

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

Date Stamp CITY OF GOLETA CITY CLERK'S OFFICE 2015 JUN 20 PM 3:24	CALIFORNIA FORM 460
	Page <u>1</u> of <u>10</u>
	For Official Use Only

Statement covers period
from 07/01/2014
through 12/31/2014

Date of election if applicable:
(Month, Day, Year) 2015 JUN 20

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- | | |
|----------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee | <input type="checkbox"/> Primarily Formed Ballot Measure Committee |
| <input type="checkbox"/> State Candidate Election Committee | <input type="checkbox"/> Controlled |
| <input type="checkbox"/> Recall
<i>(Also Complete Part 5)</i> | <input type="checkbox"/> Sponsored
<i>(Also Complete Part 6)</i> |
| <input type="checkbox"/> General Purpose Committee | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee
<i>(Also Complete Part 7)</i> |
| <input type="checkbox"/> Sponsored | |
| <input type="checkbox"/> Small Contributor Committee | |
| <input type="checkbox"/> Political Party/Central Committee | |

2. Type of Statement:

- | | |
|---------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|
| <input type="checkbox"/> Preelection Statement | <input type="checkbox"/> Quarterly Statement |
| <input checked="" type="checkbox"/> Semi-annual Statement | <input type="checkbox"/> Special Odd-Year Report |
| <input type="checkbox"/> Termination Statement
<i>(Also file a Form 410 Termination)</i> | <input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
| <input type="checkbox"/> Amendment (Explain below) | |

3. Committee Information

I.D. NUMBER
1288474

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

RE-ELECT MICHAEL T. BENNETT FOR CITY COUNCIL 2014

STREET ADDRESS (NO P.O. BOX)

5662 Calle Real #407

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Goleta	CA	93117	(805) 964-8156

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

David L. Peri

MAILING ADDRESS

360 S. Hope Avenue, Suite C300

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Santa Barbara	CA	93105	(805) 563-1049

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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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 1-15-15
Date

Executed on _____
Date

Executed on _____
Date

Executed on _____
Date

By [Signature]
Signature of Treasurer or Assistant Treasurer

By [Signature]
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Type or print in ink.

Recipient Committee Campaign Statement Cover Page — Part 2

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE: Michael T. Bennett. OFFICE SOUGHT OR HELD: Held: City Council Member, City - Goleta. RESIDENTIAL/BUSINESS ADDRESS: 5662 Calle Real #407, Goleta, CA 93117.

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 with 2 columns: COMMITTEE NAME, I.D. NUMBER. Includes fields for NAME OF TREASURER, CONTROLLED COMMITTEE?, COMMITTEE ADDRESS, STREET ADDRESS, CITY, STATE, ZIP CODE, AREA CODE/PHONE.

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE. BALLOT NO. OR LETTER, JURISDICTION, SUPPORT/OPPOSE checkboxes. 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.

Table with 3 columns: NAME OF OFFICEHOLDER OR CANDIDATE, OFFICE SOUGHT OR HELD, SUPPORT/OPPOSE checkboxes. Multiple rows for listing candidates.

Attach continuation sheets if necessary

**Campaign Disclosure Statement
Summary Page**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>07/01/2014</u> through <u>12/31/2014</u>	CALIFORNIA FORM 460
	Page <u>3</u> of <u>10</u>
I.D. NUMBER 1288474	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

RE-ELECT MICHAEL T. BENNETT FOR CITY COUNCIL 2014

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
Contributions Received		
1. Monetary Contributions <i>Schedule A, Line 3</i>	\$ <u>0.00</u>	\$ <u>5,000.00</u>
2. Loans Received <i>Schedule B, Line 3</i>	<u>0.00</u>	<u>4,160.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS <i>Add Lines 1 + 2</i>	\$ <u>0.00</u>	\$ <u>9,160.00</u>
4. Nonmonetary Contributions <i>Schedule C, Line 3</i>	<u>0.00</u>	<u>0.00</u>
5. TOTAL CONTRIBUTIONS RECEIVED <i>Add Lines 3 + 4</i>	\$ <u>0.00</u>	\$ <u>9,160.00</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	\$ _____	\$ _____

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
Expenditures Made		
6. Payments Made <i>Schedule E, Line 4</i>	\$ <u>5,425.00</u>	\$ <u>6,413.75</u>
7. Loans Made <i>Schedule H, Line 3</i>	<u>0.00</u>	<u>0.00</u>
8. SUBTOTAL CASH PAYMENTS <i>Add Lines 6 + 7</i>	\$ <u>5,425.00</u>	\$ <u>6,413.75</u>
9. Accrued Expenses (Unpaid Bills) <i>Schedule F, Line 3</i>	<u>1,000.00</u>	<u>1,000.00</u>
10. Nonmonetary Adjustment <i>Schedule C, Line 3</i>	<u>0.00</u>	<u>0.00</u>
11. TOTAL EXPENDITURES MADE <i>Add Lines 8 + 9 + 10</i>	\$ <u>6,425.00</u>	\$ <u>7,413.75</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>5,345.27</u>
13. Cash Receipts <i>Column A, Line 3 above</i>	<u>0.00</u>
14. Miscellaneous Increases to Cash <i>Schedule I, Line 4</i>	<u>540.00</u>
15. Cash Payments <i>Column A, Line 8 above</i>	<u>5,425.00</u>
16. ENDING CASH BALANCE <i>Add Lines 12 + 13 + 14, then subtract Line 15</i>	\$ <u>460.27</u>

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

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).

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

18. Cash Equivalents <i>See instructions on reverse</i>	\$ _____
19. Outstanding Debts <i>Add Line 2 + Line 9 in Column B above</i>	\$ <u>5,160.00</u>

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

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

**Schedule B – Part 1
Loans Received**

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period from <u>07/01/2014</u> through <u>12/31/2014</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

RE-ELECT MICHAEL T. BENNETT FOR CITY COUNCIL 2014

I.D. NUMBER

1288474

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN 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 PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Michael T. Bennett 5662 Calle Real #407 Goleta, CA 93117 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City Council Member City of Goleta	\$ 1,000.00	\$ 0.00	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ 1,000.00 12/31/06 DATE DUE	0.00 % RATE \$ 0.00	\$ 1,000 7/20/06 DATE INCURRED	CALENDAR YEAR \$ 4,160.00 PER ELECTION** \$ _____
Michael T. Bennett 5662 Calle Real #407 Goleta, CA 93117 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City Council Member City of Goleta	\$ 1,000.00	\$ 0.00	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ 1,000.00 12/31/06 DATE DUE	0.00 % RATE \$ 0.00	\$ 1,000 10/03/06 DATE INCURRED	CALENDAR YEAR \$ 4,160.00 PER ELECTION** \$ _____
Michael T. Bennett 5662 Calle Real #407 Goleta, CA 93117 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City Council Member City of Goleta	\$ 160.00	\$ 0.00	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ 160.00 12/31/07 DATE DUE	0.00 % RATE \$ 0.00	\$ 160 12/29/06 DATE INCURRED	CALENDAR YEAR \$ 4,160.00 PER ELECTION** \$ _____
SUBTOTALS \$		0.00 \$	0.00 \$	0.00 \$	2,160.00 \$	0.00		

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

Schedule B Summary

- Loans received this period \$ 0.00
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period \$ 0.00
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (**Subtract** Line 2 from Line 1.) **NET \$** 0.00
Enter the net here and on the Summary Page, Column A, Line 2.
(May be a negative number)

†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

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

** If required.

**Schedule B – Part 1
Loans Received**

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period from <u>07/01/2014</u> through <u>12/31/2014</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER RE-ELECT MICHAEL T. BENNETT FOR CITY COUNCIL 2014	I.D. NUMBER 1288474
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FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN 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 PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Michael T. Bennett 5662 Calle Real #407 Goleta, CA 93117 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City Council Member City of Goleta	\$ 500.00	\$ 0.00	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ 500.00 12/31/07 DATE DUE	0.00 % RATE \$ 0.00	\$ 500.00 1/26/07 DATE INCURRED	CALENDAR YEAR \$ 4,160.00 PER ELECTION** \$ _____
Michael T. Bennett 5662 Calle Real #407 Goleta, CA 93117 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City Council Member City of Goleta	\$ 400.00	\$ 0.00	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ 400.00 12/31/07 DATE DUE	0.00 % RATE \$ 0.00	\$ 400.00 2/15/07 DATE INCURRED	CALENDAR YEAR \$ 4,160.00 PER ELECTION** \$ _____
Michael T. Bennett 5662 Calle Real #407 Goleta, CA 93117 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City Council Member City of Goleta	\$ 200.00	\$ 0.00	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ 200.00 12/31/08 DATE DUE	0.00 % RATE \$ 0.00	\$ 200.00 9/26/07 DATE INCURRED	CALENDAR YEAR \$ 4,160.00 PER ELECTION** \$ _____
SUBTOTALS \$		0.00	\$	0.00	\$	0.00	\$	

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

Schedule B Summary

1. Loans received this period \$	0.00
(Total Column (b) plus unitemized loans of less than \$100.)	
2. Loans paid or forgiven this period \$	0.00
(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 \$	0.00
Enter the net here and on the Summary Page, Column A, Line 2.	

†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

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

**Schedule B – Part 1
Loans Received**

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period from <u>07/01/2014</u> through <u>12/31/2014</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

RE-ELECT MICHAEL T. BENNETT FOR CITY COUNCIL 2014

I.D. NUMBER

1288474

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN 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 PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Michael T. Bennett 5662 Calle Real #407 Goleta, CA 93117 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City Council Member City of Goleta	\$ 300.00	\$ 0.00	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ 300.00 12/31/08 DATE DUE	0.00 % RATE \$ 0.00	\$ 300.00 9/26/07 DATE INCURRED	CALENDAR YEAR \$ 4,160.00 PER ELECTION** \$ _____
Michael T. Bennett 5662 Calle Real #407 Goleta, CA 93117 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	City Council Member City of Goleta	\$ 600.00	\$ 0.00	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ 600.00 12/31/09 DATE DUE	0.00 % RATE \$ 0.00	\$ 600.00 5/06/08 DATE INCURRED	CALENDAR YEAR \$ 4,160.00 PER ELECTION** \$ _____
 † <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE	_____% RATE \$ _____	\$ _____ DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
SUBTOTALS \$		0.00\$	0.00\$	0.00\$	900.00 \$	0.00		

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

Schedule B Summary

- Loans received this period \$ 0.00
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period \$ 0.00
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (**Subtract** Line 2 from Line 1.) **NET \$** 0.00
Enter the net here and on the Summary Page, Column A, Line 2.
(May be a negative number)

†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

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

**Schedule E
Payments Made**

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	07/01/2014	
through	12/31/2014	Page <u>7</u> of <u>10</u>
NAME OF FILER		I.D. NUMBER
RE-ELECT MICHAEL T. BENNETT FOR CITY COUNCIL 2014		1288474

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

RE-ELECT MICHAEL T. BENNETT FOR CITY COUNCIL 2014

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
City of Goleta 130 Cremora Drive, Ste B Goleta, CA 93117	FIL		540.00
Secretary of State/Political Reform Division 1500 11th Street, Room 495 Sacramento, CA 95814	FIL	Fee due with filing of form 410	50.00
Peri & Alvarado, CPA's Inc. 360 S. Hope Ave, Suite C300 Santa Barbara, CA 93105	PRO		1,200.00

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

SUBTOTAL \$ 1,790.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	5,424.00
2. Unitemized payments made this period of under \$100	\$	1.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$	5,425.00

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

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	07-01-2014	
through	12-31-2014	Page <u>8</u> of <u>10</u>
I.D. NUMBER		1288474

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

RE-ELECT MICHAEL T. BENNETT FOR CITY COUNCIL 2014

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
The UPS Store 5662 Calle Real Goleta, CA 93117	POS		264.00
Secretary of State/Political Reform Division 1500 11th Street, Room 405 Sacramento, CA 95814	FIL	2014 Annual Fee and late filing penalty	200.00
Direct File 504 Van Ness Avenue Fresno, CA 93721	POL		170.00
Terrain Consulting Three West Carrillo Street, Suite 211 Santa Barbara, CA 93101	POL		3,000.00

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

SUBTOTAL \$ 3,634.00

**Schedule F
Accrued Expenses (Unpaid Bills)**

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period from <u>07-01-2014</u>	CALIFORNIA FORM 460
through <u>12-31-2014</u>	
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

RE-ELECT MICHAEL T. BENNETT FOR CITY COUNCIL 2014

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 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
Terrain Consulting Three West Carrillo Street, Suite 211 Santa Barbara, CA 93101	POL	0.00	4,000.00	3,000.00	1,000.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS \$	0.00 \$	4,000.00 \$	3,000.00 \$	1,000.00
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Schedule F Summary

- 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.) **INCURRED TOTALS \$** 4,000.00
- 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.) **PAID TOTALS \$** 3,000.00
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** 1,000.00
May be a negative number

**Schedule I
Miscellaneous Increases to Cash**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE I

Statement covers period from <u>07/01/2014</u> through <u>12/31/2014</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

RE-ELECT MICHAEL T. BENNETT FOR CITY COUNCIL 2014

I.D. NUMBER

1288474

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
12/09/2014	City of Goleta 130 Cremora Drive, Ste B Goleta, CA 93117	Refund of filing fees	540.00

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$

540.00

Schedule I Summary

1. Itemized increases to cash this period.	\$ <u>540.00</u>
2. Unitemized increases to cash of under \$100 this period.	\$ <u>0.00</u>
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)	\$ <u>0.00</u>
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)	TOTAL \$ <u>540.00</u>