Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

RECEIVED

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

Statement covers period	Date of election if applicable: (Month, Day, Year)	OCT 2 3 2014	Page _1_ of _7_
from _01·01·14_			For Official Use Only
through _10-18-14_	_11·04·14_	Office of the City Clerk	

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

3. Committee Information

I.D. NUMBER _1372623_

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
TURLOCK ASSOCIATED POLICE OFFICERS POLITICAL ACTION COMMITTEE

STREET ADDRESS (NO P.O. BOX)
244 N. BROADWAY

CITY TURLOCK STATE CA. ZIP CODE 95380 AREA CODE/PHONE (209) 664-7323

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS
FEAUBNDR @ GMAIL.COM

Treasurer(s)

NAME OF TREASURER
BRANDON BERTRAM

MAILING ADDRESS
244 N. BROADWAY

CITY TURLOCK STATE CA. ZIP CODE 95380 AREA CODE/PHONE (209) 664-7323

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY FEAUBNDR @ GMAIL.COM STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
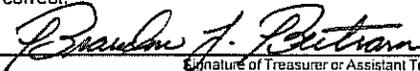
Executed on _10-23-14_ By _____ Signature of Treasurer or Assistant Treasurer

Executed on _____ Date By _____ Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on _____ Date By _____ Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on _____ Date By _____ Signature of Controlling Officeholder, Candidate, State Measure Proponent

Recipient Committee
Campaign Statement
Cover Page — Part 2

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

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

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

Related Committees Not Included in this Statement: *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

COMMITTEE NAME	I.D. NUMBER

NAME OF TREASURER	CONTROLLED COMMITTEE?
	☐ YES ☐ NO

COMMITTEE ADDRESS   STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE

COMMITTEE NAME	I.D. NUMBER

NAME OF TREASURER	CONTROLLED COMMITTEE?
	☐ YES ☐ NO

COMMITTEE ADDRESS   STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	☐ SUPPORT ☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement
Summary Page

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

SUMMARY PAGE

CALIFORNIA FORM 460

Statement covers period

from _10-06-14_

through _10-06-14_

Page _3_ of _7_

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Turlock Associated Police Officers Political Action Committee

I.D. NUMBER

1372623

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	$ 10,000.00	$ 10,000.00
2. Loans Received	Schedule B, Line 3	0	0
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	$ 10,000.00	$ 10,000.00
4. Nonmonetary Contributions	Schedule C, Line 3	0	0
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	$ 10,000.00	$ 10,000.00

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

	1/1 through 6/30	7/1 to Date
20. Contributions Received	$	$
21. Expenditures Made	$	$

Expenditures Made

6. Payments Made	Schedule E, Line 4	$ 6,383.20	$ 6383.20
7. Loans Made	Schedule H, Line 3	0	0
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	$ 6383.20	$ 6383.20
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	$ 6383.20	$ 6383.20

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made*
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
_/_/_	$
_/_/_	$

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	$ 0
13. Cash Receipts	Column A, Line 3 above	$ 10,000.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4	0
15. Cash Payments	Column A, Line 8 above	$ 6383.20
16. **ENDING CASH BALANCE** Add Lines 12 + 13 + 14, then subtract Line 15		$ 3616.80

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).

*Amounts in this section may be different from amounts reported in Column B.

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	$ 0

Schedule A
Monetary Contributions Received

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

SCHEDULE A

CALIFORNIA **460**
FORM

SEE INSTRUCTIONS ON REVERSE

Statement covers period

from _10-06-14_

through _10-06-14_   Page _4_ of _7_

NAME OF FILER

Turlock Associated Police Officers Political Action Committee

I.D. NUMBER

_1372623_

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)
10-06-14	*Turlock Associated Police Officers* *244 N. Broadway* *Turlock, CA. 95380*	☐IND ☐COM ☒OTH ☐PTY ☐SCC		*$10,000.00*	*$10,000.00*	
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				

SUBTOTAL $

Schedule A Summary

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) .... $ _10,000.00_

2. Amount received this period – unitemized monetary contributions of less than $100 .... $ _0_

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .... TOTAL $ _10,000.00_

*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)

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

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

SCHEDULE D (CONT.)

CALIFORNIA FORM 460

Statement covers period

from _01-01-14_

through _10-18-14_

Page _5_ of _7_

NAME OF FILER

TURLOCK ASSOCIATED POLICE OFFICERS POLITICAL ACTION COMMITTEE

I.D. NUMBER

1372623

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
OCT. 15, 2014	GARY SOISETH FOR MAYOR 2014 (TURLOCK) I.D. #1365658 ☒ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☒ Independent Expenditure	PURCHASED SIGNS AND FLIERS ENDORSING 3 CANDIDATES INCLUDING GARY SOISETH. TOTAL COST $6307.20 (6,307.20 ÷ 3 = $2,102.40)	$2,102.40	$2,102.40	$2,102.40 S-14
OCT. 15, 2014	BILL DEHART FOR TURLOCK CITY COUNCIL 2014 I.D. #1368207 ☒ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☒ Independent Expenditure	PURCHASED SIGNS AND FLIERS ENDORSING 3 CANDIDATES INCLUDING BILL DEHART. TOTAL COST $6,307.20 ($6,307.20 ÷ 3 = $2,102.40)	$2,102.40	$2,102.40	$2,102.40 S-14
OCT. 15, 2014	MATTHEW JACOB FOR TURLOCK CITY COUNCIL 2014 I.D. #1367258 ☒ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☒ Independent Expenditure	PURCHASED SIGNS AND FLIERS ENDORSING 3 CANDIDATES INCLUDING MATTHEW JACOB. TOTAL COST $6,307.20 ($6,307.20 ÷ 3 = $2,202.40)	$2,102.40	$2,102.40	$2,102.40 S-14
	☐ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				

SUBTOTAL $ 6307.20

Schedule E
Payments Made

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

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

TURLOCK ASSOCIATED POLICE OFFICERS POLITICAL ACTION COMMITTEE

I.D. NUMBER

_1372623_

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
GARY SOISETH FOR MAYOR 2014 775 ALPHA ROAD TURLOCK, CA. 95380 I.D.# 1365658	IND		PURCHASED SIGNS WITH ENDORSEMENTS FOR 3 CANDIDATES INCLUDING GARY SOISETH. TOTAL COST OF SIGNS WAS $807.20. ($807.20 ÷ 3 ≈ $269.07)	$269.07
BILL DEHART FOR TURLOCK CITY COUNCIL 2014 4123 ST. GEORGE PLACE TURLOCK, CA. 95382 I.D.# 1368207	IND		PURCHASED SIGNS WITH ENDORSEMENTS FOR 3 CANDIDATES INCLUDING BILL DEHART. TOTAL COST OF SIGNS WAS $807.20 ($807.20 ÷ 3 ≈ $269.07)	$269.07
MATTHEW JACOB FOR TURLOCK CITY COUNCIL 2014 2166 ELLESMERE COURT TURLOCK, CA. 95382 I.D.# 1367258	IND		PURCHASED SIGNS WITH ENDORSEMENTS FOR 3 CANDIDATES INCLUDING MATTHEW JACOB. TOTAL COST OF SIGNS WAS $807.20 ($807.20 ÷ 3 ≈ $269.07)	$269.07

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

SUBTOTAL $ 807.20

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) .... $ 6307.20

2. Unitemized payments made this period of under $100 .... $ 76.00

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) .... $ 0

4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) .... TOTAL $ 6,383.20

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 _01-01-14_

through _10-18-14_

CALIFORNIA FORM 460

Page __7__ of __7__

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

I.D. NUMBER

1372623

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
GARY SOISETH FOR MAYOR 2014 775 ALPHA ROAD TURLOCK, CA. 95380 I.D. # 1365658	IND	PURCHASED FLIERS WITH ENDORSEMENT FOR 3 CANDIDATES INCLUDING GARY SOISETH. TOTAL COST OF FLIERS WAS $5,500.00 ($5,500.00 ÷ 3 ≈ $1,823.33)	$1,833.33
BILL DEHART FOR TURLOCK CITY COUNCIL 2014 4123 ST. GEORGE PLACE TURLOCK, CA. 95382 I.D. # 1368207	IND	PURCHASED FLIERS WITH ENDORSEMENTS FOR 3 CANDIDATES INCLUDING BILL DEHART. TOTAL COST OF FLIERS WAS $5,500.00 ($5,500.00 ÷ 3 ≈ $1,833.33)	$1,833.33
MATTHEW JACOB FOR TURLOCK CITY COUNCIL 2014 2166 ELLESMERE COURT TURLOCK, CA. 95382 I.D. # 1367258	IND	PURCHASED FLIERS WITH ENDORSEMENTS FOR 3 CANDIDATES INCLUDING MATTHEW JACOB. TOTAL COST OF FLIERS WAS $5,500.00 ($5500.00 ÷ 3 ≈ $1,833.33)	$1,833.33

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

SUBTOTAL $ 5,500.00