Recipict Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Mari	e ^r	Date Stamp	california 460 form
SEE INSTRUCTIONS ON REVERSE	Statement covers period from07/01/2019 through12/31/2019	Date of election if applicable: (Month, Day, Year)	JAN 21 2020 City of El Cerrito City Clerk	Page 1 of _ // For Official Use Only
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	mplete Parts 1, 2, 3, and 4. trimarily Formed Ballot Measure committee) Controlled) Sponsored uso Complete Part 6) trimarily Formed Candidate/ uso Complete Part 7)	2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 To	Spec	terly Statement ial Odd-Year Report lemental Preelection ment - Attach Form 495
3. Committee information	. NUMBER 1382665	Treasurer(s) NAME OF TREASURER Shawnda Deane MAILING ADDRESS 1787 Tribute Road, Su	lite K STATE ZIP CI CA 958	•
CITY STATE ZIP CO El Cerrito CA 9453 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. B 1787 Tribute Road, Suite K CITY STATE ZIP CO Sacramento CA 9581 OPTIONAL: FAX / E-MAIL ADDRESS Fadelli2020@deaneandcompany.com	0 (916) 285-5733 OX DE AREA CODE/PHONE	Sacramento NAME OF ASSISTANT TREASUI Paul Fadelli MAILING ADDRESS 8646 Arbor Drive CITY El Cerrito OPTIONAL: FAX / E-MAIL ADDR	STATE ZIP CC CA 945	DDE AREA CODE/PHONE
4. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California Executed on Executed on Date Executed on Date Executed on Date	a that the foregoing is true and correct. By	owledge the information contained her signature of Treasuror Assistant niteding officeholder, Candidate, State Measure Pro Signature of Controlling Officeholder, Candidate, S Signature of Controlling Officeholder, Candidate, S	ponent or Responsible Officer of Sponsor tate Measure Proponent	les is true and complete. I certify

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

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2				
CALIF FC	ORNIA DRM	460		
Page _	2	of <u>11</u>		

•	Officeholder or Candidate Controlled Con	nmittee			6.	Primarily Formed Ballo	t Measure (Committee		
	NAME OF OFFICEHOLDER OR CANDIDATE					NAME OF BALLOT MEASURE				
	Paul Fadelli									
	OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIS	CE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)		LE)		BALLOT NO. OR LETTER	JURISDICTIO	N		SUPPORT
	City Council Member: City of El Cerrito									OPPOSE
	RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP		Identify the controlling office	ceholder, can	didate, or state mea	sure p	roponent, if any.
	8646 Arbor Drive	El Cerrito	CA	94530		NAME OF OFFICEHOLDER, CANI	DIDATE, OR PRO	PONENT		
	Related Committees Not Included in this and included in this statement that are controlled by y contributions or make expenditures on behalf of your	ou or are prima				OFFICE SOUGHT OR HELD		DISTRIC	T NO. IF	ANY
	COMMITTEE NAME	I.D. NUME	BER						M	
	NAME OF TREASURER	CONTROL			7.	Primarily Formed Cand officeholder(s) or candidate(s)				
	COMMITTEE ADDRESS STREET ADDRESS (NO P.C), BOX)				NAME OF OFFICEHOLDER OR C.	ANDIDATE	OFFICE SOUGHT OR H	-IELD	☐ SUPPORT
							:			OPPOSE
	CITY STATE Z	P CODE	AREA COL	DE/PHONE		NAME OF OFFICEHOLDER OR C.	ANDIDATE	OFFICE SOUGHT OR H	†ELD	
	CITY STATE ZI	P CODE		DE/PHONE		NAME OF OFFICEHOLDER OR CA		OFFICE SOUGHT OR H		OPPOSE SUPPORT
	COMMITTEE NAME NAME OF TREASURER	I.D. NUME	BER	TEE?			ANDIDATE		HELD	OPPOSE SUPPORT OPPOSE
	COMMITTEE NAME	CONTROL	BER	TEE?		NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT OR H	HELD	OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

Statem	ent covers period	CALIFORNIA 460
from	07/01/2019	FORM 400
through _	12/31/2019	Page3 of11

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Fadelli for City Council 2020

I.D. NUMBER 1382665

SUMMARY PAGE

Contributions Received	 Column A TOTAL THIS PERIOD (FROMATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions Schedule A, Line 3	\$ 0.00	\$	0.00	
2. Loans Received Schedule B, Line 3	0.00		15,000.00	1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 0.00	\$	15,000.00	20. Contributions Received \$\$
4. Nonmonetary Contributions Schedule C, Line 3	0.00		0.00	21 Expenditures
5. TOTAL CONTRIBUTIONS RECEIVEDAdd Lines 3 + 4	\$ 0.00	\$	15,000.00	Made \$ \$
Expenditures Made				Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$ 2,041.99	\$	3,328.51	Candidates
7. Loans Made Schedule H, Line 3	0.00		0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 2,041.99	\$	3,328.51	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3	0.00		0.00	Date of Election Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3	0.00		0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$ 2,041.99	\$	3,328.51	\$
Current Cash Statement				
12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 3,121.71		calculate Column B, add	[
13. Cash Receipts	0.00		mounts in Column A to the presponding amounts	
14. Miscellaneous Increases to Cash Schedule I, Line 4		fro	om Column B of your last	*Amounts in this section may be different from amounts reported in Column B.
15. Cash Payments	2,041.99		port. Some amounts in olumn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 1,079.72	fig	gures that should be	
If this is a termination statement, Line 16 must be zero.	 	pe	ubtracted from previous eriod amounts. If this is e first report being filed	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ 0.00	fo	r this calendar year, only arry over the amounts	
Cash Equivalents and Outstanding Debts		fro	om Lines 2, 7, and 9 (if	
18. Cash Equivalents See instructions on reverse	\$ 0.00		ur	
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ 15,000.00			
		i		FPPC Form 460 (Jan/20 FPPC Advice: advice@fppc.ca.gov (866/275-3;

116) www.fppc.ca.gov

Schedule B – Part Loans Received
SEE INSTRUCTIONS ON REVERS

NAME OF FILER

Amounts may be rounded to whole dollars.

		SCHEDULE B-	PARI
Staten	ent covers period	CALIFORNIA /	60
from	07/01/2019	FORM 4	UU
through	12/31/2019	Page4 of1	1
		I.D. NUMBER	

Friends of Fadelli for City Council 20)20						1382665	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Paul L. Fadelli 8646 Arbor Drive El Cerrito, CA 94530	Program Manager San Francisco Bay Area Rapid Transit			PAID \$ 0.00 FORGIVEN	\$_5,000.00	0.00 _%	\$ <u>5,000.00</u>	\$ 0.00 PER ELECTION**
[†] ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$ 5,000.00	\$0.00	\$0.00	12/31/2020 DATE DUE	\$ 0.00	03/09/2016 DATE INCURRED	\$
Paul L. Fadelli 8646 Arbor Drive El Cerrito, CA 94530	Program Manager San Francisco Bay Area Rapid Transit			\$ 0.00 FORGIVEN	\$_5,000.00	0.00 % RATE	\$ 5,000.00	\$ 0.00 PER ELECTION **
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$_5,000.00	\$0.00	\$0.00	12/31/2020 DATE DUE	\$ 0.00	10/07/2016 DATE INCURRED	\$
Paul L. Fadelli 8646 Arbor Drive El Cerrito, CA 94530	Program Manager San Francisco Bay Area Rapid Transit			PAID \$ 0.00 FORGIVEN	\$_5,000.00	0.00 % RATE	\$_5,000.00	CALENDAR YEAR \$ 0.00 PER ELECTION ***
[†] ▼ IND □ COM □ OTH □ PTY □ SCC		\$_5,000.00	s0.00	\$ 0.00	12/31/2020 DATE DUE	\$0.00	09/04/2018 DATE INCURRED	\$
		SUBTOTALS \$	0.00	0.00	\$ 15,000.00	\$ 0.00		ig revenier som

Schedule B Summary

(Enter (e) on Schedule E, Line 3)

1.	Loans received this period	. \$	0.00
2.	Loans paid or forgiven this period	. \$	0.00
3.	Net change this period. (Subtract Line 2 from Line 1.)	\$	0 . 0 0 (May be a negative number)

†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

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

FPPC Form 460 (Jan/2016)

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36/275-3772) .fppc.ca.gov

Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		Amounts may be r to whole dolla		Statement covers	CAL	california 460		
	IONS ON REVERSE			through12/31/20	Page	5 of <u>11</u>		
NAME OF FILER	Fadelli for City Council 2020				I.D. Ni 1382	UMBER 1665		
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DAT CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)		
09/05/2019	Democractic Party of Contra Costa X Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure		500.00	500.0	0		
10/07/2019	Nancy Skinner State Senator District: 9	Monetary Contribution Nonmonetary Contribution Independent Expenditure		200.00	200.0	0 P2020 \$450.0		
		Monetary Contribution Nonmonetary Contribution Independent Expenditure						
			SUBTOTAL S	700.00	annungsent as dän gjuse) as depugses vid vital et mus	engelijk is verdoor die een toer Verdoor verdoor in die een die		
	e D Summary ions and independent expenditures made this perio	od of \$100 or more. (Inc	clude all Schedule D subtot	als.)	\$	700,00		
2. Unitemize	ed contributions and independent expenditures made	de this period of under S	\$100	(**************************************	\$	0.00		
3. Total conf	tributions and independent expenditures made this	period. (Add Lines 1 a	nd 2. Do not enter on the	Summary Page.)	TOTAL \$	700.00		

2. Unitemized payments made this period of under \$100

FPPC Form 460 (Jan/2016)

FPPC Toll-Free Helpline: 866/ASK-FPP 36/275-3772)

0.00

Schedule E (Continuation Sheet) **Payments Made**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

	OOLIEDO	LE E (00141.)	
Α	LIFORNIA	460	

SCHEDI - E (CONT)

from07/01/2019	FORM 460
through	Page7 of11
	I.D. NUMBER
	1382665

Friends of Fadelli for City Council 2020

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs campaign consultants MTG meetings and appearances returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks candidate travel, lodging, and meals FND fundraising events POL polling and survey research staff/spouse travel, lodging, and meals IND independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) VOT voter registration

campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Card Service Center 5055 Norwood Road Dallas, TX 75356		Credit Card Payment	225.00
Card Service Center 5055 Norwood Road Dallas, TX 75356		Credit Card Payment	25.00
Card Service Center 5055 Norwood Road Dallas, TX 75356		Credit Card Payment	25.00
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		234.80
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		192.40
* Douments that are contributions or independent expenditures must also be summer.	<u> </u>		URTOTAL \$ 702.20

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

SUBTOTAL \$

Schedule F P

SCHEDULE E (CONT.)

(Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA 460	
Payments Made	to whole dollars.	from 07/01/2019	FORM 400	
SEE INSTRUCTIONS ON REVERSE		through <u>12/31/2019</u>	Page 8 of 11	
NAME OF FILER			I.D. NUMBER	
Friends of Fadelli for City Council 2020			1382665	
CODEO MA CHACH AND A LANGE		O 11		

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs campaign consultants MTG meetings and appearances RFD returned contributions CNS CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals polling and survey research FND fundraising eyents POL TRS staff/spouse travel, lodging, and meals IND independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT WEB information technology costs (internet, e-mail) print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		158.90
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		234.50
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		160.25

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

SUBTOTAL \$

Schedure G	
Payments Made by an Agent or Independen	t
Contractor (on Behalf of This Committee)	

Amounts may be rounded to whole dollars.

Statement covers period	CALIFORNIA 160
from07/01/2019	FORM 46U
through12/31/2019	— Page <u>9</u> of <u>11</u>
	I.D. NUMBER
	1382665

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Friends of Fadelli for City Council 2020

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Card Service Center

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.					
CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL.	polling and survey research	TRS	staff/spouse travel, lodging, and meals
₽ND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMO	OUNT PAID
Central Labor Council of Contra Costa County, AFL-CIO 1333 Pine Street East Martinez, CA 94553	cvc			211.14
Democractic Party of Contra Costa (ID# 990861) 702 Windmill Court Concord, CA 94518	CTB			500.00
Site District 344 20th Street Oakland, CA 94612	WEB			25.00
Site District 344 20th Street Oakland, CA 94612	WEB			25.00
Attach additional information on appropriately labeled continuation shee	ets.		TOTAL* \$	761.14

* 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 G (Continuation Sheet)
Payments Made by an Agent or Independent
Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

SCHEDULE G (CONT.) Statement covers period **CALIFORNIA** 07/01/2019 **FORM** from.

through __12/31/2019

Page ___10__ of __11__

I.D. NUMBER 1382665

NAME OF AGENT OR INDEPENDENT CONTRACTOR

campaign literature and mailings

Friends of Fadelli for City Council 2020

Card Service Center

NAME OF FILER

LIT

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries petition circulating t.v. or cable airtime and production costs CVC civic donations candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals FIL FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals

independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF ND professional services (legal, accounting) VOT voter registration LEG legal defense

> PRT print ads

transfer between committees of the same candidate/sponsor

WEB information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMC	OUNT PAID
Site District 344 20th Street Oakland, CA 94612	WEB			25.00
Site District 344 20th Street Oakland, CA 94612	WEB			25.00
Site District 344 20th Street Oakland, CA 94612	WEB			25.00
Site District 344 20th Street Oakland, CA 94612	WEB	, , , , , , , , , , , , , , , , , , ,		25,00
Attach additional information on appropriately labeled continuation sheets	S.		TOTAL* \$	100.00

* 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.

FPPC Form 460 (Jan/2016)

FPPC Advice: advice@fppc.ca.go

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Schedu G (Continuation Sheet)
Payments Made by an Agent or Independent
Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

		SCHEL, G (CONT
Stat	ement covers period	CALIFORNIA 460
from	07/01/2019	FORM 40U
through	12/31/2019	- Page <u>11</u> of <u>11</u>
		I.D. NUMBER

1382665

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Fadelli for City Council 2020

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Card Service Center

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.						
CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs	
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions	
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries	
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs	
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals	
FND	fundraising events	POL.	polling and survey research	TRS	staff/spouse travel, lodging, and meals	
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor	
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration	
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)	

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Skinner for Senate 2020 (ID# 1392359) 1787 Tribute Road, Suite K Sacramento, CA 95815	СТВ			200.00
		-		

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

^{*} 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.

Daniniant Committee		_		COVERPAGE
Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)			RECEIVED	california 460 FORM
(COVERNMENT COMO COMICIO CAZOC CAZOCO)	Statement covers period from01/01/2019	Date of election if applicable: (Month, Day, Year)	JUL 2 2 2019 City of El Contro City Clark	Page of
SEE INSTRUCTIONS ON REVERSE	through			
O State Candidate Election Committee O Recall (Also Complete Part 5) ☐ General Purpose Committee O Sponsored O Small Contributor Committee O Political Party/Central Committee	omplete Parts 1, 2, 3, and 4. 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 Seml-annual Statement Termination Statement (Also file a Form 410 Te	smination)	Quarterly Statement Special Odd-Year Report Supplemental Preelection Statement - Attach Form 495
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Friends of Fadelli for City Council 2016 STREET ADDRESS (NO P.O. BOX)	1382665	Treasurer(s) NAME OF TREASURER Shawnda Deane MAILING ADDRESS 1787 Tribute Road, Su CITY	STATE ZII	P CODE : AREA CODE/PHONE
8646 Arbor Drive CITY STATE ZIP COMMISSION CA 945 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. 6 1787 Tribute Road, Suite K CITY STATE ZIP COMMISSION CA 958	30 (916) 285-5733 BOX ODE AREA CODE/PHONE	Sacramento NAME OF ASSISTANT TREASUF Paul Fadelli MAILING ADDRESS 8646 Arbor Drive CITY El Cerrito	STATE ZI	95815 (916)285-5733 P CODE AREA CODE/PHONE 94530 (916)285-5733
Facelled on	ia that the foregoing is true and Esrrect. By	OPTIONAL: FAX / E-MAIL ADDR nowledge the information contained he Signature of Treasurer or Assistant Controlling Officeholder, Candidate, State Measure Pro- Signature of Controlling Officeholder, Candidate, Sandidate, Sandidat	rein and in the attached sch Treasurer Opponent or Responsible Officer of Spor	
. Executed on	Ву	Signature of Controlling Officeholder, Candidate, S		

Recipient Committee Campaign Statement Cover Page — Part 2

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CALLE	ORNI	TOP		
			17	
- 1	r (W)			
Page	2	_ of _	6	

NAME OF OFFICEHOLDER OR CANDIDATE				NAME OF BALLOT MEASURE				
Paul Fadelli								
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	RICT NUMBER IF APPLIC	CABLE)		BALLOT NO. OR LETTER	JURISDICT	ION		SUPPORT
City Council Member: City of El Cerrito								OPPOSE
,	CITY STAT			Identify the controlling of	ficeholder, ca	andidate, or st	ate measure _l	proponent, if any
8646 Arbor Drive E	CA Cerrito CA	94530		NAME OF OFFICEHOLDER, CAI	NDIDATE, OR P	ROPONENT		
Delegado Como diverso Navido Loris disculsivado Com	4 . 4	•						
Related Committees Not Included in this St not included in this statement that are controlled by you contributions or make expenditures on behalf of your ca	ı or are primarily form			OFFICE SOUGHT OR HELD			DISTRICT NO. I	F ANY
COMMITTEE NAME	I.D. NUMBER							
	- }							
VIAME OF TOP A OLIDEO	CONTROLLER COM		7.	Primarily Formed Can	didate/Office	ceholder Co	mmittee Li	st names of
NAME OF TREASURER	CONTROLLED COMM		7.	Primarily Formed Can officeholder(s) or candidate(s)				
	☐ YES ☐	NO	7.		s) for which th	is committee is		ed.
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO P.O. I	☐ YES ☐		7.	officeholder(s) or candidate(s	s) for which th	is committee is	primarily form	
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. I	YES BOX)		7.	officeholder(s) or candidate(s	s) for which th	OFFICE SOU	primarily form	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. I	YES BOX)	NO	7.	officeholder(s) or candidate(s) NAME OF OFFICEHOLDER OR	s) for which th	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. I	YES BOX)	NO	7.	NAME OF OFFICEHOLDER OR	s) for which the	OFFICE SOU	GHT OR HELD GHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. I	BOX) CODE AREA (NO	7.	officeholder(s) or candidate(s) NAME OF OFFICEHOLDER OR	s) for which the	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. I	DOX) CODE AREA CONTROLLED COMM	NO CODE/PHONE MITTEE?	7.	NAME OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUR OFFICE SOUR	GHT OR HELD GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. I CITY STATE ZIP COMMITTEE NAME NAME OF TREASURER	DOX) CODE AREA CONTROLLED COMM YES	CODE/PHONE	7.	NAME OF OFFICEHOLDER OR NAME OF OFFICEHOLDER OR NAME OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUR OFFICE SOUR	GHT OR HELD GHT OR HELD GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT
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Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

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Statem	ent covers period	CALIFORNIA / CO					
from	01/01/2019	FORM FIOU					
through	06/30/2019	Page3 of6					
 1		I.D. NUMBER					
		1382665					

NAME OF FILER Friends of Fadelli for City Council 2016 Column A Column B Calendar Year Summary for Candidates Contributions Received TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) CALENDAR YEAR TOTAL TO DATE Running in Both the State Primary and **General Elections** 1/1 through 6/30 7/1 to Date 0.00 15,000.00 20. Contributions 0.00 15,000.00 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ _____ Received 0.00 0.00 4. Nonmonetary Contributions Schedule C, Line 3 21. Expenditures 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 \$ 0.00 15,000.00 Expenditures Made **Expenditure Limit Summary for State** \$ _____1,286.52 Candidates 7. Loans Made Schedule H, Line 3 22. Cumulative Expenditures Made* \$ _____1,286.52 (If Subject to Voluntary Expenditure Limit) 0.00 Date of Election Total to Date (mm/dd/yy) 0.00 0.00 \$ 1,286.52 **Current Cash Statement** 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 4,408.23 To calculate Column B, add amounts in Column A to the corresponding amounts *Amounts in this section may be different from amounts 0.00 from Column B of your last reported in Column B. report. Some amounts in 1,286.52 Column A may be negative 3,121.71 figures that should be 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ _____ carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). .19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$

FPPC Form 460 (Jan/2016) (fppc.ca.c '866/275-3772)

Schedule B - Part 1

Amounts may be rounded

			SCH	FDOFF	B-P/	٩RT
Statem	ent covers period	CALI	FORN	IIA	A G	77
rom	01/01/2019	F	ORM:		77.	
hrough .	06/30/2019	Page	4	of_	6	
		I.D. NU	MBER			

Loans Received		to whole dollar	rs.		from01/0	1/2019	FORM	* 46U
SEE INSTRUCTIONS ON REVERSE					through06/3	0/2019	Page 4	of <u>6</u>
NAME OF FILER							I.D. NUMBER	
Friends of Fadelli for City Council 20	16						1382665	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PA OR FORGIVE THIS PERIO	EN CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Paul L. Fadelli 8646 Arbor Drive El Cerrito, CA 94530	Program Manager San Francisco Bay Area Rapid Transit			PAID \$ 0.0 FORGIVEN	5,000.00	0.00 % RATE	\$_5,000.00	CALENDAR YEAR \$ 0.00 PER ELECTION*
†∑ IND □ COM □ OTH □ PTY □ SCC		\$ 5,000.00	\$0.00	\$0.0	00 12/31/2019 DATE DUE	s0.00	03/09/2016 DATE INCURRED	\$
Paul L. Fadelli 8646 Arbor Drive El Cerrito, CA 94530	Program Manager San Francisco Bay Area Rapid Transit	-		□ PAID \$0.0 □ FORGIVEN		0.00 % RATE	\$ 5,000.00	\$ 0.00 PER ELECTION *
†∑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$ 5,000.00	\$0.00	\$0.0	00 12/31/2019 DATE DUE	\$ 0.00	10/07/2016 DATE INCURRED	\$
Paul L. Fadelli 8646 Arbor Drive El Cerrito, CA 94530	Program Manager San Francisco Bay Area Rapid Transit			□ PAID \$0.0 □ FORGIVEN		0.00 % RATE	\$ 5,000.00	CALENDAR YEAR \$ 0.00 PER ELECTION*
TIND □ COM □ OTH □ PTY □ SCC		\$_5,000.00	\$0.00	\$0.0	00 12/31/2019 DATE DUE	\$0.00	09/04/2018 DATE INCURRED	\$
		SUBTOTALS S	0.00	\$ 0.	.00\$ 15,000.00	\$ 0.00		Z naka ya kanapa na Marakata na kanasa n
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
Loans received this period (Total Column (b) plus unitemized loan				\$	0.00		Contributor Codos	
Loans paid or forgiven this period (Total Column (c) plus loans under \$100 (Include loans paid by a third party tha	D paid or forgiven.) t are also itemized on Scheo	dule A.)				. C	Contributor Codes ID – Individual OM – Recipient Co (other than TH – Other (e.g., TY – Political Part	ommittee PTY or SCC) business entity)
- 3. Net change this period. (Subtract Line	e 2 from Line 1.)	•••••		. NET \$ _	0.00 (May be a negative number)	l e	CC – Small Contril	

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

Enter the net here and on the Summary Page, Column A, Line 2.

FPPC Form 460 (Jan/2016)

FPPC Advice: advice@fppc.ca.ç

366/275-3772) w.fppc.ca.gov

Schedule E Payments Made

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

Statement covers period	SCHEDULE E
from01/01/2019	FORM 460
through 06/30/2019	Page5 of6
	I.D. NUMBER
	122255

NAME OF FILER			I.D. NUMBER
Friends of Fadelli for City Council 2016			1382665
CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events FND independent expenditure supporting/opposing others (explain)* COFF office expendition circ petition circ petition circ phone ban phone ban polling and polling and polling and postage, d	ommunications and appearances enses culating	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and pro TRC candidate travel, lodging, ar TRS staff/spouse travel, lodging, ces TSF transfer between committee	s oduction costs nd meals g, and meals es of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IFCOMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		235.40
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		183.77
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		183.60
* Payments that are contributions or independent expenditures must also be sum	marized on Schedule D.	S	UBTOTAL\$ 602.71
Schedule E Summary	***		
1. Itemized payments made this period. (Include all Schedule E subtotals.)			\$1,161.52
2. Unitemized payments made this period of under \$100			\$125.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Par	rt 1, Column (e).)		\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on	the Summary Page, Co	olumn A, Line 6.) TO	OTAL \$1,286.52

FPPC Form 460 (Jan/2016)

FPPC Toll-Free Helpline: 866/ASK-FP 866/275-3772)

Schedule E

 SCH	EDULE	E (CONT.)	١

(Continuation Sheet) Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER	Amounts may be to whole do			from _	01/01/2019 h 06/30/2019		ORNIA 460
Friends of Fadelli for City Council 2016						138266	
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations Fil. candidate filing/ballot fees FND fundraising events Independent expenditure supporting/opposing others (explain)* LEG legal defense LEG campaign literature and mailings	MBR member com MTG meetings and OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, deli	munications d appearance ses lating survey researe very and me	s	RAD RFD SAL CONTROL TRC TRS STAF TO TAKE TO TAKE TO TAKE TRS STAF TO TAKE TRS STAF TO TAKE TRS STAF TR	describe the paymradio airtime and produce turned contributions campaign workers' salet. or cable airtime and candidate travel, lodgin staff/spouse travel, lodginansfer between commoter registration information technology	aries d production cost g, and meals ging, and meals nittees of the san	me candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE (DR DE	SCRIPTION	OF PAYMENT		AMOUNT PAID
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	1	PRO					235.55
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815		PRO					164.00
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815		PRO					159.20

FPPC Form () (Jan/2016)

FPPC Toll-Free Helpline: 866/ASK-FPP 3/275-3772) www.fppc.ca.gov

SUBTOTAL \$

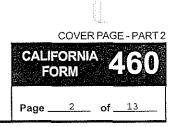
558.75

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

Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Statement covers period	Date of election if applicable:	Date Stamp RECEIVED JAN 3 1 2019	CALIFORNIA 460 FORM Page 1 of 13
SEE INSTRUCTIONS ON REVERSE	from 07/01/2018 through 12/31/2018	(Month, Day, Year)	City of El Cerrito City Cherk	For Official Use Only
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	nplete Parts 1, 2, 3, and 4. rimarily Formed Ballot Measure ommittee) Controlled) Sponsored iso Complete Part 6) rimarily Formed Candidate/ fficeholder Committee iso Complete Part 7)	2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te	Speci Supprermination) State	terly Statement ial Odd-Year Report Iemental Preelection ment - Atlach Form 495
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Friends of Fadelli for City Council 2016	NUMBER 382665	Treasurer(s) NAME OF TREASURER Shawnda Deane Mailing Address 1787 Tribute Road, Su	ite K	
STREET ADDRESS (NO P.O. BOX) 8646 Arbor Drive		CITY Sacramento	STATE ZIP CC CA 9581	
CITY STATE ZIP COL El Cerrito CA 94530 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO 1787 Tribute Road, Suite K	(916) 285-5733	NAME OF ASSISTANT TREASUR Paul Fadelli MAILING ADDRESS 8646 Arbor Drive	ER, IF ANY	
CITY STATE ZIP COI Sacramento CA 95815 OPTIONAL: FAX / E-MAIL ADDRESS Fadelli2016@deaneandcompany.com		El Cerrito OPTIONAL: FAX / E-MAIL ADDR	STATE ZIP CC CA 9453 ESS	
4. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California Executed on	this statement and to the best of my knot that the foregoing is true and correct. By By Signature of Corr	Sunhibre of Treasurer or Assistant T		es is true and complete. I certify
Executed on	Ву	Signature of Controlling Officeholder, Candidate, St. Signature of Controlling Officeholder, Candidate, St.		 FPPC Form 460 (Jan/2016

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

Recipient Committee Campaign Statement Cover Page — Part 2



. Officeholder or Candidate Controlled Con	ımittee	(6.	Primarily Formed Ballot	Measure	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE				NAME OF BALLOT MEASURE				
Paul Fadelli								
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIST	RICT NUMBER IF APPLICA	BLE)		BALLOT NO. OR LETTER	JURISDICTI	NC		SUPPORT
City Council Member: City of El Cerrito								OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE	ZIP						
8646 Arbor Drive	El Cerrito CA	94530		Identify the controlling offic		· · · · · · · · · · · · · · · · · · ·	te measure	proponent, if any.
				NAME OF OFFICEHOLDER, CAND	IDATE, OR PR	OPONENT		
Related Committees Not Included in this S not included in this statement that are controlled by your contributions or make expenditures on behalf of your	ou or are primarily formed			OFFICE SOUGHT OR HELD		C	DISTRICT NO.	IF ANY
COMMITTEE NAME	I.D. NUMBER							
			7.	Primarily Formed Candi	date/Offic	eholder Con	nmittee <i>L</i>	ist names of
NAME OF TREASURER	CONTROLLED COMMIT	ITEE?		officeholder(s) or candidate(s)				
COMMITTEE ADDRESS STREET ADDRESS (NO P.O	1			NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUGH	HT OR HELD	SUPPORT
·	•							OPPOSE
CITY STATE ZIF	CODE AREA CO	DDE/PHONE		NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUGH	IT OR HELD	☐ SUPPORT
								OPPOSE
COMMITTEE NAME	I.D. NUMBER			NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUGH	HT OR HELD	
				TANKE OF OTTOCKOLOGIC ON OA	(40)0/(12	0.1102 0000.		SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMIT			NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUGH	HT OR HELD	SUPPORT
	YES NO	0						OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O	BOX)							
CITY STATE ZIF	CODE AREA CO	DDE/PHONE		Attach	continuatio	on sheets if ne	cessary	
							-	

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

		SUMMARY PAGE
Statem	ent covers period	CALIFORNIA 160
from	07/01/2018	FORM TOO
through _	12/31/2018	Page3 of13
		I.D. NUMBER

NAME OF FILER Friends of Fadelli for City Council 2016 1382665 Column A Column B Calendar Year Summary for Candidates Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROMATTACHED SCHEDULES) TOTALTODATE General Elections 1/1 through 6/30 7/1 to Date <u>5,</u>000.00 15,000.00 2. Loans Received Schedule B, Line 3 20. Contributions \$ _____ 15,001.00 Received 0.00 21. Expenditures Made \$ 15,001.00 **Expenditures Made Expenditure Limit Summary for State** Candidates 6. Payments Made _______ Schedule E, Line 4 \$ ______ 3,804.93 22. Cumulative Expenditures Made* \$ ____3,804.93 (If Subject to Voluntary Expenditure Limit) 0.00 0.00 Date of Election Total to Date (mm/dd/yy) 0.00 0.00 10. Nonmonetary Adjustment Schedule C, Line 3 **Current Cash Statement** To calculate Column B. add 5,001.00 amounts in Column A to the corresponding amounts *Amounts in this section may be different from amounts 17.40 14. Miscellaneous Increases to Cash Schedule I, Line 4 from Column B of your last reported in Column B. report. Some amounts in 2,135.13 Column A may be negative 4,408.23 figures that should be 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 17. LOAN GUARANTEES RECEIVED Schedule B. Part 2 \$ carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). FPPC Form 460 (Jan/2016)

Schedule Monetary	A Contributions Received	Amounts may be rounded to whole dollars. Statement covers period from 07/01/2018		CAL F	SO IFORNIA ORM	460		
SEE INSTRUCTION	ONS ON REVERSE			through <u>12/31/2</u>	018	Page	4 of _	13
NAME OF FILER				<u> </u>		I.D. NI	JMBER	
Friends of	Fadelli for City Council 2016					1382	665	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE T CALENDAR (JAN. 1 - DE	YEAR	PER ELEC TO DA (IF REQU	TE
		OIND COM OTH PTY SCC						
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
			SUBTOTALS	0.00				an di sipilia. Esperante
1. Amount re	A Summary eceived this period – itemized monetary contributions. Il Schedule A subtotals.)		\$	0.00	IND			CC)
2. Amount re	eceived this period – unitemized monetary contributions etary contributions received this period.				PTY	l – Other –Politica	(e.g., business	entity)
	s 1 and 2. Enter here and on the Summary Page, Colu	mn A, Line 1.)	TOTAL \$	1.00				

SCHE	שווח	P.P	ART 1

Loans Received	Am	ounts may be ro to whole dollar				•	CALIFORN FORM	^{IIA} 460
SEE INSTRUCTIONS ON REVERSE					through12/3	1/2018	Page 5	of <u>13</u>
NAME OF FILER							I.D. NUMBER	
Friends of Fadelli for City Council 2	016						1382665	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER LD. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIOL	N. CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Paul L. Fadelli 8646 Arbor Drive El Cerrito, CA 94530	Program Manager San Francisco Bay Area Rapid Transit			PAID \$0.00	\$ 5,000.00	0.00 % RATE	\$_5,000.00	CALENDAR YEAR \$ 5,000.00 PERELECTION**
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$ 5,000.00	\$0.00	\$ 0.00	DATE DUE	\$ 0.00	03/09/2016 DATE INCURRED	s
Paul L. Fadelli 8646 Arbor Drive El Cerrito, CA 94530	Program Manager San Francisco Bay Area Rapid Transit			\$O.00	\$ 5,000.00	0.00 % RATE	\$ 5,000.00	CALENDAR YEAR \$ 5,000.00 PER ELECTION ***
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		s <u>5,000.00</u>	\$0.00	\$ 0.00	DATE DUE	\$ 0.00	10/07/2016 DATE INCURRED	\$
Paul L. Fadelli 8646 Arbor Drive El Cerrito, CA 94530	Program Manager San Francisco Bay Area Rapid Transit			PAID \$ 0.00 FORGIVEN	\$ 5,000.00	0.00 % RATE	\$ 5,000.00	CALENDAR YEAR \$ 5,000.00 PER ELECTION **
TM IND □ COM □ OTH □ PTY □ SCC		\$	\$ 5,000.00	\$ 0.00	09/04/2019 DATE DUE	\$ 0.00	09/04/2018 DATE INCURRED	\$
		SUBTOTALS \$	5,000.00	\$ 0.0	00\$ 15,000.00	\$ 0.00		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
Loans received this period (Total Column (b) plus unitemized loan				\$	5,000.00	(†C	Contributor Codes	;
 Loans paid or forgiven this period (Total Column (c) plus loans under \$10 (Include loans paid by a third party tha 	0 paid or forgiven.)			\$	0.00	O ⁻ P1	TH – Other (e.g., ſY – Political Part	PTY or SCC) business entity) y
 Net change this period. (Subtract Line Enter the net here and on the Summar 	e 2 from Line 1.)y Page, Column A, Line 2.	•••••		NET \$	5,000.00 May be a negative number)	SC	CC – Small Contril	outor Committee
*Amounts forgiven or paid by another party also	must be reported on Schedule A.)						

FPPC Form 460 (Jan/2016)
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www.fppc.ca.gov

** If required.

Supporti Candidat	y of Expenditures ng/Opposing Other es, Measures and Committees	Amounts may be rounded to whole dollars. CHANGE TO Statement covers per		D18 FO		
NAME OF FILER	IONS ON RÉVERSE			uirougii	Page	
Friends of	Fadelli for City Council 2016				13826	65
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/20/2018	Buffy Wicks State Assembly Person District: 15 X Support Oppose			250.00	250.00	G2018 \$250.00
07/25/2018	Democractic Party of Contra Costa X Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure		25.00	275.00	
09/18/2018	A charter City and Real Property Transfer Tax for the City of El Cerrito Measure: V City of El Cerrito X Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure		250.00	250.00	
			SUBTOTAL \$	525.00		
1. Contributi	D Summary ons and independent expenditures made this period od contributions and independent expenditures made	•				
3. Total conf	tributions and independent expenditures made this	period. (Add Lines 1 a	nd 2. Do not enter on the S	Summary Page.)	TOTAL \$_	904.98

Summary Supporti	e D lation Sheet) y of Expenditures ng/Opposing Other res, Measures and Committees	Amounts may l to whole d		from07/01/20	SCHEDU Statement covers period CALIFORNIA FORM	
	Fadelli for City Council 2016					82665
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO D. CALENDAR YEAR (JAN. 1 - DEC. 31)	ATE PER ELECTION
09/05/2018	Rita Xavier City Council Member City of San Pablo District: 15	Monetary Contribution Nonmonetary Contribution Independent Expenditure		129.98	129	. 98
09/29/2018	Nancy Skinner State Senator District: 9 X Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure		125.00	125	.00 P2020 \$125.00
09/06/2018	Cesar Zepeda City Council Member City of Richmond District: 4 X Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure		125.00	125	.00
	Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure				
			SUBTOTA	_ \$ 379.98		

Schedule E	
Payments Made	

NAME OF FILER

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars,

	SCHEDULE 6
Statement covers period	CALIFORNIA / CO
from07/01/2018	FORM TUU
through 12/31/2018	Page8 of13
	I.D. NUMBER
	1200665

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions OFC office expenses CTB contribution (explain nonmonetary)* SAL campaign workers' salaries CVC civic donations petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor legal defense PRO professional services (legal, accounting) VOT voter registration campaign literature and mailings WEB information technology costs (internet, e-mail) PRT print ads

NAME AND ADDRESS (IF COMMITTEE, ALSO ENTER	ODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Card Service Center 5055 Norwood Road Dallas, TX 75356	Cred	lit Card Payment	25.00
Card Service Center 5055 Norwood Road Dallas, TX 75356	Cred	it Card Payment	254.98
Card Service Center 5055 Norwood Road Dallas, TX 75356	Cred	it Card Payment	375.00

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

SUBTOTAL\$ 654.98

Schedule E Summary

FPPC Form 460 (Jan/2016)

Schedule E
(Continuation Sheet)
Payments Made

Amounts may be rounded to whole dollars.

		SCHĒĎULE E (CONT.)
Statement covers period m07/01/2018		CALIFORNIA 460
m	07/01/2018	FORW

Payments Made	to whole dollars.	from07/01/2018	FORM 400
EEE INSTRUCTIONS ON REVERSE		through 12/31/2018	Page9 of13
IAME OF FILER			I.D. NUMBER
Friends of Fadelli for City Council 2016			1382665

					150200	
CODES: If one of the	following codes accurately describe	es the	payment, you may enter the code.	Otherwise,	describe the payment.	
CMP campaign paraphernal campaign consultants contribution (explain not civic donations) FIL candidate filing/ballot fundraising events independent expenditure legal defense LT campaign literature and	onmonetary)* ees re supporting/opposing others (explain)*		meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger services	VOT	radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the sar voter registration information technology costs (internet, etc.)	ne candidate/sponsor
	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTIO	ON OF PAYMENT	AMOUNT PAID

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF I	PAYMENT AMOUNT PAID
Card Service Center 5055 Norwood Road Dallas, TX 75356		Credit Card Payment	100.00
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		235.25
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		165.05
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		171.67
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		237.64

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

SUBTOTAL \$

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

State	ment covers period	CALIF	ORNI	Ą	À	a
from	07/01/2018	FO	RM		10)	
through	12/31/2018	Page _	10	_ of_	13	
		I.D. NUM	1BER			

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

1382665

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions SAL campaign workers' salaries CTB contribution (explain nonmonetary)* OFC office expenses CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees PHO phone banks candidate travel, lodging, and meals FIL staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research TRS independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services transfer between committees of the same candidate/sponsor ND TSF LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings WEB information technology costs (internet, e-mail) LIT print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO			160.10
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO			160.10
Maintain El Cerrito Services Support Charter City 2018 (ID# 1409524) 10890 San Pablo Avenue El Cerrito, CA 94530	СТВ			250.00

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

SUBTOTAL \$

Schedule G Payments Made by an Agent or Independent Contractor (on Rehalf of This Committee)

Amounts may be rounded to whole dollars.

Stater	nent covers period	CALLEGENIA
from	07/01/2018	FORM 460
through_	12/31/2018	Page 11 of 13

Contractor (on Denair of This Confinitiee)	110111	
SEE INSTRUCTIONS ON REVERSE	through 12/31/2018	Page <u>11</u> of <u>13</u>
NAME OF FILER		I.D. NUMBER
Friends of Fadelli for City Council 2016		1382665
NAME OF AGENT OR INDEPENDENT CONTRACTOR		
Card Carvice Center		

Card Service Center

CO	DES: If one of the following codes accurately describe	s the	payment, you may enter the code.	Otherwise	e, describe the payment.
CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL.	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AM	OUNT PAID
Buffy Wicks for Assembly 2018 (ID# 1396734) 2930 Shattuck Avenue, Suite 306 Berkeley, CA 94705	СТВ			250.00
Democractic Party of Contra Costa (ID# 990861) 702 Windmill Court Concord, CA 94518	CTB			25.00
Joel Keller 300 Lakeside Drive, 23rd Floor Oakland, CA 94612	CVC			100.00
Rita Xavier for City Council 2018 (ID# 1413717) 555 Bryant Street, Suite 942 Palo Alto, CA 94301	СТВ			129.98
Attach additional information on appropriately labeled continuation she	eets.		TOTAL* \$	504.98

^{*} 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 G (Continuation Sheet)
Payments Made by an Agent or Independent
Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

SCH "EG (CONT.) Statement covers period **CALIFORNIA** 07/01/2018 **FORM** through __12/31/2018 Page ___12__ of __13__ I.D. NUMBER 1382665

VOT voter registration

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Fadelli for City Council 2016

NAME OF AGENT OR INDEPENDENT CONTRACTOR.

Card Service Center

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions

CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs

candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals

independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services transfer between committees of the same candidate/sponsor TSF

LEG legal defense professional services (legal, accounting) campaign literature and mailings print ads WEB information technology costs (internet, e-mail) PRT

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	٨	MOUNT PAID
Skinner for Senate 2020 (ID# 1392359) 1787 Tribute Road, Suite K Sacramento, CA 95815	CTB				125.00
Zepeda for Richmond City Council 2018 (ID# 1405677) 633 23rd Street Richmond, CA 94804	СТВ				125.00
Attach additional information on appropriately labeled continuation sheets.	<u> </u>		T	DTAL* \$	250.00

^{*} 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 I				SCHEDULE
Miscellaneous Inc	creases to Cash	Amounts may be rounded to whole dollars.	Statement covers period	CALIFORNIA A CO
		to whole dollars.	from07/01/2018	FORM TOU
SEE INSTRUCTIONS ON REVER	SE.		through 12/31/2018	Page13 of13
NAME OF FILER				I.D. NUMBER
Friends of Fadelli for	City Council 2016			1382665
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DE	ESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
			,	
Attach additional inform	nation on appropriately labeled continuation sheets.		SUBTOTA	1.5
Schedule I Summa	-			
	cash this period.			
	s to cash of under \$100 this period.			
	eceived this period on loans made to others. (Sch		\$\$.	<u> </u>
	increases to cash this period. (Add Lines 1, 2, a		TOTAL \$	40
, , , , , , , , , , , , , , , , , , , ,	,			EDDC Form 460 (lan/2016

Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5) SEE INSTRUCTIONS ON REVERSE	Statement covers period from01/01/2018 through06/30/2018	Date of election if applicable: (Month, Day, Year)	RECEIVED JUL 3 1 2018	For Official Use Only
O State Candidate Election Committee O Recall (Also Complete Part 5) ☐ General Purpose Committee O Sponsored O Small Contributor Committee	rimarity Formed Balfot Measure ommittee) Controlled) Sponsored (so Complete Part 6) rimarity Formed Candidate/ fficeholder Committee (so Complete Part 7)	2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te	Specing Supporting State	terly Statement ial Odd-Year Report olemental Preelection ment - Attach Form 495
3. Committee information		Treasurer(s) NAME OF TREASURER Shawnda Deane MAILING ADDRESS 1787 Tribute Road, Su CITY Sacramento NAME OF ASSISTANT TREASURE	STATE ZIP CO CA 958	
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO 1787 Tribute Road, Suite K CITY STATE ZIP CO Sacramento CA 9581. OPTIONAL: FAX / E-MAIL ADDRESS Fadelli2016@deaneandcompany.com 4. Verification	DE AREA CODE/PHONE 5	MAILING ADDRESS 8646 Arbor Drive CITY El Cerrito OPTIONAL: FAX / E-MAIL ADDR		30 (916) 285-5733
I have used all reasonable diligence In preparing and reviewing under penalty of perjury under the laws of the State of California Executed on	a that the foregoing is true and correct. By	Signature of Controlling Officeholder, Candidate, Signature of Controlling Officeholder, Candidate, State Measure of Controlling Officeholder, Candidate, Signature of Controlling Officeholder, Candidate, Signature of Controlling Officeholder, Candidate, S	Treasurer v ponent or Responsible Officer of Sponsor late Measure Proponent	lies is true and complete. I certify

Recipient Committee Campaign Statement Cover Page — Part 2

			-PART2					
CALIFORNIA 460								
FC	/KIVI							
Page _	2	. of	9					

NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
NAME OF OFFICE IDEBLICATION OF ONIONALE			MANUE OF BALLOT MEAGOINE			
Paul Fadelli		***************************************		I PROPERTY OF	····	
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIST	RICT NUMBER IF APPLICABL	E)	BALLOT NO. OR LETTER	JURISDICTION		SUPPORT OPPOSE
City Council Member: City of El Cerrito						OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE	ZIP				
8646 Arbor Drive	El Cerrito CA	94530	Identify the controlling office	ceholder, candidate, or	state measure p	roponent, if an
0049 WIDOL DIIVE	EI CEILICO CA	3 4 330	NAME OF OFFICEHOLDER, CAND	DIDATE, OR PROPONENT		
military di Charles de la Marcha de la Colonia de la Colon			•			
Related Committees Not Included in this S not included in this statement that are controlled by yo	-		OFFICE SOUGHT OR HELD		DISTRICT NO. IF	ANY
contributions or make expenditures on behalf of your		o receive				
COMMITTEE NAME	Lis Augusts					
COMMITTEENAME	I.D. NUMBER					
NAME OF TREASURER	CONTROLLED COMMITTI	7	 Primarily Formed Cand 			
	TYES TNO		officeholder(s) or candidate(s)	for which this committee	is primarily forme	ed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.C			NAME OF OFFICEHOLDER OR CA	ANDIDATE OFFICE SC	DUGHT OR HELD	SUPPORT
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,					OPPOSE
CITY STATE ZI	P CODE AREA COD	E/PHONE	NAME OF OFFICE VOLUME OF OF	NDDATE OFFICE OF	UNIT OF HELP	
SITE 2:	NICA OOD	L/I HONE	NAME OF OFFICEHOLDER OR CA	ANDIDATE OFFICE SC	OUGHT OR HELD	☐ SUPPORT
				1		OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR CA	ANDIDATE OFFICE SC	OUGHT OR HELD	
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR CA	ANDIDATE OFFICE SC	DUGHT OR HELD	SUPPORT
			NAME OF OFFICEHOLDER OR CA	ANDIDATE OFFICE SC	DUGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	CONTROLLED COMMITTE	EE?	NAME OF OFFICEHOLDER OR CA		OUGHT OR HELD	
VAME OF TREASURER	CONTROLLED COMMITTI	EE?				OPPOSE
	CONTROLLED COMMITTI	EE?				OPPOSE SUPPORT
VAME OF TREASURER	CONTROLLED COMMITTI	EE?				OPPOSE SUPPORT

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

Column A

TOTAL THIS PERIOD

(FROMATTACHED SCHEDULES)

0.00

0.00

0.00

0.00

Column B

CALENDAR YEAR

TOTALTODATE

10,000.00

10,000.00

10,000.00

0.00

Statem	ent covers period	CALIFORNIA 460
rom	01/01/2018	FORM 400
hrough <u> </u>	06/30/2018	Page3 of9

SEE INSTRUCTIONS ON REVERSE

Contributions Received

Current Cash Statement

NAME OF FILER

Friends of Fadelli for City Council 2016

3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$

5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 \$ _____

12. Beginning Cash Balance Previous Summary Page, Line 16 \$

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

14. Miscellaneous Increases to Cash Schedule I, Line 4

15. Cash Payments Column A, Line 8 above

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

Cash Equivalents and Outstanding Debts

4. Nonmonetary Contributions Schedule C, Line 3

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

I.D. NUMBER

General Elections

1/1 through 6/30 7/1 to Date

20. Contributions
Received \$ ______\$

21. Expenditures
Made \$ _____\$

Expenditures Made		
6. Payments Made Schedule E, Line 4	\$ 1,669.80	\$ 1,669.80
7. Loans Made Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 1,669.80	\$ 1,669.80
9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3	0.00	0.00
10. Nonmonetary Adjustment	0.00	0.00
11. TOTAL EXPENDITURES MADE	\$ 1,669.80	\$ 1,669.80

Expenditure Limit Summary for State Candidates

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

Date of Election (mm/dd/yy) Total to Date

SUMMARY PAGE

_______\$_____

To calculate Column B, add amounts in Column A to the 0.00 corresponding amounts 0.00 from Column B of your last report. Some amounts in 1,669.80 Column A may be negative 1,524.96 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).

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

Schedule B - Part 1 **Loans Received**

Amounts may be rounded to whole dollars.

		SC	HEDULE B-PART
Stateme	ent covers period	CALIFOR	NIA 160
from	01/01/2018	FORM	
through _	06/30/2018	Page 4	of <u>9</u>
•		I.D. NUMBER	

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Friends of Fadelli for City Council 20	016						1382665	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IFCOMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Paul L. Fadelli 8646 Arbor Drive El Cerrito, CA 94530	Program Manager San Francisco Bay Area Rapid Transit			PAID \$ 0.00 FORGIVEN	\$ 5,000.00	0.00 % RATE	\$ 5,000.00	\$ 0.00 PERELECTION*
†☑IND □ COM □ OTH □ PTY □ SCC		\$ 5,000.00	\$0.00	\$ 0.00	12/31/2018 DATE DUE	\$0.00	03/09/2016 DATE INCURRED	\$
Paul L. Fadelli 8646 Arbor Drive El Cerrito, CA 94530	Program Manager San Francisco Bay Area Rapid Transit			\$ 0.00	\$ 5,000.00	<u>0.00</u> % RATE	\$ 5,000.00	\$ 0.00 PER ELECTION*
[†] ☑IND □ COM □ OTH □ PTY □ SCC		\$_5,000.00	\$0.00	\$ 0.00	12/31/2018 DATE DUE	\$ 0.00	10/07/2016 DATE INCURRED	\$
				PAID \$ FORGIVEN	\$	% RATE	\$	CALENDAR YEAR \$ PER ELECTION*
† IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
		SUBTOTALS \$	0.00	0.00	\$ 10,000.00	\$ 0.00		

Schedule B Summary

(Enter (e) on Schedule E, Line 3)

1.	Loans received this period(Total Column (b) plus unitemized loans of less than \$100.)	\$	0.00
2.	Loans paid or forgiven this period	\$	0.00
3.	Net change this period. (Subtract Line 2 from Line 1.)	*	0.00 (May be a negative number)

†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

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

Schedule D SCHEDULE D **Summary of Expenditures** Statement covers period CALIFORNIA Amounts may be rounded Supporting/Opposing Other to whole dollars. **FORM** 01/01/2018 Candidates, Measures and Committees from. through 06/30/2018 SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Friends of Fadelli for City Council 2016 1382665 CUMULATIVE TO DATE PER ELECTION NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR DESCRIPTION DATE TYPE OF PAYMENT AMOUNT THIS CALENDAR YEAR TO DATE MEASURE NUMBER OR LETTER AND JURISDICTION. (IF REQUIRED) PERIOD (IF REQUIRED) (JAN. 1 - DEC. 31) OR COMMITTEE 03/28/2018 Democractic Party of Contra Costa 250.00 X Monetary Contribution ☐ Nonmonetary Contribution Independent Oppose Expenditure ☑ Support 01/24/2018 Diana Becton 100.00 100.00 X Monetary District Attorney Contribution Contra Costa County ☐ Nonmonetary Contribution Independent Expenditure X Support Oppose ☐ Monetary Contribution Nonmonetary Contribution Independent Expenditure ☐ Support Oppose SUBTOTAL \$ 350.00 Schedule D Summary 350.00 1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)......\$ 0.00

NAME OF FILER

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

	SCHEDULE E
Statement covers period	CALIFORNIA 460
from01/01/2018	FORM FOU
through06/30/2018	Page6 of9
	I.D. NUMBER

1382665

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees TRC candidate travel, lodging, and meals PHO phone banks POL polling and survey research FND fundraising events TRS staff/spouse travel, lodging, and meals IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense PRO professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

	NAME, AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Card Service Center 5055 Norwood Road Dallas, TX 75356		Credit	Card Payment	150.00
Card Service Center 5055 Norwood Road Dallas, TX 75356		Credit	Card Payment	100.00
Card Service Center 5055 Norwood Road Dallas, TX 75356		Credit	Card Payment	250.00

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

SUBTOTAL\$ 500.00

Schedule E Summary

FPPC Form 460 (Jan/2016)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772) www.fppc.ca.gov

Schedule E (Continuation Sheet) **Payments Made**

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.

	SCHEDULE E (CONT.
Statement covers perio	CALIFORNIA
from 01/01/2018	FORM TOU
through <u>06/30/2018</u>	Page of9
	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Friends of Fadelli for City Council 2016 1382665

CMP campaign paraphernalia/misc. RAD radio airtime and production costs MBR member communications CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations petition circulating t.v. or cable airtime and production costs PET TEL FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals FND fundraising events polling and survey research TRS staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF professional services (legal, accounting) VOT voter registration LEG legal defense PRO UT campaign literature and mailings PRT WEB information technology costs (internet, e-mail) print ads NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Deane & Company PRO 234.80 1787 Tribute Road, Suite K Sacramento, CA 95815 Deane & Company PRO 168.55 1787 Tribute Road, Suite K Sacramento, CA 95815 161.30 Deane & Company PRO 1787 Tribute Road, Suite K Sacramento, CA 95815 237.05 Deane & Company PRO 1787 Tribute Road, Suite K Sacramento, CA 95815 158.90 Deane & Company PRO 1787 Tribute Road, Suite K Sacramento, CA 95815

960.60

SUBTOTAL \$

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

Schedule E
(Continuation Sheet)
Payments Made

SCHEDUL	FF	CONTI
	1	CONT

(Continuation Sheet) Payments Made	Amounts may be to whole do			Sta from_	01/01/2018	CALIFO FOR	RNIA 460
SEE INSTRUCTIONS ON REVERSE				throug	gh <u>06/30/2018</u>	Page	8 of9
NAME OF FILER						I.D. NUMBI	ER
Friends of Fadelli for City Council 2016						1382665	
CODES: If one of the following codes accurately described. CMP campaign paraphernalia/misc. CNS campaign consultants contribution (explain nonmonetary)* civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* legal defense LIT campaign literature and mailings	MBR member com MTG meetings and OFC office expen PET petition circul PHO phone banks POL polling and s POS postage, deli	munications I appearance ses ating urvey resear	s	RAD RFD SAL TEL TRC TRS TSF VOT	describe the payment radio airtime and production returned contributions campaign workers' salariet. V. or cable airtime and production candidate travel, lodging, a staff/spouse travel, lodging transfer between committed voter registration information technology contribution.	on costs es roduction costs and meals g, and meals ees of the san	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE ()R	DESCRIPTION	OF PAYMENT		AMOUNT PAID
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815		PRO					159.20
*Payments that are contributions or independent expenditures must a	lso he summarizad an	Schedule D			S	SUBTOTAL \$	159.20
	De Summanzea Offic	Jonesia D.					

Schedule G	
Payments Made by an Agent or Independer	nt
Contractor (on Behalf of This Committee)	

Amounts may be rounded to whole dollars.

		OUMEDULE G
Statement covers period		CALIFORNIA 460
	from01/01/2018	FORM 400
	through 06/30/2018	Page9 of9
		I.D. NUMBER
		1382665

WEB information technology costs (internet, e-mail)

Friends of Fadelli for City Council 2016

NAME OF AGENT OR INDEPENDENT CONTRACTOR

campaign literature and mailings

Card Service Center

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

COI	DES: If one of the following codes accurately describe	s the	payment, you may enter the code.	Otherwis	e, describe the payment.
CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
ND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration

PRT print ads

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Democractic Party of Contra Costa (ID# 990861) 702 Windmill Court Concord, CA 94518	CTB		250.00
Diana Becton for District Attorney 2018 (ID# 1400551) 1588 Fitzgerald Drive, Suite 249 Pinole, CA 94564	СТВ		100.00
Mark DeSaulnier for Congress 2121 Meridian Park Blvd. Concord, CA 94520	Federa	l Contribution	150.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

^{*} 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.

D	nainiant Cammittaa					COVER PAGE
C	ecipient Committee ampaign Statement over Page overnment Code Sections 84200-84216.5)			Date Stamp RECEIVE		ALIFORNIA 460
	E INSTRUCTIONS ON REVERSE	Statement covers period from	Date of election if applicable: (Month, Day, Year)	JAN 3 1 201 City of El Cerrito City Clerk		ge1 of S For Official Use Only
1.	Type of Recipient Committee: All Committees -	Complete Parts 1, 2, 3, and 4,	2. Type of Statement:			
		Primarily Formed Ballot Measure Committee. Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 To	ermination)	Suppleme	Statement Id-Year Report Ital Preelection - Attach Form 495
3.	Committee Information	I.D. NUMBER 1382665	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTE Friends of Fadelli for City Council 2016 STREET ADDRESS (NO P.O. BOX)		:E)	NAME OF TREASURER Shawnda Deane MAILING ADDRESS 1787 Tribute Road, Su		ZIP CODE	AREA CODE/PHONE
	8646 Arbor Drive		Sacramento	CA	95815	(916)285-5733
	CITY STATE ZIP	CODE AREA CODE/PHONE	NAME OF ASSISTANT TREASUR	RER, IF ANY		
		1530 (916) 285-5733	Paul Fadelli			
	MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.C 1787 Tribute Road, Suite K), BOX	MAILING ADDRESS 8646 Arbor Drive		_	
	CITY STATE ZIP	CODE AREA CODE/PHONE	CITY		ZIP CODE	AREA CODE/PHONE
		815	El Cerrito	CA.	94530	(916)285-5733
	OPTIONAL: FAX / E-MAIL ADDRESS Fadell112016@deaneandcompany.com		OPTIONAL: FAX / E-MAIL ADDR	eess		
4.	Verification I have used all reasonable diligence in preparing and review under penalty of perjury under the laws of the State of California Distriction Executed on Executed on Date Executed on Date	ving this statement and to the best of my kirnla that the foregoing is true and correct. By By Signature of C	Auristand of Treasurer or Assistant	Treasurer ponent or Responsible Officer of Sp ate Measure Proponent	!	
						FPPC Form 460 (Jan/2016

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

Recipient Committee Campaign Statement Cover Page — Part 2

	COVER PAGE - PART 2
CALIF	ORNIA 160
FC	DRM 400
Page _	2 of8

NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF B	ALLOT MEASURE	····			
		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, 1220 1 11/2/100/100				
Paul Fadelli	SOLOT NUMBER IS A PRIMARY S	PALL OT NO	D. OR LETTER	JURISDICT	ION		
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIST	(RICT NUMBER IF APPLICABLE)	BALLOTING	J. OR LETTER	JUNISDICT	ON		SUPPORT OPPOSE
City Council Member: City of El Cerrito		M					1 011 002
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP	Identify t	he controlling of	fficeholder, ca	ındidate, or s	tate measure ¡	proponent, if an
8646 Arbor Drive	El Cerrito CA 94530	NAME OF (OFFICEHOLDER, CA	NDIDATE, OR PI	ROPONENT		
Related Committees Not Included in this S not included in this statement that are controlled by yo contributions or make expenditures on behalf of your	ou or are primarily formed to receive	OFFICE SC	DUGHT OR HELD			DISTRICT NO. I	F ANY
COMMITTEE NAME	I.D. NUMBER	**************************************					
		7 Primaril	v Formed Car	ıdidate/Offi	reholder Co	ommittee <i>i ii</i>	et names of
NAME OF TREASURER	CONTROLLED COMMITTEE?		y Formed Car er(s) or candidate(
NAME OF TREASURER	CONTROLLED COMMITTEE?	officehold	er(s) or candidate(s) for which th	is committee is	s primarily form	
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	YES NO	officehold		s) for which th	is committee is		
COMMITTEE ADDRESS STREET ADDRESS (NO P.O	YES NO	officehold NAME OF C	er(s) or candidate(s) for which the	OFFICE SOU	s primarily form	ed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O	YES NO	NAME OF C	er(s) or candidate(DFFICEHOLDER OR	s) for which the	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	P CODE AREA CODE/PHONE	NAME OF C	er(s) or candidate(DFFICEHOLDER OR DFFICEHOLDER OR	s) for which the	OFFICE SOU	GHT OR HELD GHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	P CODE AREA CODE/PHONE	NAME OF C	er(s) or candidate(DEFICEHOLDER OR DEFICEHOLDER OR DEFICEHOLDER OR	candidate Candidate Candidate Candidate	OFFICE SOU	GHT OR HELD GHT OR HELD GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. CITY STATE ZII COMMITTEE NAME NAME OF TREASURER	P CODE AREA CODE/PHONE I.D. NUMBER CONTROLLED COMMITTEE? YES NO	NAME OF C	er(s) or candidate(DFFICEHOLDER OR DFFICEHOLDER OR	candidate Candidate Candidate Candidate	OFFICE SOU	GHT OR HELD GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.C.) CITY STATE ZII COMMITTEE NAME	P CODE AREA CODE/PHONE I.D. NUMBER CONTROLLED COMMITTEE? YES NO	NAME OF C	er(s) or candidate(DEFICEHOLDER OR DEFICEHOLDER OR DEFICEHOLDER OR	candidate Candidate Candidate Candidate	OFFICE SOU	GHT OR HELD GHT OR HELD GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period CALIFORNIA FORM 07/01/2017 through _____12/31/2017 Page ___3___ of ___8_ I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Friends of Fadelli for City Council 2016 1382665

Filends CI Fadelii for City Council 2016					1302003
Contributions Received		Column A TOTAL THIS PERIOD (FROMATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions Schedule A, Line 3	\$	0.00	\$	0.00	
2. Loans Received		0.00		10,000.00	1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	0.00	\$	10,000.00	20. Contributions Received \$\$
4. Nonmonetary Contributions		0.00		0.00	21 Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	0.00	\$	10,000.00	Made \$\$
Expenditures Made					Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4			\$	2,902.08	Candidates
7. Loans Made Schedule H, Line 3				0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	1,585.95	\$	2,902.08	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3		0.00		0.00	Date of Election Total to Date
10. Nonmonetary Adjustment		0.00		0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$	1,585.95	\$	2,902.08	\$
Current Cash Statement	-				\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	4,780.71	To	calculate Column B, add	
13. Cash Receipts		0.00		ounts in Column A to the responding amounts	
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	m Column B of your last	*Amounts in this section may be different from amounts reported in Column B.
15. Cash Payments		1,585.95		ort. Some amounts in fumn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	3,194.76	figu	ures that should be otracted from previous	
If this is a termination statement, Line 16 must be zero.			per	find amounts. If this is first report being filed	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for	this calendar year, only ry over the amounts	
Cash Equivalents and Outstanding Debts			froi an	m Lines 2, 7, and 9 (if	
18. Cash Equivalents See instructions on reverse	\$	0.00	.	,,,-	
19. Outstanding Debts	\$	10,000.00			
			I		FPPC Form 460 (Jar
					FPPC Advice: advice@fppc.ca.gov (866/27

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Schedule B – Part ² Loans Received

Amounts may be rounded to whole dollars.

Statement covers period			CALIFOR	NIA 460
	from	07/01/2017	FORM	4100
	through _	12/31/2017	 Page4_	of <u>8</u>
			I.D. NUMBER	

SEE INSTRUCTIONS ON REVERSE					through $\frac{12/3}{}$	1/2017	Page4	of8
NAME OF FILER						I.D. NUMBER		
Friends of Fadelli for City Council 20	016						1382665	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAIC OR FORGIVEN THIS PERIOD	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTION TO DATE
Paul L. Fadelli 8646 Arbor Drive El Cerrito, CA 94530	Program Manager San Francisco Bay Area Rapid Transit			\$ 0.00	\$ 5,000.00	0.00 % RATE	\$ 5,000.00	\$ 0.00 PER ELECTION*
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$_5,000.00	\$0.00	\$0.00	12/31/2018 DATE DUE	\$ 0.00	03/09/2016 DATE INCURRED	\$
Paul L. Fadelli 8646 Arbor Drive El Cerrito, CA 94530	Program Manager San Francisco Bay Area Rapid Transit			\$ 0.00	\$_5,000.00	0.00 % RATE	\$ 5,000.00	\$ 0.00 PER ELECTION
[†] ⊠ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$_5,000.00	\$0.00	\$0.00	12/31/2018 DATE DUE	\$0.00	10/07/2016 DATE INCURRED	\$
				\$ FORGIVEN	\$	% RATE	\$	CALENDAR YEAR \$ PER ELECTION *
TO IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
		SUBTOTALS \$	0.00\$	0.0	0\$ 10,000.00	\$ 0.00		

Schedule B Summary

(Enter (e) on Schedule E, Line 3)

1.	Loans received this period	9	\$	0.00
	(Total Column (b) plus unitemized loans of less than \$100.)			
2.	Loans paid or forgiven this period	\$	\$	0.00
3.	Net change this period. (Subtract Line 2 from Line 1.)	IET \$	(May be a negative num) . 00 nber)

†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

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

** If required.

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Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees SEE INSTRUCTIONS ON REVERSE NAME OF FILER		Amounts may be rounded to whole dollars. Statement covers period from07/01/2017 through12/31/2017			17 Pa	CALIFORNIA 460 FORM Page 5 of 8		
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO I CALENDAR YEA (JAN. 1 - DEC. 31)	R TO DATE		
09/05/2017	Sierra Club, San Francisco Bay Chapter Campaigns SMO X Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	ALLEGO CONTROL	185.00	18	5.00		
08/21/2017	Nancy Skinner State Senator District: 9 X Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure		125.00	125	5.00 P2020 \$125.00		
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure						
			SUBTOTAL S	310.00				

Schedule D Summary

1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)	\$ 310.00

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

Schedule E Payments Made	Amounts may be rounded to whole dollars.		Stat	ement covers period		ORNIA 460	
SEE INSTRUCTIONS ON REVERSE				throug	jh <u>12/31/2017</u>		6 of 8
NAME OF FILER						I.D. NUI	
Friends of Fadelli for City Council 2016		· · · · ·				13826	65
CODES: If one of the following codes accurately describes CMP campaign paraphernalia/misc. CNS campaign consultants contribution (explain nonmonetary)* civic donations FIL candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense campaign literature and mailings	MBR member com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and s POS postage, del	imunications d appearance ises lating s survey resear ivery and me	s	RAD ra RFD re SAL ca TEL t.V TRC ca TRS st TSF tra VOT vo	scribe the payment. adio airtime and production beturned contributions ampaign workers' salarie or cable airtime and production andidate travel, lodging, a aff/spouse travel, lodging, ansfer between committed oter registration formation technology cos	es oduction cost and meals g, and meals ees of the sai	me candidate/sponsor
NAME AND ADDRESS OF PAYEE ()FCOMMITTEE, ALSO ENTER I.D. NUMBER)		CODE (DR DE	SCRIPTION O	F PAYMENT		AMOUNT PAID
Card Service Center 5055 Norwood Road Callas, TX 75356			Credit Card Paym	ent			20.0
Card Service Center 1055 Norwood Road Vallas, TX 75356			Credit Card Paym	ent			375.0
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815		PRO				1	235.7
Payments that are contributions or independent expenditures n	nust also be summ	arized on S	chedule D.		S	UBTOTAL\$	630.7
Schedule E Summary Itemized payments made this period. (Include all Schedule	E subtotals.)					\$	1,585.95

Schedule	E
(Continua	tion Sheet)
Payments	Made

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE	E.	(CONT.)

| Statement covers period | CALIFORNIA 460 | FORM |

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees phone banks candidate travel, lodging, and meals PHO FND fundraising events polling and survey research staff/spouse travel, lodging, and meals POL IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings WEB information technology costs (internet, e-mail) PRI print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		178.91
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		182.65
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		234.35
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		159.50
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		199.84
*D. 444.4			IDTOTAL \$ 0.55 0.5

 $^{^{}st}$ Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

Schedule G
Payments Made by an Agent or Independent
Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

	SCHEDULE G
Statement covers period	CALIFORNIA A CO
from07/01/2017	FORM 40U
through 12/31/2017	Page 8 of 8
	I.D. NUMBER
	1382665

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Fadelli for City Council 2016

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Card Service Center

CO	DES: If one of the following codes accurately describe	es the	payment, you may enter the code.	Otherwise	e, describe the payment.
CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Sierra Club, San Francisco Bay Chapter Campaigns SMO (ID# 1306869) 2530 San Pablo Avenue, Suite I Berkeley, CA 94702	CTB			185.00
Skinner for Senate 2020 (ID# 1392359) 1787 Tribute Road, Suite K Sacramento, CA 95815	CTB			125.00
		To make the state of the state		
Attach additional information on appropriately labeled continuation sheets.			TOTAL*	\$ 310.00

^{*} 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.

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

	es de la				COVERPAG
Recipient Committee		!	Dale Stamp	- 4	
Campaign Statement		·	DECENER		california 460
Cover Page			RECEIVED	' E	FURIN
(Government Code Sections 84200-84216.5)		1			
	Statement covers period	Date of election if applicable: (Month, Day, Year)	JUL 31 2017	'	Page of _ 6
	from 01/01/2017	(Monar, Bay, rear)		_	For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through06/30/2017		City of El Cerrito City Clerk		
1. Type of Recipient Committee: All Committees - Co	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:		······································	
∑ Officeholder, Candidate Controlled Committee □ F ○ State Candidate Election Committee □ Recall ○ Recall ○ (Also Complete Part 5) □ General Purpose Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored No Complete Part 6) Primarily Formed Candidate/	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te		Special Suppler	iy Slatement Odd-Year Report nental Preelection ent - Attach Form 495
O Small Contributor Committee	officeholder Committee Uso Complete Part 7)			_	
3. Committee information	NUMBER 1382665	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)		NAME OF TREASURER			
Friends of Fadelli for City Council 2016		Shawnda Deane			•
		MAILING ADDRESS			
		1787 Tribute Road, Su	ite K		
STREET ADDRESS (NO P.O. BOX)		CITY	STATE	ZIP CODE	E AREA CODE/PHONE
8646 Arbor Drive		Sacramento	. CA	95815	(916)285-573
CITY STATE ZIP CO	DE AREA CODE/PHONE	NAME OF ASSISTANT TREASUR	ER, IF ANY		
El Cerrito CA 9453		Paul Fadelli			
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. B 1787 Tribute Road, Suite K	OX .	MAILING ADDRESS 8646 Arbor Drive		-	
CITY STATE ZIP CO	DE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
Sacramento CA 9581	5	El Cerrito	. CA	94530	(916)285-573
OPTIONAL: FAX / E-MAIL ADDRESS Fadelli2016@deaneandcompany.com		OPTIONAL: FAX / E-MAIL ADDR	ESS	_	
Verification I have used all reasonable diligence in preparing and reviewing	this statement and to the best of fault now	wedge the information contained her	ein and in the attached	chedules	is true and complete. Licertify
under penalty of perjury under the laws of the State of California			on and removements		to the soft product of the soft of the sof

Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (Jan/2016)

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2		
CALIFORNIA 460		
Page2 of6		

Officeholder or Candidate Controlled Con	nmittee	6	. Primarily Form	ed Ballot Measur	e Committee	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MI	EASURE		
Paul Fadelli						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIST	TRICT NUMBER IF APPLICABI	LE)	BALLOT NO. OR LET	TER JURISDICT	TION	SUPPORT
City Council Member: City of El Cerrito						OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE	ZIP	Identify the contr	olling officeholder, c	andidate, or state measu	e proponent, if any.
8646 Arbor Drive	El Cerrito CA	94530	NAME OF OFFICEHO	DLDER, CANDIDATE, OR F	PROPONENT	
				,		
Related Committees Not Included in this statement that are controlled by you contributions or make expenditures on behalf of your	ou or are primarily formed		OFFICE SOUGHT OF	RHELD	DISTRICT N	O. IF ANY
COMMITTEE NAME	I.D. NUMBER					
NAME OF TREASURER	CONTROLLED COMMITT	TEE? 7			iceholder Committee his committee is primarily fo	
	YES NO	•	onicentialer(s) or c	andidate(s) for which th	ins committee is primarily it	rrinea.
COMMITTEE ADDRESS STREET ADDRESS (NO P.C.	D. BOX)	<u>.</u>	NAME OF OFFICEHO	LDER OR CANDIDATE	OFFICE SOUGHT OR HELI	SUPPORT OPPOSE
CITY STATE ZI	P CODE AREA COL	DE/PHONE	NAME OF OFFICEHO	LDER OR CANDIDATE	OFFICE SOUGHT OR HELI	SUPPORT
COMMITTEE NAME	I.D. NUMBER					Land -
			NAME OF OFFICEHO	LDER OR CANDIDATE	OFFICE SOUGHT OR HELI	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITT		NAME OF OFFICEHO	LDER OR CANDIDATE	OFFICE SOUGHT OR HELL	SUPPORT
	YES NO					OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.C	J. BUA)		:			
CITY STATE ZII	P CODE AREA COD	DE/PHONE		Attach continuat	ion sheets if necessary	
					•	

FPPC Form 460 (Jan/2016)

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Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

		SUNINA	IKT PAGE
Statem	ent covers period	CALIFORNIA /	60
from	01/01/2017	FORM	UU
through	06/30/2017	Page3 of	6
		I.D. NUMBER	

NAME OF FILER Friends of Fadelli for City Council 2016 1382665 Column A Column B Calendar Year Summary for Candidates Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROMATTACHED SCHEDULES) TOTAL TO DATE General Elections 0.00 0.00 1/1 through 6/30 7/1 to Date 10,000.00 0.00 2. Loans Received Schedule B, Line 3 20. Contributions 10,000.00 SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ 0.00 Received 0.00 4. Nonmonetary Contributions Schedule C, Line 3 21. Expenditures Made 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3+4 \$ _____ 0.00 10,000.00 **Expenditures Made Expenditure Limit Summary for State** Candidates 7. Loans Made Schedule H. Line 3 22. Cumulative Expenditures Made* \$ 1,316.13 (If Subject to Voluntary Expenditure Limit) 0.00 0,00 Date of Election Total to Date (mm/dd/yv) 10. Nonmonetary Adjustment Schedule C, Line 3 0.00 0.00 **Current Cash Statement** 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 6,096.84 To calculate Column B, add amounts in Column A to the corresponding amounts *Amounts in this section may be different from amounts 14. Miscellaneous Increases to Cash Schedule I, Line 4 0.00 from Column B of your last reported in Column B. report. Some amounts in 15. Cash Payments Column A, Line 8 above 1,316.13 Column A may be negative 4,780.71 figures that should be 16, ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 17, LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ _____ carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). 18. Cash Equivalents See instructions on reverse \$ FPPC Form 460 (Jan/2016)

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

Schedule B - Part
Loans Received

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

	SCHEDULE D - PART
Statement covers period	CALIFORNIA 460
from01/01/2017	FORM 400
through06/30/2017	Page4 of6
	I.D, NUMBER
	1

1382665 Friends of Fadelli for City Council 2016 (g) (a) OUTSTANDING IF AN INDIVIDUAL, ENTER OUTSTANDING FULL NAME, STREET ADDRESS AND ZIP CODE **AMOUNT** INTEREST **ORIGINAL** CUMULATIVE AMOUNT PAID OCCUPATION AND EMPLOYER BALANCE BALANCEAT OF LENDER RECEIVED THIS CONTRIBUTIONS PAID THIS **AMOUNT OF** OR FORGIVEN (IF SELF-EMPLOYED, ENTER **BEGINNING THIS** CLOSE OF THIS (IF COMMITTEE, ALSO ENTER I.D. NUMBER) PERIOD PERIOD TO DATE NAME OF BUSINESS) THIS PERIOD ' LOAN PERIOD PERIOD Paul L. Fadelli Program Manager CALENDAR YEAR ☐ PAID 8646 Arbor Drive San Francisco Bay Area El Cerrito, CA 94530 Rapid Transit 0.00 5,000.00 0.00 % \$ 5,000.00 0.00 RATE FORGIVEN PER ELECTION** s 5,000.00 0.00 12/31/2017 0.00 03/09/2016 DATE DUE DATE INCURRED TIND COM OTH PTY SCC Paul L. Fadelli Program Manager CALENDAR YEAR PAID San Francisco Bay Area 8646 Arbor Drive Rapid Transit El Cerrito, CA 94530 5,000.00 \$ 5,000.00 0.00 0.00 % 0.00 FORGIVEN PER ELECTION ** 5,000.00 0.00 0.00 10/07/2016 0.00 10/07/2017 DATE DUE DATE INCURRED TIND COM OTH PTY SCC CALENDAR YEAR ☐ PAID RATE FORGIVEN PER ELECTION** DATE DUE DATE INCURRED †□ IND □ COM □ OTH □ PTY □ SCC SUBTOTALS \$ 0.00\$ 0.00\$ 10,000.00\$

Schedule B Summary

(Enter (e) on Schedule E, Line 3)

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.)

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

Enter the net here and on the Summary Page, Column A, Line 2.

†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) w.fppc.ca.gov

Schedule E Payments Made

Amounts may be rounded to whole dollars.

	SCHEDULE E
Statement covers period	CALIFORNIA 160
from01/01/2017	FORM TOU
through06/30/2017	Page5 of6
	I.D. NUMBER
	1382665

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Friends of Fadelli for City Council 2016 **CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals FND fundraising events poiling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor ND POS professional services (legal, accounting) VOT voter registration legal defense PRO LEG campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail) NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Deane & Company PRO 336.75 1787 Tribute Road, Suite K Sacramento, CA 95815 Deane & Company PRO 193.28 1787 Tribute Road, Suite K Sacramento, CA 95815 Deane & Company PRO 182.45 1787 Tribute Road, Suite K Sacramento, CA 95815 * Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL\$ 712.48 Schedule E Summary 1. Itemized payments made this period. (Include all Schedule E subtotals.) 2. Unitemized payments made this period of under \$100\$ 50.00 0.00

FPPC Form 460 (Jan/2016) FPPC Toll-Free Helpline: 866/ASK-FPP^ (866/275-3772)

Schedule E

campaign paraphernalia/misc.

CMP

SCHLUL	ILE	E	(CONT.	.]
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(Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA 460	
Payments Made	to whole dollars.	from01/01/2017	FORM 400	
SEE INSTRUCTIONS ON REVERSE		through 06/30/2017	Page 6 of 6	
NAME OF FILER			I.D. NUMBER	
Friends of Fadelli for City Council 2016			1382665	
CODES: If one of the following codes accura	ately describes the payment, you may enter the code. Of	therwise describe the navment		

MBR member communications

CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services transfer between committees of the same candidate/sponsor LEG legal defense PRO professional services (legal, accounting) VOT voter registration LIT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail) NAME AND ADDRESS OF PAYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID Deane & Company PRO 234,80 1787 Tribute Road, Suite K Sacramento, CA 95815 Deane & Company PRO 160.10 1787 Tribute Road, Suite K Sacramento, CA 95815 Deane & Company PRO 158.75 1787 Tribute Road, Suite K Sacramento, CA 95815

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

SUBTOTAL \$

553.65

RAD radio airtime and production costs

V
457

Paginiant Committee				COVER PAGE
Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)			Date Stamp RECEIVED	CALIFORNIA 460
	Statement covers period from 10/23/2016	Date of election if applicable: (Month, Day, Year)	JAN 3 1 2017 City of El Cerrito	Page 1 of 9
SEE INSTRUCTIONS ON REVERSE	through12/31/2016		City Clerk	
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor 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 To	Spec Suppermination) State	terly Statement ial Odd-Year Report Demental Preelection ment - Attach Form 495
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Friends of Fadelli for City Council 2016 STREET ADDRESS (NO P.O. BOX)	D. NUMBER 1382665	Treasurer(s) NAME OF TREASURER Shawnda Deane MAILING ADDRESS 1787 Tribute Road, Su	lite K STATE ZIP CO	DDE AREA CODE/PHONE
8646 Arbor Drive CITY STATE ZIP CO	DDE AREA CODE/PHONE	Sacramento NAME OF ASSISTANT TREASU	CA 958.	15 (916) 285-5733
El Cerrito CA 9453 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. E 1787 Tribute Road, Suite K	0 (916)285-5733	Paul Fadelli MAILING ADDRESS 8646 Arbor Drive		
CITY STATE ZIP CO Sacramento CA 9581 OPTIONAL: FAX / E-MAIL ADDRESS Fadelli2016@deaneandcompany.com		El Cerrito OPTIONAL: FAX / E-MAIL ADDR	STATE ZIP CO CA 945 RESS	
4. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of Californi Executed on	a that the foregoing is true and correct. By	owledge the information contained he Signature of Treasurer or Assistant Multiplication of Treasurer or Assistant antrolling Officeholder, Candidate, State Measure Pro	Treasurer	les is true and complete. I certify

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 46°. (Ian/2016)
FPPC Advice: advice@fppc.ca.gov (.75-3772)

www.rppc.ca.gov

Executed on __

Date

Date

	COVER PAGE - PAR	T2
CALIE	ORNIA ACA	ares.
EC	EM 4.0	
Page	2 of9	- 1

Officeholder or Candidate Controlled Committee			Primarily Formed Ballo	ot Measure Comn	nittee	
NAME OF OFFICEHOLDER OR CANDIDATE		~~	NAME OF BALLOT MEASURE			
Paul Fadelli						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	RICT NUMBER IF APPLICABLE)	BALLOT NO. OR LETTER	JURISDICTION		SUPPORT
City Council Member: City of El Cerrito						OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE	ZIP				
8646 Arbor Drive	El Cerrito CA	94530	Identify the controlling off		· · · · · · · · · · · · · · · · · · ·	proponent, if any
			NAME OF OFFICEHOLDER, CAN	NDIDATE, OR PROPONEI	VT	
Related Committees Not Included in this S	tatament: List any same	nittage				
not included in this statement that are controlled by you contributions or make expenditures on behalf of your contributions.	or are primarily formed to		OFFICE SOUGHT OR HELD		DISTRICT NO.	IF ANY
COMMITTEE NAME	I.D. NUMBER	***************************************			L	
		7	. Primarily Formed Can	didata/Officabold	er Committee	ist names of
NAME OF TREASURER	CONTROLLED COMMITTE	E?	officeholder(s) or candidate(s			
	YES NO		NAME OF OFFICEHOLDER OR	OANIDIDATE TOFFIC	E SOUGHT OR HELD	
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	BOX)		NAME OF OFFICEHOLDER OR	CANDIDATE OFFIC	E SOUGHT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP	CODE AREA CODE	/PHONE	NAME OF OFFICEHOLDER OR	CANDIDATE OFFIC	E SOUGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER					
			NAME OF OFFICEHOLDER OR	CANDIDATE OFFIC	E SOUGHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTE	E?	NAME OF OFFICEHOLDER OR	CANDIDATE OFFIC	E SOUGHT OR HELD	
	YES NO					SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	BOX)					
CITY STATE ZIP	CODE AREA CODE	/PHONE	A++a	ch continuation shee	ate if nacaceary	
			Alla	on continuation silet	ers ii liecessary	

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SUMMARY PAGE

7/1 to Date

Statement covers	period	CALIFORNIA 160						
from10/23/2	016	FORM TO Y						
through12/31/2	016	_ Page3 of9						
 		I.D. NUMBER						
		1382665						

General Elections

20. Contributions

Received

21. Expenditures Made

Candidates

Calendar Year Summary for Candidates

Running in Both the State Primary and

1/1 through 6/30

Friends of Fadelli for City Council 2016 Column A Contributions Received TOTAL THIS PERIOD (FROMATTACHED SCHEDULES) 1. Monetary Contributions Schedule A, Line 3 \$ 2,560.00 4. Nonmonetary Contributions Schedule C, Line 3 Expenditures Made \$ 25,197.17 10. Nonmonetary Adjustment Schedule C, Line 3 0.00 **Current Cash Statement** 2,560.00 13. Cash Receipts Column A, Line 3 above 0.00 14. Miscellaneous Increases to Cash Schedule I, Line 4 1,046.22 If this is a termination statement, Line 16 must be zero. **Cash Equivalents and Outstanding Debts**

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).

Column B

CALENDAR YEAR

TOTALTODATE

10,000.00

31,294.01

2,022.84

33,316.85

2,022.84

27,220.01

Expenditure Limit Summary for State

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

Date of Election (mm/dd/yy)	Total to Date

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

> FPPC Form 460 (Jan/2016) 3/275-3772)

Schedule Monetary	A Contributions Received		ts may be rounded whole dollars.	Statement covers period CALIFORNIA FORM			
SEE INSTRUCTIO	DNS ON REVERSE			through <u>12/31/2</u>	016	Page	4 of9
NAME OF FILER						I.D. NU	JMBER
Friends of	Fadelli for City Council 2016					1382	665
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
11/08/2016	George Gager 1323 Arlington Blvd. Bl Cerrito, CA 94530	⊠IND □COM □OTH □PTY □SCC	Consultant George Gager	150.00	1	50.00	
11/03/2016	Marlene Keller 8355 Kent Court El Cerrito, CA 94530	IND COM OTH PTY SCC	Retired n/a	500.00	5	00.00	
10/27/2016	Peace Officers Research Association of California PAC (PORAC PAC) Small Contributor Committee (ID# 810830) 4010 Truxel Road Sacramento, CA 95834	□IND □COM □OTH □PTY ☑SCC		500.00	5	00.00	
10/26/2016	Marilym Robrahn 481 Basalt Court Redding, CA 96003	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired n/a	100.00	2	00.00	
11/09/2016	Anne Schmitz 6105 Hillegass Avenue Oakland, CA 94618	⊠IND □COM □OTH □PTY □SCC	Attorney State of California	250.00	2	50.00	
			SUBTOTAL	1,500.00			primas valorismin al la coloria. Principolo primas primas primas del
Amount re (Include a	A Summary eceived this period – itemized monetary contributions. Il Schedule A subtotals.)				IND -	(other	ial ient Committee than PTY or SCC)
2. Amount re	eceived this period – unitemized monetary contributions	s of less than	\$100\$	335.00	PTY-	-Politica	
	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colu	mn A, Line 1.)TOTAL \$	2,560.00	scc-	- Small (Contributor Committee

FPPC Form 460 (Jan/2016)

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded

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Monetary	Contributions Received	Amounts may to whole o		Statement cove from	2010	CALIFORNIA 460 FORM 5 of 9		
NAME OF FILER				MANAGE		I.D. NUI	MBER	
Friends of Fa	adelli for City Council 2016					13826	55	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN, 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)	
10/23/2016	Adam Starr 3931 23rd Street San Francisco, CA 94114	XIND COM OTH PTY	Advertising Uber Technologies	200.00	20	00.00		
10/27/2016	United Professional Fire Fighters of Contra Costa County I.A.F.F. Local 1230 Candidate PAC (ID# 1347705) 112 Blue Ridge Drive Martinez, CA 94553	□IND ICOM □OTH □PTY □SCC		500.00	50	00.00		
11/02/2016	Debbie Weeks 1506 Arlington Blvd. El Cerritos, CA 94530	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	25.00	43	38.71		
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
			SUBTOTAL	\$ 725.00				

*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 (Jan/2016)

FPPC Advice: advice@fppc.ca.gov ~ %/275-3772)

ppc.ca.gov

Och calcalo D. Deut 4				,			SCHE	EDULE B - PART	
Schedule B – Part 1 Loans Received Amounts may be rounded to whole dollars. Statement covers period from 10/23/2016							CALIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE					through12/3	1/2016	Page 6	of <u>9</u>	
NAME OF FILER							I.D. NUMBER		
Friends of Fadelli for City Council 20	16						1382665		
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER LD. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIO	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTION TO DATE	
Paul L. Fadelli 8646 Arbor Drive El Cerrito, CA 94530	Program Manager San Francisco Bay Area Rapid Transit			PAID \$O.O. FORGIVEN		0.00 % RATE	\$ 5,000.00	CALENDAR YEAF \$10,000.00 PER ELECTION	
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$ 5,000.00	\$ 0.00	\$0.0	03/09/2017 DATE DUE	\$0.0	03/09/2016 DATE INCURRED	\$	
Paul L. Fadelli 8646 Arbor Drive El Cerrito, CA 94530	Program Manager San Francisco Bay Area Rapid Transit			\$ 0.0	5,000.00	0.00 % RATE	\$ _5,000.00	\$ 10,000.00 PER ELECTION	
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$5,000.00	s	\$ 0.0	0 <u>10/07/2017</u> DATE DUE	\$0.0	0 10/07/2016 DATE INCURRED	\$	
				PAID	s	%		CALENDAR YEAR	
				FORGIVEN		RATE		PER ELECTION	
TO IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$	
		SUBTOTALS \$	0.00	\$ 0.	00\$ 10,000.00	\$ 0.0	0	140 bully store a	
Schedule B Summary						(Enter (e) on Schedule E, Line 3			
Loans received this period (Total Column (b) plus unitemized loans			,	\$	0.00		Contributor Codes		
2. Loans paid or forgiven this period (Total Column (c) plus loans under \$100 (Include loans paid by a third party that) paid or forgiven.)			\$	0.00		ND – Individual COM – Recipient Co (other than I DTH – Other (e.g., PTY – Political Party	PTY or SCC) business entity)	

Enter the net here and on the Summary Page, Column A, Line 2.

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

FPPC Form 460 (Jan/2016)
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w ppc.ca.gov

SCC - Small Contributor Committee

** If required.

Schedule E Payments Made

Amounts may be rounded to whole dollars.

	SCHEDULE E
Statement covers period	CALIFORNIA / CO
from 10/23/2016	FORM - TOU
through12/31/2016	Page7 of9
·1	I.D. NUMBER
	1382665

SEE INSTRUCTIONS ON REVERSE	thro	ough <u>12/31</u>	./2016 P	age	of9			
NAME OF FILER							I.D. NUMBEI	R
Friends of Fadelli for City Council 2016				_			1382665	
CODES: If one of the following codes accurately describes 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 com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and s POS postage, del	munication d appeara nses lating s survey res ivery and	ns nces	RAD RFD SAL TEL TRC TRS	radio airtime a returned contr campaign wor t.v. or cable ai candidate trav staff/spouse tr transfer betwe voter registrat	and production cost ributions rkers' salaries frtime and production rel, lodging, and me ravel, lodging, and een committees of	on costs eals meals the same o	•
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTIO	N OF PAYMENT			AMOUNT PAID
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC						12.3
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC						4.2
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC						2.2
* Payments that are contributions or independent expenditures r	nust also be summ	arized or	Schedule D.			SUBTO	DTAL\$	18.7
Schedule E Summary				***************************************				
1. Itemized payments made this period. (Include all Schedule	E subtotals.)	•••••		**********			. \$	1,046.22
2. Unitemized payments made this period of under \$100					********		. \$	0.00
3. Total interest paid this period on loans. (Enter amount from	Schedule B, Part	1, Colum	nn (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.)							. \$	1,046.22

FPPC Form 460 (Jan/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC 106/275-3772)
w ppc.ca.gov

Schedule E (Continuation Sheet)

Amounts may be rounded

	SCHEDULE E (CONT.)
Statement covers period	CALIFORNIA 460
from10/23/2016	FORM
	į.

Payments Made	to whole dollars.	from 10/23/2016	FORM TOU
SEE INSTRUCTIONS ON REVERSE		through12/31/2016	Page 8 of 9
NAME OF FILER		— Lacronium Mariana and analysis among very 11 mm various process and a state and a superior and a state and a sta	I.D. NUMBER
Priends of Fadelli for City Council 2016			1382665
CODES: If one of the following codes accurately de	escribes the payment, you may enter the code.	Otherwise, describe the paymer	ıt.

CMP	campaign paraphernalia/misc.	MBR	member com		RAD	radio airtime and production costs
CNS	campaign consultants		•	d appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expen	ses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circul	lating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	•	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and s	survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS		very and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional	services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads		WEB	information technology costs (internet, e-mail)
	NAME AND ADDRESS OF PAYEE (IF COMMITTE, ALSO ENTER LD. NUMBER)			CODE OR	DESCRIPTIO	N OF PAYMENT AMOUNT PAID

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE C	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		21.07
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		2.25
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		6.15
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		10.05
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		3.22

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

SUBTOTAL \$

Schedule E (Continuation Sheet) **Payments Made**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

		SCHE	DULE E (CON).
Statement covers period		CALIFORNIA	4 4 6 N
from	10/23/2016	FORM	-100
through_	12/31/2016	- Page 9	of9
		I.D. NUMBER	
		1382665	

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* office expenses SAL campaign workers' salaries CVC civic donations petition circulating t.v. or cable airtime and production costs PET TEL candidate filing/ballot fees TRC candidate travel, lodging, and meals FIL PHO phone banks FND fundraising events POL. polling and survey research TRS staff/spouse travel, lodging, and meals ND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor

LEG legal defense professional services (legal, accounting) VOT voter registration

campaign literature and mailings print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Card Service Center 5055 Norwood Road Dallas, TX 75356		Credit Card Payment	27.19
Card Service Center 5055 Norwood Road Dallas, TX 75356		Credit Card Payment	42.85
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		616.55
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		298.14

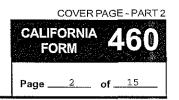
 $[^]st$ Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5) SEE INSTRUCTIONS ON REVERSE	Statement covers period from	Date of election if applicable: (Month, Day, Year)	RECEIVED NOV 0 8 2016 City of El Cerrito City Clerk	COVERPAGE CALIFORNIA 260 FORM Page _ I _ of _ 15 _ For Official Use Only
1. Type of Recipient Committee: All Committees - Co Soliceholder, Candidate Controlled Committee State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee		2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te	Quar Spec	terly Stalement ial Odd-Year Report illemental Preelection ment - Attach Form 495
3. Committee Information	D. NUMBER 1382665 DE AREA CODE/PHONE	Treasurer(s) NAME OF TREASURER Shawnda Deane MAILING ADDRESS 1787 Tribute Road, Su CITY Sacramento NAME OF ASSISTANT TREASUR	STATE ZIP C CA 958	
El Cerrito CA 945: MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. E 1787 Tribute Road, Suite K CITY STATE ZIP CO Sacramento CA 958: OPTIONAL: FAX / E-MAIL ADDRESS Fadelli2016@deaneandcompany.com	0 (916)285-5733 OX DDE AREA CODE/PHONE	Paul Fadelli MAILING ADDRESS 8646 Arbor Drive CITY El Cerrito OPTIONAL: FAX / E-MAIL ADDR	STATE ZIP C CA 945	
4. Verification I have used all reasonable diligence in preparing and reviewin under penalty of perjury under the laws of the State of Californ Executed on	a that the foregoing is true and correct. By By	ontrolling officeholder, Candidate, State Measure President of Controlling Officeholder, Candidate, State Measure President of Controlling Officeholder, Candidate, Signature of Controlling Officeh	Treasurer Sponent or Responsible Officer of Sponsor State Measure Proponent	Iles is true and complete. I certify FPPC Form 460 (Jan/2016)

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Recipient Committee Campaign Statement Cover Page — Part 2



	ommittee			ь.	Primarily Formed Ball	ot Measure	Committee		
AME OF OFFICEHOLDER OR CANDIDATE					NAME OF BALLOT MEASURE				
aul Fadelli									
FFICE SOUGHT OR HELD (INCLUDE LOCATION AND D	ISTRICT NUMBER IF	APPLICABL	.E)		BALLOT NO. OR LETTER	JURISDICTI	ON		SUPPORT
ity Council Member: City of El Cerrito									OPPOSE
ESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP		Identify the controlling of	finahaidar aa			ranamant if any
646 Arbor Drive	El Cerrito	CA	94530		NAME OF OFFICEHOLDER, CA			measure p	roponent, n any
Related Committees Not Included in this of included in this of included in this statement that are controlled by contributions or make expenditures on behalf of yo	you or are primari	•			OFFICE SOUGHT OR HELD		DI	STRICT NO. IF	ANY
OMMITTEE NAME.	I.D. NUMBE	R							<u></u>
AME OF TREASURER	CONTROLLE			7.	Primarily Formed Car officeholder(s) or candidate(
OMMITTEE ADDRESS STREET ADDRESS (NO	P.O. BOX))		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	IT OR HELD	SUPPORT
									OPPOSE
ITY STATE	ZIP CODE	AREA COL	DE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	IT OR HELD	SUPPORT OPPOSE
OMMITTEE NAME	I.D. NUMBE	R			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	IT OR HELD	SUPPORT
									OPPOSE
AME OF TREASURER	CONTROLLI	ED COMMIT			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	IT OR HELD	SUPPORT OPPOSE
OMMITTEE ADDRESS STREET ADDRESS (NO	P.O. BOX)								
ITY STATE	ZIP CODE	AREA CO	DE/PHONE		Atta	ach continuat	ion sheets if ned	cessary	

FPPC Form 460 (Jan/2016)
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www.fppc.ca.gov

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE CALIFORNIA / CO Statement covers period

oua.y. ugo	to whole donars.	from	09/25/2016	FORM TOU
SEE INSTRUCTIONS ON REVERSE		through	10/22/2016	Page3 of15
NAME OF FILER		*****		I.D. NUMBER
Friends of Fadelli for City Council 2016				1382665

Contributions Received		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions	\$	4,175.00	\$	18,734.01	
2. Loans Received Schedule B, Line 3		5,000.00		10,000.00	1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	9,175.00	\$	28,734.01	20. Contributions Received \$\$
4. Nonmonetary Contributions		738.13		2,022.84	21 Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	9,913.13	\$	30,756.85	Made \$\$
Expenditures Made					Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$	10,477.23	\$	24,150-95	Candidates
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	10,477.23	\$	24,150.95	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)		0.00		0.00	Date of Election Total to Date
10. Nonmonetary Adjustment		738.13		2,022.84	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$	11,215.36	\$	26,173.79	\$
Current Cash Statement					\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	5,885.29	To	calculate Column B. add	
13. Cash Receipts Column A, Line 3 above		9,175.00	an	nounts in Column A to the	
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00		orresponding amounts om Column B of your last	*Amounts in this section may be different from amounts reported in Column B.
15. Cash Payments Column A, Line 8 above		10,477.23		port. Some amounts in olumn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	4,583.06	fig	gures that should be	
If this is a termination statement, Line 16 must be zero.			ре	ubtracted from previous eriod amounts. If this is	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	fo	e first report being filed or this calendar year, only arry over the amounts	
Cash Equivalents and Outstanding Debts			fro	om Lines 2, 7, and 9 (if	
18. Cash Equivalents	\$	0.00		•	
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	10,000.00	1		
			I		FPPC Advice: advice@fppc.ca.gov (866/275-

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

			en en la companya de			Caller :	
Schedule A Monetary Contributions Received			ts may be rounded whole dollars.	Statement cove	A	CALIFORNIA 460	
SEE INSTRUCTION	DNS ON REVERSE			through	016	Page4 of15	
NAME OF FILER						.D. NUMBER	
Friends of	Fadelli for City Council 2016	· · · · · · · · · · · · · · · · · · ·	_			1382665	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEA (JAN. 1 - DEC. 3	R TO DATE	
09/26/2016	Kurt Bondelie 7075 Royal Ridge Drive San Jose, CA 95120	⊠IND □COM □OTH □PTY □SCC	Sales Management Coherent	200.00	20	0.00	
10/11/2016	Marta Dragos 1352 Rifle Range Road El Cerrito, CA 94530		Retired n/a	100.00	10	0.00	
10/13/2016	Richard W. Ghilotti 296 Margarita Drive San Rafael, CA 94901	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner Ghilotti Construction	500.00	50	0.00	
09/25/2016	Don Hayashida 8401 Mondavi Court Sacramento, CA 95828	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	100.00		0.00	
10/08/2016	Deidre Heitman 339 Marlow Drive Oakland, CA 94605	⊠IND □COM □OTH □PTY □SCC	Manager, Special Projects Bay Area Rapid Transit	75.00	15	0.00	

SUBTOTAL\$

975.00

Schedule A Summary

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

 *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)
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www.fppc.ca.gov

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded to whole dollars.

		SCHEDULE A (CONT.)
State	ement covers period	CALIFORNIA A CO
from	09/25/2016	FORM 40U
through_	10/22/2016	Page5 of15

I.D. NUMBER

NAME OF FILER

Friends of Fa	adelli for City Council 2016				13826	65
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN, 1 - DEC, 31)	PER ELECTION TO DATE (IF REQUIRED)
10/02/2016	Kirsten MacPhee 10 Upper Via Casitas Greenbrae, CA 94904	XIND ☐COM ☐OTH ☐PTY ☐SCC	Senior Companion Care Kirsten MacPhee	100.00	100.00	
09/27/2016	Letitia Moore 761 Norvell Street El Cerrito, CA 94530	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney United States Enviornmental Protection Agency	100.00	100.00	
10/21/2016	Seamus Murphy 245 10th Avenue San Francisco, CA 94118	⊠IND □COM □OTH □PTY □SCC	Chief Communications Officer San Mateo County Transit District	100.00	100.00	
09/30/2016	Nancy Fujita Nakayama 8724 Don Carol Drive El Cerrito, CA 94530	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	100.00	
09/26/2016	Amy Ongaro 39 Kinross Drive San Rafael, CA 94901	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Property Manager Amy Ongaro	200.00	200.00	
			SUBTOTAL	\$ 600.00		erende er op som her skamen Buddingstoff, efterfeleting er finer

*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

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Schedule	A (Continuatio	n Sheet)
Monetary	Contributions	Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA A CO

Statement covers period

250.00

1,050.00

				from09/25/	2016	FO	RM -TOO
				through10/22/	2016	Page	6 of 15
NAME OF FILER			J.		***************************************	I.D. NUM	BER
Friends of Fa	adelli for City Council 2016					138266	5
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
09/26/2016	Diane Ongaro 21 Culloden Park Road San Rafael, CA 94901	⊠IND □COM □OTH □PTY □SCC	Retired n/a	500.00	60	00.00	
09/28/2016	James P. Perero 8613 Don Carol Drive El Cerrito, CA 94530	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	10	00.00	
09/30/2016	Peter Peyser 250 West 93rd Street New York, NY 10025	⊠IND □COM □OTH □PTY □SCC	Consultant Peyser Associates LLC	100.00	10	00.00	
09/28/2016	Sandi Potter 12 Mission Drive Petaluma, CA 94952	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Planning Manager County of Sonoma	100.00	10	00.00	

XIND

COM OTH PTY SCC Chair, High Speed Rail Authority State of California

SUBTOTAL\$

*Contributor Codes

IND - Individual

09/30/2016

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

Dan Richard

2 Highland Avenue Oakland, CA 94611

PTY - Political Party

SCC - Small Contributor Committee

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www.fppc.ca.gov

Schedule	A ((Continuatio	n Sheet)
Monetary	Co	ntributions	Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA 460

FORM

Statement covers period

				from09/25/ through10/22/		ORM 100
NAME OF FILER						JMBER
Friends of Fa	adelli for City Council 2016		<u> </u>		1382	665
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN, 1 - DEC, 31)	PER ELECTION TO DATE (IF REQUIRED)
10/01/2016	Steve Schnaidt 2817 Land Park Drive Sacramento, CA 95818	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	100.00	
10/05/2016	Service Employees International Union Local 1021 PAC Small Contributor Committee (ID# 1296948) 555 Capital Mall, Suite 1425 Sacramento, CA 95814	□IND □COM □OTH □PTY ☑SCC		1,000.00	1,000.00	
10/07/2016	Michael Sherman 5372 Hilltop Crescent Oakland, CA 94618	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	100.00	
10/05/2016	Christopher Starr 732 Westmount Drive West Hollywood, CA 90069	⊠IND □COM □OTH □PTY □SCC	Writer Christopher Starr	100.00	100.00	
		□IND □COM □OTH □PTY □SCC				
			SUBTOTAL	.\$ 1,300.00		pasanan k

*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

Sched	ule	B-	Part	1
Loans	Rec	eive	ed	

Amounts may be rounded

Statement covers period	CALIFORNIA 160
from09/25/2016	FORM
through10/22/2016	Page 8 of 15

Loans Received		to whole dollar	s.		from09/2	5/2016	FORM 4-0 U		
SEE INSTRUCTIONS ON REVERSE					through10/2	2/2016	Page8	of15	
NAME OF FILER							I.D. NUMBER		
Friends of Fadelli for City Council 20	16					<u></u>	1382665		
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER LD. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAII OR FORGIVE THIS PERIOI	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE	
Paul L. Fadelli 8646 Arbor Drive El Cerrito, CA 94530	Program Manager San Francisco Bay Area Rapid Transit			PAID \$0.0	0 s 5,000.00	0.00 % RATE	\$_5,000.00	CALENDAR YEAR \$ _ 10,000.00 PER ELECTION**	
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$5,000.00	\$ 0.00	\$0.0	03/09/2017 DATE DUE	\$0.00	03/09/2016 DATE INCURRED	\$	
Paul L. Fadelli 8646 Arbor Drive El Cerrito, CA 94530 Loan Recieved, 0% Interest	Program Manager San Francisco Bay Area Rapid Transit	\$0.00	\$5,000.00	PAID \$ 0.00 FORGIVEN \$ 0.0	0 10/07/2017	0.00 % RATE	10/07/2010	CALENDAR YEAR \$ 10,000.00 PER ELECTION **	
T⊠ IND □ COM □ OTH □ PTY □ SCC					DATE DUE		DATE INCURRED	CALENDAR YEAR	
				\$FORGIVEN	_ \$	RATE	\$	\$PER ELECTION **	
†□ IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$	
		SUBTOTALS	\$ 5,000.00	\$ 0.	00\$ 10,000.00	\$ 0.00			
Schedule B Summary						(Enter (e) on Schedule E, Line 3)			
1. Loans received this period	••••••	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		\$	5,000.00	<u>)</u>			
(Total Column (b) plus unitemized loar	ns of less than \$100.)					(to	Contributor Codes	······································	

1.	Loans received this period	\$	5,000.	00
	(Total Column (b) plus unitemized loans of less than \$100.)			
2.	Loans paid or forgiven this period	\$	0.	00
3.	Net change this period. (Subtract Line 2 from Line 1.)	Г\$	5,000.	00

IND - Individual

(May be a negative number)

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

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

Enter the net here and on the Summary Page, Column A, Line 2.

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			****						Mid+
Schedul Nonmor	e C netary Contributions Received		Amounts may be rounded to whole dollars.		Sta	itement covers pe		CALIFO FOR	
SEE INSTRUC	TIONS ON REVERSE				throug	jh <u>10/22/201</u>	.6	_ Page	9 of 15
NAME OF FILE				l .				I.D. NUMB	ER
Friends of	Fadelli for City Council 2016							1382665	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICE		AMOUNT/ FAIR MARKET VALUE	CALE	ULATIVE TO DATE ENDAR YEAR V1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
09/27/2016	Lyman for El Cerrito 2016 (ID# 1378538) 10890 San Pablo Avenue El Cerrito, CA 94530	□IND ⊠COM □OTH □PTY □SCC		Food & Beverage	Ø)	37.30		738.13	
09/28/2016	Lyman for El Cerrito 2016 (ID# 1378538) 10890 San Pablo Avenue El Cerrito, CA 94530	☐IND IXCOM ☐OTH ☐PTY ☐SCC		Food & Beverage	S	700.83		738.13	
		□IND □COM □OTH □PTY □SCC							
		□IND □COM □OTH □PTY □SCC							
Attach ac	lditional information on appropriately labe	led continuat	tion sheets.	SUBTO	TAL\$	738.13			18 (19) 19
Amount (Include Amount	le C Summary t received this period – itemized nonmonetare all Schedule C subtotals.) t received this period – unitemized nonmonet	ary contribution					13	,	at Committee nan PTY or SCC) e.g., business entity)
Total no	nmonetary contributions received this period							SCC - Small Co	ntributor Committee

		ener.				1201
Schedule E Payments Made	Amounts may be rounded to whole dollars.			Statement covers period	CALIFO FOR	
SEE INSTRUCTIONS ON REVERSE			thi	rough10/22/2016	Page10	of
NAME OF FILER			***************************************		I.D. NUME	BER
Friends of Fadelli for City Council 2016					1382665	
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* civic donations FIL candidate filing/ballot fees fND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member.com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and POS postage, de	imunications d appearances ises ilating	RAL RFC SAL TEL TRC TRS services TSF	radio airtime and product returned contributions campaign workers' salar t.v. or cable airtime and candidate travel, lodging, staff/spouse travel, lodgift transfer between commit voter registration	ries production costs and meals ing, and meals ittees of the sam	•
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTI	ON OF PAYMENT		AMOUNT PAID
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC				40.20
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	W_1/4/1	OFC				6.45
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC				4.20
* Payments that are contributions or independent expenditure	es must also be sumn	narized on Schedul	e D.		SUBTOTAL\$	50.8
Schedule E Summary						
1. Itemized payments made this period. (Include all Schedu	ule E subtotals.)				\$	10,477.23
2. Unitemized payments made this period of under \$100 \dots					\$	0.00
3. Total interest paid this period on loans. (Enter amount from	om Schedule B, Part	1, Column (e).)		.,	\$	0.00

FPPC Form 460 (Jan/2016)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

		SCHEDULE E (CONT.)
Statement covers period		CALIFORNIA 460
from	09/25/2016	FORM TOO
through.	10/22/2016	- Page 11 of 15
		I.D. NUMBER
		1382665

NAME OF FILER

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs

FIL candidate filing/ballot fees TRC candidate travel, lodging, and meals PHO phone banks staff/spouse travel, lodging, and meals FND fundraising events polling and survey research TRS

transfer between committees of the same candidate/sponsor IND independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF LEG legal defense PRO professional services (legal, accounting) VOT voter registration

LIT campaign literature and mailings	PRT print ads	WEB information technology	/ costs (internet, e-mail)
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		24.90
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		6.45
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		9.67
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		4.20
Budget Watchdogs Newsletter (ID# 1345115) 1954 West Carson Street, Suite B Torrance, CA 90501		Slate Mailer	100.00
* Daymonto that are a said, stiene as independent and stiene as its			SIERTOTAL \$ 145.23

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

SUBTOTAL \$

145.22

Amounts may be rounded to whole dollars.

		SCHEDULE E (CONT.)
State	ement covers period	CALIFORNIA 460
from	09/25/2016	FORM TO
through	10/22/2016	Page 12 of 15
		I.D. NUMBER
		1700665

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Friends of Fadelli for City Council 2016 1382665

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants RFD returned contributions MTG meetings and appearances CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating t.v. or cable airtime and production costs candidate filing/ballot fees FIL PHO phone banks TRC candidate travel, lodging, and meals FND fundraising events staff/spouse travel, lodging, and meals POL polling and survey research TRS IND independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings print ads WEB information technology costs (internet, e-mail) NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CalSal Voter Guide (ID# 1368249) Slate Mailer 100.00 1954 West Carson Street, Suite B Torrance, CA 90501 Deane & Company PRO 652.85 1787 Tribute Road, Suite K Sacramento, CA 95815 Democractic Party of Contra Costa (ID# 990861) Slate Mailer 130.00

702 Windmill Court Concord, CA 94518 Election Digest (ID# 1345303) Slate Mailer 100.00 1954 West Carson Street, Suite B Torrance, CA 90501 Lisa Tucker dba The Tucker Group OFC 300.00 1981 North Broadway, Suite 225 Walnut Creek, CA 94596

SUBTOTAL \$

1,282.85

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

	SCHEDULE E (CONT.)
Statement covers period	CALIFORNIA 160
from09/25/2016	FORM TOO
through 10/22/2016	Page 13 of 15
	I.D. NUMBER
	1382665

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating t.v. or cable airtime and production costs candidate filing/ballot fees candidate travel, lodging, and meals PHO phone banks TRC FND fundraising events TRS staff/spouse travel, lodging, and meals POL polling and survey research independent expenditure supporting/opposing others (explain)* transfer between committees of the same candidate/sponsor ND postage, delivery and messenger services TSF LEG legal defense professional services (legal, accounting) VOT voter registration LIT campaign literature and mailings print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Lisa Tucker dba The Tucker Group 1981 North Broadway, Suite 225 Walnut Creek, CA 94596	LIT		246.38
Lisa Tucker dba The Tucker Group 1981 North Broadway, Suite 225 Walnut Creek, CA 94596	CNS		1,000.00
Lisa Tucker dba The Tucker Group 1981 North Broadway, Suite 225 Walnut Creek, CA 94596	POS		1,882.68
Lisa Tucker dba The Tucker Group 1981 North Broadway, Suite 225 Walnut Creek, CA 94596	OFC		453.00
Lisa Tucker dba The Tucker Group 1981 North Broadway, Suite 225 Walnut Creek, CA 94596	LIT		4,716.25

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

SUBTOTAL \$

8,298.31

Amounts may be rounded to whole dollars.

		SCHEDULE E (CONT.)
Staten	nent covers period	CALIFORNIA 460
from	09/25/2016	FORM
through_	10/22/2016	Page 14 of 15
		I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Fadelli for City Council 2016

1382665

CMP campaign pa CNS campaign co CTB contribution CVC civic donatio FIL candidate fill FND fundraising IND independent LEG legal defens	(explain nonmonetary)* ns ing/ballot fees events expenditure supporting/opposing others (explain)*	MBR member coming MTG meetings and OFC office expenies petition circul PHO phone banks POL polling and sepos postage, deli	munications I appearance: ses ating urvey researd very and mes	s	RAD RFD SAL TEL TRC TRS TSF VOT	radio airtime and proc returned contributions campaign workers' si t.v. or cable airtime an candidate travel, lodg staff/spouse travel, lo transfer between con voter registration information technolog	duction costs s alaries nd production costs ing, and meals idging, and meals nmittees of the san	ne candidate/sponso
	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE C	OR	DESCRIPTIO	N OF PAYMENT		AMOUNT PAID
	an Francisco Bay Chapter Campaigns SMO (I Avenue, Suite I 94702	D# 1306869)		Slate Mailer				700.0

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

SUBTOTAL \$

700.00

Schedule G	
Payments Made b	y an Agent or Independent
Contractor (on Be	half of This Committee)

Amounts may be rounded to whole dollars.

State	ement covers period	CALIFORNIA
from	09/25/2016	FORM
through	10/22/2016	Page 15

Page ____15___

I.D. NUMBER

1382665

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Fadelli for City Council 2016

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Lisa Tucker dba The Tucker Group

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. MBR member communications CNS campaign consultants meetings and appearances CTB contribution (explain nonmonetary)* office expenses CVC civic donations PET petition circulating candidate filing/ballot fees FIL PHO phone banks

FND fundraising events polling and survey research independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services

LEG legal defense professional services (legal, accounting) LIT campaign literature and mailings 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.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Madison Street Press 614 Madison Street Oakland, CA 94607	LIT		3,404.50
Mary Szczepanik 1483 Guerrero Street San Francisco, CA 94110	LIT		637.50
US Postmaster 300 East Bonita Avenue San Dimas, CA 91773	POS		1,882.68

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

5,924.68

SCHEDULE G

^{*} 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.

Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)			RECEIVED	COVER PAGE CALIFORNIA 460
	Statement covers period from07/01/2016	Date of election if applicable: (Month, Day, Year)	NOV 0 8 2016	Page 1 of 28
SEE INSTRUCTIONS ON REVERSE	through09/24/2016	11/08/2016	City of El Cerrito City Clerk	
1. Type of Recipient Committee: All Committees -	Complete Parts 1, 2, 3, and 4.	2. Type of Statement:	on't alout	
	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	□ Preelection Statement □ Semi-annual Statement □ Termination Statement (Also file a Form 410 T □ Amendment (Explain b □ Amendment (Explain b	t Spe	rterly Statement cial Odd-Year Report plemental Preelection ement - Attach Form 495
3. Committee Information	I,D. NUMBER 1382665	Treasurer(s)		
Friends of Fadelli for City Council 2016 STREET ADDRESS (NO P.O. BOX) 8646 Arbor Drive		Shawnda Deane MAILING ADDRESS 1787 Tribute Road, St CITY Sacramento	STATE ZIP C	CODE AREA CODE/PHONE 815 (916) 285-5733
CITY STATE ZIP	CODE AREA CODE/PHONE	NAME OF ASSISTANT TREASU	RER, IF ANY	
El Cerrito CA 94 MALING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.C	1530 (916) 285-5733	Paul Fadelli MAILING ADDRESS		
	J. BOX	MAILING ADDRESS 8646 Arbor Drive		
1787 Tribute Road, Suite K CITY STATE ZIP	CODE AREA CODE/PHONE	CITY	STATE ZIP (CODE AREA CODE/PHONE
	5815	El Cerrito	CA 94	530 (916)285-5733
OPTIONAL: FAX / E-MAIL ADDRESS Fadelli2016@deaneandcompany.com		OPTIONAL: FAX / E-MAIL ADD	RESS	
4. Verification I have used all reasonable diligence in preparing and review under penalty of perjury under the laws of the State of California Executed on	ornia that the foregoing is true and correct. By	nowledge the information contained he Signature differentier or Assistan Controlling Office older, Candidate, State Measure Pri Signature of Controlling Officeholder, Candidate, Signature of Controlling Officeholder, Candidate,	I Treasurer Coponent or Responsible Officer of Sponsor State Measure Proponent	

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FPPC Advice: advice@fppc.ca.gov (866 3772) www.fp, a.gov

Recipient Committee Campaign Statement Cover Page — Part 2

•	COVER PAGE - PART 2
59/13/39/6 m	24-116-6 (C. 12) (C. 12) (W. 12)
CALIF	ORNIA A A
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Page	2 of 28 1

Officeholder or Candidate Contro	lled Committ	ee		6.	Primarily Formed Ballo	ot Measure	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE					NAME OF BALLOT MEASURE				
Paul Fadelli	:								
OFFICE SOUGHT OR HELD (INCLUDE LOCATIO	N AND DISTRICT I	NUMBER IF APPLICAB	LE)		BALLOT NO. OR LETTER	JURISDICTI	ON		SUPPORT
City Council Member: City of El C	errito								OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND			ZIP		Identify the controlling off	iceholder, ca	ndidate, or state	e measure	proponent, if any
8646 Arbor Drive	E1 C	Cerrito CA	94530		NAME OF OFFICEHOLDER, CAN	NDIDATE, OR P	ROPONENT		
Related Committees Not Included not included in this statement that are cont contributions or make expenditures on behind the contributions of the contribut	rolled by you or	are primarily formed			OFFICE SOUGHT OR HELD	·····	ום	ISTRICT NO.	IF ANY
COMMITTEE NAME	1	I.D. NUMBER							
NAME OF TREASURER		CONTROLLED COMMIT	TCC2	7.	Primarily Formed Can				
NAME OF TREASURER		YES NO			officeholder(s) or candidate(s	s) for which th	is committee is p	rimarily form	red.
COMMITTEE ADDRESS STREET ADDR	ESS (NO P.O. BOX		······································		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	IT OR HELD	SUPPORT OPPOSE
CITY ST	ZIP COI	DE AREA CO	DE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	IT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME		I.D. NUMBER							[] OPPOSE
		i.D. NOMBEN			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	T OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	:	CONTROLLED COMMIT			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	T OR HELD	☐ SUPPORT
	!	YES N	0						OPPOSE
COMMITTEE ADDRESS STREET ADDR	ESS (NO P.O. BOX	()			-				
CITY	TATE ZIP COI	DE AREA CO	DE/PHONE		Atta	ch continuat	ion sheets if ne	cessarv	
					Au		ior directo it ile		

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE CALIFORNIA FORM Statement covers period 07/01/2016 from Page ___3 __ of ___28 09/24/2016 through _ I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Fadelli for City Council 2016						1382665
Contributions Received	(1	COLUMN A TOTAL THIS PERIOD FROMATTACHED SCHEDULES)		COLUMN B CALENDAR YEAR TOTAL TO DATE		mary for Candidates e State Primary and
1. Monetary Contributions	\$	8,786.77	\$	14,559.01	1	
2. Loans Received		0.00		5,000.00	1/1 t	hrough 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS	\$	8,786.77	\$	19,559.01	20. Contributions Received \$	\$
4. Nonmonetary Contributions		1,284.71		1,284.71	21 Expenditures	,
5. TOTAL CONTRIBUTIONS RECEIVED	\$	10,071.48	\$	20,843.72	Made \$	*
Expenditures Made					1 .	Summary for State
6. Payments Made Schedule E, Line 4		10,511.33	\$	13,673.72	Candidates	
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulativ	/e Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7			\$	13,673.72		Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3		-434.45		0.00	Date of Election	Total to Date
10. Nonmonetary Adjustment				1,284.71	(mm/dd/yy)	
11. TOTAL EXPENDITURES MADE	\$	11,361.59	\$	14,958.43		\$
Current Cash Statement						
12. Beginning Cash Balance Previous Summary Page, Line 16	\$			calculate Column B, add		
13. Cash Receipts		8,786.77		nounts in Column A to the	*^	
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	om Column B of your last	reported in Column B.	may be different from amounts
15. Cash Payments		10,511.33		port. Some amounts in olumn A may be negative		
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	5,885.29	fig	ures that should be obtracted from previous		
If this is a termination statement, Line 16 must be zero.			p€	eriod amounts. If this is		
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	fo	e first report being filed r this calendar year, only arry over the amounts		
Cash Equivalents and Outstanding Debts			fro	om Lines 2, 7, and 9 (if	1	
18. Cash Equivalents	\$	0.00				
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	5,000.00				
		·	1		<u></u>	FPPC Form 450 (Jan/
		•			FPPC Advice:	advice@fppc.ca.go\ //275

16) www.fppc.ca.gov

Schedule Monetary	A Contributions Received		s may be rounded whole dollars.	Statement cove	016	SCHEDULE LIFORNIA 460 FORM
SEE INSTRUCTIO	DNS ON REVERSE			through)16 Pag	ge4 of <u>28</u>
NAME OF FILER	3				I.D.	NUMBER
Friends of	Fadelli for City Council 2016		 	,	138	32665
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF C (IF COMMITTEE, ALSO ENTER LD. NUMBER)	ONTRIBUTOR CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/23/2016	Maya E. Archiga 2363 Alva Avenue El Cerrito, CA 94530	⊠IND □COM □OTH □PTY □SCC	Realtor Marvin Gardens	100.00	100.0	10
09/06/2016	Jane A. Bartke 1315 Devonshire Court El Cerrito, CA 94530	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	100.00	100.0	0
08/12/2016	Ellen Berman 921 Paulsboro Drive Rockville, MD 20850	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	100.0	00
07/08/2016	Ernest Beyard 330 A Street Northeast Washington, DC 20002	⊠IND □COM □OTH □PTY □SCC	Retired n/a	250.00	250.0	00
09/11/2016	Jane Breyer 6767 Cutting Blvd. El Cerrito, CA 94530		Partner Energy Foundation	100.00	100.1	000
			SUBTOTAL	.\$ 650.00	and regular that he shift and the co- duction as year and most the code.	
1. Amount re	A Summary eceived this period – itemized monetary col		\$_	7,850.00	*Contribut IND – Indiv COM – Re	

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

936.77

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.go 3/275-3772) www.fppc.ca.gov

3. Total monetary contributions received this period.

Amounts may be rounded to whole dollars.

S	CH	ΙE	Dί	JLE	Α	(CONT.)

CALIFORNIA FORM

Statement covers period

from.

07/01/2016

				through 09/24/	2016	Page	5 of28
NAME OF FILER						I.D. NUM	1BER
Friends of Fa	delli for City Council 2016	,,,,,,,				138266	55
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
08/30/2016	Joe Camicia 200 P Street Sacramento, CA 95814	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Partner Advocacy Marketing, LLC.	100.00	1	00.00	
08/22/2016	Denis Carrade 2099 Vineyard Road Novato, CA 94947	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	250.00	2	50.00	
09/14/2016	Phyllis Chow 658 Cutting Way Sacramento, CA 95831	⊠IND □COM □OTH □PTY □SCC	Scheduler/Legislative California State Assembly	100.00	1	00.00	
09/06/2016	Gussie Curran 3414 Topsail Place Davis, CA 95616	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	1	.00,00	
07/12/2016	Paul E. Donahue 2200 2nd Avenue Sacramento, CA 95818	XIND □COM □OTH □PTY □SCC	Retired n/a	250.00	2	250.00	
			SUBTOTAL	\$ 800.00		Najvajas	en e

*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.go 3/275-3772) ww....fppc.ca.gov

Amounts may be rounded to whole dollars.

SCHEDULE A (CO	ONT.)
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CALIFORNIA FORM

Statement covers period

from.

07/01/2016

	;			through 09/24/	2016	Page	6 of28
NAME OF FILER						i.D. NUM	BER
Friends of Fa	adelli for City Council 2016					138266	5
DATE RECEIVED	FULL. NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
09/12/2016	Manish Doshi 1720 Julian Court El Cerrito, CA 94530	⊠IND □COM □OTH □PTY □SCC	Administrator Meeta Doshi DDS, PDC	250.00	2	50.00	
09/03/2016	Frank O. Fadelli 5049 Wittenmeyer Court Antioch, CA 94531	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	200.00	2	00.00	
08/22/2016	Jeanne Fadelli 2099 Vineyard Road Novato, CA 94947	⊠IND □COM □OTH □PTY □SCC	Research Analyst Santa Rosa Junior College	100.00	1	00.00	
09/23/2016	Kenneth B. Finney 230 Amherst Avenue Albany, CA 94706	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Beverage LLC	200.00	2	00.00	
09/06/2016	Connie J. Frank 1800 Third Avenue Sacramento, CA 95818	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	1	00.00	
			SUBTOTAL	\$ 850.00	in partie bir taribir:		

*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) advice@fppc.ca.gov //275-3772)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA FORM

Statement covers period

					from 07/01/2	787 V (4)	ORM TOU
					through09/24/2	1 490 =	7 of28
NAME OF FILER						I,D. NUI	MBER
Friends of Fa	adelli for City Council 2016	6	* .			13826	65
DATE RECEIVED	FULL NAME, STREET ADDRESS AND (IF COMMITTEE, ALSO ENT		CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/12/2016	Rebecca F. Franzola 5662 Delcliff Circle Sacramento, CA 95822		XIND COM OTH PTY SCC	Retired n/a	200.00	200.00	
07/12/2016	Karen K. French 6621 Longridge Way Sacramento, CA 95831		COM OTH PTY SCC	Attorney Nielsen Merksamer Parrinello Gross & Leoni, LLP	100.00	100.00	
07/20/2016	Michael Gersick 28 Kerr Avenue Kensington, CA 94707		⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	100.00	
07/08/2016	Linda L. Ghilotti 119 Highland Lane Mill Valley, CA 94941		⊠IND □COM □OTH □PTY □SCC	Retired n/a	200.00	300.00	
08/22/2016	Linda L. Ghilotti 119 Highland Lane Mill Valley, CA 94941		⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	300.00	
				SUBTOTAL	\$ 700.00	a de de alogo da balanaka	

*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) 3/275-3772)

Amounts may be rounded to whole dollars.

SCHEDULE A	(CONT.
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CALIFORNIA FORM

Statement covers period

07/01/2016

	:		j.	from07/01/	2016	ORM TO
				through 09/24/	2016 Page	8 of28
NAME OF FILER			1		I.D. N	JMBER
Friends of Fa	adelli for City Council 2016				1382	665
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN, 1 - DEC, 31)	PER ELECTION TO DATE (IF REQUIRED)
09/24/2016	Kim Gillan 1200 Humboldt Street Denver, CO 80218	⊠IND □COM □OTH □PTY □SCC	Regional Director United States Department of Health Human Services	100.00	175.00	
07/12/2016	John Hancock 912 South Beach Drive Sacramento, CA 95831	⊠IND □COM □OTH □PTY □SCC	Application Operations University of California, Davis Health System	100.00	100.00	
07/12/2016	Judith Inglehart 311 2nd Street, #815 Cakland, CA 94607		Retired n/a	100.00	100.00	
08/05/2016	Linton Johnson 4100 Redwood Road Oakland, CA 94619	XIND COM OTH PTY SCC	Chief Strategist BART	100.00	175.00	
07/14/2016	Thomas J. Kerbs 625 Santa Ynez Way Sacramento, CA 95816	IND COM OTH PTY SCC	Attorney California Legislature	100.00	100.00	
			SUBTOTAL	\$ 500.00		

*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 Asq (Jan/2016)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA /

Statement covers period

	!			from07/01/:	2016	ORM TOU
_				through 09/24/	2016 Page	9 of28
NAME OF FILER					I.D. N	UMBER
Friends of Fa	adelli for City Council 2016				1382	665
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN, 1 - DEC, 31)	PER ELECTION TO DATE (IF REQUIRED)
08/12/2016	Mark Krausse 49669 Hamilton Road Clarksburg, CA 95612	⊠IND □COM □OTH □PTY □SCC	Director Pacific Gas & Electric	100.00	100.00	
07/12/2016	Stephen Jon Larson 504 Belvedere Street San Francisco, CA 94117	⊠IND □COM □OTH □PTY □SCC	Consultant California Strategies	125.00	125.00	
08/31/2016	Rodd Lee 311 Oak Street, Unit 703 Oakland, CA 94607	⊠IND □COM □OTH □PTY □SCC	Manager of Government Affairs and Community Relations San Francisco Bay Area Rapid Transit District (BART)	100.00	100.00	
07/12/2016	Patrick J. Lenz 9440 Richford Lane Granite Bay, CA 95746	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	100.00	
07/28/2016	Steven Lewis 5224 Yorkville Place Carmichael, CA 95608	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Attorney Steven Lewis	100.00	100.00	
			SUBTOTAL	\$ 525.00	s Novembra (a valor som	

*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

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SCHEDU	LE A	(CONT	.)
			_

Monetary Contributions Received		Amounts may b to whole do		Statement cov	ers period	CALIFORNIA ACO		
		te inicia dendre.		from07/01,	/2016	FORM 400		
				through 09/24	/2016	Page	0 of28	
NAME OF FILER						I.D. NUM	BER	
Friends of F	adelli for City Council 2016					138266	5	
DATE	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIB	UTOR CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	AMOUNT RECEIVED THIS	CUMULATIVE T		PER ELECTION	

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZI (IF COMMITTEE, ALSO ENTER		ONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/12/2016	Dennis H. Mangers 1017 Harrington Way Carmichael, CA 95608] [Senior Advisor California State Senate	100.00	100.00	
07/12/2016	Jill M. Matranga 2367 39th Street Sacramento, CA 95817			Retired n/a	125.00	125.00	
08/22/2016	Deborah McFarland 241 Vista Verde Carmel Valley, CA 93924			Retired n/a	200.00	200.00	
09/20/2016	Bart Mehlhop 1330 21st Street Sacramento, CA 95811		MIND MIND	Attorney Law Offices of Mehlhop and Vogt	100.00	100.00	
09/20/2016	Marcella Moberly 19364 Hollow Lane Redding, CA 96003			Retired n/a	500.00	500.00	
	i			SUBTOTALS	1,025.00		a Kareak jiya aye na a sa sa sa sa sa sa

*Contributor Codes

IND - Individual

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OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (Jan/2016)

FPPC Advice: advice@fppc.ca.go 3/275-3772)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

from

07/01/2016

			through	2010	Pagei of28		
NAME OF FILER			7-01-02-01-02-01-02-01-02-01-02-01-02-01-02-01-02-01-02-01-02-01-02-01-02-01-02-01-02-01-02-01-02-01-02-01-02-0		I.D. NUME	BER	
Friends of Fa	adelli for City Council 2016	,				1382665	5
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		PER ELECTION TO DATE (IF REQUIRED)
07/20/2016	Cindy R. Morse 304 West 23rd Street Merced, CA 95340	⊠IND □COM □OTH □PTY □SCC	Attorney Law Offices of Morse and Pfeiff	500.00			
09/06/2016	Jerri Ollett 313 Hash Court Petaluma, CA 94952	⊠IND □COM □OTH □PTY □SCC	Health Care Consultant Jerri Ollett, MPA, Consulting & Training	500.00	50	00.00	
08/30/2016	Daniel Purnell 110 Solano Avenue La Selva Beach, CA 95076	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	16	00.00	
09/23/2016	Amy L. Reisch 917 San Anselmo Avenue, Apt. 4 San Anselmo, CA 94960	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Executive Director First 5 Marin	100.00	10	00.00	
07/25/2016	Marilym Robrahn 481 Basalt Court Redding, CA 96003	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	1	00.00	
			SUBTOTAL	\$ 1,300.00			

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PTY - Political Party

*Contributor Codes

SCC - Small Contributor Committee

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Amounts may be rounded to whole dollars.

SCHEDULE A	(CONT.)
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CALIFORNIA

Statement covers period

				from07/01/	2016	URW
				through 09/24/	2016 Page	12 of28
NAME OF FILER					I.D. N	UMBER
Friends of Fa	adelli for City Council 2016				1382	665
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTO (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/20/2016	Antoinette M. Sabelhaus 1121 3rd Avenue Sacramento, CA 95818	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Consultant California State Senate	100.00	100.00	
08/04/2016	Samuel J. Salkin 8715 Don Carol Drive El Cerrito, CA 94530	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Executive Chevra Kadisha-Sinai Memorial Chapel	100.00	100.00	
09/07/2016	Timothy Schott 4755 Brand Way Sacramento, CA 95819	⊠IND □COM □OTH □PTY □SCC	Association Management and Advocacy Schott & Associates	100.00	200.00	
09/22/2016	Timothy Schott 4755 Brand Way Sacramento, CA 95819	⊠IND □COM □OTH □PTY □SCC	Association Management and Advocacy Schott & Associates	100.00	200.00	
08/20/2016	William Schulte 849 Vista Drive Redwood City, CA 94062	⊠IND □COM □OTH □PTY □SCC	Civil Engineer William Schulte	100.00	100.00	
	ı		SUBTOTAL	\$ 500.00		nie szerigyügyesekkezektiróli Jákozi agyazak garagyasáttás agyazát

*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

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FPPC Advice: advice@fppc.ca.gov

/275-3772)

Amounts may be rounded to whole dollars.

SCHEDULE A	(CONT.)
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california 4

Statement covers period

					from07/01/	2016	FORM TO
	i				through 09/24/	2016	Page 13 of 28
NAME OF FILER							I.D. NUMBER
Friends of Fa	adelli for City Council 2016						1382665
DATE RECEIVED	FULL NAME, STREET ADDRESS AND 2 (IF COMMITTEE, ALSO ENTE		CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN, 1 - DEC. 3	AR TO DATE
09/07/2016	Janice Simoni 1064 Wilhagin Park Lane Sacramento, CA 95864		XIND □COM □OTH □PTY □SCC	Retired n/a	100.00	100	0.00
07/12/2016	Camillis Slater 1999 13th Avenue Sacramento, CA 95818		⊠IND □COM □OTH □PTY □SCC	Psychotherapist Yolo Family Services Agency	150.00	20	0.00
07/06/2016	Judith Lee Stone 15 2nd Street Northeast Washington, DC 20002		XIND □COM □OTH □PTY □SCC	Retired n/a	100.00	10	0.00
08/23/2016	Peter Tannenbaum 5912 Jordan Avenue El Cerrito, CA 94530		⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	10	0.00
08/16/2016	Bob Van Heuvelen 500 New Jersey Avenue NW, Washington, DC 20001	Suite #800	⊠IND □COM □OTH □PTY □SCC	Chief Executive Officer/Founder VH Strategies	250.00	25	0.00
	:			SUBTOTAL	\$ 700.00	to the property of the	ativity sent along also be the

*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

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Amounts may be rounded to whole dollars.

SCHEDUL	EA.	(CONT.)

State	ment covers period	CALIFORNIA A CO					
from	07/01/2016	FORM					
through_	09/24/2016	_ Page14of28					
 		I.D. NUMBER					
		1382665					

Friends of Fadelli for City Council 2016

NAME OF FILER

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/22/2016	Kathleen Waters 11260 Donner Pass Road, #205 Truckee, CA 96161	⊠IND □COM □OTH □PTY □SCC	Real Estate Investment Kathleen Waters	100.00	100.00	
07/10/2016	Jill Wilson 103 Arthrop Place Santa Cruz, CA 95060	⊠IND □COM □OTH □PTY □SCC	Attorney Jill Wilson	100.00	100.00	
08/10/2016	Kari Yasuda 8712 Don Carol Drive El Cerritos, CA 94530	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Assistant Berkeley Bowl	100.00	100.00	
		□IND □COM □OTH □PTY □SCC				
		□IND □COM □OTH □PTY □SCC				
			SUBTOTAL	\$ 300.00		

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

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SCHEDULE B - PART 1

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Schedule B – Part 1 Loans Received	Amounts may be rounded to whole dollars.			Statement coverage from07/01	ers period	CALIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE					through09/24	1/2016	Page15	of <u>28</u>
NAME OF FILER							I.D. NUMBER	
Friends of Fadelli for City Council 20	016						1382665	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIO	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Paul L. Fadelli 8646 Arbor Drive El Cerrito, CA 94530	Program Manager San Francisco Bay Area Rapid Transit			PAID \$ 0.0 FORGIVEN	<u>0</u> \$ _5,000.00	0.00 % RATE	\$_5,000.00	s 5,000.00 PER ELECTION**
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$ 5,000.00	\$0.00	\$0.0	0 03/09/2017 DATE DUE	\$0.00	03/09/2016 DATE INCURRED	\$
† IND COM OTH PTY SCC		\$	\$	PAID FORGIVEN \$	S	% RATE	\$DATE INCURRED	\$ PER ELECTION **
		\$	\$	PAID \$ FORGIVEN \$	s	% RATE	\$	CALENDAR YEAR \$ PER ELECTION ** \$
TO IND COM OTH PTY SCC					DATE DUE		DATE INCURRED	
Schedule B Summary	1	SUBTOTALS	0.00	\$ 0.	5,000.00	(Enter (e) on Schedule E, Line 3)		
Loans received this period (Total Column (b) plus unitemized loar		•••••		\$	0.00		Contributor Codes	
 Loans paid or forgiven this period (Total Column (c) plus loans under \$10 (Include loans paid by a third party that 	0 paid or forgiven.) at are also itemized on Sche	dule A.)				COP	TH – Other (e.g., TY – Political Part	PTY or SCC) business entity) y
Net change this period. (Subtract Lin Enter the net here and on the Summa	e 2 from Line 1.)ry Page, Column A, Line 2.			NET \$ _	0.00 (May be a negative number)	s	CC – Small Contri	outor Committee
*Amounts forgiven or paid by another party also ** If required.	must be reported on Schedule A					EDDC Advices		orm 460 (Jan/201

Schedul	e C								SCHEDULE (
Nonmor	netary Contributions Red	ceived	Amounts may be rounded to whole dollars.		State	ment covers pe	riod	CALIFO	- 11 - 4 - 1 - 10 - 10 - 10 - 10 - 10 -
					from	07/01/201	6	FOF	M 40U
	!				through.	09/24/201	6	Dage	16 of 28
NAME OF FILE	TIONS ON REVERSE				unough.			I.D. NUMBI	
Friends of	f Fadelli for City Council 20	16						1382665	
DATE RECEIVED	FULL NAME, STREET ADDRES ZIP CODE OF CONTRIBUT, (IF COMMITTEE, ALSO ENTER I.D. NU	OR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICE		AMOUNT/ AIR MARKET VALUE	CALENI	ATIVE TO DATE DAR YEAR - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
07/09/2016	Joan Hendricks 6472 South Land Park Drive Sacramento, CA 95831	⊠IND □COM □OTH □PTY □SCC	Retired n/a	Fundraising Eve	nt	435.50		435.50	
07/09/2016	John Hendricks 6472 South Land Park Drive Sacramento, CA 95831	⊠IND □COM □OTH □PTY □SCC	Retired n/a	Fundraising Eve	ent	435.50		435.50	
09/17/2016	Debbie Weeks 1506 Arlington Blvd. El Cerritos, CA 94530	⊠IND □COM □OTH □PTY □SCC	Graphic Artist/Web Designer Debbie Weeks	Fundraising Supplies		413.71		413.71	
		□IND □COM □OTH □PTY □SCC							
Attach ad	dditional information on approp	priately labeled continua	tion sheets.	SUBTO	TAL \$	1,284.71			
					· · · · · · · · · · · · · · · · · · ·				
1. Amoun	le C Summary t received this period – itemized e all Schedule C subtotals.)				\$	1,284.	IN	Contributor Co D – Individual DM – Recipien	
2. Amoun	t received this period – unitemize	। ed nonmonetary contribut	ons of less than \$100		\$	0.		TH – Other (e	.g., business entity)
	nmonetary contributions receivenes 1 and 2. Enter here and on t		nn A, Lines 4 and 10.)	TOTAL	_ \$	1,284.	s	FY – Political F CC – Small Co	ntributor Committee

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Supporting	of Expenditures g/Opposing Other s, Measures and C		Amounts may be to whole doll		Statement covers	-	CALIF(
SEE INSTRUCTION	NS ON REVERSE	·			through09/24/29	016	Page _	<u>17</u> of <u>28</u>
NAME OF FILER							I.D. NUM	BER
Friends of F	adelli for City Counci	1 2016					138266	55
DATE	MEASURE NUMBER OR LI	OFFICE, AND DISTRICT, OR ETTER AND JURISDICTION, MMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVI CALENDA (JAN: 1 - E	R YEAR	PER ELECTION TO DATE (IF REQUIRED)
	☐ Support	☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
	☐ Support	Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	•				
	☐ Support	☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
				SUBTOTAL	\$ 0.0	0		

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

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25.00

FPPC Form 460 (Jan/2016)

FPPC Toll-Free Helpline: 866/ASK-FPPC

/275-3772) ppc.ca.gov

Schedule	E	
(Continua	tion	Sheet)
Payments	Mad	de

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Amounts may be rounded to whole dollars.

Statement covers period	CALIFORNIA 160
from07/01/2016	FORM
through 09/24/2016	Page 19 of 28
	I.D. NUMBER
	1382665

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

COL	To the of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.						
CMP	campaign paraphernalia/misc.	MBF	R member.commu	nications	RAD	radio airtime and production costs	
CNS	campaign consultants	. ∕ MTC	3 meetings and a	ppearances	RFD	returned contributions	
CTB	contribution (explain nonmonetary)*	OFC	C office expense	S	SAL	campaign workers' salarles	
CVC	civic donations	PET	petition circulati	ng	TEL	t.v. or cable airtime and production costs	
FIL	candidate filing/ballot fees	PHO	D phone banks		TRC	candidate travel, lodging, and meals	
FND	fundraising events	POL	 polling and sur 	vey research	TRS	staff/spouse travel, lodging, and meals	
IND	independent expenditure supporting/opposi	ing others (explain)* POS	S postage, delive	ry and messenger services	TSF	transfer between committees of the same candidate/sponsor	
LEG	legal defense	PRO	D professional se	rvices (legal, accounting)	VOT	voter registration	
LIT	campaign literature and mailings	PRT	Γ print ads		WEB	information technology costs (internet, e-mail)	

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OF	R DESCRIPTION OF PAYMENT	AMOUNT PAID	
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC		2.25	
Anedot, Inc. 55555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC		4.20	
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC		4.20	
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC		4.20	
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC		4.20	

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

SUBTOTAL \$

19.05

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

 Statement covers period from ____07/01/2016
 CALIFORNIA 460

 through ___09/24/2016
 Page ___20 __ of __28

 I.D. NUMBER
 1382665

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. RAD radio airtime and production costs MBR member communications CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees candidate travel, lodging, and meals phone banks TRC PHO fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals IND independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings WEB information technology costs (internet, e-mail) PRT print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) AMOUNT PAID CODE OR DESCRIPTION OF PAYMENT 4.20 Anedot, Inc. OFC 5555 Hilton Avenue, #106 Baton Rouge, LA 70808 Anedot, Inc. OFC 8.40 5555 Hilton Avenue, #106 Baton Rouge, LA 70808 OFC 10.05 Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808 Anedot, Inc. OFC 7.53 5555 Hilton Avenue, #106 Baton Rouge, LA 70808 Anedot, Inc. OFC 37.20 5555 Hilton Avenue, #106 Baton Rouge, LA 70808

SUBTOTAL \$

67.38

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

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Statement covers period

rom 07/01/2016

hrough 09/24/2016

Page 21 of 28

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SEE INSTRUCTIONS ON REVERSE	through 09/24/2016	Page 21 of 28
NAME OF FILER		I.D. NUMBER
Friends of Fadelli for City Council 2016		1382665

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations TEL t.v. or cable airtime and production costs PET petition circulating FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals FND fundraising events TRS staff/spouse travel, lodging, and meals POL polling and survey research independent expenditure supporting/opposing others (explain)* transfer between committees of the same candidate/sponsor IND postage, delivery and messenger services TSF legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings WEB information technology costs (internet, e-mail) LIT PRT print ads NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE OR **DESCRIPTION OF PAYMENT** AMOUNT PAID Anedot, Inc. OFC 5.47 5555 Hilton Avenue, #106 Baton Rouge, LA 70808 Anedot, Inc. 10.65 OFC 5555 Hilton Avenue, #106 Baton Rouge, LA 70808 Anadat Too

* Payments that are contributions or indepe	ndent expenditures must also be summarized on	Schedule D.	SUBTOTAL \$	36.82
Baton Rouge, LA 70808				
Anedot, Inc. 5555 Hilton Avenue, #106	!	OFC		10.05
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	:	OFC		4.20
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC		6.45

FPPC Form 46' n/2016)

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SCHE	OULE E	(CONT.)

Statement covers period **CALIFORNIA** Amounts may be rounded to whole dollars. **FORM** 07/01/2016 through ___09/24/2016 Page 22 of 28 SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Friends of Fadelli for City Council 2016 1382665 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs CVP campaign paraphernalia/misc. MBR member communications CNS campaign consultants MTG meetings and appearances RFD returned contributions contribution (explain nonmonetary)* CTB OFC office expenses SAL campaign workers' salaries CVC civic donations petition circulating TEL t.v. or cable airtime and production costs PET candidate filing/ballot fees FIL PHO phone banks candidate travel, lodging, and meals staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research ND independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor legal defense LEG PRO professional services (legal, accounting) VOT voter registration campaign literature and mailings WEB information technology costs (internet, e-mail) LIT PRT print ads NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE OR **DESCRIPTION OF PAYMENT** AMOUNT PAID Anedot, Inc. OFC 4.20 5555 Hilton Avenue, #106 Baton Rouge, LA 70808 OFC 8.40 Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808

		,	
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC	4.20
•			
			ì
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC	4.20
	i		
	:		
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	* * * * * * * * * * * * * * * * * * *	OFC	4.20

SUBTOTAL \$

25,20

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

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

1382665

 Statement covers period from ____07/01/2016
 CALIFORNIA FORM
 460

 through ___09/24/2016
 Page __23 ___of __28

 I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

MBR member communications RAD radio airtime and production costs CMP campaign paraphernalia/misc. CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations petition circulating PET TEL t.v. or cable airtime and production costs candidate filing/ballot fees phone banks candidate travel, lodging, and meals FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF IND LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings WEB information technology costs (internet, e-mail) print ads

- Stripting Throaters and Manings	Print add	***LD shormation tookhology (
NAME AND ADDRESS OF I (IF COMMITTEE, ALSO ENTER I.D.	PAYEE NUMBER) CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		4.20
Card Service Center 5055 Norwood Road Dallas, TX 75356		Credit Card Payment	434.45
Card Service Center 5055 Norwood Road Dallas, TX 75356		Credit Card Payment	175.00
Card Service Center 5055 Norwood Road Dallas, TX 75356		Credit Card Payment	260.00
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		343.85

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

SUBTOTAL \$

1,217.50

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

	SCHEDULE E (CONT.)
Statement covers period	CALIFORNIA 460
from07/01/2016	FORM
through <u>09/24/2016</u>	Page 24 of 28

Friends of Fadelli for City Council 2016

I.D. NUMBER 1382665

COL	DES: If one of the following codes	accurately describes	the	payment, you may enter the code.	Otherwise,	describe the payment.
CMP	campaign paraphernalia/misc.	1	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	1	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*		OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations		PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees		PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	4	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposit	ng others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense		PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings		PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRE (IF COMMITTEE, ALSO EN	SS OF PAYEE ITER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815		PRO		301.01
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815		PRO		535.50
		СМР		3,068.80
Lisa Tucker dba The Tucker Group 1981 North Broadway, Suite 225 Walnut Creek, CA 94596		СМР		3,214.6
Voter Guide Slate Cards (ID# 1319578) 6285 East Spring Street, Suite 202 Long Beach, CA 90808	·	Slate Maile	or	474.00

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

SUBTOTAL \$

7,593.92

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

NAME OF FILER

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs RFD returned contributions CNS campaign consultants MTG meetings and appearances CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL. t.v. or cable airtime and production costs candidate filing/ballot fees candidate travel, lodging, and meals PHO phone banks TRC FIL fundraising events staff/spouse travel, lodging, and meals polling and survey research TRS IND independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings WEB information technology costs (internet, e-mail) PRT print ads

	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Debbie Weeks 1506 Arlington Blvd. El Cerritos, CA 94530		CMP		625.00
Debbie Weeks 1506 Arlington Blvd. El Cerritos, CA 94530		WEB		900.00
	- Andrews			

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

SUBTOTAL \$

1,525,00

Schedule	e F		
Accrued	Expenses	(Unpaid	Bills)

Amounts may be rounded to whole dollars.

Statement covers period 07/01/2016 through 09/24/2016

0.00\$

CALIFORNIA FORM

Page 26 of 28

I.D. NUMBER

1382665

NAME OF FILER

SEE INSTRUCTIONS ON REVERSE

Friends of Fadelli for City Council 2016

CO	DES: If one of the following codes accurately describ	es the	payment, you may enter the code.	Otherw	ise, describe the payment.
CMP	campaign paraphernalia/misc.	MBR	member communications	RA	D radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RF.	D returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SA	L campaign workers' salaries
CVC	civic donations	PET	petition circulating	TE	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TR	C candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TR	S staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TS	F transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VC	T voter registration
LIT	campaign literature and mailings	PRT	print ads	WE	B information technology costs (internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Card Service Center 5055 Norwood Road Dallas, TX 75356	Credit Card Payment	434.45	0.00	434.45	0.00
					Allah
* Payments that are contributions or independent expenditures must also be	CHRIOTALS	¢ 424.45	• 0.001	A24 AE	

Schedule F Summary

summarized on Schedule D.

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

2. Total accrued expenses paid this period. (Include all Schedule F. Column (c) subtotals for payments on

SUBTOTALS \$

434.45\$

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

NET \$

-434.45

May be a negative number

> FPPC Form 46/ n/2016) 5-3772)

FPPC Toll-Free Helpline: 866/ASK-FPPC (8

434.45\$

0.00

0.00

Schedule G	
Payments Made	by an Agent or Independent
Contractor (on F	Rehalf of This Committee)

Amounts may be rounded to whole dollars.

Statement covers period	CALIFORNIA A CO
from 07/01/2016	FORM 400
through 09/24/2016	Page27 of28
	I.D. NUMBER
	1382665

WEB information technology costs (internet, e-mail)

SCHEDULE G

Friends of Fadelli for City Council 2016

NAME OF AGENT OR INDEPENDENT CONTRACTOR

campaign literature and mailings

Card Service Center

NAME OF FILER

SEE INSTRUCTIONS ON REVERSE

COI	CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.					
CMP	campaign paraphemalia/misc.	MBR	member communications	RAD	radio airtime and production costs	
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions	
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries	
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs	
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals	
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals	
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor	
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration	

PRT print ads

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	AMOUNT PAID
City of El Cerrito 10890 San Pablo Avenue El Cerrito, CA 94530	FIL	225.0
John Garamendi for Congress 1315 10th Street Sacramento, CA 95814	To Be Refunded	150.0
John Garamendi for Congress 1315 10th Street Sacramento, CA 95814	Contribution Refunded	-150.0
Sierra Club San Francisco 2530 San Pablo Avenue # I Berkeley, CA 94702	cvc	185.0

^{- *} 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.

Attach additional information on appropriately labeled continuation sheets.

FPPC Form 460 (Jan/2016)

TOTAL* \$

410.00

Schedule G
Payments Made by an Agent or Independent
Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

				SCF	HEDUL	ΕG
Statement covers period		CALI	FORN	IA Z		7
from	07/01/2016		ORM		+0	y
through	09/24/2016	Dogo	20	~4	2 Q	

I.D. NUMBER

1382665

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Fadelli for City Council 2016

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Lisa Tucker dba The Tucker Group

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

print ads

POS

PRO

PRT

CMP campaign paraphernalia/misc. MBf
CNS campaign consultants MT0
CTB contribution (explain nonmonetary)* OFC
CVC civic donations PET
candidate filing/hallot fees

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

RAD radio airtime and production costs

MTG meetings and appearances RFD returned contributions OFC office expenses SAL campaign workers' salaries

PET petition circulating TEL t.v. or cable airtime and production costs
PHO phone banks TRC candidate travel, lodging, and meals
POL polling and survey research 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.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	АМО	OUNT PAID
H&S Signs 418 Neal Street Grass Valley, CA 95945	СМР			1,983.80
Madison Street Press 614 Madison Street Oakland, CA 94607	CMP			1,628.25
Mary Szczepanik 1483 Guerrero Street San Francisco, CA 94110	CMP			297.50
Attach additional information on appropriately labeled continuation s	heets.		TOTAL* \$	3,909.55

postage, delivery and messenger services

professional services (legal, accounting)

* 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.

FPPC Form 460 (Jan/2016)

FPPC Advice: advice@fppc.ca.gov

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Muvice, advice@ippc.ca.gov

gov. چې .gov

Recipient Committee		Į	Date Stamp	CALIFORNIA A CA
Campaign Statement Cover Page (Government Code Sections 84200-84216.5)			RECEIVED	FORM 400
	Statement covers period	Date of election if applicable: (Month, Day, Year)	OCT 27 2016	Page1 of15
	from 09/25/2016	(Worth, Day, Tear)	UCI & 1 2010	For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through10/22/2016	11/08/2016	City of El Cerrito City Clerk	
1. Type of Recipient Committee: All Committees - 0	Complete Parts 1, 2, 3, and 4.	2. Type of Statement:		
 ☑ 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 Bailot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)		Sr Sr ermination)	uarterly Statement pecial Odd-Year Report upplemental Preelection talement - Attach Form 495
3. Committee Information	I.D. NUMBER 1382665	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE		NAME OF TREASURER		
Friends of Fadelli for City Council 2016		Shawnda Deane		
		MAILING ADDRESS		
STREET ADDRESS (NO P.O. BOX)		1787 Tribute Road, Su		CODE AREA CODE/PHONE
8646 Arbor Drive		Sacramento		P CODE AREA CODE/PHONE 95815 (916) 285-5733
CITY STATE ZIP	CODE AREA CODE/PHONE	NAME OF ASSISTANT TREASUR		12101202 2123
El Cerrito CA 94	530 (916)285-5733	Paul Fadelli		
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.		MAILING ADDRESS		
1787 Tribute Road, Suite K		8646 Arbor Drive		
CITY STATE ZIP	CODE AREA CODE/PHONE	CITY	STATE ZIF	CODE AREA CODE/PHONE
	815	El Cerrito		94530 (916)285-5733
OPTIONAL: FAX/E-MAIL ADDRESS Fadelli2016@deaneandcompany.com		OPTIONAL: FAX / E-MAIL ADDR	RESS	
Verification I have used all reasonable diligence in preparing and review under penalty of perjury under the laws of the State of California.		nowledge the information contained he	rein and in the altached sch	edules is true and complete. I certify
Executed on	Ву	Minature of Treasurer of Assistant	Treasurer	
Executed on	By Signature of C	botrolling officeholder, Candidate, State Measure Pro	oponeni or Responsible Officer of Spon	sor
Executed on	Ву	Signature of Controlling Officeholder, Candidate, S	State Measure Proponent	
Executed on	Ву	Signature of Controlling Officeholder, Candidate, S	State Measure Proponent	FPPC Form 460 (Jan/2016)

www.netfile n

FPPC Advice: advice@fppc.ca.gov (866/2 www.fpp

(72)

NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
Paul Fadelli						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIST	RICT NUMBER IF APPLICABI	LE)	BALLOT NO. OR LETTER	JURISDICTI	NC	SUPPORT
City Council Member: City of El Cerrito						OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE	ZIP	Identify the controlling	officeholder, ca	ndidate, or state measur	e proponent, if an
8646 Arbor Drive	El Cerrito CA	94530	NAME OF OFFICEHOLDER,	CANDIDATE, OR PE	ROPONENT	
	.					
Related Committees Not Included in this someting the statement that are controlled by year the sometimes on the statement that are controlled by year the state of your the yo	ou or are primarily formed		OFFICE SOUGHT OR HELD		DISTRICT N	D. IF ANY
COMMITTEE NAME	LD. NUMBER					
NAME OF TREASURER	CONTROLLED COMMIT	TEE?	7. Primarily Formed C		ceholder Committee	List names of
THE OF THE AGONE IT	GOTTI NOCECED GOTTING					
	☐ YES ☐ NO		officeholder(s) or candida	te(s) for which th	is committee is primarily fo	
COMMITTEE ADDRESS STREET ADDRESS (NO P.C			officeholder(s) or candida NAME OF OFFICEHOLDER (OFFICE SOUGHT OR HEL	ormed.
	D. BOX)			DR CANDIDATE		SUPPORT OPPOSE
	D. BOX)	D	NAME OF OFFICEHOLDER (DR CANDIDATE	OFFICE SOUGHT OR HEL	SUPPORT OPPOSE
CITY STATE Z	D. BOX) IP CODE AREA CO	D	NAME OF OFFICEHOLDER (DR CANDIDATE	OFFICE SOUGHT OR HEL	SUPPORT OPPOSE
CITY STATE Z	D. BOX) IP CODE AREA CO	DE/PHONE	NAME OF OFFICEHOLDER (DR CANDIDATE DR CANDIDATE DR CANDIDATE	OFFICE SOUGHT OR HEL	D SUPPORT OPPOSE D SUPPORT OPPOSE D SUPPORT OPPOSE
CITY STATE Z COMMITTEE NAME NAME OF TREASURER	D. BOX) IP CODE AREA CO I.D. NUMBER CONTROLLED COMMIT	DE/PHONE TEE?	NAME OF OFFICEHOLDER (DR CANDIDATE DR CANDIDATE DR CANDIDATE	OFFICE SOUGHT OR HEL	D SUPPORT OPPOSE D SUPPORT OPPOSE D SUPPORT OPPOSE D SUPPORT OPPOSE
CITY STATE Z COMMITTEE NAME	D. BOX) IP CODE AREA CO I.D. NUMBER CONTROLLED COMMIT	DE/PHONE TEE?	NAME OF OFFICEHOLDER (DR CANDIDATE DR CANDIDATE DR CANDIDATE	OFFICE SOUGHT OR HEL	D SUPPORT OPPOSE D SUPPORT OPPOSE D SUPPORT OPPOSE D SUPPORT

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1382665 Friends of Fadelli for City Council 2016 Column A Column B Calendar Year Summary for Candidates Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROMATTACHED SCHEDULES) **General Elections** 18,734.01 4,175.00 1. Monetary Contributions Schedule A, Line 3 \$ ____ 1/1 through 6/30 7/1 to Date 5,000.00 10,000.00 20. Contributions SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ _____ 9,175.00 28,734.01 Received 37.30 451.01 Nonmonetary Contributions Schedule C, Line 3 21. Expenditures Made 9,212.30 29,185.02 Expenditures Made **Expenditure Limit Summary for State** Candidates 24,150.95 0.00 0.00 22. Cumulative Expenditures Made* 24,150.95 (If Subject to Voluntary Expenditure Limit) 0.00 Date of Election Total to Date (mm/dd/yy) 37.30 451.01 24,601.96 Current Cash Statement 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ To calculate Column B, add amounts in Column A to the 9,175.00 corresponding amounts *Amounts in this section may be different from amounts 0.00 14. Miscellaneous Increases to Cash Schedule I, Line 4 from Column B of your last reported in Column B. report. Some amounts in 10,477.23 Column A may be negative 4,583.06 figures that should be 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 0.00 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ _____ carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any).

Schedule A	Δ						SCHEDULE A	
Monetary Contributions Received			ts may be rounded whole dollars.	Statement cove	•	CALIFORNIA 460		
SEE INSTRUCTIO	ONS ON REVERSE		•	through 10/22/20	016	Page _	4 of15	
NAME OF FILER				<u> </u>		I.D. NUM	IBER	
Friends of F	Fadelli for City Council 2016					138266	55	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DÉC.	'EAR	PER ELECTION TO DATE (IF REQUIRED)	
09/26/2016	Kurt Bondelie 7075 Royal Ridge Drive San Jose, CA 95120	⊠IND □COM □OTH □PTY □SCC	Sales Management Coherent	200.00		200.00		
10/11/2016	Marta Dragos 1352 Rifle Range Road El Cerrito, CA 94530	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired n/a	100.00		100.00		
10/13/2016	Richard W. Ghilotti 296 Margarita Drive San Rafael, CA 94901	⊠IND □COM □OTH □PTY □SCC	Owner Ghilotti Construction	500.00		500.00		
09/25/2016	Don Hayashida 8401 Mondavi Court Sacramento, CA 95828	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00		100.00		
10/08/2016	Deidre Heitman 339 Marlow Drive Oakland, CA 94605	IND COM OTH PTY SCC	Manager, Special Projects Bay Area Rapid Transit	75.00		150.00		
			SUBTOTAL	\$ 975.00				
1. Amount re	A Summary eccived this period – itemized monetary contributions.		¢.	2 025 00	IND-	ntributor Co – Individual VI – Recipier		

(Include all Schedule A subtotals.)\$

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

FPPC Form 460 (Jan/2016)

(other than PTY or SCC) OTH - Other (e.g., business entity)

SCC - Small Contributor Committee

FPPC Advice: advice@fppc.ca.gov (f 75-3772)

PTY - Political Party

3,925.00

4,175.00

250.00

c.ca.govبر , www.

3. Total monetary contributions received this period.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

from.

09/25/2016

NAME OF FILER Friends of Fa	adelli for City Council 2016			through 10/22/	2016	Page I.D. NUN 138266	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OFBUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
10/02/2016	Kirsten MacPhee 10 Upper Via Casitas Greenbrae, CA 94904	XIND ☐COM ☐OTH ☐PTY ☐SCC	Senior Companion Care Kirsten MacPhee	100.00	1	00.00	
09/27/2016	Letitia Moore 761 Norvell Street El Cerrito, CA 94530	⊠IND □COM □OTH □PTY □SCC	Attorney United States Enviornmental Protection Agency	100.00	1	00.00	
10/21/2016	Seamus Murphy 245 10th Avenue San Francisco, CA 94118	⊠IND □COM □OTH □PTY □SCC	Chief Communications Officer San Mateo County Transit District	100.00	1	.00.00	
09/30/2016	Nancy Fujita Nakayama 8724 Don Carol Drive El Cerrito, CA 94530	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	1	.00.00	
09/26/2016	Amy Ongaro 39 Kinross Drive San Rafael, CA 94901	XIND COM OTH PTY SCC	Property Manager Amy Ongaro	200.00	2	200.00	
			SUBTOTAL	\$ 600.00			

*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 (Jan/2016)

FPPC Advice: advice@fppc.ca.gov (1 75-3772) www...pc.ca.gov

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

from

09/25/2016

		through 10/22/	2016	Page	6 of 15						
NAME OF FILER			*			I.D. NUMI	BER				
Friends of Fa	Friends of Fadelli for City Council 2016										
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)				
09/26/2016	Diane Ongaro 21 Culloden Park Road San Rafael, CA 94901		Retired n/a	500.00	6	00.00					
09/28/2016	James P. Perero 8613 Don Carol Drive El Cerrito, CA 94530	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	1	00.00					
09/30/2016	Peter Peyser 250 West 93rd Street New York, NY 10025	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Consultant Peyser Associates LLC	100.00	1	00.00					
09/28/2016	Sandi Potter 12 Mission Drive Petaluma, CA 94952	⊠IND □COM □OTH □PTY □SCC	Planning Manager County of Sonoma	100.00	1	00.00					
09/30/2016	Dan Richard 2 Highland Avenue Oakland, CA 94611	⊠IND □COM □OTH □PTY □SCC	Chair, High Speed Rail Authority State of California	250.00	2	50.00					
			SUBTOTAL	\$ 1,050.00							

*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 (Jan/2016)

Amounts may be rounded to whole dollars.

SCHEDULE A	(CONT.)
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CALIFORNIA FORM

Statement covers period

from.

09/25/2016

				through10/22/	2016	Page	7 of <u>15</u>
NAME OF FILER						I.D. NUM	BER
Friends of Fa	adelli for City Council 2016					138266	5
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
10/01/2016	Steve Schnaidt 2817 Land Park Drive Sacramento, CA 95818	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	1	00.00	
10/05/2016	Service Employees International Union Local 1021 PAC Small Contributor Committee (ID# 1296948) 555 Capital Mall, Suite 1425 Sacramento, CA 95814	□IND □COM □OTH □PTY ☑SCC		1,000.00	1,0	00.00	
10/07/2016	Michael Sherman 5372 Hilltop Crescent Oakland, CA 94618	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	1	00.00	
10/05/2016	Christopher Starr 732 Westmount Drive West Hollywood, CA 90069		Writer Christopher Starr	100.00	1	00.00	
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
			SUBTOTAL	\$ 1,300.00	livering on possible	1045	

*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

							SCHE	DULEB-PART
Schedule B – Part 1 Loans Received	Amo	ounts may be ro to whole dollar			Statement cov	•	CALIFORNI	^ 46 0
Louis Redeived					from09/25	5/2016	FORM	er (2 d. o.
SEE INSTRUCTIONS ON REVERSE					through10/2	2/2016	Page 8	of <u>15</u>
NAME OF FILER							I.D. NUMBER	
Friends of Fadelli for City Council 20	016						1382665	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIO	EN CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTION TO DATE
Paul L. Fadelli 8646 Arbor Drive El Cerrito, CA 94530	Program Manager San Francisco Bay Area Rapid Transit	LINOS		PAID \$ 0.0 FORGIVEN		0.00 % RATE	\$_5,000.00	CALENDAR YEAR \$ 10,000.00 PER ELECTION*
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$5,000.00	\$0.00	\$0.0	03/09/2017 DATE DUE	\$0.00	03/09/2016 DATE INCURRED	\$
Paul L. Fadelli 8646 Arbor Drive El Cerrito, CA 94530 Loan Recieved, 0% Interest	Program Manager San Francisco Bay Area Rapid Transit			\$ 0.0	\$ 5,000.00	0.00 % RATE	\$ _5,000.00	\$ 10,000.00 PER ELECTION
TIND □ COM □ OTH □ PTY □ SCC		\$0.00	\$5,000.00	\$0.0	10/07/2017 DATE DUE	\$	10/07/2016 DATE INCURRED	\$
				□ PAID		9/	d.	CALENDAR YEAR
				FORGIVEN		RATE	-	PERELECTION
† IND COM OTH PTY SCC		\$	\$	- S	DATE DUE	\$	DATE INCURRED	\$
		SUBTOTALS	\$ 5,000.00	\$ 0	.00\$ 10,000.00	0.0	0	
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
Loans received this period (Total Column (b) plus unitemized loar				\$	5,000.00		Contributor Codes	
Loans paid or forgiven this period (Total Column (c) plus loans under \$10 (Include loans paid by a third party that	00 paíd or forgiven.)			\$ _	0.00	<u>-</u>	ND — Individual COM — Recipient C	ommittee PTY or SCC)

PTY - Political Party SCC - Small Contributor Committee

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

Enter the net here and on the Summary Page, Column A, Line 2.

FPPC Form 460 (Jan/2016)

FPPC Advice: advice@fppc.ca.gov (:75-3772)

Schedule (C tary Contributions Received		Amounts may be rounded to whole dollars.	,	S	tatement covers p	eriod	CALIFO	SCHEDULE
					from	09/25/20	16	FO	ORNIA 460
SEE INSTRUCTION	NS ON REVERSE				thro	ugh 10/22/20	16	Page	9 of <u>15</u>
NAME OF FILER				····· <u> </u>				I.D. NUMB	ER
Friends of Fa	adelli for City Council 2016							1382665	;
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION O GOODS OR SERVI		AMOUNT/ FAIR MARKET VALUE	CALEN	LATIVE TO DATE DAR YEAR I - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
		□IND □COM □OTH □PTY □SCC							
	,	□IND □COM □OTH □PTY □SCC							
		☐IND ☐COM ☐OTH ☐PTY ☐SCC							
		□IND □COM □OTH □PTY □SCC			THE PARTY OF THE P				
Attach addit	ional information on appropriately lab	eled continuat	ion sheets.	SUBTO	TAL \$				
		+							
1. Amount red	C Summary ceived this period – itemized nonmoneta I Schedule C subtotals.)				\$_	. 0.	IN	Contributor Co ID – Individual OM – Recipier Cother the	
2. Amount red	ceived this period – unitemized nonmon	etary contributio	ons of less than \$100		\$_	37.		•	e.g., business entity)
	nonetary contributions received this perio s 1 and 2. Enter here and on the Summa		nn A, Lines 4 and 10.)	TOTA	L \$_	37.	S		ontributor Committee

FPPC Form 46° ' 'an/2016)
FPPC Advice: advice@fppc.ca.gov (8 '5-3772)
www.tppc.ca.gov

								SCHEDULE I
Schedule E Payments Made	Amounts may b to whole do		d			t covers period	CALIFO	DRNIA 160
SEE INSTRUCTIONS ON REVERSE				froi	••	10/22/2016	_ Page	L0 of 15
NAME OF FILER Friends of Fadelli for City Council 2016							I.D. NUM 138266	
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants contribution (explain nonmonetary)* civic donations FIL candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member coming meetings and OFC office expensional petition circul PHO phone banks POL polling and sepos postage, deli	munication I appearar ses ating urvey rese very and r	s aces	RAD RFD SAL TEL TRC TRS	radio ai returne campai t.v. or c candida staff/sp transfer voter re	rtime and production d contributions gn workers' salarie able airtime and pr ate travel, lodging, a couse travel, lodging,	es oduction costs and meals g, and meals ees of the san	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTIO	N OF PAY	MENT		AMOUNT PAID
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC						40.2
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC						6.4
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC					1	4.2
* Payments that are contributions or independent expenditures	must also be summ	arized on	Schedule D.	***************************************			SUBTOTAL\$	50.8
Schedule E Summary								

FPPC Form 460 (Jan/2016)

FPPC Toll-Free Helpline: 866/ASK-FPPC (?75-377

www. ..pc.ca.gov

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

	- in one of the following deduct according accombact		paymoni, jou may onto ino ocuo.	o (1101 11100)	docorios are payment.
CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		24.90
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		6.45
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		9.67
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		4.20
Budget Watchdogs Newsletter (ID# 1345115) 1954 West Carson Street, Suite B Torrance, CA 90501		Slate Mailer	100.00

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

SUBTOTAL \$

145.22

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Statement covers period **CALIFORNIA FORM** 09/25/2016

through ____10/22/2016 Page ____12___ of ___15_

I.D. NUMBER

1382665

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants RFD returned contributions MTG meetings and appearances CTB contribution (explain nonmonetary)* office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating t.v. or cable airtime and production costs

candidate filing/ballot fees candidate travel, lodging, and meals PHO phone banks TRC staff/spouse travel, lodging, and meals FND fundraising events polling and survey research TRS transfer between committees of the same candidate/sponsor IND independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF

LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CalSal Voter Guide (ID# 1368249) Slate Mailer 100.00 1954 West Carson Street, Suite B Torrance, CA 90501 Deane & Company PRO 652.85 1787 Tribute Road, Suite K Sacramento, CA 95815 Democractic Party of Contra Costa (ID# 990861) Slate Mailer 130.00 702 Windmill Court Concord, CA 94518 Election Digest (ID# 1345303) Slate Mailer 100.00 1954 West Carson Street, Suite B Torrance, CA 90501 Lisa Tucker dba The Tucker Group OFC 300.00 1981 North Broadway, Suite 225 Walnut Creek, CA 94596

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

SUBTOTAL \$

1.282.85

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

 Statement covers period
 CALIFORNIA FORM
 460

 from ___09/25/2016
 Page ___13 __of __15

 LD. NUMBER
 I.D. NUMBER

TSF

1382665

transfer between committees of the same candidate/sponsor

NAME OF FILER

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMPcampaign paraphernalia/misc.MBRmember communicationsRADradio airtime and production costsCNScampaign consultantsMTGmeetings and appearancesRFDreturned contributionsCTBcontribution (explain nonmonetary)*OFCoffice expensesSALcampaign workers' salaries

CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals
FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals

IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services LEG legal defense PRO professional services (legal, accounting)

LEG legal defense PRO professional services (legal, accounting) VOT voter registration

LIT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

Titl plint add	- Internation technology o	out (miteriou, o man)
CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
LIT		246.38
CNS		1,000.00
POS		1,882.68
OFC		453.00
LIT		4,716.25
• ·	CODE LIT CNS POS OFC	CODE OR DESCRIPTION OF PAYMENT LIT CNS POS OFC

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

SUBTOTAL \$

8,298.31

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

		SCHEDULE E (CONT.)
State	ement covers period	CALIFORNIA 460
from	09/25/2016	FORM TOO
through	10/22/2016	- Page <u>14</u> of <u>15</u>
		I.D. NUMBER
		1382665

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* office expenses SAL campaign workers' salaries CVC civic donations petition circulating PET t.v. or cable airtime and production costs candidate filing/ballot fees phone banks candidate travel, lodging, and meals PHO TRC FND fundraising events polling and survey research TRS staff/spouse travel, lodging, and meals POL independent expenditure supporting/opposing others (explain)* transfer between committees of the same candidate/sponsor postage, delivery and messenger services IND TSF legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYER
(F COMMITTE ALBOENTER) LAWWER)

Sierra Club, San Francisco Bay Chapter Campaigns SMO (ID# 1306869)

Serkeley, CA 34702

Slate Mailer

Slate Mailer

Slate Mailer

AMOUNT PAID

700.00

SUBTOTAL \$

700.00

 $\sqrt{2016}$

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

Schedule G				
Payments N	lade by an	Agent or	Independe	ent
Contractor	on Behalf	of This C	ommittee)	

Amounts may be rounded to whole dollars.

			SCHEDULE G
ſ	Statement covers period		CALIFORNIA A CO
	from	09/25/2016	FORM 40U
-	through	10/22/2016	- Page 15 of 15
	***************************************	***************************************	I.D. NUMBER
			1382665

NAME OF FILER

SEE INSTRUCTIONS ON REVERSE

legal defense

LEG LIT

Friends of Fadelli for City Council 2016

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Lisa Tucker dba The Tucker Group

campaign literature and mailings

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)*

OFC office expenses
PET petition circulating
PHO phone banks
POL polling and survey research
POS postage, delivery and messenger services

MBR member communications

MTG meetings and appearances

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.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Madison Street Press 614 Madison Street Oakland, CA 94607	LIT		3,404.50
Mary Szczepanik 1483 Guerrero Street San Francisco, CA 94110	LIT		637.50
US Postmaster 300 East Bonita Avenue San Dimas, CA 91773	POS		1,882.68

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.

FPPC Form 460 (Jan/2016)

FPPC Advice: advice@fppc.ca.gov (F 275-3772)

TOTAL* \$

ww jc.ca.gov

5,924.68

	- 23
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Recipient Committee Campaign Statement Cover Page			Date Stamp RECEIVED	CALIFORNIA 460
(Government Code Sections 84200-84216.5) SEE INSTRUCTIONS ON REVERSE	Statement covers period from	Date of election if applicable: (Month, Day, Year)	OCT 2 5 2016 City of El Cerrito City Clerk	Page 1 of 26
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	nplete Parts 1, 2, 3, and 4. rimarily Formed Ballot Measure ommittee) Controlled) Sponsored (so Complete Pert 6) rimarily Formed Candidate/ fficeholder Committee (so Camplete Pert 7)	2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te X Amendment (Explain be	Spec support State Support State Slow)	rterly Statement sial Odd-Year Report plemental Preelection ement - Attach Form 495
3 Committee Information	0 (916)285-5733 DX AREA CODE/PHONE	Treasurer(s) NAME OF TREASURER Shawnda Deane MAILING ADDRESS 1787 Tribute Road, Su CITY Sacramento NAME OF ASSISTANT TREASUR Paul Fadelli MAILING ADDRESS 8646 Arbor Drive CITY El Cerrito	STATE ZIP C CA 958	15 (916)285-5733 ODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS Fadelli2016@deaneandcompany.com 4. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California Executed on ID 22 2010 Executed on Date Executed on Date Executed on Date	this statement and to the best of my kno	OPTIONAL: FAX / E-MAIL ADDR wledge the information contained her	rein and in the attached schedu Treasurer John Committee of Sponsor Tale Measure Proponent	

www.net. ...com

FPPC Advice: advice@fppc.ca.gov (8f 3-3773

www. ..ca.gov

	COVERF	AG.	E-PA	RT2
CALIF FO	ORNIA RM	4	l 6	0
Page	2	of	28	

Officeholder or Candidate Controlled Con	nmittee	6.	Primarily Formed Ball	ot Measure	Committee	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
Paul Fadelli						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIST	RICT NUMBER IF APPLICABLE)	•	BALLOT NO. OR LETTER	JURISDICTI	ON	SUPPORT
City Council Member: City of El Cerrito					<u> </u>	OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP		11 116 116	M I I -)	#*.d=4=	4 75
8646 Arbor Drive	El Cerrito CA 94530		Identify the controlling of		*	re proponent, if a
		•	NAME OF OFFICEHOLDER, CA	NDIDATE, OR PF	ROPONENT	
Related Committees Not Included in this s	Statement: List and committees					
not included in this statement that are controlled by yo contributions or make expenditures on behalf of your	ou or are primarily formed to receive		OFFICE SOUGHT OR HELD		DISTRICT	O. IF ANY
COMMITTEE NAME	I.D. NUMBER	•				
		7	Duimenth, Fermand Com	-1:-14 (OSS:-	l l. d	
NAME OF TREASURER	CONTROLLED COMMITTEE?	• •	 Primarily Formed Can officeholder(s) or candidate(s) 			
	YES NO			,		
COMMITTEE ADDRESS STREET ADDRESS (NO P.C	D. BOX)	•	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEL	D SUPPOR
CITY STATE ZI	P CODE AREA CODE/PHONE	•	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEL	D SUPPOR
COMMITTEE NAME	I.D. NUMBER	:				L OPPOSE
CONNITTEENAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEL	D SUPPOR
NAME OF TREASURER	CONTROLLED COMMITTEE?	•	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEL	n
	☐ YES ☐ NO		NAME OF OFFICEROLDER OR	CANDIDATE	OF TOE SOUGHT ON THE	□ SUPPOR
COMMITTEE ADDRESS STREET ADDRESS (NO P.C		•				OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.C						

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SU	MAM	ARY	PΑ	GE

 Statement covers period from 07/01/2016
 CALIFORNIA 460

 through 09/24/2016
 Page 3 of 28

 I.D. NUMBER

Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	COLUMN B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections		
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	\$ 8,786.77 413.71	\$ 14,559.01 5,000.00 \$ 19,559.01 413.71 \$ 19,972.72	1/1 through 6/30 7/1 to Date 20. Contributions Received \$ \$ \$ 21. Expenditures Made \$ \$ \$		
Expenditures Made 6. Payments Made	\$ 10,511.33 -434.45 413.71	\$ 13,673.72 0.00 413.71	Expenditure Limit Summary for State Candidates 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy)		
Current Cash Statement 12. Beginning Cash Balance	\$,786.77 0.00 10,511.33 \$ 5,885.29 \$ 0.00	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).	*Amounts in this section may be different from amounts reported in Column B.		

FPPC Form 460 (Jan/2016) 0fppc.ca.gc 6/275-3772)

FPPC Advice: advice@fppc.ca.gc

w. ...fppc.ca.gov

Schedule A Monetary Contributions Received			Amounts may be rounded to whole dollars.		ers period	california 460	
SEE INSTRUCTIC	DNS ON REVERSE			through _09/24/20	016	Page _	4 of 28
NAME OF FILER						I.D. NUM	IBER
Friends of F	Fadelli for City Council 2016				A	138266	35
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN, 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
09/23/2016	Maya E. Archiga 2363 Alva Avenue El Cerrito, CA 94530	⊠IND □COM □OTH □PTY □SCC	Realtor Marvin Gardens	100.00	1	100.00	
09/06/2016	Jane A. Bartke 1315 Devonshire Court El Cerrito, CA 94530		Retired n/a	100.00	1	100.00	
08/12/2016	Ellen Berman 921 Paulsboro Drive Rockville, MD 20850	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	1	100.00	
07/08/2016	Ernest Beyard 330 A Street Northeast Washington, DC 20002	⊠IND □COM □OTH □PTY □SCC	Retired n/a	250.00	2	250.00	
09/11/2016	Jane Breyer 6767 Cutting Blvd. Bl Cerrito, CA 94530	XIND □COM □OTH □PTY □SCC	Partner Energy Foundation	100.00	1	100.00	
			SUBTOTAL	\$ 650.00			a de paradores de decedo. Sugar de caración de las estas estas estas estas estas en estas estas en estas estas en estas estas en estas e
1. Amount re	A Summary eccived this period – itemized monetary contributions.		C	7 850 00	IND-	tributor Co Individual	

(Include all Schedule A subtotals.) \$ 7,850.00

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

3. Total monetary contributions received this period. 8,786.77 (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.gc

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA AGO

Statement covers period

				from07/01/	2016	FORM TOO
				through 09/24/	2016 Page	55 of28
NAME OF FILER					1.D.1	IUMBER
Friends of Fa	adelli for City Council 2016				138	2665
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	TO DATE (IF REQUIRED)
08/30/2016	Joe Camicía 200 P Street Sacramento, CA 95814	XIND COM OTH PTY SCC	Partner Advocacy Marketing, LLC.	100.00	100.00	
08/22/2016	Denis Carrade 2099 Vineyard Road Novato, CA 94947	⊠IND □COM □OTH □PTY □SCC	Retired n/a	250.00	250.00	
09/14/2016	Phyllis Chow 658 Cutting Way Sacramento, CA 95831	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Scheduler/Legislative California State Assembly	100.00	100.00	
09/06/2016	Gussie Curran 3414 Topsail Place Davis, CA 95616	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00		
07/12/2016	Paul E. Donahue 2200 2nd Avenue Sacramento, CA 95818	XIND COM OTH PTY □SCC	Retired n/a	250.00	250.00	0
			SUBTOTAL \$	\$ 800.00	continue, return or allows	Anthred regional parts in the control of

*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.gc

v. .fppc.ca.gov

Amounts may be rounded

SCHEDULE A (CONT.)

Statement covers period

Monetary	Contributions Received	Amounts may to whole		Statement cove	2016	FORM 460		
				through 09/24/	2016	Page	6 of	28
NAME OF FILER	- Linear Control of the Control of t					I.D. NUM	BER	
Friends of F	adelli for City Council 2016					138266	5	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELE TO D (IF REQ	ATE
09/12/2016	Manish Doshi 1720 Julian Court El Cerrito, CA 94530	XIND ☐COM ☐OTH ☐PTY ☐SCC	Administrator Meeta Doshi DDS, PDC	250.00	250.00			
09/03/2016	Frank O. Fadelli 5049 Wittenmeyer Court Antioch, CA 94531	☑IND □COM □OTH □PTY □SCC	Retired n/a	200.00	2	00.00		
08/22/2016	Jeanne Fadelli 2099 Vineyard Road Novato, CA 94947		Research Analyst Santa Rosa Junior College	100.00	1	00.00		
09/23/2016	Kenneth B. Finney 230 Amherst Avenue Albany, CA 94706	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Beverage LLC	200.00	2	00.00		
09/06/2016	Connie J. Frank 1800 Third Avenue Sacramento, CA 95818	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	1	00.00		
			SUBTOTALS	850.00				

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SCC - Small Contributor Committee

FPPC Form 460 (Jan/2016)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA 160

Statement covers period

				from07/01/	2016	FORM TOO
				through 09/24/		Page7 of28
NAME OF FILER						I.D. NUMBER
Friends of Fa	adelli for City Council 2016					1382665
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN. 1 - DEC. 3	AR TODATE
07/12/2016	Rebecca F. Franzoia 5662 Delcliff Circle Sacramento, CA 95822	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	200.00	200	0.00
07/12/2016	Karen K. French 6621 Longridge Way Sacramento, CA 95831	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Nielsen Merksamer Parrinello Gross & Leoni, LLP	100.00	100	0.00
07/20/2016	Michael Gersick 28 Kerr Avenue Kensington, CA 94707		Retired n/a	100.00	100	0.00
07/08/2016	Linda L. Ghilotti 119 Highland Lane Mill Valley, CA 94941	⊠IND □COM □OTH □PTY □SCC	Retired n/a	200.00	30(0.00
08/22/2016	Linda L. Ghilotti 119 Highland Lane Mill Valley, CA 94941	☑IND □COM □OTH □PTY □SCC	Retired n/a	100.00	300	0.00
			SUBTOTALS	700.00		ennikalossa para serieta salas i

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OTH - Other (e.g., business entity)

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FPPC Form 460 (Jan/2016) 76/275-3772)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT
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Statement covers period

Monetary Contributions Received		to whole		Statement cove		FORM 460		
				through09/24/	2016	Page8 of _	28	
NAME OF FILER						I.D. NUMBER		
Friends of Fa	adelli for City Council 2016					1382665		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN. 1 - DEC. 3	AR TODA	ATE	
09/24/2016	Kim Gillan 1200 Humboldt Street Denver, CO 80218	IND COM OTH PTY SCC	Regional Director United States Department of Health Human Services	100.00	175	5.00	A Part of Agency (Agency (Agen	
07/12/2016	John Hancock 912 South Beach Drive Sacramento, CA 95831	⊠IND □COM □OTH □PTY □SCC	Application Operations University of California, Davis Health System	100.00	100	0.00		
07/12/2016	Judith Inglehart 311 2nd Street, #815 Oakland, CA 94607	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	100	0.00		
08/05/2016	Linton Johnson 4100 Redwood Road Oakland, CA 94619	IND COM OTH PTY SCC	Chief Strategist BART	100.00	179	5.00		
07/14/2016	Thomas J. Kerbs 625 Santa Ynez Way Sacramento, CA 95816	⊠IND □COM □OTH □PTY □SCC	Attorney California Legislature	100.00	100	0.00		
			SUBTOTALS	\$ 500.00	er Kondinen gentusen i			

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SCC - Small Contributor Committee

FPPC Form 460 (Jan/2016)

Amounts may be rounded	
to whole dollars.	

SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may to whole o		Statement cove	•	FORM 460		
				through09/24/	2016	Page	<u>9</u> of	28
NAME OF FILER						I.D. NUM	BER	
Friends of F	adelli for City Council 2016		, <u></u>			138266	5	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN, 1 - DEC	YEAR TO DA C. 31) (IF REQU		DATE
08/12/2016	Mark Krausse 49669 Hamilton Road Clarksburg, CA 95612	XIND ☐COM ☐OTH ☐PTY ☐SCC	Director Pacific Gas & Electric	100.00	1	00,00		
07/12/2016	Stephen Jon Larson 504 Belvedere Street San Francisco, CA 94117	IND COM OTH PTY SCC	Consultant California Strategies	125.00	1	25.00		
08/31/2016	Rodd Lee 311 Oak Street, Unit 703 Oakland, CA 94607	XIND COM OTH PTY	Manager of Government Affairs and Community Relations San Francisco Bay Area Rapid Transit District (BART)	100.00	1	00.00		
07/12/2016	Patrick J. Lenz 9440 Richford Lane Granite Bay, CA 95746	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	100.00	1	00.00		
07/28/2016	Steven Lewis 5224 Yorkville Place Carmichael, CA 95608	⊠IND ☐COM ☐OTH ☐ PTY ☐SCC	Attorney Steven Lewis	100.00	1	00.00		
			SUBTOTALS	525.00				

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Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

		10 1111010		from07/01/	2016	FORM 40U
				through 09/24/	^{'2016} Pag	e 10 of 28
NAME OF FILER		, , , ,,			J.D. I	NUMBER
Friends of Fa	adelli for City Council 2016				138	2665
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/12/2016	Dennis H. Mangers 1017 Harrington Way Carmichael, CA 95608	XIND ☐COM ☐OTH ☐PTY ☐SCC	Senior Advisor California State Senate	100.00	100.0	
07/12/2016	Jill M. Matranga 2367 39th Street Sacramento, CA 95817	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	125.00	125.0	O
08/22/2016	Deborah McFarland 241 Vista Verde Carmel Valley, CA 93924	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	200.00	200.0	
09/20/2016	Bart Mehlhop 1330 21st Street Sacramento, CA 95811	⊠IND □COM □OTH □PTY □SCC	Attorney Law Offices of Mehlhop and Vogt			
09/20/2016	Marcella Moberly 19364 Hollow Lane Redding, CA 96003	XIND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	500.00	500.0	
			SUBTOTAL	1,025.00		

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Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

				from07/01/	2016	FO	RM	TOU
				through09/24/	2016	Page	<u> 11</u> of	28
NAME OF FILER						I.D. NUM	BER	
Friends of Fa	adelli for City Council 2016				}	138266	5	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR 31)	TO	LECTION DATE QUIRED)
07/20/2016	Cindy R. Morse 304 West 23rd Street Merced, CA 95340		Attorney Law Offices of Morse and Pfeiff	500.00	50	0.00		
09/06/2016	Jerri Ollett 313 Hash Court Petaluma, CA 94952	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Health Care Consultant Jerri Ollett, MPA, Consulting & Training	500.00	500.00			
08/30/2016	Daniel Purnell 110 Solano Avenue La Selva Beach, CA 95076	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	10	00.00		
09/23/2016	Amy L. Reisch 917 San Anselmo Avenue, Apt. 4 San Anselmo, CA 94960	⊠IND □COM □OTH □PTY □SCC	Executive Director First 5 Marin	100.00		00.00		
07/25/2016	Marilym Robrahn 481 Basalt Court Redding, CA 96003	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	10	00.00		
		111111111111111111111111111111111111111	SUBTOTAL	\$ 1,300.00				

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Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

from

07/01/2016

NAME OF FILER	of Fadelli for City Council 2016			through 09/24/	2016	Page _ I.D. NUI 13826	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	ÆAR	PER ELECTION TO DATE (IF REQUIRED)
07/20/2016	Antoinette M. Sabelhaus 1121 3rd Avenue Sacramento, CA 95818	XIND COM OTH PTY SCC	Consultant California State Senate	100.00	1	.00.00	
08/04/2016	Samuel J. Salkin 8715 Don Carol Drive El Cerrito, CA 94530	XIND ☐COM ☐OTH ☐PTY ☐SCC	Executive Chevra Kadisha-Sinai Memorial Chapel	100.00	1	.00.00	
09/07/2016	Timothy Schott 4755 Brand Way Sacramento, CA 95819	⊠IND □COM □OTH □PTY □SCC	Association Management and Advocacy Schott & Associates	100.00	2	00.00	
09/22/2016	Timothy Schott 4755 Brand Way Sacramento, CA 95819	⊠IND □COM □OTH □PTY □SCC	Association Management and Advocacy Schott & Associates	100.00	2	200.00	
08/20/2016	William Schulte 849 Vista Drive Redwood City, CA 94062	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Civil Engineer William Schulte	100.00	1	100.00	
			SUBTOTAL	\$ 500.00			

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FPPC Form 460 (Jan/2016) e@fppc.ca.go 6/275-3772)

		SCHEDULE A (CONT.)
Amounts may be rounded to whole dollars.	Statement covers period	CALIFORNIA 460
to whole donats.	from 07/01/2016	FORM 40U
	through 09/24/2016	Page 13 of 28
		I.D. NUMBER

Friends of Fadelli for City Council 2016 1382665 AMOUNT CUMULATIVE TO DATE PER ELECTION IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR DATE OCCUPATION AND EMPLOYER RECEIVED THIS CALENDAR YEAR TODATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED CODE * PERIOD (IF SELF-EMPLOYED, ENTER NAME (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) 09/07/2016 Janice Simoni 100.00 100.00 Retired X IND 1064 Wilhagin Park Lane n/a Псом Sacramento, CA 95864 **□OTH** PTY SCC 07/12/2016 Camillis Slater Psychotherapist 150.00 200.00 XIND 1999 13th Avenue Yolo Family Services СОМ Sacramento, CA 95818 Agency □OTH PTY SCC 07/06/2016 Judith Lee Stone Retired 100.00 100.00 x IND 15 2nd Street Northeast n/a □ COM Washington, DC 20002 OTH PTY SCC 08/23/2016 Peter Tannenbaum Retired 100.00 100.00 X IND 5912 Jordan Avenue n/a ПСОМ El Cerrito, CA 94530 OTH PTY □SCC 08/16/2016 Bob Van Heuvelen Chief Executive 250.00 250.00 X IND 500 New Jersey Avenue NW, Suite #800 Officer/Founder □ COM Washington, DC 20001 VH Strategies □ OTH PTY SCC SUBTOTAL\$ 700.00

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PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

SCHEDULE A (CONT.)

Monetary	Contributions Received	Amounts may to whole		from07/01/	ers period 2016	CALIFORNIA 460		
				through09/24/	2016	Page _	14 of 28	
NAME OF FILER				······································		I.D. NUM	1BER	
Friends of F	adelli for City Council 2016					138266	55	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
08/22/2016	Kathleen Waters 11260 Donner Pass Road, #205 Truckee, CA 96161	IND COM OTH PTY SCC	Real Estate Investment Kathleen Waters	100.00	1	00.00		
07/10/2016	Jill Wilson 103 Arthrop Place Santa Cruz, CA 95060	⊠IND □COM □OTH □PTY □SCC	Attorney Jill Wilson	100.00	1	00,00		
08/10/2016	Kari Yasuda 8712 Don Carol Drive El Cerritos, CA 94530	IND COM OTH PTY SCC	Assistant Berkeley Bowl	100.00	1.	00.00		
		□IND □COM □OTH □PTY □SCC						
		IND COM OTH PTY SCC				and the second s		
			SUBTOTAL	\$ 300.00				

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OTH - Other (e.g., business entity)

PTY - Political Party

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Schedule B – Part 1 Loans Received	Amounts may be rounded		SCHI CALIFORN FORM	IIA 460				
SEE INSTRUCTIONS ON REVERSE					through09/2	4/2016	Page15	of <u>28</u>
NAME OF FILER							I.D. NUMBER	
Friends of Fadelli for City Council 20)16						1382665	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAIE OR FORGIVEI THIS PERIOD	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Paul L. Fadelli 8646 Arbor Drive El Cerrito, CA 94530	Program Manager San Francisco Bay Area Rapid Transit	FENOD		PAID \$ 0.00 FORGIVEN		0 - 00 % RATE	\$ 5,000.00	CALENDAR YEAR \$ 5,000.00 PER ELECTION**
[†] ☑ :ND □ COM □ OTH □ PTY □ SCC		\$ 5,000.00	\$0.00	\$0.00	03/09/2017 DATE DUE	\$ 0.00	03/09/2016 DATE INCURRED	\$
† IND COM OTH PTY SCC † IND COM OTH PTY SCC		\$SUBTOTALS \$	\$	PAID S FORGIVEN PAID FORGIVEN S O.C	DATE DUE DATE DUE DATE DUE 5,000.00	RATE \$% RATE \$% RATE \$% Schedule E, Line 3)	DATE INCURRED \$ DATE INCURRED	CALENDAR YEAR \$ PER ELECTION ** \$ CALENDAR YEAR \$ PER ELECTION ** \$ \$
-				·	0.00	·		
 Loans received this period	ns of less than \$100.) 0 paid or forgiven.)					TO IN CO	TH – Òther (e.g.,	ommittee PTY or SCC) , business entity)
Net change this period. (Subtract Lin- Enter the net here and on the Summar				NET \$	0.00 May be a negalive number)		TY – Political Part CC – Small Contri	
*Amounts forgiven or paid by another party also	must be reported on Schedule A.							

FPPC Form 460 (Jan/2016) 6/275-3772)

** If required.

Schedu Nonmo	le C netary Contributions Received		Amounts may be rounded to whole dollars.		fron	Statement covers pe		CALIFO FOI	
SEE INSTRUC	TIONS ON REVERSE			>	thro	ugh <u>09/24/201</u>	.6	Page	16 of 28
NAME OF FILE								I.D. NUMB	ER
Friends	f Fadelli for City Council 2016							1382665	<u> </u>
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION GOODS OR SERV		AMOUNT/ FAIR MARKET VALUE	D CALENI	ATIVE TO ATE DAR YEAR - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
09/17/2016	Debbie Weeks 1506 Arlington Blvd. El Cerritos, CA 94530	☑IND □COM □OTH □PTY □SCC	Graphic Artist/Web Designer Debbie Weeks	Fundraising Supplies		413.71		413.71	
		□IND □COM □OTH □PTY □SCC							
		□IND □COM □OTH □PTY □SCC			_				
		□IND □COM □OTH □PTY □SCC							
Attach ac	lditional information on appropriately labe	eled continuat	ion sheets.	SUBTO	STAL \$	413.71	u di dina.		
1. Amount	e C Summary received this period – itemized nonmonetar all Schedule C subtotals.)				\$_	413.7	INE	ontributor Coo - Individual M – Recipien (other th	

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

FPPC Form 460 (Jan/2016)

OTH - Other (e.g., business entity)

SCC - Small Contributor Committee

PTY - Political Party

0.00

413.71

3. Total nonmonetary contributions received this period.

Schedule D
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Amounts may be rounded to whole dollars.

NAME OF FILER Friends of Fadelli for City Council 2016 DATE NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE Monetary Contribution Nonmonetary Contribution Independent Expenditure	AMOUNT THIS CALEND	I.D. NUMBER 1382665 /E TO DATE PER ELE AR YEAR TO D DEC. 31) (IF REQU	DATE
DATE NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE TYPE OF PAYMENT TYPE OF PAYMENT DESCRIPTION (IF REQUIRED) Monetary Contribution Nonmonetary Contribution Independent	AMOUNT THIS CALEND	/E TO DATE PER ELE AR YEAR TO D	DATE
MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE Monetary Contribution Nonmonetary Contribution Independent	AMOUNT THIS CALEND	AR YEAR TO D	DATE
Contribution Nonmonetary Contribution Independent			
			
☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent ☐ Support ☐ Oppose Expenditure			
Monetary Contribution Nonmonetary Contribution Independent Expenditure			
SUBTOTAL \$	0.00		
Schedule D Summary 1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotal	ls.)	\$	0.00
2. Unitemized contributions and independent expenditures made this period of under \$100		\$	25.00

FPPC Form 460 (Jan/2016)

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

			SCHEDULE E
Statement covers period		CALIFORNIA	160
from	07/01/2016	FORM	400
through	09/24/2016	Page 18 0	of <u>28</u>
 ***************************************	**************************************	I.D. NUMBER	
		1382665	

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment you may enter the code. Otherwise describe the payment

COL	ו one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.						
CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs		
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions		
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries		
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs		
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals		
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals		
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor		
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration		
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)		

	NAME AND ADDRESS OF PAYEE IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC			5.47
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC			16.50
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC			4.49

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

SUBTOTAL\$
26.46

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 10,511.33
2. Unitemized payments made this period of under \$100	\$ 0.00
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.)	\$ 10,511.33

FPPC Form 460 (Jan/2016)

FPPC Toll-Free Helpline: 866/ASK-FPP

6/275-3772)

SEE INSTRUCTIONS ON REVERSE

Friends of Fadelli for City Council 2016

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. MBR member communications radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees FIL PHO phone banks candidate travel, lodging, and meals FND fundraising events polling and survey research staff/spouse travel, lodging, and meals TRS transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF LEG legal defense professional services (legal, accounting) VOT voter registration LIT campaign literature and mailings WEB information technology costs (internet, e-mail) PRT print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC			2.25
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC			 4.20
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC			4.20
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC			4.20
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC			4.20

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 19.05

Ð

Amounts may be rounded to whole dollars.

	SCHEDULE E (CONT.)
Statement covers period	CALIFORNIA 460
from 07/01/2016	FORM TOU
through 09/24/2016	- Page <u>20</u> of <u>28</u>
	I.D. NUMBER
	1382665

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

print ads

PRT

CMP campaign paraphernalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

MBR member communications

meetings and appearance

office expenses

petition circulating

phone banks

polling and survey resea

IND independent expenditure supporting/opposing others (explain)*
LEG legal defense

LIT campaign literature and mailings

MBR member communications RAD radio airtime and production costs

MTG meetings and appearances RFD returned contributions
OFC office expenses SAL campaign workers' salaries
PET petition circulating TEL t. vor cable airtime and production costs
TRC candidate travel, lodging, and meals
polling and survey research TRC staff/spouse travel, lodging, and meals

polling and survey research

postage, delivery and messenger services

professional services (legal, accounting)

TRS staff/spouse travel, lodging, and meals

transfer between committees of the same candidate/sponsor

voter registration

VOT Voter registration

WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	OODE OR	DESCRIPTION OF PATRIENS	ANIOUNT PAID
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		4.20
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		8.40
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		10.05
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		7.53
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		37.20

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

SUBTOTAL \$

67.38

FPPC Form 4 (an/2016)

FPPC Toll-Free Helpline: 866/ASK-FPPC \ 275-3772)
www.fppc.ca.gov

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Statement covers period **CALIFORNIA FORM** 07/01/2016 through 09/24/2016 Page 21 of 28 I.D. NUMBER 1382665

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. RAD radio airtime and production costs MBR member communications CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) VOT voter registration LJT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		5.47
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		10.65
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		6.45
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		4.20
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		10.05

FPPC Form 4

!an/2016) 275-3772)

36.82

FPPC Toll-Free Helpline: 866/ASK-FPPC (... www.fppc.ca.gov

SUBTOTAL \$

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

State	ment covers period	CALIFORNIA 160	
from	07/01/2016	FORM TO	
through	09/24/2016	Page of28	
		I.D. NUMBER	
		1393665	

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

			payment, year may enter the enter the	,	
CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	P⊞T	petition circulating	TEL.	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		4.20
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		8.40
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		4.20
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		4.20
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		4.20

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

SUBTOTAL \$

25.20

SCHEDULE E (CONT.)

(Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA 460	
Payments Made	to whole dollars.	from07/01/2016	FORM 400	
SEE INSTRUCTIONS ON REVERSE		through09/24/2016	Page23 of28	
NAME OF FILER			I.D. NUMBER	
Friends of Fadelli for City Council 2016			1382665	

COL	DES: If one of the following codes accurately describes	s the	payment, you	u may	enter the code.	Otherwise,	describe the payment.	
CMP.	campaign paraphernalia/misc.	MBR	member comm	unication	IS	RAD	radio airtime and production costs	
CNS	campaign consultants	MTG	meetings and	appearar	nces	RFD	returned contributions	
CTB	contribution (explain nonmonetary)*	OFC	office expense	es		SAL	campaign workers' salaries	
CVC	civic donations	PET	petition circulat	ting		TEL	t.v. or cable airtime and production cos	ts
FIL	candidate filing/ballot fees	PHO	phone banks			TRC	candidate travel, lodging, and meals	
FND	fundraising events	POL	polling and sur	rvey rese	earch	TRS	staff/spouse travel, lodging, and meals	
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delive	ery and r	messenger services	TSF	transfer between committees of the sa	me candidate/sponsor
LEG	legal defense	PRO	professional se	ervices (legal, accounting)	VOT	voter registration	•
LIT	campaign literature and mailings	PRT	print ads	•		WEB	information technology costs (internet,	e-mail)
	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CODE	OR	DESCRIPTIO	N OF PAYMENT	AMOUNT PAID

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot, Inc. 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		4.20
Card Service Center 5055 Norwood Road Dallas, TX 75356		Credit Card Payment	434.45
Card Service Center 5055 Norwood Road Dallas, TX 75356		Credit Card Payment	175.00
Card Service Center 5055 Norwood Road Dallas, TX 75356		Credit Card Payment	260.00
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		343.85
			OUR TOTAL A

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

SUBTOTAL \$

1,217.50

Amounts may be rounded to whole dollars.

_			SCHED	ULE	E (CO	NT.)
Staten	nent covers period	CALIF	ORNIA		16	7
from	07/01/2016	FO	RM		101	4
through_	09/24/2016	Page	24	٥ŧ	28	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

I.D. NUMBER

Friends of Fadelli for City Council 2016

1382665

CODES: If one of the following codes accurately describ	es the paymer	nt, you may enter the code.	Otherwise,	describe the payment.
CMP campaign paraphernalia/misc.	MBR member	communications	RAD	radio airtime and production costs
CNS campaign consultants	MTG meeting	s and appearances	RFD	returned contributions
CTB contribution (explain nonmonetary)*	OFC office e	xpenses	SAL	campaign workers' salaries
CVC civic donations	PET petition	circulating	TEL	t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone b	anks	TRC	candidate travel, lodging, and meals
FND fundraising events	POL polling a	and survey research	TRS	staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage	, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professi	onal services (legal, accounting)		voter registration
LIT campaign literature and mailings	PRT print ad:	S	WEB	information technology costs (internet, e-mail)
NAME AND ADDRESS OF PAYEE		CODE OR	DESCRIPTIO	N OF PAYMENT AMOUNT PAID

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		301.01
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		535.50
Lisa Tucker dba The Tucker Group 1981 North Broadway, Suite 225 Walnut Creek, CA 94596	СМР		3,068.80
Lisa Tucker dba The Tucker Group 1981 North Broadway, Suite 225 Walnut Creek, CA 94596	СМР		3,214.61
Voter Guide Slate Cards (ID# 1319578) 6285 East Spring Street, Suite 202 Long Beach, CA 90808	Slate M	failer	474.00

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

7,593.92

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.

	SCHEDULE E (CONT.)
Statement covers period	CALIFORNIA 460
from07/01/2016	FORM TOO
through09/24/2016	Page25 of28

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14445			**********	

NAME OF FILER

I.D. NUMBER

Friends of Fadelli for City Council 2016

1382665

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	OFC office expen PET petition circui PHO phone banks POL polling and s POS postage, deli	d appearances ises lating	RAD radio airtime and production of returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production of the candidate travel, lodging, and staff/spouse travel, lodging, and transfer between committees voter registration WEB information technology costs	uction costs meals and meals of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Debbie Weeks 1506 Arlington Blvd. El Cerritos, CA 94530		СМР		625.00
Debbie Weeks 1506 Arlington Blvd. El Cerritos, CA 94530		WEB		900.00

FPPC Form 4 lan/2016) FPPC Toll-Free Helpline: 866/ASK-FPPC (, ,275-3772)

1,525.00

www.fppc.ca.gov

SUBTOTAL \$

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

					SCHEDUL
Schedule F	Amounts may be round	led	Statement cove		ORNIA 460
Accrued Expenses (Unpaid Bills)	to whole dollars.		from07/01/2	2016 FC	RM TO
SEE INSTRUCTIONS ON REVERSE			through09/24/2	2016 Page _	26 of 28
NAME OF FILER			· · · · · · · · · · · · · · · · · · ·	I.D. NUM	BER
Friends of Fadelli for City Council 2016				13826	65
CODES: If one of the following codes accurately describ	es the payment, you may	enter the code. Ot	herwise, describe th	ne 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 campaign literature and mailings	MBR member communication MTG meetings and appearan OFC office expenses PET petition circulating PHO phone banks POL polling and survey results POS postage, delivery and PRO professional services (PRT print ads	nces earch messenger services	TRC candidate trave TRS staff/spouse tra TSF transfer betwee VOT voter registration	butions sers' salaries time and production costs I, lodging, and meals evel, lodging, and meals on committees of the sar	ne candidate/sponso
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Card Service Center 5055 Norwood Road Dallas, TX 75356	Credit Card Payment	434.45	0.00	434.45	0
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$ 434.45\$	0.00\$	434.45\$	0.
Schedule F Summary					
Total accrued expenses incurred this period. (Include all saccrued expenses of \$100 or more, plus total unitemized)			INCU	RRED TOTALS \$	0.00
2. Total accrued expenses paid this period. (Include all Sch accrued expenses of \$100 or more, plus total unitemized				.PAID TOTALS \$ _	434.45
3. Net change this period. (Subtract Line 2 from Line 1. Er on the Summary Page, Column A, Line 9.)	nter the difference here and	d 		NET \$ _M	-434.45 ay be a negative number

FPPC Form ₫

SCHEDULE G

Schedule G
Payments Made by an Agent or Independent
Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

Statement covers period CALIFORNIA FORM

through __09/24/2016

Page <u>27</u> of <u>28</u>

I.D. NUMBER

1382665

Friends of Fadelli for City Council 2016

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Card Service Center

NAME OF FILER

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs cmpaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries

CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals
FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals

IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense PRO professional services (legal, accounting) VOT voter registration

T campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

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

ODE OR DESCRIPTION OF PAYMENT	AMOUNT PAID
FIL	225.00
To Be Refunded	150.00
Contribution Refunded	-150.00
CVC	185.00
	To Be Refunded Contribution Refunded

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 410.00

FPPC Form 460 (Jan/2016)

FPPC Advice: advice@fppc.ca.go 6/275-3772)

w. .fppc.ca.gov

^{*} 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 G	
Payments N	lade by an Agent or Independent
Contractor	(on Behalf of This Committee)

Amounts may be rounded to whole dollars.

Friends of Fadelli for City Council 2016

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Lisa Tucker dba The Tucker Group

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphemalia/misc. MBR member communications RAD radio airtime and production costs meetings and appearances RFD returned contributions contribution (explain nonmonetary)*

CMP campaign paraphemalia/misc. MBR member communications RAD radio airtime and production costs meetings and appearances RFD returned contributions SAL campaign workers' salaries

CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs
FIL candidate filling/ballot fees PHO phone banks TRC candidate travel, lodging, and meals
FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals

ND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor

LEG legal defense PRO professional services (legal, accounting) VOT voter registration

LIT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
H&S Signs 418 Neal Street Grass Valley, CA 95945	CMP		1,983.80
Madison Street Press 614 Madison Street Oakland, CA 94607	СМР		1,628.29
Mary Szczepanik 1483 Guerrero Street San Francisco, CA 94110	СМР		297.50

Attach additional information on appropriately labeled continuation sheets.

3,909.55

FPPC Form 460 (Jan/2016)

FPPC Advice: advice@fppc.ca.gc

9/275-3772)

w fppc.ca.gov

TOTAL* \$

^{*} 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.

497 Contribu	tion Report -	Amounts may be rounded to	whole dollars.		497 CONTRIBUTION REPORT	
NAME OF FILER Friends of Fade	lli for City Council 2016	Date of This Filing	10/06/2016	Date Stamp	CALIFORNIA 497	
AREA CODE/PHONE NUMBER (if applicable)		Report No. 6		RECEIVED	For Official Use Only	
(916) 285-5733	1382665	Report No. 9	794732-RC	10/10/2016		
STREET ADDRESS		☐ Amendme		19/10/wip	:	
8646 Arbor Driv		P CODE to Report No (explain below))	. 3-	!	
El Cerrito			31		•	
1. Contributio						
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP (IF COMMITTEE, ALSO ENTER).		CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPI (IF SELF-EMPLOYED, ENTER NAME OF BI		
10/05/2016	Service Employees International Union Lo Contributor Committee 555 Capital Mall, Suite 1425 Sacramento, CA 95814 Committee ID # 1296948	ocal 1021 PAC Small	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		1,000.00 Check if Loan ** Provide interest rate	
			☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		Check if Loan Check if Loan Provide Interest rate	
			☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		☐ Check if Loan ———————————————————————————————————	
Reason for Amend	nent:			*Contributor Codes IND – Individual COM – Recipient Comr OTH – Other (e.g., bus PTY – Political Party SCC – Small Contributo	·	

FPPC Form 497 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

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497 Contribu	ıtion Report		Amour	nts may be rounded to wi	nole dollars.		497 CC	ONTRIBUTION REPORT
NAME OF FILER				Date of		RECEIVED	CALIFO	
Friends of Fade	elli for City Council	2016		This Filing	10/07/2016	KECEIVED	FOR	
AREA CODE/PHONE N	IUMBER	I.D. NUMBER (if applicable	»)				For	Official Use Only
(916) 285-5733		1382665		Report No. 64	4836-KC	10/10/16	1	A SEA TELEFORM OF CHOICE CO. ACTIVE 1888 18
STREET ADDRESS		1302003	- 100			1-1. 1. (.		
8646 Arbor Driv	₹e			☐ Amendment to Report No.	nt			
CITY		STATE	ZIP CODE	(explain below)		1		
El Cerrito		CA	94530	No. of Pages	1	V V		
1. Contribution	on(s) Received			STRUCTURE TO THE STRUCT		1		
DATE RECEIVED	FULL NAME	E, STREET ADDRESS AND (IF COMMITTEE, ALSO EN		VTRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EM (IF SELF-EMPLOYED, ENTER NAME OF		AMOUNT RECEIVED
10/07/2016	Paul L. Fadelli 8646 Arbor Drive El Cerrito, CA 945	;30				Program Manager San Francisco Bay Area I Transit	Rapid	5,000.00
	Loan Received 0 %				☐ OTH ☐ PTY ☐ SCC			Check if Loan % Provide interest rate
					IND COM OTH PTY SCC			☐ Check if Loan
*					☐ IND		4.	Provide interest rate
					□ OTH □ PTY □ SCC			☐ Check if Loan ———————————————————————————————————
Reason for Amend	dment:	12	,			*Contributor Codes IND – Individual COM – Recipient Cor OTH – Other (e.g., b PTY – Political Party SCC – Small Contribu	usiness enti	er than PTY or SCC) ily)

FPPC Form 497 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

Recipient Committee Campaign Statement Cover Page			Date Stamp RECEIVE	CALIFORNIA 460
(Government Code Sections 84200-84216.5) SEE INSTRUCTIONS ON REVERSE	Statement covers period from07/01/2016 through09/24/2016	Date of election if applicable: (Month, Day, Year) 11/08/2016	SEP 2 9 20 City of El Cerri City Clerk	For Official Use Only
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	mplete Parts 1, 2, 3, and 4. Primarily Formed Ballot Measure Committee Controlled Sponsored Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee Also Complete Part 7)	2. Type of Statement: Yeelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination Statement (Also file a Form 410 Termination Statement (Also file a Form 410 Termination Statement (Explain below)	mination)	Quarterly Statement special Odd-Year Report supplemental Preelection statement - Attach Form 495
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Friends of Fadelli for City Council 2016 STREET ADDRESS (NO P.O. BOX)	D. NUMBER 1382665	Treasurer(s) NAME OF TREASURER Shawnda Deane MAILING ADDRESS 1787 Tribute Road, Suit	STATE ZII	P CODE AREA CODE/PHONE
8646 Arbor Drive CITY STATE ZIP CO E1 Cerrito CA 9453 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. E 1787 Tribute Road, Suite K CITY STATE ZIP CO Sacramento CA 9583 OPTIONAL: FAX / E-MAIL ADDRESS Fadelli2016@deaneandcompany.com	916) 285-5733 90X 9DE AREA CODE/PHONE	Sacramento NAME OF ASSISTANT TREASURE Paul Fadelli MAILING ADDRESS 8646 Arbor Drive CITY El Cerrito OPTIONAL: FAX / E-MAIL ADDRES	R, IF ANY STATE ZIF CA S	P CODE AREA CODE/PHONE 94530 (916)285-5733
4. Verification I have used all reasonable diligence in preparing and reviewin under penalty of perjury under the laws of the State of California Executed on	a that the foregoing is true and correct. By	controlling Officeholder, Candidate, State Signature of Controlling Officeholder, Candidate, State Signature of Controlling Officeholder, Candidate, State Signature of Controlling Officeholder, Candidate, State	nasurer nent or Responsible Officer of Spon a Measure Proponent	

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FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (86e**275-3772)
www ca.gov

Recipient Committee Campaign Statement Cover Page — Part 2

	COVE	RPAG	E-PART 2	!
CALIF FO	ORNI RM	A 4	160	
Page	2	of	27	

Officeholder or Candidate Controlled Con	nmittee			6.	Primarily Formed Ball	ot Measure	Committee	
NAME OF OFFICEHOLDER OR CANDIDATE					NAME OF BALLOT MEASURE			
Paul Fadelli					***************************************			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIST	TRICT NUMBER	IF APPLICABI	LE)		BALLOT NO. OR LETTER	JURISDICT	ION	SUPPORT
City Council Member: City of El Cerrito								OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP					
8646 Arbor Drive	El Cerrito	CA	94530		Identify the controlling of			sure proponent, if any.
					NAME OF OFFICEHOLDER, CAN	NDIDATE, OR P	ROPONENT	
Related Committees Not Included in this statement that are controlled by your contributions or make expenditures on behalf of your	ou or are prima				OFFICE SOUGHT OR HELD		DISTRIC	Γ NO. IF ANY
COMMITTEE NAME	I.D. NUMB	ER						
NAME OF TOP AS UPPER	CONTROL	LED COMMIT		7.	Primarily Formed Can			
NAME OF TREASURER	T YES				officeholder(s) or candidate(s	s) for which th	is committee is primarily	/ formed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.C		S			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR H	SUPPORT OPPOSE
CITY STATE ZI	P CODE	AREA COL	DE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR H	ELD
COMMITTEE NAME	I.D. NUMB							SUPPORT OPPOSE
CORNELLECTANIC	U.D. NUMB	EK			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR H	SUPPORT OPPOSE
NAME OF TREASURER	CONTROL	LED COMMIT			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR H	SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO P.C		h						OPPOSE
CITY STATE ZI	P CODE	AREA COI	DE/PHONE		Atta	ch continuat	ion sheets if necessar	у

FPPC Form 460 (Jan/2016)

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period **CALIFORNIA FORM** 07/01/2016 from . Page ____3 ___ of ____27 09/24/2016 through. I.D. NUMBER 1382665

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Fadelli for City Council 2016

Contributions Received	Column A TOTAL THIS PERIOD (FROMATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions	\$ 8,786.77	\$	14,559.01	
2. Loans Received Schedule B, Line 3	0.00		5,000.00	1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 8,786.77	\$	19,559.01	20. Contributions Received \$\$
4. Nonmonetary Contributions Schedule C, Line 3	0.00		0.00	21 Evnenditures
5. TOTAL CONTRIBUTIONS RECEIVED	\$ 8,786.77	\$	19,559.01	Made \$\$
Expenditures Made				Expenditure Limit Summary for State
6. Payments Made	\$ 10,511.33	\$	13,673.72	Candidates
7. Loans Made Schedule H, Line 3	0.00		0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 10,511.33	\$	13,673.72	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)			0.00	Date of Election Total to Date
10. Nonmonetary Adjustment	0.00		0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$ 10,076.88	\$	13,673.72	\$
Current Cash Statement				\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	To	calculate Column B, add	
13. Cash Receipts	8,786.77		nounts in Column A to the rresponding amounts	
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00	fro	m Column B of your last	*Amounts in this section may be different from amounts reported in Column B.
15. Cash Payments Column A, Line 8 above	10,511.33		oort. Some amounts in Jumn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 5,885.29		ures that should be btracted from previous	ĺ
If this is a termination statement, Line 16 must be zero.		pe	riod amounts. If this is a first report being filed	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ 0.00	for	this calendar year, only rry over the amounts	
		fro an	m Lines 2, 7, and 9 (if v).	
Cash Equivalents and Outstanding Debts				
Cash Equivalents and Outstanding Debts 18. Cash Equivalents	\$ 0.00	ŀ		

16)

Schedule A Monetary Contributions Received			ts may be rounded whole dollars.	Statement cover from07/01/20	016	california 460		
SEE INSTRUCTIC	ONS ON REVERSE			through09/24/20	016	Page	4 of <u>27</u>	
NAME OF FILER				<u></u>		I.D. NUMB	JER	
Friends of I	Fadelli for City Council 2016					1382665	,	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
09/23/2016	Maya E. Archiga 2363 Alva Avenue El Cerrito, CA 94530	⊠IND □COM □OTH □PTY □SCC	Realtor Marvin Gardens	100.00	. 1	.00.00		
09/06/2016	Jane A. Bartke 1315 Devonshire Court El Cerrito, CA 94530	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	1	.00.00		
08/12/2016	Ellen Berman 921 Paulsboro Drive Rockville, MD 20850	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	1	.00.00		
07/08/2016	Ernest Beyard 330 A Street Northeast Washington, DC 20002	⊠IND □COM □OTH □PTY □SCC	Retired n/a	250.00	2	250.00		
09/11/2016	Jane Breyer 6767 Cutting Blvd. El Cerrito, CA 94530	⊠IND □COM □OTH □PTY □SCC	Partner Energy Foundation	100.00	1	.00.00		
			SUBTOTAL	\$ 650.00			olikografia grafia 19. adal 1980 (kontralija bila 20.)	
	A Summary eceived this period – itemized monetary contributions.				IND-	ributor Code		

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

 COM - Recipient Committee

(other than PTY or SCC)
OTH – Other (e.g., business entity)

PTY - Political Party

8,786.77

SCC - Small Contributor Committee

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Amounts may be rounded to whole dollars.

SCHED	ULE A	(CONT.)

Statement covers period

Monetary Contributions Received		Amounts may to whole		Statement cove from07/01/ through09/24/	2016	CALIFORNIA 460 FORM 5 of 27		
NAME OF FILER					1.1	D. NUMBER		
Friends of F	adelli for City Council 2016				1	382665		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEAF (JAN. 1 - DEC. 31	R TO DATE		
08/30/2016	Joe Camicia 200 P Street Sacramento, CA 95814	⊠IND □COM □OTH □PTY □SCC	Partner Advocacy Marketing, LLC.	100.00	100	.00		
08/22/2016	Denis Carrade 2099 Vineyard Road Novato, CA 94947	⊠IND □COM □OTH □PTY □SCC	Retired n/a	250.00	250	. 00		
09/14/2016	Phyllis Chow 658 Cutting Way Sacramento, CA 95831	⊠IND □COM □OTH □PTY □SCC	Scheduler/Legislative California State Assembly	100.00	100	.00		
09/06/2016	Gussie Curran 3414 Topsail Place Davis, CA 95616	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	100.00	100	.00		
07/12/2016	Paul E. Donahue 2200 2nd Avenue Sacramento, CA 95818	IND COM OTH PTY SCC	Retired n/a	250.00	250	.00		
			SUBTOTALS	\$ 800.00				

*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

Amounts may be rounded to whole dollars.

SCHEE	ULE A	(CONT.)

CALIFORNIA

FORM

Statement covers period

from.

07/01/2016

NAME OF FILER Friends of Fa	adelli for City Council 2016		_	through09/24/	2016	Page _ I.D. NU	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)
09/12/2016	Manish Doshi 1720 Julian Court El Cerrito, CA 94530	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Administrator Meeta Doshi DDS, PDC	250.00		50.00	
09/03/2016	Frank O. Fadelli 5049 Wittenmeyer Court Antioch, CA 94531	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	200.00	2	00.00	
08/22/2016	Jeanne Fadelli 2099 Vineyard Road Novato, CA 94947	IND COM OTH PTY SCC	Research Analyst Santa Rosa Junior College	100.00	1	.00.00	
09/23/2016	Kenneth B. Finney 230 Amherst Avenue Albany, CA 94706	⊠IND □COM □OTH □PTY □SCC	Attorney Beverage LLC	200.00	2	00.00	
09/06/2016	Connie J. Frank 1800 Third Avenue Sacramento, CA 95818	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	100.00	1	.00.00	
			SUBTOTAL	\$ 850.00			tors (Engly Study (CS) as the Sec or of Sector (Constant)

*Contributor Codes

IND - Individual

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(other than PTY or SCC)

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Amounts may be rounded to whole dollars.

S	CHEDULE.	A (CONT.)
CALIFO	RNIA Z	(60)

Statement covers period

				from07/01/	2016	FORM TOU
				through 09/24/	2016 Pag	e7 of27
NAME OF FILER					J.D.	NUMBER
Friends of F	adelli for City Council 2016				138	32665
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/12/2016	Rebecca F. Franzoia 5662 Delcliff Circle Sacramento, CA 95822	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	200.00	200.0	0
07/12/2016	Karen K. French 6621 Longridge Way Sacramento, CA 95831	XIND COM OTH PTY SCC	Attorney Nielsen Merksamer Parrinello Gross & Leoni, LLP	100.00	100.0	0
07/20/2016	Michael Gersick 28 Kerr Avenue Kensington, CA 94707	IND COM OTH PTY SCC	Retired n/a	100.00	100.0	0
07/08/2016	Linda L. Ghilotti 119 Highland Lane Mill Valley, CA 94941	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	200.00	300.0	0
08/22/2016	Linda L. Ghilotti 119 Highland Lane Mill Valley, CA 94941	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	300.0	0
7			SUBTOTAL S	\$ 700.00	in la lucini molocci e decard	Proposition of mysters

*Contributor Codes

IND-Individual

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.fppc.ca.gov

Amounts may be rounded to whole dollars.

	SCHEDULE A (CONT.)
Statement covers period	CALIFORNIA 460
07/01/2016	FORM 40U

through 09/24/2016	Page8 of _	27
	I.D. NUMBER	

from_

NAME OF FILER

Friends of Fadelli for City Council 2016

1382665

rrends or re	adelli for City Council 2016				13826	000
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/24/2016	Kim Gillan 1200 Humboldt Street Denver, CO 80218	XIND ☐COM ☐OTH ☐PTY ☐SCC	Regional Director United States Department of Health Human Services	100.00	175.00	
07/12/2016	John Hancock 912 South Beach Drive Sacramento, CA 95831	XIND COM OTH PTY SCC	Application Operations University of California, Davis Health System	100.00	100.00	
07/12/2016	Judith Inglehart 311 2nd Street, #815 Oakland, CA 94607	IND COM OTH PTY SCC	Retired n/a	100.00	100.00	
08/05/2016	Linton Johnson 4100 Redwood Road Oakland, CA 94619	⊠IND □COM □OTH □PTY □SCC	Chief Strategist BART	100.00	175.00	·
07/14/2016	Thomas J. Kerbs 625 Santa Ynez Way Sacramento, CA 95816	⊠IND □COM □OTH □PTY □SCC	Attorney California Legislature	100.00	100.00	
articles of the specific diverges of the state of the sta			SUBTOTAL\$	500.00	Burning republika in mining	

*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

Amounts may be rounded to whole dollars.

SCHEDU	EA ((CONT.)
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CALIFORNIA FORM

Statement covers period

07/01/2016

NAME OF FILER Friends of Fadelli for City Council 2016 DATE FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE CONTRIBUTOR CODE COMMITTER, ASSOCIATE ALSO STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE COMMITTER, ASSOCIATE ALSO STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE COMMITTER, ASSOCIATE ALSO STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE COMMITTER, ASSOCIATE ALSO STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE COMMITTER, ASSOCIATE ALSO STREET ADDRESS AND ZIP CODE COMMITTER, ASSOCIATE ALSO STREET ADDRESS AND ZIP CODE COMMITTER CODE COMMITTE				from07/01/	2016	FORM - CC	
Priends of Fadelli for City Council 2016 DATE RECEIVED PULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE: RECEIVED Name: Krausse (Procommitter Association in Manser) Name: Name					through 09/24/	2016 Pag	je <u>9</u> of <u>27</u>
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR COODE * CONTRIBUTOR COUNTRIBUTOR	NAME OF FILER					I.D.	NUMBER
Date Poll NAME. SINCEL ALDRESS AND DP CODE OF CONTRIBUTOR CODE ** COUPTION AND EMPLOYER PERIOD CALENDAR YEAR TODATE (FREQUIRED)	Friends of Fa	adelli for City Council 2016				138	32665
A 9669 Hamilton Road Clarksburg, CA 95612 COM OTH PPTY SCC				OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME	RECEIVED THIS	CALENDAR YEAR	TODATE
Sold Belvedere Street COM OTH PTY Soc	08/12/2016	49669 Hamilton Road	□COM □OTH □PTY	Pacific Gas & Electric		100.0	0
311 Oak Street, Unit 703 Oakland, CA 94607 Affairs and Community Relations San Francisco Bay Area Rapid Transit District (BART) O7/12/2016 Patrick J. Lenz 9440 Richford Lane Granite Bay, CA 95746 O7/28/2016 Steven Lewis Carmichael, CA 95608 Attorney Steven Lewis Carmichael, CA 95608 Affairs and Community Relations San Francisco Bay Area Rapid Transit District (BART) Affairs and Community Relations San Francisco	07/12/2016	504 Belvedere Street	□COM □OTH □PTY		125.00	125.0	0
9440 Richford Lane Granite Bay, CA 95746 O7/28/2016 Steven Lewis 5224 Yorkville Place Carmichael, CA 95608 Steven Lewis O7H PTY COM	08/31/2016	311 Oak Street, Unit 703	□COM □OTH □PTY	Affairs and Community Relations San Francisco Bay Area Rapid Transit District	100.00	100.0	0
5224 Yorkville Place Carmichael, CA 95608 Com OTH PTY SCC Steven Lewis	07/12/2016	9440 Richford Lane	□COM □OTH □PTY		100.00	100.0	
SUBTOTAL\$ 525.00	07/28/2016	5224 Yorkville Place	□COM □OTH □PTY		100.00	100.0	0
				SUBTOTALS	\$ 525.00		one negativa negativa se

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(other than PTY or SCC)

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Amounts may be rounded to whole dollars.

SCHEDULE A	(CONT.)
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CALIFORNIA FORM

Statement covers period

from.

07/01/2016

				through 09/24/	2016	Page	10 of 27
NAME OF FILER					,	I.D. NUM	IBER
Friends of Fa	adelli for City Council 2016					138266	55
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
07/12/2016	Dennis H. Mangers 1017 Harrington Way Carmichael, CA 95608	XIND ☐COM ☐OTH ☐PTY ☐SCC	Senior Advisor California State Senate	100.00	10	00.00	
07/12/2016	Jill M. Matranga 2367 39th Street Sacramento, CA 95817	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	125.00	14	25.00	
08/22/2016	Deborah McFarland 241 Vista Verde Carmel Valley, CA 93924	☑IND □COM □OTH □PTY □SCC	Retired n/a	200.00	20	00.00	
09/20/2016	Bart Mehlhop 1330 21st Street Sacramento, CA 95811	⊠IND □COM □OTH □PTY □SCC	Attorney Law Offices of Mehlhop and Vogt			00.00	
09/20/2016	Marcella Moberly 19364 Hollow Lane Redding, CA 96003	⊠IND □COM □OTH □PTY □SCC	Retired n/a	500.00	50	00.00	
***************************************			SUBTOTAL	1,025.00			

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(other than PTY or SCC)

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Amounts may be rounded to whole dollars.

	SCHEDULE	A (CONT.)
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Statement covers period

07/01/2016

					ESSENIE .	The state of the
				through09/24/	2016 Pa	ge11 of27
NAME OF FILER					1.0), NUMBER
Friends of F	adelli for City Council 2016				1:	82665
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEAR (JAN. 1 - DEC. 31	TODATE
07/20/2016	Cindy R. Morse 304 West 23rd Street Merced, CA 95340	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Law Offices of Morse and Pfeiff	500.00	500.	00
09/06/2016	Jerri Ollett 313 Hash Court Petaluma, CA 94952	⊠IND □COM □OTH □PTY □SCC	Health Care Consultant Jerri Ollett, MPA, Consulting & Training	500.00	500.	00
08/30/2016	Daniel Purnell 110 Solano Avenue La Selva Beach, CA 95076	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	100.	00
09/23/2016	Amy L. Reisch 917 San Anselmo Avenue, Apt. 4 San Anselmo, CA 94960	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Executive Director First 5 Marin	100.00	100.	00
07/25/2016	Marilym Robrahn 481 Basalt Court Redding, CA 96003	ÏND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	100.00	100.	00
		<u> </u>	SUBTOTAL	\$ 1,300.00		能同時間的時間(A) (A) (A) (A)

*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

Amounts may be rounded to whole dollars.

SCHEDULE A (0	CONT.)
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Monetary	Contributions Received	Amounts may to whole		Statement cove	•		FORNIA 460 ORM
				through 09/24/	2016	Page_	12 of27
NAME OF FILER					-	I.D. NU	MBER
Friends of Fa	adelli for Cíty Council 2016					13826	565
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
07/20/2016	Antoinette M. Sabelhaus 1121 3rd Avenue Sacramento, CA 95818	XIND ☐COM ☐OTH ☐PTY ☐SCC	Consultant California State Senate	100.00	1	00.00	
08/04/2016	Samuel J. Salkin 8715 Don Carol Drive El Cerrito, CA 94530	⊠IND □COM □OTH □PTY □SCC	Executive Chevra Kadisha-Sinai Memorial Chapel	100.00		00.00	
09/07/2016	Timothy Schott 4755 Brand Way Sacramento, CA 95819	XIND ☐COM ☐OTH ☐PTY ☐SCC	Association Management and Advocacy Schott & Associates	100.00	2.	00.00	
09/22/2016	Timothy Schott 4755 Brand Way Sacramento, CA 95819	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Association Management and Advocacy Schott & Associates	100.00	2	00.00	
08/20/2016	William Schulte 849 Vista Drive Redwood City, CA 94062	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Civil Engineer William Schulte	100.00	1	00.00	
			SUBTOTAL \$	500.00			

*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 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (966/275-3772) .fppc.ca.gov

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.	.,
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CALIFORNIA

Statement covers period

from.

07/01/2016

				through09/24/	2016	Page _	<u>13</u> of <u>27</u>
NAME OF FILER		····				I.D. NU	MBER
Friends of Fa	adelli for City Council 2016					13826	55
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
09/07/2016	Janice Simoni 1064 Wilhagin Park Lane Sacramento, CA 95864	XIND COM OTH PTY SCC	Retired n/a	100.00	16	00.00	
07/12/2016	Camillis Slater 1999 13th Avenue Sacramento, CA 95818	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Psychotherapist Yolo Family Services Agency	150.00	20	00.00	
07/06/2016	Judith Lee Stone 15 2nd Street Northeast Washington, DC 20002	XIND COM OTH PTY SCC	Retired n/a	100.00	10	00.00	
08/23/2016	Peter Tannenbaum 5912 Jordan Avenue El Cerrito, CA 94530	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	100.00	1(00.00	
08/16/2016	Bob Van Heuvelen 500 New Jersey Avenue NW, Suite #800 Washington, DC 20001	⊠IND □COM □OTH □PTY □SCC	Chief Executive Officer/Founder VH Strategies	250.00	25	50.00	
			SUBTOTAL	\$ 700.00			r ga pe da Barra (aus 1944). Barra de destaparados

*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

Amounts may be rounded to whole dollars.

SCHEDULE A	. (CONT.)
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CALIFORNIA 460

Statement covers period

				from07/01/	/2016 F	ORM TOU
				through 09/24/	^{/2016} Page	14 of27
NAME OF FILER				***************************************	I.D. N	UMBER
Friends of F	adelli for City Council 2016		,	4	1382	665
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/22/2016	Kathleen Waters 11260 Donner Pass Road, #205 Truckee, CA 96161		Real Estate Investment Kathleen Waters	100.00	100.00	
07/10/2016	Jill Wilson 103 Arthrop Place Santa Cruz, CA 95060	⊠IND □COM □OTH □PTY □SCC	Attorney Jill Wilson	100.00	100.00	
08/10/2016	Kari Yasuda 8712 Don Carol Drive El Cerritos, CA 94530	⊠IND □COM □OTH □PTY □SCC	Assistant Berkeley Bowl	100.00	100.00	
		□IND □COM □OTH □PTY □SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
			SUBTOTAL	\$ 300.00		

*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 (Jan/2016)

FPPC Advice: advice@fppc.ca.go

`6/275-3772)

.fppc.ca.gov

							SCHE	DULE B-PART 1	
Schedule B – Part 1	Ame	ounts may be ro			Statement cov	ers period	CALIFORN	A 460	
Loans Received	Received to whole dollars.					1/2016	FORM 4.00		
							<u> </u>		
SEE INSTRUCTIONS ON REVERSE					through09/2	1/2016	Page15	of <u>27</u>	
NAME OF FILER				*			I.D. NUMBER		
Friends of Fadelli for City Council 20	016						1382665		
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(6) AMOUNT RECEIVED THIS PERIOD	(¤) AMOUNT PA OR FORGIVE THIS PERIO	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE	
Paul L. Fadelli 8646 Arbor Drive	Program Manager San Francisco Bay Area			☐ PAID				CALENDAR YEAR	
El Cerrito, CA 94530	Rapid Transit			\$0.0	0 s 5,000.00	0.00 %	s_5,000.00	\$ 5,000.00	
				FORGIVEN		RATE		PER ELECTION**	
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$_5,000.00	\$0.00	\$0.0	03/09/2017 DATE DUE	\$0.00	03/09/2016 DATE INCURRED	\$	
				PAID				CALENDAR YEAR	
				\$	s	%	\$	\$	
				FORGIVEN		RATE		PER ELECTION **	
		\$	\$	s		\$		\$	
[†] □ IND □ COM □ OTH □ PTY □ SCC					DATE DUE		DATE INCURRED		
				☐ PAID				CALENDAR YEAR	
				\$	s	%	\$	\$	
				FORGIVEN		RATE		PER ELECTION **	
		s	\$	\$		s	ĺ	s	
†□ IND □ COM □ OTH □ PTY □ SCC					DATE DUE		DATE INCURRED		
		SUBTOTALS \$	0.00\$	0.	00\$ 5,000.00		offer with the main case of the		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)			
1. Loans received this period	•••••••			\$	0.00				
(Total Column (b) plus unitemized loan	is of less than \$100.)					(†C	ontributor Codes		
2. Loans paid or forgiven this period				\$	0.00	1	D-Individual		
(Total Column (c) plus loans under \$10			***********	·····Ψ			DM – Recipient Co other than	PTY or SCC)	
(Include loans paid by a third party tha		dule A.)					ΓH – Other (e.g., ΓY – Political Party		

Enter the net here and on the Summary Page, Column A, Line 2. *Amounts forgiven or paid by another party also must be reported on Schedule A.

> FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.go '366/275-3772) .fppc.ca.gov

SCC - Small Contributor Committee

** If required.

Schedule D **Summary of Expenditures** Supporting/Opposing Other Candidates Measures and Committees

Amounts may be rounded to whole dollars.

Statement covers period CALIFORNIA FORM from ____07/01/2016

Candidate	es, Measures and Committees						
SEE INSTRUCTI	IONS ON REVERSE	•		through09/24/20	016	Page	16 of 27
NAME OF FILER						I.D. NUMI	3ER
Friends of	Fadelli for City Council 2016					138266	5
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE CALENDAR (JAN. 1 - DI	R YEAR	PER ELECTION TO DATE (IF REQUIRED)
	Support Dppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
	Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					77
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
· · · · · · · · · · · · · · · · · · ·			SUBTOTAL	\$ 0.00		ir ann cha ci Bhair leanaig f Bhaillean (1914)	
1. Contributi	D Summary ions and independent expenditures made this period contributions and independent expenditures made	,		•			
∠. Unitemize	ed contributions and independent expenditures ma	ae inis perioa ot under	\$100		********	۵ ــــ	25.00
3. Total conf	tributions and independent expenditures made this	s period. (Add Lines 1 a	and 2. Do not enter on the	Summary Page.)	то	TAL \$_	25.00

FPPC Form 460 (Jan/2016)

FPPC Advice: advice@fppc.ca.gov (256/275-3772)

Schedule E Payments Made	Amounts may be to whole dol		ed	from	07/01/2016	CALIFO	RM TOU
SEE INSTRUCTIONS ON REVERSE				throu	gh <u>09/24/2016</u>		17 of 27
NAME OF FILER						I.D. NUM	MBER
Friends of Fadelli for City Council 2016						138266	55
CODES: If one of the following codes accurately described 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 committee meetings and a OFC office expense PET petition circulat PHO phone banks POL polling and sur POS postage, delive	unication appearar es ing vey rese ery and r	ns nces	RAD r RFD r SAL t TEL t TRC t TRS s TSF t	radio airtime and production airtime and production teturned contributions campaign workers' salaries and production airtime and procandidate travel, lodging, a staff/spouse travel, lodging transfer between committed woter registration aformation technology cost	es oduction costs and meals g, and meals ees of the san	ne candidate/sponso
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION	OF PAYMENT		AMOUNT PAID
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC					5.4
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC					16.5
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC		,			4.4

FPPC Form 460 (Jan/2016)

FPPC Toll-Free Helpline: 866/ASK-FPP 36/275-3772)

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.) Statement covers period **CALIFORNIA FORM** 07/01/2016

through 09/24/2016 Page 18 of 27

I.D. NUMBER

Friends of Fadelli for City Council 2016

1382665

Friends of Fadelli for City Council 2016				1382665	
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)* MTG meeting of file of office off	communications s and appearance xpenses circulating banks and survey resea , delivery and me onal services (lee	es rch essenger services	Otherwise, describe the payn RAD radio airtime and prod RFD returned contributions SAL campaign workers' sa TEL t.v. or cable airtime an TRC candidate travel, lodgi TRS staff/spouse travel, lod TSF transfer between com VOT voter registration WEB information technology	duction costs Italiaries Id production costs Ing, and meals Inging, and meals Intitlees of the same	-
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT		AMOUNT PAID
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC				2.25
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC				4.20
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC				4.20
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC			1	4.20
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC				4.20
* Payments that are contributions or independent expenditures must also be summarize	d on Schedule D.			SUBTOTAL \$	19.05

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.) Statement covers period **CALIFORNIA FORM** 07/01/2016 from through 09/24/2016 Page 19 of 27 I.D. NUMBER

1382665

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LIT

Friends of Fadelli for City Council 2016

campaign literature and mailings

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

print ads

RAD radio airtime and production costs CMP campaign paraphernalia/misc. MBR member communications MTG meetings and appearances RFD returned contributions CNS campaign consultants CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries petition circulating TEL t.v. or cable airtime and production costs CVC civic donations PET PHO phone banks candidate travel, lodging, and meals FIL candidate filing/ballot fees TRC polling and survey research staff/spouse travel, lodging, and meals FND fundraising events TRS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)* IND

professional services (legal, accounting) VOT voter registration LEG legal defense PRT

WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		4.20
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		8.40
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		10.05
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		7.53
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		37.20

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

SUBTOTAL \$

67.38

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications RAD radio airtime and production costs CMP campaign paraphernalia/misc. RFD returned contributions MTG meetings and appearances CNS campaign consultants OFC office expenses SAL campaign workers' salaries CTB contribution (explain nonmonetary)* TEL t.v. or cable airtime and production costs CVC civic donations PET petition circulating PHO phone banks candidate travel, lodging, and meals FIL candidate filing/ballot fees POL polling and survey research TRS staff/spouse travel, lodging, and meals FND fundraising events postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)* IND

LEG legal defense PRO professional services (legal, accounting) VOT voter registration

LIT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
OFC		5.47
OFC		10.65
OFC		6.45
OFC		4.20
OFC		10.05
	OFC OFC	OFC OFC

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

SUBTOTAL \$

36.82

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LIT

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.) Statement covers period **CALIFORNIA**

FORM 07/01/2016

through 09/24/2016 Page 21 of 27

I.D. NUMBER

1382665

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

RAD radio airtime and production costs MBR member communications CMP campaign paraphernalia/misc. RFD returned contributions CNS campaign consultants MTG meetings and appearances OFC office expenses SAL campaign workers' salaries CTB contribution (explain nonmonetary)* TEL t.v. or cable airtime and production costs CVC civic donations PET petition circulating phone banks TRC candidate travel, lodging, and meals candidate filing/ballot fees staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research TRS postage, delivery and messenger services transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)* TSF |ND professional services (legal, accounting) VOT voter registration LEG legal defense campaign literature and mailings

PRT print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		4.20
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		8.40
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		4.20
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		4.20
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		4.20

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

SUBTOTAL \$

25.20

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

 Statement covers period
 CALIFORNIA 460

 from ____07/01/2016
 Page ___22 __ of __27 __

 I.D. NUMBER
 1382665

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphemalia/misc.

CNS campaign consultants

MBR member communications

RAD radio airtime and production costs

meetings and appearances

RFD returned contributions

CTB contribution (explain nonmonetary)*

CVC civic donations

FIL candidate filling/ballot fees

OFC office expenses

OFC office expenses

PET petition circulating

phone banks

OFC office expenses

SAL campaign workers' salaries

t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals

FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor

LEG legal defense PRO professional services (legal, accounting) VOT voter registration

LT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Anedot OFC 4.20 5555 Hilton Avenue, #106 Baton Rouge, LA 70808 Credit Card Payment Card Service Center 434.45 5055 Norwood Road Dallas, TX 75356 Card Service Center Credit Card Payment 175.00 5055 Norwood Road Dallas, TX 75356 Card Service Center Credit Card Payment 260.00 5055 Norwood Road Dallas, TX 75356 Deane & Company PRO 343.85 1787 Tribute Road, Suite K Sacramento, CA 95815

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

SUBTOTAL \$

1,217.50

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

| CALIFORNIA 460 | FORM | CALIFORNIA 460 | FORM | F

NAME OF FILER

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs CMP campaign paraphernalia/misc. MBR member communications RFD returned contributions CNS campaign consultants MTG meetings and appearances CTB contribution (explain nonmonetary)* office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating t.v. or cable airtime and production costs candidate filing/ballot fees phone banks candidate travel, lodging, and meals FND fundraising events polling and survey research TRS staff/spouse travel, lodging, and meals postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)* IND legal defense professional services (legal, accounting) voter registration LEG VOT campaign literature and mailings PRT print ads information technology costs (internet, e-mail) LIT NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Deane & Company PRO 301.01 1787 Tribute Road, Suite K Sacramento, CA 95815 PRO 535.50 Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815 Lisa Tucker dba The Tucker Group CMP 3,068.80 1981 North Broadway, Suite 225 Walnut Creek, CA 94596 CMP Lisa Tucker dba The Tucker Group 3,214.61 1981 North Broadway, Suite 225 Walnut Creek, CA 94596 Voter Guide Slate Cards (ID# 1319578) Slate Mailer 474.00 6285 East Spring Street, Suite 202 Long Beach, CA 90808

Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 7,593.92

Amounts may be rounded to whole dollars.

		SOURDOFF F (COM).
Statement covers period		CALIFORNIA 460
from	07/01/2016	FORM TOO
through_	09/24/2016	Page24 of27

I.D. NUMBER

1382665

COLLEGIU E E (CONT

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs MTG meetings and appearances RFD returned contributions CNS campaign consultants CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs candidate travel, lodging, and meals candidate filing/ballot fees PHO phone banks polling and survey research staff/spouse travel, lodging, and meals TRS FND fundraising events POL

IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services LEG legal defense PRO professional services (legal, accounting) VOT voter registration

LIT campaign literature and mallings PRT print ads WEB information technology costs (internet, e-mail)

	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
***************************************	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	JOBE ON	DECOM HONOL TANAGET	
Debbie Weeks 1506 Arlington Blvd. El Cerritos, CA 94530		CMP		625.00
Debbie Weeks 1506 Arlington Blvd. El Cerritos, CA 94530		WEB ;		900.00

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

SUBTOTAL \$

1,525.00

						SCHEDULE I
	nedule F crued Expenses (Unpaid Bills)		Amounts may be rounded to whole dollars.	fro	Statement covers period m07/01/2016	CALIFORNIA 460
SEE	NSTRUCTIONS ON REVERSE			thr	ough 09/24/2016	Page25 of27
NAME	OF FILER					I.D. NUMBER
Fri	ends of Fadelli for City Council 2016					1382665
СО	DES: If one of the following codes accurately describ	es the	payment, you may enter the code. O	therwis	e, describe the payment.	
CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production o	osts
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions	
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries	
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and produ	
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and	
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, a	
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees	of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration	
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Card Service Center 5055 Norwood Road Dallas, TX 75356	Credit Card Payment	434.45	0.00	434.45	0.09
Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$ 434.45\$	0.00	434.455	0.00

Schedule F Summary

summarized on Schedule D.

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.)	INCURRED TOTALS \$ _	0.00
 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.) 	PAID TOTALS \$ _	434.45
3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)	NET \$	~434.45 lay be a negative number

FPPC Form 460 (Jan/2016)

Schedule G Payments Made by an Agent or Independent **Contractor (on Behalf of This Committee)**

Amounts may be rounded to whole dollars.

		OCH IEDUEE G
State	ement covers period	CALIFORNIA ACO
from	07/01/2016	FORM 40U
through	09/24/2016	- Page <u>26</u> of <u>27</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

I.D. NUMBER

AGUEDIU E O

Friends of Fadelli for City Council 2016

1382665

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Card Service Center

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphemalia/misc. campaign consultants CNS CTB contribution (explain nonmonetary)* CVC civic donations

MBR member communications meetings and appearances OFC office expenses

RAD radio airtime and production costs returned contributions campaign workers' salaries SAL

candidate filing/ballot fees FND fundraising events

PET petition circulating PHO phone banks polling and survey research TEL t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals

independent expenditure supporting/opposing others (explain)* LEG legal defense

postage, delivery and messenger services professional services (legal, accounting)

TSF transfer between committees of the same candidate/sponsor voter registration

LIT campaign literature and mailings

PRT print ads VOT WEB information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT		AMOUNT PAID
City of El Cerrito 10890 San Pablo Avenue El Cerrito, CA 94530	FIL			225.00
John Garamendi for Congress 1315 10th Street Sacramento, CA 95814		To Be Refunded		150.00
John Garamendi for Congress 1315 10th Street Sacramento, CA 95814		Contribution Refunded		-150.00
Sierra Club San Francisco 2530 San Pablo Avenue # I Berkeley, CA 94702	CAG			185.00
Attach additional information on appropriately labeled continuation shee	ets.		TOTAL* \$	410.00

^{*} 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 G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

		SCHEDULE (
Stater	nent covers period	CALIFORNIA 160
from	07/01/2016	FORM 400
	*	
through_	09/24/2016	- Page <u>27</u> of <u>27</u>

I.D. NUMBER

1382665

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Fadelli for City Council 2016

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Lisa Tucker dba The Tucker Group

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

RAD radio airtime and production costs CMP campaign paraphernalia/misc. MBR member communications MTG meetings and appearances returned contributions CNS campaign consultants campaign workers' salaries contribution (explain nonmonetary)* OFC office expenses SAL CTB CVC civic donations PET petition circulating TEL. t.v. or cable airtime and production costs TRC FIL

L candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals

ND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals

IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services

LEG legal defense PRO professional services (legal, accounting)

TSF transfer between committees of the same candidate/sponsor VOT voter registration

T campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
H&S Signs 418 Neal Street Grass Valley, CA 95945	CMP		1,983.80
Madison Street Press 614 Madison Street Oakland, CA 94607	CMP		1,628.25
Mary Szczepanik 1483 Guerrero Street San Francisco, CA 94110	CMP		297.50

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 3,909.55

^{*} 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.

Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Statement covers period	Date of election if applicable: (Month, Day, Year)	RECEIVED AUG 0 1 2016	257 W. S. S.	
SEE INSTRUCTIONS ON REVERSE	from 01/01/2016 through 06/30/2016		City of El Cerrito City Clerk	Participation of the state of t	For Official Use Only
1. Type of Recipient Committee: All Committees — (Officeholder, Candidate Controlled Committee State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee	Complete Parts 1, 2, 3, and 4. 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 To Amendment (Explain b	ermination)	Supplement	tatement d-Year Report tal Preelection Attach Form 495
3. Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE Friends of Fadelli for City Council 2016 STREET ADDRESS (NO P.O. BOX) 8646 Arbor Drive	I.D. NUMBER 1382665 E)	Treasurer(s) NAME OF TREASURER Shawnda Deane MAILING ADDRESS 1787 Tribute Road, Successful Succ		ZIP CODE 95815	AREA CODE/PHONE (916)285-5733
El Cerrito CA 94 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. 1787 Tribute Road, Suite K CITY STATE ZIP	AREA CODE/PHONE 530 (916)285-5733 BOX CODE AREA CODE/PHONE 815	NAME OF ASSISTANT TREASUR Paul Fadelli MAILING ADDRESS 8646 Arbor Drive CITY El Cerrito OPTIONAL: FAX / E-MAIL ADDR	STATE CA	ZIP CODE 94530	AREA CODE/PHONE (916)285-5733
4. Verification I have used all reasonable diligence in preparing and review under penalty of perjury under the laws of the State of Califor Executed on Date Executed on Date Executed on Date	nia that the foregoing is true and correct. By	awledge the information contained he side of the office office office office of the office of	Treasurer Joponent or Responsible Officer of Sy State Measure Proponent		rue and complete. I certify FPPC Form 460 (Jan/2016)

FPPC Advice; advice@fppc.ca.gov (866/275-3777) www.fppc.cz

Recipient Committee Campaign Statement Cover Page — Part 2

	COVE	R PAGI	E-PAF	RT 2
CALIF FC	ORN ORM	A 4	160	0
Page	2	of	20	

NAME OF OFFICEHOLDER OR CANDIDATE			NAM	E OF BALLOT MEASURE				
Paul Fadelli								
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIS	TRICT NUMBER IF APPLI	CABLE)	BALL	OT NO. OR LETTER	JURISDICTI	ON		SUPPORT
City Council Member: City of El Cerrito								OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)		ATE ZIP	lder	itify the controlling of	ficeholder, ca	ndidate, or st	ate measure p	proponent, if any
8646 Arbor Drive	El Cerrito C	CA 94530	NAM	E OF OFFICEHOLDER, CA	NDIDATE, OR PF	ROPONENT		
Related Committees Not Included in this not included in this statement that are controlled by y contributions or make expenditures on behalf of your	ou or are primarily for:	•	OFF	CE SOUGHT OR HELD			DISTRICT NO. I	F ANY
COMMITTEE NAME	I.D. NUMBER	· · · · · · · · · · · · · · · · · · ·						
	i i							
								
NAME OF TREASURER	CONTROLLED COM	MMITTEE?		marily Formed Car				
NAME OF TREASURER	_	MMITTEE?	offic	eholder(s) or candidate(s) for which th	is committee is	primarily form	
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO P.	☐ YES ☐		offic		s) for which th	is committee is		
COMMITTEE ADDRESS STREET ADDRESS (NO P.	O. BOX)		offic NAM	eholder(s) or candidate((s) for which the	OFFICE SOU	primarily form	ed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.	O. BOX)	NO	NAM NAM	eholder(s) or candidate(E OF OFFICEHOLDER OR E OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.	O. BOX) ZIP CODE AREA	NO	NAM NAM	eholder(s) or candidate(CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.	O. BOX) ZIP CODE AREA	NO CODE/PHONE	NAM NAM NAM	eholder(s) or candidate(E OF OFFICEHOLDER OR E OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE	OFFICE SOU	GHT OR HELD GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P. CITY STATE 2 COMMITTEE NAME NAME OF TREASURER -	O. BOX) ZIP CODE AREA I.D. NUMBER CONTROLLED CON	NO CODE/PHONE	NAM NAM NAM	eholder(s) or candidate(E OF OFFICEHOLDER OR E OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE	OFFICE SOU	GHT OR HELD GHT OR HELD GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO P. CITY STATE Z COMMITTEE NAME	O. BOX) ZIP CODE AREA I.D. NUMBER CONTROLLED CON	NO A CODE/PHONE	NAM NAM NAM	eholder(s) or candidate(E OF OFFICEHOLDER OR E OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE	OFFICE SOU	GHT OR HELD GHT OR HELD GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statement covers period	CALIFORNIA 160
from01/01/2016	FORM TOO
through06/30/2016	Page3 of20
	I.D. NUMBER
	1382665

Friends of Fadelli for City Council 2016

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Contributions Received	(1	Column A TOTALTHIS PERIOD FROM ATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and
1. Monetary Contributions Schedule A, Line 3	\$	5,772.24	\$.	5,772.24	General Elections
2. Loans Received		5,000.00		5,000.00	1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	10,772.24	\$.	10,772.24	20. Contributions Received \$\$
4. Nonmonetary Contributions Schedule C, Line 3		0.00		0.00	21 Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	10,772.24	\$.	10,772.24	Made \$ \$
Expenditures Made					Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$	3,162.39	\$.	3,162.39	Candidates
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	3,162.39	\$.	3,162.39	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)		434.45		434.45	Date of Election Total to Date
10. Nonmonetary Adjustment		0.00		0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADEAdd Lines 8 + 9 + 10	\$	3,596.84	\$.	3,596.84	\$
Current Cash Statement					\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	0.00	Тос	calculate Column B, add	
13. Cash Receipts Column A, Line 3 above		10,772.24		ounts in Column A to the responding amounts	
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fron	n Column B of your last	*Amounts in this section may be different from amounts reported in Column B.
15. Cash Payments		3,162.39		ort. Some amounts in umn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	7,609.85		res that should be tracted from previous	
If this is a termination statement, Line 16 must be zero.			per	iod amounts. If this is first report being filed	
17. LOAN GUARANTEES RECEIVED	\$	0.00	for	this calendar year, only over the amounts	
Cash Equivalents and Outstanding Debts			fror any	n Lines 2, 7, and 9 (if	
18. Cash Equivalents See instructions on reverse	\$	0.00			
19. Outstanding Debts	\$	5,434.45			
			1 ****		FPPC Advice: advice@fppc.ca.gov (866/2

/2016)

Schedule Monetary	A Contributions Received		ts may be rounded whole dollars.	Statement cove		SCHEDULE CALIFORNIA 460 FORM
SEE INSTRUCTIO	ONS ON REVERSE			through <u>06/30/2</u> 6	016	Page 4 of 20
NAME OF FILER						I.D. NUMBER
Friends of 1	Fadelli for City Council 2016					1382665
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN. 1 - DEC. 3	R TO DATE
05/01/2016	Janet Abelson 7 Pomona Avenue El Cerrito, CA 94530	⊠IND □COM □OTH □PTY □SCC	Councilmember City of El Cerrito	125.00	12	5,00
06/02/2016	Leon Billings 20 Addy Road Bethany Beach, DE 19930	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	100.00	10	0.00
05/01/2016	Judith Christiansen 1400 Pinnacle Court, #404 Richmond, CA 94801	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired n/a	100.00	10	0.00
05/01/2016	Linda A. Della 984 Santa Barbara Road Berkeley, CA 94707	⊠IND □COM □OTH □PTY □SCC	Retired n/a	300.00	30	0.00
05/01/2016	Cindy Dummiry 3360 Adams Road Sacramento, CA 95864	⊠IND □COM □OTH □PTY □SCC	Social Services Sutter Health	100.00	10	0.00
			SUBTOTAL	\$ 725.00		
1. Amount re	A Summary eccived this period – itemized monetary contributions.		Ф	4 531 24	IND-Ir	outor Codes idividual Recipient Committee

(Include all Schedule A subtotals.)\$

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

FPPC Form 460 (Jan/2016)

(other than PTY or SCC) OTH - Other (e.g., business entity)

SCC - Small Contributor Committee

FPPC Advice: advice@fppc.ca.gov (866/2" www.fpp

PTY - Political Party

4,531.24

1,241.00

5,772.24

3. Total monetary contributions received this period.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

				from01/01/	2016	FUF	ZIW - U
				through06/30/	2016		5 of <u>20</u>
NAME OF FILER						I.D. NUME	BER
Friends of F	adelli for City Council 2016					1382665	5
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		PER ELECTION TO DATE (IF REQUIRED)
04/23/2016	Robert Feraru 1801 Butte Street Richmond, CA 94804	XIND COM OTH PTY SCC	Retired n/a	200.00	20	00.00	
04/18/2016	Kristen Franklin 2290 Eagle Bend Court Reno, NV 89523	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	10	00.00	
04/20/2016	Ann Gressani 3428 Jordan Road Oakland, CA 94602		Energy Efficiency Consultant Ann Gressani	100.00	10	00.00	
05/01/2016	Brian Griedel 2224 Pinehurst Court El Cerrito, CA 94530	⊠IND □COM □OTH □PTY □SCC	Attorney View, Inc.	200.00	20	00.00	
05/01/2016	Jan Bridges for City Council 2012 (ID# 1350798) 8628 Edgehill Court El Cerrito, CA 94530	□IND IND OTH IND		154.24	1.5	54.24	
			SUBTOTAL	\$ 754.24			

*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 (866/2 72) www.fppc.ca.gov

Amounts may be rounded to whole dollars.

SCHEDULE, A (CONT.)

CALIFORNIA

Statement covers period

				from01/01/2016		
				through 06/30/	2016 Page	6 of <u>20</u>
NAME OF FILER			<u> </u>		I.D. NI	JMBER
Friends of Fa	adelli for City Council 2016		#		1382	665
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/01/2016	Monica Rae Kortz 1506 Arlington Blvd. El Cerrito, CA 94530	IND COM OTH PTY SCC	Retired n/a	200.00	200.00	,
05/19/2016	Judy Lewis 5224 Yorkville Place Carmichael, CA 95608	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Steven A. Lewis	100.00	100.00	
06/02/2016	Sandi McCubbin 323 Mason Healdsburg, CA 95448		State Lobbyist Lhom	100.00	100.00	
05/01/2016	Alan C. Miller 625 Ashbury Avenue El Cerrito, CA 94530	COM OTH PTY SCC	Retired n/a	125.00	125.00	
06/06/2016	Bielle Moore 350 North Civic Drive, Suite 501 Walnut Creek, CA 94596		Municipal Relations Republic Services	100.00	100.00	
			SUBTOTAL \$	625.00	i projeteno del sportificare positiva Su designi canting como con	

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IND - Individual

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(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 (866/2 '72)
www.fppc.ua.gov

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

Monetary Contributions Received		Amounts may be rounded to whole dollars.		Statement covers period from 01/01/2016		CALIFORNIA 460		
				through 06/30/	2016 Pag	je <u>7</u> of <u>20</u>		
NAME OF FILER					I.D.	NUMBER		
Friends of Fa	adelli for City Council 2016				13	32665		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DAT CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)		
05/01/2016	Neighbors for Supervisor John Gioia 2014 (ID# 1337585) 2 Seabreeze Drive Richmond, CA 94804	□IND ☑COM □OTH □PTY □SCC		250.00	250.(
04/17/2016	Scott Nichols 531 Thornley Way Sacramento, CA 95864	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Certified Public Accountant KKN, Inc.	500.00	500.0	0		
04/27/2016	Diane Ongaro 21 Culloden Park Road San Rafael, CA 94901	XIND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	100.00	100.	0		
04/11/2016	Thomas Milton Panas 7345 Fairmount Avenue El Cerrito, CA 94530	⊠IND □COM □OTH □PTY □SCC	Retired n/a	500.00	500.4			
05/31/2016	Cathy Parshley 9 Wellington Street Boston, MA 02118	⊠IND □COM □OTH □PTY □SCC	Not Employed n/a	125.00	125.1	0		
			SUBTOTAL	\$ 1,475.00				

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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 (866/2 772)

www.fpp. "gov

Amounts may be rounded to whole dollars.

SCHEDULE A (CO	NT.)
CALIFORNIA 46	
FORM 401	T Ri

State	ement covers period	CALIFORNIA A 60
from	01/01/2016	FORM 40U
through_	06/30/2016	Page 8 of 20
		I.D. NUMBER
		1202665

Friends of Fadelli for City Council 2016

NAME OF FILER

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/31/2016	Paul Parshley 9 Wellington Street Boston, MA 02118	⊠IND □COM □OTH □PTY □SCC	Financial Services Energy Capital Partners	125.00	125.00	
05/01/2016	Stephen L. Purser 6166 Park Avenue Richmond, CA 94805	⊠IND □COM □OTH □PTY □SCC	Retired n/a		200.00	
05/01/2016	Alan Resnik 1707 Grant Avenue San Francisco, CA 94133	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	277.00	277.00	
05/19/2016	Joan M. Russo 1869 Holland Drive Walnut Creek, CA 94597	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Insurance Agent Blue Shield of California	100.00	100.00	
05/03/2016	Jim Starr 966 Chumley Drive Fallon, NV 89406	⊠IND □COM □OTH □PTY □SCC	Retired n/a	150.00	150.00	
			SUBTOTAL	852.00	r teachiging was teachiged by	ilinas ja ja artarias irinas -

*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 (866/2

www.fppu.__a.gov

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

Monetary Contributions Received			Amounts may be rounded to whole dollars.		Statement covers period from01/01/2016		california 460		
				through 06/30/	2016	Page	9 of <u>20</u>		
NAME OF FILER	A1-11-11-11-11-11-11-11-11-11-11-11-11-1	***************************************				I.D. NUN	BER		
Friends of Fa	adelli for City Council 2016					138266	55		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)		
03/31/2016	Zell & Associates 125 Park Place, Suite 200 Point Richmond, CA 94801	□IND □COM ⊠OTH □PTY □SCC		100.00	ĵ	.00.00			
		□IND □COM □OTH □PTY □SCC	·						
		□IND □COM □OTH □PTY □SCC							
		□IND □COM □OTH □PTY □SCC							
		□IND □COM □OTH □PTY □SCC							
			SUBTOTAL	\$ 100.00			Per Nelle Information (accepts the last state)		

*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 (866/7

www.fpp、 .a.gov

							SCHE	EDULE B - PART
Schedule B – Part 1	Ame	ounts may be re			Statement co	vers period	CALIFORN	^{IA} 460
Loans Received		to whole dollar	rs.		from01/0	01/2016	FORM	400
								A CONTRACTOR OF THE
SEE INSTRUCTIONS ON REVERSE					through06/3	30/2016	Page10	of <u>20</u>
NAME OF FILER				,			I.D. NUMBER	
Friends of Fadelli for City Council 20	016						1382665	
FULL NAME, STREET ADDRESS AND ZIP CODE	IF AN INDIVIDUAL, ENTER	(a) OUTSTANDING	(b) AMOUNT	(c)	(d) OUTSTANDING	(e)	(f)	(g)
OF LENDER (IF COMMITTEE, ALSO ENTER LD. NUMBER)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	BALANCE BEGINNING THIS PERIOD	RECEIVED THIS PERIOD	AMOUNT PA OR FORGIV THIS PERIC	BALANCE AT EN CLOSE OF THIS	INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTION TO DATE
Paul L. Fadelli 8646 Arbor Drive	Program Manager San Francisco Bay Area			PAID				CALENDAR YEAR
El Cerrito, CA 94530	Rapid Transit			\$0.0	5,000.00	0.00%%	\$ 5,000.00	\$_5,000.00
				FORGIVEN		RATE		PER ELECTION*
		\$ 0.00	\$_5,000.00	\$0.0		\$0.00	03/09/2016	s
TIND COM OTH PTY SCC				ļ	DATE DUE		DATE INCURRED	
				☐ PAID				CALENDAR YEAR
				\$	_ \$	RATE	\$	\$
				FORGIVEN				PER ELECTION *
† IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
IND COM OTH PTY SCC								CALENDAR YEAR
				☐ PAID				CALENDAR TEAR
				\$FORGIVEN	_ \$	RATE	\$	\$ PER ELECTION *
				1010101				FERELECTION
† IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
	1	CURTOTALS	<u> </u>	<u> </u>			a va dikon dan d	
		SUBTOTALS S	5,000.00) U.	5,000.0	0.00 (Enter(e) on		
Schedule B Summary						Schedule E, Line 3)		
1. Loans received this period		•••••		\$	5,000.0	<u>0</u>		
(Total Column (b) plus unitemized loar	s of less than \$100.)					(to	Contributor Codes	3
2. Loans paid or forgiven this period				\$	0.0	^ !	D – Individual	
(Total Column (c) plus loans under \$10				Ψ		_ 0	*	PTY or SCC)
(Include loans paid by a third party tha		dule A.)					TH – Other (e.g., TY – Political Part	
3 Net change this period (Subtract Lin	e 2 from Line 1 \			NFT ¢	5.000.00	I _	CC – Small Contri	
3. Net change this period. (Subtract Lin	ar Daga Column A. Lina ?			. 14m. 1 4 —	(May be a negative number)			

FPPC Form 460 (Jan/2016)

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** If required.

Enter the net here and on the Summary Page, Column A, Line 2. *Amounts forgiven or paid by another party also must be reported on Schedule A.

Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees

Amounts may be rounded to whole dollars.

		SCHEDULE D
State	ment covers period	CALIFORNIA 160
from	01/01/2016	FORM TUU
through	n <u>06/30/2016</u>	Page <u>11</u> of <u>20</u>
		I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Friends of Fadelli for City Council 2016 1382665 CUMULATIVE TO DATE PER ELECTION NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR DESCRIPTION TYPE OF PAYMENT AMOUNT THIS DATE CALENDAR YEAR TO DATE MEASURE NUMBER OR LETTER AND JURISDICTION, (IF REQUIRED) PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OR COMMITTEE 250.00 250.00 G2016 \$250.00 06/09/2016 Nancy Skinner X Monetary State Senator Contribution District: 9 Nonmonetary Contribution Independent Expenditure X Support Oppose Monetary Contribution Nonmonetary Contribution ☐ Independent Expenditure ☐ Support Oppose Monetary Contribution ☐ Nonmonetary Contribution Independent Expenditure Support Oppose SUBTOTAL \$ 250.00

1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)	\$ 250.00
Unitemized contributions and independent expenditures made this period of under \$100	\$ 0.00

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Schedule E **Payments Made**

Amounts may be rounded to whole dollars.

	SCHEDOLE E
Statement covers period	CALIFORNIA 460
from01/01/2016	FORM TOU
through06/30/2016	Page12 of20
	I.D. NUMBER
	1292665

SEE INSTRUCTIONS ON REVERSE					through _	06/30/2016	_ Page1	2 of	20
NAME OF FILER					<u> </u>		I.D. NUM	BER	
Friends of Fadelli for City Council 2016						•	138266	5	
CODES: If one of the following codes accurately describes 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 community meetings and office expension. PET petition circul phone banks POL polling and suppostage, deli	munication I appearar ses ating urvey rese very and r	s nces	ces	RAD radio RFD return SAL camp TEL t.v. or TRC candi TRS staff/ TSF trans VOT voter	De the payment. airtime and productioned contributions aign workers' salaries cable airtime and product travel, lodging, a spouse travel, lodging for between committee registration mation technology cos	s oduction costs nd meals g, and meals es of the sam		te/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESC	RIPTION OF PA	YMENT		AMOUI	NT PAID
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC							23.96
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC							4.20
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808		OFC						*************************************	4.20
* Payments that are contributions or independent expenditures i	must also be summ	arized on	Schedule D.			S	SUBTOTAL\$		32.36
Schedule E Summary								•	
1. Itemized payments made this period. (Include all Schedule	E subtotals.)				***************************************		\$	3,1	112.39
2. Unitemized payments made this period of under \$100	***************************************						\$		50.00
3. Total interest paid this period on loans. (Enter amount from									0.00

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Amounts may be rounded to whole dollars.

		SCHEDULE E (CONT.)
Statement covers period		CALIFORNIA 460
from	01/01/2016	FORM TOO
through	06/30/2016	Page 13 of 20
		I.D. NUMBER
•		1382665

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

NAME OF FILES

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications RAD radio airtime and production costs CMP campaign paraphernalia/misc. CNS campaign consultants MTG meetings and appearances returned contributions contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CTB petition circulating TEL t.v. or cable airtime and production costs PET CVC civic donations phone banks candidate travel, lodging, and meals candidate filing/ballot fees PHO POL polling and survey research TRS staff/spouse travel, lodging, and meals FND fundraising events independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor IND professional services (legal, accounting) VOT voter registration LEG legal defense PRO WEB information technology costs (internet, e-mail) campaign literature and mailings PRT print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		8.10
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		2.25
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		8.10
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		2.25
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		. 11.62

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32.32

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SUBTOTAL \$

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

		SCHEDULE E (CONT.)
Statement covers period		CALIFORNIA 460
from	01/01/2016	FORM TOO
through.	06/30/2016	- Page <u>14</u> of <u>20</u>
		I.D. NUMBER

1382665

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs

CNS campaign consultants MTG meetings and appearances RFD returned contributions

CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries

CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs

FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals

IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services LEG legal defense PRO professional services (legal, accounting) VOT voter registration

IT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

OFC			12.59
OFC			4.20
OFC			4.20
OFC			3.22
orc			10.05
	OFC OFC	OFC OFC	OFC OFC

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

SUBTOTAL \$

34.26

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

| SCHEDULE E (CONT.)
| Statement covers period | CALIFORNIA | 460 |
| through | 06/30/2016 | Page | 15 | of | 20 |
| I.D. NUMBER

1382665

Friends of Fadelli for City Council 2016

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

MBR member communications RAD radio airtime and production costs CMP campaign paraphernalia/misc. CNS campaign consultants meetings and appearances returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries petition circulating t.v. or cable airtime and production costs CVC civic donations PET candidate travel, lodging, and meals candidate filing/ballot fees phone banks staff/spouse travel, lodging, and meals FND fundraising events polling and survey research independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services transfer between committees of the same candidate/sponsor IND voter registration LEG legal defense PRO professional services (legal, accounting) VOT WEB information technology costs (internet, e-mail) campaign literature and mailings PRT print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		8.40
Anedot 5555 Hilton Avenue, #106 Baton Rouge, LA 70808	OFC		2.25
Card Service Center P.O. Box 569100 5055 Norwood Road Dallas, TX 75356		Credit Card Payment	398.00
Card Service Center P.O. Box 569100 5055 Norwood Road Dallas, TX 75356		Credit Card Payment	252.00
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		626.91

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

SUBTOTAL \$

1,287.56

Amounts may be rounded to whole dollars.

		SCHEDULE E (CONT.)
State	ment covers period	CALIFORNIA 460
from	01/01/2016	FORM TOU
through	06/30/2016	- Page 16 of 20

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Page ____16___ of ___20_ I.D. NUMBER

Friends of Fadelli for City Council 2016

1382665

CODES: If one of the following codes accurately describe	s the	payment, you may enter the code.	Otherwise,	describe the payment.
CMP campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO	phone banks		candidate travel, lodging, and meals
FND fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT campaign literature and mallings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		406.13
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		271.20
Deane & Company 1787 Tribute Road, Suite K Sacramento, CA 95815	PRO		272.47
Michelle Fadelli 8646 Arbor Drive El Cerrito, CA 94530	OFC	Appetizers Only	112.78
Lisa Tucker dba The Tucker Group 1981 North Broadway, Suite 225 Walnut Creek, CA 94596	LIT		495.4

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL \$** 1,558.03

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

	SCHEDULE E (CONT.)
Statement covers period	CALIFORNIA 460
from 01/01/2016	FORM TOU
through 06/30/2016	- Page <u>17</u> of <u>20</u>
	I.D. NUMBER
	1382665

Friends of Fadelli for City Council 2016

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

CNS contribution (explain nonmonetary)*

MBR member communications

MER mem

CTB contribution (explain nonmonetary)*

CFC office expenses

CFC office expenses

FET petition circulating

FET petition circulating

FET phone banks

FET phone banks

FET phone banks

FET phone banks

FET polling and survey research

FET polling and survey research

FET polling and survey research

FET petition circulating

FET t.v. or cable airtime and production costs

FET candidate fravel, lodging, and meals

FET polling and survey research

FET petition circulating

FET polling and survey research

FET polling and survey research

FET polling and survey research

FET petition circulating

FET t.v. or cable airtime and production costs

FET campaign workers salaries

t.v. or cable airtime and production costs

FET polling and survey research

FET polling and survey research

FET polling and survey research

IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor

LEG legal defense PRO professional services (legal, accounting) VOT voter registration

r campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	O	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Lisa Tucker dba The Tucker Group 1981 North Broadway, Suite 225 Walnut Creek, CA 94596	LIT			167.86

	,			

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

SUBTOTAL \$

167.86

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					SCHEDULE
Schedule F Accrued Expenses (Unpaid Bills)		Amounts may be rounded to whole dollars.	fro	Statement covers period m01/01/2016	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE			thr	ough 06/30/2016	Page 18 of 20
NAME OF FILER					I.D. NUMBER
Friends of Fadelli for City Council 2016					1382665
CODES: If one of the following codes accurately describ	es the	payment, you may enter the code. Oth	erwis	e, describe the payment.	
CMP campaign paraphernalia/misc.	MBR	member communications		radio airtime and production co	osts
CNS campaign consultants	MTG	meetings and appearances	RFD	returned contributions	
CTB contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries	-4'4-
CVC civic donations	PET PHO	petition circulating phone banks	TEL TRC	 t.v. or cable airtime and product candidate travel, lodging, and r 	
FIL candidate filing/ballot fees FND fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and i	
ND independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF		of the same candidate/sponsor
LEG legal defense	PRO	professional services (legal, accounting)	VOT	voter registration	e. The earlier damage opportunity
LIT campaign literature and mailings	PRT	print ads	WEB	_	internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Card Service Center P.O. Box 569100 5055 Norwood Road Dallas, TX 75356	Credit Card Payment	0.00	434.45	0.00	434.45
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS S	0.00\$	434.45	\$ 0.00\$	434.45

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.)	434.45
O. Total assured averages asid this period. (Include all Cabadula F. Caluman (a) subtatals for payments as	

2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on

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

NET \$ \frac{434.45}{May be a negative number}\$

FPPC Form 460 (Jan/2016)

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Schedule G
Payments Made by an Agent or Independent
Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

	SUMEDULE G
Statement covers period	CALIFORNIA 160
from 01/01/2016	FORM 40U
through 06/30/2016	Page 19 of 20
	I.D. NUMBER

1382665

COLEDITE O

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Fadelli for City Council 2016

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Card Service Center

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphemalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor

LEG legal defense PRO professional services (legal, accounting) VOT voter registration
LIT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	АМС	OUNT PAID
City of El Cerrito 10890 San Pablo Avenue El Cerrito, CA 94530	OFC			398.00
City of El Cerrito 10890 San Pablo Avenue El Cerrito, CA 94530	OFC			-173.00
John Garamendi for Congress 1315 10th Street Sacramento, CA 95814	Federa	l Contribution		150.00
John Garamendi for Congress 1315 10th Street Sacramento, CA 95814	Federa	l Contribution		150.00
Attach additional information on appropriately labeled continuation s	heets.		TOTAL* \$	525.00

* 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.

FPPC Form 460 (Jan/2016)

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www.netfile.com

Schedule G	(Continuation Sheet)
Payments N	lade by an Agent or Independent
Contractor	on Behalf of This Committee)

Amounts may be rounded to whole dollars.

	SCHEDULE G (CONT
Statement covers period	CALIFORNIA 460
from01/01/2016	FORM 40U
through 06/30/2016	Page

I.D. NUMBER

1382665

NAME OF FILER

Friends of Fadelli for City Council 2016

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Card Service Center

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphemalia/misc. MBR member communications RAD radio airtime and production costs

CNS campaign consultants MTG meetings and appearances RFD returned contributions

CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries

CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs

FLC candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals

FIL candidate fliing/ballot rees phone banks FRC candidate travel, lodging, and meals

FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals

IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor

LEG legal defense PRO professional services (legal, accounting) VOT voter registration

LIT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYM	ENT AMO	UNT PAID
Mark DeSaulnier For Congress 2425 Bisso Lane, Suite 110 Concord, CA 94520	Federal Contribution		125.00
			•
Skinner for Senate 2016 (ID# 1354462) 1787 Tribute Road, Suite K Sacramento, CA 95815	СТВ		250.00
Swalwell For Congress	Federal Contribution		150.00
6689 Owens Drive Pleasanton, CA 94588			
Attach additional information on appropriately labeled continuation sheets.		TOTAL* \$	525.00

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or

FPPC Form 460 (Jan/2016)

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independent contractor as reported on Schedule E.