								COVER PAGE
Ca Co	ecipient Committee ampaign Statement over Page overnment Code Sections 84200-84216.5)					Date Stamp		IFORNIA 460
		St	tatement covers period	Date of election if applicable: (Month, Day, Year)	09/27/2018 21:28:57	Page	e of6	
			from	07/01/2018		Filing ID: 173969881		For Official Use Only
SEE	E INSTRUCTIONS ON REVERSE		through09/22/2018		11/06/2018			
1.	Type of Recipient Committee: All Com	mittees – (	Complete P	Parts 1, 2, 3, and 4.	2. Type of Statement:		•	
3.	<ul> <li>Officeholder, Candidate Controlled Committee         <ul> <li>State Candidate Election Committee</li> <li>Recall (Also Complete Part 5)</li> </ul> </li> <li>General Purpose Committee         <ul> <li>Sponsored</li> <li>Small Contributor Committee</li> <li>Political Party/Central Committee</li> </ul> </li> <li>Committee Information</li> <li>COMMITTEE NAME (OR CANDIDATE'S NAME IF NO C Pat Showalter for Council 2018</li> </ul>		Committe Contro Spon: (Also Comple Primarily Officehold (Also Comple I.D. NUMBE 136611	olled sored ete Part 6) Formed Candidate/ der Committee ete Part 7) ER	X       Preelection Statement         Semi-annual Statement         Termination Statement         (Also file a Form 410 Termination Statement)         X       Amendment (Explain bergins)         Previous version did         Treasurer(s)         NAME OF TREASURER         Deb Henigson	ermination)	Supplementa Statement - A	Year Report Il Preelection Attach Form 495
					MAILING ADDRESS			
	STREET ADDRESS (NO P.O. BOX)				CITY	STATE Z	IP CODE	AREA CODE/PHONE
					Mountain View		94041	
	CITY STATE	ZIP	CODE	AREA CODE/PHONE	NAME OF ASSISTANT TREASUR	RER, IF ANY		
	Mountain View CA	-	040	(650)526-8676	Abigail Longcor			
	MAILING ADDRESS (IF DIFFERENT) NO. AND STREE	T OR P.O.	BOX		MAILING ADDRESS			
	CITY STATE	ZIP	CODE	AREA CODE/PHONE	CITY	STATE Z	IP CODE	AREA CODE/PHONE
					San Jose	CA	95126	(650)996-7176
	OPTIONAL: FAX / E-MAIL ADDRESS				OPTIONAL: FAX / E-MAIL ADDR	RESS		
	NA / patshow4mv@gmail.com							
4.	Verification							
	I have used all reasonable diligence in preparing a under penalty of perjury under the laws of the State				owledge the information contained her	rein and in the attached sch	nedules is tru	e and complete. I certify

Executed on	09/27/2018	By _	Deb Henigson	
	Date		Signature of Treasurer or Assistant Treasurer	
Executed on	09/27/2018	_ Bv _	Pat Showalter	
	Date		Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor	
Executed on		Bv		
	Date		Signature of Controlling Officeholder, Candidate, State Measure Proponent	
Executed on		Bv		
	Date		Signature of Controlling Officeholder, Candidate, State Measure Proponent	 FPF

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

### 5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE		
Pat Showalter		
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT	NUMBER IF APPLICABLE)	
City Council Member		
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CIT	Y STATE Z	ΊΡ
Mour	ntain View CA 94	040

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. NUMBE	R
NAME OF TREASURER			CONTROLL	ED COMMITTEE?
			YES	□ NO
COMMITTEE ADDRESS	STREET ADDRESS	(NO P.O. BO	X)	
CITY	STATE	ZIP CC	DE	AREA CODE/PHONE
COMMITTEE NAME			I.D. NUMBE	R
NAME OF TREASURER			CONTROLL	ED COMMITTEE?
			YES	NO NO
COMMITTEE ADDRESS	STREET ADDRESS	(NO P.O. BO	X)	
CITY	STATE	ZIP CC	DE	AREA CODE/PHONE

## 6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE	
------------------------	--

BALLOT NO. OR LETTER	JURISDICTION	SUPPORT
----------------------	--------------	---------

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	SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT

Attach continuation sheets if necessary

COVER PAGE - PART 2

FORM

Page \_\_\_\_\_ of \_\_\_\_\_

Campaign Disclosure Statement Summary Page		nounts may be round to whole dollars.	led	Stat	ement covers period	CALIFORNIA FORM 460		
SEE INSTRUCTIONS ON REVERSE				through	09/22/2018	Page3 of26		
NAME OF FILER						I.D. NUMBER		
Pat Showalter for Council 2018						1366116		
Contributions Received	(F	Column A TOTAL THIS PERIOD ROMATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTALTO DATE	Running in Both t	nmary for Candidates he State Primary and		
1. Monetary Contributions Schedule A, Line 3	\$	11,440.00	\$	17,679.89	General Elections			
2. Loans Received Schedule B, Line 3		0.00		0.00	1/1	through 6/30 7/1 to Date		
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	11,440.00	\$	17,679.89	20. Contributions Received \$	\$		
4. Nonmonetary Contributions Schedule C, Line 3		487.50		1,250.15	21 Expenditures	·		
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	11,927.50	\$	18,930.04	Made \$	\$		
Expenditures Made					Expenditure Limit	Summary for State		
6. Payments Made Schedule E, Line 4	\$	8,591.86	\$	9,154.39	Candidates			
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulati	ve Expenditures Medet		
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	8,591.86	\$	9,154.39		ve Expenditures Made* to Voluntary Expenditure Limit)		
9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3		0.00		0.00	Date of Election	Total to Date		
10. Nonmonetary Adjustment Schedule C, Line 3		487.50		1,250.15	(mm/dd/yy)			
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$	9,079.36	\$	10,404.54	///	\$		
Current Cash Statement					//	\$		
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	8,360.21	То	calculate Column B, add				
13. Cash Receipts Column A, Line 3 above		11,440.00	an	nounts in Column A to the presponding amounts				
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	om Column B of your last	*Amounts in this section reported in Column B.	may be different from amounts		
15. Cash Payments Column A, Line 8 above		8,591.86		port. Some amounts in plumn A may be negative				
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	11,208.35	fig	ures that should be btracted from previous				
If this is a termination statement, Line 16 must be zero.			ре	eriod amounts. If this is				
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	fo	r this calendar year, only rry over the amounts				
Cash Equivalents and Outstanding Debts			fro	om Lines 2, 7, and 9 (if ny).				
18. Cash Equivalents See instructions on reverse	\$	0.00						
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	0.00						

Schedule	Δ						ç	CHEDULE A		
	DATE RECEIVED       FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)         7/02/2018       Catherine Vonnegut Mountain View, CA 94040         7/06/2018       Claudia Hevel Los Altos, CA 94024         7/06/2018       Mike Kasperzak Mountain View, CA 94040         7/11/2018       Jae Abel Palo Alto, CA 94306					covers period CALIFORNIA 46				
SEE INSTRUCTIO				through	018	Page	4 <b>o</b> t	<u>    26    </u>		
NAME OF FILER						I.D. NU	JMBER			
Pat Showalt	er for Council 2018					13661	16			
		CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE T CALENDAR (JAN. 1 - DEC	/EAR	TOE	ECTION DATE QUIRED)		
07/02/2018		∐IND     COM     OTH     PTY     SCC	retired n/a	100.00		100.00	G2018	\$100.00		
07/06/2018		∐IND     COM     OTH     PTY     SCC	retired n/a	100.00		100.00	G2018	\$100.00		
07/06/2018		XIND COM OTH PTY SCC	Consultant self	100.00		100.00	G2018	\$100.00		
07/11/2018		∑ IND □ COM □ OTH □ PTY □ SCC	Scientist Santa Clara Valley Water District	150.00		150.00	G2018	\$150.00		
07/11/2018		⊠IND □COM □OTH □PTY □SCC	Aviation Project Manager Port of Oakland	200.00		200.00	G2018	\$200.00		
			SUBTOTAL \$	650.00						
1. Amount re	eceived this period – itemized monetary contributions.		\$	7,525.00	IND					
	, , ,	s of less than	\$100\$	3,915.00	PTY	l – Other – Politica	(e.g., busine	ess entity)		
	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colu	mn A, Line 1.	) <b>TOTAL \$</b>	11,440.00		, – Smail C				

## www.netfile.com

Schedule A (Continuation Sheet) Monetary Contributions Received		Amounts may to whole (		Statement cove from07/01/ through09/22/	22018 Pa	SCHEDULE A (CONT CALIFORNIA FORM 460 Page <u>5</u> of <u>26</u> I.D. NUMBER		
Pat Showalte	r for Council 2018				13	866116		
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 SEIF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEAR (JAN. 1 - DEC. 31)	Т	ELECTION O DATE REQUIRED)	
07/12/2018	Robert Kirby Mountain View, CA 94041	IND     COM     OTH     PTY     SCC	retired n/a	100.00		00 G2018	\$100.00	
07/12/2018	Ken Rosenberg Mountain View, CA 94040	∑IND COM OTH PTY SCC	Wealth Advisor Morgan Stanley	250.00	250.	00 G2018	\$250.00	
07/17/2018	Don Arnold Campbell, CA 95008	∑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	retired n/a	200.00	200.	00 G2018	\$200.00	
07/20/2018	Michael Fischetti Mountain View, CA 94041	∑ IND □ COM □ OTH □ PTY □ SCC	retired n/a	100.00	100.	00 G2018	\$100.00	
07/23/2018	Rhonda Farrar Escondito, CA 92029	∑ IND □ COM □ OTH □ PTY □ SCC	Investment Management Farrar Financials	250.00	250.	00 G2018	\$250.00	
			SUBTOTAL	\$ 900.00				

\*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

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Monetary Contributions Received		Received     Amounts may be rounded to whole dollars.     Statemen       from     07					CALIFORNIA FORM 460		
				through09/22/	2018	Page	б (	of <u>26</u>	
NAME OF FILER						I.D. NU	JMBER		
Pat Showalte	r for Council 2018					13663	116		
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 CALENDAR Y (JAN. 1 - DEC	EAR	T	ELECTION O DATE EQUIRED)	
07/23/2018	Merle Showalter Mechanicsville, VA 23116	IND     COM     OTH     PTY     SCC	retired n/a	1,000.00	1,0	00.00	G2018	\$1,000.00	
07/25/2018	Elizabeth Rowan-Mitchell Redwood City, CA 94062	IND     COM     OTH     PTY     SCC	retired n/a	100.00	1	00.00	G2018	\$100.00	
07/26/2018	cynthia james Los Gatos, CA 95032	IND     COM     OTH     PTY     SCC	consultant self	100.00	1	.00.00	G2018	\$100.00	
07/26/2018	John Miller Mountain View, CA 94043	∑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Architect self	200.00	2	00.00	G2018	\$200.00	
07/26/2018	Vi Robertson Mountain View, CA 94040	X IND COM OTH PTY SCC	retired retired	200.00	2	00.00	G2018	\$200.00	

SUBTOTAL\$

1,600.00

SCHEDULE A (CONT.)

# Schedule A (Continuation Sheet) Monetary Contributions Received

	A (Continuation Sheet) Contributions Received	Amounts may to whole (		Statement cove from07/01/ through09/22/	2018	F	FORNIA ORM	<b>460</b>
NAME OF FILER						I.D. NU		
Pat Showalte	r for Council 2018					13663	116	
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 CALENDAR Y (JAN. 1 - DEC	EAR	т	ELECTION D DATE EQUIRED)
07/31/2018	Fara Brock Mountain View, CA 94040	IND     COM     OTH     PTY     SCC	Director of Finance Bethel Lutheran Church & School	250.00	2	250.00	G2018	\$250.00
08/03/2018	Mark Merritt Santa Cruz, CA 95062	IND     COM     OTH     PTY     SCC	retired n/a	100.00	1	.00.00	G2018	\$100.00
08/11/2018	Dipankar Sen Mountain View, CA 94040	IND     COM     OTH     PTY     SCC	Professor Virginia Tech	100.00	1	.00.00	G2018	\$100.00
08/14/2018	Kate Reilly New York, NY 10004	IND     COM     OTH     PTY     SCC	Attorney US Attorney's Office of Southern District of NY	100.00	1	.00.00	G2018	\$100.00
08/15/2018	William Skeehan Mountain View, CA 94040	∑IND □COM □OTH □PTY □SCC	retired n/a	100.00	1	.00.00	G2018	\$100.00
			SUBTOTAL	<b>\$</b> 650.00				

\*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

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Monetary	A (Continuation Sheet) Contributions Received	Amounts may to whole o		Statement cove	(2018 Pag	LIFORNI FORM	DULE A (CONT.) A 460
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)		R ELECTION TO DATE REQUIRED)
08/17/2018	The Myers Family Trust Mountain View, CA 94040	☐ IND ☐ COM ⊠ OTH ☐ PTY ☐ SCC		200.00	200.0	G2018	\$200.00
08/18/2018	Johannessen Killough Trust Los Gatos, CA 95030	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		100.00	100.0	G2018	\$100.00
08/21/2018	Nancy Clum Mountain View, CA 94040	∑ IND □ COM □ OTH □ PTY □ SCC	retired n/a	150.00	150.0	) G2018	\$150.00
08/21/2018	Nancy Unger Mountain View, CA 94040	∑ IND □ COM □ OTH □ PTY □ SCC	Professor Santa Clara University	200.00	200.0	G2018	\$200.00
08/22/2018	Pardis Beikzadeh Mountain View, CA 94043	IND □COM □OTH □PTY □SCC	Software engineer Google	100.00	100.0	G2018	\$100.00

SUBTOTAL\$

750.00

#### SCHEDULE A (CONT.)

Monetary	A (Continuation Sheet) Contributions Received	Amounts may to whole		Statement cover from07/01/ through09/22/	(2018 Page	IFORNIA ORM	ULE A (CONT.) 460
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)	T	ELECTION O DATE EQUIRED)
08/22/2018	Martin Golrfinkel Mountain View, CA 94040	IND     COM     OTH     PTY     SCC	retired n/a	100.00	100.00	G2018	\$100.00
08/23/2018	Rich Alter Felton, CA 95018	IND     COM     OTH     PTY     SCC     SCC     SC	retired n/a	100.00	100.00	G2018	\$100.0
08/23/2018	Lytt Gardner Alpharetta, GA 30022	∑IND □COM □OTH □PTY □SCC	retired n/a	150.00	150.00	G2018	\$150.0
08/30/2018	Omer Baror Mountain View, CA 94041	∑ IND □ COM □ OTH □ PTY □ SCC	Software Engineer Waymo	250.00	250.00	G2018	\$250.0
08/30/2018	Rod Sinks Cupertino, CA 95014	∑ IND □ COM □ OTH □ PTY □ SCC	n/a retired	250.00	250.00	G2018	\$250.0

SUBTOTAL\$

850.00

\*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

\$100.00

\$100.00

\$150.00

\$250.00

\$250.00

\*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

Monetary Contributions Received		Amounts may to whole o		Statement cove	CALIFORNIA FORM 460		
				through09/22/	2018	Page10	_ of
NAME OF FILER						I.D. NUMBER	
Pat Showalte	r for Council 2018					1366116	
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 CALENDAR YE (JAN. 1 - DEC.	AR	ER ELECTION TO DATE REQUIRED)
08/31/2018	Greystar Dev LLC Charleston, SC 29401	☐ IND ☐ COM ⊠ OTH ☐ PTY ☐ SCC		250.00	25	0.00 G2018	\$250.00
09/02/2018	Dana Harmon Port Orchard, WA 98366	XIND COM OTH PTY SCC	retired n/a	100.00	10	0.00 G2018	\$100.00
09/04/2018	Sandy Bergan Mountain View, CA 94040	∑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	retired n/a	100.00	10	0.00 G2018	\$100.00
09/04/2018	Stanley Williams San Diego, CA 92131	∑ IND □ COM □ OTH □ PTY □ SCC	Executive Poseidon Water	100.00	10	0.00 G2018	\$100.00
09/09/2018	John Keen Mountain View, CA 94043	∑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	electrical engineer Alphabet	150.00	15	0.00 G2018	\$150.00
			SUBTOTAL	<b>\$</b> 700.00			

# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Monetary Contributions Received		to whole	dollars.	from07/01/		CALIFORNIA FORM 460		
				through 09/22/	<sup>2018</sup> F	age1	of <u>26</u>	
NAME OF FILER			L		1	.D. NUMBER		
Pat Showalte	r for Council 2018				1	.366116		
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 D. CALENDAR YEA (JAN. 1 - DEC. 3	R T	ELECTION O DATE EQUIRED)	
09/09/2018	Michael Laster Mountain View, CA 94040	IND     COM     OTH     PTY     SCC	retired n/a	100.00	100	.00 G2018	\$100.00	
09/09/2018	Claudia Martin Roanoke, VA 24016	⊠ IND □ COM □ OTH □ PTY □ SCC	Physician LewisGale Regional Health System	150.00	150	.00 G2018	\$150.00	
09/09/2018	Virginia Panlasigui Mountain View, CA 94040	X IND COM OTH PTY SCC	technical writer SAP	100.00	100	.00 G2018	\$100.00	
09/10/2018	Barb Canup San Jose, CA 95139	X IND COM OTH PTY SCC	retired n/a	100.00		.00 G2018	\$100.00	
09/11/2018	Gary Kremen Menlo Park, CA 94025	IND COM OTH PTY SCC	Engineer Dogpatch	125.00	125	.00 G2018	\$125.00	

SUBTOTAL\$

575.00

SCHEDULE A (CONT.)

Statement covers period

# Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded to whole dollars.

Schedule A (Continuation Sheet) Monetary Contributions Received		Amounts may to whole		Statement cover from 07/01/ through 09/22/	2018	SCHEDULE A (CONT.) CALIFORNIA FORM 460 Page 12 of 26		
NAME OF FILER						-	JMBER	<u> </u>
	r for Council 2018					1366		
DATE	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 CALENDAR Y (JAN. 1 - DEC	D DATE ÆAR	PER T	ELECTION O DATE EQUIRED)
09/12/2018	IBEW 332 Electrical Workers San Jose, CA 95125	□ IND □ COM ⊠ OTH □ PTY □ SCC		750.00		750.00	G2018	\$750.00
09/15/2018	Eleanor McGrath New York, NY 10024	IND     COM     OTH     PTY     SCC	retired n/a	100.00	]	100.00	G2018	\$100.00
		□ IND □ COM □ OTH □ PTY □ SCC						
		□ IND □ COM □ OTH □ PTY □ SCC						
		□ IND □ COM □ OTH □ PTY □ SCC						
			SUBTOTAL	\$ 850.00				

\*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

Schedul Nonmor	le C netary Contributions Received		Amounts may be rounded to whole dollars.		S	Statement covers p		CALIF( FO	DRNIA	<u>460</u>
	TIONS ON REVERSE				thro	ugh09/22/201	.8	Page	<u>13</u> of .	26
NAME OF FILE				L				I.D. NUMB		
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 C GOODS OR SERVI		AMOUNT/ FAIR MARKET VALUE	CUMULA DA CALEND/ (JAN 1 -	TE	TO	LECTION DATE QUIRED)
09/10/2018	Pamela Baird Mountain View, CA 94043	∑IND □COM □OTH □PTY □SCC	Designer KB Associates	Web design services by Su Leinen	san	487.50		487.50	G2018	\$487.50
		□IND □COM □OTH □PTY □SCC								
		□IND □COM □OTH □PTY □SCC								
		□IND □COM □OTH □PTY □SCC								

Attach additional information on appropriately labeled continuation sheets. \_

SUBTOTAL \$

487.50

# Schedule C Summary

Schedule C Summary	*Contributor Codes
	IND – Individual
(Include all Schedule C subtotals.)	COM – Recipient Committee (other than PTY or SCC)
	OTH – Other (e.g., business entity)
	PTY – Political Party SCC – Small Contributor Committee
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) TOTAL \$487.50	

Schedule E		Statement covers period	SCHEDULE E
Payments Made	Amounts may be rounded to whole dollars.	from07/01/2018	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through09/22/2018	Page of6
NAME OF FILER			I.D. NUMBER
Pat Showalter for Council 2018			1366116

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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT		AMOUNT PAID
Anedot Dallas, TX 75204	WEB				40.30
Anedot Dallas, TX 75204	WEB				4.30
Anedot Dallas, TX 75204	WEB				4.30
* Payments that are contributions or independent expenditur	res must also be summarized on	Schedule D.		SUBTOTAL \$	48.90

# Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)\$	8,543.19
2. Unitemized payments made this period of under \$100 \$	48.67
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	8,591.86

Schedule E (Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.	Statement covers period from07/01/2018	SCHEDULE E (CONT.) CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through09/22/2018	Page <u>15</u> of <u>26</u>
NAME OF FILER			I.D. NUMBER
Pat Showalter for Council 2018			1366116
CODES: If one of the following codes accurately de	escribes the payment, you may enter the code.	. Otherwise, describe the payment	
CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production	n 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 pro	
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, ar	
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging	
IND independent expenditure supporting/opposing others (explai			es 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 cost	ts (internet, e-mail)

NAME AND ADDRESS C (IF COMMITTEE, ALSO ENTER I	F PAYEE CODE	OR DES	SCRIPTION OF PAYMENT	AMOUNT PAID
Anedot Dallas, TX 75204	WEB			4.26
Anedot Dallas, TX 75204	WEB			4.26
- Anedot Dallas, TX 75204	WEB			4.26
- Anedot Dallas, TX 75204	WEB			8.30
	WEB			6.30
* Payments that are contributions or independent exp				TOTAL \$ 27.38

SUBTOTAL \$ 27.38

Schedule E (Continuation Sheet) Payments Made	Amo	ounts may be rounded to whole dollars.	St from	atement covers period	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE			throu	gh09/22/2018	Page <u>16</u> of <u>26</u>
NAME OF FILER					I.D. NUMBER
Pat Showalter for Council 2018					1366116
CODES: If one of the following codes accurately des	cribes the p	ayment, you may enter the code. Oth	nerwise,	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 proc	luction costs
FIL candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and	d meals
FND fundraising events		polling and survey research	TRS	staff/spouse travel, lodging,	
IND independent expenditure supporting/opposing others (explain)		postage, delivery and messenger services	TSF	transfer between committee	s 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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DES	CRIPTION OF PAYMENT	AMOUNT PAID			
Anedot Dallas, TX 75204	WEB			4.26			
Anedot Dallas, TX 75204	WEB			4.26			
Anedot Dallas, TX 75204	WEB			10.30			
- Anedot Dallas, TX 75204	WEB			2.30			
	WEB			2.30			
* Payments that are contributions or independent expenditures must a			SUBTO	TAL \$ 23.42			

SUBTOTAL \$ 23.42

Schedule E (Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.	Statement covers period from07/01/2018	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through 09/22/2018	Page <u>17</u> of <u>26</u>
NAME OF FILER			I.D. NUMBER
Pat Showalter for Council 2018			1366116
CODES: If one of the following codes accurately describ	es the payment, you may enter the code. Oth	nerwise, describe the payment	
CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production	n costs
CNS campaign consultants CTB contribution (explain nonmonetary)*	MTG meetings and appearances OFC office expenses	RFD returned contributions SAL campaign workers' salaries	
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and pro	
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, a	
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging	
IND independent expenditure supporting/opposing others (explain)* LEG legal defense	POS postage, delivery and messenger services PRO professional services (legal, accounting)	TSF transfer between committee VOT voter registration	es of the same candidate/sponsor
LIG campaign literature and mailings	PRT print ads	WEB information technology cos	ts (internet, e-mail)

NAME AN (IF COMMITT	ID ADDRESS OF PAYEE EE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AM	IOUNT PAID
Political Data Inc. Norwalk, CA 90652		LIT				1,300.00
Anedot Dallas, TX 75204		WEB				8.30
Anedot Dallas, TX 75204		WEB				4.26
Anedot Dallas, TX 75204		WEB				4.26
 Anedot Dallas, TX 75204		WEB				4.26
* Payments that are contributions or ind	ependent expenditures must also be summarized o	n Schedule I	).		SUBTOTAL \$	1,321.08

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Schedule E (Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.	Statement covers period from07/01/2018	SCHEDULE E (CONT.) CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through 09/22/2018	Page <u>18</u> of <u>26</u>
NAME OF FILER			I.D. NUMBER
Pat Showalter for Council 2018			1366116
CODES: If one of the following codes accuratel	ly describes the payment, you may enter the code. Oth	nerwise, describe the payment	
CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production	n costs
CNS campaign consultants CTB contribution (explain nonmonetary)*	MTG meetings and appearances OFC office expenses	RFD returned contributions SAL campaign workers' salaries	2
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and pro	
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, ar	
FND fundraising events IND independent expenditure supporting/opposing others (e	POL polling and survey research explain)* POS postage, delivery and messenger services	TRS staff/spouse travel, lodging, TSF transfer between committee	, and meals es of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration	es of the same candidate/sponsor
LIT campaign literature and mailings	PRT print ads	WEB information technology cost	ts (internet, e-mail)

NAME AND ADDRESS OF F (IF COMMITTEE, ALSO ENTER I.D.	PAYEE CODE	OR	DESCRIPTION OF PAYMENT	AMO	UNT PAID
Anedot Dallas, TX 75204	WEB				4.26
 Anedot Dallas, TX 75204	WEB				2.30
	WEB				4.26
 Anedot Dallas, TX 75204	WEB				4.26
 Anedot Dallas, TX 75204	WEB				10.30
* Payments that are contributions or independent exper	nditures must also be summarized on Schedule	 D.	SI	JBTOTAL \$	

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Schedule E (Continuation Sheet) Payments Made	Amounts may b to whole do			St from throu	atement covers period 07/01/2018	CALIFOI FORI	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER					<u> </u>	I.D. NUMBE	
Pat Showalter for Council 2018						1366116	
CODES: If one of the following codes accurately describe 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 expen PET petition circu PHO phone banks POL polling and s POS postage, deli	munications d appearance lses lating survey researd ivery and met	S	RAD RFD SAL TEL TRC TRS TSF VOT	describe the payment. radio airtime and production returned contributions campaign workers' salaries t.v. or cable airtime and prod candidate travel, lodging, an staff/spouse travel, lodging, transfer between committee voter registration information technology costs	costs duction costs d meals and meals s of the sam	e candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE (	DR [	DESCRIPTIO	N OF PAYMENT		AMOUNT PAID
Anedot Dallas, TX 75204		WEB					4.22

* Payments that are contributions or independent expenditures must also be summarize	d on Schedule D.	SUBTOTAL \$	23.42
Anedot Dallas, TX 75204	WEB		4.30
Anedot Dallas, TX 75204	WEB	Online donation fees	8.30
Anedot Dallas, TX 75204	WEB	Online donation fees	4.30
Anedot Dallas, TX 75204	WEB		2.30

•	ule E nuation Sheet) ents Made	Ar	nounts may be rounded to whole dollars.	St from	atement covers period	CALIFORNIA FORM 460
SEE INSTRU	JCTIONS ON REVERSE			throu	gh09/22/2018	Page of6
NAME OF F	ILER					I.D. NUMBER
Pat Show	valter for Council 2018					1366116
CODES:	If one of the following codes accurately describe	s the	payment, you may enter the code. Othe	rwise,	describe the payment.	
	paign paraphernalia/misc.	MBR	member communications		radio airtime and production	costs
	paign consultants	MTG	meetings and appearances	RFD	returned contributions	
	ribution (explain nonmonetary)*	OFC	office expenses		campaign workers' salaries	luction costs
	c donations didate filing/ballot fees	PET PHO	petition circulating phone banks	TEL TRC	t.v. or cable airtime and prod candidate travel, lodging, and	
	Iraising events	POL	polling and survey research		staff/spouse travel, lodging, and	
	pendent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF		s of the same candidate/sponsor
	l defense	PRO	professional services (legal, accounting)	VOT	voter registration	
LIT cam	paign literature and mailings	PRT	print ads	WEB	information technology costs	(internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot Dallas, TX 75204	WEB		10.30
Anedot Dallas, TX 75204	WEB		4.10
Anedot Dallas, TX 75204	WEB		2.30
Anedot Dallas, TX 75204	WEB		4.30
City of Mountain View Mountain View, CA 94041	FIL		500.00
* Payments that are contributions or independent expenditures must also be su	mmarized on Schedule D.	SUB	TOTAL \$ 521.00

Schedule E (Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA 460
Payments Made	to whole dollars.	from07/01/2018	FORM <b>400</b>
SEE INSTRUCTIONS ON REVERSE		through09/22/2018	Page of6
NAME OF FILER			I.D. NUMBER
Pat Showalter for Council 2018			1366116
CODES: If one of the following codes accurate	ately describes the payment, you may enter the cod	e. Otherwise, describe the payment	
CMP campaign paraphernalia/misc. CNS campaign consultants	MBR member communications MTG meetings and appearances	RAD radio airtime and production RFD returned contributions	n costs

POS postage, delivery and messenger services

OFC office expenses

PHO phone banks

PET petition circulating

POL polling and survey research

LEG legal defense LIT campaign literature and mailings	PRO professional PRT print ads	services (legal, accour	nting) VOT voter registration WEB information technology co	osts (internet, e-mail)
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Pacific Printing San Jose, CA 95110		LIT Postcar	ds & doorhangers	817.19
- Anedot Dallas, TX 75204		WEB		4.30
- Anedot Dallas, TX 75204		WEB		4.30
- Anedot Dallas, TX 75204		WEB		1.30
 Anedot Dallas, TX 75204		WEB		2.30
* Payments that are contributions or independent expenditures mus	at also be summarized on	Schedule D.		SUBTOTAL \$ 829.39

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

TRC candidate travel, lodging, and meals

CTB contribution (explain nonmonetary)\*

independent expenditure supporting/opposing others (explain)\*

candidate filing/ballot fees

fundraising events

CVC civic donations

FIL

FND

IND

Schedule E (Continuation Sheet) Payments Made		nounts may be rounded to whole dollars.	St from	atement covers period	CALIFORNIA FORM 460		
SEE INSTRUCTIONS ON REVERSE			throu	gh09/22/2018	Page2 of26		
NAME OF FILER					I.D. NUMBER		
Pat Showalter for Council 2018					1366116		
CODES: If one of the following codes accurately descri	bes the	payment, you may enter the code. Oth	nerwise,	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			campaign workers' salaries				
CVC civic donations PET petition circulating		TEL	t.v. or cable airtime and proc				
FIL candidate filing/ballot fees PHO phone banks				candidate travel, lodging, and			
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 committee	s 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)		

			WEB Information teermology best	
NAME AND ADDRE (IF COMMITTEE, ALSO EN	SS OF PAYEE CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot Dallas, TX 75204	WEB			1.10
Anedot Dallas, TX 75204	WEB			8.30
Anedot Dallas, TX 75204	WEB			4.30
Anedot Dallas, TX 75204	WEB			2.30
- Anedot Dallas, TX 75204	WEB			4.26

**SUBTOTAL \$** 20.26

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Schedule E (Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.	Statement covers period from07/01/2018	CALIFORNIA FORM 460		
SEE INSTRUCTIONS ON REVERSE		through09/22/2018	Page23 of26		
NAME OF FILER			I.D. NUMBER		
Pat Showalter for Council 2018			1366116		
CODES: If one of the following codes accurately descr	bes the payment, you may enter the co	de. Otherwise, describe the paymer	nt.		
CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production	on costs		
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions			
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salarie	es		
CVC civic donations PET petition circulating		TEL t.v. or cable airtime and pr			
FIL     candidate filing/ballot fees     PHO     phone banks		TRC candidate travel, lodging, a			
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging	g, and meals		
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger service		ees of the same candidate/sponsor		
LEG legal defense	PRO professional services (legal, accounting	ng) VOT voter registration			
LIT campaign literature and mailings	PRT print ads	WEB information technology cos	sts (internet, e-mail)		

		<b>67</b> ( 7			
ESS OF PAYEE CODE	OR DE	SCRIPTION OF PAYMENT	AMOUNT PAID		
WEB			4.26		
WEB			10.30		
WEB			3.30		
WEB			1.90		
WEB			1.30		
	ESS OF PAYEE ENTER I.D. NUMBER) WEB WEB WEB WEB	WEB WEB WEB WEB WEB	ESS OF PAYEE INTER I.D. NUMBER) CODE OR DESCRIPTION OF PAYMENT WEB WEB WEB WEB WEB WEB WEB		

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

**SUBTOTAL \$** 21.06

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Schedule E (Continuation Sheet) Payments Made	Amounts may be to whole do			fro	Statement covers period n07/01/2018 ough09/22/2018	CALIFOF FORM	A 400
Pat Showalter for Council 2018 <b>CODES:</b> If one of the following codes accurately describes 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 LT campaign literature and mailings	MBR member com MTG meetings and OFC office expen PET petition circul PHO phone banks POL polling and s POS postage, deli	munications I appearance ses ating urvey resear very and me	25		<ul> <li>pradio airtime and production</li> <li>returned contributions</li> <li>campaign workers' salaries</li> <li>t.v. or cable airtime and prod</li> <li>candidate travel, lodging, and</li> <li>staff/spouse travel, lodging, transfer between committee</li> <li>voter registration</li> </ul>	costs duction costs d meals and meals s of the same	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPT	ION OF PAYMENT		AMOUNT PAID
Anedot Dallas, TX 75204		WEB					4.30
Anedot Dallas, TX 75204		WEB					4.30

Anedot Dallas, TX 75204	WEB		4.30			
OMVNA Mountain View, CA 94041		Old MV neighborhood association newsletter ad	162.00			
Embarcadero Media Palo Alto, CA 94306	PRT		5,107.00			
Darrab, in (5201						

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

Schedule E			SCHEDULE E (CONT					
(Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA 460					
Payments Made	to whole dollars.	from07/01/2018	FORM 400					
SEE INSTRUCTIONS ON REVERSE		through09/22/2018	Page of6					
NAME OF FILER			I.D. NUMBER					
Pat Showalter for Council 2018			1366116					
<b>CODES:</b> If one of the following codes accurately	describes the payment, you may enter the coc	le. 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 pro-	duction costs					
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, an	d meals					

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

POL polling and survey research

PRT print ads

	canalaato travol, loaging, ana moalo
TRS	staff/spouse travel, lodging, and meals

- TSF transfer between committees of the same candidate/sponsor
- VOT voter registration
- WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		OR DESCRIPTION OF PAYMENT	AMOUNT PAID
CPNA Mountain View, CA 94040	PRT	CPNA newsletter ad	400.00

FND

IND

LEG

LIT

fundraising events

campaign literature and mailings

legal defense

independent expenditure supporting/opposing others (explain)\*

Additional Comments For Form 460	ADDITIONAL COMMENTS CALIFORNIA FORM 460		0	
	Page	26	of _26	;
NAME OF FILER	I.D. NUMBER	२		
Pat Showalter for Council 2018	13	66116		

Amended to include all unitemized contributions received during the reporting period; this fixes an accidental omission from the original filing.