

**Recipient Committee
Campaign Statement
Cover Page**

Date Stamp RECEIVED JUL 30 2018 CITY CLERK	CALIFORNIA FORM 460
	Page <u>1</u> of <u>12</u> For Official Use Only

Statement covers period from <u>1/1/2018</u> through <u>6/30/2018</u>	Date of election if applicable: (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.

Officeholder, Candidate Controlled Committee
 State Candidate Election Committee
 Recall
(Also Complete Part 5)

General Purpose Committee
 Sponsored
 Small Contributor Committee
 Political Party/Central Committee

Primarily Formed Ballot Measure Committee
 Controlled
 Sponsored
(Also Complete Part 6)

Primarily Formed Candidate/Officeholder Committee
(Also Complete Part 7)

2. Type of Statement:

Preelection Statement
 Semi-annual Statement
 Termination Statement
(Also file a Form 410 Termination)
 Amendment (Explain below)

Quarterly Statement
 Special Odd-Year Report

3. Committee Information

I.D. NUMBER
1367378

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Dave King for City Council 2018

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

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER
Warren Dranit

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
Petaluma CA 94952

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

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

Executed on 27 July 2018
Date

Executed on July 30, 2018
Date

Executed on _____
Date

Executed on _____
Date

By [Signature]
Signature of Treasurer or Assistant Treasurer

By [Signature]
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

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

David C. King

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

Petaluma City Council

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

Petaluma, CA 94952

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
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NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
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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
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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
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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
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NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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Attach continuation sheets if necessary

**Campaign Disclosure Statement
Summary Page**

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>1/1/2018</u>	CALIFORNIA FORM 460
through <u>6/30/2018</u>	
Page <u>3</u> of <u>12</u>	I.D. NUMBER <u>1367378</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Dave King for City Council 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>4990.00</u>	\$ <u>0</u>
2. Loans Received..... <i>Schedule B, Line 3</i>	<u>0</u>	<u>0</u>
3. SUBTOTAL CASH CONTRIBUTIONS..... <i>Add Lines 1 + 2</i>	\$ <u>4990.00</u>	\$ <u>0</u>
4. Nonmonetary Contributions..... <i>Schedule C, Line 3</i>	<u>0</u>	<u>0</u>
5. TOTAL CONTRIBUTIONS RECEIVED..... <i>Add Lines 3 + 4</i>	\$ <u>4990.00</u>	\$ <u>0</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>881.89</u>	\$ <u>0</u>
7. Loans Made..... <i>Schedule H, Line 3</i>	<u>0</u>	<u>0</u>
8. SUBTOTAL CASH PAYMENTS..... <i>Add Lines 6 + 7</i>	\$ <u>881.89</u>	\$ <u>0</u>
9. Accrued Expenses (Unpaid Bills)..... <i>Schedule F, Line 3</i>	<u>0</u>	<u>0</u>
10. Nonmonetary Adjustment..... <i>Schedule C, Line 3</i>	<u>0</u>	<u>0</u>
11. TOTAL EXPENDITURES MADE..... <i>Add Lines 8 + 9 + 10</i>	\$ <u>881.89</u>	\$ <u>0</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
<u> </u> / <u> </u> / <u> </u>	\$ _____
<u> </u> / <u> </u> / <u> </u>	\$ _____

Current Cash Statement

12. Beginning Cash Balance..... <i>Previous Summary Page, Line 16</i>	\$ <u>4992.72</u>
13. Cash Receipts..... <i>Column A, Line 3 above</i>	<u>4990.00</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>881.89</u>
16. ENDING CASH BALANCE..... <i>Add Lines 12 + 13 + 14, then subtract Line 15</i>	\$ <u>9100.83</u>

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.

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

17. LOAN GUARANTEES RECEIVED..... <i>Schedule B, Part 2</i>	\$ _____
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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>1/1/2018</u> through <u>6/30/2018</u>	CALIFORNIA FORM 460
	Page <u>4</u> of <u>12</u>
I.D. NUMBER 1367378	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Dave King for City Council 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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	See attached annex.	<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				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				

SUBTOTAL \$

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.)\$ 4990.00
- Amount received this period – unitemized monetary contributions of less than \$100\$ 0
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.).....**TOTAL \$** 4990.00

*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

**Schedule B – Part 1
Loans Received**

Amounts may be rounded
to whole dollars.

Statement covers period
from 1/1/2018
through 6/30/2018

**CALIFORNIA 460
FORM**

Page 5 of 12

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Dave King for City Council 2018

I.D. NUMBER

1367378

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
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE _____	_____% RATE \$ _____	\$ _____ DATE INCURRED _____	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE _____	_____% RATE \$ _____	\$ _____ DATE INCURRED _____	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE _____	_____% RATE \$ _____	\$ _____ DATE INCURRED _____	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
SUBTOTALS \$								

Schedule B Summary

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

- Loans received this period \$ None
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period \$ None
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (**Subtract** Line 2 from Line 1.) **NET** \$ None
Enter the net here and on the Summary Page, Column A, Line 2.
(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 C
Nonmonetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from <u>1/1/2018</u> through <u>6/30/2018</u>	CALIFORNIA FORM 460
	Page <u>6</u> of <u>12</u>
I.D. NUMBER 1367378	

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Dave King for City Council 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)
		<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					

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$

Schedule C Summary

- Amount received this period – itemized nonmonetary contributions.
(Include all Schedule C subtotals.).....\$ None
- Amount received this period – unitemized nonmonetary contributions of less than \$100\$ None
- 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 \$** None

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

Amounts may be rounded
to whole dollars.

SCHEDULE D

Statement covers period		CALIFORNIA FORM 460
from	1/1/2018	
through	6/30/2018	Page <u>7</u> of <u>12</u>
I.D. NUMBER		1367378

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Dave King for City Council 2018

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)
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
SUBTOTAL \$						

Schedule D Summary

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)..... \$ None
- Unitemized contributions and independent expenditures made this period of under \$100..... \$ None
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL** .. \$ None

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	1/1/2018	
through	6/30/2018	Page <u>8</u> of <u>12</u>
NAME OF FILER		I.D. NUMBER
Dave King for City Council 2018		1367378

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
See attached annex.				

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

SUBTOTAL \$

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$	881.89
2. Unitemized payments made this period of under \$100.....	\$	0
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$	0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$	881.89

Schedule F Accrued Expenses (Unpaid Bills)

Amounts may be rounded
to whole dollars.

Statement covers period from <u>1/1/2018</u> through <u>6/30/2018</u>	CALIFORNIA FORM 460
Page <u>9</u> of <u>12</u>	
I.D. NUMBER 1367378	

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Dave King for City Council 2018

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | 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 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
SUBTOTALS \$		\$	\$	\$	\$

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

Schedule F Summary

- 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 \$** None
- 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 \$** None
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** None
May be a negative number

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		SCHEDULE G	
from	1/1/2018	CALIFORNIA FORM 460	
through	6/30/2018	Page	10 of 12

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Dave King for City Council 2018

I.D. NUMBER

1367378

NAME OF AGENT OR INDEPENDENT CONTRACTOR

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

- | | | |
|---|---|---|
| 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

Attach additional information on appropriately labeled continuation sheets.

TOTAL * \$ None

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

**Schedule H
Loans Made to Others***

Amounts may be rounded
to whole dollars.

Statement covers period
from 1/1/2018
through 6/30/2018

CALIFORNIA FORM 460
Page 11 of 12

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Dave King for City Council 2018

I.D. NUMBER

1367378

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (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 LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE	_____% RATE \$ _____	\$ _____ DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE	_____% RATE \$ _____	\$ _____ DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
		SUBTOTALS		\$ _____	\$ _____	\$ _____	\$ _____	

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

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

Schedule H Summary

- Loans made this period.....\$ None
(Total Column (b) plus unitemized loans of less than \$100.)
- Payments received on loans\$ None
(Total Column (c) plus unitemized payments of less than \$100.)
- Net change this period. (Subtract Line 2 from Line 1.).....NET \$ None
(Enter the net here and on the Summary Page, Column A, Line 7.)
(May be a negative number)

****If Required**

**Schedule I
Miscellaneous Increases to Cash**

Amounts may be rounded
to whole dollars.

SCHEDULE I

Statement covers period from <u>1/1/2018</u> through <u>6/30/2018</u>	CALIFORNIA FORM 460
	Page <u>12</u> of <u>12</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Dave King for City Council 2018

I.D. NUMBER

1367378

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$

Schedule I Summary

- 1. Itemized increases to cash this period. \$ None
- 2. Unitemized increases to cash of under \$100 this period. \$ None
- 3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) \$ None
- 4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) **TOTAL \$** None

Dave King for City Council 2018
 ID No. 1367378
 Schedule A - Annex
 Monetary Contributions Received

Date Received	Amount	Last Name	First Name	City	State	Zip Code	Contrib Code	Occupation	Employer
6/5/2018	\$ 200.00	Imm	Gary	Petaluma	CA	94952	IND	Retired	
6/6/2018	\$ 100.00	Lonkevich	Daniel	Petaluma	CA	94952	IND	Senior Editor	The Deal (a unit of The Street)
6/6/2018	\$ 100.00	Alden	David	Petaluma	CA	94952	IND	Civil engineer	Self employed
6/6/2018	\$ 200.00	Burger	Richard	Petaluma	CA	94952	IND	Attorney	Self employed
6/8/2018	\$ 200.00	King	Thomas	Ft. Meyers	FL	33912	IND	Retired	
6/10/2018	\$ 200.00	Drobnick	Teri	Petaluma	CA	94952	IND	Artist	Self employed
6/12/2018	\$ 100.00	Benedetti	Dante	Petaluma	CA	94952	IND	Executive	Clover Stornetta Farms
6/13/2018	\$ 200.00	Laporte	Jennifer	Petaluma	CA	94952	IND	Not employed	
6/13/2018	\$ 100.00	Bonfiglio	John	Petaluma	CA	94952	IND	Retired	
6/13/2018	\$ 100.00	Bisson	Barry	Petaluma	CA	94952	IND	Sales Engineer	Sumo Logic
6/13/2018	\$ 200.00	Prokop	Edward	Petaluma	CA	94952	IND	Engineer	Self employed
6/13/2018	\$ 25.00	Bihn	Teela	Petaluma	CA	94952	IND	Personal trainer	Self employed
6/13/2018	\$ 200.00	CSW/Stuber-Stroeh	Engineering Groi	Novato	CA	94949	OTH		
6/13/2018	\$ 200.00	Rabbitt	David	Petaluma	CA	94952	IND	Supervisor	County of Sonoma
6/13/2018	\$ 50.00	Tambe	Joseph	Petaluma	CA	94952	IND	Retired	
6/13/2018	\$ 20.00	Flynn	George	Petaluma	CA	94952	IND	Retired	
6/13/2018	\$ 20.00	Flynn	Bonna	Petaluma	CA	94952	IND	Retired	
6/13/2018	\$ 200.00	O'Brien	Anthy	Petaluma	CA	94952	IND	President	Top Speed Data Communication
6/13/2018	\$ 100.00	Dolcini	Elaine	Petaluma	CA	94952	IND	Teacher	Santa Rosa City Schools
6/13/2018	\$ 200.00	Lind	Barbara	Petaluma	CA	94952	IND	Retired	
6/13/2018	\$ 50.00	Adams	Eric	Petaluma	CA	94952	IND	Film Producer	Self employed
6/13/2018	\$ 200.00	Tatum	Katherine	Petaluma	CA	94952	IND	Not employed	
6/13/2018	\$ 100.00	Bradley	Thomas	Petaluma	CA	94952	IND	Retired	
6/13/2018	\$ 200.00	Huntley	David	Petaluma	CA	94952	IND	Business Development	PDF Solutions
6/13/2018	\$ 100.00	Abelli-Amen	Bruce	Petaluma	CA	94952	IND	Geologist	Baseline Environmental
6/13/2018	\$ 50.00	Castles	Janie	Petaluma	CA	94952	IND	Retired	
6/14/2018	\$ 200.00	Goguen	Gerald	Petaluma	CA	94954	IND	Mgr, Computer Audit	IRS
6/14/2018	\$ 25.00	Chlebowski	Sheri	Petaluma	CA	94952	IND	Attorney	Self employed
6/16/2018	\$ 100.00	O'Connor	Barbara	Verona	NJ	07044	IND	Retired	
6/16/2018	\$ 200.00	Skallerup	Nancy	Penngrove	CA	94951	IND	Massage therapy	Self employed
6/18/2018	\$ 200.00	Renesis Development		Petaluma	CA	94952	OTH		
6/20/2018	\$ 200.00	Zagerman	Steve	Petaluma	CA	94952	IND	Software Engineer	FORT Systems, Inc.
6/20/2018	\$ 100.00	Fitzgerald	John	Petaluma	CA	94952	IND	Land surveyor	retired
6/25/2018	\$ 200.00	Costarella Seafood Inc.		San Francisco	CA	94119	OTH		
6/27/2018	\$ 100.00	To Market To Market Inc.		Petaluma	CA	94954	OTH		
6/29/2018	\$ 50.00	Clark	Jenny	Petaluma	CA	94952	IND	Homemaker	
6/29/2018	\$ 200.00	John J and Carol L King Trust		Petaluma	CA	94952	OTH		

Dave King for City Council 2018

ID No. 1367378

Schedule E - Annex

Payments Made

Date	Vendor	Address	Amount	Description of Payment
1/4/2018	CA Secretary of State	Sacramento, CA	\$ 50.00	Annual fee
5/21/2018	USPS		\$ 6.70	Stamps
6/1/2018	Quality Printing	Petaluma, CA 94952	\$ 155.70	Contribution envelopes
6/6/2018	Sierra Office Supply	Sacramento, CA 95827	\$ 78.65	Office supplies
6/7/2018	Party City	Santa Rosa, CA 95407	\$ 52.94	Kick off event
6/8/2018	Grocery Outlet	Petaluma, CA 94952	\$ 267.02	Kick off event
6/11/2018	Vista Print	Online	\$ 62.71	Business cards
6/12/2018	Costco	Rohnert Park, CA 94928	\$ 112.09	Kick off event
6/13/2018	Petaluma Market	Petaluma, CA 94952	\$ 12.08	Kick off event
6/25/2018	Wix.com	Online	\$ 84.00	Campaign website