

**Recipient Committee
Campaign Statement
Cover Page**

Date Stamp RECEIVED DEC 27 2018 CITY CLERK	CALIFORNIA FORM 460
	Page 1 of 7
	For Official Use Only

Statement covers period from <u>11/02/2018</u> through <u>12/27/2018</u>	Date of Election If applicable _____ (Month, Day, Year)
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1. Type of Recipient Committee

- | | |
|--|---|
| <input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee
<input type="checkbox"/> State Candidate Election Committee
<input type="checkbox"/> Recall
<input type="checkbox"/> General Purpose Committee
<input type="checkbox"/> Sponsored
<input type="checkbox"/> Small Contributor Committee
<input type="checkbox"/> Political Party/Central Committee | <input type="checkbox"/> Primarily Formed Ballot Measure Committee
<input type="checkbox"/> Controlled
<input type="checkbox"/> Sponsored
<input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee |
|--|---|

2. Type of Statement

- | | |
|--|---|
| <input type="checkbox"/> Pre-election Statement
<input type="checkbox"/> Semi-Annual Statement
<input checked="" type="checkbox"/> Termination Statement
<input type="checkbox"/> Amendment | <input type="checkbox"/> Quarterly Statement
<input type="checkbox"/> Special Odd-Year Statement
<input type="checkbox"/> Supplemental Pre-election Statement - Attach Form 495 |
|--|---|

3. Committee Information

I.D. Number 1406602

COMMITTEE NAME
Pocekay for Council 2018

STREET ADDRESS (NO PO BOX)

CITY STATE ZIP CODE AREA CODE/PHONE
Petaluma CA 94952

MAILING ADDRESS (IF DIFFERENT)

CITY STATE ZIP CODE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER
Dennis Pocekay

STREET ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
Petaluma CA 94952

NAME OF ASSISTANT TREASURER, IF ANY
Mark Reed

STREET ADDRESS

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 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 12/27/2018

By Dennis Pocekay
SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on 12/27/2018

By Dennis Pocekay
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

Executed on _____

By _____
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on _____

By _____
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

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

Statement covers period
from 11/02/2018
through 12/27/2018

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
 Dennis E Pocekay

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
 City Council Member City of Petaluma

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
NAME OF TREASURER	CONTROLLED COMMITTEE ? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE 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 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 OR 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

**Campaign Disclosure Statement
Summary Page**

SUMMARY PAGE

Statement covers period		CALIFORNIA FORM 460
from	11/02/2018	
through		Page 3 of 7
		I.D. NUMBER 1406602

NAME OF FILER Pocekay for Council 2018

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
Contributions Received		
1. Monetary Contributions Schedule A, Line 3	\$ 980.59	\$ 13,851.60
2. Loans Received Schedule B, Line 3	-1,000.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1+2	\$ -19.41	\$ 13,851.60
4. Nonmonetary Contributions Schedule C, Line 3	0.00	1,869.59
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ -19.41	\$ 15,721.19

**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	\$ _____	\$ _____

	Column A	Column B
Expenditures Made		
6. Payments Made Schedule E, Line 4	\$ 474.00	\$ 13,851.60
7. Loans Made Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 474.00	\$ 13,851.60
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	0.00	0.00
10. Nonmonetary Adjustment Schedule C, Line 3	0.00	1,869.59
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 474.00	\$ 15,721.19

**Expenditure Limit Summary
for State Candidates**

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

_____	\$ _____
_____	\$ _____

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

Current Cash Statement	
12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 493.41
13. Cash Receipts Column A, Line 3 above	-19.41
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00
15. Cash Payments Column A, Line 8 above	474.00
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 0.00
17. LOAN GUARANTEES RECEIVED. Schedule B, Part 2	\$ 0.00

Cash Equivalents and Outstanding Debts	
18. Cash Equivalents	\$ 0.00
19. Outstanding Debts: Add Lines 2 + Line 9 in Column B above	\$ 0.00

**Schedule A
Monetary Contributions Received**

Statement covers period from 11/02/2018 through 12/27/2018	CALIFORNIA FORM 460
	Page 4 of 7

NAME OF FILER Pocekey for Council 2018

I.D. NUMBER
1406602

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/12/2018	Dennis E. Pocekey Petaluma, CA 94952	IND	N.A. Retired	860.00 Forgiven Loan	1,052.59	1,052 (G18)
12/12/2018	Dennis E. Pocekey Petaluma, CA 94952	IND	N.A. Retired	20.59 Forgiven Loan	1,052.59	1,052 (G18)
11/05/2018	Service Employees International Union Local 1021 PAC SCC Sacramento, CA 95814	SCC	ID No. 1296948	100.00	100.00	100 (G18)

SUBTOTAL \$ 980.59

Schedule A Summary

1. Amount received this period - itemized contributions (Includes all Schedule A subtotals)	\$	980.59
2. Amount received this period - unitemized	\$	0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page. Column A Line 1)	TOTAL \$	980.59

** Contributor Codes
IND - Individual
COM - Recipient Committee (other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

**Schedule B - Part 1
Loans Received**

Statement covers period		CALIFORNIA FORM 460
from	11/02/2018	
through	12/27/2018	Page 5 of 7

NAME OF FILER Pocekay for Council 2018

I.D. NUMBER
1406602

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER	IF INDIVIDUAL, OCCUPATION & EMPLOYER IF COMMITTEE, ID NUMBER	(a)	(b)	(c)	(d)	(e)	(f)	(g)
		OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT RECEIVED THIS PERIOD	AMOUNT PAID OR FORGIVEN THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE
Dennis E. Pocekay Petaluma, CA 94952 Contributor Code: IND	N.A. Retired	140.00		<input checked="" type="checkbox"/> PAID 119.41 <input checked="" type="checkbox"/> FORGIVEN 20.59	0.00	0.00	140.00	CALENDAR YEAR 1,052 PER ELECTION ** 1,052 (G18)
Dennis E. Pocekay Petaluma, CA 94952 Contributor Code: IND	N.A. Retired	860.00		<input type="checkbox"/> PAID <input checked="" type="checkbox"/> FORGIVEN 860.00	0.00	0.00	860.00	CALENDAR YEAR 1,052 PER ELECTION ** 1,052 (G18)

SUBTOTALS \$	(b) 0.00	(c) 1000.00	(d) 0.00	(e) 0.00	
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Schedule B Summary

- Loans received this period
(Total Column (b) plus unitemized loans of less than \$100.) \$ 0.00
- Loans paid or forgiven this period \$ 1,000.00
(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 \$** (1,000.00)
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
PTY - Political Party
SCC - Small Contributor Committee

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

SCHEDULE D

Statement covers period		CALIFORNIA FORM 460
from	11/02/2018	
through	12/27/2018	Page 6 of 7

NAME OF FILER Pocekay for Council 2018

I.D. NUMBER
1406602

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)
12/12/2018	Petaluma Tomorrow PAC	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		200.00	200.00	
		<input checked="" type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE				

SUBTOTAL \$ 200.00

Schedule D Summary

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)	\$ 200.00
2. Unitemized contributions and independent expenditures made this period of under \$100.	\$ 0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) . TOTAL \$	200.00

**Schedule E
Payments Made**

Statement covers period		CALIFORNIA FORM 460
from	11/02/2018	
through	12/27/2018	Page 7 of 7
NAME OF FILER Pocekay for Council 2018		I.D. NUMBER 1406602

CODES: If one of the following 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 production costs |
| FIL candidate filing / ballot fees | PHO phone banks | TRC candidate travel, lodging and meals |
| FND fundraising expenses | POL polling and survey research | TRS staff/spouse travel, lodging and meals |
| IND independent expenditures supporting/opposing others | 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	CODE or	DESCRIPTION OF PAYMENT	AMOUNT PAID
Peggy Bimbi Santa Rosa, CA 95404	PRO		100.00
Maguires Irish Pub Petaluma, CA 94952	CMP		174.00
Petaluma Tomorrow PAC Petaluma, CA 94952 ID No: 1245542	CTB		200.00
SUBTOTAL \$			474.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 474.00
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 Line 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$ 474.00