

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

SAN BUENA VENTURA  
CITY CLERK

CALIFORNIA  
FORM  
460

COVER PAGE

Statement covers period from <u>July 1, 2016</u> through <u>Sept. 24, 2016</u>	Date of election if applicable: (Month, Day, Year) <u>November 8, 2016</u>	OCT 27 P 4:28	Page <u>1</u> of <u>4</u> For Official Use Only
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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 Candidate/Officeholder Committee (Also Complete Part 6)
- Primarily Formed Ballot Measure Committee
- Controlled
- Sponsored (Also Complete Part 6)

**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
- This amendment corrects incomplete employment information and corrects multiple names per contributor. Schedule A is amended

**3. Committee Information**

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
Christy Weir for City Council, 2016

I.D. NUMBER  
1258082

**Treasurer(s)**

NAME OF TREASURER  
Tim Weir

MAILING ADDRESS  
1953 E. Linda Vista Ave.

CITY STATE ZIP CODE AREA CODE/PHONE  
Ventura CA 93001 805-648-3008

STREET ADDRESS (NO P.O. BOX)  
1953 E. Linda Vista Ave.

CITY STATE ZIP CODE AREA CODE/PHONE  
Ventura CA 93001 805-648-3008

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

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS  
christy@christyweir.com

OPTIONAL: FAX / E-MAIL ADDRESS  
ttloweir@gmail.com

**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 10/27/2016 By Christy Weir  
Date Signature of Treasurer or Assistant Treasurer

Executed on 10/27/2016 By Christy Weir  
Date Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

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

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

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

Type or print in ink.

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE  
Christy A. Weir

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

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP  
1953 E. Linda Vista Ave. Ventura, CA 93001

**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	CONTROLLED COMMITTEE?
<u>NAME OF TREASURER</u>	<u>1258082</u>	<input type="checkbox"/> YES <input type="checkbox"/> NO
<u>COMMITTEE ADDRESS</u>	<u>STREET ADDRESS (NO P.O. BOX)</u>	
<u>CITY</u>	<u>STATE</u> <u>ZIP CODE</u>	<u>AREA CODE/PHONE</u>
<u>COMMITTEE NAME</u>	<u>I.D. NUMBER</u>	
<u>NAME OF TREASURER</u>		<input type="checkbox"/> YES <input type="checkbox"/> NO
<u>COMMITTEE ADDRESS</u>	<u>STREET ADDRESS (NO P.O. BOX)</u>	
<u>CITY</u>	<u>STATE</u> <u>ZIP CODE</u>	<u>AREA CODE/PHONE</u>

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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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
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**7. Primarily Formed Candidate/Officeholder Committee** List names of officeholders(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
<u>NAME OF OFFICEHOLDER OR CANDIDATE</u>	<u>OFFICE SOUGHT OR HELD</u>	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
<u>NAME OF OFFICEHOLDER OR CANDIDATE</u>	<u>OFFICE SOUGHT OR HELD</u>	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
<u>NAME OF OFFICEHOLDER OR CANDIDATE</u>	<u>OFFICE SOUGHT OR HELD</u>	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

Attach continuation sheets if necessary

# Schedule A Monetary Contributions Received

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

Statement covers period  
from July 1, 2016  
through Sept. 24, 2016

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SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER  
**Christy Weir for City Council, 2016**

I.D. NUMBER  
**1258082**

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID. 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)
18-Jul-16	Tom Stanley 1741 Santa Ynez St Ventura CA 93001	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	300	300	
8-Sep-16	Jim White 848 Danbury Ct Ventura CA 93004	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	100	100	
8-Sep-16	Chuck Cohen 3102 Winding lane Thousand Oaks CA 91361	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Cohen, Begun and Deck LLP	200	200	
9-Sep-16	WillemJonker 1851 Lombard St Suite 200 Oxnard CA 93030	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	200	200	
17-Sep-16	John Whitman 1003 Woodstock Ln Ventura CA 93001	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	275	275	
<b>SUBTOTAL \$</b>				<b>1075</b>		

## Schedule A Summary

- Amount received this period - itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ \_\_\_\_\_
- Amount received this period - unitemized monetary contributions of less than \$100 ..... \$ \_\_\_\_\_
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$** \_\_\_\_\_

\*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  
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SCHEDULE A (CONT.)

Statement covers period  
from July 1, 2016  
through Sept. 24, 2016

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NAME OF FILER: **Christy Weir for City Council, 2016**

CALLIFORNIA FORM **460**

I.D. NUMBER: **1258082**

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR <small>(JAN. 1 - DEC. 31)</small>	PER ELECTION TO DATE <small>(IF REQUIRED)</small>
18-Jul-16	James Ludwig 6040 Merritt Dr Malibu CA 90265	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Investor KL Associates	100	100	
24-Sep-16	Ted Cook 12025 Foothill Rd. Santa Paula CA 93060	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Farmer Arboletta	100	100	
24-Sep-16	Suzette Cook 12025 Foothill Rd. Santa Paula CA 93060	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Farmer Arboletta	100	100	
20-Jul-16	Larry Hartley 1285 Beachmont St Ventura CA 93001	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	100	100	
<b>SUBTOTAL \$</b>				<b>400</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