

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

|   |   |
|---|---|
| Date Stamp<br><b>Received</b><br><b>OCT 28 2011</b><br><b>Town of San Anselmo</b> | <b>CALIFORNIA</b><br><b>FORM</b><br><b>460</b>      |
|   | Page <u>1</u> of <u>13</u><br>For Official Use Only |

|   |  |
|---|--|
| Statement covers period<br>from <u>9/25/11</u><br>through <u>10/27/11</u> | Date of election if applicable:<br>(Month, Day, Year)<br><u>11/08/11</u> |
|---|--|

SEE INSTRUCTIONS ON REVERSE

**1. Type of Recipient Committee:** All Committees - Complete Parts 1, 2, 3, and 4.

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee<br><input type="checkbox"/> State Candidate Election Committee<br><input type="checkbox"/> Recall<br><i>(Also Complete Part 5)</i> | <input type="checkbox"/> Primarily Formed Ballot Measure Committee<br><input type="checkbox"/> Controlled<br><input type="checkbox"/> Sponsored<br><i>(Also Complete Part 6)</i> |
| <input type="checkbox"/> General Purpose Committee<br><input type="checkbox"/> Sponsored<br><input type="checkbox"/> Small Contributor Committee<br><input type="checkbox"/> Political Party/Central Committee      | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee<br><i>(Also Complete Part 7)</i>  |

**2. Type of Statement:**

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Preelection Statement                                   | <input type="checkbox"/> Quarterly Statement                                  |
| <input type="checkbox"/> Semi-annual Statement  | <input type="checkbox"/> Special Odd-Year Report                              |
| <input type="checkbox"/> Termination Statement<br><i>(Also file a Form 410 Termination)</i> | <input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
| <input type="checkbox"/> Amendment (Explain below)  |   |

**3. Committee Information**

I.D. NUMBER  
**1341985**

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

**Campaign to Re-Elect Ford Greene, San Anselmo 2011**

STREET ADDRESS (NO P.O. BOX)

|                    |           |              |                 |
|--------------------|-----------|--------------|-----------------|
| CITY               | STATE     | ZIP CODE     | AREA CODE/PHONE |
| <b>San Anselmo</b> | <b>CA</b> | <b>94960</b> |                 |

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)**

NAME OF TREASURER

|                    |           |              |                 |
|--------------------|-----------|--------------|-----------------|
| CITY               | STATE     | ZIP CODE     | AREA CODE/PHONE |
| <b>San Anselmo</b> | <b>CA</b> | <b>94960</b> |                 |

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 and belief the information furnished hereon and the 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.

ned schedules is true and complete. I certify

Executed on 10/28/11  
Date

By \_\_\_\_\_

Executed on 10/28/11  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent of Sponsor

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Recipient Committee  
Campaign Statement  
Cover Page — Part 2**

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA  
FORM **460**

Page 2 of 13

**5. Officeholder or Candidate Controlled Committee**

|  |      |       |     |
|--|------|-------|-----|
| NAME OF OFFICEHOLDER OR CANDIDATE  |      |       |     |
| Ford Greene  |      |       |     |
| OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) |      |       |     |
| San Anselmo Town Council   |      |       |     |
| RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)                              | CITY | STATE | ZIP |
| San Anselmo CA 94960   |      |       |     |

**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?<br><input type="checkbox"/> YES <input type="checkbox"/> 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?<br><input type="checkbox"/> YES <input type="checkbox"/> 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        | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> 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 | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
|                                   |                       |   |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
|                                   |                       |   |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
|                                   |                       |   |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
|                                   |                       |   |

*Attach continuation sheets if necessary*

**Campaign Disclosure Statement  
Summary Page**

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

SUMMARY PAGE

|  |                               |
|--|-------------------------------|
| Statement covers period<br>from <u>9/25/11</u> | CALIFORNIA<br>FORM <b>460</b> |
| through <u>10/27/11</u>                        |                               |
| Page <u>3</u> of <u>13</u>                     | I.D. NUMBER<br><b>1341985</b> |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Campaign to Re-Elect Ford Greene, San Anselmo 2011

**Contributions Received**

|   | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|---|--|--|
| 1. Monetary Contributions ..... Schedule A, Line 3    | \$ <u>5399.00</u>  | \$ <u>5499.00</u>                          |
| 2. Loans Received ..... Schedule B, Line 3            | <u>4000.00</u>   | <u>4000.00</u>                             |
| 3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1 + 2  | \$ <u>9399.00</u>  | \$ <u>9499.00</u>                          |
| 4. Nonmonetary Contributions ..... Schedule C, Line 3 | <u>0</u>   | <u>0</u>                                   |
| 5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 + 4 | \$ <u>9399.00</u>  | \$ <u>9499.00</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 | \$ _____         | \$ _____    |
| 21. Expenditures Made      | \$ _____         | \$ _____    |

**Expenditures Made**

|   | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|---|--|--|
| 6. Payments Made ..... Schedule E, Line 4                   | \$ <u>5261.46</u>  | \$ <u>5261.46</u>                          |
| 7. Loans Made ..... Schedule H, Line 3                      | <u>0</u>   | <u>0</u>                                   |
| 8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7             | \$ <u>5261.46</u>  | \$ <u>5261.46</u>                          |
| 9. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3 | <u>2634.00</u>   | <u>3869.00</u>                             |
| 10. Nonmonetary Adjustment ..... Schedule C, Line 3         | <u>0</u>   | <u>0</u>                                   |
| 11. TOTAL EXPENDITURES MADE ..... Add Lines 8 + 9 + 10      | \$ <u>5261.46</u>  | \$ <u>5261.46</u>                          |

**Expenditure Limit Summary for State  
Candidates**

**22. Cumulative Expenditures Made\***  
(If Subject to Voluntary Expenditure Limit)

| Date of Election<br>(mm/dd/yy) | Total to Date |
|--------------------------------|---------------|
| ____/____/____                 | \$ _____      |
| ____/____/____                 | \$ _____      |

**Current Cash Statement**

|   |                   |
|---|-------------------|
| 12. Beginning Cash Balance ..... Previous Summary Page, Line 16             | \$ <u>100.00</u>  |
| 13. Cash Receipts ..... Column A, Line 3 above                              | <u>9399.00</u>    |
| 14. Miscellaneous Increases to Cash ..... Schedule I, Line 4                | <u>0</u>          |
| 15. Cash Payments ..... Column A, Line 8 above                              | <u>5261.46</u>    |
| 16. ENDING CASH BALANCE ..... Add Lines 12 + 13 + 14, then subtract Line 15 | \$ <u>4237.54</u> |

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

|   |             |
|---|-------------|
| 17. LOAN GUARANTEES RECEIVED ..... Schedule B, Part 2 | \$ <u>0</u> |
|---|-------------|

**Cash Equivalents and Outstanding Debts**

|   |                   |
|---|-------------------|
| 18. Cash Equivalents ..... See instructions on reverse            | \$ <u>0</u>       |
| 19. Outstanding Debts ..... Add Line 2 + Line 9 in Column B above | \$ <u>3869.00</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**

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

SCHEDULE A

|   |                                |
|---|--------------------------------|
| Statement covers period<br>from <u>9/25/11</u><br>through <u>10/27/11</u> | <b>CALIFORNIA<br/>FORM 460</b> |
|   | Page <u>4</u> of <u>13</u>     |
| I.D. NUMBER<br>1341985  |                                |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Campaign to Re-Elect Ford Greene, San Anselmo 2011

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *   | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|--|---|-----------------------------|--|---------------------------------------|
|                    | INTENTIONALLY OMITTED   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   |                             |  |                                       |
|                    | INTENTIONALLY OMITTED   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   |                             |  |                                       |
|                    | INTENTIONALLY OMITTED   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   |                             |  |                                       |
|                    | INTENTIONALLY OMITTED   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   |                             |  |                                       |
|                    | INTENTIONALLY OMITTED   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   |                             |  |                                       |
| <b>SUBTOTAL \$</b> |   |  |   |                             |  |                                       |

**Schedule A Summary**

|   |                                |
|---|--------------------------------|
| 1. Amount received this period – itemized monetary contributions.<br>(Include all Schedule A subtotals.) .....                            | \$ <u>5000.00</u>              |
| 2. Amount received this period – unitemized monetary contributions of less than \$100 .....   | \$ <u>399.00</u>               |
| 3. Total monetary contributions received this period.<br>(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... | <b>TOTAL \$ <u>5399.00</u></b> |

\*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 A (Continuation Sheet)  
Monetary Contributions Received**

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

SCHEDULE A (CONT.)

|   |          |                               |
|---|----------|-------------------------------|
| Statement covers period   |          | CALIFORNIA<br>FORM <b>460</b> |
| from  | 9/23/11  |                               |
| through   | 10/27/11 | Page <u>5</u> of <u>13</u>    |
| NAME OF FILER<br>Campaign to Re-Elect Ford Greene, San Anselmo 2011 |          | I.D. NUMBER<br>1341985        |

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 10/3/11            | Daphne Dibble Greene<br>Greenbrae, CA 94904-2482  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 1000                        | 1000   |                                       |
| 10/3/11            | Charles H. Clifford<br>San Anselmo, CA 94960  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | DBA Ross Apartments   | 100                         | 100  |                                       |
| 10/7/11            | Joseph O. Tobin II<br>San Francisco, CA 94104   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | <del>inquiry pending</del><br>J.O. Tobin, LLC   | 750                         | 750  |                                       |
| 10/11/11           | Democratic Central Committee of Marin<br>Sacramento, CA 95841                                   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input checked="" type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 100                         | 100  |                                       |
| 10/15/11           | Kim S. Frederickson<br>Greenbrae, CA 94904-2229   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Kim S. Frederickson,<br>M.D.  | 250                         | 250  |                                       |
| <b>SUBTOTAL \$</b> |   |   |   | <b>2200.00</b>              |  |                                       |

\*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 A (Continuation Sheet)  
Monetary Contributions Received**

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

SCHEDULE A (CONT.)

|  |          |                                |
|--|----------|--------------------------------|
| Statement covers period                            |          | <b>CALIFORNIA<br/>FORM 460</b> |
| from   | 9/25/11  |                                |
| through  | 10/27/11 | Page 6 of 13                   |
| NAME OF FILER                                      |          | I.D. NUMBER                    |
| Campaign to Re-Elect Ford Greene, San Anselmo 2011 |          | 1341985                        |

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 10/16/11           | Patricia A. Arrigoni<br>Fairfax, CA 94930   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 100                         | 100  |                                       |
| 10/17/11           | Steven Schoonover<br>San Rafael, CA 94901   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Attorney at Law   | 100                         | 100  |                                       |
| 10/17/11           | Richard L. Tracy<br>San Anselmo, CA 94960   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 100                         | 100  |                                       |
| 10/17/11           | P.M. Davis<br>San Mateo, CA 94402   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Attorney at Law   | 100                         | 100  |                                       |
|                    | INTENTIONALLY OMITTED   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   | X                           | X  |                                       |
| <b>SUBTOTAL \$</b> |   |   |   | <b>400.00</b>               |  |                                       |

\*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 A (Continuation Sheet)  
Monetary Contributions Received**

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

SCHEDULE A (CONT.)

|                         |          |                            |
|-------------------------|----------|----------------------------|
| Statement covers period |          | <b>CALIFORNIA FORM 460</b> |
| from                    | 9/25/11  |                            |
| through                 | 10/27/11 | Page 7 of 13               |

|   |                        |
|---|------------------------|
| NAME OF FILER<br>Campaign to Re-Elect Ford Greene, San Anselmo 2011 | I.D. NUMBER<br>1341985 |
|---|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(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) |
|--------------------|---|---|---|-----------------------------|---|------------------------------------|
| 10/20/11           | Jonathan Frieman<br>San Rafael, CA 94901  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Philanthropist  | 1000                        | 1000  |                                    |
| 10/20              | Steven Duditch<br>San Rafael, CA 94901  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Attorney at Law   | 100                         | 100   |                                    |
| 10/23/11           | Ronita R. Egger<br>Fairfax, CA 94930  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 100                         | 100   |                                    |
| 10/23/11           | Frank Egger<br>Fairfax, CA 94930  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 100                         | 100   |                                    |
| 10/24/11           | Charles H. Clifford<br>San Anselmo, CA 94960  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 100                         | 200   |                                    |
| <b>SUBTOTAL \$</b> |   |   |   | <b>1400.00</b>              |   |                                    |

\*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 A (Continuation Sheet)  
Monetary Contributions Received**

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

SCHEDULE A (CONT.)

|  |  |                                |
|--|--|--------------------------------|
| Statement covers period                            |  | <b>CALIFORNIA<br/>FORM 460</b> |
| from <u>9/25/11</u>                                |  |                                |
| through <u>10/27/11</u>                            |  | Page <u>8</u> of <u>12</u>     |
| NAME OF FILER                                      |  | I.D. NUMBER                    |
| Campaign to Re-Elect Ford Greene, San Anselmo 2011 |  | 1341985                        |

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 10/27/11           | R.W. Penn<br>San Rafael, CA   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Retired   | 500                         | 500  |                                       |
| 10/27/11           | Robert Gibson<br>San Rafael, CA 94901   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Stanford Properties   | 500                         | 500  |                                       |
|                    | INTENTIONALLY OMITTED   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   | X                           | X  |                                       |
|                    | INTENTIONALLY OMITTED   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   | X                           | X  |                                       |
|                    | INTENTIONALLY OMITTED   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   | X                           | X  |                                       |
| <b>SUBTOTAL \$</b> |   |   |   | <b>1000.00</b>              |  |                                       |

**\*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 B – Part 1  
Loans Received**

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

|   |                            |
|---|----------------------------|
| Statement covers period<br>from <u>9/25/11</u><br>through <u>10/27/11</u> | <b>CALIFORNIA FORM 460</b> |
|   | Page <u>8</u> of <u>13</u> |

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

Campaign to Re-Elect Ford Greene, San Anselmo 2011

I.D. NUMBER  
1341985

| FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | (a)<br>OUTSTANDING BALANCE BEGINNING THIS PERIOD | (b)<br>AMOUNT RECEIVED THIS PERIOD | (c)<br>AMOUNT PAID OR FORGIVEN THIS PERIOD*  | (d)<br>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD | (e)<br>INTEREST PAID THIS PERIOD | (f)<br>ORIGINAL AMOUNT OF LOAN   | (g)<br>CUMULATIVE CONTRIBUTIONS TO DATE                   |
|---|---|--|------------------------------------|--|--|----------------------------------|----------------------------------|---|
| Ford Greene<br>San Anselmo, CA 94960<br>† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Attorney at Law   | \$ 4000  | \$ 4000                            | <input type="checkbox"/> PAID<br>\$ _____<br><input type="checkbox"/> FORGIVEN<br>\$ _____ | \$ 4000<br>12/31/11<br>DATE DUE                    | 0 %<br>RATE<br>\$ 0              | \$ 4000<br>4000<br>DATE INCURRED | CALENDAR YEAR<br>\$ 5235.00<br>PER ELECTION**<br>\$ _____ |
| † <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC  |   | \$ _____   | \$ _____                           | <input type="checkbox"/> PAID<br>\$ _____<br><input type="checkbox"/> FORGIVEN<br>\$ _____ | \$ _____<br>DATE DUE                               | _____%<br>RATE<br>\$ _____       | \$ _____<br>DATE INCURRED        | CALENDAR YEAR<br>\$ _____<br>PER ELECTION**<br>\$ _____   |
| † <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC  |   | \$ _____   | \$ _____                           | <input type="checkbox"/> PAID<br>\$ _____<br><input type="checkbox"/> FORGIVEN<br>\$ _____ | \$ _____<br>DATE DUE                               | _____%<br>RATE<br>\$ _____       | \$ _____<br>DATE INCURRED        | CALENDAR YEAR<br>\$ _____<br>PER ELECTION**<br>\$ _____   |
| <b>SUBTOTALS</b>  |   | \$   | 4000 \$                            | 0 \$   | 4000 \$  | 0                                |                                  |   |

**Schedule B Summary**

1. Loans received this period ..... \$ 4000  
(Total Column (b) plus unitemized loans of less than \$100.)
2. 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.)
3. Net change this period. (Subtract Line 2 from Line 1.) ..... **NET \$ 4000**  
Enter the net here and on the Summary Page, Column A, Line 2.  
(May be a negative number)

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

†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**

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

SCHEDULEE

|  |          |                               |
|--|----------|-------------------------------|
| Statement covers period                            |          | CALIFORNIA<br>FORM <b>460</b> |
| from   | 9/25/11  |                               |
| through  | 10/27/11 | Page <u>810</u> of <u>82</u>  |
| NAME OF FILER                                      |          | I.D. NUMBER                   |
| Campaign to Re-Elect Ford Greene, San Anselmo 2011 |          | 1341985                       |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Campaign to Re-Elect Ford Greene, San Anselmo 2011

**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)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT                    | AMOUNT PAID |
|---|---------|---|-------------|
| Political Data Inc.<br>Burbank, CA 91507                            | CMP     | Walk List                                 | 203.89      |
| Pacific Print Resources<br>Emeryville, CA 94608                     | LIT     | Walk Cards                                | 383.99      |
| Derian Design<br>Carmel, CA 93923                                   | LIT     | Design Walk Card, PAV Mailer, Dear Friend | 268.58      |

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

**SUBTOTAL \$ 856.46**

**Schedule E Summary**

|  |                 |                |
|--|-----------------|----------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.).....  | \$              | 5261.46        |
| 2. Unitemized payments made this period of under \$100 .....   | \$              | 0              |
| 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....                    | \$              | 0              |
| 4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ..... | <b>TOTAL \$</b> | <b>5261.46</b> |

**Schedule E  
Payments Made**

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

|                         |          |                            |          |
|-------------------------|----------|----------------------------|----------|
| Statement covers period |          | CALIFORNIA FORM <b>460</b> |          |
| from                    | 9/25/11  | Page                       | 19 of 12 |
| through                 | 10/27/11 | I.D. NUMBER                | 1341985  |

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

Campaign to Re-Elect Ford Greene, San Anselmo 2011

**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)           |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT  | AMOUNT PAID |
|---|---------|-------------------------|-------------|
| Kathleen Russell Consulting<br>Mill Valley, CA 94941                | CNS     | consulting              | 3000        |
| Edna Schneider<br>Oakland, CA 94612                                 | WEB     | Campaign webpage design | 500         |
| Belaire Displays<br>Richmond, CA 94804                              | CMP     | Lawn signs              | 905         |

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

**SUBTOTAL \$ 4405.00**

**Schedule E Summary**

- Itemized payments made this period. (Include all Schedule E subtotals.) ..... \$ \_\_\_\_\_
- 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 F  
Accrued Expenses (Unpaid Bills)**

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

SCHEDULE F

|   |  |                               |
|---|--|-------------------------------|
| Statement covers period<br>from <u>9/24/11</u><br>through <u>10/27/11</u> |  | CALIFORNIA<br>FORM <b>460</b> |
|   |  |                               |
| NAME OF FILER<br>Campaign to Re-Elect Ford Greene, San Anselmo 2011       |  | I.D. NUMBER<br>1341985        |

SEE INSTRUCTIONS ON REVERSE

**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)           |

| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR<br>DESCRIPTION OF PAYMENT | (a)<br>OUTSTANDING<br>BALANCE BEGINNING<br>OF THIS PERIOD | (b)<br>AMOUNT INCURRED<br>THIS PERIOD | (c)<br>AMOUNT PAID<br>THIS PERIOD<br>(ALSO REPORT ON E) | (d)<br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD |
|--|-----------------------------------|---|---------------------------------------|---|--|
| Ford Greene<br>San Anselmo, CA 94960                                   | FIL                               | 25  | 25                                    | 0   | 25   |
| Ford Greene<br>San Anselmo, CA 94960                                   | FIL                               | 210   | 210                                   | 0   | 210  |
| Ford Greene<br>San Anselmo, CA 94960                                   | CNS                               | 1000  | 1000                                  | 0   | 1000   |
| <b>SUBTOTALS \$</b>  |                                   | <b>1235 \$</b>  | <b>1235 \$</b>                        | <b>0 \$</b>   | <b>1235</b>  |

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

**Schedule F Summary**

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) ..... **INCURRED TOTALS \$** 3869
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) ..... **PAID TOTALS \$** 0
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... **NET \$** 0  
May be a negative number

**Schedule F  
(Continuation Sheet)  
Accrued Expenses (Unpaid Bills)**

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

SCHEDULE F (CONT.)

|   |                             |
|---|-----------------------------|
| Statement covers period<br>from <u>9/25/11</u><br>through <u>10/27/11</u> | <b>CALIFORNIA FORM 460</b>  |
|   | Page <u>13</u> of <u>13</u> |
|   | I.D. NUMBER<br>1341985      |

NAME OF FILER

Campaign to Re-Elect Ford Greene, San Anselmo 2011

**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                |
| FL 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 CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR<br>DESCRIPTION OF PAYMENT | (a)<br>OUTSTANDING<br>BALANCE BEGINNING<br>OF THIS PERIOD | (b)<br>AMOUNT INCURRED<br>THIS PERIOD | (c)<br>AMOUNT PAID<br>THIS PERIOD<br>(ALSO REPORT ON E) | (d)<br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD |
|--|-----------------------------------|---|---------------------------------------|---|--|
| Derian Design<br>3308 Sycamore Place<br>Carmel, CA 93923               | LIT                               | 283.25  | 283.25                                | 0   | 283.25   |
| Pacific Print Resources<br>1259 Park Avenue<br>Emeryville, CA 94608    | LIT                               | 2350.75   | 2350.75                               | 0   | 2375.75  |
|  |                                   |   |                                       |   |  |
|  |                                   |   |                                       |   |  |
| <b>SUBTOTALS \$</b>  |                                   | 2634.00 \$  | 2634.00 \$                            | 0 \$  | 2634.00  |