**Recipient Committee Campaign Statement Cover Page**

**Statement covers period**

from 7/1/2021 through 12/31/2021

**Date of election if applicable:**
(Month, Day, Year)

11/6/18

**Type of Recipient Committee:**
- [ ] Officeholder, Candidate Controlled Committee
- [ ] State Candidate Election Committee
- [ ] Recall
(Also Complete Part 8)
- [ ] General Purpose Committee
  - [ ] Sponsored
  - [ ] Small Contributor Committee
  - [ ] Political Party/Central Committee
- [ ] Primarily Formed Candidate/Officeholder Committee
(Also Complete Part 8)

**Type of Statement:**
- [ ] Preselection Statement
- [ ] Semi-annual Statement
- [ ] Special Odd-Year Report

**Committee Information**

<table>
<thead>
<tr>
<th>ID NUMBER</th>
<th>1294526</th>
</tr>
</thead>
</table>

**Committee Name (or Candidate's Name if No Committee):**

Re-Elect Jim Reed for City Council Committee 2018

**Treasurer(s)**

**NAME OF TREASURER**
Jim Reed

**MAILING ADDRESS**

Scotts Valley
CA 95066
831-461-0222

**NAME OF ASSISTANT TREASURER, IF ANY**

**MAILING 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 correct.

**Executed on**

**Date**

**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 Officeholders, Candidate, State Measure Proponent

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**
Jim Reed

**OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)**
Councilmember, City of Scotts Valley

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

- [ ] [ ] [ ]
- Scotts Valley, CA 95066

**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.

<table>
<thead>
<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME OF TREASURER</th>
<th>CONTROLLED COMMITTEE?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>[ ] YES [ ] NO</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>COMMITTEE ADDRESS</th>
<th>STREET ADDRESS (NO P.O. BOX)</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>CITY</th>
<th>STATE</th>
<th>ZIP</th>
<th>AREA CODE/PHONE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

### 6. Primarily Formed Ballot Measure Committee

**NAME OF BALLOT MEASURE**

<table>
<thead>
<tr>
<th>BALLOT NO. OR LETTER</th>
<th>JURISDICTION</th>
<th>[ ] SUPPORT</th>
<th>[ ] OPPOSE</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

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

**NAME OF OFFICEHOLDER, CANDIDATE, OR PROONENT**

<table>
<thead>
<tr>
<th>OFFICE SOUGHT OR HELD</th>
<th>DISTRICT NO. IF ANY</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

### 7. Primarily Formed Candidate/Officeholder Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
<th>[ ] SUPPORT</th>
<th>[ ] OPPOSE</th>
</tr>
</thead>
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<th>[ ] OPPOSE</th>
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<th>[ ] SUPPORT</th>
<th>[ ] OPPOSE</th>
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</tbody>
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<th>OFFICE SOUGHT OR HELD</th>
<th>[ ] SUPPORT</th>
<th>[ ] OPPOSE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Attach continuation sheets if necessary*
### Contributions Received

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A (Total This Period)</th>
<th>Column B (Calendar Year Total to Date)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monetary Contributions</td>
<td>Schedule A, Line 3 $0</td>
<td>$0</td>
</tr>
<tr>
<td>Loans Received</td>
<td>Schedule B, Line 3 $500</td>
<td>$500</td>
</tr>
<tr>
<td>SUBTOTAL CASH CONTRIBUTIONS</td>
<td>Add Lines 1 + 2 $500</td>
<td>$500</td>
</tr>
<tr>
<td>Nonmonetary Contributions</td>
<td>Schedule C, Line 3 $0</td>
<td>$0</td>
</tr>
<tr>
<td>TOTAL CONTRIBUTIONS RECEIVED</td>
<td>Add Lines 3 + 4 $500</td>
<td>$500</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 $374</td>
<td>$374</td>
</tr>
<tr>
<td>Loans Made</td>
<td>Schedule H, Line 3 $0</td>
<td>$0</td>
</tr>
<tr>
<td>SUBTOTAL CASH PAYMENTS</td>
<td>Add Lines 6 + 7 $374</td>
<td>$374</td>
</tr>
<tr>
<td>Accrued Expenses (Unpaid Bills)</td>
<td>Schedule F, Line 3 $0</td>
<td>$0</td>
</tr>
<tr>
<td>Nonmonetary Adjustment</td>
<td>Schedule C, Line 3 $0</td>
<td>$0</td>
</tr>
<tr>
<td>TOTAL EXPENDITURES MADE</td>
<td>Add Lines 8 + 9 + 10 $374</td>
<td>$374</td>
</tr>
</tbody>
</table>

### Calendar Year Summary for Candidates

- Running in Both the State Primary and General Elections
- **Date:** 1/1 through 6/30, 7/1 to Date

- Contributions Received $__________$__________
- Expenditures Made $__________$__________

### Expenditure Limit Summary for State Candidates

- **Date of Election** (mm/dd/yy) $__________$__________
- Total to Date $__________$__________

#### Current Cash Statement

- **Beginning Cash Balance** Previous Summary Page, Line 16 $111
- **Cash Receipts** Column A, Line 3 above $500
- **Miscellaneous Increases to Cash** Schedule I, Line 4 $0
- **Cash Payments** Column A, Line 8 above $374
- **ENDING CASH BALANCE** Add Lines 12 + 13 + 14, then subtract Line 15 $237

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

### Cash Equivalents and Outstanding Debts

- **Cash Equivalents** See instructions on reverse $0
- **Outstanding Debts** Add Line 2 + Line 9 in Column B above $0

---

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).

---

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

---

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
## Schedule B – Part 1
### Loans Received

<table>
<thead>
<tr>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>OUTSTANDING BALANCE BEGINNING THIS PERIOD</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>AMOUNT PAID OR FORGIVEN THIS PERIOD</th>
<th>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
<th>INTEREST PAID THIS PERIOD</th>
<th>ORIGINAL AMOUNT OF LOAN</th>
<th>CUMULATIVE CONTRIBUTIONS TO DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jim Reed</td>
<td>Manager, City of San Jose</td>
<td>700</td>
<td>500</td>
<td>$1200</td>
<td>0% Rate</td>
<td>$1700</td>
<td>$1200</td>
<td>CALENDAR YEAR</td>
</tr>
<tr>
<td>Scotts Valley, CA 95066</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>PER ELECTION**</td>
</tr>
<tr>
<td>1 IND</td>
<td></td>
<td>700</td>
<td>500</td>
<td>$1200</td>
<td>0% Rate</td>
<td>$1700</td>
<td>$1200</td>
<td>CALENDAR YEAR</td>
</tr>
<tr>
<td>1 IND</td>
<td></td>
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<td>500</td>
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<td>CALENDAR YEAR</td>
</tr>
<tr>
<td>1 IND</td>
<td></td>
<td>700</td>
<td>500</td>
<td>$1200</td>
<td>0% Rate</td>
<td>$1700</td>
<td>$1200</td>
<td>CALENDAR YEAR</td>
</tr>
</tbody>
</table>

**Schedule B Summary**

1. Loans received this period .......................................................... $500
   (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 $500
   Enter the net here and on the Summary Page, Column A, Line 2.

(May be a negative number)

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.

---

**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

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www.fppc.ca.gov
Re-Elect Jim Reed for City Council 2018 Committee

**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
- **FIL** 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)

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CODE OR</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>GoDaddy 3032 Bunker Hill Lane Santa Clara, CA 95054</td>
<td>WEB</td>
<td>Domain name rent</td>
<td>224</td>
</tr>
<tr>
<td>California Secretary of State 1500 11th Street, Room 495 Sacramento, CA 95814</td>
<td>FIL</td>
<td>Annual fee</td>
<td>150</td>
</tr>
</tbody>
</table>

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

**SUBTOTAL $ 374**

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.) ................................................................. $ 374
2. Unitemized payments made this period of under $100 ........................................................................................................ $ 0
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 $ 374