

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

Date Stamp: CITY OF SANTA CLARA, 2014 FEB 24 A 11:14, CALIFORNIA FORM 460, Page 1 of 9, For Official Use Only

Statement covers period from 1/01/2014 through 2/22/2014; Date of election if applicable: April 8, 2014

SEE INSTRUCTIONS ON REVERSE

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

- Officeholder, Candidate Controlled Committee (checked); State Candidate Election Committee; Recall; General Purpose Committee; Sponsored; Political Party/Central Committee; Primarily Formed Ballot Measure Committee; Controlled; Sponsored; Primarily Formed Candidate/Officeholder Committee

2. Type of Statement:

- Preelection Statement (checked); Semi-annual Statement; Termination Statement; Amendment; Quarterly Statement; Special Odd-Year Report; Supplemental Preelection Statement - Attach Form 495

3. Committee Information

I.D. NUMBER 1356733

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) ELECT ALAN FERDMAN for CITY COUNCIL 2014

STREET ADDRESS (NO P.O. BOX); CITY; STATE; ZIP CODE; AREA CODE/PHONE

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 Richard Drew; MAILING ADDRESS

CITY; STATE; ZIP CODE; AREA CODE/PHONE

NAME OF ASSISTANT TREASURER, IF ANY Alan Ferdman; 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 2-23-2014; Executed on 2-23-2014; Executed on; Executed on

By; Assistant Treasurer; Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor; Signature of Controlling Officeholder, Candidate, State Measure Proponent; 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 from <u>1/01/2014</u>	CALIFORNIA FORM 460
through <u>2/22/2014</u>	
Page <u>3</u> of <u>9</u>	I.D. NUMBER 1356733

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ELECT ALAN FERDMAN for CITY COUNCIL 2014

Contributions Received		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$ 2235	\$ 2235
2. Loans Received	Schedule B, Line 3	2000	2000
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$ 4235	\$ 4235
4. Nonmonetary Contributions	Schedule C, Line 3	0	0
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$ 4235	\$ 4235

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	\$ 5533	\$ 5533
7. Loans Made	Schedule H, Line 3	0	0
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$ 5533	\$ 5533
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	\$ 5533	\$ 5533

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		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)
12. Beginning Cash Balance	Previous Summary Page, Line 16	\$ 13563
13. Cash Receipts	Column A, Line 3 above	4235
14. Miscellaneous Increases to Cash	Schedule I, Line 4	0
15. Cash Payments	Column A, Line 8 above	5533
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$ 12263

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		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)
18. Cash Equivalents	See instructions on reverse	\$ 0
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	\$ 6000