Recipient Committee
Campaign Statement
Cover Page

Statement covers period
from 07/01/2020
through 09/19/2020

Date of election if applicable:
(Month, Day, Year)
11/03/2020

1. Type of Recipient Committee:
- [✓] Officeholder, Candidate Controlled Committee
- [ ] General Purpose Committee
- [ ] Primarily Formed Ballot Measure Committee
- [ ] Primarily Formed Candidate/Officeholder Committee
- [ ] State Candidate Election Committee
- [ ] Controlled
- [ ] Sponsored

2. Type of Statement:
- [✓] Preelection Statement
- [ ] Semi-annual Statement
- [ ] Termination Statement
- [ ] Special Odd-Year Report
- [ ] Amendment (Explain below)

3. Committee Information

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
RE ELECT DONNA LIND FOR SCOTTS VALLEY COUNCIL 2020

I.D. NUMBER
1385125

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE
SCOTTS VALLEY CA 95066

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
CITY STATE ZIP CODE

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 September 23, 2020

By
Signature of Treasurer/Assistant Treasurer

Executed on September 30, 2020

By
Signature of Controlling Officerholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on

By
Signature of Controlling Officerholder, Candidate, State Measure Proponent

Executed on

By
Signature of Controlling Officerholder, Candidate, State Measure Proponent

CALIFORNIA FORM 460

COVER PAGE

Page 1 of 3
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5. Officeholder or Candidate Controlled Committee

**NAME OF OFFICEHOLDER OR CANDIDATE**

DONNA LIND

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

CITY COUNCIL FOR SCOTTS VALLEY, CA

**RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)**

SCOTTS VALLEY CA 95066

**CITY**

STATE

ZIP

**Residential/Business Address**

**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**

N/A

**I.D. NUMBER**

N/A

**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**

N/A

**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

**NAME OF OFFICEHOLDER OR CANDIDATE**

OFFICE SOUGHT OR HELD

SUPPORT

OPPOSE

Attach continuation sheets if necessary
### Contributions Received

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monetary Contributions</td>
<td>Schedule A, Line 3</td>
<td>$897.00</td>
</tr>
<tr>
<td>Loans Received</td>
<td>Schedule B, Line 3</td>
<td>0</td>
</tr>
<tr>
<td>SUBTOTAL CASH CONTRIBUTIONS</td>
<td>Add Lines 1 + 2</td>
<td>$897.00</td>
</tr>
<tr>
<td>Nonmonetary Contributions</td>
<td>Schedule C, Line 3</td>
<td>0</td>
</tr>
<tr>
<td>TOTAL CONTRIBUTIONS RECEIVED</td>
<td>Add Lines 3 + 4</td>
<td>$897.00</td>
</tr>
</tbody>
</table>

### Expenditures Made

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payments Made</td>
<td>Schedule E, Line 4</td>
<td>0</td>
</tr>
<tr>
<td>Loans Made</td>
<td>Schedule H, Line 3</td>
<td>0</td>
</tr>
<tr>
<td>SUBTOTAL CASH PAYMENTS</td>
<td>Add Lines 6 + 7</td>
<td>0</td>
</tr>
<tr>
<td>Accrued Expenses (Unpaid Bills)</td>
<td>Schedule F, Line 3</td>
<td>0</td>
</tr>
<tr>
<td>Nonmonetary Adjustment</td>
<td>Schedule C, Line 3</td>
<td>0</td>
</tr>
<tr>
<td>TOTAL EXPENDITURES MADE</td>
<td>Add Lines 8 + 9 + 10</td>
<td>0</td>
</tr>
</tbody>
</table>

### Current Cash Statement

12. Beginning Cash Balance | Previous Summary Page, Line 16 | $1236.84 |
13. Cash Receipts | Column A, Line 3 above | $897.00 |
14. Miscellaneous Increases to Cash | Schedule I, Line 4 | 0 |
15. Cash Payments | Column A, Line 8 above | 0 |
16. ENDING CASH BALANCE | Add Lines 12 + 13 + 14, then subtract Line 15 | $2133.84 |

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

### Cash Equivalents and Outstanding Debts

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

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

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contributions Received</td>
<td>$897.00</td>
<td>$897.00</td>
</tr>
<tr>
<td>Expenditures</td>
<td>$0</td>
<td>$0</td>
</tr>
</tbody>
</table>

### Expenditure Limit Summary for State Candidates

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

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

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

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**FPPC Form 460 (Jan/2016)**

FPPC Advice: advice@fppc.ca.gov (866/275-3772)

www.fppc.ca.gov
Schedule A
Monetary Contributions Received

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
RE ELECT DONNA LIND FOR SCOTTS VALLEY CITY COUNCIL 2020

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
</table>
| 09/07/2020    | Patricia E. Weiss
Henderson, NV 89052                                                                 | ✓ IND
|               |                                                                                          | Retired            | 100.00                                                                          |                              |                                                   |                                  |
| 09/07/2020    | John Weiss
Henderson, NV 89052                                                                 | ✓ IND
|               |                                                                                          | Retired            | 100.00                                                                          |                              |                                                   |                                  |
| 09/04/2020    | Julie Mazurek
Scotts Valley, CA 95066                                                               | ✓ IND
|               |                                                                                          | Retired            | 100.00                                                                          |                              |                                                   |                                  |
| 09/14/2020    | Jeffrey W. Hill
Scotts Valley, CA 95066                                                               | ✓ IND
|               |                                                                                          | Retired            | 100.00                                                                          |                              |                                                   |                                  |
| 09/17/2020    | Robert D. Charlton REV
Scotts Valley, CA 95066                                                               | ✓ IND
|               |                                                                                          | Retired            | 100.00                                                                          |                              |                                                   |                                  |

**SUBTOTAL $ 500.00**

Schedule A Summary

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) .......................................................... $600.00

2. Amount received this period – unitemized monetary contributions of less than $100 ............... $297.00

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ....................... TOTAL $ 897.00

*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 (Jan/2016))
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**Schedule A (Continuation Sheet)**

**Monetary Contributions Received**

Amounts may be rounded to whole dollars.

**Statement covers period**

from 07/01/2020

through 09/30/2020

**NAME OF FILER**

RE ELECT DONNA LIND FOR SCOTTS VALLEY CITY COUNCIL 2020

**ID. NUMBER**

1385125

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR</th>
<th>CONTRIBUTOR CODE</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
</table>
| 09/17/2020    | Patricia Melehan

Scotts Valley, CA 95066

<table>
<thead>
<tr>
<th>[✓] IND</th>
<th>[ ] COM</th>
<th>[ ] OTH</th>
<th>[ ] PTY</th>
<th>[ ] SCC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retired</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>$100.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTAL $ 100.00**

*Contributor Codes*

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