Recipients Committee
Campaign Statement
Cover Page

Statement covers period
from 10-23-16
through 12-31-16

Date of election if applicable:
(Month, Day, Year)
11-08-16

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.
☐ Officeholder, Candidate Controlled Committee
☐ State Candidate Election Committee
☐ Recall
☐ Primarily Formed Ballot Measure Committee
☐ Controlled
☐ Sponsored
☐ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☐ Political Party/Central Committee
☐ Primarily Formed Candidate/Officeholder Committee

2. Type of Statement:
☐ Pre-election Statement
☐ Semi-annual Statement
☐ Quarterly Statement
☐ Special Odd-Year Report
☐ Termination Statement
☐ (Also file a Form 410 Termination)
☐ Amendment (Explain below)

3. Committee Information

I.D. NUMBER 1389715

COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE)
Committee for Elect Peter De Domenico as Oxnard City Clerk 2016

STREET ADDRESS (NO P.O. BOX)
1024 Corte Primavera

CITY Oxnard
STATE CA
ZIP CODE 93030
AREA CODE/PHONE 805-479-8090

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

CITY
STATE
ZIP CODE
AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS
peter.dedomenico@gmail.com

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 11-31-16
By
Signature of Treasurer or Assistant Treasurer

Executed on 11-31-16
By
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on
By
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on
By
Signature of Controlling Officeholder, Candidate, State Measure Proponent

CALIFORNIA FORM 460
Page 1 of 4
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www.fppc.ca.gov
5. Officeholder or Candidate Controlled Committee

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Peter de Domenico</td>
<td></td>
</tr>
</tbody>
</table>

| OFFICE Sought OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) |
| City Clerk City of Oxnard         |

<table>
<thead>
<tr>
<th>RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP</th>
</tr>
</thead>
<tbody>
<tr>
<td>1024 Conte Primavera</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oxnard CA 93035</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>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.</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMMITTEE NAME</td>
</tr>
<tr>
<td>----------------</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME OF TREASURER</th>
<th>CONTROLLED COMMITTEE?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐ YES ☐ NO</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
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</table>

6. Primarily Formed Ballot Measure Committee

<table>
<thead>
<tr>
<th>NAME OF BALLOT MEASURE</th>
<th>BALLOT NO. OR LETTER</th>
<th>JURISDICTION</th>
<th>☐ SUPPORT</th>
<th>☐ OPPOSE</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Identify the controlling officeholder, candidate, or state measure proponent, if any.</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF OFFICEHOLDER, CANDIDATE, OR PROONENT</td>
</tr>
<tr>
<td>------------------------------------------------</td>
</tr>
</tbody>
</table>

7. Primarily Formed Candidate/Officeholder Committee

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
<th>☐ SUPPORT</th>
<th>☐ OPPOSE</th>
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</thead>
</table>

<table>
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<tr>
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</tr>
</thead>
</table>

Attach continuation sheets if necessary
**Contributions Received**

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A TOTAL IN PERIOD</th>
<th>Column B CALENDAR YEAR TOTAL TO DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monetary Contributions</td>
<td>$700</td>
<td>$5097</td>
</tr>
<tr>
<td>Loans Received</td>
<td>(2000)</td>
<td>2000</td>
</tr>
<tr>
<td>Subtotal Cash Contributions</td>
<td>$1-1240</td>
<td>7097</td>
</tr>
<tr>
<td>Nonmonetary Contributions</td>
<td>4</td>
<td>501</td>
</tr>
<tr>
<td>Total Contributions Received</td>
<td>(-1240)</td>
<td>7598</td>
</tr>
</tbody>
</table>

**Expenditures Made**

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payments Made</td>
<td>$1227.82</td>
<td>$5856.85</td>
</tr>
<tr>
<td>Loans Made</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Subtotal CASH PAYMENTS</td>
<td>$1227.82</td>
<td>$5856.85</td>
</tr>
<tr>
<td>Accrued Expenses (Unpaid Bills)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nonmonetary Adjustment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total EXPENDITURES MADE</td>
<td>$1227.82</td>
<td>$5854.85</td>
</tr>
</tbody>
</table>

**Current Cash Statement**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginning Cash Balance</td>
<td>$1907.97</td>
</tr>
<tr>
<td>Cash Receipts</td>
<td></td>
</tr>
<tr>
<td>Miscellaneous Increases to Cash</td>
<td></td>
</tr>
<tr>
<td>Cash Payments</td>
<td>$1227.82</td>
</tr>
<tr>
<td>Ending Cash Balance</td>
<td></td>
</tr>
</tbody>
</table>

**Cash Equivalents and Outstanding Debts**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash Equivalents</td>
<td></td>
</tr>
<tr>
<td>Outstanding Debts</td>
<td></td>
</tr>
</tbody>
</table>

**Calendar Year Summary for Candidates Running in Both the State Primary and General Elections**

1. Through 6/30: $1/ through 6/30: 7/1 to Date

20. Contributions Received: $____

21. Expenditures Made: $____

**Expenditure Limit Summary for State Candidates**

22. Cumulative Expenditures Made:

   (If Subject to Voluntary Expenditure Limit)

<table>
<thead>
<tr>
<th>Date of Election</th>
<th>Total to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$_____</td>
</tr>
</tbody>
</table>

*Amounts in this section may be different from amounts reported in Column B.
### Schedule A Summary

1. Amount received this period – Itemized monetary contributions. 
   (Include all Schedule A subtotals.) .................................................. $ 50
2. Amount received this period – Unitemized monetary contributions of less than $100 .................................................. $ 70
3. Total monetary contributions received this period. 
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .................................................. TOTAL $ 760

*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

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### Schedule B - Part 1

**Loans Received**

**Statement covers period**

- from **10-23-16**
- through **12-31-16**

**Committee**

**Peter DeAndrea**

**City**

**Oakland**

**Year**

**2016**

**I.D. NUMBER**

**1389715**

**FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER**

- **Steven Ortiz**
  - 3663 Belmont Lane
  - Oakland, CA 94606

**IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)**

- Longshore worker
- Pacific Maritime Association

**Number of Loans**

1.

**OUTSTANDING BALANCE BEGINNING THIS PERIOD**

- **$2,000**

**AMOUNT RECEIVED THIS PERIOD**

- **$2,000**

**AMOUNT PAID OR FORGIVEN THIS PERIOD**

- **$1,240.15**
  - PAID
  - **$759.85** FORGIVEN

**OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD**

- DATE DUE

**INTEREST PAID THIS PERIOD**

- **$0.00**
  - **0.0%** RATE

**ORIGINAL AMOUNT OF LOAN**

- **$2,000**

**CUMULATIVE CONTRIBUTIONS TO DATE**

- **$2,000**
  - CALENDAR YEAR
  - PER ELECTION**

**SUBTOTALS**

- **$2,000**

---

**Schedule B Summary**

1. Loans received this period
   
   (Total Column (b) plus unitemized loans of less than $100.)

   ...

2. Loans paid or forgiven this period
   
   (Total Column (c) plus loans under $100 paid or forgiven.)

   (Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.)

   Enter the net here and on the Summary Page, Column A, Line 2.

   **NET $(-2000)**

---

*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 E
### Payments Made

**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)

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facebook Ads</td>
<td>WEB</td>
<td></td>
<td>783.04</td>
</tr>
<tr>
<td>1 Hacker Way Menlo Park, CA</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stratix Networks</td>
<td>PRO</td>
<td>Robocalls</td>
<td>308.27</td>
</tr>
<tr>
<td>742 Upper James St. Suite 207 Hamilton, Ontario L8E 3X2</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**SUBTOTAL $ 1091.31**

### Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) $ 1091.31
2. Unitemized payments made this period of under $100. $ 136.51
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) $ 1227.82
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) $ 1227.82

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