Video Tutorial for Candidates and Treasurers

Presented by the Fair Political Practices Commission's
External Affairs and Education Division
Fair Political Practices Commission

The visual aids used in FPPC presentations are guides for training only, and contain only highlights of selected provisions of the law. They do not carry the weight of the law.

What Will You Learn?

- How to get started with your campaign
- Campaign contributions and restrictions
- Finances and recordkeeping
- How to complete and file campaign reports
- What to do after the election

Candidate and Treasurer Responsibilities

- Both must take appropriate steps to ensure compliance with reporting/recordkeeping rules.
- Stay informed and aware of bank deposits and proper expenditures of campaign funds.
- Both are equally liable in audits or FPPC Enforcement cases for non-disclosure on campaign reports or lack of records.
- Campaign disclosure reports are signed under penalty of perjury.

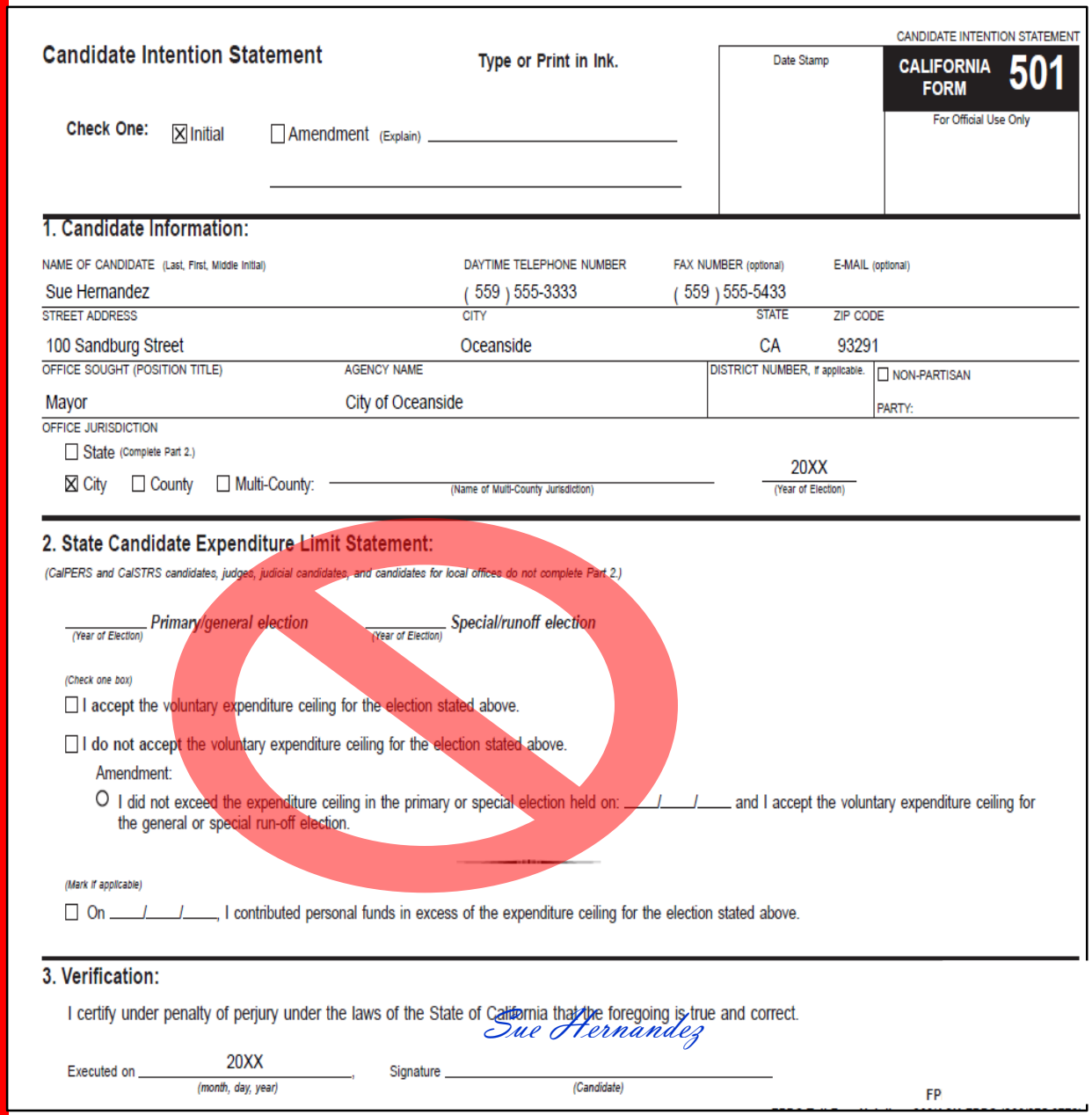
Getting Started

FPPC Campaign Forms

- 501 – File before soliciting contributions
- 410 – Secures FPPC ID number
- 460 – Ongoing disclosure report
- 497 – May be required during the 90 days before election
- 700 – Statement of Economic Interests

Candidate Intention Statement Form 501

- File before spending or receiving money, including personal funds.
- Must file a new 501 if running for re-election.
- File with your local election filing officer.



CANDIDATE INTENTION STATEMENT

Candidate Intention Statement Type or Print in Ink.

Date Stamp

CALIFORNIA FORM **501**

For Official Use Only

Check One: ☒ Initial ☐ Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial)	DAYTIME TELEPHONE NUMBER	FAX NUMBER (optional)	E-MAIL (optional)
Sue Hernandez	(559) 555-3333	(559) 555-5433	

STREET ADDRESS	CITY	STATE	ZIP CODE
100 Sandburg Street	Oceanside	CA	93291

OFFICE SOUGHT (POSITION TITLE)	AGENCY NAME	DISTRICT NUMBER, if applicable.	☐ NON-PARTISAN
Mayor	City of Oceanside		PARTY:

OFFICE JURISDICTION

☐ State (Complete Part 2.)

☒ City ☐ County ☐ Multi-County: _____ (Name of Multi-County Jurisdiction) 20XX (Year of Election)

2. State Candidate Expenditure Limit Statement:

(CalPERS and CalSTRS candidates, judges, judicial candidates, and candidates for local offices do not complete Part 2.)

_____ (Year of Election) *Primary/general election* _____ (Year of Election) *Special/runoff election*

(Check one box)

☐ I accept the voluntary expenditure ceiling for the election stated above.

☐ I do not accept the voluntary expenditure ceiling for the election stated above.

Amendment:

○ I did not exceed the expenditure ceiling in the primary or special election held on: ____/____/____ and I accept the voluntary expenditure ceiling for the general or special run-off election.

(Mark if applicable)

☐ On ____/____/____, I contributed personal funds in excess of the expenditure ceiling for the election stated above.

3. Verification:

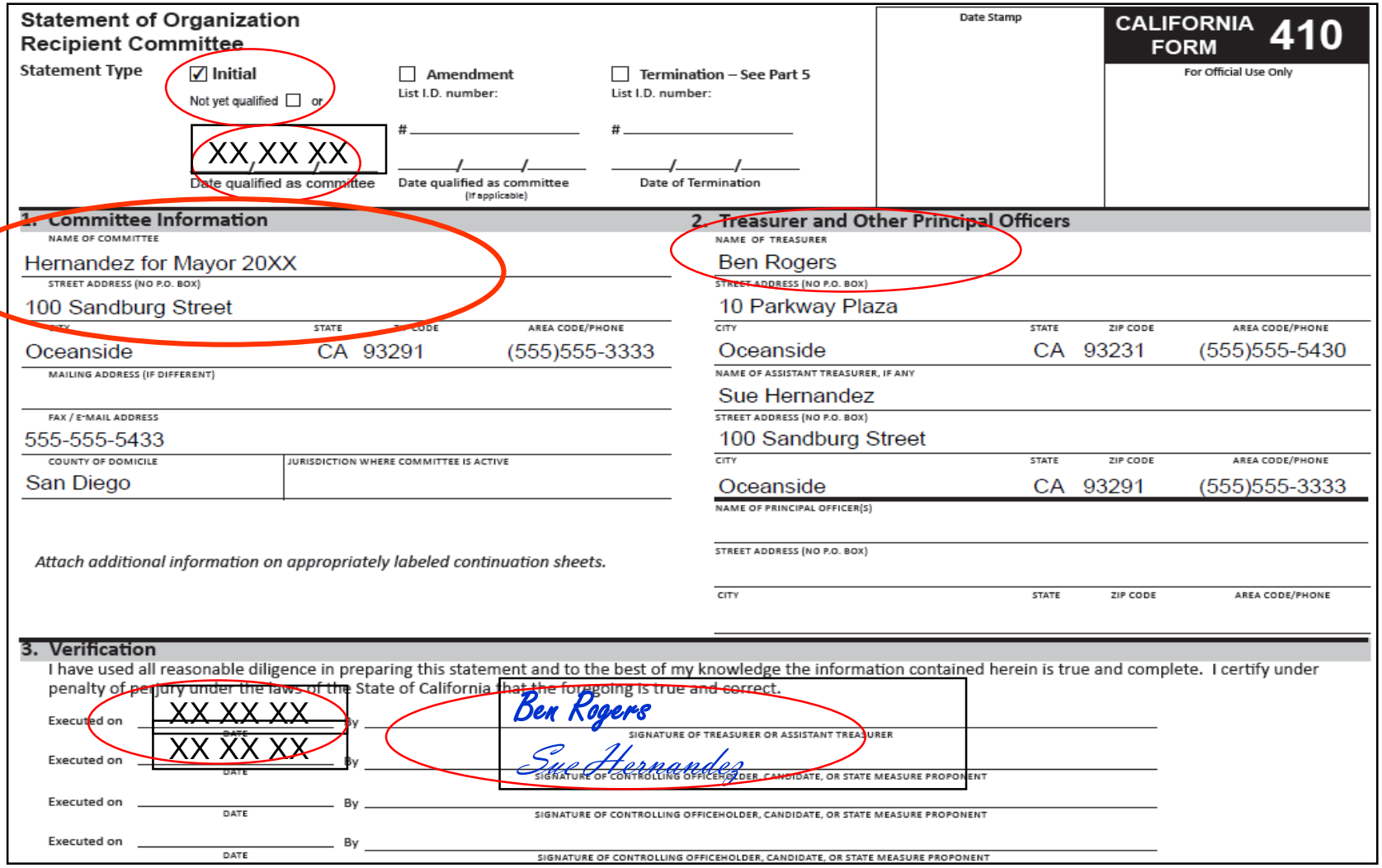
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Sue Hernandez

Executed on 20XX (month, day, year), Signature _____ (Candidate)

FP

Statement of Organization - Form 410



Statement of Organization
Recipient Committee

Date Stamp

CALIFORNIA FORM 410
For Official Use Only

Statement Type

☑ **Initial** Not yet qualified ☐ or
XX/XX/XX
Date qualified as committee

☐ **Amendment**
List I.D. number:
#
Date qualified as committee (if applicable)

☐ **Termination – See Part 5**
List I.D. number:
#
Date of Termination

1. Committee Information

NAME OF COMMITTEE
Hernandez for Mayor 20XX
STREET ADDRESS (NO P.O. BOX)
100 Sandburg Street
CITY | STATE | ZIP CODE | AREA CODE/PHONE
Oceanside | CA | 93291 | (555)555-3333
MAILING ADDRESS (IF DIFFERENT)
FAX / E-MAIL ADDRESS
555-555-5433
COUNTY OF DOMICILE | JURISDICTION WHERE COMMITTEE IS ACTIVE
San Diego

Attach additional information on appropriately labeled continuation sheets.

2. Treasurer and Other Principal Officers

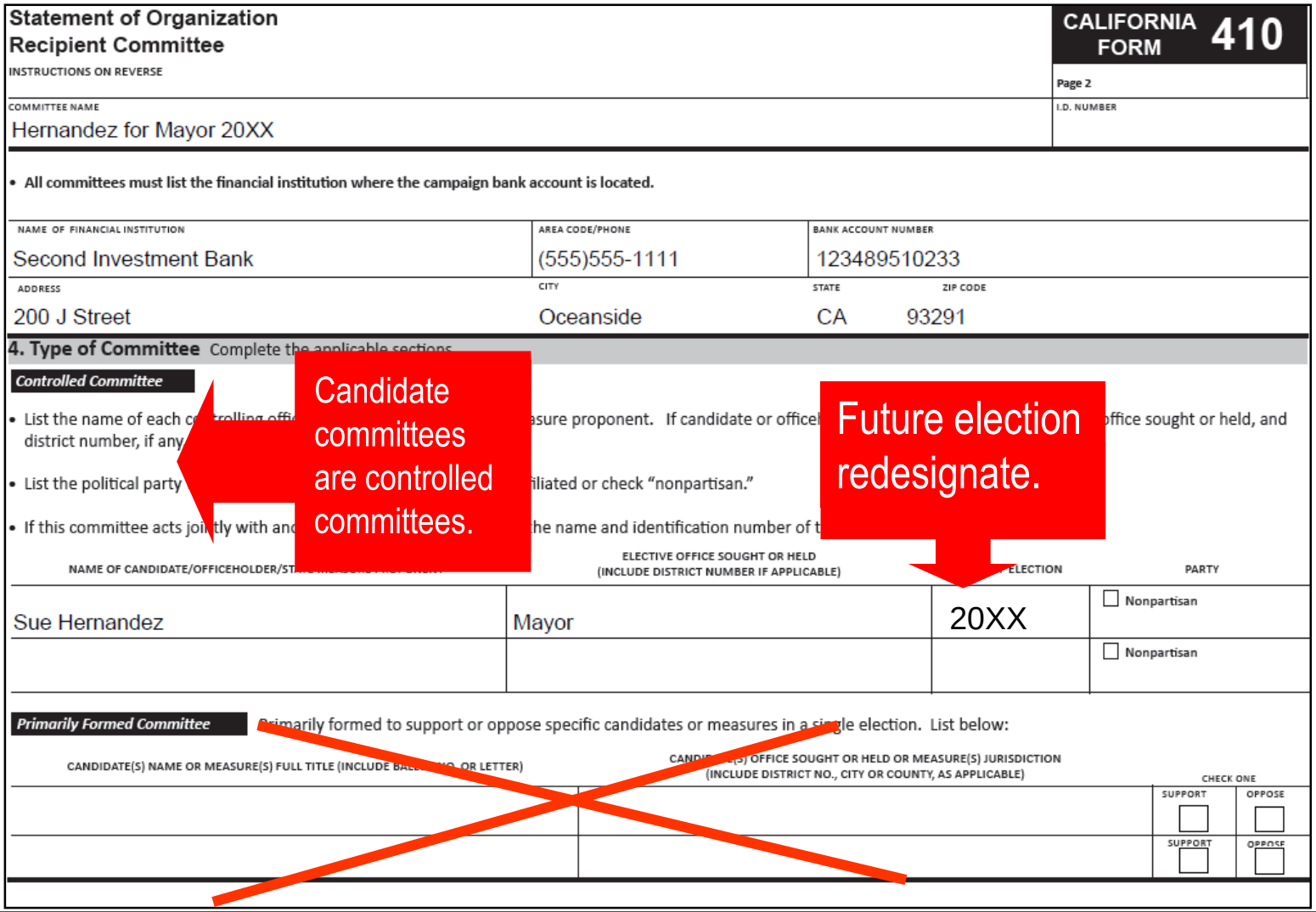
NAME OF TREASURER
Ben Rogers
STREET ADDRESS (NO P.O. BOX)
10 Parkway Plaza
CITY | STATE | ZIP CODE | AREA CODE/PHONE
Oceanside | CA | 93231 | (555)555-5430
NAME OF ASSISTANT TREASURER, IF ANY
Sue Hernandez
STREET ADDRESS (NO P.O. BOX)
100 Sandburg Street
CITY | STATE | ZIP CODE | AREA CODE/PHONE
Oceanside | CA | 93291 | (555)555-3333
NAME OF PRINCIPAL OFFICER(S)
STREET ADDRESS (NO P.O. BOX)
CITY | STATE | ZIP CODE | AREA CODE/PHONE

3. Verification

I have used all reasonable diligence in preparing this statement and to the best of my knowledge the information contained herein 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 XX/XX/XX (DATE) By Ben Rogers (SIGNATURE OF TREASURER OR ASSISTANT TREASURER)
Executed on XX/XX/XX (DATE) By Sue Hernandez (SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT)
Executed on _____ (DATE) By _____ (SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT)
Executed on _____ (DATE) By _____ (SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT)

Statement of Organization - Form 410 Page 2



Statement of Organization
Recipient Committee
INSTRUCTIONS ON REVERSE

CALIFORNIA FORM **410**
Page 2

COMMITTEE NAME: Hernandez for Mayor 20XX
I.D. NUMBER:

- **All committees must list the financial institution where the campaign bank account is located.**

NAME OF FINANCIAL INSTITUTION	AREA CODE/PHONE	BANK ACCOUNT NUMBER
Second Investment Bank	(555)555-1111	123489510233

ADDRESS	CITY	STATE	ZIP CODE
200 J Street	Oceanside	CA	93291

4. Type of Committee Complete the applicable sections.

Controlled Committee

- List the name of each c…trolling offi… …asure proponent. If candidate or office… …ffice sought or held, and district number, if any.
- List the political party … …iliated or check "nonpartisan."
- If this committee acts jo…tly with an… …he name and identification number of t…

Candidate committees are controlled committees.

Future election redesignate.

NAME OF CANDIDATE/OFFICEHOLDER/ST…	ELECTIVE OFFICE SOUGHT OR HELD (INCLUDE DISTRICT NUMBER IF APPLICABLE)	…ELECTION	PARTY
Sue Hernandez	Mayor	20XX	☐ Nonpartisan
			☐ Nonpartisan

Primarily Formed Committee Primarily formed to support or oppose specific candidates or measures in a single election. List below:

CANDIDATE(S) NAME OR MEASURE(S) FULL TITLE (INCLUDE BA… NO. OR LETTER)	CANDI…(S) OFFICE SOUGHT OR HELD OR MEASURE(S) JURISDICTION (INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)	CHECK ONE SUPPORT	CHECK ONE OPPOSE
		☐	☐
		SUPPORT ☐	OPPOSE ☐

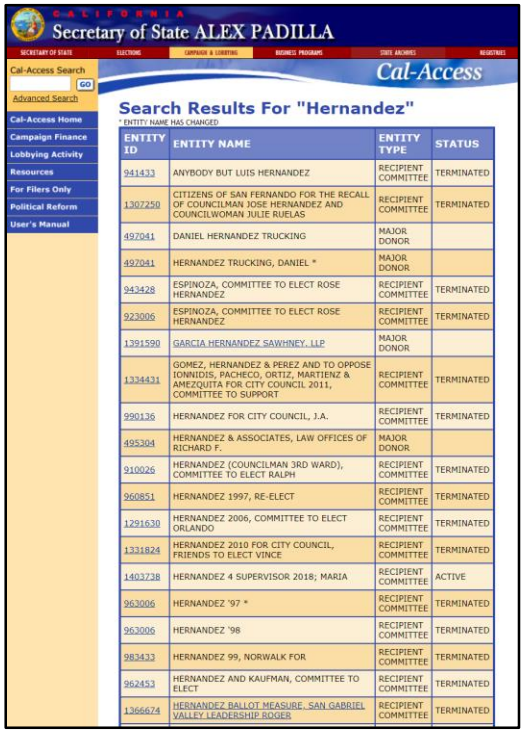
FPPC Committee Identification Number

- The Secretary of State's Office (SOS) assigns your committee an identification number upon receipt of Form 410.
- SOS posts the identification number on their website at www.sos.ca.gov.
- This number is used on all FPPC reporting forms.

Note:

If your bank requires a taxpayer ID number, contact the IRS at www.irs.gov.

Secretary of State Link (Check for ID number)



Contributions

What is a Contribution?

- Money (cash, check, credit card, wire transfers)
- Non-monetary items (donated goods or services, discounts)
- Loans
- Candidate's personal funds
- Fundraiser tickets (must disclose the full cost of the ticket)

Local limits may apply!

Receiving Electronic Contributions

Contributions may be received by:

- Credit card
- Wire transfer
- Debit account transaction
- Text message
- Or by similar electronic payment options (including telephone or online donations)

Restrictions on Contributions

- No anonymous contributions of $100 or more.
- Never accept or spend $100 or more in cash.
- The true source of the contribution must be reported.

Campaign Money Laundering

- Campaign money laundering occurs when the true source of a contribution is not reported and is a serious violation of the law.
- A laundered contribution must be surrendered to the CA state general fund.
- This is a serious, and expensive violation of the Political Reform Act.

Home and Office Events

- A home and/or office event is not considered a contribution if the total cost of the event is $500 or less.
- Food, beverages and other items donated by someone other than the occupant count toward the $500 threshold and are reportable as non-monetary contributions.

Member Communications

Payments made by an organization (i.e. unions, associations, political parties) for certain communications that are sent only to the organization's members, employees, shareholders or their families, are not contributions to a candidate endorsed in the communication.

Debates and Meetings

- When an organization hosts a debate, as long as all candidates are invited, the organization has not made a reportable contribution and the candidates have not received reportable contributions.
- The same is true if both sides of a ballot measure are invited.

Volunteering Personal Services

- If an individual such as an envelope stuffer, precinct walker, or accountant donates his or her professional services to a campaign, no contribution has been made or received.
- If an employer donates employee services to a campaign, and any employee spends more than 10% of his or her compensated time in a calendar month providing services, the employer has made a non-monetary contribution.

Independent Expenditures

- A payment for a communication not made at the behest of or in coordination with the candidate or his or her committee.
- Expressly advocates support or opposition of a clearly identified candidate or unambiguously urges a particular result in an election.
- Not reportable by the candidate or committee.

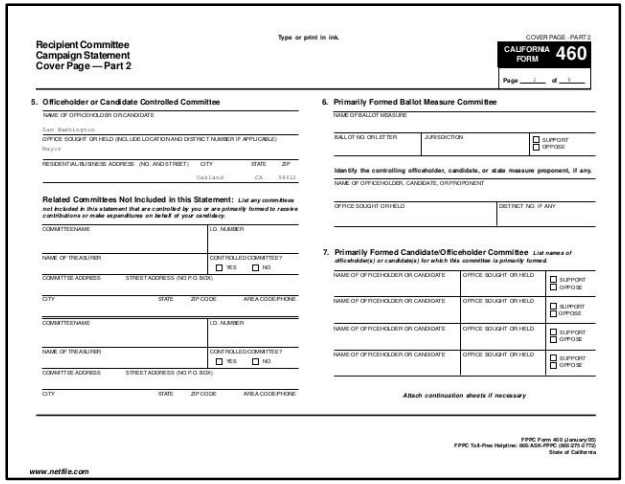
Bank Account Rules

- One bank account per election
- Account may be opened as a personal account (*If bank requires tax ID#, visit the IRS website.)*
- No commingling of funds *(personal or other committees)*
- Candidates must make all campaign expenditures from the campaign bank account, with the exception of the candidate filing and ballot statement fees.

Campaign Statement

Campaign Statement
Form 460

- Reports financial activity for the campaign—all contributions received and expenditures made.
- Completed by the campaign treasurer.
- Can be filed electronically if available, or via paper copy—check with your filing officer.
- Subject to $10/day late fine and other enforcement penalties.
- Forms are filed under penalty of perjury.



Recipient Committee
Campaign Statement
Cover Page — Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA FORM 460

Page 2 of 2

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Sam Washington

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

Mayor

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

Oakland CA 94612

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

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866.ASK-FPPC (866.275.3772)
State of California

www.netfile.com

Form 460
Campaign Statement

Fast Facts:

- Public document.
- Reviewed by the filing officer.
- Can be amended.
- Generally, postmark is the date filed.
- Subject to a $10/day late fine and other penalties.

What to Report:

- Contributions received (money & assets in).
- Expenditures made (money & assets out).

Where to File:

Local Committees:

- City Clerk/County Registrar of Voters.

Multiple Committees:

- Holding one office and running for another? You may be required to cross file. (Regulation 18405.)

Fair Political Practices Commission
Filing Schedule for
Candidates and Controlled Committees for Local Office
Being Voted on November 6, 2018

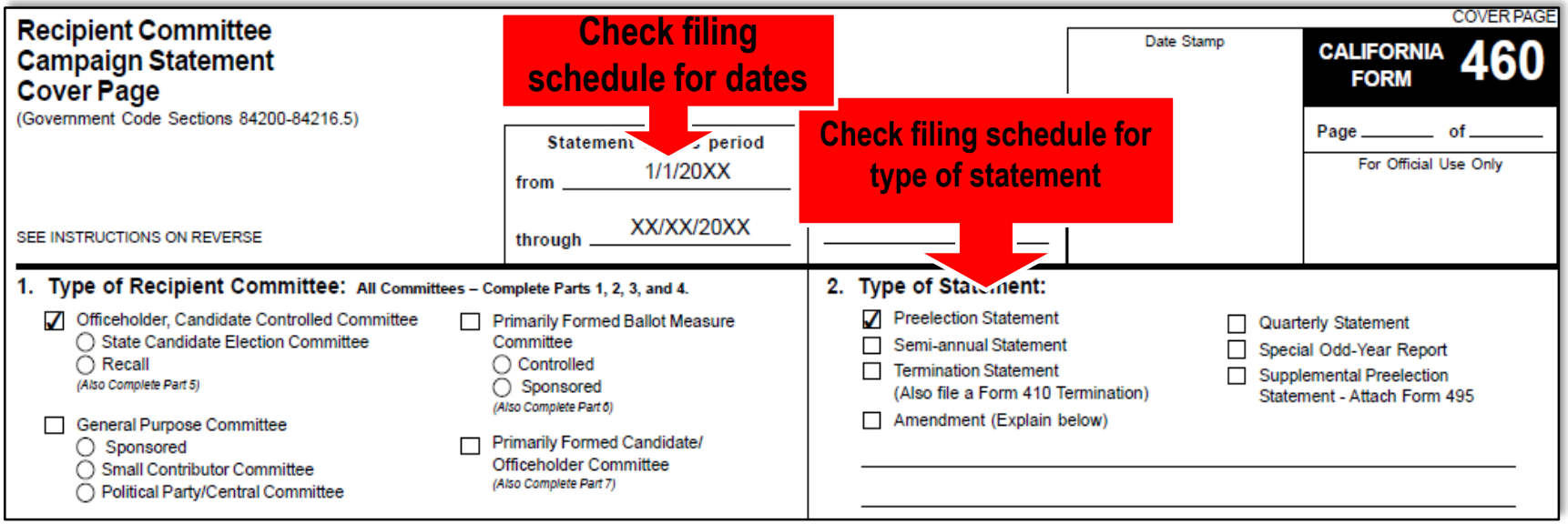
Deadline	*Period*	*Form*	*Notes*
Jul 31, 2018 *Semi-Annual*	*** – 6/30/18**	460	▪ All committees must file Form 460.
Within 24 Hours *Contribution Reports*	**8/8/18 – 11/6/18**	497	▪ File if a contribution of $1,000 or more in the aggregate is received from a single source. ▪ File if a contribution of $1,000 or more in the aggregate is made to *another* candidate or measure being voted upon November 6, 2018. ▪ The recipient of a non-monetary contribution of $1,000 or more must file a Form 497 within 48 hours from the time the contribution is received. ▪ File by personal delivery, e-mail, guaranteed overnight service, fax or online, if available.
Sep 27, 2018 *1st Pre-Election*	**7/1/18 – 9/22/18**	460 or 470	▪ Each candidate listed on the ballot must file Form 460 or Form 470 (see below).
Oct 25, 2018 *2nd Pre-Election*	**9/23/18 – 10/20/18**	460	▪ All committees must file Form 460. ▪ File by personal delivery, guaranteed overnight service or online, if available.
Jan 31, 2019 *Semi-Annual*	**10/21/18 – 12/31/18**	460	▪ All committees must file Form 460 unless the committee filed termination Forms 410 and 460 before December 31, 2018.

Additional Notes:

- *** Period Covered:** The period covered by any statement begins on the day after the closing date of the last statement filed, or January 1, if no previous statement has been filed.
- **Local Ordinance**: Always check on whether additional local rules apply.
- **Deadline Extensions:** Deadlines are extended when they fall on a Saturday, Sunday, or an official state holiday. This extension does not apply to the deadline for a Form 497 due the weekend before the election, or to any Form 496. Such reports must be filed within 24 hours regardless of the day of the week. Statements filed after the deadline are subject to a $10 per day late fine.
- **Method of Delivery:** All paper filings may be filed by first class mail unless otherwise noted. A paper copy of a report may not be required if a local agency requires online filing pursuant to a local ordinance.
- **Form 501:** All candidates must file Form 501 (Candidate Intention Statement) before soliciting/receiving contributions.

After the election, most candidates file Form 460 semi-annually until the committee is closed.

Form 460
Cover Page



If you're both candidate and treasurer, sign twice!

Form 460
Schedule A : Monetary Contributions

- Date received: List the date the committee obtained possession or control of the contribution.
- Itemize: Disclose details about the donor - the names and addresses of donors who contribute $100 or more in a calendar year.
- For individual donors, also report their **occupation and employer**.

Donor Information (contributors of $100 or more)

Correct:

- Retired
- Consultant, A Better Business Agency
- Self-Employed, No Separate Business Name
- Homemaker or Student
- Private Investor: Stocks & Bonds
- Lawyer, Ortiz & Smith

Incorrect:

- Manager
- Next Door Neighbor
- ABBA (no acronyms)
- Business Person
- Entrepreneur
- Investor

Contributions of $100 or more **must be returned within 60 days** if individual's name, street address, occupation, and employer are not obtained.

Form 460
Schedule A: Monetary Contributions

You must include individuals' occupation & employer.

Amount less than $100 this period is added to previous contribution.

Schedule A
Monetary Contributions Received

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)
XX/XX/XX	Linda Gutierrez 123 South B Street Oceanside, CA 93291	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Nurse, Oceanside Medical Clinic	50	100	

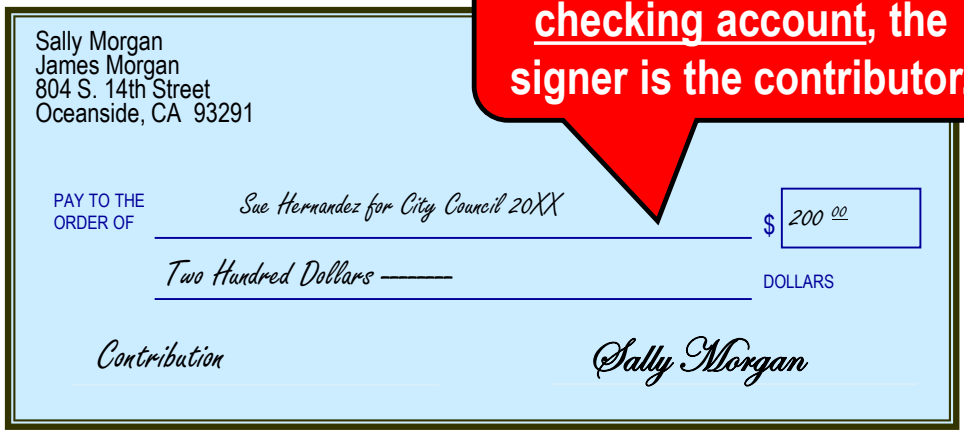
IND= Individual COM= Committee OTH= Business

Lump sum - report contributions less than $100.

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 860
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 1,200
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL $ 2,060

Form 460 Schedule A: Monetary Contributions



Donor made contribution from her business account and another from her personal account.

DATE RECEIVED	T ADDRESS AND ZIP CODE OF CONTRIBUTOR OMMITTEE, 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)
XX/XX/XX	Beachwear for Days 411 Sanditon Court Oceanside, CA 93291	☐IND ☐COM ☑OTH ☐PTY ☐SCC		99	198	
XX/XX/XX	Maria Edgeworth 411 Sanditon Court Oceanside, CA 93291	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Owner, Beachwear for Days	99	198	

Reporting Contributions Received Through Intermediaries

If name on check is different than the true source, disclose both intermediary and true source.

Funds are reported under the true source.

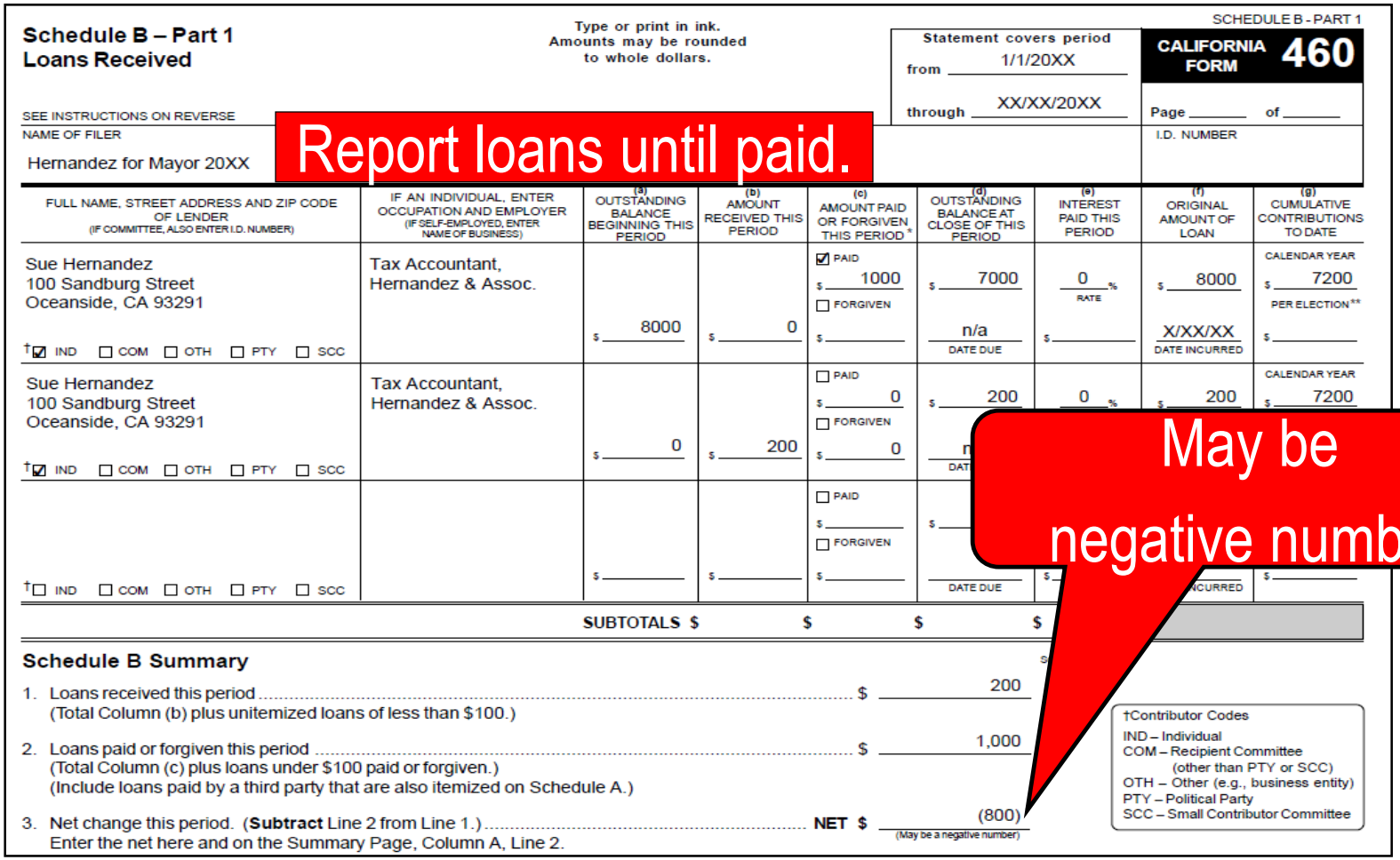
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
XX/XX/XX	Cane Transportation 1127 Promenade Oceanside, CA 93291	☐IND ☐COM ☑OTH ☐PTY ☐SCC		300	300	
	Intermediaries: Jennifer Crandall 1127 Promenade, Oceanside, CA 93291	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Manager, Cane Transportation			
	Tim Mathew 1127 Promenade, Oceanside, CA 93291	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Director, Cane Transportation			
	Elaine Reed 1127 Promenade, Oceanside, CA 93291	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Secretary, Cane Transportation			

Not disclosing the true source is a serious violation.

Form 460
Schedule B: Loans Received

- Candidate's personal funds may be reported as a loan.
- Report the financial institution as the lender if it has loaned the committee money or the committee has drawn on a line of credit.
- Each loan from the same person is reported as a separate loan.

Form 460
Schedule B: Loans Received



Schedule B – Part 1
Loans Received

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

SCHEDULE B - PART 1

Statement covers period
from 1/1/20XX
through XX/XX/20XX

CALIFORNIA FORM **460**

Page ____ of ____

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Hernandez for Mayor 20XX

I.D. NUMBER

Report loans until paid.

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
Sue Hernandez 100 Sandburg Street Oceanside, CA 93291 †☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Tax Accountant, Hernandez & Assoc.	$ 8000	$ 0	☑ PAID $ 1000 ☐ FORGIVEN $	$ 7000 n/a DATE DUE	0 % RATE $	$ 8000 X/XX/XX DATE INCURRED	CALENDAR YEAR $ 7200 PER ELECTION** $
Sue Hernandez 100 Sandburg Street Oceanside, CA 93291 †☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Tax Accountant, Hernandez & Assoc.	$ 0	$ 200	☐ PAID $ 0 ☐ FORGIVEN $ 0	$ 200 DAT	0 %	$ 200 NCURRED	CALENDAR YEAR $ 7200 $
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$	$	☐ PAID $ ☐ FORGIVEN $	$ DATE DUE	$	$	$
		SUBTOTALS $	$	$	$			

May be negative number.

Schedule B Summary

1. Loans received this period ..... $ 200
   (Total Column (b) plus unitemized loans of less than $100.)
2. Loans paid or forgiven this period ..... $ 1,000
   (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 $ (800)
   (May be a negative number)
   Enter the net here and on the Summary Page, Column A, Line 2.

†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

Form 460
Schedule C: Non-Monetary Contributions

Examples:

- Food and Beverages
- Rental Space
- Polls
- Discounts

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)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
XX/XX/XX	Seaside TV Sales 421 16th Street Oceanside, CA 93291	☐IND ☐COM ☑OTH ☐PTY ☐SCC		TV	1,280	1,280	
XX/XX/XX	California Surfers PAC 1090 Pacific Highway Oceanside, CA 93291	☐IND ☑COM ☐OTH ☐PTY ☐SCC	ID #941233	Postage	340	340	

Form 460
Schedule E: Campaign Expenditures

All expenditures must have a:

- Political
- Legislative
- Governmental purpose

No personal use of campaign funds!

Allowable and Prohibited Expenditures

Allowable Expenditures

- Election Night Celebration
- Payment for campaign advertisements, filing fees, and legal advice
- Payments for gas while attending campaign events
- Payment to a slate mailer organization

Prohibited Expenditures

- Post-election vacation
- Health club dues
- Payments to a spouse for fundraising efforts
- Cosmetics
- Personal living accommodations

Form 460
Schedule E: Campaign Expenditures

- May establish a credit card account
- May establish petty cash fund ($100 or less)
- Cash expenditures over $100 are prohibited

Form 460
Schedule E: Candidate Payments

Candidates must deposit funds into their campaign bank account before making expenditures!

If you mistakenly use personal funds rather than campaign funds, report as follows:

- Candidate does not wish to be reimbursed: Report the amount on Schedule C as a non-monetary. Itemize each expenditure of $100 or more.
- Candidate wishes to be reimbursed: Report the payment on Schedule E and itemize expenditures of $100 or more.
- Candidate will be reimbursed by committee in the future: Report the payment on Schedule F and itemize expenditures of $100 or more.

Form 460
Schedule E: Campaign Expenditures

An expenditure of $100 or more for a gift, meal, or travel must include certain details.

Date, number of attendees, whether candidate &/or any individual with authority to make expenditures attended, and purpose.

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Hannah's Kitchen 42 Marina Way Oceanside, CA 93291			X/XX-4 attendees for lunch, including candidate and treasurer to discuss campaign strategy	120
Sue Hernandez 100 Sandburg Street Oceanside, CA 93291	FII		Filing Fee Reimbursement	1,000

Reimburse candidate for filing fee.

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
County Bank Visa 21 Middleton Street Dayton, OH 45330				1,031
Subvendor: Phone Banks R Us 22 Parkway Plaza $900 Oceanside, CA 93291	PHD			

Credit card payment.

Form 460
Schedule E: Sub-vendors

- Report sub-vendors of campaign agents and consultants.
- Itemize payments of $500 or more.
- Reimburse campaign workers within 45 days.

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Freeman & Freeman Associates 21 Vista Del Mar Oceanside, CA 93291	CNS			2,000
Daily News $500 21 Lava Way Oceanside, CA 93291				

Form 460
Schedule E: Sub-vendors

Schedule E
Payments Made

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Freeman & Freeman Associates 21 Vista Del Mar Oceanside, CA 93291	CNS			2,000

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

NAME OF FILER: Hernandez for Mayor 20XX
I.D. NUMBER: 123456

NAME OF AGENT OR INDEPENDENT CONTRACTOR: Freeman & Freeman Associates

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 prod
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' sa
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime an
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodgi
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lo
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between comm
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)

Don't carry over to summary!

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Daily News 21 Lava Way Oceanside, CA 93291	PRT			500

Form 460
Schedule F: Accrued Expenses

- Report goods or services received, but not yet paid, during reporting period.
- Continue to report as accrued expense until paid.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Quirkos 100 Main Street Oceanside, CA 93291	PRT	3,000	0	1,000	2,000

!Subtract to get a negative number!

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.) ..... INCURRED TOTALS $ 0

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.) ..... PAID TOTALS $ 1,000

3. Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... NET $ (1,000)
May be a negative number

Form 460
Schedule I: Miscellaneous Increases to Cash

Examples:

- Interest received or credited to a checking or savings account or other type of deposit
- Refunds
- Sale of donated items (up to fair market value)
- Receipts from the sale of committee assets

Campaign Disclosure Statement
Summary Page

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

SUMMARY PAGE

Statement covers period
from 1/1/20XX
through XX/XX/20XX

CALIFORNIA FORM **460**

Page _____ of _____

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Hernandez for Mayor 20XX

I.D. NUMBER

Contributions Received

		Column A (TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)	Column B (CALENDAR YEAR TOTAL TO DATE)
1. Monetary Contributions	*Schedule A, Line 3*	$ 2,060	$ 2,060
2. Loans Received	*Schedule B, Line 3*	(800)	7,200
3. SUBTOTAL CASH CONTRIBUTIONS	*Add Lines 1 + 2*	$ 1,260	$ 9,260
4. Nonmonetary Contributions	*Schedule C, Line 3*	1,620	1,620
5. TOTAL CONTRIBUTIONS RECEIVED	*Add Lines 3 + 4*	$ 2,880	$ 10,880

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

N/A

to Date

20. Contributions Received $ _____

21. Expenditures Made $ _____

Expenditures Made

6. Payments Made	*Schedule E, Line 4*	$ 4,925	$ 4,925
7. Loans Made	*Schedule H, Line 3*	0	0
8. SUBTOTAL CASH PAYMENTS	*Add Lines 6 + 7*	$ 4,925	$ 4,925
9. Accrued Expenses (Unpaid Bills)	*Schedule F, Line 3*	(1,000)	2,000
10. Nonmonetary Adjustment	*Schedule C, Line 3*	1,620	1,620
11. TOTAL EXPENDITURES MADE	*Add Lines 8 + 9 + 10*	$ 5,545	$ 8,545

Expenditure Limit Summary for State Candidates

22. Cumulati… Made*
(If Subje… limit)

Date of Electio… to Date
(mm/dd/yy)

N/A

_____/_____/_____

_____/_____/_____

*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*	$ 4,485
13. Cash Receipts	*Column A, Line 3 above*	1,260
14. Miscellaneous Increases to Cash	*Schedule I, Line 4*	20
15. Cash Payments	*Column A, Line 8 above*	4,925
16. ENDING CASH BALANCE	*Add Lines 12 + 13 + 14, then subtract Line 15*	$ 840

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

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

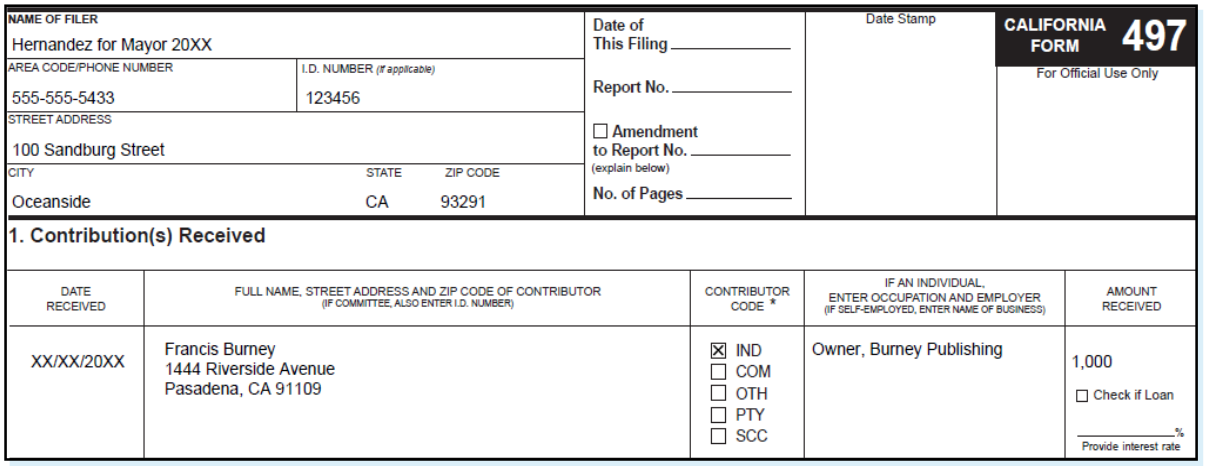
Cash Equivalents and Outstanding Debts

18. Cash Equivalents	*See instructions on reverse*	$ 0
19. Outstanding Debts	*Add Line 2 + Line 9 in Column B above*	$ 9,200

Additional Reports & Information

Real-Time Reporting Form 497

- File Form 497 if you receive $1,000 or more from a single source (including candidate's personal funds) within 90 days before election.
- May be filed by e-mail, fax, personal delivery, guaranteed overnight mail, or online.



NAME OF FILER		Date of This Filing	Date Stamp	CALIFORNIA FORM 497
Hernandez for Mayor 20XX				For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (If applicable)	Report No.		
555-555-5433	123456			
STREET ADDRESS		☐ Amendment to Report No. (explain below)		
100 Sandburg Street				
CITY	STATE ZIP CODE	No. of Pages		
Oceanside	CA 93291			

1. Contribution(s) Received

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
XX/XX/20XX	Francis Burney 1444 Riverside Avenue Pasadena, CA 91109	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner, Burney Publishing	1,000 ☐ Check if Loan _____% Provide interest rate

Major Donor Notification

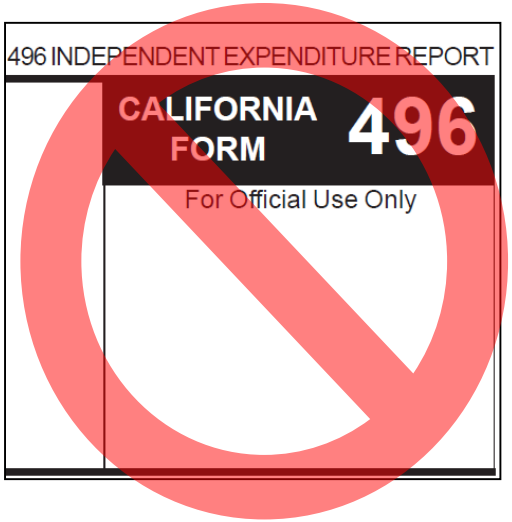
If you receive $5,000 or more from a donor, you must notify them that they may qualify as a major donor.

The donor may need to file:

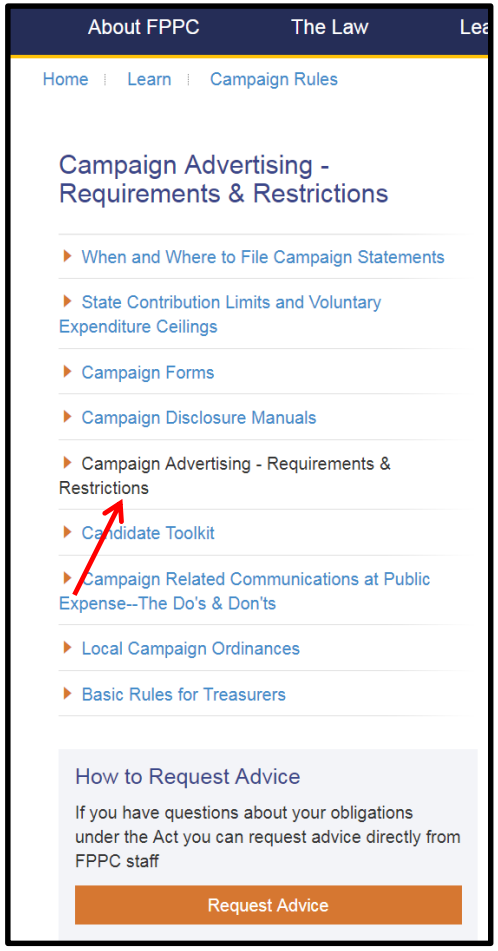
- Form 461 Major Donor Statement
- Form 497 Contribution Report
- Sample Major Donor notice language found in Campaign Rules section on FPPC website

Expenditure Reporting

- If you make $1,000 or more in expenses on behalf of your own committee, no additional 24-hour report is required.
- Disclose the expenses on the next Form 460 filing.



Advertisements



Political Advertising Disclaimers

1. Communications by Candidate Committees for their own Election

The disclaimer must include, unless otherwise noted: "Paid for by *committee name*"

Examples: "Paid for by Jones for Assembly 20XX"
"Paid for by Friends of Smith for Mayor 20XX"

Communication	Disclaimer and Manner of Display
All mass mailings – more than 200 substantially similar pieces of mail sent within a calendar month	• **Candidate's committee name and address** (on file with Form 410) on outside of mailing (if no Form 410 on file, use candidate's name and address) • **"Paid for by"** must be in the same color and font as the committee name and address and immediately in front of or above the name and address • If sent by more than one candidate or committee: ○ Also on at least one insert in the mailing • No less than 6-point type and in a contrasting print or color • Return envelopes (if included in solicitation) – committee's name, address and ID number are recommended but not required
All mass electronic mail – more than 200 substantially similar emails sent within a calendar month	• **"Paid for by [name of candidate or committee]"** must be in at least the same size font as a majority of the text (no address is required on mass electronic mailings)
Newspaper ads	• Refer to the Elections Code for newspaper ad disclaimer requirements

Mailings, Postcards and E-Mails

All mass mailings/postcards:

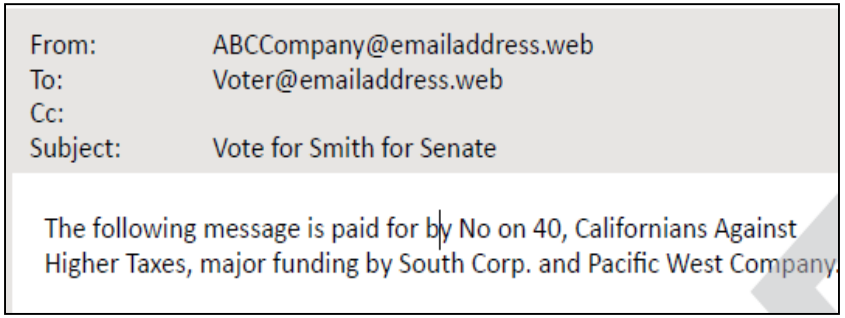
- Candidate's committee name and address (on file with Form 410) on outside of mailing (if no Form 410 on file, use candidate's name and address).
- "Paid for by" must be in the same color and font as the committee name and address and immediately in front of or above the name and address.

Paid for by Hernandez for Mayor 20XX
100 Sandburg Street
Oceanside, CA 93291

Jenny Smith
103 Sandburg Street
Oceanside, CA 93291

All mass emails:

- "Paid for by [name of candidate or committee]" must be in at least the same size font as a majority of the text (no address is required on mass electronic mailings).



After the Election

After the Election

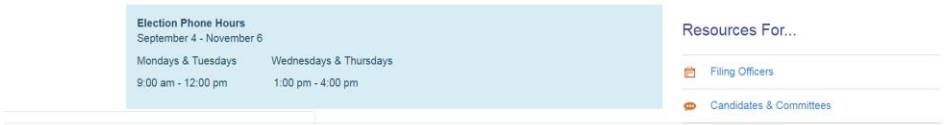
- All future filing obligations depend on the outcome of the election.
- Successful candidates can maintain an open campaign committee, but they must file regular reports until they terminate the committee.
- Defeated candidates may terminate their campaign committee.
- There is no deadline for campaign committee termination.

Things to Remember

- File appropriate campaign reports on time.
- Download the applicable filing schedules.
- Keep good records—copies of all receipts and contributions for at least 4 years.
- Remember to document the information of donors who contribute $25 or more.
- Candidates: Never pay out of pocket for expenses!

Always use the FPPC as a resource!

www.fppc.ca.gov



Thank You for Participating!

We value your comments. Please send an email to

comments@ fppc.ca.gov