

**Recipient Committee  
Campaign Statement  
Cover Page**

Date Stamp  
SAN BUENA VENTURA  
CITY CLERK

CALIFORNIA FORM **460**

Page 1 of 12

For Official Use Only

Statement covers period  
from 7/1/18  
through 9/22/18

Date of election if applicable:  
(Month, Day, Year)  
11/06/2018

18 SEP 27 P 2:47

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

**3. Committee Information**

I.D. NUMBER  
1410238

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

Irene Henry for Ventura City Council District 1 2018

  
AREA CODE/PHONE  
805-535-3004

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

Heidi Wagner

  
AREA CODE/PHONE  
805-200-6887

NAME OF ASSISTANT TREASURER, IF ANY

Dena Rodgers

  
AREA CODE/PHONE  
805-218-9165

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 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 fo

Executed on 9/26/18  
Date

Executed on 9/26/18  
Date

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

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



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

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

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

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE

Irene Henry

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

City Council Ventura, CA District 1 2018

**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*

Clear Cover Pg2

Print Form

# Campaign Disclosure Statement Summary Page

Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

|   |                                |
|---|--------------------------------|
| Statement covers period<br>from <u>7/1/18</u> | <b>CALIFORNIA<br/>FORM 460</b> |
| through <u>9/22/18</u>                        |                                |
| Page <u>3</u> of <u>12</u>                    | I.D. NUMBER<br><u>1410238</u>  |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Irene Henry for Ventura City Council District 1 2018

## Contributions Received

|   | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|---|--|--|
| 1. Monetary Contributions..... <i>Schedule A, Line 3</i>    | \$ <u>1525</u>   | \$ <u>1525</u>                             |
| 2. Loans Received..... <i>Schedule B, Line 3</i>            | \$ <u>1951.76</u>  | \$ <u>1951.76</u>                          |
| 3. SUBTOTAL CASH CONTRIBUTIONS..... <i>Add Lines 1 + 2</i>  | \$ <u>3476.76</u>  | \$ <u>3476.76</u>                          |
| 4. Nonmonetary Contributions..... <i>Schedule C, Line 3</i> | \$ <u>69.30</u>  | \$ <u>69.30</u>                            |
| 5. TOTAL CONTRIBUTIONS RECEIVED..... <i>Add Lines 3 + 4</i> | \$ <u>3546.06</u>  | \$ <u>3546.06</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 | \$ <u>0</u>      | \$ <u>3546.06</u> |
| 21. Expenditures Made      | \$ <u>0</u>      | \$ <u>2437.97</u> |

## Expenditures Made

|   | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|---|--|--|
| 6. Payments Made..... <i>Schedule E, Line 4</i>                   | \$ <u>898.97</u>   | \$ <u>898.97</u>                           |
| 7. Loans Made..... <i>Schedule H, Line 3</i>                      | \$ <u>0</u>  | \$ <u>0</u>                                |
| 8. SUBTOTAL CASH PAYMENTS..... <i>Add Lines 6 + 7</i>             | \$ <u>898.97</u>   | \$ <u>898.97</u>                           |
| 9. Accrued Expenses (Unpaid Bills)..... <i>Schedule F, Line 3</i> | \$ <u>1539.00</u>  | \$ <u>1539.00</u>                          |
| 10. Nonmonetary Adjustment..... <i>Schedule C, Line 3</i>         | \$ <u>0</u>  | \$ <u>0</u>                                |
| 11. TOTAL EXPENDITURES MADE..... <i>Add Lines 8 + 9 + 10</i>      | \$ <u>2437.97</u>  | \$ <u>2437.97</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                  |
|-----------------------------------|--------------------------------|
| <u>  </u> / <u>  </u> / <u>  </u> | \$ <u>                    </u> |
| <u>  </u> / <u>  </u> / <u>  </u> | \$ <u>                    </u> |

## Current Cash Statement

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

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

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

## Cash Equivalents and Outstanding Debts

|   |                                |
|---|--------------------------------|
| 18. Cash Equivalents..... <i>See instructions on reverse</i>            | \$ <u>                    </u> |
| 19. Outstanding Debts..... <i>Add Line 2 + Line 9 in Column B above</i> | \$ <u>3490.76</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.

Clear Summ Pg

Print Form

**Schedule A  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A

|   |                               |
|---|-------------------------------|
| Statement covers period<br>from <u>7/1/18</u><br>through <u>9/22/18</u> | <b>CALIFORNIA FORM 460</b>    |
| Page <u>4</u> of <u>12</u>  | I.D. NUMBER<br><b>1410238</b> |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Irene Henry for Ventura City Council District 1 2018

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (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) |
|---------------|--|---|--|-----------------------------|---|------------------------------------|
| 9/13/18       | Joseph Jopes<br>[REDACTED]   | <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  | 100.00                      | 100.00  |                                    |
| 9/16/18       | Robert Shank<br>[REDACTED]   | <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  | 100.00                      | 100.00  |                                    |
| 9/17/18       | Lori Steinhauer<br>[REDACTED]  | <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 | self employed-Licensed<br>Clinical Counseor<br>[REDACTED]                                  | 100.00                      | 100.00  |                                    |
| 9/20/18       | Lori Steinhauer<br>[REDACTED]  | <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 | self employed-Licensed<br>Clinical Counseor<br>[REDACTED]                                  | 40.00                       | 140.00  |                                    |
| 9/18/18       | Greg & Suzanne McCombs<br>[REDACTED]   | <input type="checkbox"/> IND<br><input checked="" type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | self-McCombs, Inc.<br>CFO/Marketing<br>[REDACTED]  | 100.00                      | 100.00  |                                    |

**SUBTOTAL \$ 440.00**

**Schedule A Summary**

|  |                         |
|--|-------------------------|
| 1. Amount received this period – itemized monetary contributions.<br>(Include all Schedule A subtotals.) .....                           | \$ 1520.00              |
| 2. Amount received this period – unitemized monetary contributions of less than \$100 .....  | \$ 40.00                |
| 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 \$ 1560.00</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

Clear Sch. A

Print Form

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

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

|   |                            |
|---|----------------------------|
| Statement covers period<br>from <u>7/1/18</u><br>through <u>9/22/18</u> | <b>CALIFORNIA FORM 460</b> |
|   | Page <u>5</u> of <u>12</u> |
| I.D. NUMBER<br>1410238  |                            |

NAME OF FILER

Irene Henry for Ventura City Council District 1 2018

| 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) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 9/18/18            | Sharon Troll<br>[REDACTED]  | <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   | 50.00                       | 50.00  |                                       |
| 9/20/18            | Joanne Hunot<br>[REDACTED]  | <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 | Artist - self<br>[REDACTED]   | 100.00                      | 100.00   |                                       |
| 9/20/18            | Kellylynne Hall<br>[REDACTED]   | <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   | 100.00                      | 100.00   |                                       |
| 9/20/18            | Pam Wolny<br>[REDACTED]   | <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   | 200.00                      | 200.00   |                                       |
| 9/20/18            | Dena Rogers<br>[REDACTED]   | <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 | Insurance Agent - State Farm<br>[REDACTED]  | 100.00                      | 100.00   |                                       |
| <b>SUBTOTAL \$</b> |   |   |   | <b>550.00</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

Clear Sch. A Con.

Print Form

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

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

|   |                            |
|---|----------------------------|
| Statement covers period<br>from <u>7/1/18</u><br>through <u>9/22/18</u> | <b>CALIFORNIA FORM 460</b> |
|   | Page <u>6</u> of <u>12</u> |
| I.D. NUMBER<br>1410238  |                            |

NAME OF FILER

Irene Henry for Ventura City Council District 1 2018

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (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) |
|--------------------|--|---|--|-----------------------------|---|------------------------------------|
| 9/20/18            | Maria Runyon<br>[REDACTED]   | <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 | Self - Virtual Admin Asst.<br>[REDACTED]   | 35.00                       | 35.00   |                                    |
| 9/20/18            | Tara Beeh<br>[REDACTED]  | <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 | Sales - Thrivent Financial<br>[REDACTED]   | 70.00                       | 70.00   |                                    |
| 9/20/18            | Vickie Achee<br>[REDACTED]   | <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 | Director of Marketing<br>CMC Rescue<br>[REDACTED]  | 250.00                      | 250.00  |                                    |
| 9/22/18            | Don Gartner<br>[REDACTED]  | <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  | 100.00                      | 100.00  |                                    |
| 9/22/18            | Beth Graehl<br>[REDACTED]  | <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 | Marketing ASR Constr.<br>[REDACTED]  | 50.00                       | 50.00   |                                    |
| <b>SUBTOTAL \$</b> |  |   |  | <b>505.00</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**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

|  |         |                                |
|--|---------|--------------------------------|
| Statement covers period                              |         | <b>CALIFORNIA<br/>FORM 460</b> |
| from   | 7/1/18  |                                |
| through  | 9/22/18 | Page <u>7</u> of <u>12</u>     |
| NAME OF FILER  |         | I.D. NUMBER                    |
| Irene Henry for Ventura City Council District 1 2018 |         | 1410238                        |

| 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) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 9/22/18            | Ellen Farewell<br>[REDACTED]  | <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   | 25.00                       | 25.00  |                                       |
|                    |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                             |  |                                       |
|                    |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                             |  |                                       |
|                    |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                             |  |                                       |
|                    |   | <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> |   |   |   | 25.00                       |  |                                       |

\*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**

Amounts may be rounded  
to whole dollars.

|  |  |                            |
|--|--|----------------------------|
| Statement covers period                              |  | <b>CALIFORNIA FORM 460</b> |
| from <u>7/1/18</u>                                   |  |                            |
| through <u>9/22/18</u>                               |  | Page <u>8</u> of <u>12</u> |
| NAME OF FILER  |  | I.D. NUMBER                |
| Irene Henry for Ventura City Council District 1 2018 |  | 1410238                    |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Irene Henry for Ventura City Council District 1 2018

| 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                          |
|--|---|--|------------------------------------|--|--|----------------------------------|--|--|
| Irene Henry - Candidate<br>[REDACTED]  | Insurance Agent<br>State Farm Insurance   | \$ <u>0</u>                                      | \$ <u>775.00</u>                   | <input type="checkbox"/> PAID<br>\$ <u>0</u><br><input type="checkbox"/> FORGIVEN<br>\$ <u>0</u> | \$ <u>775.00</u><br><br><u>TBD</u><br>DATE DUE     | <u>0</u> %<br>RATE               | \$ <u>775.00</u><br><br><u>8/8/18</u><br>DATE INCURRED | CALENDAR YEAR<br>\$ <u>775.00</u><br>PER ELECTION**<br>\$ _____  |
| Irene Henry - Candidate<br>[REDACTED]  | Insurance Agent<br>State Farm Insurance   | \$ _____   | \$ <u>76.76</u>                    | <input type="checkbox"/> PAID<br>\$ <u>0</u><br><input type="checkbox"/> FORGIVEN<br>\$ <u>0</u> | \$ <u>76.76</u><br><br><u>TBD</u><br>DATE DUE      | <u>0</u> %<br>RATE               | \$ <u>76.76</u><br><br><u>8/31/18</u><br>DATE INCURRED | CALENDAR YEAR<br>\$ <u>851.76</u><br>PER ELECTION**<br>\$ _____  |
| Irene Henry - Candidate<br>[REDACTED]  | Insurance Agent<br>State Farm Insurance   | \$ _____   | \$ <u>600.00</u>                   | <input type="checkbox"/> PAID<br>\$ <u>0</u><br><input type="checkbox"/> FORGIVEN<br>\$ <u>0</u> | \$ <u>600.00</u><br><br><u>TBD</u><br>DATE DUE     | <u>0</u> %<br>RATE               | \$ <u>600.00</u><br><br><u>9/5/18</u><br>DATE INCURRED | CALENDAR YEAR<br>\$ <u>1451.76</u><br>PER ELECTION**<br>\$ _____ |
| <b>SUBTOTALS</b>   |   | \$   | \$ <u>1451.76</u>                  | \$ <u>0</u>  | \$ <u>1451.76</u>                                  | \$ <u>0</u>                      |  |  |

**Schedule B Summary**

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

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

†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.

**Clear Sch. B-1**      **Print Form**



**Schedule B – Part 1**  
**Loans Received** *Continued*

Amounts may be rounded to whole dollars.

|   |                               |
|---|-------------------------------|
| Statement covers period<br>from <u>7/1/18</u><br>through <u>9/22/18</u> | <b>CALIFORNIA FORM 460</b>    |
| Page <u>9</u> of <u>12</u>  | I.D. NUMBER<br><b>1410238</b> |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Irene Henry for Ventura City Council District 1 2018

| FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, 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 PAID OR FORGIVEN THIS PERIOD                                    | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD | (e) INTEREST PAID THIS PERIOD | (f) ORIGINAL AMOUNT OF LOAN | (g) CUMULATIVE CONTRIBUTIONS TO DATE                |
|---|--|---|---------------------------------|--|---|-------------------------------|-----------------------------|---|
| Irene Henry - Candidate<br>[REDACTED]   | Insurance Agent<br>State Farm Insurance  |   | \$ 500                          | <input type="checkbox"/> PAID<br>\$ 0<br><input type="checkbox"/> FORGIVEN | \$ 500.00<br><br>TBD<br>DATE DUE                | 0%<br>RATE                    | \$ 500.00                   | CALENDAR YEAR<br>\$ 1951.76<br>PER ELECTION**<br>\$ |
| † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC |  | \$  | \$                              | \$   | DATE DUE  | \$                            | DATE INCURRED               | \$  |
| † <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC            |  | \$  | \$                              | \$   | DATE DUE  | \$                            | DATE INCURRED               | \$  |
| † <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC            |  | \$  | \$                              | \$   | DATE DUE  | \$                            | DATE INCURRED               | \$  |
| <b>SUBTOTALS</b>  |  | \$  | \$ 500.00                       | \$   | \$ 500.00                                       | \$                            | 0                           |   |

**Schedule B Summary**

1. Loans received this period ..... \$ 1951.76  
 (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** \$ 1951.76  
 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 C  
Nonmonetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE C

|  |         |                             |
|--|---------|-----------------------------|
| Statement covers period                              |         | <b>CALIFORNIA FORM 460</b>  |
| from   | 7/1/18  |                             |
| through  | 9/22/18 | Page <u>10</u> of <u>12</u> |
| Irene Henry for Ventura City Council District 1 2018 |         | I.D. NUMBER<br>1410238      |

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

| DATE RECEIVED  | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | DESCRIPTION OF GOODS OR SERVICES              | AMOUNT/ FAIR MARKET VALUE | CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--|--|---|--|---|---------------------------|---|------------------------------------|
| 8/6/18   | Heidi Wagner<br>[REDACTED]   | <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 | Realtor<br>Cusick Realty<br>[REDACTED]   | filing fee for<br>Filer ID number<br>Form 410 | 50.00                     | 50.00   | 50.00                              |
| 8/22/18  | Heidi Wagner<br>[REDACTED]   | <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 | Realtor<br>Cusick Realty<br>[REDACTED]   | postage to over<br>night Form 410             | 19.30                     | 19.30   | 69.30                              |
|  |  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |  |   |                           |   |                                    |
|  |  | <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>Attach additional information on appropriately labeled continuation sheets.</b> |  |   |  |   | <b>SUBTOTAL \$</b>        | 69.30   |                                    |

**Schedule C Summary**

- Amount received this period – itemized nonmonetary contributions.  
(Include all Schedule C subtotals.).....\$ 69.30
- Amount received this period – unitemized nonmonetary contributions of less than \$100 .....\$ 0
- Total nonmonetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.).....**TOTAL \$** 69.30

**\*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

**Clear Sch. C**      **Print Form**

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E

|  |         |                                |
|--|---------|--------------------------------|
| Statement covers period                              |         | <b>CALIFORNIA<br/>FORM 460</b> |
| from   | 7/1/18  |                                |
| through  | 9/22/18 | Page <u>11</u> of <u>12</u>    |
| Irene Henry for Ventura City Council District 1 2018 |         | I.D. NUMBER<br>1410238         |

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

**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 |
|---|---------|---|-------------|
| Herald Printing<br>[REDACTED]                                       |         | Printing: #10 and remittance envelopes              | 410.03      |
| The Finish Line<br>[REDACTED]                                       |         | Printing: color banners                             | 394.98      |
| Raise the Money<br>[REDACTED]                                       |         | Credit card online payment services processing fees | 53.96       |

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

**SUBTOTAL \$ 858.97**

**Schedule E Summary**

|   |                 |               |
|---|-----------------|---------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.).....   | \$              | 858.97        |
| 2. Unitemized payments made this period of under \$100.....   | \$              | 40.00         |
| 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....                   | \$              |               |
| 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>898.97</b> |

Clear Sch. E

Print Form

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

Amounts may be rounded  
to whole dollars.

|   |                             |
|---|-----------------------------|
| Statement covers period<br>from <u>7/1/18</u><br>through <u>9/22/18</u> | <b>CALIFORNIA FORM 460</b>  |
|   | Page <u>12</u> of <u>12</u> |
| I.D. NUMBER<br>1410238  |                             |

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

Irene Henry for Ventura City Council District 1 2018

**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 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 |
|--|--------------------------------|---|---------------------------------------|---|--|
| The Finish Line<br>[REDACTED]  | signs and metal stakes         | 0   | 1,539.00                              |   | 1,539.00   |
|  |                                |   |                                       |   |  |
|  |                                |   |                                       |   |  |
| <b>SUBTOTALS \$</b>  |                                | 0 \$  | 1,539.00 \$                           | 898.97 \$   | 1,539.00   |

\* 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 \$** 2437.97
- 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 \$** 898.97
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... **NET \$** 1539.00  
May be a negative number

Clear Sch. F

Print Form