ecipient Commi	ttee				COVER PAG
ampaign Staten	nent			Date Stamp	CALIFORNIA 160
over Page				CITY OF GOLETA CALIFORNIA	FORM TOU
		Statement covers period	Date of election if applicable:		Page of
		from 7/1/2016	(Month, Day, Year)	JAN 3 0 2017	For Official Use Only
E INSTRUCTIONS ON REVER	SE	through12/31/2016	11/8/16	RECEIVED	7
Type of Recipient C	ommittee: All Committees - C	omplete Parts 1, 2, 3, and 4.	2. Type of Statement:		51, 7, 78, 77, 78, 78, 78, 78, 78, 78, 78,
Officeholder, Candidate State Candidate E Recall (Also Complete Part 5)  General Purpose Com Sponsored Small Contributor ( Political Party/Cent	te Controlled Committee lection Committee  amittee  Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	Preelection Statement  Semi-annual Statement  Termination Statement (Also file a Form 410 To	ermination)	Quarterly Statement Special Odd-Year Report
Committee Information		D. NUMBER 1390495	Treasurer(s)		
COMMITTEE NAME (OR CAND	IDATE'S NAME IF NO COMMITTEE)	1000400	NAME OF TREASURER		
Aaron Swaney for G	oleta City Council 2016		Jon Ludwick		
			MAILING ADDRESS		
			3080 Calle Madera		
STREET ADDRESS (NO P.O. B	OX)		CITY	STATE Z	P CODE AREA CODE/PHONE
118 Salisbury Ave.			Santa Barbara		3105 805.583.9425
COLOTO	STATE ZIP CO		NAME OF ASSISTANT TREASURE	R, IF ANY	000.000.9420
Goleta	CA 9311	7 805.303.1465	Aaron Swaney		
MAILING ADDRESS (IF DIFFER	ENT) NO. AND STREET OR P.O. BOX		MAILING ADDRESS		
CITY			118 Salisbury Ave.		
CHY	STATE ZIP CO	DE AREA CODE/PHONE	CITY	STATE Z	P CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDI	2500		Goleta		8117 805.303.1465
OF HONAL. FAX / E-WAIL ADDI	7555		OPTIONAL; FAX / E-MAIL ADDRES	SS	
Verification					
I have used all reasonable	diligence in preparing and reviewi	ng this statement and to the best of my l	knowledge the information contained	herein and in the attached	
certify under penalty of perj	ury under the laws of the State of	California that the foregoing is true and	correct	morem and in the attached	scriedules is true and complete.
Executed on	1/30/2017				
	Date	Ву	Signature of Treasurer or Assistant	Treasurer	
Executed on	1/30/2017	Ву	9		
	Date	Signature of Contro	olling Officeholder, Candidate, State Measure Pro	ponent or Responsible Officer of Sp	ponsor
Executed on	Dete	Ву			
	Date	S	ignature of Controlling Officeholder, Candidate, S	tate Measure Proponent	
Executed on	Date	Ву			
		S	ignature of Controlling Officeholder, Candidate, S.	tate Messure Proposent	

## ampaign Disclosure Statement ummary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

CALIFORNIA 460

Statement covers period

2016

E INSTRUCTIONS ON REVERSE				thro	ugh 12/31/2016	Page of		
ME OF FILER Aaron Swaney for Goleta City Council 2016						1.D. NUMBER 1390495		
ontributions Received	(F	Column A TOTAL THIS PERIOD ROM ATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTAL TO DATE	Running in Both th	nmary for Candidates he State Primary and		
Monetary Contributions	\$	0	\$	2100	20. Contributions Received \$	\$\$		
cpenditures Made       Schedule E, Line 4         Loans Made       Schedule H, Line 3	\$	562.35	\$	2100	Expenditure Limit Candidates	Summary for State		
SUBTOTAL CASH PAYMENTS Add Lines 6 + 7  Accrued Expenses (Unpaid Bills) Schedule F, Line 3		562.35	\$	2100	22. Cumulat (If Subject to	ive Expenditures Made* o Voluntary Expenditure Limit)		
. Nonmonetary Adjustment	\$	562.35	\$	2100	(mm/dd/yy)	Total to Date		
Leginning Cash Balance Previous Summary Page, Line 16  Cash Receipts Column A, Line 3 above  Miscellaneous Increases to Cash Schedule I, Line 4  Cash Payments Column A, Line 8 above  ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15  If this is a termination statement, Line 16 must be zero.	\$	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		reported in Column B.  y  n  If	*Amounts in this section may be different from amounts reported in Column B.		
. LOAN GUARANTEES RECEIVED Schedule B, Part 2 ash Equivalents and Outstanding Debts	\$		oni fro	ed for this calendar year ly carry over the amour m Lines 2, 7, and 9 (if	r, nts			
. Cash Equivalents			any	у).	FPPC Advice: adv	FPPC Form 460 (Jan/2016) rice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov		

chedule	E
ayments	Made

Amounts may be rounded to whole dollars.

Statement covers period from 7/1/2916 CALIFORNIA 460 FORM Page 3 of 3

I.D. NUMBER

390495

E INSTRUCTIONS ON REVERSE

ME OF FILER

A Aron Swager for Golda City Council 2016

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)

DES:	If one of the following	codes accurately	describes the pa	ayment, you	may enter	the code.	Otherwise,	describe the	paymen
1D camp	aign naranharnalia/mica		MDD -	managed and					

P campaign paraphernalia/misc.
S campaign consultants
B contribution (explain nonmonetary)\*

civic donations

candidate filing/ballot feesD fundraising events

independent expenditure supporting/opposing others (explain)\*

G legal defense

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)

CODE

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

DESCRIPTION OF BAYMENT

WEB information technology costs (internet, e-mail)

(II COMMITTE, ALSO ENTER I.B. NOMBER)	CODE	OR	DESCRIPTION OF PAYMENT		AMOUNT PAID
Aaron Swaney 118 Salisbury Ave. Goleta, CA 93117	RFD	Returned	d Contributions		562.35
'ayments that are contributions or independent expenditures must also be summarized on Schedule D.					562.35
chedule E Summary					
Itemized payments made this period. (Include all Schedule E subtotals.)			\$ <u></u>	562.35	
Unitemized payments made this period of under \$100					
Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)					· — · · · ·

562.35