

# Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

COVER PAGE

CALIFORNIA  
FORM

Date Stamp  
CITY CLERK

11-27-06 NOV 27 PM 2:15

Type or print in ink.

Page 1 of 2  
For Official Use Only

Statement covers period  
from 10-1-06 through 10-20-06  
Date of election if applicable (Month, Day, Year) 11-7-06

SEE INSTRUCTIONS ON REVERSE

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

- 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:

- Preelection Statement
- Semi-annual Statement
- Termination Statement (Also file a Form 410 Termination)
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report
- Supplemental Preelection Statement - Attach Form 495

correct adding error in Column B on 460 summary page

## 3. Committee Information

I.D. NUMBER  
93-1175

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

Ventura Police Officers' Association Political Action Committee

## Treasurer(s)

NAME OF TREASURER

John Snowling

MAILING ADDRESS

same

CITY

STATE

1425 Dowell Dr

CITY

STATE

CA

ZIP CODE

93003

AREA CODE/PHONE

805 339 4496

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

P.O. Box 5130

CITY

STATE

CA

ZIP CODE

93005

AREA CODE/PHONE

same


OPTIONAL: FAX / E-MAIL ADDRESS

OPTIONAL: FAX / E-MAIL ADDRESS

jsnowling@ci.ventura.ca.us

## 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 11-24-06 Date  
By  Signature of Treasurer or Assistant Treasurer  
By \_\_\_\_\_ Signature of Controlling Officerholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor  
By \_\_\_\_\_ Signature of Controlling Officerholder, Candidate, State Measure Proponent  
By \_\_\_\_\_ Signature of Controlling Officerholder, Candidate, State Measure Proponent

# Campaign Disclosure Statement Summary Page

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

SUMMARY PAGE

CALIFORNIA  
FORM **460**

Statement covers period  
10-1-06

Page 2 of 2

from 10-20-06 through

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

VPOA PAC

I.D. NUMBER

93-1175

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
<b>Contributions Received</b>			
1. Monetary Contributions	Schedule A, Line 3	880.	16,680.
2. Loans Received	Schedule B, Line 3	0	0
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	880.	16,680.
4. Nonmonetary Contributions	Schedule C, Line 3	0	0
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	880.	16,680.

**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 \$ \_\_\_\_\_

<b>Expenditures Made</b>		
6. Payments Made	Schedule E, Line 4	\$ _____
7. Loans Made	Schedule H, Line 3	\$ _____
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$ _____
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	\$ _____
10. Nonmonetary Adjustment	Schedule C, Line 3	\$ _____
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	\$ _____

**Expenditure Limit Summary for State  
Candidates**

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

Date of Election (mm/dd/yy) \_\_\_\_\_ Total to Date \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

<b>Current Cash Statement</b>		
12. Beginning Cash Balance	Previous Summary Page, Line 16	49,722.87
13. Cash Receipts	Column A, Line 3 above	880.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4	0
15. Cash Payments	Column A, Line 8 above	0
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15 <i>If this is a termination statement, Line 16 must be zero.</i>	50,602.87

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).

17. LOAN GUARANTEES RECEIVED	Schedule B, Part 2	\$ _____
<b>Cash Equivalents and Outstanding Debts</b>		
18. Cash Equivalents	See instructions on reverse	\$ _____
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	\$ _____