Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in	ink.	Date Stamp  RECEIVEL	CALIFORNIA 460 2001/02 FORM
(	Statement covers period from Oct 23, 2012	Date of election if applicable: (Month, Day, Year)	JAN 2 8 2013	Page1 6 For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through Dec 31, 2012	Nov 6 2012	CITY OF SAUSALITC	
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	omplete Parts 1, 2, 3, and 4.  Ballot Measure Committee  Primarily Formed  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 Amendment (Explain b	t ☐ Speci ☐ Supp	erly Statement al Odd-Year Report lemental Preelection ment - Attach Form 495
3. Committee Information  COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)	D. NUMBER	Treasurer(s)		
Tom Theodores for Sausalito City Council 2012		NAME OF TREASURER Patricia Smith MAILING ADDRESS		-
STREET ADDRESS (NO P.O. BOX)  CITY STATE ZIP CO	DDE AREA CODE/PHONE	CITY Sausalito NAME OF ASSISTANT TREASU	STATE ZIP CO CA 9401 RER, IF ANY	
Sausalito CA 94968 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. B		MAILING ADDRESS		**************************************
CITY STATE ZIP CO Sausalito CA 94966		CITÝ	STATE ZIP CO	DDE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDR	RESS	
4. Verification I have used all reasonable diligence in preparing and review certify under penalty of perjury under the laws of the State of the Sta	of California that the foregoing is true a	y knowledge the information contain and correct.  Signature of Deasure of Assistant and Controlling Officeholder, Candidate, State Measure Pro-Signature of Controlling Officeholder, Candidate, State Measure Pro-Signature Officeholder, Candidate, Candi	Treasurer opponent or Responsible Officer of Sponsor	chedules is true and complete. I
Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, S	State Measure Proponent FPI	FPPC Form 460 (June/01) PC Toll-Free Helpline: 866/ASK-FPPC State of California

	NAME OF BALLOT MEASURE  BALLOT NO. OR LETTER  Identify the controlling office	JURISDICTION		SUPPORT OPPOSE			
	Identify the controlling offic						
	Identify the controlling offic						
		eholder, candidate		OPPOSE			
		eholder, candidate					
			e, or state measur	e proponent, if any.			
	NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT						
	OFFICE SOUGHT OR HELD		DISTRICT N	D. IF ANY			
7.	Primarily Formed Comm	nittee / ist names	of officeholder(s) o	r candidato(s) for			
	which this committee is primar	rlly formed.	or ornoundation of				
	NAME OF OFFICEHOLDER OR CA	NDIDATE OFFI	CE SOUGHT OR HELÎ	SUPPORT OPPOSE			
	NAME OF OFFICEHOLDER OR CA	NDIDATE OFFI	CE SOUGHT OR HELI	SUPPORT OPPOSE			
	NAME OF OFFICEHOLDER OR CA	NDIDATE OFFI	CE SOUGHT OR HELI	SUPPORT OPPOSE			
	NAME OF OFFICEHOLDER OR CA	NDIDATE OFFI	CE SOUGHT OR HELI	SUPPORT OPPOSE			
	Attach	continuation she	nats if narassem				
	7.	7. Primarily Formed Communich this committee is primarily NAME OF OFFICEHOLDER OR CANAME OR CANAME OFFICEHOLDER OR CANAME OFFICEHOLDER OR CANAME OFFICEHOLD	7. Primarily Formed Committee List names which this committee is primarily formed.  NAME OF OFFICEHOLDER OR CANDIDATE OFFI  NAME OF OFFICEHOLDER OR CANDIDATE OFFI  NAME OF OFFICEHOLDER OR CANDIDATE OFFI  NAME OF OFFICEHOLDER OR CANDIDATE OFFI	7. Primarily Formed Committee List names of officeholder(s) of which this committee is primarily formed.  NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELE  NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELE  NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELE			

## **Campaign Disclosure Statement Summary Page**

Type or print in ink.

Amounts may be rounded to whole dollars.

 Statement covers period from \_\_Oct 23, 2012
 CALIFORNIA FORM
 460

 through \_\_Dec 31, 2012
 Page \_\_3 \_\_of \_\_6

FPPC Toll-Free Helpline: 866/ASK-FPPC

SUMMARY PAGE

through . SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Tom Theodores for Sausalito City Council 2012 1351439 Column A **Calendar Year Summary for Candidates** Column B **Contributions Received** TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE **General Elections** 798.00 2,999.00 1. Monetary Contributions ...... Schedule A, Line 3 \$ 1/1 through 6/30 7/1 to Date 2,184.27 7,184.27 2. Loans Received ...... Schedule B. Line 3 2,982.27 20. Contributions 10,183.27 Received 4. Nonmonetary Contributions ...... Schedule C, Line 3 21. Expenditures 2,982,27 10,183.27 Made **Expenditures Made Expenditure Limit Summary for State** 6. Payments Made ...... Schedule E, Line 4 \$ 10,183,27 **Candidates** 7. Loans Made ...... Schedule H, Line 3 22. Cumulative Expenditures Made\* 5,101.72 10,183,27 8. SUBTOTAL CASH PAYMENTS ...... Add Lines 6 + 7 \$ (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy) 10. Nonmonetary Adjustment ...... Schedule C, Line 3 5,101.72 10.183.27 **Current Cash Statement** 2,119.45 12. Beginning Cash Balance ...... Previous Summary Page, Line 16 \$ \_\_\_\_ To calculate Column B. add 2,982.27 13. Cash Receipts ...... Column A, Line 3 above amounts in Column A to the corresponding amounts 14. Miscellaneous Increases to Cash ...... Schedule I. Line 4 from Column B of your last report. Some amounts in 5,101.72 15. Cash Payments ...... Column A. Line 8 above Column A may be negative 16. ENDING CASH BALANCE .......... Add Lines 12 + 13 + 14, then subtract Line 15 figures that should be 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 17. 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). 7,184.27 19. Outstanding Debts ...... Add Line 2 + Line 9 in Column B above \$ FPPC Form 460 (June/01)

## Schedule A Monetary Contributions Received

Type or print in ink.

Amounts may be rounded

SCHEDULE A

wonetary Contributions Received		to	whole dollars.	from Oct 2	californ , 2012 FORM			<sup>14</sup> 460	
SEE INSTRUCTION	NS ON REVERSE			through Dec	31, 2012	Page _	of	6	
	ores for Sausalito City Council 2012					1.D. NUI 13514			
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 (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTIO TO DATE (IF REQUIRE)		
11/6/2012	Jefferey Scharoshch, Sausalito, CA 94965	MIND COM OTH PTY SCC	Manager, Spinnaker Restaurant	250.00	250.00				
11/7/2012	Bruce, Huff, Sausalito, CA 94965	MIND COM OTH PTY SCC	Property Manager, Kimber Management	250.00	250	0.00			
12/29/2012	Marin Democratic Party	□IND □COM □OTH <b>X</b> PTY □SCC		100.00	100	0.00			
		□IND □COM □OTH □PTY □SCC							
·		□IND □COM □OTH □PTY □SCC							
			SUBTOTAL \$	600.00					
1. Amount red	A Summary ceived this period – contributions of \$100 or more. Schedule A subtotals.)		\$	600.00	IND-		I nt Committee		
2. Amount received this period – unitemized contributions of less than \$100\$						(other than PTY or SCC) OTH – Other PTY – Political Party			
	tary contributions received this period. 1 and 2. Enter here and on the Summary Page, Colu	mn A, Line 1.)	) <b>TOTAL</b> \$	798.00	scc	-Small C	ontributor Commi	ittee	

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

0.1. I I D. D. 44	Type or print in ink.				SCHEDULE B - PART				
Schedule B – Part 1 Loans Received	Amounts may be rounded to whole dollars.				Statement cov	ers period 3, 2012	CALIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE					through Dec	31, 2012	Page 5	of6	
NAME OF FILER				<del></del>		······································	I.D. NUMBER		
Tom Theodores for Sausalito City Counc	oil 2012						1351439		
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IFCOMMITTEE, 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 PAI OR FORGIVE THIS PERIO	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE	
Thomas Theodores	Retired			PAID	<u> </u>		1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	CALENDAR YEAR	
momas modures	TKOIII OG			\$102.41	1 8 0	0	s	\$	
				FORGIVEN		RATE		PER ELECTION*	
		5,000.00	2,286.68						
<sup>†</sup> ⊠ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	* * * * * * * * * * * * * * * * * * * *		V	V	DATE DUE	, <u> </u>	DATE INCURRED	Ψ	
				☐ PAID				CALENDAR YEAR	
				\$	_ s	%	\$	\$	
				FORGIVEN		RATE	· ·	PER ELECTION *	
		\$	s	s	_	\$		\$	
†□ IND □ COM □ OTH □ PTY □ SCC					DATE DUE		DATE INCURRED		
				☐ PAID				CALENDARYEAR	
				\$ <u></u>	_ \$	%	\$	\$	
				FORGIVEN		RATE		PER ELECTION*	
		\$	\$	s	_	\$		\$	
TO IND COM OTH PTY SCC				<u> </u>	DATE DUE		DATE INCURRED		
		SUBTOTALS	2,286,68	\$ 102.4	1 \$ 0	\$		(F)	
Schedule B Summary						(Enter (e) on Schedule E, Line 3)			
•				<b>ው</b>	2,286.68				
<ol> <li>Loans received this period</li></ol>		**************	*****************	Ф		-		rgiven or paid by	
	•				102.41			y also must be Schedule A.	
2. Loans paid or forgiven this period		*****************	*******************	\$	102.41		** If you like a	1	
(Total Column (c) plus loans under \$100 (Include loans paid by a third party that		fule A )					** If required		
• • • • • • • • • • • • • • • • • • • •	*	•			0.404.07				
3. Net change this period. (Subtract Line	2 from Line 1.)	******************	*****************	. NET \$ _	2,184.27 (May be a negative number)				
Enter the net here and on the Summary	/ Page, Column A, Line 2.								

IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

† Contributor Codes

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

Schedule E Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.			Statem	ent covers period		CALIFORNIA 460	
				from	Oct 23, 2012	- FO	RIVI 100	
SEE INSTRUCTIONS ON REVERSE				through	Dec 31, 2012	Page	6 of6	
NAME OF FILER						I.D. NUI	VIBER .	
Tom Theodores for Sausalito City Council 2012						135143	19	
CODES: If one of the following codes accurately describes campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* cvc civic donations candidate filing/ballot fees fND fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and s POS postage, del	munications d appearance ses lating survey researe ivery and me	S	RAD radio RFD retul SAL cam TEL t.v. c TRC canc TRS staff TSF trans VOT vote	ibe the payment.  o airtime and production med contributions paign workers' salaries or cable airtime and pro lidate travel, lodging, ar spouse travel, lodging, for between committee or registration mation technology cost	duction cost duction cost nd meals and meals os of the sal	me candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE (	PR DESC	CRIPTION OF F	PAYMENT	•	AMOUNT PAID	
Stephen Hamilton		POS	Postage for Maile	r	4.4.		733.50	
Colorprint Burlingame CA		LIT	Mailer				1,807.22	
Crescent Creative Burlingame CA		CNS	Campaign Consul	tancy			2,535.00	
* Payments that are contributions or independent expenditures r	nust also be summ	arized on S	chedule D.		SI	UBTOTAL \$	5,075.72	
Schedule E Summary								
1. Payments made this period of \$100 or more. (Include all So	chedule E subtotal	s.)	*****************************	**************		\$	5,075.72	
2. Unitemized payments made this period of under \$100	•••••		********	********	*************	\$ <u></u>	26.00	
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)						0		

5,101.72