

**Recipient Committee
Campaign Statement
Cover Page**

COVER PAGE

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CITY OF EMERYVILLE

CALIFORNIA FORM 460

Page 1 of 16
For Official Use Only

Statement covers period	Date of election if applicable: (Month, Day, Year)
from <u>7/1/2016</u>	<u>11/7/2016</u>
through <u>9/24/2016</u>	

SEE INSTRUCTIONS ON REVERSE

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

3. Committee Information

I.D. NUMBER
1380397

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Bauters for Emeryville City Council 2016

STREET ADDRESS (NO P.O. BOX)
4260 Halleck St.

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Emeryville</u>	<u>CA</u>	<u>94608</u>	<u>(510) 693-7474</u>

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
Frank J. Mecca

MAILING ADDRESS
511 46th St.

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Sacramento</u>	<u>CA</u>	<u>95819</u>	<u>(916) 847-4578</u>

NAME OF ASSISTANT TREASURER, IF ANY
John J. Bauters

MAILING ADDRESS
4260 Halleck St.

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Emeryville</u>	<u>CA</u>	<u>94608</u>	<u>(510) 693-7474</u>

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 <u>9.24.2016</u> Date	By _____
Executed on <u>29-Sept. 2016</u> 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**

CALIFORNIA FORM	460
Page <u> 2 </u> of <u> 16 </u>	

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE				
John J. Bauters				
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)				
Emeryville City Council				
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP	
4260 Halleck St.	Emeryville	CA	94608	

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?
	<input type="checkbox"/> YES <input type="checkbox"/> 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?
	<input type="checkbox"/> YES <input type="checkbox"/> 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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> 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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

Attach continuation sheets if necessary

**Campaign Disclosure Statement
Summary Page**

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>7/1/2016</u> through <u>9/24/2016</u>	CALIFORNIA FORM 460
	Page <u>3</u> of <u>16</u>
I.D. NUMBER 1380397	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Bauters for Emeryville City Council 2016

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions <i>Schedule A, Line 3</i>	\$ <u>8,229.00</u>	\$ <u>24,070.00</u>
2. Loans Received <i>Schedule B, Line 3</i>	\$ <u>0</u>	\$ <u>0.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS <i>Add Lines 1 + 2</i>	\$ <u>8,229.00</u>	\$ <u>24,070.00</u>
4. Nonmonetary Contributions <i>Schedule C, Line 3</i>	\$ <u>0</u>	\$ <u>0</u>
5. TOTAL CONTRIBUTIONS RECEIVED <i>Add Lines 3 + 4</i>	\$ <u>8,229.00</u>	\$ <u>24,070.00</u>

**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

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made <i>Schedule E, Line 4</i>	\$ <u>8,650.44</u>	\$ <u>10,065.47</u>
7. Loans Made <i>Schedule H, Line 3</i>	\$ <u>0</u>	\$ <u>0</u>
8. SUBTOTAL CASH PAYMENTS <i>Add Lines 6 + 7</i>	\$ <u>8,650.44</u>	\$ <u>10,065.47</u>
9. Accrued Expenses (Unpaid Bills) <i>Schedule F, Line 3</i>	\$ <u>0</u>	\$ <u>0</u>
10. Nonmonetary Adjustment <i>Schedule C, Line 3</i>	\$ <u>0</u>	\$ <u>0</u>
11. TOTAL EXPENDITURES MADE <i>Add Lines 8 + 9 + 10</i>	\$ <u>8,650.44</u>	\$ <u>10,065.47</u>

**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 <i>Previous Summary Page, Line 16</i>	\$ <u>19,745.26</u>
13. Cash Receipts <i>Column A, Line 3 above</i>	\$ <u>8,229.00</u>
14. Miscellaneous Increases to Cash <i>Schedule I, Line 4</i>	\$ <u>0</u>
15. Cash Payments <i>Column A, Line 8 above</i>	\$ <u>8,650.44</u>
16. ENDING CASH BALANCE <i>Add Lines 12 + 13 + 14, then subtract Line 15</i>	\$ <u>19,323.82</u>

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.

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

17. LOAN GUARANTEES RECEIVED <i>Schedule B, Part 2</i>	\$ <u>0</u>
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents <i>See instructions on reverse</i>	\$ <u>0</u>
19. Outstanding Debts <i>Add Line 2 + Line 9 in Column B above</i>	\$ <u>0</u>

**Schedule A
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from	7/1/2016	
through	9/24/2016	Page 4 of 16

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Bauters for Emeryville City Council 2016	I.D. NUMBER 1380397
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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)
7/9/2016	Paul Caruso 61 Broad Reach T64 Weymouth, MA 02191	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director Allied Barton	\$250	\$250	
7/9/2016	John Scheuerman 6363 Christie Ave., #3016 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Engineer BSUBAS	\$250	\$250	
7/30/2016	Joyce Jacobson 4 Admiral Dr., #421 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$50	
8/8/2016	Bay Area Citizens PAC #1346828 6363 Christie Ave., #2616 Emeryville, CA 94608	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a	\$500	\$500	
8/8/2016	John Gooding P.O. Box 8400 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Partner Quadric Group	\$500	\$500	
SUBTOTAL \$				1,550		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.)	\$	7,810
2. Amount received this period – unitemized monetary contributions of less than \$100	\$	419
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.).....	TOTAL \$	8,229

*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

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	7/1/2016	
through	9/24/2016	Page 5 of 16

NAME OF FILER Bauters for Emeryville City Council 2016	I.D. NUMBER 1380397
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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)
8/8/2016	Frank J. Mecca 511 46th St. Sacramento, CA 95819	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Director County Welfare Directors Association of CA	\$1,000	\$1,000	
8/11/2016	Ray Westergard 4 Commodore Dr., #329 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$50	
8/11/2016	Marcelline Krafchick 6363 Christie Ave., #1616 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$200	\$200	
8/24/2016	Thomas Stadick 3124 Freemont Ave. South #1 Minneapolis, MN 55408	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Accounting Kids Hair, Inc.	\$100	\$100	
8/28/2016	Chad Halfaker 4710 North Wolcott, Unit 3W Chicago, IL 60640	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Construction Manager FWDc+i	\$250	\$250	
SUBTOTAL \$				1,600		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>7/1/2016</u> through <u>9/24/2016</u>	CALIFORNIA FORM 460
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NAME OF FILER Bauters for Emeryville City Council 2016	I.D. NUMBER 1380397
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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)
8/29/2016	Kristin Peterson 1420 45th St., #48 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Artist/Designer Eveo	\$25	\$25	
9/2/2016	Miguel Dwin 37 Glashaus Loop Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Budget Analyst Berkeley Unified School District	\$100	\$100	
9/4/2016	Rita Lewis 4053 Harlan St., Suite 115 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Registered Nurse CA Correctional Health Care Services	\$200	\$200	
9/4/2016	Keith Carson for Alameda County Sup. 2016 FPPC #890744 201 13th St., #722 Oakland, CA 94612	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a	\$250	\$250	
9/8/2016	Laura Ingram 6442 Herzog St. Oakland, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Property Manager/Owner Self-employed	\$50	\$50	
SUBTOTAL \$				625		

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 PTY – Political Party
 SCC – Small Contributor Committee

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	7/1/2016	
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NAME OF FILER Bauters for Emeryville City Council 2016	I.D. NUMBER 1380397
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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)
9/9/2016	John Gordon 4053 Harlan St., Suite 115 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Computer Consultant, Self-employed	\$200	\$200	
9/10/2016	Jacqueline Asher 4115 Adeline St. Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Lecturer/Councilmember UC Berkeley/City of Emeryville	\$150	\$200	
9/10/2016	John Arechar 710 N. 4th St., #305 Minneapolis, MN 55401	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Third Party Risk Manager U.S. Bank	\$100	\$100	
9/10/2016	Joshua Russell 44 Glashauss Loop Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Head of Commerce Massdrop	\$120	\$120	
9/11/2016	Campaign for Equality, FPPC #840821 1938 Marin Ave. Berkeley, CA 94707	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a	\$500	\$500	
SUBTOTAL \$				1,070		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	7/1/2016	
through	9/24/2016	Page 8 of 16

NAME OF FILER Bauters for Emeryville City Council 2016	I.D. NUMBER 1380397
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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)
9/11/2016	Tony Timmons 3500 Galt Ocean Drive, #1615 Fort Lauderdale, FL 33308	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Business Manager Lewis and Behrens, LLC	\$100	\$100	
9/12/2016	Elizabeth Siggins 760 Roberston Way Sacramento, CA 95818	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Project Director Californians for Safety and Justice	\$100	\$100	
9/13/2016	Unity PAC FPPC #12494190 7750 Pardee Lane, Suite 110 Oakland, CA 94621	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a	\$250	\$250	
9/14/2016	Dianne Martinez 5684 Bay Street, #701 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	TV Producer Self-employed	\$200	\$200	
9/14/2016	Trent Rhorer 186 Hermosa Ave. Oakland, CA 95618	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Director City and County of San Francisco Human Services Agency	\$150	\$150	
SUBTOTAL \$				800		

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 SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	7/1/2016	
through	9/24/2016	Page 9 of 16

NAME OF FILER Bauters for Emeryville City Council 2016	I.D. NUMBER 1380397
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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)
9/14/2016	Sharon Wilchar 1420 45th St., #19 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Arts Consultant/Administrator Sharon Wilchar Fabric Desian	\$25	\$25	
9/15/2016	Sam Foushee 2 Admiral Drive, #472 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$25	\$25	
9/15/2016	Judith Stanley 6 Admiral Drive, #374 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$50	
9/15/2016	Celeste Burrows 5 Commodore Drive, #212 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Instructor Chabot Space and Science Center	\$20	\$20	
9/15/2016	Louis Labat 5 Commodore Drive, #209 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$25	\$25	
SUBTOTAL \$				145		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	7/1/2016	
through	9/24/2016	Page 10 of 16

NAME OF FILER Bauters for Emeryville City Council 2016	I.D. NUMBER 1380397
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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)
9/16/2016	Kurt Brinkman 400 Market Street Oakland, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Intrepid	\$200	\$200	
9/17/2016	Edward R. Treuting 4313 Essex Street Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Project Manager KP LLC	\$100	\$100	
9/19/2016	Frances Chiappetta 8 Admiral Drive, #123 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$25	\$25	
9/19/2016	Gene Weinstein 4 Commodore Drive, #328 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100	\$100	
9/19/2016	Douglas Bond 12157 Moorpark St., #102 Studio City, CA 91604	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Chief Operating Officer Amity Foundation	\$100	\$100	
SUBTOTAL \$				525		

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 IND – Individual
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 (other than PTY or SCC)
 OTH – Other (e.g., business entity)
 PTY – Political Party
 SCC – Small Contributor Committee

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>7/1/2016</u> through <u>9/24/2016</u>	CALIFORNIA FORM 460
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NAME OF FILER Bauters for Emeryville City Council 2016	I.D. NUMBER 1380397
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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)
9/19/2016	Vickie Jo Sowell 3618 Peralta Street Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sculptor Self-employed	\$100	\$100	
9/20/2016	Kevin Kellogg 4300 Horton Street, #1 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Architect Kellogg and Associates	\$100	\$100	
9/20/2016	John Demerritt 1420 45th Street, #21 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Bookbinder Self-employed	\$20	\$20	
9/20/2016	Paul Herzoff 1420 45th Street, #37 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$50	
9/20/2016	Edythe Bresnahan 1420 45th Street, #28 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Teacher Dominican University of California	\$25	\$25	
SUBTOTAL \$				\$295		

*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

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>7/1/2016</u> through <u>9/24/2016</u>		CALIFORNIA FORM 460
Page <u>12</u> of <u>16</u>		
NAME OF FILER Bauters for Emeryville City Council 2016		I.D. NUMBER 1380397

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)
9/20/2016	Robert Hughes 1420 45th Street, #16 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Musician Self-employed	\$25	\$25	
9/20/2016	Wareham Property Group, Inc. 1120 Nye Street, Suite 400 San Rafael, CA 94901	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	n/a	\$500	\$1,000	
9/20/2016	Richard Robbins 1120 Nye Street, Suite 400 San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Wareham Property Group, Inc.	\$500	\$1,000	
9/21/2016	Jessica J. Bauters 6145 Janice Way Arvada, CO 80004	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Assistant Director of Communications Colorado University at Boulder School of Music	\$50	\$50	
9/22/2016	William R. Leben 1007 41st Street, Apt. 33 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$50	\$50	
SUBTOTAL \$				1,125		

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 SCC – Small Contributor Committee

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	7/1/2016	
through	9/24/2016	Page 13 of 16

NAME OF FILER Bauters for Emeryville City Council 2016	I.D. NUMBER 1380397
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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)
9/22/2016	Jean Goldman 6 Commodore Drive, #338 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Artist Self-employed, Goldman Transitions	\$25	\$25	
9/23/2016	Kent R. Wright 4300 Horton Street., #10 Emeryville, CA 94608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Designer Self-employed	\$50	\$50	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$				\$75		

*Contributor Codes
 IND – Individual
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 SCC – Small Contributor Committee

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	7/1/2016	
through	9/24/2016	Page 14 of 16
NAME OF FILER		I.D. NUMBER
Bauters for Emeryville City Council 2016		1380397

SEE INSTRUCTIONS ON REVERSE

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
Alliance Campaign Strategies 18111 Santa Rita Road #224 Pleasanton, CA 94566	CNS		Consultant Fee	\$1,000
Alliance Campaign Strategies 18111 Santa Rita Road #224 Pleasanton, CA 94566	CNS		Consultant Fee	\$2,000
Alliance Campaign Strategies 18111 Santa Rita Road #224 Pleasanton, CA 94566	CNS		Consultant Fee	\$2,000
SUBTOTAL \$				5,000

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

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$	8,650.44
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 \$	8,650.44

**Schedule E
(Continuation Sheet)
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	7/1/2016	
through	9/24/2016	Page 15 of 16
NAME OF FILER		I.D. NUMBER
Bauters for Emeryville City Council 2016		1380397

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Bauters for Emeryville City Council 2016

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
Bella Luna Studios 3533 Helen Drive Pleasanton, CA 94588	CMP	Campaign photographs	\$400
Political Data, Inc. P.O. Box 59570 Norwalk, CA 90652	CMP	Voter Lists	\$700
Impact Signs 2021 Ocean Ave., Suite 227 Santa Monica, CA 90495	CMP	Signs	772.04
Voter Guide Slate Cards 6285 E. Spring St., Suite 202 Long Beach, CA 90808	LIT	Slate Card	\$500
Hot Italian 5959 Shellmound St., Suite 75 Emeryville, CA 94608	FND	Campaign Kick-Off Refreshments	129.57

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

SUBTOTAL \$ 2,501.61

**Schedule E
(Continuation Sheet)
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	7/1/2016	
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NAME OF FILER		I.D. NUMBER
Bauters for Emeryville City Council 2016		1380397

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Bauters for Emeryville City Council 2016

I.D. NUMBER

1380397

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CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
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FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
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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
Autumn Press 945 Camelia St. Berkeley, CA 94710	LIT		Walk Piece	\$870.05
Coalition for Senior Citizen Security 2658 Griffith Park Blvd. #383 Los Angeles, CA 90039	LIT		Slate Card	\$100
Council of Concerned Women Voters 2658 Griffith Park Blvd. #383 Los Angeles, CA 90039	LIT		Slate Card	\$100
Stripe 185 Berry Street, Suite 550 San Francisco, CA 94107	CMP		Campaign Donation Fees	\$78.78

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

SUBTOTAL \$ 1,148.83