Recipient Committee
Campaign Statement
Cover Page

Statement covers period:
from 01-01-17
through 06-30-17

Date of election if applicable:
(Month, Day, Year)
N/A

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
☐ Controlled
☐ Sponsored
(Also Complete Part 6)
☐ Primarily Formed Candidate/
Officerholder 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

3. Committee Information
I.D. NUMBER 1276172

COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE)
Scotts Valley Town Center Now

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE
Scotts Valley CA 95066 (831) 419-1701

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
Eric P. Seib
MAILING ADDRESS
CITY STATE ZIP CODE AREA CODE/PHONE
Scotts Valley CA 95066 (831) 234-3322

NAME OF ASSISTANT TREASURER, IF ANY
Jim Reed
MAILING ADDRESS
CITY STATE ZIP CODE AREA CODE/PHONE
Scotts Valley CA 95066 (831) 419-1701

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 7/17/17
Date

By
Signature of Treasurer or Assistant Treasurer

Executed on
Date

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

Executed on
Date

By
Signature of Controlling Officerholder, Candidate, State Measure Proponent

Executed on
Date

By
Signature of Controlling Officerholder, Candidate, State Measure Proponent

FPPC Form 460 (Jan/2016)
FPPCAdvice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
**Campaign Disclosure Statement**

**Summary Page**

Amounts may be rounded to whole dollars.

**Statement covers period**

from 01-01-17

through 06-30-17

**CALIFORNIA FORM 460**

Page 2 of 2

**NAME OF FILER**

Scotts Valley Town Center Now

**ID. NUMBER**

1276172

### Contributions Received

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A (TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)</th>
<th>Column B (CALENDAR YEAR TO DATE)</th>
<th>Calendar Year Summary for Candidates Running in Both the State Primary and General Elections</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Monetary Contributions</td>
<td>$0.00</td>
<td>$0.00</td>
<td>1/1 through 6/30</td>
</tr>
<tr>
<td>2. Loans Received</td>
<td>$0.00</td>
<td>$0.00</td>
<td>7/1 to Date</td>
</tr>
<tr>
<td>3. SUBTOTAL CASH CONTRIBUTIONS</td>
<td>$0.00</td>
<td>$0.00</td>
<td></td>
</tr>
<tr>
<td>4. Nonmonetary Contributions</td>
<td>$0.00</td>
<td>$0.00</td>
<td></td>
</tr>
<tr>
<td>5. TOTAL CONTRIBUTIONS RECEIVED</td>
<td>$0.00</td>
<td>$0.00</td>
<td></td>
</tr>
</tbody>
</table>

### Expenditures Made

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A (TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)</th>
<th>Column B (CALENDAR YEAR TO DATE)</th>
<th>Expenditure Limit Summary for State Candidates</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Payments Made</td>
<td>$0.00</td>
<td>$0.00</td>
<td>22. Cumulative Expenditures Made*</td>
</tr>
<tr>
<td>7. Loans Made</td>
<td>$0.00</td>
<td>$0.00</td>
<td></td>
</tr>
<tr>
<td>8. SUBTOTAL CASH PAYMENTS</td>
<td>$0.00</td>
<td>$0.00</td>
<td>Date of Election (mmdy)</td>
</tr>
<tr>
<td>9. Accrued Expenses (Unpaid Bills)</td>
<td>$0.00</td>
<td>$0.00</td>
<td>Total to Date</td>
</tr>
<tr>
<td>10. Nonmonetary Adjustment</td>
<td>$0.00</td>
<td>$0.00</td>
<td></td>
</tr>
<tr>
<td>11. TOTAL EXPENDITURES MADE</td>
<td>$0.00</td>
<td>$0.00</td>
<td></td>
</tr>
</tbody>
</table>

### Current Cash Statement

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A (TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)</th>
<th>Column B (CALENDAR YEAR TO DATE)</th>
<th>Current Cash Statement</th>
</tr>
</thead>
<tbody>
<tr>
<td>12. Beginning Cash Balance</td>
<td>$0.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Cash Receipts</td>
<td>$0.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14. Miscellaneous Increases to Cash</td>
<td>$0.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. Cash Payments</td>
<td>$0.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16. ENDING CASH BALANCE</td>
<td>$0.00</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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).

### Cash Equivalents and Outstanding Debts

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A (TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)</th>
<th>Column B (CALENDAR YEAR TO DATE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>18. Cash Equivalents</td>
<td>$0.00</td>
<td></td>
</tr>
<tr>
<td>19. Outstanding Debts</td>
<td>$0.00</td>
<td></td>
</tr>
</tbody>
</table>

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.