

**Recipient Committee
Campaign Statement
Cover Page**

COVER PAGE

CITY CLERK'S OFFICE
CITY OF SANTA CRITA
2016 JUL 27 PM 1:11

**CALIFORNIA
FORM 460**

Page 1 of 4
For Official Use Only

SEE INSTRUCTIONS ON REVERSE

Statement covers period from <u>1/1/16</u> through <u>06/30/16</u>	Date of election if applicable: (Month, Day, Year) <u>04/08/14</u>
--	--

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 Candidate/Officeholder Committee (Also Complete Part 7)
- Primarily Formed Ballot Measure Committee
- Controlled
- Sponsored (Also Complete Part 6)

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

3. Committee Information

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Gutzeit for City Council 2014

I.D. NUMBER
1347973

Treasurer(s)

NAME OF TREASURER
Maria Gutzeit

MAILING ADDRESS
Same as at left

CITY _____ STATE _____ ZIP CODE _____ AREA CODE/PHONE _____

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 certify under penalty of perjury under the laws of the State of California that the foregoing

attached schedules is true and complete. |

Executed on 7/25/16 Date
By _____
Executed on 7/25/16 Date
By _____
Executed on _____ Date
By _____

By _____
Signature of Controlling Officer/holder, Candidate, State Measure PropONENT
By _____
Signature of Controlling Officer/holder, Candidate, State Measure PropONENT
By _____
Signature of Controlling Officer/holder, Candidate, State Measure PropONENT

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

SEE INSTRUCTIONS ON REVERSE
 NAME OF FILER
 Gutzeit for City Council 2014

Statement covers period from 1/1/16 through 06/30/16	CALIFORNIA FORM 460
Page 3 of 4	I.D. NUMBER 1347973

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3 0	0
2. Loans Received	Schedule B, Line 3 0	1600
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2 0	0
4. Nonmonetary Contributions	Schedule C, Line 3 0	0
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4 0	0

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

20. Contributions Received	1/1 through 6/30	7/1 to Date
21. Expenditures Made	\$ _____	\$ _____

Expenditures Made

6. Payments Made	Schedule E, Line 4 0	\$ _____	0
7. Loans Made	Schedule H, Line 3 0	\$ _____	0
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7 0	\$ _____	0
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3 0	\$ _____	0
10. Nonmonetary Adjustment	Schedule G, Line 3 0	\$ _____	0
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10 0	\$ _____	0

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
	1/1/16	\$ _____
	1/1/16	\$ _____

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	\$ 200.00
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	0
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15 If this is a termination statement, Line 16 must be zero.	\$ 200.00

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	\$ 1600

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.