Recipient Committee			D-1-0/	COVER PAGE
Campaign Statement			Date Stamp CITY OF GOLET	CALIFORNIA 460
Cover Page	Statement covers period  from	Date of election if applicable: (Month, Day, Year)  11/03/2020	OCT 2 2 2020	FORM 400 Page 1 of 20 For Official Use Only
Type of Recipient Committee: All Committee	ss - Complete Paris 1, 2, 3, and 4	2. Type of Statement:	RECEIVED	
Andrew .	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	Preelection Statement     Seml-annual Statement     Termination Statement     (Also file a Form 410 Terminat     Amendment (Explain Below)		Statement dd-Year Report
3. Committee Information	I.D. NUMBER 1426647	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMM Kyle Richards For Goleta City Council 20		NAME OF TREASURER  Jen Cooper  MAILING ADDRESS  226 East Canon Perdido Street #	D	
STREET ADDRESS (NO P.O. BOX) 226 East Canon Perdido Street #D	1	CITY Santa Barbara, CA 93101	STATE	ZIP CODE AREA CODE/PHONE 805-448-9470
Santa Barbara, CA 93101  MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR  226 East Canon Perdido Street #D	STATE ZIP CODE AREA CODE/PHONE P.O. BOX	NAME OF ASSISTANT TREASURER, IF A Monica Intaglietta MAILING ADDRESS  226 East Canon Perdido Street #		
	STATE ZIP CODE AREA CODE/PHONE	CITY  Santa Barbara, CA 93101  OPTIONAL: FAX /E-MAIL ADDRESS	STATE	ZIP CODE AREA CODE/PHONE
		jen@cicsb.com		
Executed on  Executed on  Executed on  DATE  Executed on  DATE  Executed on  DATE  DATE  DATE	ng and reviewing this statement and to the best of er the laws of the State of California that the fore  By  By  By  By  By  By	Signature of Controlling Officeholder,	er or Assistant Treasurer	Officer of Sponsor

# Recipient Committee Campaign Statement Cover Page - Part 2

CITY

COVER PAGE - PART 2						
The second second	FORNIA	A	160			
F	ORM					
_	2		25			

o. Omoonoider or oundeduce controlled committee	5. Officeholder or Candidate Controlled Committee		6. Primarily Formed Ballot Measure Committee				
NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BALLOT MEASURE					
Kyle Richards	_		•				
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUM	BER IF APPLICABLE)	BALLOT NO. OR LETTER JUR	RISDICTION	SUPPORT			
City Council Member City of Goleta	*		•	OPPOSE			
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY	STATE ZIP						
37 Dearborn Place #84 Goleta,	CA 93117	Identify the controlling offic	eholder, candidate, or sta	te measure proponent, if any.			
		NAME OF OFFICEHOLDER, CANDIDA	TE, OR PROPONENT				
Related Committees Not Included in this Statement: List not included in this statement that are controlled by you or are prim or make expenditures on behalf of your candidacy		OFFICE SOUGHT OR HELD		DISTRICT NO. IF ANY			
COMMITTEE NAME	I.D. NUMBER						
OOMINITTEE WANTE	I.B. NOMBER						
NAME OF TREASURER	CONTROLLED COMMITTEE?  YES NO	7. Primarily Formed Candi officeholder(s) or candidate(s)					
	CONTROLLED COMMITTEE?  YES NO		) for which this committee is	primarily formed.			
NAME OF TREASURER	CONTROLLED COMMITTEE?  YES NO	officeholder(s) or candidate(s	) for which this committee is	primarily formed.  SUPPORT OPPOSE  OR HELD SUPPORT			
NAME OF TREASURER  COMMITTEE ADDRESS STREET ADDRESS (N	CONTROLLED COMMITTEE?  YES NO O P.O. BOX)	NAME OF OFFICEHOLDER OR CANDI	) for which this committee is  DATE OFFICE SOUGHT  DATE OFFICE SOUGHT	primarily formed.  OR HELD SUPPORT OPPOSE  OR HELD SUPPORT OPPOSE			
NAME OF TREASURER  COMMITTEE ADDRESS STREET ADDRESS (N  CITY STATE  COMMITTEE NAME	CONTROLLED COMMITTEE?  YES NO O P.O. BOX)  ZIP CODE AREA CODE/PHONE  I.D. NUMBER	officeholder(s) or candidate(s)	) for which this committee is  DATE OFFICE SOUGHT  DATE OFFICE SOUGHT	Primarily formed.  SUPPORT OPPOSE  OR HELD SUPPORT OPPOSE			
NAME OF TREASURER  COMMITTEE ADDRESS STREET ADDRESS (N  CITY STATE	CONTROLLED COMMITTEE?  YES NO O P.O. BOX)  ZIP CODE AREA CODE/PHONE	NAME OF OFFICEHOLDER OR CANDI	) for which this committee is  IDATE OFFICE SOUGHT  IDATE OFFICE SOUGHT  IDATE OFFICE SOUGHT	Primarily formed.  OR HELD SUPPORT OPPOSE  OR HELD SUPPORT OPPOSE  OR HELD SUPPORT OPPOSE			

AREA CODE/PHONE

STATE

ZIP CODE

#### Campaign Disclosure Statement **Summary Page**

Amounts may be rounded to whole dollars.

Statement covers period 09/20/2020 from 10/17/2020 through

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

I.D. NUMBER

Kyle Richards For Goleta City Council 2020

1426647

SUMMARY PAGE

Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and
1. Monetary Contributions Schedule A, Line 3	\$6,919.00	\$19,775.00	General Elections
2. Loans Received	.00	.00	1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 6,919.00	\$ 19,775.00	20. Contributions \$ .00 \$ .00
4. Nonmonetary Contributions Schedule C, Line 3	.00	.00	Received ————————————————————————————————————
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$6,919.00	\$19,775.00	21. Expenditures \$ .00 \$ .00
Expenditures Made			Expenditures Limit Summary for State
6. Payments Made Schedule E, Line 4	\$ 7,738.78	\$13,722.65	Candidates
7. Loans MadeSchedule H, Line 3	.00	.00	22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	\$13,722.65	(ii Subject to Voluntary Experionale Entity)
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	-2,148.50	.00	
10. Nonmonetary Adjustment	.00	.00	Date of Election Total to Date (mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$5,590.28	\$13,722.65	<u> </u>
Current Cash Statement		To calculate Column B,	\$
12. Beginning Cash Balance	\$ 6,872.13	add amounts in Column A to the corresponding	
13. Cash ReceiptsColumn A, Line 3 above	6,919.00	amounts from Column B of your last report. Some	\$
14. Miscellaneous Increases to Cash	.00	amounts in Column A may	\$
15. Cash Payments	7,738.78	be negative figures that should be subtracted from	\$
16. ENDING CASH BALANCE  Add Lines 12 + 13 + 14, then subtract Line 15	\$ 6,052.35	previous period amounts. If this is the first report being	
If this is a termination statement, Line 16 must be zero.		filed for this calendar year, only carry over the amounts	
17. LOAN GUARANTEES RECEIVED Schedule B, Line 2	\$ .00	from Lines 2, 7, and 9 (if any).	*Amounts in this section may be different from amounts reported in Column B.
Cash Equivalents and Outstanding Debts			
18. Cash Equivalents	.00		
19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$	.00		FPPC Form 460 (Jan/2016)
Powered by ISPolitical.com		I	FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

Schedule A Monetary Contributions Received		Amounts may be rounded to whole dollars.		Statement covers period CALLE				2211	STATE OF TAXABLE PARTY.	CHEDULE	
				from09/20/2020			CALIFORNIA 46		160		
SEE INSTRUCT	IONS ON REVERSE			through .	10/17/2	2020	Page _	4	of _	25	
NAME OF FILER	3						I.D. NUMBE				
Kyle Richard	ls For Goleta City Council 2020							14266	347		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)		RECEIVED PERIOD	CALEND	VE TO DATE AR YEAR DEC. 31)			N TO DATI JIRED)	
	John T. Anagnoson	■ IND	Retired	35	.00	35	.00				
09/17/2020	5737 Berkeley Road Goleta, CA 93117	COM Retired OTH PTY		**INTERMEDIARY** ActBlue							
		scc		366 Summer Street Somerville, MA 02144							
	Richard Foster 7129 Del Norte Drive	⊠ IND	Not Employed		.00	50	.00				
09/17/2020	Goleta, CA 93117	COM OTH	ОТН		Not Employed	**INTERMEDIARY** ActBlue					
		scc			366 Sumn Somerville,						
	Jennifer Fullerton 7962 Rio Vista Dr	☑ IND	Sr. Business Analyst	50	.00	50	.00				
09/17/2020	Goleta, CA 93117	□ сом □ отн	Qad	**INTERMED	DIARY** ActE	ActBlue					
		□ PTY □ SCC		366 Summer Street Somerville, MA 02144							
	Lori Guynes 70 Manchester Place	X IND	Acupuncture		.00	40	.00				
09/17/2020	Goleta, CA 93117	□ COM □ OTH	DBA: Lori Guynes	**INTERMED	DIARY** ActE	Blue					
	Colcia, Ortotti	□ PTY □ SCC		366 Summer Street Somerville, MA 02144							
	Eric Klein	X IND	Software Engineer	50	0.00	50	.00				
09/17/2020	264 Iris Ave	□ COM □ OTH	Nvidia	**INTERMED	DIARY**	l	•				
302020	Goleta, CA 93117	□ PTY □ SCC			366 Sumn Somerville.	ner Street					

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FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

366 Summer Street Somerville, MA 02144

225.00

### Schedule A Monetary Contributions Received

Amounts may be rounded to whole dollars.

		SCHEDULE A
Statement covers period		CALIFORNIA A CO
from	09/20/2020	FORM 40U
through .	10/17/2020	Page5of25
		I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Kyle Richards For Goleta City Council 2020

do i di dolota dity doanon 2020				. }	1420047
FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF 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)
Maxwell Martin 430 Evonshire Avenue Santa Barbara, CA 93111	IND     COM     OTH     PTY     SCC	Videographer DBA: Maxwell Martin	366 Sumn	ner Street	
Donald McDermott 484 Cole Pl Goleta, CA 93117	IND     □ COM     □ OTH     □ PTY     □ SCC	Not Employed Not Employed	366 Sumn	ner Street	
Marian Coheп 7635 Pismo Beach Circle Goleta, CA 93117	IND     COM     OTH     PTY     SCC	Computer Programmer Ucsb	366 Summ	er Street	
Mary Gosselin 205 Calle Serrento Goleta, CA 93117	IND □ COM □ OTH □ PTY □ SCC	Retired Retired	100.00	100.00	
Sreenivasa Jammalamadaka 1304 Ferrelo Rd Santa Barbara, CA 93103	IND □ COM □ OTH □ PTY □ SCC	Professor Ucsb	366 Sumr	er Street	
	CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)  Maxwell Martin 430 Evonshire Avenue  Santa Barbara, CA 93111  Donald McDermott 484 Cole Pl  Goleta, CA 93117  Marian Cohen 7635 Pismo Beach Circle Goleta, CA 93117  Mary Gosselin 205 Calle Serrento Goleta, CA 93117  Sreenivasa Jammalamadaka 1304 Ferrelo Rd	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)  Maxwell Martin 430 Evonshire Avenue  Santa Barbara, CA 93111  Donald McDermott 484 Cole Pl Goleta, CA 93117  Maxwell Martin  Santa Barbara, CA 93111  Donald McDermott  Santa Barbara, CA 93117  Marian Cohen  Goleta, CA 93117	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)  Maxwell Martin 430 Evonshire Avenue  Santa Barbara, CA 93111  Donald McDermott 484 Cole Pl Goleta, CA 93117  Marian Cohen 7635 Pismo Beach Circle Goleta, CA 93117  Mary Gosselin 205 Calle Serrento Goleta, CA 93117  Mary Gosselin 205 Calle Serrento Goleta, CA 93117  Sreenivasa Jammalamadaka 1304 Ferrelo Rd Santa Barbara, CA 93103  Findinidual, ENTER OCCUPATION AND EMPLOYER (IF SELF - EMPLOYED, ENTER NAME OF BUSINESS)  Videographer OCM DOTH DOTH DOTH DOTH DOTH DOTH DOTH DOTH	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)  Maxwell Martin 430 Evonshire Avenue  Santa Barbara, CA 93111  Donald McDermott 484 Cole PI Goleta, CA 93117  Marian Cohen 7835 Pismo Beach Circle Goleta, CA 93117  Mary Gosselin 205 Calle Serrento Goleta, CA 93117  Mary Gosselin 205 Calle Serrento Goleta, CA 93117  Sreenivasa Jammalamadaka 1304 Ferrelo Rd Santa Barbara, CA 93103  IF INDIVIDUAL, ENTER COCUPATION AND BERHUVER (IF SELF. EMPLOYED, ENTER INDIVIDUAL, ENTER COCUPATION AND EMPLOYER (IF SELF. EMPLOYED, ENTER INDIVIDUAL, ENTER COCUPATION AND EMPLOYER (IF SELF. EMPLOYED, ENTER INDIVIDUAL, ENTER COCUPATION AND EMPLOYER (IF SELF. EMPLOYED, ENTER INDIVIDUAL, ENTER COCUPATION AND EMPLOYER (IF SELF. EMPLOYED, ENTER INDIVIDUAL ENTER COCUPATION AND EMPLOYER (IF SELF. EMPLOYED, ENTER INDIVIDUAL ENTER COCUPATION AND EMPLOYER (IF SELF. EMPLOYED, ENTER INDIVIDUAL ENTER COCUPATION AND EMPLOYER (IF SELF. EMPLOYED, ENTER INIS PRIOD  **INTERMEDIARY** ACIE 366 Summ Somerville, IND COM	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMTRIBUTOR) (IF COMMITTEE, ALSO ENTER LD. NUMBER)   CODE (IF SELF_EMPLOYED, ENTER NAME OF BUSINESS)

SUBTOTAL \$

385.00

FPPC Form 460 (Jan/2016)
EPPC Advice: advice@fnnc.ca.gov (866/275-3772)

www.fppc.ca.gov

Schedule A Monetary Contributions Received		Amounts may be rounded to whole dollars.		Statement covers period from09/20/2020		CALIFORNIA 460		
	TIONS ON REVERSE			through10/1	7/2020	Page _	6 of .	25
NAME OF FILER	R ds For Goleta City Council 2020					I.D. NUMBE		
- Nie Nichard	ds For Goleta City Council 2020	1		I	1	L	1426647	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALEND	VE TO DATE PAR YEAR . DEC. 31)	PER ELECTION (IF REQ	
	Jim Sirianni 945 Ward Dr. #128	☒ IND	Health Screening	50.00	100	0.00		
09/19/2020	Santa Barbara, CA 93111	☐ COM ☐ OTH ☐ PTY ☐ SCC	Robert Half	366 Su	actBlue mmer Street lle, MA 02144			
09/23/2020	Vic Cox 82 Warwick Place Goleta, CA 93117	X IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Writer  DBA Vic Cox	70.00	70	.00		
09/23/2020	Kent Harris 229 Calle Serrento Goleta, CA 93117	IND     COM     OTH     PTY     SCC	Retired Retired	250.00	250	0.00		
09/23/2020	Joan Hartmann 1220 Poppy Valley Road Buellton, CA 93427	IND     COM     OTH     PTY     SCC	Supervisor County of Santa Barbara	200.00	200	0.00		
09/23/2020	Beverly Herbert 575 Lorraine Ave Santa Barbara, CA 93110	IND     COM     OTH     PTY     Scc	Retired Retired	40.00	40	.00		
			SUBTOTAL \$	610.00				

## Schedule A Monetary Contributions Received

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Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE		through10/17/2020	Page7 of25
NAME OF FILER		-	I.D. NUMBER
Kyle Richards For Goleta City Council 2020			1426647
	IF INDIVIDUAL, ENTER		

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF 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)
09/23/2020	Barbara Massey 7912 Winchester Circle Goleta, CA 93117	☐ IND ☐ COM ☐ OTH ☐ PTY	Retired Retired	100.00	100.00	
09/23/2020	Gregory Richards 101 Nye Rd Hershey, PA 17033	SCC SIND COM OTH PTY SCC	Financial Advisor Hershey Wealth Advisors	100.00	100.00	
09/23/2020	Ziegler Consultants 315 Meigs Road Santa Barbara, CA 93109	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		50.00	50.00	
09/22/2020	Ravid Raphael 5546 Berkeley Rd. Santa Barbara, CA 93111	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Not Employed Not Employed		30.00 Blue ner Street MA 02144	
09/23/2020	Eric Swenumson 654 Andamar Way Goleta, CA 93117	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Plans Examiner City of Santa Barbara	366 Sumi	100.00 Blue mer Street MA 02144	

SUBTOTAL \$

380.00

FPPC Form 460 (Jan/2016)

Monetary Contributions Received		Amounts may be rounded to whole dollars.		Statement covers	CALI	FORNIA 460
SEE INSTRUCTI	IONS ON REVERSE			through10/17/	2020 Page	8 of <u>25</u>
Kyle Richard	ls For Goleta City Council 2020				1.5.1401	1426647
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF 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)
09/28/2020	Philip Norvell 28 Vereda Cordillera Goleta, CA 93117	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Engineer MedLabs, Inc	50.00	50.00	
09/28/2020	Ken Palley 567 Pintura Drive Santa Barbara, CA 93111	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	25.00	25.00	
09/28/2020	Patricia Richards 140 Dorchester Dr Sellersville, PA 18960	X IND  ☐ COM  ☐ OTH  ☐ PTY  ☐ SCC	Retired Retired	200.00	300.00	
09/28/2020	Kathleen Werner 359 Princeton Avenue Goleta, CA 93111	IND □ COM □ OTH □ PTY □ SCC	Retired Retired	99.00	99.00	
09/27/2020	Linda Krop 5290 Overpass Road #6 Santa Barbara, CA 93111	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Attorney Environmental Defense Çenter	50.00 100.00  **INTERMEDIARY**		45
			SUBTOTAL	\$ 424.00		

#### Schedule A Amounts may be rounded SCHEDULE A to whole dollars. **Monetary Contributions Received** Statement covers period **CALIFORNIA** 09/20/2020 from 10/17/2020 9 of 25 through SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER 1426647 Kyle Richards For Goleta City Council 2020

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	<ul> <li>IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)</li> </ul>	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE .CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/30/2020	Jerome Compton 96 San Milano Drive Goleta, CA 93117	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	25.00	25.00	
09/30/2020	Catherine Green 336 Chestnut St. #1 Santa Cruz, CA 95060	X IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Administrative Assistant City of Santa Cruz	100.00	100.00	
09/30/2020	Anne Linn 7017 Marymount Way Goleta, CA 93117	⊠ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Musician DBA: Anne Linn	200.00	200.00	
09/30/2020	Beth Schneider 6187 Santa Marguerita Way Goleta, CA 93117	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Professor UC Santa Barbara	100.00	200.00	
09/29/2020	Kenneth Tatro 7465 Hollister Avenue #321 Goleta, CA 93117	IND □ COM □ OTH □ PTY □ SCC	Not Employed Not Employed	50.00  **INTERMEDIARY** Actl 366 Sumr Somerville,		

SUBTOTAL \$

475.00

14								
Schedule Monetary	A Contributions Received	Am	ounts may be rounded to whole dollars.	Statement covers	CALII	CALIFORNIA 460		
SEE INSTRUCT	IONS ON REVERSE			through10/17/2	2020 Page			
Kyle Richard	ds For Goleta City Council 2020				1.5. 14014	1426647		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF 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)		
09/30/2020	Angie Swanson-Kyriaco 47 Dearborn Place #19 Goleta, CA 93117	IND COM OTH PTY SCC	Dir. of Executive & Board Affairs  Planned Parenthood California  Central Coast	25.00 25.00  **INTERMEDIARY** ActBlue  366 Summer Street Somerville, MA 02144		**INTERMEDIARY** ActBlue 366 Summer Street		
10/05/2020	Central Coast Labor Council Political Action Committee 816 Camarillo Springs Road Camarillo, CA 93012 ID: 890222	☐ IND  ☑ COM ☐ OTH ☐ PTY ☐ SCC		400.00 400.00				
10/05/2020	Dolores Pollock 5553 Camino Cerralvo Santa Barbara, CA 93111	⊠ IND □ COM □ OTH □ PTY □ SCC	Retired Retired	50.00 50.00				
10/05/2020	Bob Wignot 6155 Verdura Avenue Goleta, CA 93117	IND  COM  OTH  PTY  SCC	Not Employed  Not Employed	150.00 250.00				
10/05/2020	Kendra Wise 5663 Oxford Place Goleta, CA 93117	IND     COM     OTH     PTY     SCC	Supervising Environmental Health Specialist Santa Barbara County	50.00	50.00	_		

Schedule A Monetary Contributions Received		Am	ounts may be rounded to whole dollars.	Statement covers	CAL	CALIFORNIA 460		
NAME OF FILER				through10/17/	Pa	age11 of25		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D. CALENDAR YEAL (JAN. 1 - DEC. 31	PER ELECTION TO DATE		
10/07/2020	Cynthia Brock 7629 Pismo Beach Cir Goleta, CA 93117	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	200.00	500.00			
10/07/2020	Laborers Local 220 Political Action Committee 555 Capitol Mall #400 Sacramento, CA 95814 ID: 1237416	☐ IND  ☑ COM ☐ OTH ☐ PTY ☐ SCC		1,000.00	1,000.00			
10/07/2020	Laurinda Marshall 7456 San Bergamo Drive Goleta, CA 93117	X IND  COM  OTH  PTY  SCC	Retired Retired	100.00	100.00			
10/07/2020	Stephen Murray 442 Danbury Court Goleta, CA 93117	⊠ IND □ COM □ OTH □ PTY □ SCC	Historian  DBA: Stephen Murray	1,000.00	1,000.00			
10/07/2020	Spumoni Holding Co 728 East Yanonali Street Santa Barbara, CA 93103	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	*	1,000.00	1,000.00			

3,300.00

Schedule A Monetary Contributions Received		Amo	ounts may be rounded to whole dollars.				CALIFORNIA 460		
	ONS ON REVERSE			through10/17	7/2020		12 of25		
NAME OF FILER  Kyle Richard	ls For Goleta City Council 2020					I.D. NUMBE	1426647		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIV CALENDA (JAN. 1 -	AR YEAR	PER ELECTION TO DATE (IF REQUIRED)		
10/07/2020	Kevin Barthel 489 Daytona Dr. Goleta, CA 93117	X IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Field Engineer Huisman North America	366 Sun	150 otBlue nmer Street e, MA 02144	.00			
10/12/2020	Robert Bernstein 448 Mills Way #B Goleta, CA 93117	X IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Visiting Researcher Ucsb	100.00	100	.00			
10/08/2020	Ed France PO Box 2281 Santa Barbara, CA 93120	IND COM OTH PTY SCC	Executive Director Leading From Within	366 Sur	25. ctBlue nmer Street e, MA 02144	00			
10/13/2020	Pam Flynt Tambo 71 Manchester Place Goleta, CA 93117	IX IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	50.00	50.	00			
10/09/2020	Deborah Karoff 1113 Plaza Del Monte Santa Barbara, CA 93101	X IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Not Employed  Not Employed	366 Sur	50. ctBlue nmer Street e, MA 02144	00			

375.00

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

### Schedule A Monetary Contributions Received

Amounts may be rounded to whole dollars.

through

10/17/2020 Page 13 of 25

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Kyle Richards For Goleta City Council 2020

I.D. NUMBER 1426647

Kyle Kichard	yle Richards For Goleta City Council 2020						1420047	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIV CALENDA (JAN. 1 -		PER ELECTION TO DATE (IF REQUIRED)	
1	Linda Krop 5290 Overpass Road #6	<b>⊠</b> IND	Attorney	50.00	50.00 150.00			
10/09/2020	5250 Overpass Road #6	СОМ	Environmental Defense Center	**INTERMEDIARY**				
10/09/2020	Santa Barbara, CA 93111	UOTH		ActBlue				
		☐ PTY☐ SCC			366 Summer Street Somerville, MA 02144			

#### Schedule A Summary

1. Amount received this period - itemized monetary contributions.  (Include all Schedule A subtotals.) _ '	6,899.00
2. Amount received this period - unitemized monetary contributions of less than \$100 \$	20.00
3. Total monetary contributions received this period.  (add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)	6,919.00
SUBTOTAL \$	50.00

\* 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

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

Schedule	B -	Part	1
Loans Re	ceiv	ved	

Amounts may be rounded

COLLEDIA	F R DART

_oans Received			to whole dollars.		Statement covers period		ers period			A 4 G G
					from		20/2020	FOI	RM	<sup>^</sup> 460
SEE INSTRUCTIONS ON REVERSE					through	10/	17/2020	Page _	14	of25
NAME OF FILER  Kyle Richards For Goleta City Council	2020		÷		-			I.D. NUMBE	R <b>1426</b>	647
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PA OR FORGIVEN THIS PERIOD	BALA CLOSE	STANDING NCE AT OF THIS RIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIO	NT OF	(g) CUMULATIVE CONTRIBUTIONS TO DATE
				PAID  \$ FORGIVEN	- \$		% RATE	\$		CALENDAR YEAR  S PER ELECTION**
* IND COM OTH PTY SCC		\$	\$	\$	DAT	E DUE	\$	DATE INC	CURRED	

Schedule B Summary					
Loans received this period (Total Column (b) plus unitemized loans of less than \$100.)			\$	.00	* Contributor Codes
Loans paid or forgiven this period			_ \$	.00	IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other (e.g., business entity) PTY - Political Party
3. Net change this period. (Subtract Line 2 from Line 1.)		<sub>.</sub> N	ET\$	.00 be a negative number)	SCC - Small Contributor Committee
Enter the net here and on the Summary Page, Column A, Line 2			(iviay	be a negative number)	
	SUBTOTALS \$	\$	\$	\$	

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

(Enter (e) on Schedule E, Line 3)

Schedule E, Line 3) FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772)

www.fppc.ca.gov

Schedule B - Part 2		Amounts may be rounded to whole dollars.					SCHEDULE B - PART 2			
Loans Received		to whole dollars.		Stateme			CALIFORN	A460		
				from	09/	20/2020	FORM	700		
N TELEVISION				through _	10/	17/2020	Page15	of25		
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Kyle Richards For Goleta City Council 2020	ß			<u> </u>	ē.		I.D. NUMBER 14260	647		
FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		LOAN		AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE		
	□ IND		L	ENDER			\$PER ELECTION			
	□ COM □ OTH □ DATE □ PTY □ SCC				(IF REQUIRED)					
				æ						

Enter on Summary Page. Line 17 only.

			Amounts may be rounded to whole dollars.	ĺ	Stater	nent covers period	CALIFORN	SCHEDULE C
					from	09/20/2020	FORM	400
CEE METRICE	IONS ON DEVEDOS				through .	10/17/2020	_ Page16	_ of25
NAME OF FILER	ONS ON REVERSE						I.D. NUMBER	
Kyle Richard	ls For Goleta City Council 2020						1426	6647
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIP GOODS OR		AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
		IND COM OTH PTY SCC						
		☐ IND☐ COM☐ OTH☐ PTY☐ SCC						
		☐ IND☐ COM☐ OTH☐ PTY☐ SCC						
Amount rec (Include all     Amount rec     Total nonm	C Summary  ceived this period - itemized nonmonetary contribution  Schedule C subtotals.) — — — — — — — — — — — — — — — — — — —	utions of less t			·	.00	* Contributor Codes  IND - Individual  COM - Recipient Co  (other than F  OTH - Other (e.g., b  PTY - Political Party  SCC - Small Contrib	mmittee PTY or SCC) usiness entity)
(add Lines	1 and 2. Enter here and on the Summary Page, Co	umn A, Lines 4	4 and 10.)	TOTAL \$	§			

Supportin	D of Expenditures g/Opposing Other es, Measures, and Committees	Amounts may to whole		from	09/20/20/ 09/20/20/	20	CALIFO FOR	M 400
				throug	h10/1//202		Page	17 of 25
NAME OF FILER  Kyle Richard	ds For Goleta City Council 2020	8			-		i.D. NUMBER 1426647	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)		AMOUNT THIS PERIOD	CALE	TIVE TO DATE NDAR YEAR 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure						
SCHEDUL	E D SUMMARY							
1. Itemized co	ontributions and independent expenditures made this peri	iod. (Include all Sche	dule D subtotals.)				\$	.00
2. Unitemized	d contributions and independent expenditures made this p	period of under \$100			<b>-</b>		\$	.00
3. Total contri	ibutions and independent expenditures made this period.	(Add Lines 1 and 2.	Do not enter on the Sເ	ummary	Page.) -		TOTAL \$	.00

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#### Schedule E Payments Made

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Kyle Richards For Goleta City Council 2020

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)

* Payments that are contributions or independent expenditures must also be summarized	on Schedule D.	SUBTOTAL \$	3,441.86
Union Graphics 9960 Glenoaks Boulevard #A Los Angeles, CA 91352	LIT		861.25
Union Graphics 9960 Glenoaks Boulevard #A Los Angeles, CA 91352	LIT		1,287.25
C&i Consulting 226 East Canon Perdido Street #D Santa Barbara, CA 93101	CNS		850.00
Spencer Brandt 6636 Sabado Tarde Road #A Goleta, CA 93117		Unitemized agent payment	443.36
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE (	DR DESCRIPTION OF PAYMENT	AMOUNT PAID

#### Schedule E Payments Made

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Kyle Richards For Goleta City Council 2020

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)

* Payments that are contributions or independent expenditures must also be sum	marized on Schedule D.	SUBTOTAL \$	2,890.57
C&i Consulting 226 East Canon Perdido Street #D Santa Barbara, CA 93101	CNS		850.00
Mail Manager 5124 Ralston Street Ventura, CA 93003	LIT		1,908.46
ActBlue 366 Summer Street Somerville, MA 02144 ID: C00401224	OFC		32.11
Integrated Solutions: Political 4142 Adams Avenue Suite 103-550 San Diego, CA 92116	OFC		100.00
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE C	DESCRIPTION OF PAYMENT	AMOUNT PAID

FPPC Form 460 (Jan/2016)

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#### Schedule E Payments Made

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Kyle Richards For Goleta City Council 2020

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

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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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE (	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
C&i Consulting 226 East Canon Perdido Street #D Santa Barbara, CA 93101		Agent payment See Sched G	1,321.10
Vantiv 8500 Governors Hill Drive Cincinnati, OH 45249	OFC		59.17
First Data 5565 Glenridge Connector NE Atlanta, GA 30342	OFC		3.68
* Payments that are contributions or independent expenditures must also be summarized	on Schedule D.	SUBTOTAL \$	1,383.95

FPPC Form 460 (Jan/2016)

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Schedule	E
<b>Payments</b>	Made

Amounts may be rounded to whole dollars.

SEE INST	RUCTION	NS ON	REV	ERSE

NAME OF FILER

Kyle Richards For Goleta City Council 2020

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

I.D. NUMBER

1426647

VOT voter registration

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 PAIL

Schedule	E	Sum	mary
----------	---	-----	------

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTAL \$	.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$	7,738.78
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$	.00
2. Unitemized payments made this period of under \$100	\$	22.40
1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	7,716.38

SCHEDULE E

Schedule	e F		
Accrued	Expenses	(Unpaid	Bills)

Amounts may be rounded to whole dollars.

Statement covers period **CALIFORNIA** 09/20/2020 from 10/17/2020 25 through

SCHEDULE F

LE INSTITUTE HONS ON REVERS	EE INSTRUCTIONS ON RE	VERSE
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NAME OF FILER

Kyle Richards For Goleta City Council 2020

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)\*

\* Payments that are contributions or independent expenditures must also be

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

I.D. NUMBER

1426647

VOT voter registration

WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Union Graphics 9960 Glenoaks Boulevard #A Los Angeles, CA 91352	LIT	1,287.25	.00	1,287.25	.00
Union Graphics 9960 Glenoaks Boulevard #A Los Angeles, CA 91352	LIT	861.25	.00	861.25	.00

#### SCHEDULE F SUMMARY

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)	.00
2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)	2,148.50
3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) NET \$	

\$ \$ SUBTOTALS

summarized on Schedule D.

# Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

Ve					SC	CHEDULE	G
	Stater	nent covers period	CALIF	ORN	IA A	100	1
	from	09/20/2020	FO		4	POC	Į
	through .	10/17/2020	Page _	23	_ of _	25	
			I.D. NUMBE	R 4400	0.47		
			1	1420	04/		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Kyle Richards For Goleta City Council 2020

NAME OF AGENT OR INDEPENDENT CONTRACTOR

C&i Consulting

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)

Err campaign iterature and mailings	110 print add	TTED INIOINIAGON (COMINIOS)	socia (interrior, a triain)
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Mail Manager 5124 Raiston Street	LIT		1,101.10
Ventura, CA 93003			1,101.10

TOTAL \* \$

1,101.10

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule H Amounts may be rounded			ed				SCHEDULE H		
Loans Made to Others*	ns Made to Others* to whole dollars. Statement covers period			rs period	CALIFORNI	<sup>A</sup> 460			
					from _	09/2	20/2020	FORM	400
					through	10/	7/2020	Page 24	_ of25
SEE INSTRUCTIONS ON REVERSE								LO NUMBER	
NAME OF FILER								I.D. NUMBER	20.47
Kyle Richards For Goleta City Council	2020							1426	064/
FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMEN OR FORGIVENE THIS PERIOD	SS BA	ITSTANDING LANCE AT SE OF THIS PERIOD	· (e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				\$ FORGIVEN	\$		RATE	6 S	CALENDAR YEAR  S PER ELECTION**
		\$	\$	\$		ATE DUE	\$	DATE INCURRED	

SUBTOTALS \$	\$ \$	\$	

Schedule I Miscellaneous Incr		Amounts may be rounded to whole dollars.	Statement covers period from	CALIFORNIA 460 FORM Page 25 of 25	
NAME OF FILER  Kyle Richards For Golet	1197237			I.D. NUMBER 1426647	
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DES	DESCRIPTION OF RECEIPT		

Schedule I Summary  1. Itemized increases to cash this period.	.00
2. Unitemized increases to cash of under \$100 this period \$	.00
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)	.00
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)	.00
	SUBTOTAL \$