

**Recipient Committee  
Campaign Statement  
Cover Page**

Date Stamp <b>RECEIVED</b> OCT 25 2018 CITY CLERK	<b>CALIFORNIA FORM 460</b>
	Page <u>1</u> of <u>9</u>
	For Official Use Only

<b>Statement covers period</b> from <u>9/23/2018</u> through <u>10/20/2018</u>	<b>Date of election if applicable:</b> (Month, Day, Year) <u>11/6/2018</u>
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SEE INSTRUCTIONS ON REVERSE

**1. Type of Recipient Committee:** All Committees – Complete Parts 1, 2, 3, and 4.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee<br><input type="checkbox"/> State Candidate Election Committee<br><input type="checkbox"/> Recall<br><small>(Also Complete Part 5)</small><br><br><input type="checkbox"/> General Purpose Committee<br><input type="checkbox"/> Sponsored<br><input type="checkbox"/> Small Contributor Committee<br><input type="checkbox"/> Political Party/Central Committee | <input type="checkbox"/> Primarily Formed Ballot Measure Committee<br><input type="checkbox"/> Controlled<br><input type="checkbox"/> Sponsored<br><small>(Also Complete Part 6)</small><br><br><input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee<br><small>(Also Complete Part 7)</small> |
|---|---|

**2. Type of Statement:**

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Preelection Statement<br><input type="checkbox"/> Semi-annual Statement<br><input type="checkbox"/> Termination Statement<br><small>(Also file a Form 410 Termination)</small><br><input type="checkbox"/> Amendment (Explain below) | <input type="checkbox"/> Quarterly Statement<br><input type="checkbox"/> Special Odd-Year Report |
|--|--|

**3. Committee Information**

I.D. NUMBER  
1403943

**Treasurer(s)**

NAME OF TREASURER

Jodi Clinesmith

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

Petaluma CA 94952

NAME OF ASSISTANT TREASURER, IF ANY

Rebecca Rosenbloom

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

Petaluma CA 94952

OPTIONAL: FAX / E-MAIL ADDRESS

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

Teresa Barrett

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

Petaluma CA 94952

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY STATE ZIP CODE AREA CODE/PHONE

Petaluma CA 94952

OPTIONAL: FAX / E-MAIL ADDRESS

**4. Verification**

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 10/22/18  
Date

By Jodi Clinesmith  
Signature of Treasurer or Assistant Treasurer

Executed on 10/25/18  
Date

By Teresa Barrett  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Recipient Committee  
Campaign Statement  
Cover Page — Part 2**

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE  
Teresa Barrett

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)  
Mayor, Petaluma, CA

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP  
Petaluma CA 9495

**Related Committees Not Included in this Statement:** *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

  

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY
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**7. Primarily Formed Candidate/Officeholder Committee** *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

*Attach continuation sheets if necessary*

# Campaign Disclosure Statement Summary Page

Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>9/23/2018</u>	<b>CALIFORNIA FORM 460</b>
through <u>10/20/2018</u>	
Page <u>3</u> of <u>9</u>	I.D. NUMBER 1403943

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Teresa Barrett for Mayor 2018

## Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions..... <i>Schedule A, Line 3</i>	\$ <u>1,975.00</u>	\$ <u>57,171.00</u>
2. Loans Received..... <i>Schedule B, Line 3</i>		
3. SUBTOTAL CASH CONTRIBUTIONS..... <i>Add Lines 1 + 2</i>	\$ <u>1,975.00</u>	\$ <u>57,171.00</u>
4. Nonmonetary Contributions..... <i>Schedule C, Line 3</i>	<u>782.10</u>	<u>2,160.64</u>
5. TOTAL CONTRIBUTIONS RECEIVED..... <i>Add Lines 3 + 4</i>	\$ <u>2,757.10</u>	\$ <u>59,331.64</u>

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

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

## Expenditures Made

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made..... <i>Schedule E, Line 4</i>	\$ <u>21,861.58</u>	\$ <u>38,392.53</u>
7. Loans Made..... <i>Schedule H, Line 3</i>		
8. SUBTOTAL CASH PAYMENTS..... <i>Add Lines 6 + 7</i>	\$ <u>21,861.58</u>	\$ <u>38,392.53</u>
9. Accrued Expenses (Unpaid Bills)..... <i>Schedule F, Line 3</i>		
10. Nonmonetary Adjustment..... <i>Schedule C, Line 3</i>	<u>782.10</u>	<u>2,160.64</u>
11. TOTAL EXPENDITURES MADE..... <i>Add Lines 8 + 9 + 10</i>	\$ <u>22,643.68</u>	\$ <u>40,553.17</u>

## 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
____/____/____	\$ _____
____/____/____	\$ _____

## Current Cash Statement

12. Beginning Cash Balance..... <i>Previous Summary Page, Line 16</i>	\$ <u>39,193.86</u>
13. Cash Receipts..... <i>Column A, Line 3 above</i>	<u>1,975.00</u>
14. Miscellaneous Increases to Cash..... <i>Schedule I, Line 4</i>	<u>0</u>
15. Cash Payments..... <i>Column A, Line 8 above</i>	<u>21,861.58</u>
16. ENDING CASH BALANCE..... <i>Add Lines 12 + 13 + 14, then subtract Line 15</i>	\$ <u>19,307.28</u>

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

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.

17. LOAN GUARANTEES RECEIVED..... <i>Schedule B, Part 2</i>	\$ <u>0</u>
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## Cash Equivalents and Outstanding Debts

18. Cash Equivalents..... <i>See instructions on reverse</i>	\$ <u>0</u>
19. Outstanding Debts..... <i>Add Line 2 + Line 9 in Column B above</i>	\$ <u>0</u>

# Schedule A Monetary Contributions Received

Amounts may be rounded  
to whole dollars.

SCHEDULE A

Statement covers period from <u>9/23/2018</u> through <u>10/20/2018</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Teresa Barrett for Mayor 2018

I.D. NUMBER

1403943

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)
	TOTAL OF SCHEDULE ATTACHED	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,975.00	\$57,171.00	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				1,975.00		

## Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) .....	\$ <u>1,975.00</u>
2. Amount received this period – unitemized monetary contributions of less than \$100 .....	\$ <u>0</u>
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.).....	<b>TOTAL \$ <u>1,975.00</u></b>

\*Contributor Codes  
 IND – Individual  
 COM – Recipient Committee  
 (other than PTY or SCC)  
 OTH – Other (e.g., business entity)  
 PTY – Political Party  
 SCC – Small Contributor Committee

SCHEDULE A  
 MONETARY CONTRIBUTIONS RECEIVED

NAME OF FILER: Teresa Barrett

CALIFORNIA FORM 460

Statement covers period  
 from: September 23, 2018  
 through: October 20, 2018

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DATE RECEIVED	NAME	ADDRESS	CODE	OCCUPATION/EMPLOYER	AMOUNT	CUMULATIVE TO DATE
10/02/2018	421 Group Inc.	Sepastopol CA 95472	OTH	NA	200.00	200.00
10/12/2018	Burger Richard	Petaluma California 94952	IND	Lawyer/Self	100.00	100.00
10/02/2018	Bussewitz Barry	Petaluma CA 94952	IND	Early Childhood Educator/Solano Community College	100.00	100.00
10/12/2018	Crane Leslie	Petaluma CA 94954	IND	Santa Rosa Junior College: Professor	100.00	200.00
10/12/2018	Crowley Tim	Petaluma CA 94952	IND	Analyst/Abbot	100.00	100.00
10/12/2018	Derham Robert	San Rafael California 94901	IND	Lawyer/Self	50.00	50.00
10/02/2018	Fishman Leland	Petaluma CA 94952	IND	Owner/Fishman Supply	100.00	100.00
10/10/2018	Ginkel Betsy	Petaluma CA 94952	IND	Administrator/Ridhwan Foundation Grp	50.00	50.00
10/10/2018	Gardon Mary	Petaluma CA 94954	IND	Fashion Designer/Self	100.00	100.00
10/12/2018	Gracyk Janet	Petaluma CA 94952	IND	Landscape architect/Self	50.00	50.00
10/12/2018	Grieco Helen	Petaluma California 94952	IND	Teacher/Organizer/Common Cause	100.00	100.00
10/02/2018	Int. Brotherhood of Electrical Workers Local 551 PAC	Sacramento CA 95814	OTH	NA	200.00	200.00
10/02/2018	Langlois Andree	Petaluma CA 94954	IND	Retired	50.00	50.00
10/12/2018	Murphy Jane	Petaluma California 94952	IND	Graphic Designer/Self	100.00	100.00
10/02/2018	Mutz John & Heather	Sebastopol California 95472	IND	Right Management Assoc.: Consultant/Consultant:Self	200.00	200.00
10/10/2018	National Union of Healthcare Workers Candidate Comm	Sacramento CA 95815	OTH	NA	200.00	200.00
10/02/2018	Riley Michael	Petaluma CA 94952	IND	Retired	25.00	25.00
10/10/2018	Rokeach Sheila	Novato 94947-4301	IND	Sales Rep Rodan & Fields	100.00	200.00
10/17/18	Crescent Creative	Petaluma California 94952	OTH	NA	50.00	50.00
	<b>TOTAL</b>				<b>1,975.00</b>	<b>2,175.00</b>

**Schedule C  
Nonmonetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE C

Statement covers period from <u>9/23/2018</u> through <u>10/20/2018</u>	<b>CALIFORNIA FORM 460</b>
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I.D. NUMBER 1403943	

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

Teresa Barrett for Mayor 2018

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 SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
	TOTAL OF SCHEDULE ATTACHED	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				\$782.10	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
						<b>SUBTOTAL \$</b>	782.10

Attach additional information on appropriately labeled continuation sheets.

**Schedule C Summary**

- Amount received this period – itemized nonmonetary contributions.  
(Include all Schedule C subtotals.) .....\$ 782.10
- Amount received this period – unitemized nonmonetary contributions of less than \$100 .....\$ \_\_\_\_\_
- Total nonmonetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) .....**TOTAL \$** 782.10

\*Contributor Codes  
IND – Individual  
COM – Recipient Committee  
(other than PTY or SCC)  
OTH – Other (e.g., business entity)  
PTY – Political Party  
SCC – Small Contributor Committee

**SCHEDULE C  
NONMONETARY CONTRIBUTIONS RECEIVED**

**NAME OF FILER:** Teresa Barrett

**CALIFORNIA FORM 460**

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Statement covers period  
from: September 23, 2018  
through: October 20, 2018

**ID NUMBER:** 1403943

<b>DATE RECEIVED</b>	<b>NAME</b>	<b>ADDRESS</b>	<b>CODE</b>	<b>OCCUPATION/ EMPLOYER</b>	<b>DESCRIPTION</b>	<b>FAIR MKT VALUE</b>	<b>CUMULATIVE TO DATE</b>
10/15/18	Chmielewski Erin	Cotati California 94931	IND	Treatment Manager/Brandner Veterinary Hospital	Signs	200.00	200.00
10/15/18	Brown Kamala	Petaluma California 94952	IND	Teacher/Elsie Allen High School	Signs	200.00	200.00
10/15/18	Garcia Zahyra	Daly City California 94015	IND	Stay at home mom	Signs	182.10	182.10
10/15/18	Guerrero Paul	Petaluma California 94952	IND	Stay at home dad	Signs	200.00	200.00
TOTAL						782.10	

**SCHEDULE E  
PAYMENTS MADE**

**NAME OF FILER:** Teresa Barrett

**CALIFORNIA FORM 460**

Statement covers period  
from: September 23, 2018  
through: October 20, 2018

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**ID NUMBER:** 1403943

<b>NAME &amp; ADDRESS</b>	<b>CODE</b>	<b>AMOUNT PAID</b>
Facebook Menlo Park, CA 94025	WEB	75.00
Mori Elizabeth Petaluma, CA 94952	FND	61.00
Mori Elizabeth Petaluma, CA 94952 SIAPLES 1353	OFC	94.43
PETALUMA CA 94952 INTUIT *QB ONLINE	OFC	472.44
San Diego, CA 92129 Pacific Print Resources	OFC	19.00
Emeryville, CA 94608 PAYPAL	LIT	7,234.54
San Jose, California 95131 Unicorn Group	OFC	21.25
Novato, CA 94949 Studio 7 Photography	LIT	12,593.89
Petaluma, CA 94952	LIT	200.00
<b>TOTAL</b>		<b>21,858.55</b>



**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

Statement covers period		<b>CALIFORNIA FORM 460</b>
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through	10/20/2018	Page <u>9</u> of <u>9</u>
NAME OF FILER		I.D. NUMBER
Teresa Barrett for Mayor 2018		1403943

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                                |
| 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
TOTALS FROM SCHEDULE ATTACHED				\$21,858.55

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

**SUBTOTAL \$ 21,858.55**

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	21,858.55
2. Unitemized payments made this period of under \$100.	\$	3.03
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$	0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	<b>TOTAL \$</b>	<b>21861.58</b>