

**Recipient Committee
Campaign Statement
Summary Page**

Amounts may be rounded
to whole dollars.

Statement covers period
from 01-01-2017
through 06-30-2017

SHORT FORM
**CALIFORNIA
FORM 450**
Page 2 of 2

NAME OF COMMITTEE :

San Marcos Mobilehome Residents Association Political Action Committee

I.D. NUMBER

950884

Expenditures Made

1. Expenditures of \$100 or more made this period	\$ <u>0.00</u>
2. Expenditures under \$100 made this period (Not itemized.).....	<u>0.00</u>
3. SUBTOTAL EXPENDITURES MADE THIS PERIOD.....	\$ <u>0.00</u>
4. Nonmonetary Adjustment.....	<u>0.00</u>
5. Total expenditures made from previous statement	<i>Previous Summary Page, Line 6</i>
(If this is the first statement for the calendar year, enter zero.)	\$ <u>0.00</u>
6. TOTAL EXPENDITURES MADE TO DATE	<i>Add Lines 3 + 4 + 5</i> \$ <u>0.00</u>

Contributions Received

7. Monetary contributions received this period.....	\$ <u>0.00</u>
8. Non-monetary contributions received this period.....	<u>0.00</u>
9. Total contributions received from previous statement.....	<i>Previous Summary Page, Line 10</i>
(If this is the first statement for the calendar year, enter zero.)	\$ <u>0.00</u>
10. TOTAL CONTRIBUTIONS RECEIVED TO DATE	<i>Add Lines 7 + 8 + 9</i> \$ <u>0.00</u>

Current Cash Statement

11. Beginning cash balance	<i>Previous Summary Page, Line 15</i>	\$ <u>6,889.76</u>
12. Cash receipts this period.....	<i>Line 7 above</i>	<u>0.00</u>
13. Miscellaneous increases to cash		\$ <u>0.00</u>
14. Cash expenditures this period.....	<i>Line 3 above</i>	<u>0.00</u>
15. ENDING CASH BALANCE THIS PERIOD	<i>Add Lines 11 + 12 + 13, then subtract Line 14</i>	\$ <u>6,889.76</u>

Recipient Committee Campaign Statement Summary Page

Amounts may be rounded to whole dollars.

SHORT FORM

Statement covers period
from 7/01/17
through 12/31/17

**CALIFORNIA
FORM**

450

Page 1 of 3

I.D. NUMBER

950884

Expenditures Made

1. Expenditures of \$100 or more made this period	\$	00.00
2. Expenditures under \$100 made this period (Not itemized.)		00.00
3. SUBTOTAL EXPENDITURES MADE THIS PERIOD.....	Add Lines 1 + 2	\$ 00.00
4. Nonmonetary Adjustment.....	From Line 8 Below	
5. Total expenditures made from previous statement	Previous Summary Page, Line 6	\$
(If this is the first statement for the calendar year, enter zero.)		
6. TOTAL EXPENDITURES MADE TO DATE	Add Lines 3 + 4 + 5	\$

Contributions Received

7. Monetary contributions received this period..... \$ 00.00
8. Non-monetary contributions received this period..... 00.00
9. Total contributions received from previous statement..... *Previous Summary Page, Line 10* \$ _____
(If this is the first statement for the calendar year, enter zero.)
10. TOTAL CONTRIBUTIONS RECEIVED TO DATE *Add Lines 7 + 8 + 9* \$ 00.00

Current Cash Statement

11. Beginning cash balance	Previous Summary Page, Line 15	\$ 6891.70
12. Cash receipts this period.....	Line 7 above	00.00
13. Miscellaneous increases to cash		\$ 00.00
14. Cash expenditures this period.....	Line 3 above	00.00
15. ENDING CASH BALANCE THIS PERIOD	<i>Add Lines 11 + 12 + 13, then subtract Line 14</i>	\$ 6891.70

**Recipient Committee
Campaign Statement – Short Form**

Amounts may be rounded
to whole dollars.

Statement covers period
from 7/01/17

SHORT FORM

CALIFORNIA
FORM

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SEE INSTRUCTIONS ON REVERSE

NAME OF COMMITTEE

through 12/31/17

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I.D. NUMBER

950884

5. Payments Made *(If more space is needed, use additional copies of this page for continuation sheets.)*

DATE*	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF PAYMENT	NAME OF CANDIDATE AND OFFICE OR NAME OF BALLOT MEASURE AND BALLOT NUMBER OR LETTER AND JURISDICTION	AMOUNT THIS PERIOD	CUMULATIVE AMOUNTS TO DATE*
					Calendar Year \$ _____ Other _____
			<input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.		\$ _____
			<input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.		Calendar Year \$ _____ Other _____
			<input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.		\$ _____
			<input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.		Calendar Year \$ _____ Other _____
			<input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.		\$ _____
SUBTOTAL \$					

* Required only for payments which are contributions or independent expenditures.