

Recipient Committee
Campaign Statement
Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

FILED
SANTA CRUZ CO ELECTIONS

Date Stamp

CALIFORNIA
FORM 460

Page 1 of 12

For Official Use Only

Statement covers period

from 5/31/14

through 6/30/14

Date of election if applicable:

(Month, Day, Year)

11/4/14

28 PM 2:23

SEE INSTRUCTIONS ON REVERSE

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 Ballot Measure Committee
☐ Controlled
☐ Sponsored
(Also Complete Part 6)

- ☐ Primarily Formed Candidate/Officeholder Committee
(Also Complete Part 7)

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

I.D. NUMBER

1362000

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Terry Medina for Supervisor 2014

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

Watsonville CA 95076 831 254 7383

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

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

Ralph Miljanich

NAME OF TREASURER

MAILING ADDRESS

Watsonville CA 95076 831 254 7383

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

medinaforsupervisor@gmail.com

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 7/26/14

Date

Executed on 7-26-14

Date

Executed on

Date

Executed on

Date

By Ralph Miljanich

Signature of Treasurer or Assistant Treasurer

By Terry Medina

Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By

Signature of Controlling Officeholder, Candidate, State Measure Proponent

By

Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

State of California

Recipient Committee
Campaign Statement
Cover Page — Part 2

Type or print in ink.

FILED
SANTA CRUZ CO ELECTIONS

COVER PAGE - PART 2

CALIFORNIA
FORM 460

2014 JUL 28 PM 2:23

Page 2 of 12

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Terry Medina

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

Santa Cruz County Supervisor Distr. 4
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Watsonville CA 95076

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**

FILED
SANTA CRUZ CO ELECTIONS

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

SUMMARY PAGE

CALIFORNIA
FORM **460**

Statement covers period
from 5/31/14
through 6/30/14

Page 3 of 12

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Terry Medina For Supervisor 2014

I.D. NUMBER

1362000

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>4274</u> | \$ <u>50448</u> |
| 2. Loans Received | Schedule B, Line 3 | <u>—</u> | <u>—</u> |
| 3. SUBTOTAL CASH CONTRIBUTIONS | Add Lines 1 + 2 | \$ <u>4274</u> | \$ <u>50448</u> |
| 4. Nonmonetary Contributions | Schedule C, Line 3 | <u>—</u> | <u>450</u> |
| 5. TOTAL CONTRIBUTIONS RECEIVED | Add Lines 3 + 4 | \$ <u>—</u> | \$ <u>50898</u> |

**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 | \$ <u>—</u> | \$ <u>—</u> |
| 21. Expenditures Made | \$ <u>—</u> | \$ <u>—</u> |

Expenditures Made

| | | | |
|--|----------------------|----------------|-----------------|
| 6. Payments Made | Schedule E, Line 4 | \$ <u>6474</u> | \$ <u>50263</u> |
| 7. Loans Made | Schedule H, Line 3 | <u>—</u> | <u>—</u> |
| 8. SUBTOTAL CASH PAYMENTS | Add Lines 6 + 7 | \$ <u>6474</u> | \$ <u>50263</u> |
| 9. Accrued Expenses (Unpaid Bills) | Schedule F, Line 3 | <u>—</u> | <u>—</u> |
| 10. Nonmonetary Adjustment | Schedule C, Line 3 | <u>—</u> | <u>—</u> |
| 11. TOTAL EXPENDITURES MADE | Add Lines 8 + 9 + 10 | \$ <u>6474</u> | \$ <u>50263</u> |

**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 |
|--------------------------------|---------------|
| <u>—</u> / <u>—</u> / <u>—</u> | \$ <u>—</u> |
| <u>—</u> / <u>—</u> / <u>—</u> | \$ <u>—</u> |

Current Cash Statement

| | | |
|---|---|------------------|
| 12. Beginning Cash Balance | Previous Summary Page, Line 16 | \$ <u>13,995</u> |
| 13. Cash Receipts | Column A, Line 3 above | <u>4274</u> |
| 14. Miscellaneous Increases to Cash | Schedule I, Line 4 | <u>—</u> |
| 15. Cash Payments | Column A, Line 8 above | <u>6474</u> |
| 16. ENDING CASH BALANCE | Add Lines 12 + 13 + 14, then subtract Line 15 | \$ <u>11,795</u> |

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

| | | |
|------------------------------------|--------------------|-------------|
| 17. LOAN GUARANTEES RECEIVED | Schedule B, Part 2 | \$ <u>—</u> |
|------------------------------------|--------------------|-------------|

Cash Equivalents and Outstanding Debts

| | | |
|-----------------------------|---------------------------------------|-------------|
| 18. Cash Equivalents | See instructions on reverse | \$ <u>—</u> |
| 19. Outstanding Debts | Add Line 2 + Line 9 in Column B above | \$ <u>—</u> |

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.

Schedule A
Monetary Contributions Received

FILED
SANTA CRUZ CO ELECTIONS

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

SCHEDULE A

Statement covers period

from 5/31/14

through 6/30/14

CALIFORNIA
FORM

460

Page 4 of 12

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Terry Medina for Supervisor 2014

I.D. NUMBER

1362000

| 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) |
|---------------|---|--|---|-----------------------------|---|---------------------------------------|
| | <u>See Attached</u> | <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 | | | | |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| SUBTOTAL \$ | | | | | | |

Schedule A Summary

1. Amount received this period – itemized monetary contributions.

(Include all Schedule A subtotals.) \$ 3750

2. Amount received this period – unitemized monetary contributions of less than \$100 \$ 524

3. Total monetary contributions received this period.

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) TOTAL \$ 4274

*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

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

5 of 12

FILED

SANTA CRUZ CO ELECTIONS
 Rec'd this
 Period
 2014 JUL 28 PM 2: 23

| Date Rec'd | Name and Address | Contributor Code | Occupation | Rec'd this Period | Rec'd Election Period |
|------------|--|------------------|--------------------------------|----------------------|--------------------------|
| 6/1/2014 | Brady Dr., John Watsonville, CA. 95076 | IND | M.D. | \$ 400.00 | \$ 400.00 |
| 6/24/2014 | Bachan, P.W. Watsonville, CA 95076 | IND | Retired | \$ 100.00 | \$ 100.00 |
| 6/24/2014 | Gospodnetich, John Watsonville, CA. 95076 | IND | Consultant, Sakata Ranch | \$ 400.00 | \$ 400.00 |
| 6/24/2014 | Hudson, Hubert Watsonville, CA. 95076 | IND | Retired | \$ 100.00 | \$ 100.00 |
| 6/24/2014 | Jemison, Janis Capitola, CA. 95010 | IND | Self | \$ 100.00 | \$ 100.00 |
| 6/24/2014 | Jemison, Louis Capitola, CA. 95010 | IND | Owner, Hermitage Brewing | \$ 100.00 | \$ 100.00 |
| 6/24/2014 | Mathews, Cynthia Santa Cruz, CA. 95060 | IND | SC City Council | \$ 100.00 | \$ 100.00 |
| 6/24/2014 | Nickelson, Harvey Santa Cruz, CA. 95060 | IND | Retired | \$ 100.00 | \$ 100.00 |
| 6/24/2014 | Robbins, Steve Aptos, CA 95003 | IND | Retired | \$ 400.00 | \$ 400.00 |
| 6/24/2014 | Thirup, Arnie Aptos CA 95003 | IND | Retired | \$ 100.00 | \$ 100.00 |
| 6/27/2014 | Atchison, Rodney Santa Cruz, CA 95062 | IND | Retired | \$ 100.00 | \$ 100.00 |
| 6/27/2014 | Dale, Wally Santa Cruz, CA 95065 | IND | Retired | \$ 100.00 | \$ 100.00 |
| 6/27/2014 | Dobler, Ken Watsonville, CA 95076 | IND | Farmer | \$ 200.00 | \$ 200.00 |
| 6/27/2014 | Lease, Larry Watsonville, CA. 95077 | IND | Pres, AL Lease | \$ 100.00 | \$ 100.00 |
| 6/27/2014 | Maffia, Chuck Scotts Valley, CA. 95066 | IND | Banker, SCZC | \$ 150.00 | \$ 150.00 |
| 6/29/2014 | Bay Area MEC Campbell, CA. 95008 | COM | PAC | \$ 500.00 | \$ 500.00 |

FILED
SANTA CRUZ CO ELECTIONS

| | | | | | |
|-----------|---|-----|-------------|-------------|-------------|
| 6/29/2014 | Dufresne, John Capitola, CA. 95010 | IND | Retired | \$ 100.00 | \$ 100.00 |
| 6/29/2014 | Franich, Rocky and Judy Watsonville, CA. 95076 | IND | Bus, Owner | \$ 200.00 | \$ 200.00 |
| 6/29/2014 | Kane, John III Watsonville, CA., 95076 | IND | Ins. Broker | \$ 100.00 | \$ 100.00 |
| 6/29/2014 | Rogberg-Lavars, Susann Corralitos, CA. 95076 | IND | Retired | \$ 100.00 | \$ 100.00 |
| 6/29/2014 | Vaca, Franco Watsonville, CA 95077 | IND | Bus, Owner | \$ 200.00 | \$ 200.00 |
| | | | | \$ 3,750.00 | \$ 3,750.00 |

Schedule B – Part 1 Loans Received

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

SCHEDULE B - PART 1

Statement covers period
from 5/31/14
through 6/30/14

CALIFORNIA
FORM **460**

2014 JUL 28 PM 2: 23

Page 7 of 12

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Terry Medina for Supervisor 2014

I.D. NUMBER

1362000

| FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | (a) OUTSTANDING BALANCE BEGINNING THIS PERIOD | (b) AMOUNT RECEIVED THIS PERIOD | (c) AMOUNT PAID OR FORGIVEN THIS PERIOD* | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD | (e) INTEREST PAID THIS PERIOD | (f) ORIGINAL AMOUNT OF LOAN | (g) CUMULATIVE CONTRIBUTIONS TO DATE |
|--|---|--|------------------------------------|--|--|-----------------------------------|--|---|
| Terry Medina Watsonville, CA 95076 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Retired | \$ <u>5,000</u> | \$ <u>0</u> | <input type="checkbox"/> PAID \$ <u>0</u> <input type="checkbox"/> FORGIVEN \$ <u>0</u> | \$ <u>5,000</u> N/A DATE DUE | <u>0</u> % RATE \$ <u>0</u> | \$ <u>5,000</u> 11/20/13 DATE INCURRED | CALENDAR YEAR \$ <u>0</u> PER ELECTION** \$ <u>0</u> |
| Terry Medina Watsonville, CA 95076 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Retired | \$ <u>5,000</u> | \$ <u>0</u> | <input type="checkbox"/> PAID \$ <u>0</u> <input type="checkbox"/> FORGIVEN \$ <u>0</u> | \$ <u>5,000</u> N/A DATE DUE | <u>0</u> % RATE \$ | \$ <u>5,000</u> 12/31/13 DATE INCURRED | CALENDAR YEAR \$ <u>0</u> PER ELECTION** \$ <u>0</u> |
| / | | \$ | \$ | <input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN \$ | \$ DATE DUE | % RATE \$ | \$ DATE INCURRED | CALENDAR YEAR \$ PER ELECTION** \$ |
| † <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | | | | | |
| SUBTOTALS \$ | | | | | | | \$ | \$ |

Schedule B Summary

(Enter (e) on
Schedule E, Line 3)

- Loans received this period \$ 0
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period \$ 0
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (Subtract Line 2 from Line 1.) NET \$ 0
Enter the net here and on the Summary Page, Column A, Line 2.
(May be a negative number)

†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

*Amounts forgiven or paid by another party also must be reported on Schedule A.

** If required.

Schedule C
Nonmonetary Contributions Received

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

2014 JUL 28 PM 2: 23

SCHEDULE C

| | |
|--|-------------------------------|
| Statement covers period from <u>5/31/14</u> through <u>6/30/14</u> | CALIFORNIA FORM 460 |
| | Page <u>8</u> of <u>12</u> |
| I.D. NUMBER <u>1362000</u> | |

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Terry Medina for Supervisor 2014

| 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) |
|---------------|--|---|--|----------------------------------|---------------------------|---|------------------------------------|
| 1/30/14 | Welsh, Leo Watsonville, CA 95076 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Owner, Wooden Nickel | Food | 150 | 150 | |
| 3/26/14 | Yonts, Bjorg Sequel, CA 95073 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self, Artist | Use of home | 300 | 300 | |
| | | <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 | | | | | |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$

Schedule C Summary

- Amount received this period – itemized nonmonetary contributions.
(Include all Schedule C subtotals.) \$ 450
- Amount received this period – unitemized nonmonetary contributions of less than \$100 \$ —
- 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 \$ 450

*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

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

SCHEDULE C

| | |
|--|----------------------------|
| Statement covers period from <u>5/31/14</u> through <u>6/30/14</u> | CALIFORNIA FORM 460 |
| | Page <u>8</u> of <u>12</u> |
| I.D. NUMBER <u>1362000</u> | |

2014 JUL 28 PM 2: 23

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Terry Medina for Supervisor 2014

| 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) |
|---------------|--|---|--|----------------------------------|---------------------------|---|------------------------------------|
| 1/30/14 | Welsh, Leo Watsonville, CA 95076 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Owner, Wooden Nettle Taco | Food | 150 | | |
| 2/11/14 | Welsh, Leo Watsonville, CA 95076 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Owner, Wooden Nettle Taco | Food | 200 | 350 | |
| | | <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 | | | | | |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$

350

Schedule C Summary

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

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

2014 JUL 28 PM 2: 23

SCHEDULE E

Statement covers period

from 5/31/14

through 6/30/14

CALIFORNIA
FORM

460

Page 9 of 12

I.D. NUMBER

1362000

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Terry Medina for Supervisor 2014

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 |
|---|---------|------------------------|-------------|
| Victoria Medina Santa Cruz, CA 95060 | PRO | Photography | 250- |
| Kris Reyes Consulting Santa Cruz, CA 95060 | CNS | Campaign Consultant | 750- |
| Terris, Barnes & Watters San Francisco CA 94104 | LIT | Mailings & Literature | 5474- |

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

SUBTOTAL \$

Schedule E Summary

- Itemized payments made this period. (Include all Schedule E subtotals.) \$ 6474
- 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 G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
 Amounts may be rounded to whole dollars.
SANTA CRUZ CO ELECTIONS

SCHEDULE G

| | |
|--|-------------------------------|
| Statement covers period from <u>5/31/14</u> through <u>6/30/14</u> | CALIFORNIA FORM 460 |
| Page <u>10</u> of <u>12</u> | I.D. NUMBER <u>1362000</u> |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Terry Medina for Supervisor 2014 JUL 28 PM 2:24

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Terris Barnes & Walter

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 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 | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND 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) |

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

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| See attached | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 3063

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FILED
SANTA CRUZ CO ELECTIONS

2014 JUL 28 PM 2: 24

| | | | | | |
|--|-----------------------------------|-------------|-------------|--|--|
| <div><div>TERRIS BARNES WALTERS</div><div>POLITICAL MEDIA WITH PUNCH</div></div> | | | | | |
| To: | Kris Reyes, Medina for Supervisor | | | | |
| From: | Terris, Barnes & Walters | | | | |
| Subject: | Subvendor Breakdown | | | | |
| Date: | July 16, 2014 | | | | |
| Bill Date: May 26, 2014 - Hats | | | | | |
| | USPS - CAPS | \$ 883.98 | Postage | | |
| | San Mateo, CA 94497 | | | | |
| Bill Date: May 26, 2014 - Magnet | | | | | |
| | USPS - CAPS | \$ 849.09 | Postage | | |
| | San Mateo, CA 94497 | | | | |
| Bill Date: May 26, 2014 - Dennis Hearne Photographer | | | | | |
| | Dennis Hearne Photography | \$ 1,330.00 | Photography | | |

FILED
SANTA CRUZ CO ELECTIONS

2014 JUL 28 PM 2: 24

| | | | |
|--|-------------------------|--|--|
| | San Francisco, CA 94133 | | |
| | | | |
| Notes: | | | |
| <i>for use in completing Schedule G of Form 460</i> | | | |
| <i>any subvendors paid less than \$500 are not required to be reported</i> | | | |