Recipient Committee
Campaign Statement
Cover Page

Statement covers period from Jan 1, 2016 through June 30, 2016

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

2. Type of Statement:
   - [ ] Preelection Statement
   - [X] Semi-annual Statement
   - [ ] Termination Statement
     (Also file a Form 410 Termination)
   - [ ] Amendment (Explain below)

3. Committee Information
   - I.D. NUMBER: 1368536
   - COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE):
     Glen Becerra For City Council 2014
   - STREET ADDRESS (NO P.O. BOX):
   - CITY:
     Simi Valley
   - STATE:
     CA
   - ZIP CODE:
     93063
   - MAILING ADDRESS:
     Simi Valley CA 93063
   - 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 7/10/16
   By ____________________________
   Signature of Treasurers or Assistant Treasurer

   Executed on 7/10/16
   By ____________________________
   Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Official of Sponsor

   Executed on ____________________
   By ____________________________
   Signature of Controlling Officeholder, Candidate, State Measure Proponent

   Executed on ____________________
   By ____________________________
   Signature of Controlling Officeholder, Candidate, State Measure Proponent
5. Officeholder or Candidate Controlled Committee

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>Glen Becerra</th>
</tr>
</thead>
<tbody>
<tr>
<td>OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)</td>
<td>City Council Member Simi Valley</td>
</tr>
<tr>
<td>CITY</td>
<td>Simi Valley</td>
</tr>
<tr>
<td>STATE</td>
<td>CA</td>
</tr>
</tbody>
</table>

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.

<table>
<thead>
<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF TREASURER</td>
<td>CONTROLLED COMMITTEE?</td>
</tr>
<tr>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>COMMITTEE ADDRESS</td>
<td>STREET ADDRESS (NO P.O. BOX)</td>
</tr>
<tr>
<td>CITY</td>
<td>STATE</td>
</tr>
<tr>
<td>AREA CODE/PHONE</td>
<td></td>
</tr>
</tbody>
</table>

6. Primarily Formed Ballot Measure Committee

<table>
<thead>
<tr>
<th>NAME OF BALLOT MEASURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>BALLOT NO. OR LETTER</td>
</tr>
<tr>
<td>SUPPORT</td>
</tr>
</tbody>
</table>

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.

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
<th>SUPPORT</th>
<th>OPPOSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
<td>SUPPORT</td>
<td>OPPOSE</td>
</tr>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
<td>SUPPORT</td>
<td>OPPOSE</td>
</tr>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
<td>SUPPORT</td>
<td>OPPOSE</td>
</tr>
</tbody>
</table>

Attach continuation sheets if necessary
## Contributions Received

1. **Monetary Contributions**
   - **Schedule A, Line 3**
   - **Column A**: $\text{[Amount]}$
   - **Column B**: $\text{[Amount]}$

2. **Loans Received**
   - **Schedule B, Line 3**
   - **Column A**: $\text{[Amount]}$
   - **Column B**: $\text{[Amount]}$

3. **SUBTOTAL CASH CONTRIBUTIONS**
   - **Add Lines 1 + 2**
   - **Column A**: $\text{[Amount]}$
   - **Column B**: $\text{[Amount]}$

4. **Nonmonetary Contributions**
   - **Schedule C, Line 3**
   - **Column A**: $\text{[Amount]}$
   - **Column B**: $\text{[Amount]}$

5. **TOTAL CONTRIBUTIONS RECEIVED**
   - **Add Lines 3 + 4**
   - **Column A**: $\text{[Amount]}$
   - **Column B**: $\text{[Amount]}$

## Expenditures Made

6. **Payments Made**
   - **Schedule E, Line 4**
   - **Column A**: $\text{[Amount]}$
   - **Column B**: $\text{[Amount]}$

7. **Loans Made**
   - **Schedule H, Line 3**
   - **Column A**: $\text{[Amount]}$
   - **Column B**: $\text{[Amount]}$

8. **SUBTOTAL CASH PAYMENTS**
   - **Add Lines 6 + 7**
   - **Column A**: $\text{[Amount]}$
   - **Column B**: $\text{[Amount]}$

9. **Accrued Expenses (Unpaid Bills)**
   - **Schedule F, Line 3**
   - **Column A**: $\text{[Amount]}$
   - **Column B**: $\text{[Amount]}$

10. **Nonmonetary Adjustment**
    - **Schedule C, Line 3**
    - **Column A**: $\text{[Amount]}$
    - **Column B**: $\text{[Amount]}$

11. **TOTAL EXPENDITURES MADE**
    - **Add Lines 8 + 9 + 10**
    - **Column A**: $\text{[Amount]}$
    - **Column B**: $\text{[Amount]}$

## Current Cash Statement

12. **Beginning Cash Balance**
    - **Previous Summary Page, Line 16**
    - **Column A**: $\text{[Amount]}$
    - **Column B**: $\text{[Amount]}$

13. **Cash Receipts**
    - **Column A, Line 3 above**
    - **Column B**: $\text{[Amount]}$

14. **Miscellaneous Increases to Cash**
    - **Schedule I, Line 4**
    - **Column A**: $\text{[Amount]}$
    - **Column B**: $\text{[Amount]}$

15. **Cash Payments**
    - **Column A, Line 8 above**
    - **Column B**: $\text{[Amount]}$

16. **ENDING CASH BALANCE**
    - **Add Lines 12 + 13 + 14, then subtract Line 15**
    - **Column A**: $\text{[Amount]}$
    - **Column B**: $\text{[Amount]}$

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

17. **LOAN GUARANTEES RECEIVED**
    - **Schedule B, Part 2**
    - **Column A**: $\text{[Amount]}$
    - **Column B**: $\text{[Amount]}$

## Cash Equivalents and Outstanding Debts

18. **Cash Equivalents**
    - **See instructions on reverse**
    - **Column A**: $\text{[Amount]}$
    - **Column B**: $\text{[Amount]}$

19. **Outstanding Debts**
    - **Add Line 2 + Line 9 in Column B above**
    - **Column A**: $\text{[Amount]}$
    - **Column B**: $\text{[Amount]}$

---

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 may be rounded to whole dollars.

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

- **Contributions Received**
  - **From 1/1 through 6/30**: $\text{[Amount]}$
  - **7/1 to Date**: $\text{[Amount]}$

- **Expenditures Made**
  - **From 1/1 through 6/30**: $\text{[Amount]}$
  - **7/1 to Date**: $\text{[Amount]}$

---

**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**: $\text{[Amount]}$

---

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

### Payments Made

**NAME OF FILER**
Glen Becerra for city council 2014

**NAME AND ADDRESS OF PAYEE**

<table>
<thead>
<tr>
<th>Payee Name</th>
<th>I.D. Number</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Secretary of State</td>
<td></td>
<td>FIL</td>
<td>Annual Fee</td>
<td>500.00</td>
</tr>
<tr>
<td>Sacramento, CA 95814</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aaron Thomas &amp; Associates Inc.</td>
<td></td>
<td>LIT</td>
<td>mailing</td>
<td>422.58</td>
</tr>
<tr>
<td>Chatsworth, CA 91311</td>
<td></td>
<td>POS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C. April Boling</td>
<td></td>
<td>PRO</td>
<td></td>
<td>750.00</td>
</tr>
<tr>
<td>San Diego, CA 92119</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**SUBTOTAL $** 1222.58

### Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ................................................................. $ 13,225.85
2. Unitemized payments made this period of under $100 ................................................................. $ 156.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ................................. $ 562.19
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) .............. $ 13,381.95

**FPPC Form 460 (Jan/2016)**
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
## Schedule E (Continuation Sheet)

### Payments Made

Name of Filer: 

Statement covers period from **Jan 1, 2016** through **June 30, 2016**

| I.D. NUMBER | 1368536 |

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

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

**NAME AND ADDRESS OF PAYEE** (IF COMMITTEE, ALSO ENTER I.D. NUMBER)

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Statecraft Inc.</td>
<td>OFC</td>
<td></td>
<td>100.00</td>
</tr>
<tr>
<td>La Jolla, CA, 92037</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**SUBTOTAL $** 100.00

**FPPC Form 460 (Jan/2016)**

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