Ca	ampaign Statement over Page			Date Stamp	california 460
	i	Statement covers period from 10/18/2020	Date of election if applicable: (Month, Day, Year)	RECEIVEL	Page 1 of 8 For Official Use Only
SEE	E INSTRUCTIONS ON REVERSE	through 10/29/20	11/3/20	0CT 3 0 2020 CITY CLERK	,
1.	Type of Recipient Committee: All Committees - Con	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:		
	State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored	Primarily Formed Ballot Measure Committee Controlled Controlled Sponsored Also Complete Part 6) Primarily Formed Candidate/	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te Amendment (Explain be	t Spermination)	uarterly Statement pecial Odd-Year Report
		Officeholder Committee Also Complete Part 7)			
3.	Committee Information I.C), NUMBER	Treasurer(s)		
	COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)		NAME OF TREASURER		
	Brian Barnacle for Petaluma City Council 2020		Dan Ellecamp		
			MAILING ADDRESS		
	STREET ADDRESS (NO P.O. BOX)		CITY	STATE ZIP	CODE AREA CODE/PHONE
			Petaluma		1954
	CITY STATE ZIP CO	DE AREA CODE/PHONE	NAME OF ASSISTANT TREASUR		
	Petaluma CA 9495 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX				
	MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX		MAILING ADDRESS		
	CHTY STATE ZIP CO	DE AREA CODE/PHONE	CITY	STATE ZIP	CODE AREA CODE/PHONE
	OPTIONAL: FAX / E-MAIL ADDRESS	Name	OPTIONAL: FAX / E-MAIL ADDRE	ESS	
			dansemailus@yahoo.com		
	Verification	×			
	I have used all reasonable diligence in preparing and reviewing certify under penalty of perjury under the laws of the State of		nowledge the information contained	herein and in the attached	schedules is true and complete. I
	Executed on 10/29/20	7			
	Date	Ву		reasurer	
	Executed on 10/29/20 Date	BySignature of Control	lling Officeholder, Candidate, State Measure Pro	oponent or Responsible Officer of Sp	onsor
	Executed on	BySig	gnature of Controlling Officeholder, Candidate, S	State Measure Proponent	
	Executed on	Ву			
	Date	Sig	gnature of Controlling Officeholder, Candidate, S	State Measure Proponent	

FPPC Form 460 (Jan/2016))
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COVER PAGE

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2
CALLEGRALA 400
CALIFORNIA 460
FORM - C
2 0
Page 2 of 8

5.	Officeholder or Candidate Controlled Commi	ttee			6.	. P	rimarily Formed Ballot	Measure C	ommittee		
	NAME OF OFFICEHOLDER OR CANDIDATE					N	AME OF BALLOT MEASURE	A STATE OF THE STA			
	Brian Barnacle for Petaluma City Council 2020					_					
	OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	RICT NUMBER IF	APPLIC	ABLE)		В	ALLOT NO. OR LETTER	JURISDICTIO	N	1	SUPPORT
	Petaluma City Council					_					OPPOSE
	RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CI	TY	STATE	ZIP							4.75
	301 Bassett Street	Petaluma	CA	94952		_	lentify the controlling officeh			measure pro	ponent, it any.
						N	AME OF OFFICEHOLDER, CAN	DIDATE, OR PI	ROPONENT		
	Related Committees Not Included in this Star not included in this statement that are controlled by you or contributions or make expenditures on behalf of your cand	are primarily fo				ō	FFICE SOUGHT OR HELD			DISTRICT NO). IF ANY
	COMMITTEE NAME	I.D. NUMBER				_					
				-	7.	. F	Primarily Formed Candi	date/Office	holder Co	mmittee L	ist names of
	NAME OF TREASURER	CONTROLLED				0	fficeholder(s) or candidate(s) i	or which this	committee is	primarily form	ed.
	COMMITTEE ADDRESS STREET ADDRESS (NO P.O. E	YES	☐ NC)		N	AME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOL	JGHT OR HELI	
	COMMITTEE ADDRESS STREET ADDRESS (NO P.O. E	SUX)									☐ SUPPORT
	CITY STATE ZIP C	ODE A	REA CO	DE/PHONE		_	AME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOL	JGHT OR HELI	
							0. 0, 1, 102, 102, 22, 10. 10		011102000	JOHN OITHEL	SUPPORT
	COMMITTEE NAME	I.D. NUMBER				_		and the same of th			OPPOSE
						N	AME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOL	JGHT OR HELI	□ SUPPORT
											☐ OPPOSE
	NAME OF TREASURER	CONTROLLED		1200		N	AME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOL	JGHT OR HELI	D □ SUPPORT
		YES	□ NC)							□ OPPOSE
	COMMITTEE ADDRESS STREET ADDRESS (NO P.O. I	BOX)				-					
	CITY STATE ZIP C	ODE A	DEA CO	DE/PHONE			• **				
	STATE ZIPC	ODE A	IKEA UU	DE/PHONE			Attac	h continuatio	n sheets if n	ecessary	

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period CALIFORNIA FORM from 10/18/20 Page 3 of 8 through 10/29/20 I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Brian Barnacle for Petaluma City Council 2020 1428424

Contributions Received 1. Monetary Contributions	**Example 1.205** \$ \frac{1,205}{0} \\ \$ 1,2	**Solumn B CALENDAR YEAR TOTAL TO DATE **31,007** 1,075** 30,877** 0 32,082**	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 \$ 32,082 21. Expenditures Made \$ 0 \$ 27,942.25
Expenditures Made 6. Payments Made	\$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\$\frac{27,942.25}{0}\$ \$\frac{27,942.25}{0}\$ \$\frac{0}{27,942.25}\$ \$\frac{0}{27,942.25}\$	Expenditure Limit Summary for State Candidates 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) Date of Election (mm/dd/yy)
Current Cash Statement 12. Beginning Cash Balance	-	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).	*Amounts in this section may be different from amounts reported in Column B.
18. Cash Equivalents	\$ <u>0</u> \$ <u>0</u>		FPPC Form 460 (Jan/2016)) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

Schedule	A	Amoun	ts may be rounded				SCHEDULE A	
Monetary Contributions Received		to	whole dollars.	Statement cov	ers period	CALIFORNIA 460		
				from 10/18/20			ORM 400	
							An artista manufacture of	
SEE INSTRUCTIO	DNS ON REVERSE			through 10/29/20		Page	4of_8	
NAME OF FILER				<u> </u>		I.D. NU	JMBER	
Brian Barnac	le for City Council 2020					142842	24	
	FULL NAME, STREET ADDRESS AND ZIP CODE OF		IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE TO	DATE	PER ELECTION	
DATE	CONTRIBUTOR	CONTRIBUTOR	OCCUPATION AND EMPLOYER	RECEIVED THIS	CALENDAR Y	EAR	TO DATE	
RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	(IF SELF-EMPLOYED, ENTER NAME	PERIOD	(JAN. 1 - DEC	. 31)	(IF REQUIRED)	
-	TOTAL OF SCHEDULES ATTACHED	□IND		1,205	31,007			
	TOTAL OF SCHEDOLES ATTACHED	□сом		1,200	01,007			
		□отн						
		□PTY						
		scc						
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		□ OTH □ PTY						
		SCC						
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		Сом						
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	a a	□IND						
		СОМ						
		OTH						
		□ PTY □ SCC						
	<u> </u>	1 000	SUBTOTAL	2				
			- SOBIOIAL	Ψ				
Schedule A	A Summary					tributor (
1. Amount re	ceived this period - itemized monetary contribution	s.	1.5	205		– Individu		
(Include al	Schedule A subtotals.)		\$ <u>1,</u> 2		CON		oient Committee r than PTY or SCC)	
y - .	***				отн		(e.g., business entity)	
2. Amount re	ceived this period – unitemized monetary contributi	ons of less thar	າ \$100\$ <u></u>		PTY	- Politic	al Party	
	,				SCC	- Small	Contributor Committee	
3. Total mone	etary contributions received this period.		4 2	מחב				
(Add Lines	a 1 and 2. Enter here and on the Summary Page, C	olumn A, Line 1	.)TOTAL \$ 1,4	.UJ		FPF	PC Form 460 (Jan/2016))	

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Date Fo	ull Name	1	Address			Contributor	Occupation	Employer	Amount	Cumulative TD
10/20/2020 N	Mitch	Wong	Seattle	WA	98115	IND	Web Manager	Salesforce	\$30	\$30
10/21/2020 A	Alex	Chase	Oakland	CA	94610	IND	Energy Consultant	2050 Partners	\$100	\$100
10/21/2020 Sa	Sarah	Phillips	Petaluma	CA	94952	IND	Program Manager	Marin RCD	\$20	\$20
10/22/2020 El	lizabeth	Mori	Petaluma	CA	94952	IND	None	None	\$100	\$100
10/23/2020 R	Roger	Leventhal	Petaluma	CA	94952	IND	Cival Engineer	Marin County Dept if Public W	\$75	\$75
10/23/2020 D	Dennis	Elias	Petaluma	CA	94954	IND	None	None	\$30	\$30
10/23/2020 P	Peter	Turnbull	San Francisco	CA	94114	IND	None	None	\$25	\$25
10/23/2020 Ju	ulie	Traverso	Petaluma	CA	94954	IND	Vendor Compliance Mgt.	Birkenstock	\$25	\$25
10/25/2020 St	Steven	Wallenstein	Portland	OR	97203	IND	Sales Representitive	Portland Bolt & Manufacturing	\$100	\$100
10/27/2020 N	Michael	Thompson	Petaluma	CA	94952	IND	None	None	\$50	\$50
10/27/2020 K	Kevin	Bushnell	Petaluma	CA	94952	IND	Attorney	Self	\$30	\$30
10/18/2020 E	Elizabeth	Mello	Petaluma	CA	94952	IND	None	None	\$100	\$100
10/18/2020 C	Caroline	Power Kindrish	Petaluma	CA	94952	IND	Unknown	Unknown	\$200	\$200
10/19/2020 G	Geraldine	Groves	Petaluma	CA	94952	IND	None	None	\$10	\$10
10/21/2020 G	Gerald	McKinnon	Petaluma	CA	94952	IND	Unknown	Unknown	\$20	\$20
10/21/2020 Jo	lon	Breyfogle	Penngrove	CA	94951	IND	None	None	\$40	\$40
10/24/2020 G	Gerald & Carol	Kvalheim	Petaluma	CA	94952	IND	President	KVAL, Inc.	\$200	\$200
10/20/2020 D	Diana	Gamzon	Nevada City	CA	95959	IND	Executive Director	Nevada County Canibus Allian	\$50	\$50
]						\$1,205	

	Δm	ounts may be ro	unded	Plane			SCHE	DULE B - PART
Schedule B – Part 1 Loans Received	· · · · · · · · · · · · · · · · · · ·	to whole dollars			Statement cov	ers period	CALIFORN	HA 460
Loans Received					from <u>10/18/20</u>		FORM	.00
SEE INSTRUCTIONS ON REVERSE					through 10/29/20)	Page 6	of 8
NAME OF FILER		· · · · · · · · · · · · · · · · · · ·			-		I.D. NUMBER	
Brian Barnacle for City Council 2020							1428424	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIO	N BALANCE AT	(e) INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTION TO DATE
Brian Barnacle Petaluma, CA 94952	Consultant, Outthink LLC			PAID \$ FORGIVEN	\$ 1,075	0 RATE	\$ 1,075	\$ 1,075
† ☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$	\$ <u></u>	\$	12/31/20 DATE DUE	ş <u>0</u>	6/26/20 DATE INCURRED	\$ 1,075
† IND COM OTH PTY SCC		\$	\$	PAID \$ FORGIVEN	\$ DATE DUE	% RATE	\$DATE INCURRED	S PER ELECTION
		\$	\$	PAID \$ FORGIVEN	\$	% RATE	\$	S PER ELECTION
T IND COM OTH PTY SCC	<u> </u>	SUBTOTALS S	\$ 0	<u> </u> \$		\$ 0	DATE INCURRED	
Schedule B Summary				Ψ		(Enter (e) on Schee	dule E, Line 3)	
1. Loans received this period	ns of less than \$100.) Of paid or forgiven.) It are also itemized on Sche	adule A)		\$ <u>0</u>		C	Contributor Codes ND – Individual COM – Recipient Codes (other than NTH – Other (e.g.,	Committee PTY or SCC)

*Amounts forgiven or paid by another party also must be reported on Schedule A. ** If required.

Enter the net here and on the Summary Page, Column A, Line 2.

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www.fppc.ca.gov

PTY - Political Party

(May be a negative number)

SCC - Small Contributor Committee

Schedule E Payments Made	Amounts may b to whole do				Statement covers period from 10/18/20	CALIF FO	ORNIA 460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Brian Barnacle for City Council 2020					through <u>10/29/20</u>	Page	
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense campaign literature and mailings	MBR member com MTG meetings and OFC office expens PET petition circul PHO phone banks POL polling and si POS postage, delir PRO professional	munications I appearance es ating urvey resea	s ces irch esser	nger services	wise, describe the payment. RAD radio airtime and production returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and prod candidate travel, lodging, an staff/spouse travel, lodging, artransfer between committees voter registration WEB information technology costs	uction costs d meals and meals s of the sam	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESC	CRIPTION OF PAYMENT		AMOUNT PAID
TOTAL OF SCHEDULES ATTACHED							4,237.65
					-		
* Payments that are contributions or independent expenditures must also b	pe summarized on Sche	dule D.			SU	BTOTAL	\$
Schedule E Summary							
 Itemized payments made this period. (Include all Schedul Unitemized payments made this period of under \$100 						\$ \$_	1,237.65
 Total interest paid this period on loans. (Enter amount from 4. Total payments made this period. (Add Lines 1. 2. and 3. 	m Schedule B, Par	t 1, Colui	nn ((e).)	Line 6) If	\$_	J 4,237.65
4. IOIAI DAVITIETIIS ITIAUE ITIIS DETIOU, (AUU LITIES 1, 2, 200 3,	Enter here and on	THE SUM	mar	v raue. Column A	1. LIHE 0. J		,

SCHEDULE E

Vendor	Address	Code	Amount
Indie Politics		CMP	\$2,587.65
Ellen FitzGerald		POS	\$550.00
Eli Slaydon		POS	\$550.00
Alison Talbot-Jones		POS	\$550.00
			4.00-0-

\$4,237.65