Recipient Committee
Campaign Statement
Cover Page

Statement covers period from 07/01/2020 through 12/31/2020

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

Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.
- Owner or Candidate Controlled Committee
- State Candidate Election Committee
- Recall (Also Complete Part F)
- General Purpose Committee
- Sponsored
- Small Contributor Committee
- Political Party/Central Committee

Primary Formed Ballot Measure Committee
- Controlled
- Sponsored (Also Complete Part F)

Type of Statement:
- Pre-election Statement
- Semi-annual Statement
- Termination Statement
- Also file a Form 410 Termination
- Amendment (Explain below)

Quarterly Statement
- Special Fiscal Year Report

Committee Information
L.D. NUMBER 1425931

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Save Scotts Valley - Yes on 2 Supported by Council Members Dillies, Johnson, Lind, Reed, and Timm

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE
Scotts Valley CA 95066 (831) 566-3180

MAILING ADDRESS IF DIFFERENT NO. AND STREET OR P.O. BOX
P. O. Box 66123

CITY STATE ZIP CODE AREA CODE/PHONE
Scotts Valley CA 95067 (831) 566-3180

Treasurer(s)
NAME OF TREASURER
Jack Dillies

MAILING ADDRESS
P. O. Box 66123

CITY STATE ZIP CODE AREA CODE/PHONE
Scotts Valley CA 95067 (831) 566-3180

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

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 correct.

executed on 1/11/2021

executed on 1/11/2021

executed on

executed on

executed on

executed on

executed on

executed on

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
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
NAME OF TREASURER

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE
City of Scotts Valley sales tax "Scotts Valley City Services Protection Measure"

BALLOT NO. OR LETTER JURISDICTION
Z City of Scotts Valley

SUPPORT OPPPOSE

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

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT
1) Jack Diles, 2) Randy Johnson, 3) Donna Lind, 4) Jim Reed, & 5) Derek Timm

OFFICE SOUGHT OR HELD
1), 2), 3), 4) & 5): City Council Member

DISTRICT NO. IF ANY
N/A

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 OPPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT OPPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT OPPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT OPPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT OPPPOSE

Attach continuation sheets if necessary
### Contributions Received

<table>
<thead>
<tr>
<th>#</th>
<th>Category</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Monetary Contributions</td>
<td>0.00</td>
<td>28,999.00</td>
</tr>
<tr>
<td>2</td>
<td>Loans Received</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>3</td>
<td>SUBTOTAL CASH CONTRIBUTIONS</td>
<td>0.00</td>
<td>28,999.00</td>
</tr>
<tr>
<td>4</td>
<td>Nonmonetary Contributions</td>
<td>0.00</td>
<td>2,424.74</td>
</tr>
<tr>
<td>5</td>
<td>TOTAL CONTRIBUTIONS RECEIVED</td>
<td>0.00</td>
<td>31,423.74</td>
</tr>
</tbody>
</table>

### Expenditures Made

<table>
<thead>
<tr>
<th>#</th>
<th>Category</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>Payments Made</td>
<td>0.00</td>
<td>29,930.59</td>
</tr>
<tr>
<td>7</td>
<td>Loans Made</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>8</td>
<td>SUBTOTAL CASH PAYMENTS</td>
<td>0.00</td>
<td>29,930.59</td>
</tr>
<tr>
<td>9</td>
<td>Accrued Expenses (Unpaid Bills)</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>10</td>
<td>Nonmonetary Adjustment</td>
<td>0.00</td>
<td>2,424.74</td>
</tr>
<tr>
<td>11</td>
<td>TOTAL EXPENDITURES MADE</td>
<td>0.00</td>
<td>31,754.33</td>
</tr>
</tbody>
</table>

### Current Cash Statement

<table>
<thead>
<tr>
<th>#</th>
<th>Category</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td>Beginning Cash Balance</td>
<td>678.41</td>
<td>678.41</td>
</tr>
<tr>
<td>13</td>
<td>Cash Receipts</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>14</td>
<td>Miscellaneous Increases to Cash</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>15</td>
<td>Cash Payments</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>16</td>
<td>ENDING CASH BALANCE</td>
<td>678.41</td>
<td>678.41</td>
</tr>
</tbody>
</table>

### Cash Equivalents and Outstanding Debts

<table>
<thead>
<tr>
<th>#</th>
<th>Category</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>18</td>
<td>Cash Equivalents</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>19</td>
<td>Outstanding Debts</td>
<td>0.00</td>
<td>0.00</td>
</tr>
</tbody>
</table>