# Recipient Committee Campaign Statement Cover Page

COVER PAGE

CALIFORNIA FORM **460**

Page 1 of 11

For Official Use Only

Date Stamp: CITY CLERK SEP 28 2016 YUBA CITY

SEE INSTRUCTIONS ON REVERSE

Statement covers period from 7/1/16 through 9/24/16

Date of election if applicable: (Month, Day, Year) 11/8/16

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

- [x] 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:

- [x] 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

I.D. NUMBER: 1387167

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE): Fotine HalikasKopriva for Yuba City Council 2016

STREET ADDRESS (NO P.O. BOX): 769 Plumas St, Suite C

| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|---|---|---|---|
| Yuba City | CA | 95992 | 530-415-1351 |

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX: P.O. Box 1464

| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|---|---|---|---|
| Yuba City | CA | 95992 | 530-216-7394 |

OPTIONAL: FAX / E-MAIL ADDRESS

## Treasurer(s)

NAME OF TREASURER: K. Coleen Morris, Sutter Buttes Business Services

MAILING ADDRESS: 1510 Poole Blvd, Suite 206

| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|---|---|---|---|
| Yuba City | CA | 95993 | 530-216-7394 |

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 9/28/16 (Date) By _____ (Signature of Treasurer or Assistant Treasurer)

Executed on 9/28/16 (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)

# Recipient Committee Campaign Statement Cover Page — Part 2



## 5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
Fotine HalikasKopriva

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

| RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) | CITY | STATE | ZIP |
|---|---|---|---|
| 769 Plumas St, Suite C | Yuba City | CA | 95992 |

**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? ☐ YES ☐ 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? ☐ YES ☐ 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 | ☐ SUPPORT ☐ 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 | ☐ SUPPORT ☐ OPPOSE |
|---|---|---|
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | ☐ SUPPORT ☐ OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | ☐ SUPPORT ☐ OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | ☐ SUPPORT ☐ OPPOSE |

***Attach continuation sheets if necessary***

# Campaign Disclosure Statement
# Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statement covers period from 7/1/16 through 9/24/16

CALIFORNIA FORM 460



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Fotine HalikasKopriva for Yuba City Council 2016

I.D. NUMBER

1387167

## Contributions Received

| | | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|---|---|---|---|
| 1. Monetary Contributions | Schedule A, Line 3 | $ 6273.75 | $ 6273.75 |
| 2. Loans Received | Schedule B, Line 3 | 0.00 | 0.00 |
| 3. SUBTOTAL CASH CONTRIBUTIONS | Add Lines 1 + 2 | $ 6273.75 | $ 6273.75 |
| 4. Nonmonetary Contributions | Schedule C, Line 3 | 2310.62 | 2310.62 |
| 5. TOTAL CONTRIBUTIONS RECEIVED | Add Lines 3 + 4 | $ 8584.37 | $ 8584.37 |

## Expenditures Made

| | | | |
|---|---|---|---|
| 6. Payments Made | Schedule E, Line 4 | $ 5983.76 | $ 5983.76 |
| 7. Loans Made | Schedule H, Line 3 | 0.00 | 0.00 |
| 8. SUBTOTAL CASH PAYMENTS | Add Lines 6 + 7 | $ 5983.76 | $ 5983.76 |
| 9. Accrued Expenses (Unpaid Bills) | Schedule F, Line 3 | 0.00 | 0.00 |
| 10. Nonmonetary Adjustment | Schedule C, Line 3 | 2310.62 | 2310.62 |
| 11. TOTAL EXPENDITURES MADE | Add Lines 8 + 9 + 10 | $ 8294.38 | $ 8294.38 |

## Current Cash Statement

| | | |
|---|---|---|
| 12. Beginning Cash Balance | Previous Summary Page, Line 16 | $ 0.00 |
| 13. Cash Receipts | Column A, Line 3 above | 6273.75 |
| 14. Miscellaneous Increases to Cash | Schedule I, Line 4 | 0.00 |
| 15. Cash Payments | Column A, Line 8 above | 5983.76 |
| 16. **ENDING CASH BALANCE** | Add Lines 12 + 13 + 14, then subtract Line 15 | $ 289.99 |

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

17. LOAN GUARANTEES RECEIVED — Schedule B, Part 2 — $ 0.00

## Cash Equivalents and Outstanding Debts

| | | |
|---|---|---|
| 18. Cash Equivalents | See instructions on reverse | $ 0.00 |
| 19. Outstanding Debts | Add Line 2 + Line 9 in Column B above | $ 0.00 |

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).

## 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 | $ | $ |

## 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 |
|---|---|
| / / | $ |
| / / | $ |

*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

CALIFORNIA FORM 460

Statement covers period
from 7/1/16
through 9/24/16

Page 4 of 11

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Fotine HalikasKopriva for Yuba City Council 2016

I.D. NUMBER
1387167

| 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) |
|---|---|---|---|---|---|---|
| 7/21/16 | Russell and Donna Clark<br>631 Daniel Dr<br>Yuba City, CA 95993 | ☑ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | both retired | 300.00 | 300.00 | 300.00 |
| 7/21/16 | Bristow, LLC<br>6425 Meadowhill Ct<br>Carmichael, CA 95608 | ☐ IND<br>☐ COM<br>☑ OTH<br>☐ PTY<br>☐ SCC | | 250.00 | 250.00 | 250.00 |
| 7/21/16 | Harnek Singh<br>1529 Colusa Hwy<br>Yuba City, CA 95993 | ☑ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | owner, Taste of India | 500.00 | 500.00 | 500.00 |
| 7/21/16 | Coldwell Banker Commercial Valley Brokers<br>1307 Franklin Rd<br>Yuba City, CA 95993 | ☐ IND<br>☐ COM<br>☑ OTH<br>☐ PTY<br>☐ SCC | | 250.00 | 250.00 | 250.00 |
| 7/21/16 | Holycross Memorial Services Inc<br>486 Bridge St<br>Yuba City, CA 95991 | ☐ IND<br>☐ COM<br>☑ OTH<br>☐ PTY<br>☐ SCC | | 200.00 | 200.00 | 200.00 |
| | | | SUBTOTAL $ | 1500.00 | | |

## Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 5050.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 1223.75
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL $ 6273.75

*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
from 7/1/16
through 9/24/16

CALIFORNIA FORM 460



NAME OF FILER
Fotine HalikasKopriva for Yuba City Council 2016

I.D. NUMBER
1387167

| 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) |
|---|---|---|---|---|---|---|
| 7/22/16 | Dan and Tonya Flores<br>867 Murray Ct<br>Yuba City, CA 95991 | ☑ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | Dan: CEO, Cambridge Junior College<br>Tonya: Admin, Cambridge Junior College | 200.00 | 200.00 | 200.00 |
| 8/12/16 | Bruce and Kathleen Hudgins<br>543 Ohlson St<br>Yuba City, CA 95991 | ☑ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | owners/property managers, ABS | 100.00 | 100.00 | 100.00 |
| 8/12/16 | Barbara Paterson<br>1769 Wildflower Cir<br>Yuba City, CA 95993 | ☑ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | CEO, Hands of Hope | 100.00 | 100.00 | 100.00 |
| 8/12/16 | Recology Inc PAC<br>ID#921099<br>50 California St, 24th Floor<br>San Francisco, CA 94111-9796 | ☐ IND<br>☑ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | | 750.00 | 750.00 | 750.00 |
| 8/12/16 | Carol Keesling<br>859 Jones Rd, Apt 25<br>Yuba City, CA 95991 | ☑ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | retired | 100.00 | 100.00 | 100.00 |
| | | | SUBTOTAL $ | 1250.00 | | |

*Contributor Codes
IND – Individual
COM – Recipient Committee (other than PTY or SCC)
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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
from 7/1/16
through 9/24/16

CALIFORNIA FORM 460



NAME OF FILER
Fotine HalikasKopriva for Yuba City Council 2016

I.D. NUMBER
1387167

| 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) |
|---|---|---|---|---|---|---|
| 8/12/16 | Palmer D Haug<br>562 Laurel Dr<br>Yuba City, CA 95991 | ☑ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | retired | 100.00 | 100.00 | 100.00 |
| 8/17/16 | R&H Leasing Co, Inc<br>666 Oji Way<br>Yuba City, CA 95993 | ☐ IND<br>☐ COM<br>☑ OTH<br>☐ PTY<br>☐ SCC | | 250.00 | 250.00 | 250.00 |
| 8/19/16 | Donald J Turano<br>809 Rosalind Dr<br>Yuba City, CA 95991 | ☑ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | CPA, self employed | 200.00 | 200.00 | 200.00 |
| 8/23/16 | Shirley Azim<br>1350 Meadowlark Wy<br>Yuba City, CA 95993 | ☑ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | retired | 100.00 | 100.00 | 100.00 |
| 9/14/16 | Rebecca Cleveland<br>868 Franklin Ave<br>Yuba City, CA 95991 | ☑ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | owner, Becky's Custom Sewing | 250.00 | 250.00 | 250.00 |
| | | | **SUBTOTAL $** | 900.00 | | |

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SCC – Small Contributor Committee

# Schedule A (Continuation Sheet)
# Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
from 7/1/16
through 9/24/16

CALIFORNIA FORM 460



NAME OF FILER
Fotine HalikasKopriva for Yuba City Council 2016

I.D. NUMBER
1387167

| 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) |
|---|---|---|---|---|---|---|
| 9/14/16 | Antonio Lozano<br>761 Colusa Ave<br>Yuba City, CA 95991 | ☑ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | owner, Antonio's Quick Lunch | 1000.00 | 1000.00 | 1000.00 |
| 9/22/16 | Kevin and Sharlene Katz<br>2454 Irwin Ave<br>Sutter, CA 95982 | ☑ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | owners, Dancing Tomato | 200.00 | 200.00 | 200.00 |
| 9/1/16 | Barbara Miller<br>508 Forbes Ave<br>Yuba City, CA 95991 | ☑ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | Supervisor, Valley Fair Realty Corp | 100.00 | 100.00 | 100.00 |
| 9/13/16 | Robert McCloud<br>1087 Helen Ave<br>Yuba City, CA 95991 | ☑ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | retired | 100.00 | 100.00 | 100.00 |
| | | ☐ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC | | | | |
| | | | SUBTOTAL $ | 1400.00 | | |

*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

CALIFORNIA FORM 460

Statement covers period from 7/1/16 through 9/24/16

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Fotine HalikasKopriva for Yuba City Council 2016

I.D. NUMBER 1387167

| 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) |
|---|---|---|---|---|---|---|---|
| 08/11/16 | Justin's Kitchen<br>628 Plumas St<br>Yuba City, CA 95991 | ☐ IND<br>☐ COM<br>☑ OTH<br>☐ PTY<br>☐ SCC | | food for fundraiser | 483.69 | 483.69 | |
| 8/11/16 | RAY ALLEN BAND<br>1817 JOSEPHINE WY<br>YUBA CITY, CA 95993 | ☐ IND<br>☐ COM<br>☑ OTH<br>☐ PTY<br>☐ SCC | | MUSIC FOR FUNDRAISER | 200.00 | 200.00 | |
| 8/11/16 | CHICAGO STEVE BARKLEY<br>WWW.CHICAGOSTEVE.COM<br>831-915-8880 | ☐ IND<br>☐ COM<br>☑ OTH<br>☐ PTY<br>☐ SCC | | COMEDIAN FOR FUNDRAISER | 200.00 | 200.00 | |
| | | ☐ IND<br>☐ COM<br>☑ OTH<br>☐ PTY<br>☐ SCC | | | | | |

*Attach additional information on appropriately labeled continuation sheets.* **SUBTOTAL $** 883.69

## Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) ..... $ 2310.62
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $ 0
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 $** 2310.62

*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

CALIFORNIA FORM 460

Statement covers period from 7/1/16 through 9/24/16



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Fotine HalikasKopriva for Yuba City Council 2016

I.D. NUMBER: 1387167

| 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) |
|---|---|---|---|---|---|---|---|
| 08/11/16 | Star of India<br>1538 Poole Blvd, Suite W<br>Yuba City, CA 95993 | ☐ IND<br>☐ COM<br>☑ OTH<br>☐ PTY<br>☐ SCC | | food for fundraiser | 655.32 | 655.32 | |
| 8/11/16 | Hillcrest Catering<br>210 Julie Dr<br>Yuba City, CA 95991 | ☐ IND<br>☐ COM<br>☑ OTH<br>☐ PTY<br>☐ SCC | | food for fundraiser | 400.00 | 400.00 | |
| 8/11/16 | Hampton Inn and Suites by Hilton<br>1375 Sunsweet Blvd<br>Yuba City, CA 95991 | ☐ IND<br>☐ COM<br>☑ OTH<br>☐ PTY<br>☐ SCC | | raffle prize - one night stay for 2 | 159.00 | 159.00 | |
| 8/11/16 | El Zarape Restaurant<br>1005 Stafford Wy<br>Yuba City, CA 95991 | ☐ IND<br>☐ COM<br>☑ OTH<br>☐ PTY<br>☐ SCC | | food for fundraiser | 212.61 | 212.61 | |

*Attach additional information on appropriately labeled continuation sheets.* **SUBTOTAL $** 1426.93

## Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) ..... $ _____
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $ _____
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 $** _____

*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.

SCHEDULE E

CALIFORNIA FORM **460**

Statement covers period
from 7/1/16
through 9/24/16

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Fotine HalikasKopriva for Yuba City Council 2016

I.D. NUMBER
1387167

**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 t.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 PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---|---|---|
| Signsonthecheap.com<br>1-866-661-9239 | CMP | yard signs | 607.29 |
| County of Sutter Elections<br>1435 Veterans Memorial Cir<br>Yuba City, CA 95993 | CMP | candidate statement | 400.00 |
| Grafix Marketing & Design<br>P.O. Box 367<br>Yuba City, CA 95992 | LIT | business cards, flyers, campaign literature | 1307.74 |

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

**SUBTOTAL $** 2315.03

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 4651.37
2. Unitemized payments made this period of under $100 ..... $ 1332.39
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 $** 5983.76

# Schedule E
# (Continuation Sheet)
# Payments Made

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Statement covers period
from 7/1/16
through 9/24/16

CALIFORNIA FORM 460

Page 11 of 11

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Fotine HalikasKopriva for Yuba City Council 2016

I.D. NUMBER
1387167

**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 t.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 PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---|---|---|
| Sutter Buttes Business Services<br>1510 Poole Blvd, Suite 206<br>Yuba City, CA 95993 | PRO | accounting services | 700.00 |
| BFS Printing<br>791 Plumas St<br>Yuba City, CA 95991 | LIT | flyers, envelopes, invitations | 983.84 |
| The Shopper<br>697 N Palora Ave, Suite D<br>Yuba City, CA 95991 | PRT | advertising | 395.00 |
| The Country Florist<br>1500 N. Beale Rd<br>Marysville, CA 95901 | FND | centerpieces for fundraiser | 107.50 |
| Ealry Risers Kiwanis<br>P.O. Box 646<br>Yuba City, CA 95992 | CVC | donation for Blues, Brews and BBQ charity event | 150.00 |

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

**SUBTOTAL $** 2336.34