Recipients Committee
Campaign Statement
Cover Page

SEE INSTRUCTIONS ON REVERSE

Statement covers period from 1/1/20 through 9/30/20

Date of election if applicable: (Month, Day, Year) 11/6/18

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)
- General Purpose Committee
- Sponsored
- Small Contributor Committee
- Political Party/Central Committee
- Primarily Formed Candidate/Officeholder Committee
- Primarily Formed Ballot Measure Committee
- Controlled
- Sponsored
- (Also Complete Part 5)

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

3. Committee Information

I.D. NUMBER 1327401

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
MIKE JUDGE FOR CITY COUNCIL 2018

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

4. Verification

I hereby certify under penalty of perjury under the laws of the State of California that the foregoing is true and complete.

Executed on 7/30/20
By ____________________________
Signature of Treasurer

Executed on 7/30/20
By ____________________________
Signature of Assistant Treasurer

Executed on ____________________
By ____________________________
Signature of Controlling Officer, Candidate, State Measure Proponent or Responsible Officer of Sponsor

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

Executed on ____________________
By ____________________________
Signature of Controlling Officer, 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**: MIKE JUDGE

**Office Sought or Held (Include Location and District Number if Applicable)**: CITY COUNCIL (SIMI VALLEY)

**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.

<table>
<thead>
<tr>
<th>Committee Name</th>
<th>I.D. Number</th>
</tr>
</thead>
</table>

**Name of Treasurer**: [Blank]

**Controlled Committee?**: [Blank] [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?** |

**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 Propponent**

**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><strong>Support</strong></th>
<th><strong>Oppose</strong></th>
</tr>
</thead>
</table>

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<th><strong>Oppose</strong></th>
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<th><strong>Support</strong></th>
<th><strong>Oppose</strong></th>
</tr>
</thead>
</table>

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

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

### Expenditures Made

6. Payments Made ........................................................................... Schedule E, Line 4 $50.00 $50.00
7. Loans Made .................................................................................. Schedule H, Line 3 $0 $0
8. SUBTOTAL CASH PAYMENTS .................................................... Add Lines 6 + 7 $50.00 $50.00
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 $50.00 $50.00

### Current Cash Statement

12. Beginning Cash Balance ............................................................ Previous Summary Page, Line 16 $718.25
13. Cash Receipts ............................................................................. Column A, Line 3 above $0
14. Miscellaneous Increases to Cash ............................................... Schedule I, Line 4 $0
15. Cash Payments .......................................................................... Column A, Line 8 above $50.00
16. ENDING CASH BALANCE ......................................................... Add Lines 12 + 13 + 14; then subtract Line 15 $668.25

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

20. Contributions Received .............................................................. $0 $0
21. Expenditures Made .................................................................... $0 $0

### Expenditure Limit Summary for State Candidates

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

<table>
<thead>
<tr>
<th>Date of Election</th>
<th>Total to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>/ / / yyyy</td>
<td>$0</td>
</tr>
<tr>
<td>/ / / yyyy</td>
<td>$0</td>
</tr>
</tbody>
</table>

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

### 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 $0

### Summary Page

Amounts may be rounded to whole dollars.
Schedule E
Payments Made

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
MIKE JUDGE FOR CITY COUNCIL 2018

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

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL $ 50.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ................................................................. $ 50.00
2. Unitemized payments made this period of under $100 ................................................................. $ 50.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ................................................................. $ 50.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ................................................................. TOTAL $ 50.00

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