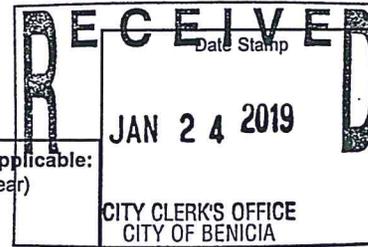


**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

COVER PAGE



CALIFORNIA FORM **460**

Statement covers period
from 10/21/2018
through 12/31/2018

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

Page 1 of 13

For Official Use Only

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
- Supplemental Preelection Statement - Attach Form 495

3. Committee Information

I.D. NUMBER
1387527

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
City of Benicia Police Officers Association PAC

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Benicia</u>	<u>CA</u>	<u>94510</u>	<u>---</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

Edward Criado

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Benicia</u>	<u>CA</u>	<u>94510</u>	

NAME OF ASSISTANT TREASURER, IF ANY

Stacy Owens

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Oakland</u>	<u>CA</u>	<u>94618</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 01/31/2019
Date

By [Signature]
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

FPPC Form 460 (Jan/2016)

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

www.fppc.ca.gov

**Recipient Committee
Campaign Statement
Cover Page — Part 2**

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

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>10/21/2018</u> through <u>12/31/2018</u>	CALIFORNIA FORM 460
Page <u>3</u> of <u>13</u>	I.D. NUMBER <u>1387527</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

City of Benicia Police Officers Association PAC

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions Schedule A, Line 3	\$ <u>918.00</u>	\$ <u>3,740.00</u>
2. Loans Received Schedule B, Line 3	<u>0.00</u>	<u>0.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ <u>918.00</u>	\$ <u>3,740.00</u>
4. Nonmonetary Contributions Schedule C, Line 3	<u>1,170.50</u>	<u>2,787.50</u>
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ <u>2,088.50</u>	\$ <u>6,527.50</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 Schedule E, Line 4	\$ <u>16.00</u>	\$ <u>7,037.29</u>
7. Loans Made Schedule H, Line 3	<u>0.00</u>	<u>0.00</u>
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ <u>16.00</u>	\$ <u>7,037.29</u>
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	<u>499.00</u>	<u>1,007.50</u>
10. Nonmonetary Adjustment Schedule C, Line 3	<u>1,170.50</u>	<u>2,787.50</u>
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ <u>1,685.50</u>	\$ <u>10,832.29</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 Previous Summary Page, Line 16	\$ <u>2,092.83</u>
13. Cash Receipts Column A, Line 3 above	<u>918.00</u>
14. Miscellaneous Increases to Cash Schedule I, Line 4	<u>1,586.55</u>
15. Cash Payments Column A, Line 8 above	<u>16.00</u>
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>4,581.38</u>

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

17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ <u>0.00</u>
-------------------------------------------------------	----------------

Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse	\$ <u>0.00</u>
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ <u>1,007.50</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.

**Schedule A
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period from <u>10/21/2018</u>	CALIFORNIA FORM 460
through <u>12/31/2018</u>	
Page <u>4</u> of <u>13</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

City of Benicia Police Officers Association PAC

I.D. NUMBER

1387527

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)
11/01/2018	Joseph Alvarez 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
11/01/2018	Edward Criado 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
11/01/2018	Sergio Cruz 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
11/01/2018	Aaron Damm 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
11/01/2018	Gregri Degrange 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
SUBTOTAL \$				170.00		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.)	\$	918.00
2. Amount received this period – unitemized monetary contributions of less than \$100	\$	0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)	TOTAL \$	918.00

*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

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/21/2018	
through	12/31/2018	Page <u>5</u> of <u>13</u>

NAME OF FILER City of Benicia Police Officers Association PAC	I.D. NUMBER 1387527
------------------------------------------------------------------	------------------------

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)
11/01/2018	Christopher Francis 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
11/01/2018	Kenneth Hart 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
11/01/2018	Mark Hassler 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
11/01/2018	Rexall Hawkins 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
11/01/2018	Jake Heinemeyer 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
SUBTOTAL \$				170.00		

*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

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

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 10/21/2018		
through 12/31/2018		Page 6 of 13
NAME OF FILER		I.D. NUMBER
City of Benicia Police Officers Association PAC		1387527

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)
11/01/2018	Kirk Keffer 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
11/01/2018	Michelle King 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
11/01/2018	Alissa Lonquist 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
11/01/2018	Alejandro Maravilla 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
11/01/2018	Mark Menesini 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
SUBTOTAL \$				170.00		

*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

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/21/2018	
through	12/31/2018	Page <u>7</u> of <u>13</u>

NAME OF FILER City of Benicia Police Officers Association PAC	I.D. NUMBER 1387527
------------------------------------------------------------------	------------------------

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)
11/01/2018	Kenyatta Nathaniel 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
11/01/2018	Brendan Polick 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
11/01/2018	Stephanie Polizziani 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
11/01/2018	Jerry Ribeira 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
11/01/2018	Marjonne Roberson 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
SUBTOTAL \$				170.00		

*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

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/21/2018	
through	12/31/2018	Page <u>8</u> of <u>13</u>
NAME OF FILER		I.D. NUMBER
City of Benicia Police Officers Association PAC		1387527

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)
11/01/2018	Armando Sanchez 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
11/01/2018	Mark Simonson 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
11/01/2018	Martin Stovold 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510.	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
11/01/2018	Maricella Ticknor 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
11/01/2018	Eric Woodlief 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
SUBTOTAL \$				170.00		

*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

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/21/2018	
through	12/31/2018	Page <u>9</u> of <u>13</u>
NAME OF FILER		I.D. NUMBER
City of Benicia Police Officers Association PAC		1387527

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)
11/01/2018	Jessica Woods 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
11/01/2018	Kei Roger Yokoi 200 East L Street Benicia, CA 94510 Dues received through intermediary Benicia Police Officers Association 200 East L Street Benicia CA 94510	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of Benicia	34.00	138.50	
		<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 \$				68.00		

*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

**Schedule C
Nonmonetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from <u>10/21/2018</u>		CALIFORNIA FORM 460
through <u>12/31/2018</u>		
Page <u>10</u> of <u>13</u>		I.D. NUMBER 1387527

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

City of Benicia Police Officers Association PAC

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)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
12/01/2018	Benicia Police Officers Association 200 East L Street Benicia, CA 94510 Payment for administrative expenses by committee sponsor to S.E. Owens & Company 5940 College Ave Suite F Oakland CA 94618. Reported per 18215(c) (16).	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Bill Paid By Third Party	1,120.50	2,787.50	
12/21/2018	Benicia Police Officers Association 200 East L Street Benicia, CA 94510 Payment of Annual Filing Fee to Secretary of State 1500 11th Street, Room 495 Sacramento CA 95814. Reported per 18215(c) (16).	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Bill Paid By Third Party	50.00	2,787.50	
		<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					
<i>Attach additional information on appropriately labeled continuation sheets.</i>					SUBTOTAL \$	1,170.50	

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.)	\$	1,170.50
2. Amount received this period – unitemized nonmonetary contributions of less than \$100	\$	0.00
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)	TOTAL \$	1,170.50

*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 E
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		SCHEDULE E	
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

City of Benicia Police Officers Association 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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID

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

SUBTOTAL \$ 0.00

Schedule E Summary

- | | | |
|--------------------------------------------------------------------------------------------------------------------|-----------------|--------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.) | \$ | 0.00 |
| 2. Unitemized payments made this period of under \$100 | \$ | 16.00 |
| 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 \$ | 16.00 |

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/21/2018	
through	12/31/2018	Page <u>12</u> of <u>13</u>
NAME OF FILER		I.D. NUMBER
City of Benicia Police Officers Association PAC		1387527

SEE INSTRUCTIONS ON REVERSE

City of Benicia Police Officers Association 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 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
S.E. Owens & Company 5940 College Avenue, Suite F Oakland, CA 94618	PRO	508.50	0.00	0.00	508.50
S.E. Owens & Company 5940 College Avenue, Suite F Oakland, CA 94618	PRO	0.00	499.00	0.00	499.00
SUBTOTALS \$		508.50\$	499.00\$	0.00\$	1,007.50

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 \$** 499.00
- 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 \$** 0.00
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** 499.00
May be a negative number

**Schedule I
Miscellaneous Increases to Cash**

Amounts may be rounded to whole dollars.

SCHEDULE I

Statement covers period from <u>10/21/2018</u> through <u>12/31/2018</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

City of Benicia Police Officers Association PAC

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
11/08/2018	Connect Political 3723 Birch Street #10 Newport Beach, CA 92660	Partial refund	1,586.55

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 1,586.55

Schedule I Summary

1. Itemized increases to cash this period.	\$ 1,586.55
2. Unitemized increases to cash of under \$100 this period.	\$ 0.00
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)	\$ 0.00
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)	TOTAL \$ 1,586.55