Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in ink.	Date Stamp FILED EACRUZ CO ELECTION COVER PAGE CALIFORNIA 2001/02 FORM
•	Statement covers period Date of election if applica	Page
SEE INSTRUCTIONS ON REVERSE	through	
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored P	Preelection Stater	nent
Small Contributor Committee O Political Party/Central Committee (A	Officeholder Committee Also Complete Part 7) D. NUMBER 369341 Treasurer(s)	
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) McGowan for Water Board 2014	NAME OF TREASURER Susan Westman MAILING ADDRESS CITY Capitola	STATE ZIP CODE AREA CODE/PHONE CA 95010 831 462 4362
Aptos CA 95003	3 831 750-2011 James W McGowa	
CITY STATE ZIP CO Aptos CA 95001 OPTIONAL: FAX / E-MAIL ADDRESS	DDE AREA CODE/PHONE CITY	STATE ZIP CODE AREA CODE/PHONE CA 95003 831 750-2011 ADDRESS
4. Verification I have used all reasonable diligence in preparing and reviewing certify under penalty of perjury under the laws of the State of Cotober 1, 2014 Executed on	By Signature of Treasurer or As	sistant Treasurer sure Proponent or Responsible Officer of Sponsor idate, State Measure Proponent

FPPC Form 460 (June/01)
FPPC Toil-Free Helpline: 866/ASK-FPPC
State of California

Recipient Committee Campaign Statement Cover Page — Part 2

	COVE	R PAGE	-PART2
CAL	FORNI		
. P	ORM		
Page .	2	of	9

Officeholder or Candidate Controlled Commi	ttee	6.	Ballot Measure Committe	е		
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
James W. (Bill) McGowan						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRIC	T NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTION	Ç) SUPPORT) OPPOSE
Soquel Creek Water Board						OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CI	TY STATE ZIP		Identify the controlling office	holder, candidate	e, or state measure	proponent, if any
			NAME OF OFFICEHOLDER, CANDID	ATE, OR PROPONE	NT	
Related Committees Not Included in this Stanot included in this statement that are controlled by you contributions or make expenditures on behalf of your can	r are primarily formed to receive		OFFICE SOUGHT OR HELD		DISTRICT NO.	IF ANY
COMMITTEE NAME	t.D. NUMBER					
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Commi		of officeholder(s) or	candidate(s) for
	O YES O NO		which this committee is primarily	y formed.		
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BO	DX)		NAME OF OFFICEHOLDER OR CAN	DIDATE OFFI	CE SOUGHT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP CO	DDE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR CAN	DIDATE OFFI	CE SOUGHT OR HELD	O SUPPORT
						OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR CAN	DIDATE OFFI	CE SOUGHT OR HELD	
			MANUE OF OFFICE PER ON OARI	BIDATE STI	or dodolli divilera	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR CAN	DIDATE OFFI	CE SOUGHT OR HELD	SUPPORT
	O YES O NO					OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BO	X)					
CITY STATE ZIP CO	DDE AREA CODE/PHONE		Attach (continuation she	ets if necessary	
			71111077		,	

Sampaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period
January 1, 2014
from ______Sept. 30, 2014
through ____Sept. 30, 2014

1369341

FPPC Toll-Free Helpline: 866/ASK-FPPC

EE INSTRUCTIONS ON REVERSE

IAME OF FILER

McGowan for Water Board 2014

Column A Column B Calendar Year Summary for Candidates Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE General Elections 3.866 3.866 120 1/1 through 6/30 7/1 to Date 120 3.986 3.986 20. Contributions Received 742 742 . Nonmonetary Contributions Schedule C, Line 3 21. Expenditures 4.728 4.728 Made Expenditures Made **Expenditure Limit Summary for State** 2,667 2,667 Candidates 22. Cumulative Expenditures Made* 2,667 2.667 (If Subject to Voluntary Expenditure Limit) 0 Date of Election Total to Date 742 742 (mm/dd/yy) 0. Nonmonetary Adjustment Schedule C. Line 3 3,409 3,409 **Current Cash Statement** 0 2. Beginning Cash Balance Previous Summary Page, Line 16 \$ _ To calculate Column B. add 3.986 amounts in Column A to the corresponding amounts 4. Miscellaneous Increases to Cash Schedule I, Line 4 from Column B of your last 2.667 report. Some amounts in Column A may be negative 1.319 figures that should be 6. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 7. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ ____ *Since January 1, 2001. Amounts in this section may be carry over the amounts different from amounts reported in Column B. from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). 0 120 9 Outstanding Debts Add Line 2 + Line 9 in Column B above \$ ____ FPPC Form 460 (June/01

ichedule A flonetary Contributions Received

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

Statement covers period January 1, 2014 from

through

Sept. 30, 2014

SCHEDULE

EE INSTRUCTIONS ON REVERSE

AME OF FILER

McGowan for Water Board 2014

I.D. NUMBER 1369341

Page 4

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)	RECEIVED THIS PERIOD	CALENDAR YEAR (JAN, 1 - DEC, 31)	TO DATE (IF REQUIRED)
08/04/14	Gary Hazelton Aptos, CA 95003	©IND OCOM OOTH OPTY OSCC	Retired	\$300	\$300	
08/04/14	Susan Westman Capitola, CA 95010	OIND OCOM OOTH OPTY OSCC	Retired	\$250	\$250	
98/04/14	Nels Westman Capitola, CA 95010	OCOM OOTH OPTY OSCC	Retired	\$260	\$260	
08/10/14	Will J Anderline Aptos,CA 95003	OND OCOM OOTH OPTY OSCC	Retired	\$500	\$500	
9/08/14	Evans Property Management Santa Cruz, CA 95062	GIND OCOM OOTH OPTY OSCC	Property Manager Micky Evans	\$350	\$350	
			SUBTOTALS	\$1,660		

. Amount received this period – contributions of \$100 or more. 2,160 (Include all Schedule A subtotals.)\$ 1,706 . Amount received this period – unitemized contributions of less than \$100\$ Total monetary contributions received this period. \$3,866

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Vionetary Contributions Received

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE A (CON
Statement covers period January 1, 2014 from	california 460
Sept. 30, 2014	Page 5 of 9
	I.D. NUMBER

IAME OF FILER

McGowan for Water Board 2014

1.D. NUMBER

wicdowaii ii	Of Water Board 2014				10030	, T I
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)
08/24/14	James Bargetto Soquel, CA 95072	OIND OCOM OOTH OPTY OSCC	Wine Maker Bargetto Winery	\$150	\$150	
09/26/14	Ted Burke Capitola, CA 95010	OIND OCOM OOTH OPTY OSCC	Restauranteur Shadowbrook Restaurant	\$100	\$100	
09/28/14	Harvey Segall Aptos, CA 95003	OIND OCOM OOTH OPTY OSCC	Owner Video USA	\$250	\$250	
		OIND OCOM OOTH OPTY OSCC				
		OIND OCOM OOTH OPTY OSCC				
			SUBTOTALS	\$500		

*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 B - Part 1 .oans Received

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

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

Statement covers period January 1, 2014 from .

CALIFORNIA FORM

SCHEDULE B - PART

Sept. 30, 2014 Page _ through EE INSTRUCTIONS ON REVERSE I.D. NUMBER AME OF FILER 1369341 McGowan for Water Board 2014 (a) OUTSTANDING (e) (g) (b) (d) OUTSTANDING (c) IF AN INDIVIDUAL, ENTER CUMULATIVE FULL NAME, STREET ADDRESS AND ZIP CODE INTEREST AMOUNT **ORIGINAL** AMOUNT PAID OCCUPATION AND EMPLOYER BALANCE AT BALANCE OF LENDER PAID THIS AMOUNT OF CONTRIBUTION: RECEIVED THIS OR FORGIVEN BEGINNING THIS (IF SELF-EMPLOYED, ENTER CLOSE OF THIS (IF COMMITTEE, ALSO ENTER I.D. NUMBER) PERIOD PERIOD LOAN TO DATE NAME OF BUSINESS) THIS PERIOD PERIOD PERIOD James W. McGowan CALENDAR YEAR ☐ PAID 0 \$120 0 \$120 \$120 Aptos, CA 95003 RATE FORGIVEN PER ELECTION* 0 \$120 N/A 08/01/14 DATEDUE DATE INCURRED DCOM DOTH DPTY DSCC CALENDAR YEAR PAID RATE FORGIVEN PER ELECTION * DATE INCURRED DATE DUE O IND O COM O OTH O PTY O SCC CALENDAR YEAR PAID RATE FORGIVEN PER ELECTION* DATE INCURRED DATEDUE OCOM OTH OPTY OSCC SUBTOTALS \$ (Enter (e) on schedule B Summary Schedule E. Line 3) \$120.00 Loans received this period *Amounts forgiven or paid by (Total Column (b) plus unitemized loans less than \$100.) another party also must be reported on Schedule A. 0 Loans paid or forgiven this period\$ _ ** If required. (Total Column (c) plus loans under \$100 paid or forgiven.) (Include loans paid by a third party that are also itemized on Schedule A.) \$120.00 Enter the net here and on the Summary Page, Column A, Line 2. † Contributor Codes

PTY - Political Party

SCC - Small Contributor Committee

OTH – Other

Schedule C Vonmonetary Contributions Received

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE

Statement covers period
January 1, 2014
from
Sept. 30, 2014
through
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I.D. NUMBER

EE INSTRUCT	TIONS ON REVERSE				throug	h	2014	Page_7	7 of9
IAME OF FILE								1.D. NUMBI 136934	
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 GOODS OR SERV		AMOUNT/ FAIR MARKET VALUE	CUMULA DA CALENDA (JAN 1 -	TE AR YEAR	PER ELECTION TO DATE (IF REQUIRED)
09/10/14	Nels Westman Capitola., CA 95010	OIND OCOM OOTH OPTY OSCC	Retired	Consultant Services		\$666.66	\$	666.66	
		OIND OCOM OOTH OPTY OSCC							
		OIND OCOM OOTH OPTY OSCC							
		OIND OCOM OOTH OPTY OSCC							
Attach add	ditional information on appropriately labo	eled continuati	ion sheets.	SUBTO	TAL \$	\$666.66			
. Amount i (Include . Amount i Total non	e C Summary received this period – nonmonetary contribution all Schedule C subtotals.) received this period – unitemized nonmone amonetary contributions received this period	tary contributio	ns of less than \$100		\$	\$666.66 75.00 741.66	IND- COM OTH PTY SCC	Other Political P	Committee an PTY or SCC)
(Add Lin	es 1 and 2. Enter here and on the Summar	y Page, Colum	n A, Lines 4 and 10.)	ТОТА	L \$			EDDC I	Form 460 (June/01

Schedule E Payments Made

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

	SCHEDU
Statement covers period January 1, 2014	CALIFORNIA 46
Sept. 30, 2014	Page <u>8</u> of <u>9</u>
	1.D. NUMBER 1369341

EE INSTRUCTIONS ON REVERSE

M/D compoint parapharmalia/mica

campaign literature and mailings

IAME OF FILER

ΔD

McGowan for Water Board 2014

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

AVIL.	campaign paraphernalia/misc.	IVIDIC	member communications	KAD	radio airtime and production costs
:NS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
:ТВ	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
:VC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
ΊL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
'NID	fundraicing overte	DOL	nalling and contact research	TOO	skafflandere kannel ladeian and accela

MDD washaraassassiasa

fundraising events POL polling and survey research TRS staff/spc independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer PRO professional services (legal, accounting) VOT voter re

PRT print ads

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
Santa Cruz County Clerk Santa Cruz, CA 95060	FIL	Filing Fee	\$536.00
Pajaro Valley Printing Freedom, Ca 95019	LIT	Remittance Enveloped	\$183.37
Pajaro Valley Printing Freedom, CA 95019	LIT	Campaign signs and banners	\$1,641.24
Payments that are contributions or independent expenditures must al	Iso be summarized on	Schedule D. S	UBTOTAL \$ 2,360.61

Schedule E Summary

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

Unitemized payments made this period of under \$100

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

Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)

TOTAL \$

Schedule E Continuation Sheet)	Type or print Amounts may be to whole do	rounded		St	atement covers period January 1, 2014	CALIFO	RNIA 460
[∋] ayments Made	to whole do	iais.		from	Sept. 30, 2014	_	
EE INSTRUCTIONS ON REVERSE IAME OF FILER				throu	gh	I.D. NUMBE	
McGowan for Water Board 2014						1369341	
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CAMP campaign consultants contribution (explain nonmonetary)* CVC civic donations CL candidate filing/ballot fees ND fundraising events independent expenditure supporting/opposing others (explain)* EG legal defense IT campaign literature and mailings	MBR member com MTG meetings and OFC office expens PET petition circul PHO phone banks POL polling and s POS postage, deli	munications appearance ses ating urvey resea	es	RAD RFD SAL TEL TRC TRS TSF VOT	describe the payme radio airtime and product returned contributions campaign workers' salar t.v. or cable airtime and pcandidate travel, lodging, staff/spouse travel, lodging transfer between commit voter registration information technology or	ies production costs and meals ng, and meals tees of the sam	ne candidate/sponsc
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION	OF PAYMENT		AMOUNT PAID
Seascape Golf Club Aptos, CA 95002		FND	Campaign I	Cick Off			\$216.49
Payments that are contributions or independent expenditures must also	he summarized on S	Chedule D				SUBTOTAL \$	216.40

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

SUBTOTAL \$