

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

CALIFORNIA
FORM

460

Page 1 of 5

For Official Use Only

Date Stamp

RECEIVED
2013 OCT -7 PM 2:30

OFFICE OF THE
CITY CLERK
CITY OF VALLEJO

Statement covers period

from 07/01/13
through 09/21/13

Date of election if applicable:
(Month, Day, Year)

2013 OCT -7 PM 2:30

11/05/13

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
- Primarily Formed Ballot Measure Committee
- Controlled
- Sponsored (Also Complete Part 6)
- Primarily Formed Candidate/Officeholder Committee (Also Complete Part 7)

2. Type of Statement:

- Preelection Statement
- Semi-annual Statement
- Termination Statement (Also file a Form 410 Termination)
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report
- Supplemental Preelection Statement - Attach Form 495

3. Committee Information

I.D. NUMBER 861242

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

Vallejo Political Action Committee (ValPac)

Treasurer(s)

NAME OF TREASURER

Dennis Klimisch

MAILING ADDRESS

427 York Street

STREET ADDRESS (NO P.O. BOX)

427 York Street

CITY

Vallejo

STATE

Ca

ZIP CODE

94590

AREA CODE/PHONE

707 644-5551

CITY

Vallejo

STATE

Ca

ZIP CODE

94590

AREA CODE/PHONE

707 644-5551

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY

STATE

ZIP CODE

AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

707 644-5590

Kim@vallejochamber.com

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 10/07/13 Date

By [Signature] Signature of Treasurer or Assistant Treasurer

Executed on _____ Date

By _____ Signature of Controlling Officer/holder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on _____ Date

By _____ Signature of Controlling Officer/holder, Candidate, State Measure Proponent

Executed on _____ Date

By _____ Signature of Controlling Officer/holder, Candidate, State Measure Proponent

Campaign Disclosure Statement Summary Page

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

SUMMARY PAGE

CALIFORNIA
FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Statement covers period
from 07/01/13
through 09/30/13

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I.D. NUMBER

861242

Contributions Received

Column A
TOTAL THIS PERIOD
(FROM ATTACHED SCHEDULES)

Column B
CALENDAR YEAR
TOTAL TO DATE

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

1/1 through 6/30 7/1 to Date

- | | | | |
|---------------------------------------|--------------------|-----------|-------------|
| 1. Monetary Contributions | Schedule A, Line 3 | \$ 700.00 | \$ 3,500.00 |
| 2. Loans Received | Schedule B, Line 3 | 0 | 0 |
| 3. SUBTOTAL CASH CONTRIBUTIONS | Add Lines 1 + 2 | 700.00 | 2,500.00 |
| 4. Nonmonetary Contributions | Schedule C, Line 3 | 0 | 0 |
| 5. TOTAL CONTRIBUTIONS RECEIVED | Add Lines 3 + 4 | 700.00 | 2,500.00 |

20. Contributions Received \$ _____

21. Expenditures Made \$ _____

Expenditures Made

- | | | | |
|--|----------------------|-----------|-------------|
| 6. Payments Made | Schedule E, Line 4 | \$ 600.00 | \$ 6,485.99 |
| 7. Loans Made | Schedule H, Line 3 | 0 | 0 |
| 8. SUBTOTAL CASH PAYMENTS | Add Lines 6 + 7 | 600.00 | 6,485.99 |
| 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 | 600.00 | 6,485.99 |

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made*
(# Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy) _____ Total to Date _____

Current Cash Statement

- | | | |
|---|---|--------------|
| 12. Beginning Cash Balance | Previous Summary Page, Line 16 | \$ 16,313.00 |
| 13. Cash Receipts | Column A, Line 3 above | 700.00 |
| 14. Miscellaneous Increases to Cash | Schedule I, Line 4 | 0 |
| 15. Cash Payments | Column A, Line 8 above | 0 |
| 16. ENDING CASH BALANCE | Add Lines 12 + 13 + 14, then subtract Line 15 | \$ 17,013.00 |

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).

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

**Schedule A
Monetary Contributions Received**

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

SCHEDULE A

**CALIFORNIA 460
FORM**

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Statement covers period
from 07/01/13
through 09/21/13

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

I.D. NUMBER

861242

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	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)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
				SUBTOTAL \$		

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 0
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 700.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 700.00

*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

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 from 07/01/13 through 09/21/13

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I.D. NUMBER 861242

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

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)
9/9/13	Pippin Dew Vallejo City Council FPPC # 1356555	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		1500.00	1500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/9/13	Vendera Aliga Vallejo City Council FPPC # 1358434	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		1500.00	1500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
9/9/13	Jesus C Malgago Vallejo City Council FPPC # 1340597	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		1500.00	1500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$				4500		

Schedule D Summary

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) \$ 6000.00
- Unitemized contributions and independent expenditures made this period of under \$100 \$ 0
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) TOTAL \$ 6000.00

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

Type or print in ink.
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SCHEDULED (CONT.)

Statement covers period

CALIFORNIA FORM 460

from 07/01/13

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through 09/21/13

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OFFICE OF THE
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NAME OF FILER

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9/10/13	Tony Summers Vallejo City Council FPPC # 1358471 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		1500.00	1500.00	
	<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	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				

SUBTOTAL \$ 1500.00