Recipient Committee
Campaign Statement
Cover Page

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 9/25/16
through 10/22/16

Date of election if applicable:
(Month, Day, Year)
11/8/16

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.
☐ Officeholder, Candidate Controlled Committee
☐ State Candidate Election Committee
☐ Recall
(Also Complete Part 5)
☐ Primarily Formed Ballot Measure Committee
☐ Controlled
☐ Sponsored
(Also Complete Part 6)
☐ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☐ Primarily Formed Candidate/Officeholder Committee
(Also Complete Part 7)

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

3. Committee Information
I.D. NUMBER
1387134

COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE)
Dee Dee Cavanaugh for Simi Valley City Council 2016

STREET ADDRESS (NO P.O. BOX)

CITY
Simi Valley
STATE
CA
ZIP CODE
93063

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

CITY
Simi Valley
STATE
CA
ZIP CODE
93062

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 10/23/16

By ____________________________
Date
Signature of Treasurer or Assistant Treasurer

Executed on 10/23/16

By ____________________________
Date
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on __________

By ____________________________
Date
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on __________

By ____________________________
Date
Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
## 5. Officeholder or Candidate Controlled Committee

**NAME OF OFFICEHOLDER OR CANDIDATE**

Dee Dee Cavanaugh

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

Simi Valley City Council

**RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP**

Simi Valley CA 93063

**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>
<th>NAME OF TREASURER</th>
<th>CONTROLLED COMMITTEE?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>[ ] YES  [ ] NO</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>COMMITTEE ADDRESS</th>
<th>STREET ADDRESS (NO P.O. BOX)</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
<th>AREA CODE/PHONE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## 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 PROONENT**

**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></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<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></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<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></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<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></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Attach continuation sheets if necessary**
## Contributions Received

1. Monetary Contributions ................................... Schedule A, Line 3 $2449.00 $8264.00
2. Loans Received................................................. Schedule B, Line 3 0 2000.00
3. SUBTOTAL CASH CONTRIBUTIONS ....................... Add Lines 1 + 2 $2449.00 $10264.00
4. Nonmonetary Contributions .................................... Schedule C, Line 3 0 0
5. TOTAL CONTRIBUTIONS RECEIVED ....................... Add Lines 3 + 4 $2449.00 $10264.00

## Expenditures Made

6. Payments Made................................................. Schedule E, Line 4 $2162.16 $4533.72
7. Loans Made...................................................... Schedule H, Line 3 0 0
8. SUBTOTAL CASH PAYMENTS ............................... Add Lines 6 + 7 $2162.16 $4533.72
9. Accrued Expenses (Unpaid Bills) ......................... Schedule F, Line 3 0 0
10. Nonmonetary Adjustment ................................... Schedule C, Line 3 0 0
11. TOTAL EXPENDITURES MADE ............................. Add Lines 8 + 9 + 10 $2162.16 $4533.72

## Current Cash Statement

12. Beginning Cash Balance .................................... Previous Summary Page, Line 16 $5443.44
13. Cash Receipts ................................................. Column A, Line 3 above $2449.00
14. Miscellaneous Increases to Cash .......................... Schedule I, Line 4 0 0
15. Cash Payments ............................................... Column A, Line 8 above $2162.16
16. ENDING CASH BALANCE ................................. Add Lines 12 + 13 + 14, then subtract Line 15 $5730.28

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).

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 $2000.00

---

**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 $ N/A $ N/A
- 21. Expenditures Made $ N/A $ N/A

**Expenditure Limit Summary for State Candidates**

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

<table>
<thead>
<tr>
<th>Date of Election (mm/dd/yy)</th>
<th>Total to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>/ NA /</td>
<td>$ N/A</td>
</tr>
</tbody>
</table>

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

---

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
## Schedule A
### Monetary Contributions Received

**SEE INSTRUCTIONS ON REVERSE**

**NAME OF FILER**

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>9/30/16</td>
<td>Brian L. Payne, Simi Valley, CA 93065</td>
<td>□ IND □ COM □ OTH □ PTY □ SCC</td>
<td>Owner EDM Services, Inc.</td>
<td>100.00</td>
<td>100.00</td>
<td>100.00</td>
</tr>
<tr>
<td>10/2/16</td>
<td>Anil Garg, Simi Valley, CA 93065</td>
<td>□ IND □ COM □ OTH □ PTY □ SCC</td>
<td>Financial Advisor Apex Financial Services</td>
<td>200.00</td>
<td>200.00</td>
<td>200.00</td>
</tr>
<tr>
<td>10/2/16</td>
<td>Mark E. Johnson, Simi Valley, CA 93063</td>
<td>□ IND □ COM □ OTH □ PTY □ SCC</td>
<td>Retired</td>
<td>200.00</td>
<td>200.00</td>
<td>200.00</td>
</tr>
<tr>
<td>10/2/16</td>
<td>Lori Ann Dario, Simi Valley, CA 93063</td>
<td>□ IND □ COM □ OTH □ PTY □ SCC</td>
<td>Homemaker</td>
<td>100.00</td>
<td>100.00</td>
<td>100.00</td>
</tr>
<tr>
<td>10/2/16</td>
<td>Patricia Anderson, Simi Valley, CA 93065</td>
<td>□ IND □ COM □ OTH □ PTY □ SCC</td>
<td>Retired</td>
<td>100.00</td>
<td>100.00</td>
<td>100.00</td>
</tr>
</tbody>
</table>

**SUBTOTAL $ 700.00**

### Schedule A Summary

1. Amount received this period — itemized monetary contributions.
   (Include all Schedule A subtotals.) ......................................................... $ 2250.00

2. Amount received this period — unitemized monetary contributions of less than $100 .......... $ 199.00

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ................... TOTAL $ 2449.00

---

*Contributor Codes
IND – Individual
COM – Recipient Committee
(Other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

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

**NAME OF FILER**
Dee Dee Cavanaugh for Simi Valley City Council 2016

**Statement covers period**
from 9/25/16
through 10/22/16

### NAME OF CONTRIBUTOR

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR</th>
<th>CONTRIBUTOR CODE *</th>
<th>OCCUPATION AND EMPLOYER</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>10/2/16</td>
<td>Joyce Erdman, Simi Valley, CA 93065</td>
<td>IND</td>
<td>Self Employed Electra Investment Prop. LLC</td>
<td>100.00</td>
<td>100.00</td>
<td>100.00</td>
</tr>
<tr>
<td>10/3/16</td>
<td>James Pieczynski, Westlake Village, CA 91362-5274</td>
<td>IND, OTH</td>
<td>President CapitalSource Div. Pacwest Bancorp</td>
<td>1000.00</td>
<td>1000.00</td>
<td>1000.00</td>
</tr>
<tr>
<td>10/12/16</td>
<td>Kevin Koch, Simi Valley, CA 93065</td>
<td>IND</td>
<td>Towing Operator Dave's Towing</td>
<td>200.00</td>
<td>200.00</td>
<td>200.00</td>
</tr>
<tr>
<td>10/16/16</td>
<td>Green Acres Meats, Inc., Simi Valley, CA 93065</td>
<td>IND</td>
<td></td>
<td>250.00</td>
<td>250.00</td>
<td>250.00</td>
</tr>
</tbody>
</table>

**SUBTOTAL $** 1550.00

---

*Contributor Codes
- IND - Individual
- COM - Recipient Committee
- OTH - Other (e.g., business entity)
- PTY - Political Party
- SCC - Small Contributor Committee

**I.D. NUMBER**
1387134

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

**Payments Made**

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>Statement covers period</th>
<th>CALIFORNIA FORM 460</th>
</tr>
</thead>
<tbody>
<tr>
<td>from 9/25/16</td>
<td></td>
</tr>
<tr>
<td>through 10/22/16</td>
<td></td>
</tr>
</tbody>
</table>

**NAME OF FILER**

Dee Dee Cavanaugh for Simi Valley City Council 2016

**I.D. NUMBER**

1387134

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

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

<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>Viva La Pasta</td>
<td>FND</td>
<td></td>
<td>129.00</td>
</tr>
<tr>
<td>Simi Valley, CA 93065</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The Acorn Agoura</td>
<td>PRT</td>
<td></td>
<td>1360.00</td>
</tr>
<tr>
<td>Agoura Hills, CA 91301</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cronies Sports Bar &amp; Grill</td>
<td>TRS</td>
<td></td>
<td>141.73</td>
</tr>
<tr>
<td>Simi Valley, CA 93065</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.) ............................................................ $ 1989.33
2. Unitemized payments made this period of under $100 ......................................................................................... $ 172.83
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 $ 2162.16

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
Dee Dee Cavanaugh for Simi Valley City Council 2016

Statement covers period from 9/25/16 through 10/22/16

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 OF PAYMENT</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>QFC</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>RDF</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

<table>
<thead>
<tr>
<th>PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>DRI Printing</td>
<td>LIT</td>
<td></td>
<td>258.60</td>
</tr>
<tr>
<td>Van Nuys, CA 91608</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Laura Sojka</td>
<td>LIT</td>
<td></td>
<td>100.00</td>
</tr>
<tr>
<td>Simi Valley, CA 93065</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 $ 358.60