

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

CALIFORNIA FORM **460**

Page 1 of 15

For Official Use Only

RECEIVED  
CITY OF SIMI VALLEY  
2012 AUG 15 AM 9:11  
OFFICE OF CITY CLERK  
BY *[Signature]*

Date Stamp  
RECEIVED  
CITY OF SIMI VALLEY  
2012 JUL 30 PM 2:10  
OFFICE OF CITY CLERK  
BY *[Signature]*

Statement covers period  
from 01-01-2012  
through 06-30-2012

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

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 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:**

- Preelection Statement
- Semi-annual Statement
- Termination Statement  
(Also file a Form 410 Termination)
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report
- Supplemental Preelection Statement - Attach Form 495

*Add employers, correct minor errors, filled in summaries*

**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 7-29-2012  
Date

Executed on 7-29-2012  
Date

Executed on \_\_\_\_\_  
Date

Executed on \_\_\_\_\_  
Date

By *[Signature]* SHELBY MASHBURN  
Signature of Treasurer or Assistant Treasurer

By *[Signature]* KEITH MASHBURN  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period  
from 01-01-2012  
through 06-30-2012

CALIFORNIA  
FORM **460**

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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)
<u>5/12/12</u>	<u>THEODORE LAPADAKIS</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>BUSINESS OWNER</u> <u>HERCULES</u>	<u>1000.</u>	<u>1000.</u>	<u>1000. G 2012</u>
<u>5/15/12</u>	<u>BLAIR SUMMEY</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>POLICE OFFICER</u> <u>SIMI VALLEY</u>	<u>100.</u>	<u>100.</u>	<u>100. G 2012</u>
<u>5/15/12</u>	<u>MICHAEL OWENS</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>INSTRUCTOR</u> <u>Primerica</u> <u>Financial Services</u>	<u>100.</u>	<u>100.</u>	<u>100. G 2012</u>
<u>5/14/12</u>	<u>DENNIS LORENCZ</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>COO</u> <u>MARKETING</u> <u>ARDEN MAYFAIR INC.</u>	<u>200.</u>	<u>200.</u>	<u>200. G 2012</u>
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				<u>1400.</u>		

**Schedule A Summary**

- Amount received this period - itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 9655.00
- Amount received this period - unitemized monetary contributions of less than \$100 ..... \$ 100.00
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$** 9755.00

\*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

Statement covers period from <u>01-01-2012</u> through <u>06-30-2012</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>5</u> of <u>15</u>
I.D. NUMBER <u>1328118</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

KEITH MASHBURN for CITY COUNCIL 2012

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)
<u>5/15/12</u>	<u>EDWARD HO</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>FIREMAN VENTURA CO.</u>	<u>50.</u>	<u>50.</u>	<u>50. G 2012</u>
<u>5/15/12</u>	<u>KAWASAKI of SIMI VALLEY</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>BUSINESS OWNER KAWASAKI</u>	<u>100.</u>	<u>100.</u>	<u>100. G 2012</u>
<u>5/15/12</u>	<u>DAVE HARWELL</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>RETIRED</u>	<u>100.</u>	<u>100.</u>	<u>100. G 2012</u>
<u>5/15/12</u>	<u>JAMES ARLEDGE</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>RETIRED</u>	<u>100.</u>	<u>100.</u>	<u>100. G 2012</u>
<u>5/14/12</u>	<u>EDWARD TOLEDO</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>BUSINESS OWNER PYRAMID MACHINE of SIMI VALLEY</u>	<u>100.</u>	<u>100.</u>	<u>100. G 2012</u>

SUBTOTAL \$ 450.

**Schedule A Summary**

- Amount received this period - itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 450.9055
- Amount received this period - unitemized monetary contributions of less than \$100 ..... \$ 100.
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL \$ 450.9055

\*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

Statement covers period from <u>01-01-2012</u> through <u>06-30-2012</u>	<b>CALIFORNIA</b> FORM <b>460</b>
	Page <u>6</u> of <u>15</u>
I.D. NUMBER <u>1328118</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

KEITH MASHBURN for CITY COUNCIL 2012

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)
<u>5/15/12</u>	<u>JOSEPH CASSELLA</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>BUSINESS OWNER</u> <u>SIMI PACIFIC</u>	<u>500.</u>	<u>500.</u>	<u>500. G 2012</u>
<u>5/15/12</u>	<u>RANDY ZIMMERMAN</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>SPECIALTY FABRICATORS Inc</u> <u>MACHINIST</u>	<u>1000.</u>	<u>1000.</u>	<u>1000. G 2012</u>
<u>5/14/12</u>	<u>MICHAEL APISA</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>RETIRED</u>	<u>75.</u>	<u>75.</u>	<u>75. G 2012</u>
<u>5/14/12</u>	<u>MARK ZIMMERMAN</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>SPECIALTY FABRICATORS INC</u> <u>MACHINIST</u>	<u>1000.</u>	<u>1000.</u>	<u>1000. G 2012</u>
<u>5/15/12</u>	<u>JEANNE DAVIS</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>RETIRED</u>	<u>50.</u>	<u>50.</u>	<u>50. G 2012</u>

SUBTOTAL \$ 2625.

**Schedule A Summary**

- Amount received this period - itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 9655.00
- Amount received this period - unitemized monetary contributions of less than \$100 ..... \$ 100.
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL \$ 9755.00

\*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

Statement covers period  
from 01-01-2012  
through 06-30-2012

CALIFORNIA FORM **460**  
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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)
<u>5/15/12</u>	<u>JAMES WOODS</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>BUSINESS OWNER SIMI VALLEY HONDA</u>	<u>100,</u>	<u>100,</u>	<u>100, 6 2012</u>
<u>5/14/12</u>	<u>LINDA ZIMMERMAN</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>HOUSEWIFE</u>	<u>1000,</u>	<u>1000,</u>	<u>1000, 6 2012</u>
<u>5/15/12</u>	<u>VERONICA ZIMMERMAN</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>HAIR DRESSER STUDENT</u>	<u>1000,</u>	<u>1000,</u>	<u>1000, 6 2012</u>
<u>5/15/12</u>	<u>SUSAN ZIMMERMAN</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>RN Housewife</u>	<u>1000,</u>	<u>1000,</u>	<u>1000, 6 2012</u>
<u>5/29/12</u>	<u>FRANCISCO SALINAS</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>RETIRED</u>	<u>50,</u>	<u>50,</u>	<u>50, 6 2012</u>
<b>SUBTOTAL \$</b>				<u>3150,</u>		

**Schedule A Summary**

- Amount received this period - itemized monetary contributions. (Include all Schedule A subtotals.) ..... \$ 9655.00
- Amount received this period - unitemized monetary contributions of less than \$100 ..... \$ 100.00
- Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$** 9755.00

\*Contributor Codes  
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COM - Recipient Committee (other than PTY or SCC)  
OTH - Other (e.g., business entity)  
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SCC - Small Contributor Committee

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period  
from 01-01-2012  
through 06-30-2012

CALIFORNIA  
FORM **460**

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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)
<u>5/29/12</u>	<u>WILLY SIMONS</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>BUSINESS OWNER SUN-VAL ROOFING</u>	<u>250,</u>	<u>250,</u>	<u>250, 6 2012</u>
<u>5/29/12</u>	<u>BURTON BATH</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>RETIRED</u>	<u>50,</u>	<u>50,</u>	<u>50, 6 2012</u>
<u>5/29/12</u>	<u>MARK MILLER</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>BUSINESS OWNER PERFFERED AUTO CENTER</u>	<u>40,</u>	<u>40,</u>	<u>40, 6 2012</u>
<u>5/29/12</u>	<u>DAVID EKINS</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>RETIRED</u>	<u>100,</u>	<u>100,</u>	<u>100, 6 2012</u>
<u>6/4/12</u>	<u>SPUDS CRANE</u>	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>BUSINESS OWNER SPUDS CRANE</u>	<u>500,</u>	<u>500,</u>	<u>500, 6 2012</u>

SUBTOTAL \$ 940,

**Schedule A Summary**

- Amount received this period - itemized monetary contributions. (Include all Schedule A subtotals.) ..... \$ 9655,00
- Amount received this period - unitemized monetary contributions of less than \$100 ..... \$ 100,00
- Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL \$ 9755,00

\*Contributor Codes  
IND - Individual  
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

Statement covers period from <u>01-01-2012</u> through <u>06-30-2012</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER <u>KEITH MASHBURN for CITY COUNCIL 2012</u>	
I.D. NUMBER <u>1328118</u>	

SEE INSTRUCTIONS ON REVERSE

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)
2/18/12	RANDY FOUSHEE	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	POLICE OFFICER SIMI VALLEY	50.	50.	50. <sup>6</sup> 2012
6/18/12	SUTTERS MILL RESTAURANT	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SUTTERS MILL RESTAURANT	500.	500.	500. <sup>6</sup> 2012
6/28/12	SHARPE PLUMBING	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SHARPE PLUMBING	540.	540.	540. <sup>6</sup> 2012
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				

SUBTOTAL \$ 1090.

**Schedule A Summary**

- Amount received this period - itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 9655.00
- Amount received this period - unitemized monetary contributions of less than \$100 ..... \$ 100.00
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL \$ 9755.00

**\*Contributor Codes**  
 IND - Individual  
 COM - Recipient Committee  
       (other than PTY or SCC)  
 OTH - Other (e.g., business entity)  
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**Schedule B - Part 1  
Loans Received**

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

Statement covers period  
from 01-01-2012  
through 06-30-2012

CALIFORNIA FORM **460**  
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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
<u>KEITH MASHBURN</u> <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<u>RETIRED</u> <u>N/A</u>	<u>0</u> \$ <u>0.00</u>	<u>1000.</u> \$ <u>1000.</u>	<input type="checkbox"/> PAID \$ <u>0</u> <input type="checkbox"/> FORGIVEN \$ <u>0</u>	<u>1000.</u> \$ <u>1000.</u> <u>12-31-2012</u> DATE DUE	<u>0.00</u> % RATE <u>0.00</u> \$ <u>0.00</u>	<u>1000.</u> \$ <u>1000.</u> <u>5-15-12</u> DATE INCURRED	CALENDAR YEAR <u>1000.</u> \$ <u>1000.</u> PER ELECTION** <u>02012</u> \$ <u>1000.</u>
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE	\$ _____ RATE	\$ _____ DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE	\$ _____ RATE	\$ _____ DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
<b>SUBTOTALS</b>		\$ <u>1000.</u>	\$ <u>0</u>	\$ <u>1000.</u>	\$ <u>0</u>			

**Schedule B Summary**

1. Loans received this period ..... \$ 1000.  
(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 \$ 1000.  
Enter the net here and on the Summary Page, Column A, Line 2.  
(May be a negative number)

(Enter (e) on  
Schedule E, Line 3)

†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 E  
Payments Made**

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

SCHEDULE E

Statement covers period from <u>01-01-2012</u>	CALIFORNIA FORM <b>460</b>
through <u>06-30-2012</u>	
Page <u>11</u> of <u>15</u>	I.D. NUMBER <u>1328118</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

KEITH MASHBURN for CITY COUNCIL 2012

**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
L 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
<u>PEOPLE FOR BOB HUBER</u> <sup>ID #</sup> <u>1325587</u>	<u>CTB</u>	<u>FUNDRAISER FOR MAYOR SIMI VALLEY</u>	<u>250.00</u>
<u>SSS</u>	<u>POS</u>	<u>STAMPS</u>	<u>46.00</u>
<u>SHARPE PLUMBING</u>	<u>RFD</u>	<u>SURPLUS FUNDS</u>	<u>540.00</u>

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

SUBTOTAL \$ 836.00

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ <u>6168.23</u>
2. Unitemized payments made this period of under \$100	\$ <u>0</u>
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ <u>0</u>
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$ <u>6168.23</u>

**Schedule E  
Payments Made**

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

SCHEDULEE

Statement covers period from <u>01-01-2012</u>	CALIFORNIA FORM <b>460</b>
through <u>06-30-2012</u>	
Page <u>12</u> of <u>15</u>	I.D. NUMBER <u>1328118</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

KEITH MASHBURN for CITY COUNCIL 2012

**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                |
| L 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
<u>THEODORE LAPADAKIS</u>	<u>RFD</u>	<u>SURPLUS FUNDS</u>	<u>1000.00</u>
<u>SPUDS CRANE</u>	<u>RFD</u>	<u>SURPLUS FUNDS</u>	<u>500.00</u>
<u>JOSEPH CASSELLA</u>	<u>RFD</u>	<u>SURPLUS FUNDS</u>	<u>500.00</u>

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

SUBTOTAL \$ 2000.00

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ <u>6168.23</u>
2. Unitemized payments made this period of under \$100	\$ <u>0</u>
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ <u>0</u>
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$ <u>6168.23</u>

**Schedule E  
Payments Made**

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

SCHEDULE E

Statement covers period from <u>01-01-2012</u> through <u>06-30-2012</u>	CALIFORNIA FORM <b>460</b>
Page <u>13</u> of <u>15</u>	I.D. NUMBER <u>1328118</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

KEITH MASHBURN for CITY COUNCIL 2012

**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                |
| L 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
<u>EMBROID Me</u>	<u>CMP</u>	<u>T-SHIRTS</u>	<u>167.08</u>
<u>AMERICAN TROPHIES</u>	<u>CMP</u>	<u>NAME TAGS</u>	<u>42.63</u>
<u>DICK KRANZLER</u>	<u>CMP</u>	<u>SIGNS</u>	<u>50.00</u>

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

SUBTOTAL \$ 259.71

**Schedule E Summary**

- |  |                         |
|--|-------------------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.)   | \$ <u>6168.23</u>       |
| 2. Unitemized payments made this period of under \$100   | \$ <u>0</u>             |
| 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)                   | \$ <u>0</u>             |
| 4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) | TOTAL \$ <u>6168.23</u> |

**Schedule E  
(Continuation Sheet)  
Payments Made**

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

SCHEDULE E (CONT.)

Statement covers period from <u>01-01-2012</u> through <u>06-30-2012</u>	<b>CALIFORNIA FORM 460</b>
Page <u>14</u> of <u>15</u>	I.D. NUMBER <u>1328118</u>

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

KEITH MASHBURN for CITY COUNCIL 2012

**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                      |
| ID 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
<u>COLBY SIGNS</u>	<u>CMP</u>	<u>YARD SIGNS</u>	<u>2309.85</u>
<u>EMBROIDME</u>	<u>CMP</u>	<u>T-SHIRTS</u>	<u>167.07</u>
<u>FOR THE TROOPS TO 20-8099782</u>	<u>CTB</u>	<u>SURPLUS FUNDS DONATED 5013C</u>	<u>220.60</u>
<u>BOYS &amp; GIRLS CLUB SIMI VALLEY</u>	<u>CTB</u>	<u>AUCTION FUNDRAISER</u>	<u>250.00</u>

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

**SUBTOTAL \$** 2947.52

**Schedule E  
Payments Made**

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

SCHEDULE E

Statement covers period  
from 01-01-2012  
through 06-30-2012

CALIFORNIA  
FORM **460**

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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.  
CNS campaign consultants  
CTB contribution (explain nonmonetary)\*  
CVC civic donations  
candidate filing/ballot fees  
FND fundraising events  
IND independent expenditure supporting/opposing others (explain)\*  
LEG legal defense  
LIT campaign literature and mailings

MBR member communications  
MTG meetings and appearances  
OFC office expenses  
PET petition circulating  
PHO phone banks  
POL polling and survey research  
POS postage, delivery and messenger services  
PRO professional services (legal, accounting)  
PRT print ads

RAD radio airtime and production costs  
RFD returned contributions  
SAL campaign workers' salaries  
TEL t.v. or cable airtime and production costs  
TRC candidate travel, lodging, and meals  
TRS staff/spouse travel, lodging, and meals  
TSF transfer between committees of the same candidate/sponsor  
VOT voter registration  
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
<u>JARED HELD</u>	<u>CMP</u>	<u>WEBSITE</u>	<u>125.00</u>

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

SUBTOTAL \$ 125.00

**Schedule E Summary**

- Itemized payments made this period. (Include all Schedule E subtotals.) ..... \$ 6168.23
- Unitemized payments made this period of under \$100 ..... \$ 0
- Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ..... \$ 0
- Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6;) ..... **TOTAL \$** 6168.23