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 6)
   - □ 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:**
   - □ Preliminary Statement
   - □ Semi-annual Statement
   - □ Termination Statement
   - (Also file a Form 410 Termination)
   - □ Amendment (Explain below)

3. **Committee Information**
   - **COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE):**
     Petaluma Firefighters Local 1415
   - **STREET ADDRESS (NO P.O. BOX):**
     Petaluma Firefighters Local 1415, 1415 East Washington Street
   - **CITY**
     Petaluma
   - **STATE**
     CA
   - **ZIP CODE**
     94974
   - **MAILING ADDRESS (DIFFERENT) NO. AND STREET OR P.O. BOX:**
     Petaluma Firefighters Local 1415, 1415 East Washington Street
   - **CITY**
     Petaluma
   - **STATE**
     CA
   - **ZIP CODE**
     94974
   - **NAME OF TREASURER:**
     Matthew A Martin
   - **MAILING ADDRESS:**
     Petaluma Firefighters Local 1415, 1415 East Washington Street
   - **CITY**
     Petaluma
   - **STATE**
     CA
   - **ZIP CODE**
     94974
   - **NAME OF ASSISTANT TREASURER, IF ANY:**
     Matthew A Martin
   - **MAILING ADDRESS:**
     Petaluma Firefighters Local 1415, 1415 East Washington Street
   - **CITY**
     Petaluma
   - **STATE**
     CA
   - **ZIP CODE**
     94974

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:** 2/18/16
   **Date:**

   **By:**
   **Signature of Treasurer or Assistant Treasurer:**

   **Executed on:**
   **Date:**

   **By:**
   **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:**

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
Recipie... 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 5)
   □ General Purpose Committee
     ○ Sponsored
     □ Small Contributor Committee
     ○ Political Party/Central Committee
   □ Ballot Measure Committee
     ○ Primarily Formed
     ○ Controlled
     ○ Sponsored
     (Also Complete Part 5)
   □ Primarily Formed Candidate/Officeholder Committees
     (Also Complete Part 7)

2. Type of Statement:
   □ Preliminary Statement
   □ Semi-annual Statement
   □ Termination Statement
   □ Amendment (Explain below)
   □ Quarterly Statement
   □ Special Odd-Year Report
   □ Supplemental Preliminary Statement - Attach Form 495

3. Committee Information
   ID NUMBER
   123261
   COMMITTEE NAME (OR CANDIDATE'S NAME IF NOT COMMITTED)
   Petaluma Firefighters Association Political Action Committee (PAC)

   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
   94954

   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 7/28/15
   By ________________________________
   Signature of Treasurer or Assistant 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

FPPC Form 460 (June'91)
FPPC Toll-Free Helpline: 866/ASK-FPPC
State of California
Petaluma Firefighters Association Political Action Committee (PAC)

### Contributions Received

<table>
<thead>
<tr>
<th>Contribution Type</th>
<th>Schedule</th>
<th>Column A (Total This Period)</th>
<th>Column B (Calendar Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monetary Contributions</td>
<td>Schedule A, Line 3</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Loans Received</td>
<td>Schedule B, Line 3</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>SUBTOTAL CASH CONTRIBUTIONS</td>
<td>Add Lines 1 + 2</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Nonmonetary Contributions</td>
<td>Schedule C, Line 3</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>TOTAL CONTRIBUTIONS RECEIVED</td>
<td>Add Lines 3 + 4</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

### Expenditures Made

<table>
<thead>
<tr>
<th>Expenditure Type</th>
<th>Schedule</th>
<th>Column</th>
<th>Column</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payments Made</td>
<td>Schedule E, Line 4</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Loans Made</td>
<td>Schedule H, Line 3</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>SUBTOTAL CASH PAYMENTS</td>
<td>Add Lines 6 + 7</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Accrued Expenses (Unpaid Bills)</td>
<td>Schedule F, Line 3</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Nonmonetary Adjustment</td>
<td>Schedule C, Line 3</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>TOTAL EXPENDITURES MADE</td>
<td>Add Lines 8 + 9 + 10</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

### Current Cash Statement

12. Beginning Cash Balance = Previous Summary Page, Line 16 $6485.43
13. Cash Receipts = Column A, Line 3 above
14. Miscellaneous Increases to Cash = Schedule I, Line 4
15. Cash Payments = Column A, Line 8 above
16. ENDING CASH BALANCE = Add Lines 12 + 13 + 14, then subtract Line 15 $6485.43

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

### Cash Equivalents and Outstanding Debts

18. Cash Equivalents = See instructions on reverse $0.00
19. Outstanding Debts = Add Line 2 + Line 9 in Column B above $0.00

### 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 $0.00 $0.00
21. Expenditures Made $0.00 $0.00

### 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

- $0.00
- $0.00
- $0.00
- $0.00
- $0.00
- $0.00
- $0.00
- $0.00

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.