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
   - Ballot Measure Committee
     - Primarily Formed
     - Controlled
     - Sponsored
     (Also Complete Part 6)
   - Primarily Formed Candidate/
     Officeholder Committee
     (Also Complete Part 7)

2. Type of Statement:
   - Prelection Statement
   - Semi-annual Statement
   - Termination Statement
   - Amendment (Explain below)
   - Quarterly Statement
   - Special Odd-Year Report
   - Supplemental Prelection Statement - Attach Form 495

3. Committee Information
   I.D. NUMBER 1267578

   COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
   Committee to Elect Libby Downey

   STREET ADDRESS (NO P.O. BOX)
   877 Pacific Street

   CITY
   Monterey

   STATE
   CA

   ZIP CODE
   93940

   AREA CODE/PHONE
   831 372 7348

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 08-01-2011
   By
   Signature of Treasurer

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

   By
   Signature of Controlling Officerholder, Candidate, State Measure Proponent

   By
   Signature of Controlling Officerholder, Candidate, State Measure Proponent

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
State of California
5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

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

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

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. 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 PROponent

OFFICE SOUGHT OR HELD DISTRICT NO. IF ANY

7. Primarily Formed 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

Libby Downey City Council, Monterey

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

Attachment sheets if necessary
## Contributions Received

<table>
<thead>
<tr>
<th>Contributions Received</th>
<th>Column A (TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)</th>
<th>Column B (CALENDAR YEAR TOTAL TO DATE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monetary Contributions</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Loans Received</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>SUBTOTAL CASH CONTRIBUTIONS</td>
<td>Add Lines 1 + 2 $</td>
<td>$</td>
</tr>
<tr>
<td>Nonmonetary Contributions</td>
<td>Schedule C, Line 3 $</td>
<td>$</td>
</tr>
<tr>
<td>TOTAL CONTRIBUTIONS RECEIVED</td>
<td>Add Lines 3 + 4 $</td>
<td>$</td>
</tr>
</tbody>
</table>

## Expenditures Made

<table>
<thead>
<tr>
<th>Expenditures Made</th>
<th>Column A (TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)</th>
<th>Column B (CALENDAR YEAR TOTAL TO DATE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payments Made</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Loans Made</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>SUBTOTAL CASH PAYMENTS</td>
<td>Add Lines 6 + 7 $</td>
<td>$</td>
</tr>
<tr>
<td>Accrued Expenses (Unpaid Bills)</td>
<td>Schedule F, Line 3 $</td>
<td>$</td>
</tr>
<tr>
<td>Nonmonetary Adjustment</td>
<td>Schedule C, Line 3 $</td>
<td>$</td>
</tr>
<tr>
<td>TOTAL EXPENDITURES MADE</td>
<td>Add Lines 8 + 9 + 10 $</td>
<td>$</td>
</tr>
</tbody>
</table>

## Current Cash Statement

<table>
<thead>
<tr>
<th>Current Cash Statement</th>
<th>Previous Summary Page, Line 16 $ 353.18</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginning Cash Balance</td>
<td>$</td>
</tr>
<tr>
<td>Cash Receipts</td>
<td>Column A, Line 3 above $</td>
</tr>
<tr>
<td>Miscellaneous Increases to Cash</td>
<td>Schedule I, Line 4 $</td>
</tr>
<tr>
<td>Cash Payments</td>
<td>Column A, Line 8 above $</td>
</tr>
<tr>
<td>ENDING CASH BALANCE</td>
<td>Add Lines 12 + 13 + 14, then subtract Line 15 $ 353.18</td>
</tr>
</tbody>
</table>

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

## Cash Equivalents and Outstanding Debts

<table>
<thead>
<tr>
<th>Cash Equivalents and Outstanding Debts</th>
<th>Column A (TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)</th>
<th>Column B (CALENDAR YEAR TOTAL TO DATE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash Equivalents</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Outstanding Debts</td>
<td>Add Line 2 + Line 9 in Column B above $ 300.</td>
<td>$</td>
</tr>
</tbody>
</table>

## Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

<table>
<thead>
<tr>
<th>Calendar Year Summary for Candidates Running in Both the State Primary and General Elections</th>
<th>Column A (TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)</th>
<th>Column B (CALENDAR YEAR TOTAL TO DATE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/1 through 6/30 $ / / 2011</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>7/1 to Date $ / / 2011</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

## Expenditure Limit Summary for State Candidates

<table>
<thead>
<tr>
<th>Expenditure Limit Summary for State Candidates</th>
<th>Date of Election (mm/dd/yy)</th>
<th>Total to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>22. Cumulative Expenditures Made*</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

Additional notes:
- 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).
- If this is a termination statement, Line 16 must be zero.

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FPSC Toll-Free Helpline: 866/ASK-FPPC