

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

Date Stamp SAN BUENA VENTURA CITY CLERK	CALIFORNIA FORM	460
Page <u>1</u> of <u>7</u>		For Official Use Only
*13 NOV -4 A8:39		

Statement covers period from <u>Sept. 22, 2013</u> through <u>Oct. 19, 2013</u>	Date of election if applicable: (Month, Day, Year) <u>Nov. 5, 2013</u>
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SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- | | |
|---|---|
| <input type="checkbox"/> Officeholder, Candidate Controlled Committee | <input type="checkbox"/> Primarily Formed Ballot Measure Committee |
| <input type="radio"/> State Candidate Election Committee | <input type="radio"/> Controlled |
| <input type="radio"/> Recall
<i>(Also Complete Part 5)</i> | <input type="radio"/> Sponsored
<i>(Also Complete Part 6)</i> |
| <input checked="" type="checkbox"/> General Purpose Committee | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee
<i>(Also Complete Part 7)</i> |
| <input checked="" type="radio"/> Sponsored | |
| <input type="radio"/> Small Contributor Committee | |
| <input type="radio"/> Political Party/Central Committee | |

2. Type of Statement:

- | | |
|---|---|
| <input checked="" type="checkbox"/> Preelection Statement | <input type="checkbox"/> Quarterly Statement |
| <input type="checkbox"/> Semi-annual Statement | <input type="checkbox"/> Special Odd-Year Report |
| <input type="checkbox"/> Termination Statement
<i>(Also file a Form 410 Termination)</i> | <input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
| <input checked="" type="checkbox"/> Amendment (Explain below)
<u>Corrections to income and expenses.</u> | |

3. Committee Information

I.D. NUMBER
911222

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

Ventura Chamber of Commerce Political Action Committee (PAC)

STREET ADDRESS (NO P.O. BOX)

505 Poli Street, Second Floor

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Ventura</u>	<u>CA</u>	<u>93001</u>	<u>805-643-7222</u>

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

P.O.Box 24233

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Ventura</u>	<u>CA</u>	<u>93002-4233</u>	<u>805-643-7222</u>

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

John Whitman

MAILING ADDRESS

1003 Woodstock Lane

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Ventura</u>	<u>CA</u>	<u>93001</u>	<u>805-432-4476</u>

NAME OF ASSISTANT TREASURER, IF ANY

Robert Alviani

MAILING ADDRESS

5262 Aurora Dr.

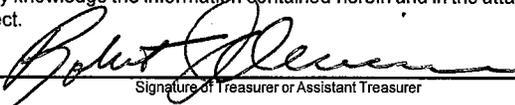
CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Ventura</u>	<u>CA</u>	<u>93003</u>	<u>805-320-3714</u>

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 11-1-13
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

**Recipient Committee
Campaign Statement
Cover Page — Part 2**

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA FORM	460
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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE				
N/A				
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)				
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)		CITY	STATE	ZIP

Related Committees Not Included in this Statement: *List any committees not 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		
N/A				
NAME OF TREASURER		CONTROLLED COMMITTEE?		
		<input type="checkbox"/> YES <input type="checkbox"/> NO		
COMMITTEE ADDRESS		STREET ADDRESS (NO P.O. BOX)		
CITY	STATE	ZIP CODE	AREA CODE/PHONE	

COMMITTEE NAME		I.D. NUMBER		
NAME OF TREASURER		CONTROLLED COMMITTEE?		
		<input type="checkbox"/> YES <input type="checkbox"/> NO		
COMMITTEE ADDRESS		STREET ADDRESS (NO P.O. BOX)		
CITY	STATE	ZIP CODE	AREA CODE/PHONE	

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE		
N/A		
BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT	
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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
N/A		
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

Attach continuation sheets if necessary

**Campaign Disclosure Statement
Summary Page**

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

SUMMARY PAGE

Statement covers period from <u>September 22, 2013</u>	CALIFORNIA FORM 460
through <u>October 19, 2013</u>	
Page <u>3</u> of <u>7</u>	I.D. NUMBER <u>911222</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ventura Chamber of Commerce Political Action Committee (PAC)

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions <i>Schedule A, Line 3</i>	\$ <u>0</u>	\$ <u>1,000.00</u>
2. Loans Received <i>Schedule B, Line 3</i>	<u>0</u>	<u>0</u>
3. SUBTOTAL CASH CONTRIBUTIONS <i>Add Lines 1 + 2</i>	\$ <u>0</u>	\$ <u>1,000.00</u>
4. Nonmonetary Contributions <i>Schedule C, Line 3</i>	<u>0</u>	<u>0</u>
5. TOTAL CONTRIBUTIONS RECEIVED <i>Add Lines 3 + 4</i>	\$ <u>0</u>	\$ <u>1,000.00</u>

**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	\$ <u>N/A</u>	\$ _____
21. Expenditures Made	\$ _____	\$ _____

	Column A	Column B
6. Payments Made <i>Schedule E, Line 4</i>	\$ <u>3,759.51</u>	\$ <u>4,993.82</u>
7. Loans Made <i>Schedule H, Line 3</i>	<u>0</u>	<u>0</u>
8. SUBTOTAL CASH PAYMENTS <i>Add Lines 6 + 7</i>	\$ <u>3,759.51</u>	\$ <u>4,993.82</u>
9. Accrued Expenses (Unpaid Bills) <i>Schedule F, Line 3</i>	<u>0</u>	<u>0</u>
10. Nonmonetary Adjustment <i>Schedule C, Line 3</i>	<u>0</u>	<u>0</u>
11. TOTAL EXPENDITURES MADE <i>Add Lines 8 + 9 + 10</i>	\$ <u>3,759.51</u>	\$ <u>4,993.82</u>

**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
____/____/____	\$ <u>N/A</u>
____/____/____	\$ _____

Current Cash Statement	
12. Beginning Cash Balance <i>Previous Summary Page, Line 16</i>	\$ <u>5,043.33</u>
13. Cash Receipts <i>Column A, Line 3 above</i>	<u>0</u>
14. Miscellaneous Increases to Cash <i>Schedule I, Line 4</i>	<u>.13</u>
15. Cash Payments <i>Column A, Line 8 above</i>	<u>3,759.51</u>
16. ENDING CASH BALANCE <i>Add Lines 12 + 13 + 14, then subtract Line 15</i>	\$ <u>1,283.95</u>

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

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.

17. LOAN GUARANTEES RECEIVED <i>Schedule B, Part 2</i>	\$ <u>0</u>
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Cash Equivalents and Outstanding Debts	
18. Cash Equivalents <i>See instructions on reverse</i>	\$ <u>0</u>
19. Outstanding Debts <i>Add Line 2 + Line 9 in Column B above</i>	\$ <u>0</u>

**Schedule D
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

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

Statement covers period		SCHEDULED	
from	Sept. 22, 2013	CALIFORNIA FORM 460	
through	Oct. 19, 2013	Page	4 of 7
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ventura Chamber of Commerce Political Action Committee (PAC)

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/8/13	Mike Tracy	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		300.00	300.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/8/13	Erik Nasarenko	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		300.00	300.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/8/13	Neal Andrews	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		300.00	300.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$				900.00		

Schedule D Summary

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)	\$ 1,200.00
2. Unitemized contributions and independent expenditures made this period of under \$100	\$ 0
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	TOTAL \$ 1,200.00

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

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

SCHEDULE D (CONT.)

Statement covers period from <u>Sept. 22, 2013</u> through <u>Oct. 19, 2013</u>	CALIFORNIA FORM 460
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NAME OF FILER Ventura Chamber of Commerce Political Action Committee (PAC)	I.D. NUMBER 911222
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/8/13	Jim Mohahan	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		300.00	300.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$				300.00		

**Schedule E
Payments Made**

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

Statement covers period		CALIFORNIA FORM 460	
from	Sept. 22, 2013	Page	6 of 7
through	Oct. 19, 2013	I.D. NUMBER	911222

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ventura Chamber of Commerce Political Action Committee (PAC)

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Fastsigns [REDACTED]	CMP		Sign production and installation	2,549.51

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL \$ 2,549.51**

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	2,549.51
2. Unitemized payments made this period of under \$100	\$	10.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$	0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$	2,559.51

**Schedule I
Miscellaneous Increases to Cash**

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

SCHEDULE I

Statement covers period
from Sept. 22, 2013
through Oct. 19, 2013

**CALIFORNIA
FORM 460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

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I.D. NUMBER

911222

Ventura Chamber of Commerce Political Action Committee (PAC)

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 0

Schedule I Summary

1. Itemized increases to cash this period.	\$ <u>0</u>
2. Unitemized increases to cash of under \$100 this period.	\$ <u>.13</u>
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)	\$ <u>0</u>
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)	TOTAL \$ <u>.13</u>