

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

Date Stamp

**CALIFORNIA
FORM
460**

COVER PAGE

Page 1 of 2
For Official Use Only

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 7-1-08
through 10-1-08

Date of election if applicable:
(Month, Day, Year)
11-4-08

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
- Supplemental Preelection Statement - Attach Form 495

3. Committee Information

COMMITTEE NAME (OR CANDIDATES NAME IF NO COMMITTEE) _____ I.D. NUMBER 1271215

Treasurer(s)

Turlock Firefighters PAC
STREET ADDRESS (NO P.O. BOX) _____
CITY Turlock STATE CA ZIP CODE 95382 AREA CODE/PHONE _____
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX _____

NAME OF TREASURER Jason Bernard
MAILING ADDRESS _____
CITY Turlock STATE CA ZIP CODE 95382 AREA CODE/PHONE _____
NAME OF ASSISTANT TREASURER, IF ANY _____
MAILING ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____ AREA CODE/PHONE _____
OPTIONAL: FAX / E-MAIL 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 10-1-08
Date

By [Signature]
Signature of Treasurer or Assistant Treasurer

Executed on _____
Date

By _____
Signature of Controlling Officer/Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on _____
Date

By _____
Signature of Controlling Officer/Candidate, State Measure Proponent

Campaign Disclosure Statement Summary Page

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

SUMMARY PAGE

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Turlock Firefighters PAC

Statement covers period from 7-1-08 through 10-1-08

CALIFORNIA FORM **460**
Page 2 of 7
I.D. NUMBER 1271215

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>12,280</u>	\$ _____
2. Loans Received	Schedule B, Line 3 <u>0</u>	\$ _____
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2 \$ <u>12,280</u>	\$ _____
4. Nonmonetary Contributions	Schedule C, Line 3 <u>0</u>	\$ _____
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4 \$ <u>12,280</u>	\$ _____

Expenditures Made

6. Payments Made	Schedule E, Line 4 \$ <u>6,682.55</u>	\$ _____
7. Loans Made	Schedule H, Line 3 <u>0</u>	\$ _____
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7 \$ <u>6,682.55</u>	\$ _____
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3 <u>2,586.99</u>	\$ _____
10. Nonmonetary Adjustment	Schedule G, Line 3 <u>0</u>	\$ _____
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10 \$ <u>9,269.54</u>	\$ _____

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16 \$ <u>11,971.19</u>	\$ _____
13. Cash Receipts	Column A, Line 3 above <u>2,280</u>	\$ _____
14. Miscellaneous Increases to Cash	Schedule I, Line 4 <u>0</u>	\$ _____
15. Cash Payments	Column A, Line 8 above <u>6,682.55</u>	\$ _____
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15 \$ <u>4,988.65</u>	\$ _____

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

LOAN GUARANTEES RECEIVED

17. LOAN GUARANTEES RECEIVED	Schedule B, Part 2 \$ <u>0</u>	\$ _____
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse \$ <u>0</u>	\$ _____
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above \$ <u>2,586.99</u>	\$ _____

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	\$ _____	\$ _____

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (if Subject to Voluntary Expenditure Limit)	Date of Election (m/m/dd/yy)	Total to Date
_____	____/____/____	\$ _____
_____	____/____/____	\$ _____

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

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).

Schedule A Monetary Contributions Received

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

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NAME OF FILER

Turlock Firefighters PAC

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from 7-1-08
through 10-1-08

CALIFORNIA
FORM **460**
Page 3 of 7
I.D. NUMBER
1271215

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID. NUMBER)	CONTRIBUTOR CODE * <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	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)
		<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				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$						

Schedule A Summary

- Amount received this period - (Itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 0
- Amount received this period - unitemized monetary contributions of less than \$100 \$ 2,280
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 2,280

*Contributor Codes
IND - Individual
COM - Recipient Committee
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

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

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

SCHEDULED
 CALIFORNIA
 FORM
460

SEE INSTRUCTIONS ON REVERSE
 NAME OF FILER

Torlock Firefighters PAC

Statement covers period
 from 7-1-08
 through 10-1-08

Page 4 of 7

I.D. NUMBER
1271215

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)
	Amy Boblak for City Council FPPC # 1288750	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure		\$4,215.82	4,215.82	
	Kurt Vander Wiede for City Council FPPC # 1262297	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose				
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
SUBTOTAL				\$ 8,431.65		

Schedule D Summary

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) \$ 8,431.65
- Unitemized contributions and independent expenditures made this period of under \$100 \$ 0
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL \$ 8,431.65**

**Schedule E
Payments Made**

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

SCHEDULE E
CALIFORNIA
FORM 460

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 7-1-08
through 10-1-08

Page 5 of 7
I.D. NUMBER
1271215

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 tv, or cable airtime and production costs
FIL candidate filing/ballot fees	PHD phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
ND 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 (# COMMITTEE ALSO ENTER ID NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Political Reform Division			Late Fee	\$100.00
Political Reform Division			Late Fee	\$250.00
Postage Center USA	PDS		Mailing	\$30.64
SUBTOTAL \$				380.64

Schedule E Summary

- Itemized payments made this period. (Include all Schedule E subtotals.) \$ 6682.55
- Unitemized payments made this period of under \$100 \$ 5
- Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) \$ 0
- Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) **TOTAL \$** 6687.55

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

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

SCHEDULE E (CONT.)
CALIFORNIA
FORM
460

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Turlock Firefighters PAC

Statement covers period
from 7-1-08
through 10-1-08

Page 6 of 7
I.D. NUMBER
1871215

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

OWP	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)*	OPC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	FET	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	FOS	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	PRO	professional services (legal, accounting)	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRT	print ads	VOT	voter registration
LIT	campaign literature and mailings			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
Staples	OPC		Office expenses	\$29.86
Holiday Inn Express	MTG		conference room rental	\$387.85
Jason Bernard	TRS		Reimbursement	\$39.54
Kirk Briggs Inc	IND		4x8 signs	\$1,288.5
Advanced Mailing Services	LIT		Mailers	\$4,556.16

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

SUBTOTAL \$ 6,301.91

Schedule F
Accrued Expenses (Unpaid Bills)

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

STATEMENT OF EXPENSES
CALIFORNIA 460
FORM

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Turlock Firefighters PAC

Statement covers period
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Page 7 of 7

I.D. NUMBER
1871215

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.
 CMP campaign paraphernalia/misc.
 CNS campaign consultants
 CTB contribution (explain nonmonetary)*
 CVC civic donations
 FIL candidate filing/ballot fees
 FND fundraising events
 IND independent expenditure supporting/opposing others (explain)*
 LEG legal defense
 LIT campaign literature and mailings
 MBR member communications
 MTG meetings and appearances
 OFC office expenses
 PET petition circulating
 PHO phone banks
 POL polling and survey research
 POS postage, delivery and messenger services
 PRO professional services (legal, accounting)
 PRT print ads
 RAD radio airtime and production costs
 RFD returned contributions
 SAL campaign workers' salaries
 TEL l.v. or cable airtime and production costs
 TRC candidate travel, lodging, and meals
 TRS staff/spouse travel, lodging, and meals
 TSF transfer between committees of the same candidate/sponsor
 VOT voter registration
 WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	AMOUNT INCURRED THIS PERIOD	AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
<i>Firefighters Print & Design</i>	<i>LIT</i>	<i>0</i>	<i>\$ 2,586.99</i>	<i>0</i>	<i>\$ 2,586.99</i>
SUBTOTALS \$					

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 \$ 2,586.99**
- 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**
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$ 2,586.99**