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 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

2. Type of Statement:
   - Preelection Statement
   - Semi-annual Statement
   - Termination Statement (Also file a Form 410 Termination)
   - Amendment (Explain below)

3. Committee Information
   - ID NUMBER: 1346143
   - Committee Name (or Candidate's Name if No Committee):

   ED SMITH FOR MONTEREY CITY COUNCIL

   CITY:
   MONTEREY

   STATE:
   CA

   ZIP CODE:
   93940

   Mailing Address:
   [Redacted]

   CITY:
   [Redacted]

   STATE:
   [Redacted]

   ZIP CODE:
   [Redacted]

   Optional: FAX / E-MAIL ADDRESS

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 2-2-15
   Date

   Executed on 1-30-15
   Date

Treasurer(s)

   NAME OF TREASURER:
   MIKE RUSSO

   MAILING ADDRESS:
   [Redacted]

   CITY:
   [Redacted]

   STATE:
   [Redacted]

   ZIP CODE:
   93940

   Area Code/Phone:
   [Redacted]

   NAME OF ASSISTANT TREASURER, IF ANY:
   NAME:
   NO

   MAILING ADDRESS:

   CITY:

   STATE:

   ZIP CODE:

   Area Code/Phone:

   Optional: FAX / E-MAIL ADDRESS

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

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>ED SMITH</th>
</tr>
</thead>
<tbody>
<tr>
<td>OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)</td>
<td>MONTEREY CITY COUNCIL</td>
</tr>
<tr>
<td>RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)</td>
<td>Monterey, CA 93940</td>
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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>MIKE RUSO</th>
</tr>
</thead>
<tbody>
<tr>
<td>I.D. NUMBER</td>
<td>346143</td>
</tr>
<tr>
<td>NAME OF TREASURER</td>
<td></td>
</tr>
<tr>
<td>COMMITTEE ADDRESS</td>
<td></td>
</tr>
<tr>
<td>CITY</td>
<td>MONTEREY</td>
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<tr>
<td>STATE</td>
<td>CA</td>
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<tr>
<td>ZIP CODE</td>
<td>93940</td>
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</table>

6. Primarily Formed Ballot Measure Committee

<table>
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<tr>
<th>NAME OF BALLOT MEASURE</th>
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<tbody>
<tr>
<td>BALLOT NO. OR LETTER</td>
</tr>
<tr>
<td>JURISDICTION</td>
</tr>
<tr>
<td>SUPPORT</td>
</tr>
<tr>
<td>OPPOSE</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT</th>
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<tbody>
<tr>
<td>OFFICE SOUGHT OR HELD</td>
</tr>
<tr>
<td>DISTRICT NO. IF ANY</td>
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</table>

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 OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
<th>SUPPORT</th>
<th>OPPOSE</th>
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</thead>
<tbody>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
<td>SUPPORT</td>
<td>OPPOSE</td>
</tr>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
<td>SUPPORT</td>
<td>OPPOSE</td>
</tr>
</tbody>
</table>

Committee Name

| COMMITTEE NAME | |
|----------------| |
| I.D. NUMBER | |
| NAME OF TREASURER | |
| COMMITTEE ADDRESS | |
| CITY | |
| STATE | |
| ZIP CODE | |
| AREA CODE/PHONE | |

Attach continuation sheets if necessary
### Contributions Received

1. Monetary Contributions ........................................ Schedule A, Line 3 $2,895.00 $22,301.00
2. Loans Received ....................................................... Schedule B, Line 3 2,500.00
3. SUBTOTAL CASH CONTRIBUTIONS .......................... Add Lines 1 + 2 $5,395.00 $24,801.00
4. Nonmonetary Contributions .................................. Schedule C, Line 3
5. TOTAL CONTRIBUTIONS RECEIVED ......................... Add Lines 3 + 4 $5,395.00 $24,916.25

### Expenditures Made

6. Payments Made ....................................................... Schedule E, Line 4 9,494.00 $25,529.19
7. Loans Made ........................................................... Schedule H, Line 3 0
8. SUBTOTAL CASH PAYMENTS .................................. Add Lines 6 + 7 $9,494.00 $25,529.19
9. Accrued Expenses (Unpaid Bills) ......................... Schedule F, Line 3 $5,002.00 $5,002.00
10. Nonmonetary Adjustment ....................................... Schedule C, Line 3
11. TOTAL EXPENDITURES MADE ................................. Add Lines 8 + 9 + 10 $14,496.00 $30,531.19

### Current Cash Statement

12. Beginning Cash Balance ....................................... Previous Summary Page, Line 16 $3,470.81
13. Cash Receipts ....................................................... Column A, Line 3 above $5,395.00
14. Miscellaneous Increases to Cash ................................ Schedule I, Line 4 0
15. Cash Payments ....................................................... Column A, Line 8 above 9,494.00
16. ENDING CASH BALANCE ....................................... Add Lines 12 + 13 + 14, then subtract Line 15 $628.19

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).

### Cash Equivalents and Outstanding Debts

18. Cash Equivalents ................................................... See instructions on reverse $0
19. Outstanding Debts .................................................. Add Line 2 + Line 9 in Column B above $7,502.00

---

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

<table>
<thead>
<tr>
<th>Date</th>
<th>Amount Received</th>
<th>Amount Made</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/1 through 6/30</td>
<td>$25,529.19</td>
<td>$30,531.19</td>
</tr>
</tbody>
</table>

**Expenditure Limit Summary for State Candidates**

**Cumulative Expenditures Made** *(If Subject to Voluntary Expenditure Limit)*

<table>
<thead>
<tr>
<th>Date of Election (mm/dd/yy)</th>
<th>Total to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/1</td>
<td>$</td>
</tr>
</tbody>
</table>

*Amounts in this section may be different from amounts reported in Column B.

---

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

**NAME OF FILER**
EA Smith for Monterey City Council

**I.D. NUMBER**
1346143

**Statement covers period**
from 10/19/14 through 12/31/14

<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>10/19/14</td>
<td>Monterey Penn, Engineering 192 Hwy 17 Ave Marina, CA 93933</td>
<td>OTH</td>
<td></td>
<td>250.00</td>
<td>250.00</td>
<td></td>
</tr>
<tr>
<td>10/19/14</td>
<td>Haish &amp; Sons 25 Fisherman's Wharf Monterey, CA 93940</td>
<td>OTH</td>
<td></td>
<td>550.00</td>
<td>550.00</td>
<td></td>
</tr>
<tr>
<td>10/22/14</td>
<td>Monterey County Republican Party 1098 Del Monte Ave Monterey, CA 93940</td>
<td>OTH</td>
<td></td>
<td>1000.00</td>
<td>2000.00</td>
<td></td>
</tr>
<tr>
<td>10/23/14</td>
<td>Eva Trojed 15 Fisherman's Wharf Monterey, CA 93940</td>
<td>OTH, PTY</td>
<td>Retail Manager</td>
<td>100.00</td>
<td>100.00</td>
<td></td>
</tr>
<tr>
<td>10/23/14</td>
<td>Joe Anastasia Monterey, CA 93940</td>
<td>OTH</td>
<td>Business owner</td>
<td>200.00</td>
<td>200.00</td>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTAL** $2,100.00

### Schedule A Summary

1. Amount received this period — Itemized monetary contributions.
   (Include all Schedule A subtotals.) ........................................... $2,900.00
2. Amount received this period — Unitemized monetary contributions of less than $100 ........................................... $495.00
3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ........................................... TOTAL $2,895.00

*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)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
<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>10/23/14</td>
<td>Dockside Market 15 Fisherman's Wharf Monterey, CA 93940</td>
<td>IND</td>
<td>Business Owner Fisherman</td>
<td>100.00</td>
<td>100.00</td>
<td></td>
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<tr>
<td>11/11/14</td>
<td>Michael Al Bou</td>
<td>IND</td>
<td>Attorney</td>
<td>100.00</td>
<td>100.00</td>
<td></td>
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</tbody>
</table>

**Subtotal:** $300.00

*Contributor Codes*  
IND - Individual  
COM - Recipient Committee  
OTH - Other (e.g., business entity)  
PTY - Political Party  
SCC - Small Contributor Committee
Schedule B – Part 1
Loans Received

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ed Smith
For Monterey City Council

I.D. NUMBER
1346143

FULL NAME, STREET ADDRESS AND ZIP CODE
Ed Smith
Monterey, CA 93940

OF LENDER

IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER
Small Business Owners

IF SELF-EMPLOYED, ENTER NAME OF BUSINESS

OUTSTANDING BALANCE BEGINNING THIS PERIOD
$2,500

(a) AMOUNT RECEIVED THIS PERIOD
$2,200

(c) AMOUNT PAID OR FORGIVEN THIS PERIOD
$300

(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
$6,118

(e) INTEREST PAID THIS PERIOD
10%

(f) ORIGINAL AMOUNT OF LOAN
$2,500

(g) CUMULATIVE CONTRIBUTIONS TO DATE
$2,500

SUBTOTALS

Schedule B Summary

1. Loans received this period

(Total Column (b) plus unitemized loans of less than $100.)

$2,500.00

2. Loans paid or forgiven this period

(Total Column (c) plus loans under $100 paid or forgiven.
(Includes loans paid by a third party that are also itemized on Schedule A.)

$300.00

3. Net change this period. (Subtract Line 2 from Line 1.)

NET $2,200.00

(May be a negative number)

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.

†Contributor Codes
IND — Individual
COM — Receipt Committee
(Other than PTY or SCC)
OTH — Other (e.g., business entity)
PTY — Political Party
SCC — Small Contributor Committee
### Schedule B - Part 2

**Loan Guarantors**

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

<table>
<thead>
<tr>
<th>Full Name, Street Address and Zip Code of Guarantor (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>Loan</th>
<th>Amount Guaranteed This Period</th>
<th>Cumulative To Date</th>
<th>Balance Outstanding To Date</th>
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</thead>
<tbody>
<tr>
<td>□ IND</td>
<td>□ COM</td>
<td>□ OTH</td>
<td>□ PTY</td>
<td>□ SCC</td>
<td>LENDER</td>
<td>$ __________</td>
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<tr>
<td>□ IND</td>
<td>□ COM</td>
<td>□ OTH</td>
<td>□ PTY</td>
<td>□ SCC</td>
<td>DATE</td>
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<td>□ IND</td>
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<td>□ IND</td>
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<td>□ PTY</td>
<td>□ SCC</td>
<td>DATE</td>
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</tbody>
</table>

**SUBTOTAL $**
# Schedule C
## Nonmonetary Contributions Received

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

<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 (Self-Employed, Enter Name of Business)</th>
<th>Description of Goods or Services</th>
<th>Amount/Fair Market Value</th>
<th>Cumulative to Date Calendar Year (Jan 1 - Dec 31)</th>
<th>Per Election to Date (If Required)</th>
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</thead>
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<td>SCC</td>
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</tr>
</tbody>
</table>

Attach additional information on appropriately labeled continuation sheets.

### Subtotal $ 

### Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions.  
   (Include all Schedule C subtotals.)  .................................................. $ 

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

3. Total nonmonetary contributions received this period.  
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)  .................................. TOTAL $ 

*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 D Summary

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) ........................................... $ 

2. Unitemized contributions and independent expenditures made this period of under $100 .................................................. $ 

3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) .......... TOTAL $ 0
# Schedule E
## Payments Made

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

### Statement covers period
- from: 10/1/14
- through: 12/31/14

### Name of Filer
Ed Smith for Monterey City Council

### Codes
- CMP campaign paraphernalia/misc.
- CNO 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
- LT 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 or Description of Payment</th>
<th>Amount Paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>429 Alvarado St, Monterey, CA 93940</td>
<td>PRO Bank Fees</td>
<td>135.00</td>
</tr>
<tr>
<td>Facebook Advertising, 1601 Willow Rd, P.O. Box 271, Monterey, CA 93942</td>
<td>WEB Campaign Ads</td>
<td>700.00</td>
</tr>
<tr>
<td>Monterey Herald, P.O. Box 271, Monterey, CA 93942</td>
<td>PRT Newspaper Ads &amp; Barrier Ads on Website for Herald</td>
<td>3,288.00</td>
</tr>
</tbody>
</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.) $ 9,304.00
2. Unitemized payments made this period of under $100 $ 190.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) $ 0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) TOTAL $ 9,494.00
### Schedule E (Continuation Sheet) Payments Made

**NAME OF FILER:**

**NAME AND ADDRESS OF PAYEE:**

<table>
<thead>
<tr>
<th>Payee Name</th>
<th>Code</th>
<th>Description of Payment</th>
<th>Amount Paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guajardo Printers</td>
<td>LIT</td>
<td>Campaign Mailing</td>
<td>$6,651.00</td>
</tr>
<tr>
<td>Vista Print</td>
<td>LIT</td>
<td>Campaign Door Hangers</td>
<td>$289.00</td>
</tr>
<tr>
<td>Monterey County Weekly</td>
<td>LIT</td>
<td>Newspaper Ads</td>
<td>$1103.00</td>
</tr>
<tr>
<td>Carmel Pine Cone Newspaper</td>
<td>LIT</td>
<td>Newspaper Ads</td>
<td>$500.00</td>
</tr>
<tr>
<td>Pacific Grove Post Office</td>
<td>POS</td>
<td>Stamps</td>
<td>$110.00</td>
</tr>
</tbody>
</table>

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

**SCHEDULE E (CONT.)**

- **CALIFORNIA FORM 460**
- **Page 61 of 16**
- **I.D. NUMBER:** 1346143
- **Statement covers period from 10/1/14 through 12/31/14**

---

**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</th>
</tr>
</thead>
<tbody>
<tr>
<td>CMP</td>
<td>Campaign paraphernalia/misc.</td>
</tr>
<tr>
<td>CNS</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>FIL</td>
<td>Candidate filing/ballot fees</td>
</tr>
<tr>
<td>FND</td>
<td>Fundraising events</td>
</tr>
<tr>
<td>ND</td>
<td>Independent expenditure supporting/opposing others (explain)*</td>
</tr>
<tr>
<td>LEG</td>
<td>Legal defense</td>
</tr>
<tr>
<td>LIT</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>T.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>TSF</td>
<td>Transfer between committees of the same candidate/spouse</td>
</tr>
<tr>
<td>WEB</td>
<td>Information technology costs (internet, e-mail)</td>
</tr>
</tbody>
</table>

---

*FPPC Form 460 (January/05)*

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER ID. NUMBER)</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jeremy Blanc, Calle Principal, Monterey, CA 93940</td>
<td>SAL</td>
<td>Assistance with Door Hangers Delivery</td>
<td>$80.00</td>
</tr>
</tbody>
</table>

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

SUBTOTAL $80.00
**Schedule F**  
**Accrued Expenses (Unpaid Bills)**

**NAME OF FILER**: Ed Smith for Monterey City Council

**NAME AND ADDRESS OF CREDITOR**

<table>
<thead>
<tr>
<th>CREDITOR</th>
<th>CODE OR DESCRIPTION OF PAYMENT</th>
<th>(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD</th>
<th>(b) AMOUNT INCURRED THIS PERIOD</th>
<th>(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON D)</th>
<th>(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Carmel Pine Code 934 Lighthouse Ave Pacific Grove, CA 93950</td>
<td>PRT</td>
<td>100.00</td>
<td>500.00</td>
<td>500.00</td>
<td></td>
</tr>
<tr>
<td>Political Data Inc. PO Box 59570 Norwalk, CA 90652</td>
<td>LIT</td>
<td>500.00</td>
<td>0.00</td>
<td>500.00</td>
<td></td>
</tr>
<tr>
<td>Capital Consulting PO Box 22347 Carmel, CA 93922</td>
<td>CNS</td>
<td>4,000.00</td>
<td></td>
<td>4,000.00</td>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTALS**:  
$1,502.00 $500.00 $100.00

**Schedule F Summary**

1. **Total accrued expenses incurred this period.** (Include all Schedule F, Column (b) subtotals for accrued expenses of $100 or more, plus total unitemized accrued expenses under $100.)

2. **Total accrued expenses paid this period.** (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of $100 or more, plus total unitemized payments on accrued expenses under $100.)

3. **Net change this period.** (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)

**INCURRED TOTALS $**: 5,502.00

**PAID TOTALS $**: 500.00

**NET $**: 5,002.00

---

*Payments that are contributions or independent expenditures must also be summarized on Schedule D.*
### Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

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

**Statement covers period**
- **from** 10/1/14
- **through** 12/31/14

**NAME OF FILER**

**NAME OF AGENT OR INDEPENDENT CONTRACTOR**

**I.D. NUMBER**

**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
- LT: 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
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- 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)

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

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE OR CREDITOR (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></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Attach additional information on appropriately labeled continuation sheets.

*Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.*

TOTAL* $
## Schedule H
### Loans Made to Others*

<table>
<thead>
<tr>
<th>Full Name, Street Address and Zip Code of Recipient (If Committee, also Enter I.D. Number)</th>
<th>If an Individual, Enter Occupation and Employer (If Self-Employed, Enter Name of Business)</th>
<th>Outstanding Balance Beginning This Period</th>
<th>Amount Loaned This Period</th>
<th>Repayment or Forgiveness This Period*</th>
<th>Outstanding Balance at Close of This Period</th>
<th>Interest Received</th>
<th>Original Amount of Loan</th>
<th>Cumulative Loans to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>$</td>
<td>$</td>
<td></td>
<td>$</td>
<td>$</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.

| SUBTOTALS | $ | $ | $ |
|---|---|---|

### Schedule H Summary

1. Loans made this period: \( \text{(Total Column (b) plus unitemized loans of less than $100.)} \) \( \text{
   $} \)

2. Payments received on loans: \( \text{(Total Column (c) plus unitemized payments of less than $100.)} \) \( \text{
   $} \)

3. Net change this period. \( \text{(Subtract Line 2 from Line 1.)} \) \( \text{NET $} \)
   \( \text{(May be a negative number)} \)

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