Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

RECEIVED CITY OF SIMI VALLEY 2012 OCT 22 PM 1:46 OFFICE OF CITY CLERK BY

RECEIVED Date Stamp CITY OF SIMI VALLEY 2012 OCT -5 PM 1:09 OFFICE OF CITY CLERK BY Sharon Grant

COVER PAGE

CALIFORNIA FORM 460

Page 1 of 17

For Official Use Only

SEE INSTRUCTIONS ON REVERSE

Statement covers period: From 7-01-2012 through 9-30-2012

Date of election if applicable: (Month, Day, Year) 11-06-2012

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)
- [x] Amendment (Explain below)
- [ ] Quarterly Statement
- [ ] Special Odd-Year Report
- [ ] Supplemental Preelection Statement - Attach Form 495

Correcting as advised by City of Simi Valley CEAC Oct. 16, 2012

3. Committee Information

I.D. NUMBER 1328118

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

KEITH MASHBURN 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

SHELBY MASHBURN

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

NAME OF ASSISTANT TREASURER, IF ANY

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 10-3-2012 10-20-2012 By Shelby Mashburn SHELBY MASHBURN
Date — Signature of Treasurer or Assistant Treasurer

Executed on 10-3-2012 10-20-2012 By Keith L. Mashburn KEITH MASHBURN
Date — 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

Type or print in ink.

Recipient Committee Campaign Statement Cover Page — Part 2

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
KEITH MASHBURN

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.*

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 7-1-2012 through 9-30-2012

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: KEITH MASHBURN for CITY COUNCIL 2012

I.D. NUMBER: 1328118

Contributions Received

		Column A (TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES))	Column B (CALENDAR YEAR TOTAL TO DATE)
1. Monetary Contributions	Schedule A, Line 3	$ 11,095.00	$ 20,850.00
2. Loans Received	Schedule B, Line 3	0	1,000.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	$ 11,095.00	$ 21,850.00
4. Nonmonetary Contributions	Schedule C, Line 3	0	0
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	$ 11,095.00	$ 21,850.00

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	$	$
21. Expenditures Made	$	$

Expenditures Made

6. Payments Made	Schedule E, Line 4	$ 10,621.31	$ 16,789.54
7. Loans Made	Schedule H, Line 3	0	0
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	$ 10,621.31	$ 16,789.54
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	$ 10,621.31	$ 16,789.54

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.

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	$ 7346.97
13. Cash Receipts	Column A, Line 3 above	11,095.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4	0
15. Cash Payments	Column A, Line 8 above	10,621.31
16. **ENDING CASH BALANCE**	Add Lines 12 + 13 + 14, then subtract Line 15	$ 7820.66

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

17. LOAN GUARANTEES RECEIVED — Schedule B, Part 2 — $ 0

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).

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	$ 1000.00

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 7-01-2012
through 9-30-2012

Page 4 of 17

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: KEITH MASHBURN for CITY COUNCIL 2012

I.D. NUMBER: 1328118

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)
7/15/12	DEAN ~~F.~~ LAPADAKIS	☒IND ☐COM ☒OTH ☐PTY ☐SCC	CLEANING FORCE JANITORIAL SERVICE	1000.	1000.	1000. G2012
7/15/12	Martha ~~M.~~ LAPADAKIS	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Housewife	1000.	1000.	1000. G2012
7/15/12	RONALD ~~and LINDA~~ TAYLOR	☒IND ☐COM ☐OTH ☐PTY ☐SCC	RETIRED	50.	50.	50. G 2012
7/17/12	~~GREEN ACRES MEATS~~ DICK RHOADS	☒IND ☐COM ☒OTH ☐PTY ☐SCC	STORE OWNER green ACRES	500.	1000.	1000. G 2012
7/16/12	JOHN BECKER	☒IND ☐COM ☐OTH ☐PTY ☐SCC	RETIRED	50.	50.	50. G2012

SUBTOTAL $ 2600.

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 8350.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 2745.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL $ 11,095.00

*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

Schedule A
Monetary Contributions Received

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

Statement covers period
from 7-01-2012
through 9-30-2012

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: KEITH MASHBURN for CITY COUNCIL 2012

I.D. NUMBER: 1328118

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)
8/6/12	Valene Williams	☒IND ☐COM ☐OTH ☐PTY ☐SCC	RETIRED	100.	100.	100. G2012
8/6/12	VIRGINIA JANNOTTO ~~GREGG SCHRAMM~~	☒IND ☐COM ☐OTH ☐PTY ☐SCC	SCHOOL TEACHER	100.	100.	100. G2012
8/13/12	~~DAVES TOWING SERVICE~~ KEVIN KOCH	☒IND ☐COM ~~☒OTH~~ ☐PTY ☐SCC	BUSINESS OWNER DAVES TOWING	150.	150.	150. G2012
8/27/12	~~DAVE EKINS RACING~~ CHRISTINA VAN HOUDE	☒IND ☐COM ~~☒OTH~~ ☐PTY ☐SCC	BUSINESS OWNER DAVE EKINS RACING	100.	100.	100. G2012
8/26/12	~~BURTON~~ LOIS BATH	☒IND ☐COM ☐OTH ☐PTY ☐SCC	RETIRED	50.	50.	50. G2012

SUBTOTAL $ 500.

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 8350.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 2745.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL $ 11,095.00

*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

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 7-01-2012
through 9-30-2012

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: KEITH MASHBURN for CITY COUNCIL

I.D. NUMBER: 1328118

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)
8/26/12	CHUCK H. WHEAT ~~IMS PRODUCTS~~	☒IND ☐COM ☒OTH ☐PTY ☐SCC	BUSINESS OWNER ~~CH WHEAT~~ IMS PRODUCTS	200.	200.	200. G2012
8/30/12	GERALD SMITH	☒IND ☐COM ☐OTH ☐PTY ☐SCC	DEVELOPMENT MACHINEST CLASSIC WIRECUT CO VALENCIA	50.	50.	50. G2012
8/30/12	JAY ~~AMY~~ CARROT	☒IND ☐COM ☐OTH ☐PTY ☐SCC	RETIRED	500.	500.	500. G2012
9/12/12	PALMDALE 47th LLC	☒IND ☐COM ☒OTH ☐PTY ☐SCC	JONATHAN FRIEDMAN President Real Estate JEM STREET	250.	250.	250. G2012
9/12/12	OUTBACK FOOTWEAR	☒IND ☐COM ☒OTH ☐PTY ☐SCC	BUSINESS OWNER JOE IRWIN	200.	200.	200. G2012
			SUBTOTAL $	1200.		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 8350.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 2745.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL $ 11,095.00

*Contributor Codes
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COM – Recipient Committee (other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
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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 7-01-2012
through 9-30-2012

Page 7 of 17

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: KEITH MASHBURN for CITY COUNCIL 2012

I.D. NUMBER: 1328118

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)
9/12/12	NEPTUNE PLUMBING CO.	☒ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	BUSINESS OWNER DAN McBRIDE	1000.	1000.	1000. G2012
9/13/12	AMY CORPORATION DBA SIMI VALLEY CARWASH	☒ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	SIMI VALLEY CAR WASH	250.	250.	250. G2012
9/22/12	KAWASAKI SPORTCYCLES.	☒ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	BUSINESS OWNER TOM HORTON	100.	100.	100. G2012
9/22/12	~~GREEN ACRES MEATS~~ DICK Rhoads	☒ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	BUSINESS OWNER DICK RHOADS GREEN ACRES	500.	1000. SM ~~500.~~ SM	SM 1000. SM ~~500~~. G2012
9/24/12	JOSEPH J. GRINSTEAD	☒ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	GRINDSTEAD ELECTRIC Business owner	500.	500.	500. G2012

SUBTOTAL $ 2350.

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 8350.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 2745.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL $ 11,095.00

*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

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 7-01-2012
through 9-30-2012

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: KEITH MASHBURN for CITY COUNCIL 2012

I.D. NUMBER: 1328118

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)
9/29/12	DOUG CROSSE	☒IND ☐COM ☐OTH ☐PTY ☐SCC	RETIRED	200.	200.	200. G2012
9/29/12	SIMI VALLEY MOORPARK TEA PARTY	☐IND ☐COM ☐OTH ☒PTY ☐SCC		250.	250.	250. G 201
9/29/12	PW GILLIBRAND CO INC	☒IND ☐COM ☒OTH ☐PTY ☐SCC	PW GILLIBRAND Business Owner	1000.	1000.	1000. G-20
9/11/12	BRADLEY RICE	☒IND ☐COM ☒OTH ☐PTY ☐SCC	BUSINESS OWNER REALTIWORKS	250.	250.	250. G201
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				

SUBTOTAL $ 1700.

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 8350.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 2745.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL $ 11,095.00

*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

Schedule B – Part 1
Loans Received

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

Statement covers period
from 7-01-2012
through 9-30-2012

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: KEITH MASHBURN CITY COUNCIL 2012

I.D. NUMBER: 1328118

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD *	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
KEITH MASHBURN †☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	RETIRED N/A	$ 1000.	$ 0	☐ PAID $ 0 ☐ FORGIVEN $ 0	$ 1000. DATE DUE	0.00 % RATE $ 0.00	$ 1000. 5-15-12 DATE INCURRED	CALENDAR YEAR $ 1000. PER ELECTION** 2012 $ 1000.
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$	$	☐ PAID $ ☐ FORGIVEN $	$ DATE DUE	% RATE $	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION ** $
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$	$	☐ PAID $ ☐ FORGIVEN $	$ 11-7-12 DATE DUE	% $ 0 RATE	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION** $
		SUBTOTALS $ 0	$ 0	$ 1000		$ 0.00 (Enter (e) on Schedule E, Line 3)		

Schedule B Summary

1. Loans received this period ..... $ 0
   (Total Column (b) plus unitemized loans of less than $100.)
2. Loans paid or forgiven this period ..... $ 0
   (Total Column (c) plus loans under $100 paid or forgiven.)
   (Include loans paid by a third party that are also itemized on Schedule A.)
3. Net change this period. (**Subtract** Line 2 from Line 1.) ..... NET $ 0
   Enter the net here and on the Summary Page, Column A, Line 2. (May be a negative number)

†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

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.

Schedule D
Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees

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

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 7-01-2012
through 9-30-2012

SCHEDULED
CALIFORNIA FORM 460

NAME OF FILER: KEITH MASHBURN for CITY COUNCIL 2012

I.D. NUMBER: 1328118

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/W 9-16-12	ASH GIVARGIS ☐ Support ☐ Oppose	☒ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure		100.00	100.00	
	☐ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
	☐ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				

SUBTOTAL $ 100.

Schedule D Summary

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) ..... $ 100.00
2. Unitemized contributions and independent expenditures made this period of under $100 ..... $ 0
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ..... TOTAL $ 100.00

Schedule E
Payments Made

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

Statement covers period
from 7-01-2012
through 9-30-2012

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: KEITH MASHBURN for CITY COUNCIL 2012

I.D. NUMBER: 1328118

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
HOME DEPOT	CMP	WOOD for SIGNS	244.18
JARED HELD	CMP	WEB SITE	125.00
CITY PRINTING	CMP	FLYERS	51.48

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

SUBTOTAL $ 420.66

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 10,621.31
2. Unitemized payments made this period of under $100 ..... $ 0
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 $ 10,621.31

Schedule E
Payments Made

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

Statement covers period
from 7-01-2012
through 9-30-2012

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: KEITH MASHBURN for CITY COUNCIL 2012

I.D. NUMBER: 1328118

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
EMBROIDME	CMP	T-SHIRTS	130.02
CITY PRINTING	CMP	FLYERS	230.59
CITY of SIMI VALLEY	FIL	FILING	950.

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

SUBTOTAL $ 1310.61

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 10,621.31
2. Unitemized payments made this period of under $100 ..... $ 0
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 $ 10,621.31

Schedule E
Payments Made

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

Statement covers period
from 7-01-2012
through 9-30-2012

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: KEITH MASHBURN for CITY COUNCIL 2012

I.D. NUMBER: 1328118

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
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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
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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
VENTURA CO CRA MEMBERSHIP		MEMBERSHIP FEE CRA	25,
GT DESIGN & GRAPHICS	CMP	POSTERS	920.10
DICK KRANZLER SIGNS	CMP	SIGNS	275,

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SUBTOTAL $ 1220.10

Schedule E Summary

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Schedule E
Payments Made

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Statement covers period
from 7-01-2012
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CALIFORNIA FORM 460

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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
CHAMBER of COMMERCE		MEMBERSHIP FEE	197.
CITY PRINTING	CMP	FLYERS	493.35
JARED HELD	CMP	WEBSITE	300.

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SUBTOTAL $ 990.35

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Schedule E
Payments Made

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from 7-01-2012
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CALIFORNIA FORM 460

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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
WEB LISTING INC.	CMP	WEB SITE	85.
HOME DEPOT	CMP	SIGN MATERIAL	62.14
HOME DEPOT	CMP	SIGN MATERIAL	31.07

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SUBTOTAL $ 178.21

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from 7-01-2012
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CALIFORNIA FORM 460

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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
ASH GIVARGIS		CONTRIBUTION	100.
DICK KRANZLER	CMP	STICKERS	245.
CHAMBER of COMMERCE	PRT	PRINT ADS	249.

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SUBTOTAL $ 594.

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CALIFORNIA FORM 460

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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
DM HAND ASSOC	LIT		5000.
ACORN NEWSPAPER	PRT		532.
CITY PRINTING	CMP	PRINTING	375.38

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SUBTOTAL $ 5907.38

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