Recipient Committee
Campaign Statement
Cover Page

Statement covers period
from 07/01/2018
through 09/22/2018
Date of election if applicable:
(Month, Day, Year)
11/06/2018

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

2. Type of Statement:
   - [ ] Pre-election Statement
   - [ ] Semi-annual Statement
   - [ ] Amendment (Explain below)
   - [ ] Quarterly Statement
   - [ ] Special Odd-Year Report
   - [ ] Termination Statement
     (Also file a Form 410 Termination)

3. Committee Information
   - I.D. NUMBER 1409510
   - COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE)
     McCrone for Mayor of Monterey 2018
   - STREET ADDRESS (NO P.O. BOX)
     CITY Monterey
     STATE CA
     ZIP CODE 93940
     AREA CODE/PHONE 831
   - MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
     PO Box 2751
     CITY Monterey
     STATE CA
     ZIP CODE 93942
     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 09/27/2018
   By [Signature]
   [Title]
   [Name]
   [Date]
   [Address]

   Executed on 09/27/2018
   By [Signature]
   [Title]
   [Name]
   [Date]
   [Address]
5. **Officeholder or Candidate Controlled Committee**

**NAME OF OFFICEHOLDER OR CANDIDATE**

Willard P. McCrone

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

Mayor of Monterey

**RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)**

Monterey, CA 93940

**CITY**

Monterey

**STATE**

CA

**ZIP**

93940

**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 OFFICEHOLDER, 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.**

**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**

**NAME OF OFFICEHOLDER OR CANDIDATE**

**OFFICE SOUGHT OR HELD**

**SUPPORT**

**OPPOSE**

**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**

**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**

Attach continuation sheets if necessary
**Campaign Disclosure Statement**

**Summary Page**

Amounts may be rounded to whole dollars.

**SUMMARY PAGE**

**CALIFORNIA FORM 460**

**I.D. NUMBER**

1040510

**Statement covers period**

from 07/01/2018

through 09/22/2018

**Page 3 of 7**

---

**Contributions Received**

<table>
<thead>
<tr>
<th>Item</th>
<th>Schedule/Line</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Monetary Contributions</td>
<td>A, Line 3</td>
<td>$5,122</td>
<td>$5,122</td>
</tr>
<tr>
<td>2. Loans Received</td>
<td>B, Line 3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>3. SUBTOTAL CASH CONTRIBUTIONS</td>
<td>Add Lines 1 + 2</td>
<td>$5,122</td>
<td>$5,122</td>
</tr>
<tr>
<td>4. Nonmonetary Contributions</td>
<td>C, Line 3</td>
<td>196</td>
<td>196</td>
</tr>
<tr>
<td>5. TOTAL CONTRIBUTIONS RECEIVED</td>
<td>Add Lines 3 + 4</td>
<td>$5,318</td>
<td>$5,318</td>
</tr>
</tbody>
</table>

**Expenditures Made**

<table>
<thead>
<tr>
<th>Item</th>
<th>Schedule/Line</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Payments Made</td>
<td>E, Line 4</td>
<td>$2,120</td>
<td>$2,120</td>
</tr>
<tr>
<td>7. Loans Made</td>
<td>H, Line 3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>8. SUBTOTAL CASH PAYMENTS</td>
<td>Add Lines 6 + 7</td>
<td>$2,120</td>
<td>$2,120</td>
</tr>
<tr>
<td>9. Accrued Expenses (Unpaid Bills)</td>
<td>F, Line 3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>10. Nonmonetary Adjustment</td>
<td>C, Line 3</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>11. TOTAL EXPENDITURES MADE</td>
<td>Add Lines 8 + 9 + 10</td>
<td>$2,120</td>
<td>$2,120</td>
</tr>
</tbody>
</table>

**Current Cash Statement**

<table>
<thead>
<tr>
<th>Item</th>
<th>Schedule/Line</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>12. Beginning Cash Balance</td>
<td>Previous Summary Page, Line 16</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>13. Cash Receipts</td>
<td>Column A, Line 3 above</td>
<td>5,122</td>
<td>5,122</td>
</tr>
<tr>
<td>14. Miscellaneous Increases to Cash</td>
<td>J, Line 4</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>15. Cash Payments</td>
<td>Column A, Line 8 above</td>
<td>2,120</td>
<td>2,120</td>
</tr>
<tr>
<td>16. ENDING CASH BALANCE</td>
<td>Add Lines 12 + 13 + 14, then subtract Line 15</td>
<td>$3,002</td>
<td>$3,002</td>
</tr>
</tbody>
</table>

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

**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.*

---

**Cash Equivalents and Outstanding Debts**

<table>
<thead>
<tr>
<th>Item</th>
<th>Schedule/Line</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>18. Cash Equivalents</td>
<td>See instructions on reverse</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>19. Outstanding Debts</td>
<td>Add 2 + Line 9 in Column B above</td>
<td>$0</td>
<td>$0</td>
</tr>
</tbody>
</table>
## Schedule A
### Monetary Contributions Received

**Always userollers may be rounded to whole dollars.**

**Statement covers period from 07/01/2018 through 09/22/2018**

**CALIFORNIA FORM 460**

**Page 4 of 7**

<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>08/08/18</td>
<td>Dean C. Klaus, OR 97128</td>
<td>[X] IND</td>
<td>Retired</td>
<td>1,000</td>
<td>1,000</td>
<td></td>
</tr>
<tr>
<td>08/10/2018</td>
<td>Kevin G. Landon, DDS, Denver, CO 80206</td>
<td>[X] IND</td>
<td>Retired</td>
<td>250</td>
<td>250</td>
<td></td>
</tr>
<tr>
<td>08/18/18</td>
<td>Harvey T. Oringer, CA 90067</td>
<td>[X] IND</td>
<td>Retired</td>
<td>1,000</td>
<td>1,000</td>
<td></td>
</tr>
<tr>
<td>09/12/18</td>
<td>Steve Schroeder, Gold Coast Investments, Carmel, CA 93923</td>
<td>[X] IND</td>
<td>Property Owner</td>
<td>1,000</td>
<td>1,000</td>
<td></td>
</tr>
<tr>
<td>09/15/2018</td>
<td>Jim Cullam, Monterey, CA 93940</td>
<td>[X] IND</td>
<td>Retired</td>
<td>100</td>
<td>100</td>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTAL $** 3,350

---

**Schedule A Summary**

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) $4,750

2. Amount received this period – unitemized monetary contributions of less than $100 $372

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) $5,122

---

*Contributor Codes

IND – Individual

COM – Recipient Committee

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

**NAME OF FILER**
McCrone For Mayor of Monterey 2018

<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>
</table>
| 09/17/2018    | David Martin  
Cranbury, NJ 08512                                      | ✔ IND  
               ⬛ COM  
               ⬛ OTH  
               ☑ PTY  
               ☑ SCC | Retired                                 | 100                          | 100                         |                                                |
| 09/17/2018    | Gordon Greeby  
Lake Bluff, IL 60044                                    | ✔ IND  
               ⬛ COM  
               ☑ OTH  
               ⬛ PTY  
               ☑ SCC | Retired                                 | 100                          | 100                         |                                                |
| 09/19/2018    | Carpe Diem Fine Books  
245 Pearl St  
Monterey, CA 93940                                      | ☑ IND  
               ☑ COM  
               ☑ OTH  
               ☑ PTY  
               ☑ SCC | Book Sellers                            | 200                          | 200                         |                                                |
| 09/20/2018    | David Wheeler / Wai Wong  
Carmel, CA 93923                                         | ✔ IND  
               ☑ COM  
               ☑ OTH  
               ☑ PTY  
               ☑ SCC | Brokerage / Physician                   | 1,000                        | 1,000                       |                                                |

**SUBTOTAL** $ 1,400

---

*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 C
Nonmonetary Contributions Received

<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>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>
</tr>
</thead>
<tbody>
<tr>
<td>08/01/18</td>
<td>Willard P. McCrone</td>
<td>☑ IND</td>
<td>Retired</td>
<td>File Fee Sec State</td>
<td>50</td>
<td>50</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Monterey, CA 93940</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>08/09/18</td>
<td>Willard P. McCrone</td>
<td>☑ IND</td>
<td>Retired</td>
<td>Word Press</td>
<td>96</td>
<td>146</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Monterey, CA 93940</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Attach additional information on appropriately labeled continuation sheets.

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions.
   (Include all Schedule C subtotals.) ........................................................................................................... $ 146
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ....................... $ 50
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 $ 196

*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 E
Payments Made

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>Statement covers period from</th>
<th>through</th>
<th>CALIFORNIA FORM</th>
<th>Page 7 of 7</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/2018</td>
<td>09/22/2018</td>
<td>460</td>
<td>1409510</td>
</tr>
</tbody>
</table>

**NAME OF FILER**
McCrone For Mayor of Monterey 2018

**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
- **PLO** 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)

### NAME AND ADDRESS OF PAYEE

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Melissa Thoeny Designs / Monterey, CA 93940</td>
<td>LIT</td>
<td></td>
<td>300</td>
</tr>
<tr>
<td>Melissa Thoeny Designs / Monterey, CA 93940</td>
<td>LIT</td>
<td></td>
<td>467</td>
</tr>
<tr>
<td>Melissa Thoeny Designs / Monterey, CA 93940</td>
<td>LIT</td>
<td></td>
<td>1,242</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.) ................................................................. $ 2,009
2. Unitemized payments made this period of under $100 ................................................................. $ 111
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 $ 2,120

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