Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

CALIFORNIA 2001/02 FORM **460**

Date Stamp: RECEIVED CITY OF SIMI VAL 2012 AUG 16 AM 10:47 OFFICE OF CITY CLERK BY

Page 1 of 32

For Official Use Only

SEE INSTRUCTIONS ON REVERSE

Statement covers period from January 1, 2012 through June 30, 2012

Date of election if applicable: (Month, Day, Year) November 6, 2012

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

- [x] 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 6)*
- [ ] Primarily Formed Candidate/ Officeholder Committee *(Also Complete Part 7)*

2. Type of Statement:

- [ ] Preelection Statement
- [ ] Semi-annual Statement
- [ ] Termination Statement
- [x] Amendment (Explain below)
- [ ] Quarterly Statement
- [ ] Special Odd-Year Report
- [ ] Supplemental Preelection Statement - Attach Form 495

To make corrections per Citizens Advisory Committee in letter dated 9/9/12

3. Committee Information

I.D. NUMBER: 1325587

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE): People for Bob Huber-Mayor 2012

STREET ADDRESS (NO P.O. BOX)

CITY | STATE | ZIP CODE | AREA CODE/PHONE

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

CITY | STATE | ZIP CODE | AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER: Jim King

MAILING ADDRESS

CITY | STATE | ZIP CODE | AREA CODE/PHONE

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY | STATE | ZIP CODE | AREA CODE/PHONE

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 8/16/2012 (Date) By [signature] (Signature of Treasurer or Assistant Treasurer)

Executed on 8/16/2012 (Date) By [signature] (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**

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Robert O. Huber

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

Mayor-City of Simi Valley California

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
NONE	
NAME OF TREASURER	CONTROLLED COMMITTEE? ☒ YES ☒ 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? ☐ YES ☐ NO
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	
CITY STATE ZIP CODE AREA CODE/PHONE	

6. Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	☐ SUPPORT ☐ 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 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 ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ 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

CALIFORNIA FORM **460**

Statement covers period from January 1, 2012 through June 30, 2012

Page 3 of 32

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: People for Bob Huber-Mayor 2012

I.D. NUMBER: 1325587

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	$ 36938.00	$ 36938.00
2. Loans Received	Schedule B, Line 3	0	(Zero) 41 000.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	$ 36938.00	$ 77938 ~~36938.00~~
4. Nonmonetary Contributions	Schedule C, Line 3	1826.00	1826.000
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	$ 38764.00	$ 79764 ~~38764.00~~

Expenditures Made

6. Payments Made	Schedule E, Line 4	$ 9034.40	$ 9034.40
7. Loans Made	Schedule H, Line 3	0	0
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	$ 9034.40	$ 9034.40
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	0	0
10. Nonmonetary Adjustment	Schedule C, Line 3	1826.00	1826.00
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	$ 10860.40	$ 10860.40

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	$ 4093.02
13. Cash Receipts	Column A, Line 3 above	36938.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4	9.50
15. Cash Payments	Column A, Line 8 above	9034.40
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	$ 32006.12

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	$ 41,000.00

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).

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	$	$
21. Expenditures Made	$	$

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
/ /	$
/ /	$
/ /	$
/ /	$
/ /	$
/ /	$

*Since January 1, 2001. 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 FORM 460

Statement covers period from January 1, 2012 through June 30, 2012

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: People for Bob Huber-Mayor 2012

I.D. NUMBER: 1325587

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)
2/17/12	The Lederer Family Trust	☐IND ☐COM ☒OTH ☐PTY ☐SCC		100.00	100.00	100.00
2/17/12	Veterinarian Valley Veterinary Clinic	☐IND ☐COM ☒OTH ☐PTY ☐SCC		1,000.00	1,000.00	1,000.00
2/21/12	Parfitt Family Living Trust	☐IND ☐COM ☒OTH ☐PTY ☐SCC		100.00	100.00	100.00
2/19/12	Witebv Family Trust	☐IND ☐COM ☒OTH ☐PTY ☐SCC		100.00	100.00	100.00
2/19/12	JLR Consultants	☐IND ☐COM ☒OTH ☐PTY ☐SCC		100.00	100.00	100.00
			SUBTOTAL $	1,400.00		

Schedule A Summary

1. Amount received this period – contributions of $100 or more. (Include all Schedule A subtotals.) ..... $ 36,024.00
2. Amount received this period – unitemized contributions of less than $100 ..... $ 914.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL $ 36,938.00

*Contributor Codes
IND – Individual
COM – Recipient Committee (other than PTY or SCC)
OTH – Other
PTY – Political Party
SCC – Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from January 1, 2012
through June 30, 2012

CALIFORNIA FORM 460

NAME OF FILER
People for Bob Huber-Mayor 2012

I.D. NUMBER
1325587

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)
2/19/12	Cornell Specialties, Inc.	☐IND ☐COM ☒OTH ☐PTY ☐SCC		750.00	750.00	750.00
2/20/12	Kadzielski, Mark	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Fullbright & Jaworski, LLP	500.00	500.00	500.00
2/20/12	Anderson Rubbish	☐IND ☐COM ☒OTH ☐PTY ☐SCC		500.00	500.00	500.00
2/20/12	Pacific West Builders	☐IND ☐COM ☒OTH ☐PTY ☐SCC		100.00	100.00	100.00
2/21/12	Morris, Jeff	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Auto Dealer Wm. L. Morris Chevrolet	100.00	100.00	100.00
			SUBTOTAL $	1,950		

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IND – Individual
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OTH – Other
PTY – Political Party
SCC – Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

Statement covers period
from July 1, 2011
through December 31, 2011

CALIFORNIA FORM 460

NAME OF FILER
People for Bob Huber-Mayor 2012

I.D. NUMBER
1325587

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)
2/21/12	Realty Works, Inc.	☐IND ☐COM ☒OTH ☐PTY ☐SCC		250.00	250.00	250.00
2/22/12	Hibbler, Larry	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Auto Dealer Simi Valley Ford	500.00	500.00	500.00
2/22/12	PW Gillibrand Rock & Sand	☐IND ☐COM ☒OTH ☐PTY ☐SCC		1,000.00	1,000.00	1,000.00
2/23/12	Dunn & Sanderson, Attorneys at Law	☐IND ☐COM ☒OTH ☐PTY ☐SCC		500.00	500.00	500.00
2/23/12	Carmichael, Chuck	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Real Estate NAI Capitol	1,000.00	1,000.00	1,000.00
			SUBTOTAL $	3,250.00		

*Contributor Codes
IND – Individual
COM – Recipient Committee (other than PTY or SCC)
OTH – Other
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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from January 1, 2012
through June 30, 2012

CALIFORNIA FORM 460

NAME OF FILER
People for Bob Huber-Mayor 2012

I.D. NUMBER
1325587

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)
2/21/12	Altaffer, Joyce	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	300.00	300.00	300.00
2/22/12	Sadler, David	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	350.00	350.00	350.00
2/25/12	Kolz, Kenneth	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	100.00	100.00	100.00
2/19/12	Edwards, Bill	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	200.00	200.00	200.00
2/23/12	King, Karen	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Business Manager Valley Veterinary Clinic	500.00	500.00	500.00
			SUBTOTAL $	1,450.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period
from January 1, 2012
through June 30, 2012

CALIFORNIA FORM 460

NAME OF FILER
People for Bob Huber-Mayor 2012

I.D. NUMBER
1325587

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)
2/22/12	Slinger, Scott	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner Iceoplex Ice Arena	250.00	250.00	250.00
2/27/12	Deese, Susan	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Banker Union Bank	100.00	100.00	100.00
2/27/12	Swink, Mary	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	250.00	250.00	250.00
2/29/12	Law Offices of Daniel A. Higson	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		500.00	500.00	500.00
2/29/12	Strathearn, Bruce	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	125.00	125.00	125.00
			SUBTOTAL $	1,225		

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IND – Individual
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Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period
from January 1, 2012
through June 30, 2012

CALIFORNIA FORM 460

NAME OF FILER
People for Bob Huber-Mayor 2012

I.D. NUMBER
1325587

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)
3/1/12	Miller, David	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	100.00	100.00	100.00
3/1/12	Dorhout, Kevin	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Attorney Kevin L. Dorhout, Attorney at Law	100.00	100.00	100.00
3/7/12	Walker, Gary	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Engineer Gary Walker Associates	250.00	250.00	250.00
3/7/12	Shigoka, Yoshio	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	250.00	250.00	250.00
3/8/12	Construction by DeMill	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		200.00	200.00	200.00
			SUBTOTAL $	900.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA FORM 460

Statement covers period
from January 1, 2012
through June 30, 2012

NAME OF FILER
People for Bob Huber-Mayor 2012

I.D. NUMBER
1325587

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)
2/29/12	Pharmaceutic Litho & Label Company	☐IND ☐COM ☒OTH ☐PTY ☐SCC		1,000.00	1,000.00	1,000.00
2/29/12	Henthorn, Ginger	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Self-employed Bend-Pac, Inc.	250.00	250.00	250.00
3/3/12	Lansden, Vonda	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00	100.00	100.00
3/5/12	Baglev, Ted	☒IND ☐COM ☐OTH ☐PTY ☐SCC	VP, Human Resources Amgen, Inc.	100.00	100.00	100.00
3/1/12	Botting, Jim	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00	100.00	100.00
			SUBTOTAL $	1,550.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period
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3/6/12	Theresa's Country Feed & Pet	☐IND ☐COM ☒OTH ☐PTY ☐SCC		1,000.00	1,000.00	1,000.00
3/6/12	Swinks Enterprises (Swinks Towing)	☐IND ☐COM ☒OTH ☐PTY ☐SCC		500.00	500.00	500.00
3/11/12	Renshaw, Robert	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Producer Wheels on a Bus	100.00	100.00	100.00
3/13/12	King, Jim	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	1,000.00	1,000.00	1,000.00
3/13/12	King, Alexis	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Realtor Troop Real Estate	1,000.00	1,000.00	1,000.00
			SUBTOTAL $	3,600.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period
from January 1, 2012
through June 30, 2012

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NAME OF FILER
People for Bob Huber-Mayor 2012

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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)
3/12/12	Rafeh Real Estate & Investments	☐IND ☐COM ☒OTH ☐PTY ☐SCC		1,000.00	1,000.00	1,000.00
3/12/12	Horton, C. Jane	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Jeweler Janes Jewelry	100.00	100.00	100.00
3/15/12	Rauschenberger, Ron	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Insurance Agent RRNLR Partners	500.00	500.00	500.00
3/12/12	Andrade, Michael	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00	100.00	100.00
3/19/12	Tuttle. Susan	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Psychologist Susan Tuttle, PHD	100.00	100.00	100.00
			SUBTOTAL $	1,800.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period
from January 1, 2012
through June 30, 2012

CALIFORNIA FORM 460

NAME OF FILER
People for Bob Huber-Mayor 2012

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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)
3/21/12	Simi Pacific Building Supplies	☐IND ☐COM ☒OTH ☐PTY ☐SCC		500.00	500.00	500.00
3/26/12	Groff, Susan	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Contractor Northwest Excavation Co. Inc.	500.00	500.00	500.00
3/24/12	Erbe, Richard	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Law Offices of Richard S. Erbe	100.00	100.00	100.00
3/26/12	LCB & Associates	☐IND ☐COM ☒OTH ☐PTY ☐SCC		500.00	500.00	500.00
3/30/12	Absmeier. John	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Consultant Personnel Advisors, Inc.	100.00	100.00	100.00
			SUBTOTAL $	1,700.00		

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IND – Individual
COM – Recipient Committee (other than PTY or SCC)
OTH – Other
PTY – Political Party
SCC – Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from January 1, 2012
through June 30, 2012

CALIFORNIA FORM 460

NAME OF FILER
People for Bob Huber-Mayor 2012

I.D. NUMBER
1325587

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)
4/4/12	Weiner, Ted	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CEO TRC Medical, Inc.	1,000.00	1,000.00	1,000.00
4/4/12	Fried, Larry	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Property Management Jard Co., Inc.	250.00	250.00	250.00
4/4/12	Ads Unlimited, Inc. (Welcome to the Neighborhood)	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	Publisher Ads Unlimited, Inc.	250.00	250.00	250.00
4/1/12	Cadwell, Steve	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Sales Securus, Inc.	200.00	200.00	200.00
4/7/12	Frova, Barbara	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CEO Canova Corp.	250.00	250.00	250.00
			SUBTOTAL $	1,950.00		

*Contributor Codes
IND – Individual
COM – Recipient Committee (other than PTY or SCC)
OTH – Other
PTY – Political Party
SCC – Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

Statement covers period
from January 1, 2012
through June 30, 2012

CALIFORNIA FORM 460

NAME OF FILER
People for Bob Huber-Mayor 2012

I.D. NUMBER
1325587

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)
4/10/12	Dave's Towing	☐IND ☐COM ☒OTH ☐PTY ☐SCC		150.00	150.00	150.00
4/10/12	Wales, Scott	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Mathemetician State of California	250.00	250.00	250.00
4/11/12	Stermer, Richard	☒IND ☐COM ☐OTH ☐PTY ☐SCC	CPA Hoffman, Stermer & Associates	250.00	250.00	250.00
4/6/12	Gross, Loliv	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Artist Studio G Art	250.00	250.00	250.00
3/8/12	Ralph, David	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Gen. Mgr. Simi Valley Cultural Arts Center	250.00	250.00	250.00
			SUBTOTAL $	1,150.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from January 1, 2012
through June 30, 2012

CALIFORNIA FORM 460

NAME OF FILER
People for Bob Huber-Mayor 2012

I.D. NUMBER
1325587

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)
4/7/12	Payne, Brian	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Engineer EDM Services, Inc.	500.00	500.00	500.00
4/11/12	Isbell, Phil	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	President, Simi Valley GMC	500.00	500.00	500.00
4/16/12	Sundeen, Randall	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Attorney Law Offices of Randall J. Sundeen	100.00	100.00	100.00
4/15/12	Lindsev, Karen	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Realtor Troop Real Estate	250.00	250.00	250.00
4/16/12	Law Offices of Richard S. Rabbin	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		250.00	250.00	250.00
			SUBTOTAL $	1,600.00		

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OTH – Other
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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from January 1, 2012
through June 30, 2012

CALIFORNIA FORM 460

NAME OF FILER
People for Bob Huber-Mayor 2012

I.D. NUMBER
1325587

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)
4/16/12	Austel, Sharon	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	400.00	400.00	400.00
4/16/12	Havens, Patricia	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	100.00	100.00	100.00
4/11/12	Toledo, Lynne	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner Pyramid Machining	200.00	200.00	200.00
4/13/12	Ward, Nancy	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Accountant Bernstein & Associates	250.00	250.00	250.00
4/16/12	Smith, Brian	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	250.00	250.00	250.00
			SUBTOTAL $	1,200.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from January 1, 2012
through June 30, 2012

CALIFORNIA FORM 460

NAME OF FILER
People for Bob Huber-Mayor 2012

I.D. NUMBER
1325587

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)
4/17/12	Hartfield Financial and Insurance Services	☐IND ☐COM ☒OTH ☐PTY ☐SCC		125.00	125.00	125.00
4/20/12	Tanner, Marla	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00	100.00	100.00
4/17/12	Coulter, Merle	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	250.00	250.00	250.00
4/17/12	Keith Mashburn for City Council 2010	☐IND ☒COM ☐OTH ☐PTY ☐SCC		250.00	250.00	250.00
4/12/12	Fishback, Carol	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	250.00	250.00	250.00
			SUBTOTAL $	975.00		

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SCC – Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from January 1, 2012
through June 30, 2012

CALIFORNIA FORM 460

NAME OF FILER
People for Bob Huber-Mayor

I.D. NUMBER
1325587

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)
4/18/12	Skidmore, Raymond	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CPA Skidmore, Markell & Co.	350.00	350.00	350.00
4/24/12	Seymore & Associates	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		250.00	250.00	250.00
4/18/12	Pruner, Jacqeline	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	100.00	100.00	100.00
4/18/12	Firefighters for Better Government	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		500.00	500.00	500.00
4/24/12	Kirby Chrysler Jeep Dodge Ram	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		250.00	250.00	250.00
			SUBTOTAL $	1,450		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from January 1, 2012
through June 30, 2012

CALIFORNIA FORM 460

NAME OF FILER
People for Bob Huber-Mayor 201

I.D. NUMBER
1325587

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)
4/25/12	First Auto Group (First KIA)	☐IND ☐COM ☒OTH ☐PTY ☐SCC		250.00	250.00	250.00
4/27/12	Straver. Dick	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	150.00	150.00	150.00
4/27/12	Savell, Becky	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Financial Advisor Apex Financial Services	150.00	150.00	150.00
4/13/12	Dutton, Eric	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Owner Dutton Plumbing	625.00	625.00	625.00
4/13/12	Zundel. Teresa	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Housewife	625.00	625.00	625.00
			SUBTOTAL $	1,800		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from January 1, 2012
through June 30, 2012

CALIFORNIA FORM 460

NAME OF FILER
People for Bob Huber-Mayor 2012

I.D. NUMBER
1325587

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)
4/25/12	DD Film and Television, Inc.	☐IND ☐COM ☒OTH ☐PTY ☐SCC		125.00	125.00	125.00
4/27/12	Spagna, Angela	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Dr. of Chiropractic Vitality & Wellness Center	100.00	100.00	100.00
5/2/12	Rauschenberger, Lesley	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Partner RRLNR Partnership	250.00	250.00	250.00
5/2/12	Latham Vocational Services	☐IND ☐COM ☒OTH ☐PTY ☐SCC		250.00	250.00	250.00
5/1/12	Hirsch, Josie	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Engineer Quad Eight, Inc.	250.00	250.00	250.00
			SUBTOTAL $	975.00		

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COM – Recipient Committee (other than PTY or SCC)
OTH – Other
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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from January 1, 2012
through June 30, 2012

CALIFORNIA FORM 460

NAME OF FILER
People for Bob Huber-Mayor 2012

I.D. NUMBER
1328857

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)
5/3/12	Simi Valley Car Wash (AMY Inc.)	☐IND ☐COM ☒OTH ☐PTY ☐SCC		150.00	150.00	150.00
5/3/12	Marvin, Terry	☒IND ☐COM ☐OTH ☐PTY ☐SCC	PR Consultant TBM Associates	150.00	150.00	150.00
5/5/12	Barbabella, Bob	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	250.00	250.00	250.00
5/5/12	Handelsman, Lew	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Business Consultant Unisource Services, Inc	250.00	250.00	250.00
5/5/12	Burge, Greg	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Financial Advisor 401 Plan, Inc.	500.00	500.00	500.00
			SUBTOTAL $	1,300.00		

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COM – Recipient Committee (other than PTY or SCC)
OTH – Other
PTY – Political Party
SCC – Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from January 1, 2012
through June 30, 2012

CALIFORNIA FORM 460

NAME OF FILER
People for Bob Huber-Mayor 2012

I.D. NUMBER
1325587

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)
5/4/12	Owen, Rich	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Owner All Valley RV Storage	200.00	200.00	200.00
5/2/12	Abruzzese, Joanne	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Social Services Summit Community Services	250.00	250.00	250.00
5/10/12	Moradi, Isaac	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Investor ICO Investments	1,000.00	1,000.00	1,000.00
5/10/12	Moradi, Jacqline	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Housewife	1,000.00	1,000.00	1,000.00
5/11/12	Simi Valley Insurance	☐IND ☐COM ☒OTH ☐PTY ☐SCC		350.00	350.00	350.00
			SUBTOTAL $	2,800.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from January 1, 2012
through June 30, 2012

CALIFORNIA FORM 460

NAME OF FILER
People for Bob Huber-Mayor 2012

I.D. NUMBER
1325587

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)
5/8/12	Thomas, Debbie	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Direct Mailer Aaron, Thomas & Associates	500.00	500.00	500.00
6/25/12	Capaldi, Catherine	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Grading Contractor Pacific Rim Grading, Inc.	499.00	499.00	499.00
6/29/12	Strickland, Anthony	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Senator State of California	1,000.00	1,000.00	1,000.00
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
			SUBTOTAL $	1,999.00		

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Schedule B – Part 1
Loans Received

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

Statement covers period from January 1, 2012 through June 30, 2012

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: People for Bob Huber-Mayor 2012

I.D. NUMBER: 1325587

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	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Robert Huber †☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Business Owner, Law Office of Robert O. Huber	$ 41000.00	$ 0	☐ PAID $ 0 ☐ FORGIVEN $ 0	$ 41000.00 NONE DATE DUE	0 % RATE $ 0	$ 41000 2010 DATE INCURRED	CALENDAR YEAR $ ____ PER ELECTION** $ ____
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$ ____	$ ____	☐ PAID $ ____ ☐ FORGIVEN $ ____	$ ____ DATE DUE	____ % RATE $ ____	$ ____ DATE INCURRED	CALENDAR YEAR $ ____ PER ELECTION** $ ____
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$ ____	$ ____	☐ PAID $ ____ ☐ FORGIVEN $ ____	$ ____ DATE DUE	____ % RATE $ ____	$ ____ DATE INCURRED	CALENDAR YEAR $ ____ PER ELECTION** $ ____
		SUBTOTALS $ 0		$ 0	$ 41000.00	$ 0 (Enter (e) on Schedule E, Line 3)		

Schedule B Summary

1. Loans received this period ..... $ 0
   (Total Column (b) plus unitemized loans less than $100.)
2. Loans paid or forgiven this period ..... $ 0
   (Total Column (c) plus loans under $100 paid or forgiven.)
   (Include loans paid by a third party that are also itemized on Schedule A.)
3. Net change this period. (**Subtract** Line 2 from Line 1.) ..... **NET** $ 0
   (May be a negative number)
   Enter the net here and on the Summary Page, Column A, Line 2.

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

** If required.

† Contributor Codes
IND – Individual COM – Recipient Committee (other than PTY or SCC) OTH – Other PTY – Political Party SCC – Small Contributor Committee

Schedule C
Nonmonetary Contributions Received

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

SCHEDULE C
CALIFORNIA FORM 460

Statement covers period
from January 1, 2012
through June 30, 2012

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
People for Bob Huber-Mayor 2012

I.D. NUMBER
1325587

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)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
5/5/12	Wagner, Robert	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Co-owner Magnavino Winery	Wine	1,000.00	1,000.00	1,000.00
5/5/12	Wagner, Barbara	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Co-owner Magnavino Winery	Wine	250.00	250.00	250.00
5/5/12	Marsch, Tom	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Owner The Margarita Man	Margarita Machine and Mix	250.00	250.00	250.00
5/5/12	The Junkyard Cafe	☐IND ☐COM ☒OTH ☐PTY ☐SCC		Tequila	200.00	200.00	200.00

Attach additional information on appropriately labeled continuation sheets. **SUBTOTAL $** 1,700.00

Schedule C Summary

1. Amount received this period – nonmonetary contributions of $100 or more. (Include all Schedule C subtotals.) ..... $ 1,700.00
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $ 126.00
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) ..... **TOTAL $** 1,826.00

*Contributor Codes
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Schedule E
Payments Made

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

Statement covers period
from January 1, 2012
through June 30, 2012

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
People for Bob Huber-Mayor 2012

I.D. NUMBER
1325587

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
Simi Valley Chamber of Commerce	CTB	Chamber membership	197.00
All About Printing	OFC	Letterhead and envelopes	129.75
Media Temple	WEB	Web site hosting	200.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL $ 526.75

Schedule E Summary

1. Payments made this period of $100 or more. (Include all Schedule E subtotals.) ..... $ 8403.78
2. Unitemized payments made this period of under $100 ..... $ 630.62
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 $ 9034.40

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period from January 1, 2012 through June 30, 2012

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: People for Bob Huber-Mayor 2012

I.D. NUMBER: 1325587

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	DESCRIPTION OF PAYMENT	AMOUNT PAID
United States Postal Service, Simi Valley Mt. McCoy Station	POS	Postage for mailings	135.00
Will Huddleston	WEB	Web site design updates	300.00
United States Postal Service Simi Valley Main Post Office	POS	Postage for mailings	405.00
All About Printing	FND	Fundraiser Invitations	699.07
Merchlab	CMP	Tote bags and t-shirts	942.50

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL $ 2,481.57

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period from January 1, 2012 through June 30, 2012

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: People for Bob Huber-Mayor 2012

I.D. NUMBER: 1325587

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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
Taqueria El Tapatio	FND	Food for Fundraiser	1,388.69
Madeline Landry	FND	Cleaning for host home for fundraiser	250.00
Ernesto Rodriguez	FND	Set-up and parking for fundraiser	125.00
Jose Rodriguez	FND	Set-up and parking for fundraiser	125.00
Pam Perry	CMP	Helium for balloons for street fair	300.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL $ 2,188.69

Schedule E (Continuation Sheet) Payments Made

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Statement covers period from January 1, 2012 through June 30, 2012

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: People for Bob Huber-Mayor 2012

I.D. NUMBER: 1325587

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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
Target.com	FND	Margarita set-Cinco de Mayo event	226.65
Simi Valley Chamber of Commerce	MTG	Booth fee, Simi Valley Street Fair	150.00
Balloons Tomorrow balloonstomorrow.com	CMP	Balloons for street fair givaways	189.00
Party City	FND	Decorations, paper goods for Cinco de Mayo event	141.12
National Tax Limitation Committee Newsletter	LIT	Slate mailer	500.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL $ 1206.77

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period from January 1, 2012 through June 30, 2012

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: People for Bob Huber-Mayor 2012

I.D. NUMBER: 1325587

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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
California Public Safety Newsletter & Voters Guide	LIT	Slate mailer	500.00
Save Prop. 13 Newsletter	LIT	Slate mailer	500.00
Woman's Voice	LIT	Slate mailer	500.00
Joel Fox's Small Business Action Committee	LIT	Slate mailer	500.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL $ 2000.00

Schedule I
Miscellaneous Increases to Cash

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

Statement covers period
from January 1, 2012
through June 30, 2012

SCHEDULE I
CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
People for Bob Huber-Mayor 2012

I.D. NUMBER
1325587

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 $

Schedule I Summary

1. Increases to cash of $100 or more this period. ..... $ 0
2. Unitemized increases to cash under $100 this period. ..... $ 9.50
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) ..... $ 0
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) ..... TOTAL $ 9.50