D i i 4 O i4t-	_						COVER PAGE
Recipient Committe Campaign Statemer Cover Page		Type or print in ink.			RECEIVED CALIFORN FORM		
(Government Code Sections 84	200-84216.5)	St from	atement covers period January 1, 2014	Date of election if applicable: (Month, Day, Year)	JUL 31 20 <u>City</u> Cle		ge 1 of 7 For Official Use Only
SEE INSTRUCTIONS ON REVERSI	Ē	throug	June 30, 2014	November 4, 2014		1212	
1. Type of Recipient Co Officeholder, Candidate State Candidate Elec Recall (Also Complete Part 5) General Purpose Comm Sponsored Small Contributor Co	Controlled Committee tilon Committee littee mmittee	Primarily I Committee Control Spons (Also Compla	Formed Ballot Measure e olled lored lo Part 6) Formed Candidate/ ier Committee	2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 To	ermination)	Supplemer	statement d-Year Report stal Preelection - Attach Form 495
O Political Party/Centra 3. Committee Informati		1.D. NUMBE 124554	R	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTÉE) Petaluma Tomorrow			NAME OF TREASURER Gregory S. Reisinger MAILING ADDRESS				
STREET ADDRESS (NO P.O. B	OX)			сіту Petaluma	STATE CA	ZIP CODE 94952	AREA CODE/PHONE
CITY Petaluma MAILING ADDRESS (IF DIFFE)	CA 9	71P CODE 04952 P.O. BOX	AREA CODE/PHONE	NAME OF ASSISTANT TREASUI	RER, IF ANY		
CITY	STATE	ZIP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADE	DRESS			OPTIONAL: FAX / E-MAIL ADDR	RESS		
under penalty of perjury under Executed on	Ilgence in preparing and rev the laws of the State of Ca Boundaries	rlewing this stat Ilifornia that the	By Signature of Co	Signature of Fade urer or Assistant	roasurer		rue and complete. I certify
Executed on	Date	_	By	Signature of Controlling Officeholder, Candidate, S			
	Date		_	Signature of Controlling Officeholder, Candidate, S	State Meesure Proponent		EPPC Form 480 (January/05)

Campaign Disclosure Statement Summary Page

Type or print in lnk. Amounts may be rounded to whole dollars.

SUMMARYPAGE Statement covers period **CALIFORNIA FORM** January 1, 2014 from _ June 30, 2014 through.

SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Petaluma Tomorrow 1245542

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
1. Monetary Contributions Schedule A, Line 3	\$	1375.00	\$	1375.00	General Elections 1/1 through 6/30 7/1 to Date
2. Loans Received	\$	1375.00	\$	1375.00	20. Contributions Received S S
4. Nonmonetary Contributions	s	1375.00	\$	1375.00	21. Expenditures Made S S
Expenditures Made		1530 61		1430.61	Expenditure Limit Summary for State
i. Payments Made		0 1530.61	s s	0	Candidates 22. Cumulative Expenditures Made* (if Subject to Voluntary Expenditure Limit)
Accrued Expenses (Unpaid Bills)		0	J	0	Date of Election Total to Date (mm/dd/yy)
11. TOTAL EXPENDITURES MADE		1530.61	s	1430.61	\$
Current Cash Statement		3997.09			\$
2. Beginning Cash Balance	S	1375.00	am	calculate Column B, add ounts in Column A to the responding amounts	*Amounts in this section may be different from amounts
4. Miscellaneous Increases to Cash		1530.61	fror rep	n Column B of your last ort. Some amounts in umn A may be negative	reported in Column B.
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 If this is a termination statement, Line 16 must be zero.	\$	3841.48	sut per	res that should be otracted from previous iod amounts. If this is	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	s	0	for can	first report being filed this calendar year, only ry over the amounts	
Cash Equivalents and Outstanding Debts 18. Cash Equivalents	s	0	fror any	m Lines 2, 7, and 9 (if /).	
19. Outstanding Debts Add Line 2 + Line 9 in Column B above		_			FPPC Form 460 (January/0 FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-377

Schedule A **Monetary Contributions Received**

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period **CALIFORNIA** January 1, 2014 **FORM** June 30, 2014 through I.D. NUMBER 1245542

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Petaluma Tomorrow

Pull Name, Street Address and Zip Code of Contributor Code C	<u> </u>	4.0					
Date PULL NAME, SIRELE ADDRESS ADD				SUBTOTAL\$	525		
DATE RECEIVED PULL NAME, SIREE LADDRESS AND ZIF COLOR CONTRIBUTOR CODE ** RECEIVED 1/31/2014 Larry Modell Petaluma, CA 94954 Teresa Barrett Petaluma, CA Petaluma, CA 3/17/14 William R. Phillips Petaluma, CA 94952 3/17/14 Maria do Ceu Petaluma, CA 94952 Maria do Ceu Petaluma, CA 94952 Maria do Ceu Petaluma, CA 94952 DATE (ODE ** CONTRIBUTOR CONTRIBUTOR CONTRIBUTOR (CONTRIBUTOR (CONTRIBUTOR (CONTRIBUTOR (PETALEMEN))) CONTRIBUTOR (CONTRIBUTOR (CONTRIBUTOR (PETALEMEN))) CALENDAR YEAR (JAN. 1 - DEC. 31) COOM CONTRIBUTOR (PETALEMEN) CALENDAR YEAR (JAN. 1 - DEC. 31) COOM CONTRIBUTOR (PETALEMEN) CALENDAR YEAR (JAN. 1 - DEC. 31) COOM CONTRIBUTOR (PETALEMEN) CALENDAR YEAR (JAN. 1 - DEC. 31) COOM CONTRIBUTOR (PETALEMEN) CALENDAR YEAR (JAN. 1 - DEC. 31) COOM CONTRIBUTOR (PETALEMEN) CALENDAR YEAR (JAN. 1 - DEC. 31) COOM CONTRIBUTOR (JAN. 1 - DEC. 31) COOM COOM CONTRIBUTOR (JAN. 1 - DEC. 31) COOM COOM CONTRIBUTOR (JAN. 1 - DEC. 31) COOM COOM COOM COOM COOM COOM COOM COOM	3/17/14		□COM □OTH □PTY	Auditor,	125.00	125.00	
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP GOTO CONTRIBUTOR CODE * CONTRIBUTOR CODE * COLUMNITIES, ALSO ENTER ILD, NUMBER) 1/31/2014 Larry Modell Petaluma, CA 94954 Teresa Barrett Petaluma, CA Petaluma, CA William R. Phillips Petaluma, CA 94952 FULL NAME, STREET ADDRESS AND ZIP CODE CONTRIBUTOR CODE * COCUPATION AND EMPLOYER (FELP-EMPLOYED, ENTER NAME OF BUSINESS) OCCUPATION AND EMPLOYER RECEIVED THIS PERIOD COLUMNITIES, ALSO ENTER ILD, NUMBER) COLUMNITIES, ALSO ENTER ILD, NUMBER, ALSO ENTER ILD, NUMBER) COLUMNITIES, ALSO ENTER ILD, NUMBER, ALSO ENTER	3/17/14		□COM □OTH □PTY □SCC		100.00	100.00	
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE * OCCUPATION AND EMPLOYER RECEIVED THIS PERIOD I/S1/2014 Larry Modell Petaluma, CA 94954 Teresa Barrett Petaluma, CA Petal	3/17/14		□COM □OTH □PTY	Retired	100.00	100.00	
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP GODE OF CONTRIBUTOR CODE * CONTRIBUTOR CODE * COCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) CALENDAR YEAR (JAN. 1 - DEC. 31) (IF REQUIRED)	1/31/14		□COM □OTH □PTY	Retired	100.00	100.00	
DATE FULL NAME, STREET ADDRESS AND ZIP GODE OF CONTRIBUTOR CONTRIBUTOR OCCUPATION AND EMPLOYER RECEIVED THIS CALENDAR YEAR TO DATE CODE * (IF SELF-EMPLOYED, ENTERNAME PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED)	1/31/2014		□COM □OTH □PTY		100.00	100.00	
			CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME	RECEIVED THIS	CALENDAR YEAR	TO DATE

Schedule A Summary

- 1. Amount received this period itemized monetary contributions. 725.00 (Include all Schedule A subtotals.) 650.00 2. Amount received this period – unitemized monetary contributions of less than \$100\$
- 3. Total monetary contributions received this period. 1375.00

*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 (January/05)

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded to whole dollars,

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

_		from January	January 1, 2014		FORM 46U		
				through June	30, 2014	Page _	4 of 7
NAME OF FILER						I.D. NUN	MBER
Petaluma To	omorrow					12455	542
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)
4/21/14	Stan Gold Petaluma, CA 94952	DIND COM OTH PTY	Retired	100.00	100	.00	
		□scc					
E 10 14 A	Gregory S. Reisinger	☑COM	Analyst	100.00	100	200	
5/8/14	Petaluma, CA 94952	OTH PTY SCC	California Public Utilities Commission	100.00	100.00		
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					
			SUBTOTAL	\$ 200.00			

*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 D Summary of Expenditures Supporting/Opposing Other

Type or print in ink.
Amounts may be rounded

SCHEDULE D Statement covers period CALIFORNIA 160

	es, Measures and Committees	to whole do	ollars.	from January 1, 2014		FORM C C
	IONS ON REVERSE			through June 30), 2014 Pag	e5 of7
NAME OF FILER	(I.D. i	NUMBER
Petaluma	Tomorrow				124	5542
DATE	DATE NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE		DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DA CALENDAR YEAR (JAN. 1 - DEC. 31)	
3/26/14 Deb Fudge for Supervisor #1361989		Monetary Contribution Nonmonetary Contribution Independent		200.00	200.00	0
	☑ Support ☐ Oppose	Expenditure				
Ween transfer or a	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure				
	Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure				
			SUBTOTAL \$	200.00		
					1	
	D Summary contributions and independent expenditures made	this paried (Include	all Schodulo D cubtotale \			200.00
	,		•			_
2. Unitemize	ed contributions and independent expenditures ma	de this period of unc	ler \$100			
3. Total cont	tributions 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

Type or print in ink. Amounts may be rounded

	SCHEDULE E
Statement covers period	CALIFORNIA 1 CO
from January 1, 2014	FORM 400
through June 30, 2014	Page6 of7
	I,D, NUMBER
	1945549

to whole dollars. SEE INSTRUCTIONS ON REVERSE NAME OF FILER Petaluma Tomorrow CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. campaign paraphemalla/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 t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks candidate travel, lodging, and meals FND fundralsing events POL. polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* transfer between committees of the same candidate/sponsor ND POS postage, delivery and messenger services LEG legal defense PRO professional services (legal, accounting) VOT voter realstration campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail) LIT NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) AMOUNT PAID Christopher Fisher Payment for producing Council Watch Reports, **MBR** 500.00 February-June, 2014 Petaluma, CA 94952 Deb Fudge for Supervisor Contribution in support of Deb Fudge, Candidate for ND 200.00 Sonoma County Supervisor Santa Rosa, CA 95403 Gregory S. Reisinger Reimburse postage for mailing to membership POS 113.60 Petaluma, CA 94952 Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL\$ 813.60 Schedule E Summary 1313.60 1. Itemized payments made this period. (Include all Schedule E subtotals.).....\$ 217.01 2. Unitemized payments made this period of under \$10000 1530.61

Schedule E (Continuation Sheet)

Type or print in ink. Amounts may be rounded

	SCHEDULE E (CONT.)
Statement covers period	CALIFORNIA ACO
from January 1, 2014	FORM 400
through June 30, 2014	Page 7 of 7
	I.D. NUMBER
	1245542

to whole dollars. **Payments Made** SEE INSTRUCTIONS ON REVERSE NAME OF FILER Petaluma Tomorrow 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 CVP campaign paraphemalia/misc. campaign consultants MTG meetings and appearances returned contributions CNS contribution (explain nonmonetary)* OFC office expenses campaign workers' salaries CTB SAL PET petition circulating t.v. or cable airtlme and production costs CVC civic donations candidate travel, lodging, and meals FIL candidate filing/ballot fees PHO phone banks staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research Independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor M professional services (legal, accounting) voter registration LEG legal defense PRO campaign literature and mailings print ads WEB information technology costs (internet, e-mail) PRI NAME AND ADDRESS OF PAYEE OR AMOUNT PAID CODE DESCRIPTION OF PAYMENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Memorial Fund in honor of John Kramer KRCB Memorial Fund CVC 100,00 Rohnert Park, CA 94928 NGP VAN Voter database 400.00 1101 15th St. NW Suite 500 Washington, DC 20005

SUBTOTAL \$

500.00

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