Recipient Committee
Campaign Statement
Cover Page
(Government Code Sections 84200-84216.5)

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 3)
   □ General Purpose Committee
   □ Sponsored
   ○ Small Contributor Committee
   ○ Political Party/Central Committee
   □ Primarily Formed Ballot Measure Committee
   ○ Controlled
   ○ Sponsored
   (Also Complete Part 3)
   □ Primarily Formed Candidate/Officerholder Committee
   (Also Complete Part 7)

2. Type of Statement:
   □ Preliminary Statement
   □ Semi-annual Statement
   □ Termination Statement
   (Also file a Form 410 Termination)
   □ Amendment (Explain below)
   Correct contribution and expense amounts on pages 2, 3, 6 of
   statement submitted for period shown

3. Committee Information
I.D. NUMBER
1245542
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Petaluma Tomorrow

STREET ADDRESS (NO P.O. BOX)

CITY         STATE   ZIP CODE
Petaluma      CA       94952
Mailing Address (If different) No. And Street Or P.O. Box

CITY         STATE   ZIP CODE

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 2/1/2014

By
Signature of Treasurer

Executed on

By
Signature of Controlling Officerholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on

By
Signature of Controlling Officerholder, Candidate, State Measure Proponent

Executed on

By
Signature of Controlling Officerholder, Candidate, State Measure Proponent

CALIFORNIA FORM 460
Page of 7
For Official Use Only

Date Stamp
RECEIVED
FEB 02 2015

CITY CLERK

Treasurer(s)
NAME OF TREASURER
Gregory S. Reisinger
MAILING ADDRESS

CITY         STATE   ZIP CODE
Petaluma      CA       94952
NAME OF ASSISTANT TREASURER, IF ANY
MAILING ADDRESS

CITY         STATE   ZIP CODE

Optional: FAX / E-MAIL ADDRESS

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 1-800/ASK-FPPC (800/275-3772)
State of California
## Contributions Received

1. Monetary Contributions ........................................... Schedule A, Line 3 $1500.00 $1500.00
2. Loans Received ........................................... Schedule B, Line 3 0 0
3. SUBTOTAL CASH CONTRIBUTIONS ................................ Add Lines 1 + 2 $1500.00 $1500.00
4. Nonmonetary Contributions ................................... Schedule C, Line 3 0 0

5. TOTAL CONTRIBUTIONS RECEIVED ................................ Add Lines 3 + 4 $1500.00 $1500.00

## Expenditures Made

6. Payments Made ........................................... Schedule E, Line 4 $1430.61 $1430.61
7. Loans Made ........................................... Schedule H, Line 3 0 0
8. SUBTOTAL CASH PAYMENTS ................................ Add Lines 6 + 7 $1430.61 $1430.61
9. Accrued Expenses (Unpaid Bills) ......................... Schedule F, Line 3 0 0
10. Nonmonetary Adjustment ................................ Schedule C, Line 3 0 0

11. TOTAL EXPENDITURES MADE ................................ Add Lines 8 + 9 + 10 $1430.61 $1430.61

## Current Cash Statement

12. Beginning Cash Balance ...................................... Previous Summary Page, Line 16 $3997.09
13. Cash Receipts ........................................... Column A, Line 3 above 1500.00 0
14. Miscellaneous Increases to Cash ......................... Schedule I, Line 4 0
15. Cash Payments ........................................... Column A, Line 8 above 1430.61

16. ENDING CASH BALANCE ................................ Add Lines 12 + 13 + 14, then subtract Line 16 $4116.48

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

17. LOAN GUARANTEES RECEIVED ......................... Schedule B, Part 2 $0

## Cash Equivalents and Outstanding Debts

18. Cash Equivalents ........................................... See instructions on reverse $0
19. Outstanding Debts ........................................... Add Line 2 + Line 9 in Column B above $0

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).

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
### Schedule A
Monetary Contributions Received

**NAME OF FILER**
Petaluma Tomorrow

**DATE RECEIVED** | **FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR** | **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)**
---|---|---|---|---|---|---
1/31/2014 | Larry Modell, Petaluma, CA 94954 | ✓IND | CoPart, Inc Software Designer | 100 | 100 |
1/31/2014 | Teresa Barrett, Petaluma, CA 94952 | ✓IND | Retired | 100 | 100 |
3/7/2014 | William R. Phillips, Petaluma, CA 94952 | ✓IND | Retired | 100 | 100 |
3/17/2014 | Maria do Ceu, Petaluma, CA 94952 | ✓IND | Owner Outwest Garage | 100 | 100 |
3/17/14 | Thomas Vasgrid, Petaluma, CA 94954 | ✓IND | County of Marin Auditor, Finance Department | 125 | 125 |

**Schedule A Summary**

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ................................................................. $ 725
2. Amount received this period – unitemized monetary contributions of less than $100 ................................................................. $ 775
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .................. TOTAL $ 1500

---

*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)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Schedule E Payments Made

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.

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

NAME AND ADDRESS OF PAYEE
(If committee, also enter I.D. number)

<table>
<thead>
<tr>
<th>Name</th>
<th>Code</th>
<th>Description</th>
<th>Amount Paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Christopher Fisher</td>
<td>MBR</td>
<td>Payment for producing Council Watch Reports</td>
<td>400.00</td>
</tr>
<tr>
<td>Petaluma, CA 94952</td>
<td></td>
<td>February-May, 2014</td>
<td></td>
</tr>
<tr>
<td>Deb Fudge for Supervisor</td>
<td>ND</td>
<td>Contribution in support of Deb Fudge, Candidate for Sonoma County Supervisor</td>
<td>200.00</td>
</tr>
<tr>
<td>Santa Rosa, CA 95403</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gregory S. Relsinger</td>
<td>POS</td>
<td>Reimburse postage for mailing to membership</td>
<td>113.60</td>
</tr>
<tr>
<td>Petaluma, CA 94952</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

SUBTOTAL $713.60

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ................................................................. $ 1213.60
2. Unitemized payments made this period of under $100 ........................................................................................................ $ 217.01
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ........................................ $ .00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ........... TOTAL $1430.61

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Recipient Committee
Campaign Statement
Cover Page
(Government Code Sections 84200-84216.5)

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.
   - [ ] Officerholder, Candidate Controlled Committee
   - [ ] State Candidate Election Committee
   - [ ] Recall
     (Also Complete Part 9)
   - [ ] General Purpose Committee
     - [ ] Sponsored
     - [ ] Small Contributor Committee
     - [ ] Political Party/Central Committee
   - [ ] Primarily Formed Candidate/Officeholder Committee
     (Also Complete Part 1)

2. Type of Statement:
   - [ ] Preliminary Statement
   - [ ] Semi-annual Statement
   - [ ] Termination Statement
     (Also file a Form 410 Termination)
   - [ ] Amendment (Explain below)
   - [ ] Correct beginning and ending balance on page 2 of report

3. Committee Information
   I.D. NUMBER 1245541

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

   STREET ADDRESS (NO P.O. BOX)
   Petaluma
   CA 94952

   MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
   Petaluma
   CA 94952

   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 2/1/2015
   By Gregory S. Reisinger
   Signature of Treasurer or Assistant Treasurer

   Executed on Date
   By Signature of Candidate, State Measure Proponent or Responsible Officer of Sponsor

   Executed on Date
   By Signature of Controlling Officerholder, Candidate, State Measure Proponent

   Executed on Date
   By Signature of Controlling Officerholder, Candidate, State Measure Proponent

   FPPC Form 460 (January/05)
   FPPC Toll-Free Helpline: 800/ASK-FPPC (800/275-3772)
   State of California
**Contributions Received**

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monetary Contributions</td>
<td>$1435</td>
<td>$2935</td>
</tr>
<tr>
<td>Loans Received</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>SUBTOTAL CASH CONTRIBUTIONS</td>
<td>$1435</td>
<td>$2935</td>
</tr>
<tr>
<td>Nonmonetary Contributions</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>TOTAL CONTRIBUTIONS RECEIVED</td>
<td>$1435</td>
<td>$2935</td>
</tr>
</tbody>
</table>

**Expenditures Made**

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payments Made</td>
<td>$1915</td>
<td>$3345.61</td>
</tr>
<tr>
<td>Loans Made</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>SUBTOTAL CASH PAYMENTS</td>
<td>$1915</td>
<td>$3345.61</td>
</tr>
<tr>
<td>Accrued Expenses (Unpaid Bills)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Nonmonetary Adjustment</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>TOTAL EXPENDITURES MADE</td>
<td>$1915</td>
<td>$3345.61</td>
</tr>
</tbody>
</table>

**Current Cash Statement**

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
</tr>
</thead>
<tbody>
<tr>
<td>BEGINNING CASH BALANCE</td>
<td>$4116.48</td>
</tr>
<tr>
<td>CASH RECEIPTS</td>
<td>$1435.00</td>
</tr>
<tr>
<td>MISCELLANEOUS INCREASES TO CASH</td>
<td>0</td>
</tr>
<tr>
<td>CASH PAYMENTS</td>
<td>$1915.00</td>
</tr>
<tr>
<td>ENDING CASH BALANCE</td>
<td>$3636.48</td>
</tr>
</tbody>
</table>

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

**Cash Equivalents and Outstanding Debts**

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
</tr>
</thead>
<tbody>
<tr>
<td>CASH EQUIVALENTS</td>
<td>0</td>
</tr>
<tr>
<td>OUTSTANDING DEBTS</td>
<td>0</td>
</tr>
</tbody>
</table>

---

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

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contributions Received</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Expenditures Made</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Expenditure Limit Summary for State Candidates**

<table>
<thead>
<tr>
<th>Date of Election (mm/dd/yy)</th>
<th>Total to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
</tr>
</tbody>
</table>

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

---

FPPC Form 460 (January/05)

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