
<td>$\text{\textit{Schedule E, Line 4}}$</td>
<td>$\text{\textit{Column C, Line 3}}$</td>
</tr>
<tr>
<td>7. Loans Made</td>
<td>$\text{\textit{Schedule H, Line 3}}$</td>
<td>$\text{\textit{Column C, Line 3}}$</td>
</tr>
<tr>
<td>8. SUBTOTAL CASH PAYMENTS</td>
<td>$\text{\textit{Add Lines 6 + 7}}$</td>
<td>$\text{\textit{Column C, Line 3}}$</td>
</tr>
<tr>
<td>9. Accrued Expenses (Unpaid Bills)</td>
<td>$\text{\textit{Schedule F, Line 3}}$</td>
<td>$\text{\textit{Column C, Line 3}}$</td>
</tr>
<tr>
<td>10. Nonmonetary Adjustment</td>
<td>$\text{\textit{Schedule C, Line 3}}$</td>
<td>$\text{\textit{Column C, Line 3}}$</td>
</tr>
<tr>
<td>11. TOTAL EXPENDITURES MADE</td>
<td>$\text{\textit{Add Lines 8 + 9 + 10}}$</td>
<td>$\text{\textit{Column C, Line 3}}$</td>
</tr>
</tbody>
</table>

**Current Cash Statement**

<table>
<thead>
<tr>
<th></th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>12. Beginning Cash Balance</td>
<td>$\text{\textit{Previous Summary Page, Line 16}}$</td>
<td>$\text{\textit{Column C, Line 3}}$</td>
</tr>
<tr>
<td>13. Cash Receipts</td>
<td>$\text{\textit{Column A, Line 3 above}}$</td>
<td>$\text{\textit{Column C, Line 3}}$</td>
</tr>
<tr>
<td>14. Miscellaneous Increases to Cash</td>
<td>$\text{\textit{Schedule I, Line 4}}$</td>
<td>$\text{\textit{Column C, Line 3}}$</td>
</tr>
<tr>
<td>15. Cash Payments</td>
<td>$\text{\textit{Column A, Line 8 above}}$</td>
<td>$\text{\textit{Column C, Line 3}}$</td>
</tr>
<tr>
<td>16. ENDING CASH BALANCE</td>
<td>$\text{\textit{Add Lines 12 + 13 + 14, then subtract Line 15}}$</td>
<td>$\text{\textit{Column C, Line 3}}$</td>
</tr>
</tbody>
</table>

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

**Cash Equivalents and Outstanding Debts**

<table>
<thead>
<tr>
<th></th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>18. Cash Equivalents</td>
<td>$\text{\textit{See instructions on reverse}}$</td>
<td>$\text{\textit{Column C, Line 3}}$</td>
</tr>
<tr>
<td>19. Outstanding Debts</td>
<td>$\text{\textit{Add Line 2 + Line 9 in Column B above}}$</td>
<td>$\text{\textit{Column C, Line 3}}$</td>
</tr>
</tbody>
</table>