CITY OF SIMI VALLEY -**COVER PAGE** Recipient Committee Campaign Statement 014 001 Type or print in ink. Date Stamp **CALIFORNIA** RECEIVED 2001/02 **Cover Page** CITY OF SIMI VALLEY **FORM** (Government Code Sections 84200 Statement covers period Date of election if applicable: Page (Month, Day, Year) 7/1/14 from For Official Use Only OFFIOE OF ANTY CLERK 11/4/14 9/30/14 SEE INSTRUCTIONS ON REVERSE through Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. 2. Type of Statement: Officeholder, Candidate Controlled Committee ☐ Ballot Measure Committee Preelection Statement Quarterly Statement O State Candidate Election Committee O Primarily Formed Semi-annual Statement Special Odd-Year Report Controlled Termination Statement Supplemental Preelection (Also Complete Part 5) Sponsored Statement - Attach Form 495 Amendment (Explain below) (Also Complete Part 6) General Purpose Committee Primarily Formed Candidate/ Sponsored Officeholder Committee Small Contributor Committee (Also Complete Part 7) O Political Party/Central Committee I.D. NUMBER 3. Committee Information Treasurer(s) 1327401 COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) NAME OF TREASURER Mike Judge for City Council 2014 Sarit Judge MAILING ADDRESS STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE AREA CODE/PHONE AREA CODE/PHONE NAME OF ASSISTANT TREASURER, IF ANY CITY STATE ZIP CODE MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX MAILING ADDRESS CITY AREA CODE/PHONE AREA CODE/PHONE STATE ZIP CODE CITY STATE ZIP CODE OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS 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 Executed on of Treasurer or Assistant Treasure Executed on Signature of Controlling Office holder, Candidate, State Measure Proponent or Responsible Officer of Sponsor Executed on Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on FPPC Form 460 (June/01) Signature of Controlling Officeholder, Candidate, State Measure Proponent FPPC Toll-Free Helpline: 866/ASK-FPPC

State of California

#### Schedule A **Monetary Contributions Received**

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

		SCHEDULE A
Stateme	nt covers period	CALIFORNIA 1 20
from	7/1/14	FORM 400
through	9/30/14	Page 4 of V
	<u> </u>	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mike Judge For City Council 2014

1327401 IF AN INDIVIDUAL, ENTER AMOUNT CUMULATIVE TO DATE PER ELECTION FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR DATE CONTRIBUTOR OCCUPATION AND EMPLOYER RECEIVED THIS CALENDAR YEAR TO DATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED CODE \* (IF SELF-EMPLOYED, ENTER NAME PERIOD (IF REQUIRED) (JAN. 1 - DEC. 31) OF BUSINESS) XIND **ERIKA LEWIS HOMEMAKER** 7/9/14 100.00 100.00 □сом Потн ☐ PTY □scc **X**IND MITCHELL GREEN LAYWER 7/9/14 100.00 100.00 ☐ COM LAW OFFICE OF **□**OTH MITHCELL GREEN ☐ PTY □scc X IND RETIRED GARY & HAINLINE 7/9/14 100.00 100.00 СОМ ПОТН PTY □scc X IND STATE FARM AGENCY -**ERIC LITTLE** 7/9/14 100.00 100.00 СОМ ERIC LITTLE - Insurance **□**OTH AGENT □ PTY SCC **X**IND KEITH MASHURN CITY COUNCILMAN 100.00 100.00 7/9/14 COM SIMI VALLEY ПОТH PTY □scc

S	chedule A Summary	1	_
	Amount received this period – contributions of \$100 or more.	1	ζ
	(Include all Schedule A subtotals.)	\$ _	Ł

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

3. Total monetary contributions received this period.  \*Contributor Codes

IND - Individual

500.00

SUBTOTAL \$

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

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

			SCHED	ULEA (CONT.)
Statem	CALIF	ORNIA	400	
from	7/1/14		RM	460
through	9/30/14	_ Page _	5	of12
		I.D. NUN	1BER	

1327401

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MIKE JUDGE FOR CITY COUNCIL 2014

VIII (2 00 B	BETOKOTT COOKOL 2014				13272	+0 1	
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)	
7/9/14	ISAAC MORADI	☑IND □COM □OTH □PTY □SCC	ICO, INVESTMENT GROUP,INC - INVESTOR	1000.00	1000.00		
7/9/14	JACQUELINE MORADI	☑IND □COM □OTH □PTY □SCC	HOMEMAKER	1000.00	1000.00		
7/9/14	RICHARD CARTER	☑IND □COM □OTH □PTY □SCC	SELF EMPLOYED RKC SALES	100.00	100.00	·	
7/9/14	KELLY KOLAREK	☑IND □COM □OTH □PTY □SCC	CAR DEALER K&J AUTO EXCHANGE	300.00	300.00		
7/9/14	KIM MILSTEIN	☑IND □COM □OTH □PTY □SCC	CEO SIMI VALLEY HOSPITAL	250.00	250.00		
SUBTOTAL\$ 2650.00							

\*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

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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

SCHEDULE A (CONT.)

Statement covers period

1000.00

1800.00

Monetary Contributions Received		Amounts may be rounded to whole dollars.		Statement covers period 7/1/14		california 460		
				through9/3	30/14	Page _	6 of 12	
NAME OF FILER						I.D. NUN		
MIKE JUD	GE FOR CITY COUNCIL 2014					13274	01	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, 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 CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)	
7/9/14	ANTHONY JUDGE	☑IND □COM □OTH □PTY □SCC	COLONEL- U.S. ARMY	100.00	100	.00		
7/9/14	RICK MONSOUR	☑IND □COM □OTH □PTY □SCC	RETIRED	100.00	100	.00		
8/9/14	RICHARD RHOADES	☑IND □COM □OTH □PTY □SCC	OWNER GREEN ACRES MEATS	500.00	500	.00		
9/8/14	WILLIAM KLEPPER	☑IND □COM □OTH □PTY □SCC	REGIONAL DIRECTOR- RNC GENTER CAPITAL	100.00	100	.00		

SELF EMPLOYED

INC

P.W. GILLIBRAND CO.

SUBTOTAL\$

**Z**IND

□COM □OTH

☐ PTY □scc

\*Contributor Codes

IND - Individual

9/10/14

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

CELINE L. GILLIBRAND

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

1000.00

Type or print in ink.

Amounts may be rounded to whole dollars.

CALIFORNIA FORM

Statement covers period

7/1/14

				from	/ 14	F	DRM TOO
				through9/	30/14	Page_	7 of 12
NAME OF FILER						I.D. NU	
MIKE JUD	GE FOR CITY COUNCIL 2014					13274	101
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 CALENDAR Y (JAN. 1 - DEC	/EAR	PER ELECTION TO DATE (IF REQUIRED)
9/19/14	STEVE MANIOS	☑IND □COM □OTH □PTY □SCC	SELF EMPOLYED PROPERTY MANAGER	250.00	250.00		
9/19/14	DANIEL MCBRIDE	☑IND □COM □OTH □PTY □SCC	PLUMBING CONTRACTOR - NEPTUNE PLUMBING	1000.00	1000.00		
9/19/14	LAURENCE PAUL	☑IND □COM □OTH □PTY □SCC	redired	1000.00	1000.00		
9/19/14	VENTURA COUNTY LINCOLN CLUB  FPPC # 1229493	□IND  ☑COM □OTH □PTY □SCC		1000.00	1000	.00	
9/27	RANDY ZIMMERMAN	☑IND □COM □OTH □PTY □SCC	SELF EMPLOYED ZIMMERMAN ENTERPRISES, LLC	1000.00	1000	.00	

SUBTOTAL\$

4250.00

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(other than PTY or SCC)

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SCC - Small Contributor Committee

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE	Α	(CONT.)
CA	ALIFORNIA	A	60

Statement covers period

				from	/14	FOR	M TOO
				through9/3	30/14	Page	8 of 12
NAME OF FILER				I.D. NUMB			
MIKE JUDGE FOR CITY COU	NCIL 2014					132740 <sup>-</sup>	1
	DRESS AND ZIP CODE OF CONTRIBUTOR TTEE, 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 CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
9/19/14 CHRIS BILLER		☑IND □COM □OTH □PTY □SCC	OWNER OF GRETA'S GUNS	100.00	100.	00	
9/28/14 SIMI VALLEY PO	DLICE OFFICERS ASSN PAC	☐IND ☑COM ☐OTH ☐PTY ☐SCC		1000.00	1000.	00	
9/29/14 PAUL COMBS		☑IND □COM □OTH □PTY □SCC	RETIRED	100.00	100.	00	
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					
			SUBTOTAL	\$ 1200.00	100 P		

\*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

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

### Schedule E **Payments Made**

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

		SCHEDULEE
Statemer	nt covers period	CALIFORNIA 160
from	7/1/14	FORM 40U
through	9/30/14	Page 9 of 12
		I.D. NUMBER
		1327401

SEE INSTRUCTIONS ON REVERSE			through	9/30/14	Page	9 of 12
NAME OF FILER  Mike Judge For City Council 2014					1.D. NUME 1327401	
ND independent expenditure supporting/opposing others (explain)* POS postage, del	nmunications Id appearances Ises Ilating Is	s h senger services	RAD radio air RFD returned SAL campaig TEL t.v. or common campaig TRS staff/sport TSF transfer VOT voter re	rtime and production of d contributions gn workers' salaries able airtime and produ- te travel, lodging, and buse travel, lodging, a between committees	action costs meals and meals of the sam	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE O	R DE	SCRIPTION OF PAYI	MENT		AMOUNT PAID
SIMI VALLEY CANINE 3901 ALAMO ST.		Golf To	urnanens	t tickest		125.00
CITY OF SIMI VALLEY	FIL					950.00
FAST WRAP	СМР		, and a second s			268.75
Payments that are contributions or independent expenditures must also be summ	arized on Sc	hedule D.		SUE	STOTAL \$	1343.75
Schedule E Summary						4257.76
<ol> <li>Payments made this period of \$100 or more. (Include all Schedule E subtotal</li> </ol>						4357.76
2. Unitemized payments made this period of under \$100					\$	431.31
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part	1, Column (	ə).)		***************************************	\$	0.00
1. Total navments made this period (Add Lines 1. 2. and 3. Enter here and on t	he Summan	Page Column A	line 6 \	TOT	2 ΙΔ <sup>.</sup>	4789.07

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC