Recipient Committee
Campaign Statement
Cover Page

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.
   - Officeholder, Candidate Controlled Committee
   - State Candidate Election Committee
   - Recall
   - General Purpose Committee
   - Sponsored
   - Small Contributor Committee
   - Political Party/Central Committee
   - Primarily Formed Ballot Measure Committee
   - Controlled
   - Sponsored
   - Primarily Formed Candidate/Officeholder Committee

2. Type of Statement:
   - Pre-election Statement
   - Semi-annual Statement
   - Termination Statement
   - Amendment (Explain below)
   - Quarterly Statement
   - Special Odd-Year Report

3. Committee Information
   - I.D. NUMBER: 1408927
   - COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE):
     RUTH LUEVANOS FOR SIMI VALLEY CITY COUNCIL 2018
   - 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: WHITTEIER
   - STATE: CA
   - ZIP CODE: 90602
   - 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 10/6/19

   By __________________________
   Signature of Treasurer or Assistant Treasurer

   Executed on 10-6-19

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

   Executed on ____________________

   By __________________________
   Signature of Controlling Officeholder, Candidate, State Measure Proponent

   Executed on ____________________

   By __________________________
   Signature of Controlling Officeholder, Candidate, State Measure Proponent

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www.fppc.ca.gov
5. Officeholder or Candidate Controlled Committee

<table>
<thead>
<tr>
<th>NAME OF OFFICER HOLDER OR CANDIDATE</th>
<th>RUTH LUEVANOS</th>
</tr>
</thead>
<tbody>
<tr>
<td>OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)</td>
<td>SIMI VALLEY CITY COUNCIL 2018</td>
</tr>
<tr>
<td>RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)</td>
<td>SIMI VALLEY CA 93063</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>
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<tbody>
<tr>
<td>NAME OF TREASURER</td>
<td>CONTROLLED COMMITTEE?</td>
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<tr>
<td>STREET ADDRESS (NO P.O. BOX)</td>
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<tr>
<td>CITY</td>
<td>STATE</td>
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6. Primarily Formed Ballot Measure Committee

<table>
<thead>
<tr>
<th>NAME OF BALLOT MEASURE</th>
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<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 OFFICERHOLDER, CANDIDATE, OR PROPONENT |
| OFFICE SOUGHT OR HELD | DISTRICT NO. IF ANY |

7. Primarily Formed Candidate/Officeholder Committee

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

**List names of officeholder(s) or candidate(s) for which this committee is primarily formed.**

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

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

1. Monetary Contributions ........................................... Schedule A, Line 3 $ 4001.00
2. Loans Received ........................................... Schedule B, Line 3 0.00
3. SUBTOTAL CASH CONTRIBUTIONS ................................... Add Lines 1 + 2 $ 4001.00
4. Nonmonetary Contributions ................................... Schedule C, Line 3 0.00
5. TOTAL CONTRIBUTIONS RECEIVED ................................ Add Lines 3 + 4 $ 4001.00

**Expenditures Made**

6. Payments Made ........................................... Schedule E, Line 4 $ 1012.43
7. Loans Made ........................................... Schedule H, Line 3 0.00
8. SUBTOTAL CASH PAYMENTS ................................... Add Lines 6 + 7 $ 1012.43
9. Accrued Expenses (Unpaid Bills) ................................ Schedule F, Line 3 4386.69
10. Nonmonetary Adjustment ................................... Schedule C, Line 3 0.00
11. TOTAL EXPENDITURES MADE ................................ Add Lines 8 + 9 + 10 $ 5399.12

**Current Cash Statement**

12. Beginning Cash Balance ................................ Previous Summary Page, Line 16 $ 4546.07
13. Cash Receipts ........................................... Column A, Line 3 above 4001.00
14. Miscellaneous Increases to Cash ................................ Schedule I, Line 4 0.00
15. Cash Payments ........................................... Column A, Line 8 above 1012.43
16. ENDING CASH BALANCE ................................ Add Lines 12 + 13 + 14, then subtract Line 15 $ 7534.64

**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents ........................................... See instructions on reverse 0.00
19. Outstanding Debts ........................................... Add Line 2 + Line 9 in Column B above 0.00

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

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<thead>
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<th>Date of Election</th>
<th>Total to Date</th>
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<td>1/1 through 6/30</td>
<td>$ 6366.36</td>
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<td>7/1 to Date</td>
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**Expenditure Limit Summary for State Candidates**

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

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

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### Schedule A
Monetary Contributions Received

**NAME OF FILER**
RUTH LUEVANOS FOR SIMI VALLEY CITY COUNCIL 2018

**DATE RECEIVED**

<table>
<thead>
<tr>
<th>Date</th>
<th>Full Name, Street Address and Zip Code of Contributor</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>
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<tbody>
<tr>
<td>10/02/18</td>
<td>INTERNATIONAL UNION OF OPERATIONS</td>
<td>□ IND</td>
<td></td>
<td>1000.00</td>
<td>1000.00</td>
<td>1000.00</td>
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<tr>
<td></td>
<td>PASADENA CA 91109 #743030</td>
<td>□ COM</td>
<td></td>
<td></td>
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<tr>
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<td>□ OTH</td>
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<td>□ PTY</td>
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<tr>
<td></td>
<td></td>
<td>□ SCC</td>
<td></td>
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<tr>
<td>10/20/18</td>
<td>HENRY STERN</td>
<td>□ IND</td>
<td></td>
<td>999.00</td>
<td>999.00</td>
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<tr>
<td></td>
<td>SACRAMENTO CA 95815</td>
<td>□ COM</td>
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<td>10/10/18</td>
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<td>LOS ANGELES CA 90017 # 743794</td>
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<td>10/18/18</td>
<td>VCDCCC</td>
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<td>CAMARILLO, CA 93011 # 746162</td>
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<tr>
<td>09/24/18</td>
<td>PLANNED PARENTHOOD CENTRAL COAST</td>
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<td>250.00</td>
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<td>SANTA BARBARA CA 93101 #1278950</td>
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</tbody>
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**SUBTOTAL $** 3249.00

**Schedule A Summary**

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) $3459.00

2. Amount received this period – unitemized monetary contributions of less than $100 $542.00

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) TOTAL $4001.00

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

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<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>
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<tr>
<td>10/13/18</td>
<td>NANCY MASON</td>
<td>IND</td>
<td>RETIRED</td>
<td>100.00</td>
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<td>100.00</td>
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<td>SIMI VALLEY CA 93065</td>
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<tr>
<td>10/11/18</td>
<td>SUSANNE SMITH-STEIN</td>
<td>IND</td>
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<td>100.00</td>
<td>200.00</td>
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<tr>
<td>10/10/18</td>
<td>CHUCK ROCCO</td>
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<td>110.00</td>
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</tbody>
</table>

**SUBTOTAL $** 210.00

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

**NAME OF FILER**

RUTH LUEVANOS FOR SIMI VALLEY CITY COUNCIL 2018

**Statement covers period**

from 09/23/2018

through 10/20/2018

**CALIFORNIA FORM 460**

**Page 6 of 7**

**I.D. NUMBER**

1408927

**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
- **LT:** campaign literature and mailings
- **MBR:** member communications
- **MTG:** meetings and appearances
- **OFC:** office expenses
- **PET:** petition circulating
- **PHO:** phone banks
- **POL:** polling and survey research
- **PCS:** 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)

## Name and Address of Payee

<table>
<thead>
<tr>
<th>Name and Address of Payee</th>
<th>Code or Description of Payment</th>
<th>Amount Paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>BUILDASIGN</td>
<td>CMP</td>
<td>785.12</td>
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<tr>
<td>AUSTIN, TX 78758</td>
<td></td>
<td></td>
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<tr>
<td>BUILDASIGN</td>
<td>CMP</td>
<td>164.90</td>
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<tr>
<td>AUSTIN, TX 78758</td>
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</table>

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

**SUBTOTAL $**

950.02

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**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.) ................................................................. $ 950.02
2. Unitemized payments made this period of under $100 ........................................................................................................ $ 62.41
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 $** 1012.43

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### Schedule F

#### Accrued Expenses (Unpaid Bills)

**Statement covers period**
from 09/23/2018
through 10/20/2018

**NAME OF FILER**
RUTH LUEVANOS FOR SIMI VALLEY CITY COUNCIL 2018

#### CODES:
- **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
- **MBR**: member communications
- **MTG**: meetings and appearances
- **OFI**: 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)

#### NAME AND ADDRESS OF CREDITOR
(IF COMMITTEE, ALSO ENTER I.D. NUMBER)

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF CREDITOR</th>
<th>CODE OR DESCRIPTION OF PAYMENT</th>
<th>(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD</th>
<th>(b) AMOUNT INCURRED THIS PERIOD</th>
<th>(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)</th>
<th>(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACORN NEWSPAPER OF SIMI VALLEY</td>
<td>PRT</td>
<td>0.00</td>
<td>2030.00</td>
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<td>2030.00</td>
</tr>
<tr>
<td>AGOURA HILLS, CA 91301</td>
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</table>

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

#### Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of $100 or more, plus total unitemized accrued expenses under $100.)
   
   \[ \text{INCURRED TOTALS} = 4386.69 \]

2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of $100 or more, plus total unitemized payments on accrued expenses under $100.)
   
   \[ \text{PAID TOTALS} = 0.00 \]

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)
   
   \[ \text{NET} = 4386.69 \]

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