COVER PAGE

Recipient Committee Campaign Statement Cover Page

SEE INSTRUCTIONS ON REVERSE

Statement covers period from January 1, 2016 through September 25

Date of election if applicable: (Month, Day, Year) November 8, 2016

Date Stamp: City of Grover Bea OCT 31 2016 RECEIVED

CALIFORNIA FORM 460

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For Official Use Only

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)
- [x] Amendment (Explain below)
- [ ] Quarterly Statement
- [ ] Special Odd-Year Report

Amending pages 1 & 4 to show correct title/FPPC ID for contribution from Committee to Re-ELect Jeff Lee Grover Beach City Council.

3. Committee Information

I.D. NUMBER: 1390184

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE): John Shoals for Grover Beach Mayor 2016

STREET ADDRESS (NO P.O. BOX): [redacted]

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Grover Beach	CA	93433	[redacted]

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX: P.O. Box 919

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Grover Beach	CA	93483	[redacted]

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER: Andrew Carlson

MAILING ADDRESS: [redacted]

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Paso Robles	CA		93446

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 10/31/2016 (Date) By [redacted] (Signature of Treasurer or Assistant Treasurer)

Executed on 10/31/2016 (Date) By [redacted] 10/31/2016 (Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor)

Executed on _____ (Date) By [redacted] (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

Statement covers period
from January 1,2016
through Sept. 25, 2016

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
John Shoals for Grover Beach Mayor 2016

I.D. NUMBER
1390184

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)
9/20	Garcia Bello [redacted] Grover Beach, CA 93433	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$100.00	$100.00	
9/20	SLO County Democratic Party ID#742552 549 Madison Ave. Sacramento, CA 95841	☐ IND ☐ COM ☐ OTH ☑ PTY ☐ SCC		$300.00	$300.00	
9/21	Brenda Shoals [redacted] Fresno, CA 93726	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$100.00	$100.00	
9/24	Nancy J. Allison [redacted] Grover Beach, CA 93433	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Realtor Nancy Allison Homes/ Taylor Hoving Realty	$200.00	$200.00	
9/25	Committee to Re-Elect Jeff Lee Grover Beach City Council ID#1377604 [redacted] Grover Beach, CA 93433	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC		$200.00	$200.00	
			SUBTOTAL $			

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 1000.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 417.14
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL $ 1,417.14

*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