Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in		Date Stamp FILED RUZ CO. ELECTIONS	CALIFORNIA 460 2001/02 FORM
SEE INSTRUCTIONS ON REVERSE	Statement covers period from 10/01/2010 through 10/16/2010	Date of election if applicable: (Month, Day, Year) 0 00	. a. bu 1:83	Page1 of9 For Official Use Only
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	Inplete Parts 1, 2, 3, and 4. Illot Measure Committee Primarily Formed Controlled Sponsored to Complete Part 6) Imarily Formed Candidate/ ficeholder Committee to Complete Part 7)	2. Type of Statement:  Preelection Statement  Semi-annual Statement  Termination Statement  Amendment (Explain be	□ Sp □ Su	uarterly Statement secial Odd-Year Report spplemental Preelection atement - Altach Form 495
		Treasurer(s)  NAME OF TREASURER  John Locatelli  MAILING ADDRESS  Watsonville  NAME OF ASSISTANT TREASURE	CA 950	CODE AREA CODE/PHONE 076 (831) 768-9984
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO  CITY STATE ZIP COD  OPTIONAL: FAX / E-MAIL ADDRESS		MAILING ADDRESS  CITY  OPTIONAL: FAX / E-MAIL ADDRE		CODE AREA CODE/PHONE
Executed on  Executed on  Executed on  Date  Executed on  Date  Executed on  Date  Executed on  Date	By Signature of Cont	Anowledge the information contained and correct.  Signaluse of Trepsurer or Assistant Treating Officeholder, Candidate, State Measure Propositions of Controlling Officeholder, Condidate, State Measure Propositions of Controlling Officeholder, Condidate, State Measure of Controlling Officeholder, Condidate, C	easurer onent or Responsible Officer of Sponso	

	COVER	'AGI	E-PART2
	ORNIA ORM	4	60
Page _	2	of _	9

. Omicentitides of Catholicate	Controlled Comm	iittee		6.	<b>Ballot Measure Commit</b>	tee			
NAME OF OFFICEHOLDER OR CANE	DIDATE				NAME OF BALLOT MEASURE				
Gina Locatelli									
OFFICE SOUGHT OR HELD (INCLUD	E LOCATION AND DISTRI	CT NUMBER IF APPLIC	CABLE)		BALLOT NO. OR LETTER	JURISDICTION	4		SUPPORT OPPOSE
Santa Cruz County Board of	of Education District	Seven				<u> </u>			
RESIDENTIAL/BUSINESS ADDRESS	,	Sonville C			Identify the controlling office	ceh <b>older, ca</b> nc	ildate, or state n	neasure p	roponent, if any.
	*****	DITAILE OF	- 33070		NAME OF OFFICEHOLDER, CAND	DIDATE, OR PRO	PONENT		
Related Committees Not I not included in this statement that contributions or make expenditure.	t are controlled by you	or are primarily form			OFFICE SOUGHT OR HELD		DIST	RICT NO. IF	ANY
COMMITTEE NAME		I.D. NUMBER							
NAME OF TREASURER		CONTROLLED COM	MITTEE?	7.	Primarily Formed Communities is prima	mittee List n	ames of officehold	ler(s) or ca	ndidate(s) for
COMMITTEE ADDRESS STR	EET ADDRESS (NO P.O. B				NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT O	R HELD	SUPPORT
CITY	STATE ZIP C					I	1		OPPOSE
	OME ZIF	ODE AREA	CODE/PHONE		NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT O	R HELD	OPPOSE  SUPPORT OPPOSE
COMMITTEE NAME	JAIL ZIF	I.D. NUMBER	CODE/PHONE						OPPOSE  SUPPORT
	ONL ZIF		CODE/PHONE		NAME OF OFFICEHOLDER OR CA		OFFICE SOUGHT O		OPPOSE  SUPPORT
	ONL ZIF	I.D. NUMBER  CONTROLLED COM	MITTEE?			ANDIDATE		OR HELD	OPPOSE  SUPPORT OPPOSE  SUPPORT OPPOSE
COMMITTEE NAME  NAME OF TREASURER		I.D. NUMBER  CONTROLLED COM  YES			NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT O	OR HELD	OPPOSE  SUPPORT OPPOSE  SUPPORT
COMMITTEE NAME  NAME OF TREASURER	EET ADDRESS (NO P.O. B	I.D. NUMBER  CONTROLLED COM  YES	MITTEE?		NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT O	OR HELD	☐ OPPOSE ☐ SUPPORT ☐ OPPOSE ☐ SUPPORT ☐ OPPOSE ☐ SUPPORT

## Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period 10/01/2010 CALIFORNIA 460

SUMMARY PAGE

SEE INSTRUCTIONS ON REVERSE				throu	gh10/16/2010	Page of
NAME OF FILER Gina Locatelli for Santa Cruz County Board of Education District	Se	ven in 2010				1.D. NUMBER 1329544
Contributions Received	Column A TOTAL THIS PERIOD (FROMATTACHED SCHEDULES)			Column B CALENDAR YEAR TOTAL TODATE	Running in Both ti	nmary for Candidates he State Primary and
1. Monetary Contributions	\$	1924.00 3500.00 5424.00 0.00 5424.00	\$ \$	5294.00 7000.00 12294.00 0.00 12294.00	General Elections  1/1  20. Contributions Received \$  21. Expenditures Made \$	0.00 \$ 12294.00 0.00 \$ 10865.63
Expenditures Made  6. Payments Made	\$	5218.40 0.00 5218.40 0.00 0.00 5218.40	\$ \$	10865.63 0.00 10865.63 0.00 0.00 10865.63	Candidates 22. Cumulati	Summary for State  ve Expenditures Made* o Voluntary Expenditure Umit)  Total to Date
Current Cash Statement  12. Beginning Cash Balance	\$	5424.00 0.00 5218.40 1428.37	am cor froi rep Col figu sub per the for can	calculate Column B, ad ounts in Column A to the responding amounts in Column B of your last ort. Some amounts in umn A may be negative that should be intracted from previous ind amounts. If this is first report being filed this calendar year, only over the amounts	e	\$\$  \$\$  \$\$  Amounts in this section may be
Cash Equivalents and Outstanding Debts  18. Cash Equivalents See instructions on reverse  19. Outstanding Debts Add Line 2 + Line 9 in Column 8 above		7000.00	fror any	n Lines 2, 7, and 9 (if	different from amounts re	eported in Column B. FPPC Form 460 (June/01) oll-Free Helpline: 866/ASK-FPPC

Monetary (	Schedule A  Monetary Contributions Received  SEE INSTRUCTIONS ON REVERSE  WAME OF FILER  Type or print in ink. Amounts may be rounded to whole dollars.			Irom	ors period 01/2010 16/2010	CALIFORNIA 460 FORM  Page 4 of 9		
	Ili for Santa Cruz County Board of Education District	Seven in 201	0			1.D. N		
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 CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
10/05/2010	Derek Witmer Watsonville, CA 95076	MIND COM OTH PTY SCC	Firefighter State of California	Firefighter 100.00		0.00	100.00	
10/05/2010	Anna Locatelli Santa Cruz, CA 95060	MIND COM OTH PTY SCC	Homemaker 100.00 NA		100.00		100.00	
10/05/2010	Dick Peixoto  Watsonville, CA 95076	MIND COM OTH PTY SCC	Grower Lakeside Organic Gardens	250.00	250	0.00	250.00	
10/16/2010	Robert Kimura Watsonville, CA 95076	IND COM OTH PTY	Police Officer 20 City of Capitola, CA		200.00		200.00	
10/16/2010	David Stolich Watsonville, CA 95077	IND COM OTH PTY	Apple Farmer Stolich Farms	100.00	100	.00	100.00	
			SUBTOTALS	750.00	2.00 (100 (100 (100 (100 (100 (100 (100 (	V LOOK	odciott Aller III	

## **Schedule A Summary**

Amount received this period – contributions of \$100 or more.  (Include all Schedule A subtotals.)	\$1450.00
2. Amount received this period – unitemized contributions of less than \$100	
3. Total monetary contributions received this period.  (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)	

\*Contributor Codes

IND-Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party SCC - Small Contributor Committee

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

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

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

SCHEDULE A (CONT.) Statement covers period CALIFORNIA 10/01/2010 **FORM** from. 10/16/2010

through\_

I.D. NUMBER

NAME OF FILER

Gina Locate	li for Santa Cruz County Board of Education District	Seven in 201	0			132954	14
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
10/16/2010	Fred Garcia Salinas, CA 93907	SCIND COM OTH PTY SCC	Retired NA	100.00	100	0.00	100.00
10/16/2010	Janice Morgan  1 Watsonville, CA 95076	SIND COM OTH PTY SCC	Owner Seabreeze Farms	100.00	100	0.00	100.00
10/16/2010	Louis Rittenhouse Santa Cruz, CA 95060	SOIND COM COTH PTY	Owner Rittenhouse Building & Investments	250.00	250	0.00	250.00
10/16/2010	Gwen Koda Watsonville, CA 95076	IND COM OTH PTY	Grower Berry Bowl, Inc.	250.00	250	0.00	250.00
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					1.00
			SUBTOTALS	700.00		Talen Viv.	- 1.25 -

\*Contributor Codes

IND - Individual

COM-Recipient Committee

(other than PTY or SCC)

OTH-Other

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

<b>Sched</b>	ule	B-	Part	1
Loans	Red	eive	bs	

Type or print in Ink.

SCI	HED	ULE	₿-	PAR'	T1

Loans Received	Amounts may be rounded			from10/0	1/2010	california 46		
SEE INSTRUCTIONS ON REVERSE through 10/							Page 6	of9
NAME OF FILER			I.D. NUMBER					
Gina Locatelli for Santa Cruz County Board of Education District Seven in 2010							1329544	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER LD, NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Gina Locatelli	Owner			□ PAID				CALENDAR YEAR
Watsonville, CA 95076	Locatelli Properties, LLC			s0  □ FORGIVEN	\$_5000.00	O %	s 1000.00	s5000.00
† M IND □ COM □ OTH □ PTY □ SCC		s3500.00	s <u>1500.00</u>	s0	NA DATE DUE	s0	07/24/2010 DATE INCURRED	5000.00
Gina Locatelli	Owner			PAID				CALENDAR YEAR
Watsonville, CA 95076	Locatelli Properties, LLC			\$0	s 7000.00	O %	s <u>1000.00</u>	s_7000.00
TEN IND □ COM □ OTH □ PTY □ SCC		s <u>5000.00</u>	s 2000.00	FORGIVEN 0	NA DATE DUE	s0	07/24/2010 DATE INCURRED	7000.00
a no good gon grin grin				☐ PAID				CALENDAR YEAR
				\$ FORGIVEN	s	RATE %	s	\$ PER ELECTION**
TO IND COM OTH PTY SCC		s	s	s	DATE DUE	5	DATE INCURRED	\$
		SUBTOTALS \$	i \$	;	\$	\$		Marie III Kalanda Kala
Schedule B Summary						(Enter (e) on Schedule E, Line 3)	I want	
Loans received this period				\$	3500.00			
(Total Column (b) plus unitemized loans								given or paid by also must be
2. Loans paid or forgiven this period\$						,	reported on S	ichedule A.
(Total Column (c) plus loans under \$100 paid or forgiven.) (Include loans paid by a third party that are also itemized on Schedule A.)							** If required.	
3. Net change this period. (Subtract Line	2 from Line 1.)			NET \$	3500.00			
3. Net change this period. (Subtract Line 2 from Line 1.)								
† Contributor Codes							EDDC E	n 460 / Immo/041
ND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC								

Schedule D SCHEDULED **Summary of Expenditures** Type or print in ink. Statement covers period **CALIFORNIA** Amounts may be rounded Supporting/Opposing Other to whole dollars. 10/01/2010 **FORM** from Candidates. Measures and Committees 10/16/2010 9 through SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Gina Locatelli for Santa Cruz County Board of Education District Seven in 2010 1329544 CUMULATIVE TO DATE PER ELECTION NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR DESCRIPTION DATE TYPE OF PAYMENT **AMOUNT THIS** CALENDAR YEAR TO DATE MEASURE NUMBER OR LETTER AND JURISDICTION. (IF REQUIRED) PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OR COMMITTEE ☐ Monetary Contribution ☐ Nonmonetary Contribution Independent Expenditure ■ Support □ Oppose ■ Monetary Contribution ■ Nonmonetary Contribution Independent Expenditure ☐ Support □ Oppose Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure ☐ Oppose ☐ Support 0.00 SUBTOTAL \$ Schedule D Summary

1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) ......\$

2. Unitemized contributions and independent expenditures made this period of under \$100 .......\$

0.00

99.00

									SCHEDULE
Schedule E	Type or prin Amounts may		1	St	atemen	t covers period	CALIF	ORNIA	
Payments Made	to whole dollars.			from	from10/01/2010			RM	400
SEE INSTRUCTIONS ON REVERSE				thro	ugh	10/16/2010	. Page _	8 ,	of9
NAME OF FILER							I.D. NU	IMBER	
Gina Locatelli for Santa Cruz County Board of Edu	cation District Seven in	2010					13295	44	
CODES: If one of the following codes accurately des	cribes the payment, you MBR membercom MTG meetings an	munications		RAD	radio ai	e the payment.  Intime and production  of contributions	costs		
CTB contribution (explain nonmonetary)*	OFC office exper	ises	-	SAL	campai	gn workers' salaries			
CVC civic donations FIL candidate filing/ballot fees	PET petition circu PHO phone banks					able airtime and product travel, lodging, an		ts	
FND fundraising events	POL polling and		rch	TRS	staff/spi	ouse travel, lodging,	and meals		
ND independent expenditure supporting/opposing others (explain			essenger services			between committee	s of the sa	ime candi	idate/sponso
LEG legal defense LIT campaign literature and mailings	PRO professional PRT print ads	services (le	gal, accounting)			egistration tion technology costs	s (internet,	e-mail)	
	<u> </u>	1 -		-			<u>, , , , , , , , , , , , , , , , , , , </u>	· 	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION	OF PAY	MENT		AMO	OUNT PAID
Terra Eclipse, Inc.		CNS							1500.00
Aptos, CA 95003		CNO							1300.00
UPS Store		500					-		400.04
Watsonville, CA 95076		POS							198.01
Sign Wave		OMD							4054.00
Aptos, CA 95003		CMP							1351.00
* Payments that are contributions or independent expendit	ures must also be summ	arized on S	ichedule D.			SU	BTOTAL	}	3049.01
Schedule E Summary									

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) ......\$

2. Unitemized payments made this period of under \$100 ......\$

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ......\$

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

4997.03

221.37

5218.40

0.00

Schedule	E	
(Continua	tion	Sheet)
Payments	Mad	de

SCHEDL	JLE E (	(CONT.)
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(Continuation Sheet) Payments Made	Type or print Amounts may be to whole do	rounded		from throu	10/01/2010 10/16/2010	CALIFO FOR	
NAME OF FILER Gina Locatelli for Santa Cruz County Board of Education	District Seven in 20	010				I.D. NUME 132954	
CODES: If one of the following codes accurately described campaign paraphemalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member community meetings and office expensions petition circuit phone banks polling and spostage, deliration of the polling and spostage, deliration member community meetings and spostage, deliration member community meetings and spostage, deliration member community meetings and spostage and spost	munications I appearance ses ating urvey researe very and me	s	RAD RFD SAL TEL TRC TRS TSF VOT	radio airtime and production returned contributions campaign workers' salaries t.v. or cable airtime and pro- candidate travel, lodging, an staff/spouse travel, lodging, transfer between committee	duction cost d meals and meals s of the sar	me candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE (	DR DE	SCRIPTIO	N OF PAYMENT		AMOUNT PAID
Terra Eclipse, Inc. Aptos, CA 95003		LIT					609.03
D-Mail, Inc. Watsonville, CA 95076		POS					609.51
Postmaster Watsonville, CA 95076		POS					150.00
D-Mail, Inc. Watsonville, CA 95076		POS					579.48
Payments that are contributions or independent expanditures must als	o be summarized on S	Schodule D			SU	BTOTAL S	10/8 02