Recipient Committee Campaign Statement Cover Page

Statement covers period from 11/1/15 through 12/31/15

Date of election if applicable: 11/4/14

Type of Recipient Committee: Primarily Formed Candidate/Officeholder Committee

Type of Statement: Semi-annual Statement

Committee Information

COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE)

ED SMITH FOR MONTEREY CITY COUNCIL

I.D. NUMBER 1346413

Treasurer(s)

NAME OF TREASURER

MIKE RIES

MAILING ADDRESS

MONTEREY, CA 93940 (831)

CITY

MONTEREY

STATE

CA

ZIP CODE

93940

AREA CODE/PHONE

(831)

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY

STATE

ZIP CODE

AREA CODE/PHONE

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 1-1-2016

By Signature of Treasurer or Assistant Treasurer

Executed on

By Signature of Controlling 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 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE: ED SMITH

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE):
MONTEREY CITY COUNCIL

RESIDENTIAL/BUSINESS ADDRESS (NO AND 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: ED SMITH FOR MONTEREY COUNTY 13-46148

NAME OF TREASURER: MIKE RUSSO

COMMITTEE ADDRESS: STREET ADDRESS (NO P.O. BOX):
MONTEREY, CA 93940 (83)

COMMITTEE NAME: NAME OF OFFICEHOLDER OR CANDIDATE: OFFICE SOUGHT OR HELD

NAME OF TREASURER: NAME OF OFFICEHOLDER OR CANDIDATE: OFFICE SOUGHT OR HELD

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 PROONENT, IF ANY.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROONENT 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>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL THIS PERIOD</td>
<td>TOTAL TO DATE</td>
</tr>
</tbody>
</table>

### Contributions Received

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

## Expenditures Made

<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
</table>
| $ | $

### Expenditures Made

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

## Current Cash Statement

<table>
<thead>
<tr>
<th>Column A</th>
</tr>
</thead>
<tbody>
<tr>
<td>$</td>
</tr>
</tbody>
</table>

### Current Cash Statement

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

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

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

## Cash Equivalents and Outstanding Debts

<table>
<thead>
<tr>
<th>Column A</th>
</tr>
</thead>
<tbody>
<tr>
<td>$</td>
</tr>
</tbody>
</table>

### Cash Equivalents and Outstanding Debts

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

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).

**Expenditure Limit Summary for State Candidates**

22. 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></td>
<td>$ $</td>
</tr>
</tbody>
</table>

*Amounts in this section may be different from amounts reported in Column B.
## Schedule A Summary

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) ........................................... $ 0

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 $ 0**

---

**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 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>Statement covers period</th>
<th>CALIFORNIA FORM 460</th>
</tr>
</thead>
<tbody>
<tr>
<td>from 7/1/15</td>
<td></td>
</tr>
<tr>
<td>through 12/31/15</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME OF FILER</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>LD SMITH</td>
<td>1346143</td>
</tr>
</tbody>
</table>

<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>
<tbody>
<tr>
<td></td>
<td>□ IND</td>
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<td>□ SCC</td>
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</tbody>
</table>

SUBTOTAL $ 0

*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
### Schedule B - Part 1

**Loans Received**

<table>
<thead>
<tr>
<th>FULL NAME</th>
<th>STREET ADDRESS</th>
<th>ZIP CODE</th>
<th>OCCUPATION</th>
<th>EMPLOYER NAME</th>
<th>BALANCE</th>
<th>AMOUNT PAID</th>
<th>AMOUNT FORGIVEN</th>
<th>INTEREST PAYED</th>
<th>ORIGINAL AMOUNT</th>
<th>CUMULATIVE CONTRIBUTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Smith</td>
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<td></td>
<td></td>
<td></td>
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</tbody>
</table>

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**Schedule B Summary**

1. Loans received this period
   (Total Column b) plus unitemized loans of less than $100.
   $ ____________________________

2. Loans paid or forgiven this period
   (Total Column c) plus loans under $100 paid or forgiven.
   (Include loans paid by a third party that are also itemized on Schedule A.)
   $ ____________________________

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

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

**Contributor Codes**
- IND - Individual
- COM - Recipient Committee
- OTH - Other (e.g., business entity)
- PTY - Political Party
- SCC - Small Contributor Committee

**Important Note:**
- If required.

---

**Schedule B - Part 1**

**Loans Received**

<table>
<thead>
<tr>
<th>NAME OF FILER</th>
<th>I.D. NUMBER</th>
<th>Statement covers period from</th>
<th>through</th>
<th>Page of</th>
</tr>
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<tbody>
<tr>
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<td>1346145</td>
<td>7/1/15</td>
<td>12/31/15</td>
<td>6</td>
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</table>
Schedule B – Part 2
Loan Guarantors

Amounts may be rounded to whole dollars.

Statement covers period from 7/1/15 through 12/31/15

<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>
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<td>□ COM</td>
<td>□ OTH</td>
<td>□ PTY</td>
<td>□ SCC</td>
<td>LENDER</td>
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<td>□ SCC</td>
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<td>□ PTY</td>
<td>□ SCC</td>
<td>LENDER</td>
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<tr>
<td></td>
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<td>□ COM</td>
<td>□ OTH</td>
<td>□ PTY</td>
<td>□ SCC</td>
<td>LENDER</td>
</tr>
</tbody>
</table>

SUBTOTAL $ [Enter on Summary Page, Line 17 only]
## 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  

---

**Statement covers period**  
from 7/1/15 through 12/31/15  
Page 8 of ___  

---

**FPPC Form 460 (Jan/2016)**  
FPPC Advice: advice@fppc.ca.gov (866/275-3772)  
www.fppc.ca.gov
## Schedule D
### Summary of Expenditures
Supporting/Opposing Other Candidates, Measures and Committees

**NAME OF FILER**

ED SMITH

**I.D. NUMBER**

1546143

Amounts may be rounded to whole dollars.

**Statement covers period**

from **7/1/15** through **12/31/15**

**CALIFORNIA FORM 460**

Page 9 of __

---

<table>
<thead>
<tr>
<th>DATE</th>
<th>NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE</th>
<th>TYPE OF PAYMENT</th>
<th>DESCRIPTION (IF REQUIRED)</th>
<th>AMOUNT THIS PERIOD</th>
<th>CUMULATIVE TO DATE YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☑ Support ☑ Oppose</td>
<td>☐ Monetary Contribution</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>☑ Support ☑ Oppose</td>
<td>☐ Nonmonetary Contribution</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>☑ Support ☑ Oppose</td>
<td>☐ Independent Expenditure</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

**SUBTOTAL $**

---

**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 .. $  

---

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
## Schedule F
Accrued Expenses (Unpaid Bills)

**Amounts may be rounded to whole dollars.**

**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

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CODE OR DESCRIPTION OF PAYMENT</th>
<th>OUTSTANDING BALANCE BEGINNING OF THIS PERIOD</th>
<th>AMOUNT INCURRED THIS PERIOD</th>
<th>AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)</th>
<th>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

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

### 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.)

---

**SUBTOTALS** $  
**INCURRED TOTALS** $  
**PAID TOTALS** $  
**NET** $  

---

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
### Schedule E Payments Made

**NAME OF FILER:**
ED SMITH

**STATEMENT COVERS PERIOD:**
from 7/1/15 through 12/31/15

**I.D. NUMBER:**
1346143

**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>
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</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>IND</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>
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<td>office expenses</td>
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<td>phone banks</td>
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<td>polling and survey research</td>
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<td>PRO</td>
<td>professional services (legal, accounting)</td>
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<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/sponsor</td>
</tr>
<tr>
<td>VOT</td>
<td>voter registration</td>
</tr>
<tr>
<td>WEB</td>
<td>information technology costs (internet, e-mail)</td>
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</table>

**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>
</tr>
</thead>
</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.) ........................................ $
2. Unitemized payments made this period of under $100. ................................................................. $
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ................. $
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) TOTAL $
Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

NAME OF AGENT OR INDEPENDENT CONTRACTOR

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>IND</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/spONSponsor</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>

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

NAME AND ADDRESS OF PAYEE OR CREDITOR

<table>
<thead>
<tr>
<th>CODE OR</th>
</tr>
</thead>
<tbody>
<tr>
<td>DESCRIPTION OF PAYMENT</td>
</tr>
</tbody>
</table>

AMOUNT PAID

TOTAL* $ [Signature]

* 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.
### Schedule H
**Loans Made to Others**

*Amounts may be rounded to whole dollars.*

#### Statement covers period
- **from** 7/1/15
- **through** 12/31/15

#### CALIFORNIA FORM 460
- **Page 13** of **13**

---

**NAME OF FILER**

**ED SMITH**

**I.D. NUMBER**

**346143**

---

<table>
<thead>
<tr>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD</th>
<th>(b) AMOUNT LOANED THIS PERIOD</th>
<th>(c) REPAYMENT OR FORGIVENESS THIS PERIOD*</th>
<th>(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
<th>(e) INTEREST RECEIVED</th>
<th>(f) ORIGINAL AMOUNT OF LOAN</th>
<th>(g) 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>$_________</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$_________</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
   - (Total Column (b) plus unitemized loans of less than $100.)
   - $ ___________

2. Payments received on loans
   - (Total Column (c) plus unitemized payments of less than $100.)
   - $ ___________

3. Net change this period
   - (Subtract Line 2 from Line 1.)
   - (Enter the net here and on the Summary Page, Column A, Line 7.)
   - NET $ ___________

---

**FPPC Form 460 (Jan/2016)**
**FPPC Advice: advice@fppc.ca.gov (866/275-3772)**
**www.fppc.ca.gov**
<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>DESCRIPTION OF RECEIPT</th>
<th>AMOUNT OF INCREASE TO CASH</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Attach additional information on appropriately labeled continuation sheets.

**Schedule I Summary**

1. Itemized increases to cash this period. ........................................... $
2. Unitemized increases to cash of under $100 this period. ......................... $
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) ........................................... $
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) ........................................... TOTAL $