Recipient Committee Campaign Statement

Campaign Statement Cover Page			SAN BUENA VE CITY CLE	CALIFORNIA 460
	Statement covers period 9/23/18	Date of election if applicable: (Month, Day, Year)	18 OCT 25	Page 1 of 5
SEE INSTRUCTIONS ON REVERSE	through10/20/18	11/6/18		
1. Type of Recipient Committee: All Committees - C	2. Type of Statement:			
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	 ✓ Preelection Statement ☐ Semi-annual Statement ☐ Termination Statement (Also file a Form 410 Tel ☐ Amendment (Explain be 	Special Specia	erly Statement al Odd-Year Report
3. Committee Information	I.D. NUMBER 1408869	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)		NAME OF TREASURER		
Marco Cuevas for Ventura City Council 2018 STREET ADDRESS (NO P.O. BOX)		Marco Cuevas MAILING ADDRESS		
OTTLE FADBRESS (NO P.O. BOX)		CITY	STATE ZIP COF	AREA CODE/PHONE (805) 450-4348
CITY STATE ZIPC MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX	ODE AREA CODE/PHONE (805) 450-4348	NAME OF ASSISTANT TREASURER Michael N. Bolas MAILING ADDRESS	, IFANY	
, , , , , , , , , , , , , , , , , , , ,		WAILING ADDRESS		
CITY STATE ZIPC	ODE AREA CODE/PHONE		STATE ZIP COL	AREA CODE/PHONE (323) 854-7711
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRESS	3	
1 have used all reasonable diligence in preparing and review certify under penalty of perjury under the laws of the State of Executed on 10/25/18 Executed on Date Executed on Date	By. By.	ssistant T	reasurer ponent or Responsible Officer of Sponsor	_
Executed on	Ву	Signature of Controlling Officeholder, Candidate, St	ate Measure Proponent	-

Recipient Committee Campaign Statement Cover Page — Part 2

CALII FO		460
Page _	2 .	ıf <u>5</u>

	ed Committee	6.	Primarily Formed Ball	ot Measure	Committee			
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE					
Marco Cuevas								
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)			BALLOT NO. OR LETTER JURISDICTIO		D NC		SUPPORT	
Ventura City Council, District 1							OPPOSE	
RESIDENTIAL/BUSINESS ADDRESS (NO. AND ST	REET) CITY STATE	ZłP	Identify the controlling office	ceholder, cand	idate, or state me	easure propor	nent, if any.	
			NAME OF OFFICEHOLDER, CA	NDIDATE, OR PR	ROPONENT			
Related Committees Not Included in not included in this statement that are controlled contributions or make expenditures on behalf of	ed by you or are primarily formed to red		OFFICE SOUGHT OR HELD		DI	STRICT NO. IF	ANY	
COMMITTEE NAME	I.D. NUMBER					······································		
		7	Drimarily Formed Co.	adidata/Offic	obalder Com	million		
NAME OF TREASURER	CONTROLLED COMMITTE	E?	Primarily Formed Car officeholder(s) or candidate	s) for which this	s committee is prir	marily formed.	names of	
	TYES TNO							
			MANE OF OFFICE USINER OF	CANDIDATE	LOSSIOS COLICIA	T OD LIELD		
COMMITTEE ADDRESS STREET ADDRESS			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	T OR HELD	SUPPORT OPPOSE	
CITY STAT	S (NO P.O. BOX)	PHONE	NAME OF OFFICEHOLDER OR		OFFICE SOUGH			
	S (NO P.O. BOX)	PHONE		CANDIDATE	·	IT OR HELD	OPPOSE SUPPORT	
COMMITTEE NAME NAME OF TREASURER	S (NO P.O. BOX) E ZIP CODE AREA CODE/		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	IT OR HELD	☐ OPPOSE ☐ SUPPORT ☐ OPPOSE ☐ SUPPORT	
CITY STAT COMMITTEE NAME	S (NO P.O. BOX) E ZIP CODE AREA CODE/		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	IT OR HELD	□ OPPOSE □ SUPPORT □ OPPOSE □ SUPPORT □ OPPOSE □ SUPPORT	

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SUMMARY PAGE

www.fppc.ca.gov

Statem	ent covers period 9/23/18	CALIFORNIA 460
through	10/20/18	Page 3 of 5
		I.D. NUMBER
		1408869

Marco Cuevas for Ventura City Council 2018 Column A Column B **Calendar Year Summary for Candidates** Contributions Received TOTAL THIS PERIOD CALENDAR YEAR TOTAL TO DATE (FROM ATTACHED SCHEDULES) Running in Both the State Primary and General Elections 0 1. Monetary Contributions...... Schedule A, Line 3 \$ 1/1 through 6/30 7/1 to Date 345.67 445.67 345.67 20. Contributions 445.67 3. SUBTOTAL CASH CONTRIBUTIONS...... Add Lines 1 + 2 \$ ____ Received 4. Nonmonetary Contributions...... Schedule C. Line 3 21. Expenditures 345.67 445.67 Made **Expenditures Made** Expenditure Limit Summary for State 385.67 345.67 Candidates 7. Loans Made...... Schedule H, Line 3 n 22. Cumulative Expenditures Made* 8. SUBTOTAL CASH PAYMENTS...... Add Lines 6 + 7 \$ _____ 345.67 385.67 (if Subject to Voluntary Expenditure Limit) 9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3 Date of Election Total to Date 0 (mm/dd/yy) 385.67 **Current Cash Statement** 60 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ To calculate Column B. 345.67 13. Cash Receipts Column A, Line 3 above add amounts in Column A to the corresponding 14. Miscellaneous Increases to Cash Schedule I, Line 4 *Amounts in this section may be different from amounts amounts from Column B reported in Column B. 345.67 of your last report. Some amounts in Column A may 16. ENDING CASH BALANCEAdd Lines 12 + 13 + 14, then subtract Line 15 \$ be negative figures that should be subtracted from If this is a termination statement, Line 16 must be zero. previous period amounts. If this is the first report being 17. LOAN GUARANTEES RECEIVED...... Schedule B, Part 2 \$ _____ filed for this calendar year, only carry over the amounts Cash Equivalents and Outstanding Debts from Lines 2, 7, and 9 (if any). 18. Cash Equivalents See instructions on reverse \$ 445.67 FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772)

Onlanded D. Dewild	Amounts may be rounded				SCHEDULE B - PART 1					
Schedule B – Part 1		Statement cov	ers period	CALIFORNIA 460						
Loans Received		from9/2	3/18	FORM 40U						
SEE INSTRUCTIONS ON REVERSE					through10)/20/18	Page4	of5		
NAME OF FILER							I.D. NUMBER			
Marco Cuevas for Ventura City Council 2	018						1408869			
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 PA OR FORGIVE THIS PERIO	BALANCE AT	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE		
Marco Cuevas	Student CSUCI			PAID \$	- *	O %	<u>,210:47</u>	calendar year \$ 210.47 PER ELECTION**		
TO IND COM OTH PTY SCC		\$O	ş <u>210.47</u>	s	0 11/30/18 DATE DUE	\$0		\$		
Marco Cuevas	Student CSUCI			\$(\$(FORGIVEN	_ 1	O %	\$ <u>135.20</u>	\$ 345.67 PER ELECTION**		
DIND □ COM □ OTH □ PTY □ SCC		\$0	_{\$} 135.20	s(11/30/18 DATE DUE	\$ <u>0</u>	10/19/18 DATE INCURRED	\$		
Marco Cuevas	Student CSUCIL	1.00	0	PAID S O FORGIVEN	_ '	C %	s_100_	S 445.67 PER ELECTION**		
□ IND □ COM □ OTH □ PTY □ SCC		s 100	\$	\$0	DATE DUE	sO	8/20/18 DATE INCURRED	\$		
		SUBTOTALS \$	345.67	.	0 \$ 445.67	\$ 0				
Schedule B Summary						(Enter (e) on Schedule E, Line 3)				
Loans received this period (Total Column (b) plus unitemized loan	ns of less than \$100.)	••••••	***************************************	\$	345.67		· · · · · · · · · · · · · · · · · · ·			
 Loans paid or forgiven this period (Total Column (c) plus loans under \$10 (Include loans paid by a third party tha 	00 paid or forgiven.)			\$	0	IN CC	H - Other (e.g., I	PTY or SCC) business entity)		
 Net change this period. (Subtract Line Enter the net here and on the Summar 	e 2 from Line 1.)y Page, Column A, Line 2.		•••••••••••		345.67 (May be a negative number)	PT	Y – Political Party C – Small Contri	y		

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

Schedule E Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER Marco Cuevas for Ventura City Council 2018	Amounts may be rounded to whole dollars.				from9/23/18				SCHEDULE LIFORNIA 460 FORM 5 Je 5 of 5 NUMBER	
CODES: If one of the following codes accurately described CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings and OFC office expens PET petition circul PHO phone banks POL polling and s POS postage, deli	munications d appearance ses lating urvey resea	es rch	Otherwise, RAD RFD SAL TEL TRC TRS VOT WEB	radio a returne campa t.v. or c candid staff/sp transfe voter n	airtime and ed contribut ign workers cable airtim late travel, l bouse trave er between egistration	ayment. production costions ions is salaries e and producti lodging, and m	on costs eals meals the same	e candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTIO	N OF PA	MENT			AMOUNT PAID	
Signs.com			Political Yard	d Signs					210.47	
Vistaprint		LIT							135.20	
* Payments that are contributions or independent expenditures must also be	e summarized on Sche	dule D.					SUBT	OTAL \$	345.67	
Schedule E Summary										
1. Itemized payments made this period. (Include all Schedule									345.67	
2. Unitemized payments made this period of under \$100		•••••••	***************************************	•••••••		• • • • • • • • • • • • • • • • • • • •	•••	\$	0	
3. Total interest paid this period on loans. (Enter amount from	n Schedule B, Parl	t 1, Colum	nn (e).)	•••••	••••••	•••••		\$	0	
4. Total payments made this period. (Add Lines 1, 2, and 3. I	Enter here and on	the Sumn	nary Page, Colu	mn A, Line	6.)		TOTA	L \$	345.67	