COVER PAGE

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

SEE INSTRUCTIONS ON REVERSE

Statement covers period from 7/1/12 through 9/30/12

Date of election if applicable: (Month, Day, Year) 11/6/12

Date Stamp: RECEIVED CITY OF SIMI VALLEY 2012 OCT -5 PM 3:37 OFFICE OF CITY CLERK BY [illegible]

CALIFORNIA FORM 460

Page 1 of 27

For Official Use Only

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

2. Type of Statement:

- [x] 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

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE): SOJKA for City Council 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: Virginia Hayward

MAILING ADDRESS

CITY | STATE | ZIP CODE | AREA CODE/PHONE

NAME OF ASSISTANT TREASURER, IF ANY: Steve Sojka

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 10/5/12 (Date) By [signature] (Signature of Treasurer or Assistant Treasurer)

Executed on 10/5/12 (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

Steve Sojka

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

Simi Valley City Council Member

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
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. Primarily Formed 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 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 ☐ 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

Statement covers period from 7/1/12 through 9/30/12

CALIFORNIA FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: SOJKA for City Council 2012

I.D. NUMBER: 1349631

Contributions Received

		Column A (TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES))	Column B (CALENDAR YEAR TOTAL TO DATE)
1. Monetary Contributions	Schedule A, Line 3	$ 33,545.00	$ 33,545.00
2. Loans Received	Schedule B, Line 3	Ø	Ø
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	$ 33,545.00	$ 33,545.00
4. Nonmonetary Contributions	Schedule C, Line 3	3,745.00	3,745.00
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	$ 37,290.00	$ 37,290.00

Expenditures Made

6. Payments Made	Schedule E, Line 4	$ 8,852.01	$ 8,852.01
7. Loans Made	Schedule H, Line 3	Ø	Ø
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	$ 8,852.01	$ 8,852.01
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	Ø	Ø
10. Nonmonetary Adjustment	Schedule C, Line 3	Ø	Ø
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	$ 8,852.01	$ 8,852.01

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	$ Ø
13. Cash Receipts	Column A, Line 3 above	33,545.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4	Ø
15. Cash Payments	Column A, Line 8 above	8,852.01
16. **ENDING CASH BALANCE**	Add Lines 12 + 13 + 14, then subtract Line 15	$ 24,692.99

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

17. LOAN GUARANTEES RECEIVED — Schedule B, Part 2 — $ Ø

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See Instructions on reverse	$ Ø
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	$ Ø

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
/ /	$
/ /	$

*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 7/1/12
through 9/30/12

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: SOJKA for City Council 2012

I.D. NUMBER: 1349631

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)
8/11/12	Paul Miller	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Mayor	$100 $150	$250	
8/13/12	Dreamscape	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		$100	$100	
8/13/12	Anderson Rubbish	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		$500 $150	$650	
8/14/12	Angela Kolarek	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Vice President On Assignment	$1,000	$1,000	
8/14/12	Swink Enterprises	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		$100 $150	$250	
			SUBTOTAL $ 2,250			

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 33,025.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 520.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL $ 33,545

*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 A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

CALIFORNIA FORM 460

Statement covers period
from 7/1/12
through 9/30/12

NAME OF FILER: SOJKA for City Council 2012

I.D. NUMBER: 1349631

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)
8/15/12	Rafeh Real Estate & Investments	☐IND ☐COM ☒OTH ☐PTY ☐SCC		$250	$250	
8/16/12	Bill Klepper	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Financial Advisor RNC Capital Management	$125	$125	
8/15/12	Simi Valley Mattress	☐IND ☐COM ☒OTH ☐PTY ☐SCC		$100	$100	
8/19/12	Linda Manios	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Housewife	$250	$250	
8/15/12	Bill Martin	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	$100	$100	
			SUBTOTAL $	825		

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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.)

CALIFORNIA FORM **460**

Statement covers period
from 7/1/12
through 9/30/12

NAME OF FILER: SOJKA for City Council 2012

I.D. NUMBER: 1349631

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)
8/19/12	Catherine Gesell	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Housewife	$100	$100	
8/21/12	Dave Di Tomaso	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	owner Subway	$250	$250	
8/24/12	Sheralee Keowen	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Housewife	$100	$100	
8/23/12	Myan Spaccarelli	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self employed Developer/Investor	$1,000	$1,000	
8/23/12	Simi Valley Laundry	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		$100	$100	
			SUBTOTAL $	1,550		

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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 7/1/12
through 9/30/12

CALIFORNIA FORM 460

NAME OF FILER: SOJKA for City Council

I.D. NUMBER: 1349631

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)
8/22/12	Dave's Towing Service	☐IND ☐COM ☒OTH ☐PTY ☐SCC		$150	$150	
8/22/12	The Vineyards	☐IND ☐COM ☒OTH ☐PTY ☐SCC		$1,000	$1,000	
8/26/12	Susan Kriseley	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Nurse Northridge Hospital	$100	$100	
8/28/12	Randall Sundeen	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Self employed Attorney	$100 $100	$200	
8/28/12	Sasan Nikoomanesh	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Loan Agent Bank of America	$100	$100	
			SUBTOTAL $	1,550		

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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.)

CALIFORNIA FORM **460**

Statement covers period
from 7/1/12
through 9/30/12

NAME OF FILER: JOJKA for City Council 2012

I.D. NUMBER: 1349631

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)
8/29/12	Eileen Strayer	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$100	$100	
8/28/12	Virginia Torgerson	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$100	$100	
8/30/12	Law offices of Mitch Green	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		$250	$250	
8/29/12	Wolf Real Estate Investments	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		$100	$100	
8/31/12	Robert Harris	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner/Broker Keller Williams Realty	$1,000	$1,000	
			SUBTOTAL $	1,550		

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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.)

CALIFORNIA FORM 460

Statement covers period
from 7/1/12
through 9/30/12

NAME OF FILER: SOJKA for City Council 2012

I.D. NUMBER: 1349631

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)
8/31/12	Preferred Health Billing	☐IND ☐COM ☒OTH ☐PTY ☐SCC		$1,000	$1,000	
9/1/12	Alice Collins	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Teacher Simi Valley Unified School District	$100	$100	
9/1/12	Brian Miller	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Chief of Staff Supervisor Peter Foy	$100	$100	
9/12/12	Jana Szymanski	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Housewife	$250 $150	$400	
9/12/12	WoodRanch Center LLC	☐IND ☐COM ☒OTH ☐PTY ☐SCC		$1,000	$1,000	
			SUBTOTAL $	2,600		

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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.)

CALIFORNIA FORM **460**

Statement covers period
from 7/1/12
through 9/30/12

NAME OF FILER: SOJKA for City Council 2012

I.D. NUMBER: 1349631

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)
8/21/12	Sandra Underwood	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Housewife	$1,000	$1,000	
8/21/12	Kevin Underwood	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self employed Underwood Ins Agency	$1,000	$1,000	
8/14/12	Richard Simpson	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$150 $100	$250	
8/24/12	Jonathan Friedman	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self employed Jamstreet Development	$1,000	$1,000	
8/16/12	Tapo Pharmacy	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		$250	$250	
			SUBTOTAL $	3,500		

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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.)

CALIFORNIA FORM 460

Statement covers period
from 7/1/12
through 9/30/12

NAME OF FILER: SOJKA for City Council 2012

I.D. NUMBER: 1349631

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)
9/15/12	Jean Luttringer	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$150	$150	
9/10/12	Bill McCoy	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self employed Broker Match	$150	$150	
9/14/12	Tiara Claxton	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Sales Safilo	$150	$150	
9/5/12	Timothy Tucker	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	LT Real Estate Investments owner	$500	$500	
9/10/12	Pacific Health Billing	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		$1,000	$1,000	
			SUBTOTAL $	1,950		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period
from 7/1/12
through 9/30/12

CALIFORNIA FORM 460

NAME OF FILER: SOJKA for City Council 2012

I.D. NUMBER: 1349631

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)
9/10/12	Gary Colbert	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self employed Pacific Health Billing	$ 1,000	$ 1,000	
9/10/12	Pam Colbert	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Housewife	$ 1,000	$ 1,000	
9/7/12	Joni Egan	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$ 150	$ 150	
9/1/12	Samantha Carrington	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self employed shopping ctr. owner	$ 100	$ 100	
9/7/12	Sharon Martin	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$ 150	$ 150	
			SUBTOTAL $	2,400		

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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 7/1/12
through 9/30/12

CALIFORNIA FORM 460

NAME OF FILER: SOJKA for City Council 2012

I.D. NUMBER: 1349631

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)
9/8/12	Brian Iverson	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	owner Iverson construction	$150	$150	
9/3/12	Shirley Howard	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$100	$100	
8/14/12	Denny's Restaurant	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		$100	$100	
9/4/12	City Auto Body	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		$250	$250	
9/6/12	Kathi Senella	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Housewife	$1,000	$1,000	
			SUBTOTAL $	1,600		

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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.)

CALIFORNIA FORM **460**

Statement covers period
from 7/1/12
through 9/30/12

NAME OF FILER: SOJKA for City Council 2012

I.D. NUMBER: 1349631

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)
9/18/12	California Coast Inspections	☐IND ☐COM ☒OTH ☐PTY ☐SCC		$100	$100	
9/14/12	Wendy Green	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Legal Secretary Mitch Green Esq.	$250	$250	
9/18/12	James Vigdor	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Operations Manager Alcoa Fastening Systems	$100	$100	
9/17/12	Jon Hitz	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Manager Jim's Tire Center	$150	$150	
9/18/12	Howard Herron	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Self employed CA Coastal Inspections	$200	$200	
			SUBTOTAL $	800		

*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 A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

CALIFORNIA FORM **460**

Statement covers period
from 7/1/12
through 9/30/12

NAME OF FILER: SOJKA for City Council 2012

I.D. NUMBER: 1349631

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)
9/17/12	George Thomas Enterprises	☐IND ☐COM ☑OTH ☐PTY ☐SCC		$ 200	$ 200	
9/19/12	Ray Holmes	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Broker Colonial Realty	$ 1,000	$ 1,000	
9/16/12	Susan Jamison	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Housewife	$ 150	$ 150	
9/18/12	Hesperia Plaza LLC	☐IND ☐COM ☒OTH ☐PTY ☐SCC		$ 500	$ 500	
9/18/12	Screenland Development	☐IND ☐COM ☑OTH ☐PTY ☐SCC		$ 500	$ 500	
			SUBTOTAL $	2,350		

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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.)

CALIFORNIA FORM **460**

Statement covers period
from 7/1/12
through 9/30/12

NAME OF FILER: Sojka for City Council 2012

I.D. NUMBER: 1349631

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)
9/13/12	Bryan Fleming	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Real Estate Broker	$ 100	$ 100	
9/18/12	K & J Auto Exchange	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		$ 1,000	$ 1,000	
9/17/12	Matt Gee & Associates	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		$ 500	$ 500	
9/17/12	Blue Sky Insurance Agency	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		$ 1,000	$ 1,000	
9/21/12	7-Eleven	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		$ 200	$ 200	
			SUBTOTAL $	2,800		

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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.)

CALIFORNIA FORM **460**

Statement covers period
from 7/1/12
through 9/30/12

NAME OF FILER: SOJKA for City Council 2012

I.D. NUMBER: 1349631

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)
9/20/12	Whitney's Auto & RV	☐IND ☐COM ☒OTH ☐PTY ☐SCC		$300	$300	
9/22/12	Brian Simpson	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Architect Intevit	$150	$150	
9/21/12	Peter Kiesecker	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Real Estate Standard Pacific	$1,000	$1,000	
9/27/12	Houghton Law Group	☐IND ☐COM ☒OTH ☐PTY ☐SCC		$100	$100	
9/19/12	Sycamore Shell	☐IND ☐COM ☒OTH ☐PTY ☐SCC		$150	$150	
			SUBTOTAL $	1,700		

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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.)

CALIFORNIA FORM **460**

Statement covers period
from 7/1/12
through 9/30/12

NAME OF FILER: SOJKA for City Council 2012

I.D. NUMBER: 1349631

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)
9/26/12	Linda Bodnar	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Housewife	$150	$150	
9/23/12	Jim Robison	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Accountant Amgen Inc.	$100	$100	
9/27/12	Char Jaegar	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Housewife	$150	$150	
9/27/12	Greg Riegert	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	$150	$150	
9/27/12	Pacific Coast Coin + Collateral	☐IND ☐COM ☒OTH ☐PTY ☐SCC		$300	$300	
			SUBTOTAL $	850		

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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.)

CALIFORNIA FORM 460

Statement covers period
from 7/1/12
through 9/30/12

NAME OF FILER: JOJKA for City Council 2012

I.D. NUMBER: 1349631

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)
9/27/12	Dolores Cavanaugh	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Bank Manager First California Bank	$100	$100	
9/27/12	Corinna White	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Housewife	$1,000	$1,000	
9/27/12	Louis Santor	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Self employed Financial Consultant	$1,000	$1,000	
9/27/12	Jeff Bannon	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Geologist Western Solutions	$100	$100	
9/25/12	Simi Valley Corporate Point	☐IND ☐COM ☒OTH ☐PTY ☐SCC		$150	$150	
			SUBTOTAL $	2,350		

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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.)

CALIFORNIA FORM **460**

Statement covers period
from 7/1/12
through 9/30/12

NAME OF FILER: Sojka for City Council 2012

I.D. NUMBER: 1349631

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)
9/27/12	Gary Seaton	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Commercial Real Estate N.A.I capitol	$ 250	$ 250	
9/27/12	Dan Diez	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	President S&S Portable Services	$ 500	$ 500	
9/27/12	Gillibrand Co Inc.	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		$ 1,000	$ 1,000	
9/24/12	John McClure	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Real Estate Hillwood Capitol	$ 500	$ 500	
9/27/12	Ken Crossman	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Financial Advisor Edward Jones Investments	$ 150	$ 150	
			SUBTOTAL $	2,400		

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Schedule E
Payments Made

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

Statement covers period
from 7/1/12
through 9/30/12

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
SOJKA for City Council 2012

I.D. NUMBER
1349631

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
Mailbox Plus	POS	Postage. Stamps	$147.00
Office Depot	LIT	Ink for Invitations	$415.55
Colby Posters	CMP	Campaign Signs	$2,449.05

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

SUBTOTAL $ 3,011.60

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 7,698.81
2. Unitemized payments made this period of under $100 ..... $ 1,153.20
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ..... $ Ø
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ..... TOTAL $ 8,852.01

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period from 7/1/12 through 9/30/12

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: SOJKA for City Council 2012

I.D. NUMBER: 1349631

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
Thumbprint Printers	CMP	Stationary	$ 249.89
US Postmaster	POS	Postage	$ 270
Simi Valley Police Foundation	CVC	Tee sign	$ 100
Steve Sojka	FIL	Re-Imbursement - Ballot Candidate Statement	$ 950
Simi Valley Historical Society	CVC	Ghost Tour Banner	$ 150

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

SUBTOTAL $ 1,719.89

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period from 7/1/12 through 9/30/12

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: SOJKA for City Council 2012

I.D. NUMBER: 1349631

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
Dollarwize Publications	PRT	Ad	$525.00
BVI Apparel	CMP	Campaign T-Shirts	$503.00
Reds BBQ	FND	Fundraiser Food	$145.78
Lowe's	FND	Fundraiser Supplies	$124.12
Skyline Flowers	FND	Flowers for Fundraiser	$113.00

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

SUBTOTAL $ 1,410.90

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period from 7/1/12 through 9/30/12

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: SOJKA for City Council 2012

I.D. NUMBER: 1349631

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
American Express	CMP	Footballs for Parade	$678.96
Nicole Andrews Photography	CMP	Photos for Campaign	$175.00
Tri Valley Rentals	FND	Linens & Tables	$427.46
Mike West Entertainment	FND	Music for Fundraiser	$275.00
[redacted]			

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

SUBTOTAL $ 1,556.42

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 7/1/12
through 9/30/12

Page 25 of 27

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
SOJKA for City Council

I.D. NUMBER
1349631

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)
9/27/12	Go Fish Sushi	☐IND ☐COM ☒OTH ☐PTY ☐SCC		Food	$150	$150	
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					

Attach additional information on appropriately labeled continuation sheets. **SUBTOTAL $** 150

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) ..... $ 3,675
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $ 70
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 $** 3,745.00

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IND – Individual
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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 7/1/12
through 9/30/12

Page 26 of 27

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Sojka for City Council 2012

I.D. NUMBER: 1349631

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)
9/24/12	Sunstone Winery	☐IND ☐COM ☒OTH ☐PTY ☐SCC		Wine	$600	$600	
9/27/12	Southern Wine	☐IND ☐COM ☒OTH ☐PTY ☐SCC		Wine	$300	$300	
9/27/12	Monte De Oro Winery	☐IND ☐COM ☒OTH ☐PTY ☐SCC		Wine	$725	$725	
9/27/12	Hummingbird Nest Ranch	☐IND ☐COM ☒OTH ☐PTY ☐SCC		Facility	$975	$975	

Attach additional information on appropriately labeled continuation sheets. SUBTOTAL $ 2,790

Schedule C Summary

See page 25 of 27

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) ..... $
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $
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 $

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Schedule C
Nonmonetary Contributions Received

Type or print in ink.
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SCHEDULE C
CALIFORNIA FORM 460

Statement covers period
from 7/1/12
through 9/30/12

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Sojka for City Council 2012

I.D. NUMBER: 1349631

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)
9/27/12	Subway	☐IND ☐COM ☒OTH ☐PTY ☐SCC		Food	$180	$180	
9/27/12	Viva La Pasta	☐IND ☐COM ☒OTH ☐PTY ☐SCC		Food	$140	$140	
9/27/12	Grand Vista	☐IND ☐COM ☒OTH ☐PTY ☐SCC		Food	$165	$165	
9/27/12	Senor Gomez	☐IND ☐COM ☒OTH ☐PTY ☐SCC		Food	$250	$250	

Attach additional information on appropriately labeled continuation sheets. **SUBTOTAL $** 735

Schedule C Summary

See page 25 of 27

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) ..... $
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $
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 $**

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IND – Individual
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SCC – Small Contributor Committee