Recipient Committee
Campaign Statement
Cover Page
(Government Code Sections 84200-84216.5)

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
       (Also Complete Part 9)
   - General Purpose Committee
     - Sponsored
     - Small Contributor Committee
     - Political Party/Central Committee
   - Primarily Formed Candidate/Officeholder Committee
     (Also Complete Part 7)

2. Type of Statement:
   - Preelection Statement
   - Semi-annual Statement
   - Termination Statement
   - Amendment (Explain below)

3. Committee Information
   - I.D. NUMBER: 1325587
   - COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE): People for Bob Huber-Mayor 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

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 12/17/14
   By ________________________________
   Signature of Treasurer or Assistant Treasurer

   Executed on 12/17/14
   By ________________________________
   Signature of Controlling Officerholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

   Executed on 12/17/14
   By ________________________________
   Signature of Controlling Officerholder, Candidate, State Measure Proponent

   Executed on 12/17/14
   By ________________________________
   Signature of Controlling Officerholder, Candidate, State Measure Proponent

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 888/ASK-FPPC
State of California
5. Officeholder or Candidate Controlled Committee

**NAME OF OFFICEHOLDER OR CANDIDATE**

Robert O. Huber

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

Mayor-City of Simi Valley

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

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**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

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6. 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**

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7. Primarily Formed 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

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Attach continuation sheets if necessary
## Contributions Received

1. Monetary Contributions ........................................... Schedule A, Line 3 $ 350.00 $ 350.00
2. Loans Received ...................................................... Schedule B, Line 3 0 $(2010)25000.00
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 $ 350.00 $ 25350.00
4. Nonmonetary Contributions ........................................ Schedule C, Line 3 0 0
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 $ 350.00 $ 25350.00

## Expenditures Made

6. Payments Made .................................................. Schedule E, Line 4 $ 53.75 $ 253.75
7. Loans Made .......................................................... Schedule H, Line 3 0 0
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 $ 53.75 $ 253.75
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 $ 53.75 $ 253.75

## Current Cash Statement

12. Beginning Cash Balance ........................................... Previous Summary Page, Line 16 $ 2719.90
13. Cash Receipts ..................................................... Column A, Line 3 above 350.00
14. Miscellaneous Increases to Cash ................................ Schedule I, Line 4 0
15. Cash Payments .................................................... Column A, Line 8 above 53.75
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 $ 3016.15

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

## 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 $ 25,000.00

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

<table>
<thead>
<tr>
<th>Date Range</th>
<th>Contributions Received</th>
<th>Expenditures Made</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/1 through 6/30</td>
<td>$0</td>
<td>$53.75</td>
</tr>
<tr>
<td>7/1 to Date</td>
<td>$25,350.00</td>
<td>$25,350.00</td>
</tr>
</tbody>
</table>

**Expenditure Limit Summary for State Candidates**

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

Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.
### Schedule A

**Monetary Contributions Received**

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

#### Statement covers period

**from** July 1, 2013  
**through** December 31, 2013

**NAME OF FILER**  
People for Bob Huber-Mayor 2012

**I.D. NUMBER**  
1325587

<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>11/26/2013</td>
<td>Swinks Towing</td>
<td></td>
<td></td>
<td>300.00</td>
<td>300.00</td>
<td></td>
</tr>
</tbody>
</table>

**Schedule A Summary**

1. Amount received this period – contributions of $100 or more.  
   (Include all Schedule A subtotals.) ................................................................. $ 300.00

2. Amount received this period – unitemized contributions of less than $100 ........................................ $ 50.00

3. Total monetary contributions received this period.  
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ................................ TOTAL $ 350.00

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*Contributor Codes*  
IND - Individual  
COM - Recipient Committee  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

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FPPC Toll-Free Helpline: 866/ASK-FPPC
# Schedule B – Part 1
## Loans Received

**SEE INSTRUCTIONS ON REVERSE**

**NAME OF FILER**
People for Bob Huber-Mayor 2012

**FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER**
Robert Huber  
Business Owner, Law Office of Robert O. Huber

<table>
<thead>
<tr>
<th>Contributions</th>
<th>Outstanding Balance at Close of This Period</th>
<th>Interest Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>LOAN PAID</td>
<td>$25000.00</td>
<td>0%</td>
</tr>
<tr>
<td>LOAN FORGIVEN</td>
<td>$0</td>
<td>0%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Original Amount of Loan</th>
<th>Cumulative Contributions to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>$41000</td>
<td>CALENDAR YEAR</td>
</tr>
</tbody>
</table>

- **IND** - Individual  
- **COM** - Recipient Committee (other than PTY or SCC)  
- **OTH** - Other  
- **PTY** - Political Party  
- **SCC** - Small Contributor Committee

## Schedule B Summary

1. Loans received this period:  
   (Total Column (b) plus unitemized loans less than $100.)  
   $0

2. Loans paid or forgiven this period:  
   (Total Column (c) plus loans under $100 paid or forgiven.)  
   (Include loans paid by a third party that are also itemized on Schedule A.)  
   $0

3. Net change this period. (Subtract Line 2 from Line 1.)  
   NET $0  
   (May be a negative number)

**CONTRIBUTOR CODES**

- **IND** - Individual  
- **COM** - Recipient Committee (other than PTY or SCC)  
- **OTH** - Other  
- **PTY** - Political Party  
- **SCC** - Small Contributor Committee

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

**If required.**

**FPPC Form 460 (June/01)**  
FPPC Toll-Free Helpline: 866/ASK-FPPC
### Schedule E
**Payments Made**

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

**Statement covers period**
**from July 1, 2013**
**through December 31, 2013**

**Page 6 of 6**

**NAME OF FILER**

People for Bob Huber-Mayor 2012

**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>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>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**

**CODE OR DESCRIPTION OF PAYMENT**

**AMOUNT PAID**

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

<table>
<thead>
<tr>
<th><strong>Schedule E Summary</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Payments made this period of $100 or more. (Include all Schedule E subtotals.)</td>
</tr>
<tr>
<td>2. Unitemized payments made this period of under $100</td>
</tr>
<tr>
<td>3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)</td>
</tr>
<tr>
<td>4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)</td>
</tr>
</tbody>
</table>

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FPCC Toll-Free Helpline: 866/ASK-FPPC