Statement covers period from 10/01/12 through 10/20/12.

Date of election if applicable: 11/06/12

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.
   - officeholder, candidate controlled committee [✓]
   - state candidate election committee
   - recall
   - sincerely formed ballot measure committee
   - controlled
   - sponsored
   - general purpose committee
   - sponsored
   - Small contributor committee
   - political party/central committee
   - sincerely formed candidate/officer holder committee

2. 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
578 Houston Street
CITY: Monterey, STATE: CA, ZIP CODE: 93940
NAME OF ASSISTANT TREASURER, IF ANY
MAILING ADDRESS
CITY: Monterey, STATE: CA, ZIP CODE: 93940

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 10-23-12
By Michael A. Russo
Signature of treasurer or assistant treasurer

Executed on 10-23-12
By [Signature]
Signature of controlling officeholder, candidate, state measure proponent or responsible officer of sponsor

Executed on [Date]
By [Signature]
Signature of controlling officeholder, candidate, state measure proponent
5. Officeholder or Candidate Controlled Committee

**NAME OF OFFICER/ Holder OR CANDIDATE**
Charles Della Sala, Jr.

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

<table>
<thead>
<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
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<table>
<thead>
<tr>
<th>NAME OF TREASURER</th>
<th>CONTROLLED COMMITTEE?</th>
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<tbody>
<tr>
<td></td>
<td>□ YES □ NO</td>
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<table>
<thead>
<tr>
<th>COMMITTEE ADDRESS</th>
<th>STREET ADDRESS (NO P.O. BOX)</th>
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<tr>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
<th>AREA CODE/PHONE</th>
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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 OFFICER/ Holder, 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.

<table>
<thead>
<tr>
<th>NAME OF OFFICER/ Holder OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
<th>□ SUPPORT □ OPPOSE</th>
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<th>OFFICE SOUGHT OR HELD</th>
<th>□ SUPPORT □ OPPOSE</th>
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**Attach continuation sheets if necessary**

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
State of California
### Contributions Received

1. Monetary Contributions .................................. Schedule A, Line 3 $ 500.00 $ 500
2. Loans Received .............................................. Schedule B, Line 7 0 0
3. SUBTOTAL CASH CONTRIBUTIONS ..................... Add Lines 1 + 2 $ 500.00 $ 500
4. Nonmonetary Contributions ................................ Schedule C, Line 3 0 0
5. TOTAL CONTRIBUTIONS RECEIVED ..................... Add Lines 3 + 4 $ 500.00 $ 500

### Expenditures Made

6. Payments Made ............................................ Schedule E, Line 4 0 $ 187.50
7. Loans Made .................................................. Schedule H, Line 7 0 0
8. SUBTOTAL CASH PAYMENTS .............................. Add Lines 5 + 7 0 $ 187.50
9. Accrued Expenses (Unpaid Bills) ......................... Schedule F, Line 3 0 0
10. Nonmonetary Adjustment .................................. Schedule C, Line 3 0 0
11. TOTAL EXPENDITURES MADE ............................. Add Lines 6 + 8 + 9 + 10 0 $ 187.50

### Current Cash Statement

12. Beginning Cash Balance .................................. Previous Summary Page, Line 16 $ 1,191.95
13. Cash Receipts .............................................. Column A, Line 3 above 500 0
14. Miscellaneous Increases to Cash ......................... Schedule I, Line 4 0 0
15. Cash Payments ............................................. Column A, Line 8 above 0 0
16. ENDING CASH BALANCE ................................. Add Lines 12 + 13 + 14, then subtract Line 15 $ 1,691.95

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

17. LOAN GUARANTEES RECEIVED ......................... Schedule B, Part 2 0 0

### Cash Equivalents and Outstanding Debts

18. Cash Equivalents ........................................... See instructions on reverse 0 0
19. Outstanding Debts ......................................... Add Line 2 + Line 9 in Column B above 0 0

### 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 $ 0
21. Expenditures Made $ 0

### Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made*

<table>
<thead>
<tr>
<th>Date of Election (mm/dd/yy)</th>
<th>Total to Date</th>
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<tr>
<td>/ / /</td>
<td>$ 0</td>
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*Amounts in this section may be different from amounts reported in Column B.

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).

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
### Schedule A
#### Monetary Contributions Received

**NAME OF FILER**

Chuck Della Sala for Mayor

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR</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>
<tbody>
<tr>
<td>10/17/12</td>
<td>PG&amp;E Corporation, 77 Beale Street, San Francisco, CA 94105</td>
<td>☑️OTH</td>
<td>☑️COM</td>
<td>500.</td>
<td>500</td>
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**SUBTOTAL $ 500.**

### Schedule A Summary

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) $ 500.

2. Amount received this period – unitemized monetary contributions of less than $100 $ 0

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) TOTAL $ 500.
Schedule E
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.

- CWP: campaign paraphernalia/misc.
- CNS: campaign consultants
- CTB: contribution (explain nonmonetary)*
- CVC: civic donations
- FIL: candidate filing/ballot fees
- IND: fundraising events
- IND: independent expenditure supporting/opposing other (explain)*
- LEG: legal defense
- LIT: campaign literature and mailings
- MBR: member communications
- MTG: meetings and appearances
- OFC: office expenses
- PET: petition circulating
- PFO: 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
- GAL: 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)

NAME AND ADDRESS OF PAYEE
(IF COMMITTEE, ALSO ENTER I.D. NUMBER)

<table>
<thead>
<tr>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
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</table>

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

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) .................................................. $ 0
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 on the Summary Page, Column A, Line 6.) TOTAL $ 0

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