

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

RECEIVED

Date Stamp  
JAN 31 2013

City of Turlock  
Administrative Services

**CALIFORNIA FORM 460**

Page 1 of 5

For Official Use Only

Statement covers period  
from 10-21-12  
through 12-31-12

Date of election if applicable:  
(Month, Day, Year)  
11-6-12

SEE INSTRUCTIONS ON REVERSE

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

- |   |   |
|---|---|
| <input type="checkbox"/> Officeholder, Candidate Controlled Committee | <input type="checkbox"/> Primarily Formed Ballot Measure Committee  |
| <input type="radio"/> State Candidate Election Committee              | <input type="radio"/> Controlled  |
| <input type="radio"/> Recall<br><i>(Also Complete Part 5)</i>         | <input type="radio"/> Sponsored<br><i>(Also Complete Part 6)</i>  |
| <input checked="" type="checkbox"/> General Purpose Committee         | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee<br><i>(Also Complete Part 7)</i> |
| <input checked="" type="radio"/> Sponsored                            |   |
| <input type="radio"/> Small Contributor Committee                     |   |
| <input type="radio"/> 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<br><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  
1271215

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
Turlock Firefighters PAC

STREET ADDRESS (NO P.O. BOX)  
4227 Ivory Ln.

|                |           |              |                     |
|----------------|-----------|--------------|---------------------|
| CITY           | STATE     | ZIP CODE     | AREA CODE/PHONE     |
| <u>Turlock</u> | <u>CA</u> | <u>95382</u> | <u>209-275-0436</u> |

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX  
PO Box 3775

|                |           |              |                 |
|----------------|-----------|--------------|-----------------|
| CITY           | STATE     | ZIP CODE     | AREA CODE/PHONE |
| <u>Turlock</u> | <u>CA</u> | <u>95381</u> |                 |

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER  
Andrew Quimby

MAILING ADDRESS  
4227 Ivory Ln.

|                |           |              |                     |
|----------------|-----------|--------------|---------------------|
| CITY           | STATE     | ZIP CODE     | AREA CODE/PHONE     |
| <u>Turlock</u> | <u>CA</u> | <u>95382</u> | <u>209-275-0436</u> |

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

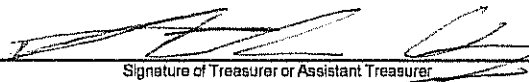
|      |       |          |                 |
|------|-------|----------|-----------------|
| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|------|-------|----------|-----------------|

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 12-31-12  
Date

By   
Signature of Treasurer or Assistant Treasurer

Executed on \_\_\_\_\_  
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

**Campaign Disclosure Statement  
Summary Page**

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

SUMMARY PAGE

|  |                                |
|--|--------------------------------|
| Statement covers period<br>from 10-21-12<br>through 12-31-12 | <b>CALIFORNIA<br/>FORM 460</b> |
| Page 2 of 5  | I.D. NUMBER<br>1271215         |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Turlock Firefighters PAC

**Contributions Received**

|   | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|---|--|--|
| 1. Monetary Contributions ..... Schedule A, Line 3    | \$ 0   | \$ 7,740                                   |
| 2. Loans Received ..... Schedule B, Line 3            | \$ 0   | \$ 0                                       |
| 3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1 + 2  | \$ 0   | \$ 7,740                                   |
| 4. Nonmonetary Contributions ..... Schedule C, Line 3 | \$ 0   | \$ 0                                       |
| 5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 + 4 | \$ 0   | \$ 7,740                                   |

**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<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|---|--|--|
| 6. Payments Made ..... Schedule E, Line 4                   | \$ 796.44  | \$ 12,804.86                               |
| 7. Loans Made ..... Schedule H, Line 3                      | \$ 0   | \$ 0                                       |
| 8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7             | \$ 796.44  | \$ 12,804.86                               |
| 9. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3 | \$ 0   | \$ 0                                       |
| 10. Nonmonetary Adjustment ..... Schedule C, Line 3         | \$ 0   | \$ 0                                       |
| 11. TOTAL EXPENDITURES MADE ..... Add Lines 8 + 9 + 10      | \$ 796.44  | \$ 12,804.86                               |

**Expenditure Limit Summary for State  
Candidates**

**22. Cumulative Expenditures Made\***  
(If Subject to Voluntary Expenditure Limit)

| Date of Election<br>(mm/dd/yy) | Total to Date |
|--------------------------------|---------------|
| ____/____/____                 | \$ _____      |
| ____/____/____                 | \$ _____      |

**Current Cash Statement**

|   |             |
|---|-------------|
| 12. Beginning Cash Balance ..... Previous Summary Page, Line 16             | \$ 7,427.42 |
| 13. Cash Receipts ..... Column A, Line 3 above                              | \$ 0        |
| 14. Miscellaneous Increases to Cash ..... Schedule I, Line 4                | \$ 0        |
| 15. Cash Payments ..... Column A, Line 8 above                              | \$ 796.44   |
| 16. ENDING CASH BALANCE ..... Add Lines 12 + 13 + 14, then subtract Line 15 | \$ 6,630.98 |

*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).

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

|   |      |
|---|------|
| 17. LOAN GUARANTEES RECEIVED ..... Schedule B, Part 2 | \$ 0 |
|---|------|

**Cash Equivalents and Outstanding Debts**

|   |      |
|---|------|
| 18. Cash Equivalents ..... See instructions on reverse            | \$ 0 |
| 19. Outstanding Debts ..... Add Line 2 + Line 9 in Column B above | \$ 0 |

**Schedule D  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

Type or print in ink.  
Amounts may be rounded  
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Statement covers period  
from 10-21-12  
through 12-31-12

SCHEDULE D  
**CALIFORNIA FORM 460**  
Page 3 of 5  
I.D. NUMBER  
1271215

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Turlock Firefighters PAC

| 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 | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|--|---------------------------|--------------------|---|------------------------------------|
| 11-6-12            | Amy Bublak for Turlock City Council<br>1072 Moonbeam Wy.<br>Turlock, CA 95382<br>FPPC#: 1350431     | <input type="checkbox"/> Monetary Contribution<br><input type="checkbox"/> Nonmonetary Contribution<br><input checked="" type="checkbox"/> Independent Expenditure | Mailers                   | 212.06             | 4,981.70  |                                    |
|                    | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                         |  |                           |                    |   |                                    |
| 11-6-12            | Steven Nascimento for Turlock City Council<br>PO Box 3866<br>Turlock, CA 95381                      | <input type="checkbox"/> Monetary Contribution<br><input type="checkbox"/> Nonmonetary Contribution<br><input type="checkbox"/> Independent Expenditure            | Mailers                   | 212.05             | 4,981.70  |                                    |
|                    | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                         |  |                           |                    |   |                                    |
|                    |   | <input type="checkbox"/> Monetary Contribution<br><input type="checkbox"/> Nonmonetary Contribution<br><input type="checkbox"/> Independent Expenditure            |                           |                    |   |                                    |
|                    | <input type="checkbox"/> Support <input type="checkbox"/> Oppose                                    |  |                           |                    |   |                                    |
| <b>SUBTOTAL \$</b> |   |  |                           | <b>424.11</b>      |   |                                    |

**Schedule D Summary**

|  |                        |
|--|------------------------|
| 1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)                 | \$ 424.11              |
| 2. Unitemized contributions and independent expenditures made this period of under \$100                                     | \$ 0                   |
| 3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) | <b>TOTAL \$ 424.11</b> |

**Schedule E  
Payments Made**

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

|  |                                |
|--|--------------------------------|
| Statement covers period<br>from 10-21-12<br>through 12-31-12 | <b>CALIFORNIA<br/>FORM 460</b> |
| Page 4 of 5  |                                |
| I.D. NUMBER<br>1271215                                       |                                |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Turlock Firefighters PAC

**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<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT     | AMOUNT PAID |
|---|---------|----------------------------|-------------|
| Matt Horn<br>PO Box 223<br>Cressey, CA 95312                        | MTG     | Meeting Cost Reimbursement | 21.47       |
| Andrew Quimby<br>4227 Ivory Ln.<br>Turlock, CA 95382                | POS     | Postage Reimbursement      | 120.54      |
| Balvino Irizarry<br>400 12th St.<br>Modesto, CA 95354               | POS     | Mailer Postage             | 424.11      |

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

**SUBTOTAL \$ 566.12**

**Schedule E Summary**

|  |                        |
|--|------------------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.) .....   | \$ 796.44              |
| 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.) ..... | <b>TOTAL \$ 796.44</b> |

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

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

|   |          |                                |
|---|----------|--------------------------------|
| Statement covers period                   |          | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                      | 10-21-12 |                                |
| through                                   | 12-31-12 | Page 5 of 5                    |
| NAME OF FILER<br>Turlock Firefighters PAC |          | I.D. NUMBER<br>1271215         |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Turlock Firefighters PAC

**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<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)              | CODE | OR | DESCRIPTION OF PAYMENT   | AMOUNT PAID |
|--|------|----|--------------------------|-------------|
| Ken Groves<br>(Address Unknown)  | PRO  |    | Candidate Sign Dismantle | 100.00      |
| Firefighters Print and Design<br>1780 Creekside Oaks Dr.<br>Sacramento, CA 95833 | LIT  |    | Mailers                  | 130.32      |
|  |      |    |                          |             |
|  |      |    |                          |             |
|  |      |    |                          |             |

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

**SUBTOTAL \$ 230.32**