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<u>CITY CLERK</u>

Provisiont Committee				COVER PAGE
Recipient Committee Campaign Statement Cover Page			Date Stamp	CALIFORNIA 460
	Statement covers period from7-1-2019	Date of election if applicable: (Month, Day, Year)		Page of For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through12-31-2019	11/3/2020		
1. Type of Recipient Committee: All committees - Con	nplete Parts 1, 2, 3, and 4.	2. Type of Statement:		
O State Candidate Election Committee     O Recall     (Also Complete Part 5)     General Purpose Committee     O Sponsored     O Small Contributor Committee     O Small Contributor Committee	trimanily Formed Ballot Measure committee ) Controlled Jo Sponsored two Complete Part 6) trimanily Formed Candidate/ ffficeholder Committee two Complete Part 7)	Preelection Statement     Semi-annual Statement     Termination Statement     (Also file a Form 410 Te     Amendment (Explain be	t 🔲 Spe	arterly Statement scial Odd-Year Report
	NUMBER 417373	Treasurer(s)	en lagen de gelegen oan gelegen de de gelege In de gelegen	
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)	41/3/3	NAME OF TREASURER		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Regan for Petaluma City Council 2020	1	Anthony Borba	denn Boons i synys anis tronanguppana ar marai juga	
STREET ADDRESS (NO P.O. BOX)		citry Petaluma	STATE ZIP C CA 949	
CITY STATE ZIP COL Petaluma CA 94954		NAME OF ASSISTANT TREASURE	R, IF ANY	
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX	арын алында алан үзүнү алын калан	MAILING ADDRESS	₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩	، ۱۹۹۵ - ۲۰۰۵ - ۲۰۰۵ - ۲۰۰۵ - ۲۰۰۵ - ۲۰۰۵ - ۲۰۰۵ - ۲۰۰۵ - ۲۰۰۵ - ۲۰۰۵ - ۲۰۰۵ - ۲۰۰۵ - ۲۰۰۵ - ۲۰۰۵ - ۲۰۰۵ - ۲۰۰۵
CITY STATE ZIP COL	DE AREA CODE/PHONE	CITY	STATE ZIP C	ODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS	na baylan ta'nak na palaityn a gynnys ang tagata an da addadan dan da gand	OPTIONAL: FAX / E-MAIL ADDRES	8	· · · · · · · · · · · · · · · · · · ·
4. Verification     I have used all reasonable diligence in preparing and reviewir     certify under penality of perjury under the laws of the State of	California that the foregoing is true and a By By By	knowledge the information contained correct. Subneture of Jeasure of Assistant Ming Officeholder, Candidate, Sole Measure Pro- gnature of Controlling Officeholder, Candidate, S gnature of Controlling Officeholder, Candidate, S	Treasurer opponent or Responsible Officer of Spon state Measure Proponent	ROT
			FPPC Advice: ad	FPPC Form 460 (Jan/2016) dvice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

## Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2
CALIFORNIA 460
FORM 40U
Page of

5,	Officeholder or Candidate Controlled Committee
	NAME OF OFFICEHOLDER OR CANDIDATE

Michael Regan

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

Petaluma City Council 2020 RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Petaluma, CA 94954

Related Committees Not Included in this Statement: List any committees nat 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?
		YES NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.C	D. BOX)
CITY	STATE ZI	P CODE AREA CODE/PHONE
COMMITTEE NAME		I.D. NUMBER
NAME OF TREASURER		CONTROLLED COMMITTEE?
		YES NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.C	D. BOX)
CITY	STATE ZI	P CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

BALLOT NO. OR LETTER JURISDICTION

Identify the controlling officeholder, candidate, or state measure proponent, if any. NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

or offictioeber, on blocke, of the officient

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

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	SUPPORT OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT OPPOSE

Attach continuation sheets if necessary

FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

Summary Page       Summary Page         Summary Page       In Market Diffuence Di	Campaign Disclosure Statement	Amounts may be rounded to whole dollars,		SUMMARY PAGE		
BEE NITRUCTIONS ON REVERSE       Include	Summary Page	to whole donars,		7-1-2019		
See MATUCTONE ON REVERCE       Lin. NUMBER         NAME OF FILER       Lin. NUMBER         Contributions Received       Tork Instructions         1. Monetary Contributions       Schedole A, Line 3         2. Loans Received       Schedole A, Line 3         3. SUBTOTAL CASH CONTRIBUTIONS       Add Line 1+2         4. Nonnonetary Contributions       Schedole A, Line 3         5. TOTAL CONTRIBUTIONS       Add Line 1+2         6. Nonnonetary Contributions       Schedole A, Line 3         5. TOTAL CONTRIBUTIONS RECEIVED       Add Line 3+4         6. Paymentic Made       Schedole A, Line 3         6. Paymentic Made       Schedole A, Line 3         7. Loans Made       Schedole A, Line 3         8. SUBTOTAL CASH PAYMENTS       Add Line 3 +7         9. Accrued Expenses (Unpaid Bills)       Schedole A, Line 3         9. Accrued Expenses (Unpaid Bills)       Schedole C, Line 3         10. Nonnonetary Adjustment       Schedole C, Line 3         11. TOTAL EXPENDITURES MADE       Schedole C, Line 3         12. Bagining Cash Balance       Paydous Schedole C, Line 3         13. Cash Receipts       Column A, Line 3 above         14. Macellaneous Increases to Cash       Schedole L, Line 4         15. Cash Payments       Columa A, Line 3 above			fr	om		
Column A       Column A       Column B       Col       Column B       Colu	SEE INSTRUCTIONS ON REVERSE		th	12-31-2019	Page of	
Contributions Received       Column A mathematic productions of interval and mean structures, and the stru	NAME OF FILER		······································	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	I.D. NUMBER	
Contributions       Cubic average       Cubic average<		······			1417373	
1. Monetary Contributions       Schedule A, Line 3       \$       5/5.1/         2. Lears Received       Schedule A, Line 3       \$       5/5.1/         3. SUBTOTAL CASH CONTRIBUTIONS       Add Lines 1+2       \$       20. Contributions         3. Komonetary Contributions       Schedule G, Line 3       \$       5/5.17         4. Nonmonetary Contributions       Schedule G, Line 3       \$       5/5.17         5. TOTAL CONTRIBUTIONS RECEIVED       Add Lines 3+4       \$       0       \$         6. Payments Made       Schedule E, Line 4       \$       0       \$       312.59         7. Lears Made       Schedule E, Line 4       \$       0       \$       312.59         8. SUBTOTAL CASH PAYMENTS       Add Lines 6+7       \$       0       \$       312.59         10. Nonmonetary Adjustment       Schedule G, Line 3       \$       312.59       \$       \$         11. TOTAL EXPENDITURES MADE       Add Lines 6+9+10       \$       312.59       \$       \$       \$         13. Cash Receipts       Column A, Line 8 above       \$       2822.58       To calculate Column B, add lines 10 column A, Line 8 above       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       \$       <	Contributions Received	TOTAL THIS PERIOD	CALENDAR YEAR	Running in Both th		
3. SUBTOTAL CASH CONTRIBUTIONS       Add Lines 1+2       \$<		\$	\$575	0.17	hrough 6/30 7/1 to Date	
3. SUBTOTAL CASH CONTRIBUTIONS       Add Lines 1+2       \$       \$       Received       \$       Received       \$       Received       \$       Control Legenditures       \$       Control Legenditures <t< td=""><td></td><td>·</td><td>p</td><td>20. Contributions</td><td></td></t<>		·	p	20. Contributions		
5. TOTAL CONTRIBUTIONS RECEIVED       Add Lines 3 + 4       \$       0       \$       575.17       Made       \$		\$	\$	Received \$		
6. TOTAL CONTRIBUTIONS RECEIVED       Add Lines 3 + 4       \$ <td< td=""><td></td><td></td><td></td><td></td><td>*</td></td<>					*	
6. Paymente Made       Schedule E, Line 4       \$       0       \$       312.59         7. Loans Made       Schedule H, Line 3       0       \$       312.59         7. Loans Made       Schedule H, Line 3       0       \$       312.59         8. SUBTOTAL CASH PAYMENTS.       Add Lines 6 + 7       \$       0       \$       312.59         9. Accrued Expenses (Unpaid Bills)       Schedule C, Line 3	5. TOTAL CONTRIBUTIONS RECEIVED	\$	\$575		φ	
6. Payments Made       Schedule E, Line 4       \$       0       \$       312.59       Candidates         7. Loans Made       Schedule H, Line 3	Expenditures Made			Expenditure Limit S	Summary for State	
8. SUBTOTAL CASH PAYMENTS.       Add Lines 6 + 7 \$       0       \$       312.59         9. Accrued Expenses (Unpaid Bills)       Schedule F, Line 3	6. Payments Made Schedule E, Line 4	\$0	\$312			
<ul> <li>8. SUBTOTAL CASH PAYMENTS</li></ul>	7, Loans Made Schedule H, Line 3				<b>.</b>	
9. Accrued Expenses (Unpaid Bills)       Schedule F, Line 3	8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$0	\$312	1.59 22. Cumulative (If Subject to	Ve Expenditures Made* Voluntary Expenditure Limit)	
11. TOTAL EXPENDITURES MADE       Add Lines 8 + 9 + 10 \$       0       \$       312.59         11. TOTAL EXPENDITURES MADE       Add Lines 8 + 9 + 10 \$       0       \$       312.59         12. Beginning Cash Balance       Previous Summary Page, Line 15 \$       262.58       To calculate Column B, add amounts in Column A, to the corresponding amounts in Column A and to the subtract Line 15 \$       262.58       To calculate Column B, add amounts in Column B, add amounts in Column A to the corresponding amounts in Column A may be different from amounts reported in Column B.         15. Cash Payments       Column A, Line 8 above	9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3		·	Date of Election	Total to Date	
Current Cash Statement         12. Beginning Cash Balance       Previous Summery Page, Line 16 \$	10. Nonmonetary Adjustment Schedule C, Line 3			(mm/dd/yy)		
12. Beginning Cash Balance       Previous Summary Page, Line 16       \$       262.58         13. Cash Receipts       Column A, Line 3 above       A b the corresponding amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A, Line 8 above       To calculate Column B, add amounts in Column B, of your last report. Some amounts in Column A and b the corresponding amounts from Column A and b the subtract Line 15       * Amounts in this section may be different from amounts reported in Column B.         16. ENDING CASH BALANCE	11. TOTAL EXPENDITURES MADE	\$0	\$ 312		_ \$	
13. Cash Receipts       Column A, Line 3 above       add amounts in Column         14. Miscellaneous Increases to Cash       Schedule I, Line 4       add amounts in Column A         15. Cash Payments       Column A, Line 8 above       amounts from Column B         16. ENDING CASH BALANCE       Add Lines 12 + 13 + 14, then subtract Line 15       \$         17. LOAN GUARANTEES RECEIVED       Schedule B, Part 2       \$         18. Cash Equivalents       See instructions on reverse       \$         18. Cash Equivalents       See instructions on reverse       \$         19. Outstanding Debts       Add Line 2 + Line 9 in Column B above       \$	Current Cash Statement			······	_ \$	
13. Cash Receipts       Column A, Line 3 above       add amounts in Column         14. Miscellaneous Increases to Cash       Sohedule I, Line 4       add amounts in Column A         15. Cash Payments       Column A, Line 8 above       amounts from Column B         16. ENDING CASH BALANCE       Add Lines 12 + 13 + 14, then subtract Line 15       \$         17. LOAN GUARANTEES RECEIVED       Schedule B, Part 2       \$         18. Cash Equivalents       See instructions on reverse       \$         18. Cash Equivalents       See instructions on reverse       \$         19. Outstanding Debts       Add Line 2 + Line 9 in Column B above       \$	12. Beginning Cash Balance Previous Summary Page, Line 16	\$262.58	To calculate Colump F	a l		
14. Miscellaneous Increases to Cash       Schedule I, Line 4         15. Cash Payments       Column A, Line 8 abave         16. ENDING CASH BALANCE       Add Lines 12 + 13 + 14, then subtract Line 15         17. LOAN GUARANTEES RECEIVED       Schedule B, Part 2         18. Cash Equivalents and Outstanding Debts       See instructions on reverse         19. Outstanding Debts       See instructions on reverse         19. Outstanding Debts       Add Line 2 + Line 9 in Column B above	13. Cash Receipts Column A, Line 3 above		add amounts in Colun	nn		
15. Cash Payments       Column A, Line 8 above       of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is a termination statement, Line 16 must be zero.         16. ENDING CASH BALANCE       Schedule B, Part 2       \$         17. LOAN GUARANTEES RECEIVED       Schedule B, Part 2       \$         18. Cash Equivalents and Outstanding Debts       See instructions on reverse       \$         19. Outstanding Debts       See instructions on reverse       \$         19. Outstanding Debts       Add Line 2 + Line 9 in Column B above       \$	14. Miscellaneous Increases to Cash Schedule I, Line 4				nay be different from amounts	
16. ENDING CASH BALANCE	15. Cash Payments			ome		
If this is a termination statement, Line 16 must be zero.       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).         17. LOAN GUARANTEES RECEIVED	16. ENDING CASH BALANCE	\$262.58	be negative figures the	at		
17. LOAN GUARANTEES RECEIVED	If this is a termination statement, Line 16 must be zero.		previous period amou	ints, (f		
Cash Equivalents and Outstanding Debts       from Lines 2, 7, and 9 (if any).         18. Cash Equivalents       See instructions on reverse \$         19. Outstanding Debts       Add Line 2 + Line 9 in Column B above \$	17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	filed for this calendar	year,		
18. Cash Equivalents       See Instructions on reverse       \$         19. Outstanding Debts       Add Line 2 + Line 9 in Column B above       \$         FPPC Form 460 (Jan/2016)	Cash Equivalents and Outstanding Debts	a fernanski kongena ana mana para na ser perukanka menjem den dag dipakan ka biskandi pinika	from Lines 2, 7, and 9			
	18. Cash Equivalents See Instructions on reverse	\$	<i>i</i> ,			
	19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$		FPPC Advices adv	FPPC Form 460 (Jan/2016) fice@fppc.ca.gov (866/275-3772)	

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