Recipient Committee Campaign Statement Cover Page			Date Stamp	CALIFOR FORM	
	Statement covers period from 9-25-2016	Date of election if applicable: (Month, Day, Year)	•	Page For Office	of 7
SEE INSTRUCTIONS ON REVERSE	through10-22-2016	Nov 8, 2016	OCT 272		
1. Type of Recipient Committee: All Committees - Committe	nplete Parts 1, 2, 3, and 4.	2. Type of Statement:	Office of t		
✓ Officeholder, Candidate Controlled Committee ○ State Candidate Election Committee ○ Recall (Also Complete Part 5) ☐ General Purpose Committee ○ Sponsored ○ Small Contributor Committee	rimarily Formed Ballot Measure committee) Controlled) Sponsored so Complete Part 6) rimarily Formed Candidate/ fficeholder Committee so Complete Part 7)	✓ Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination Statement) Amendment (Explain belo		K Quarterly Statement Special Odd-Year Re	port
	NUMBER 341647	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)	34104/	NAME OF TREASURER			
Steven Nascimento for Turlock City Council - Dis	trict 4, 2016	Lisa Mantarro Moore			
STREET ADDRESS (NO P.O. BOX)		CITY	STATE	ZIP CODE AR	FA CODE/BHONE
CITY STATE ZIP CODE	AREA CODE/PHONE	Ceres	CA !	95307	
Turlock CA 95382	- WEY CODELHOME	NAME OF ASSISTANT TREASURER, II	FANY		
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX PO Box 3866		MAILING ADDRESS		······	
CITY STATE ZIP CODE Turlock CA 95381	AREA CODE/PHONE	CITY	STATE	ZIP CODE ARI	A CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRESS			
Verification I have used all reasonable diligence in preparing and reviewing certify under penalty of perjury under the laws of the State of Ca Executed on	this statement and to the best of my known alifornia that the foregoing is true and corn	wledge the information contained her rect. Signature of Treasurer or Assistant Trea		d schedules is true and	complete. I
Date Executed on	Signature of Controlling	Officeholder, Candidate, State Measure Propone	ent or Responsible Officer of S	Sponsor	
Dale	BySignati	ure of Controlling Officeholder, Candidate, State	Measure Proponent		
Executed on	BySignate	ure of Controlling Officeholder, Candidate, State I	Measure Proponent	···	

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2							
CALIFORNIA 460							
Page 2 of 7							

. Officeholder or Candidate Controlled Com	mittee	6.	Primarily Formed Ballo	t Measure Con	nmittee					
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE							
Steven Nascimento										
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	ICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTION		SUPPORT				
Turlock City Council - District 4					İ	OPPOSE				
· · · · · · · · · · · · · · · · · · ·	CITY STATE ZIP		Identify the controlling office	holder, candidate,	or state measure pro	ponent, if any.				
Tuno	SK 0A 3000Z		NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT							
Related Committees Not Included in this S not included in this statement that are controlled by you contributions or make expenditures on behalf of your call.	or are primarily formed to receive		OFFICE SOUGHT OR HELD		DISTRICT NO	. IF ANY				
COMMITTEE NAME	I.D. NUMBER									
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	CONTROLLED COMMITTEE? YES NO BOX)	7.	Primarily Formed Cand officeholder(s) or candidate(s)	for which this com	der Committee in ittee is primerily form	ned.				
						SUPPORT OPPOSE				
	CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR CA	ANDIDATE OFF	FICE SOUGHT OR HELD	SUPPORT OPPOSE				
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR CA	ANDIDATE OF	FICE SOUGHT OR HELD					
			TOTAL OF OFFICE OFFICE OF OF	OFF	TOE SOUGHT OR HELD	SUPPORT OPPOSE				
NAME OF TREASURER	CONTROLLED COMMITTEE? YES NO		NAME OF OFFICEHOLDER OR CA	ANDIDATE OFF	ICE SOUGHT OR HELD	SUPPORT				
COMMITTEE ADDRESS (NO P.O.	BOX)					OPPOSE				
CITY STATE ZIP	CODE AREA CODE/PHONE		Attac	ch continuation sh	eets if necessary					

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period CALIFORNIA 9-25-2016 FORM from 10-22-2016 through

SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Steven Nascimento for Turlock City Council - District 4, 2016 1341647 Column A Column B Calendar Year Summary for Candidates Contributions Received CALENDAR YEAR TOTAL TO DATE **TOTAL THIS PERIOD** (FROM ATTACHED SCHEDULES) Running in Both the State Primary and **General Elections** 29446.00 1/1 through 6/30 7/1 to Date 0 20. Contributions 1549.00 29446.00 3. SUBTOTAL CASH CONTRIBUTIONS...... Add Lines 1 + 2 \$ Received 1532.23 4. Nonmonetary Contributions...... Schedule C. Line 3 21. Expenditures 1549.00 30978.23 Made 5. TOTAL CONTRIBUTIONS RECEIVED......Add Lines 3 + 4 \$ ____ Expenditures Made **Expenditure Limit Summary for State** 6. Payments Made...... Schedule E, Line 4 \$ 28459.53 Candidates 22. Cumulative Expenditures Made* 8. SUBTOTAL CASH PAYMENTS...... Add Lines 6+7 \$ 6777.38 28459.53 (If Subject to Voluntary Expenditure Limit) 9. Accrued Expenses (Unpaid Bills) Schedule F. Line 3 4067.14 Date of Election **Total to Date** 0 (mm/dd/yy) 6777.38 24392.39 **Current Cash Statement** 6308.66 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ __ To calculate Column B, 1549.00 add amounts in Column A to the corresponding *Amounts in this section may be different from amounts 14. Miscellaneous Increases to Cash Schedule I. Line 4 amounts from Column B reported in Column B. 6777.38 of your last report. Some 15. Cash Payments Column A, Line 8 above amounts in Column A may 16. ENDING CASH BALANCEAdd Lines 12 + 13 + 14, then subtract Line 15 \$ ____ 1080.28 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 \$ 19. Outstanding Debts...... Add Line 2 + Line 9 in Column B above \$ FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772)

www.fppc.ca.gov

Schedule	A		nts may be rounded	SCH				
Monetary Contributions Received		to	whole dollars.	Statement co			FORM 460	
CEE MISTRIATIO	NO ON PENEDO			through10-	-22-2016	Page	4 of 7	
NAME OF FILER	NS ON REVERSE			<u> </u>		I.D. NL		
Steven Na	scimento for Turlock City Council - District 4, 2016					13416	=	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LO. 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	PER ELECTION TO DATE (IF REQUIRED)	
9-25-16	Val Heckendorf 2245 Mira Flores Drive Turlock, CA 95380	☑IND □COM □OTH □PTY □SCC	Human Resources CSU Stanislaus	100.00				
9-28-16	Kapor Bros 19770 Bloss Road Hilmar, CA 95326	□IND □COM ☑OTH □PTY □SCC		150.00				
10-1-16	Maryann Lucas 7000 Clayton Road Turlock, CA 95380	☑IND □COM □OTH □PTY □SCC	homemaker	100.00				
10-10-16	IBEW Local 684 PAC -ID# 1309647 555 Capitol Mall #1425 Sacramento, Ca 95814	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC		250.00	1000.	00		
10-11-16	Arthur Crowell 3730 N Walnut Road Turlock, CA 95382	☑ IND □ COM □ OTH □ PTY □ SCC	president - Crowell Inc	200.00				
			SUBTOTAL \$	800.00				
Schedule A	Summary				*Con	ributor C	odes	
	ceived this period – itemized monetary contributions. Schedule A subtotals.)	***************************************	\$	1549.00	1 "		ent Committee	
	eived this period – unitemized monetary contribution		·	0	отн	- Other (than PTY or SCC) e.g., business entity)	
3. Total mone	tary contributions received this period. 1 and 2. Enter here and on the Summary Page, Colu			1549		- Politica - Small (l Parly Contributor Committee	

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

				from 9-25-2016		FORM 460	
NAME OF FILER				through 10-22-2016			5 of 7
	scimento for Turlock City Council - District 4, 2016			I.D. NUMBER 1341647			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IFAN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
9-30-16	Deborah Bailey 589 Florence Street Turlock, CA 95380	☑IND □ COM □ OTH □ PTY □ SCC	retired	99.00			
10-20-16	CREPAC - ID# 890106 525 S Virgil Avenue Los Angeles, CA 90020	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		500.00			
10-8-16	Brad Hansen 1656 Peacock Drive Turlock, CA 95380	ØIND □ COM □ OTH □ PTY □ SCC	retired	25.00			100000
10-12-16	Ali Cox 1908 California Avenue Turlock, CA 95380	IND COM OTH PTY SCC	owner - Ali Cox and Co	50.00	150.0	00	
10-17-16	Bryon Boggard 5278 Poppy Hills Circle Stockton, CA 95319	☑IND □COM □OTH □PTY □SCC	CEO Delta Association of Realtors	75.00			
			SUBTOTAL \$	749.00		7.59	

*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

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

Schedule B – Part 1	Α	mounts may be re	SCHE	SCHEDULE B - PART 1					
Loans Received	to whole dollars.				Statement cov	vers period	CALIFORNIA 16		
Loans Received							california 460		
SEE INSTRUCTIONS ON REVERSE NAME OF FILER					through10-	22-2016	Page 6	of	
Steven Nascimento for Turlock City Cou	ncil - District 4, 2016						1341647		
FULL NAME, STREET ADDRESS AND ZIP CODE	IF AN INDIVIDUAL, ENTER	(e) OUTSTANDING	(b)	(c)	(d)	(e)	(1)	(g)	
OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT RECEIVED THIS PERIOD	AMOUNT PAR	BALANCE AT	INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE	
Steven Nascimento	Director			☐ PAID				CALENDAR YEAR	
2390 Black Oak Turlock, CA 95382	Planning Technician			5 FORGIVEN	. \$	RATE	\$ <u>2000.00</u>	\$PER ELECTION**	
[†] ☑ IND □ COM □ OTH □ PTY □ SCC		\$ 2000.00	s0	s	DATE DUE	5		\$	
				☐ PAID				CALENDAR YEAR	
				\$	\$	RATE	s	s	
				FORGIVEN				PER ELECTION**	
TO IND COM OTH PTY SCC	·	\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$	
				☐ PAID				CALENDAR YEAR	
				s	· s	% RATE	s	\$	
				FORGIVEN		14112		PER ELECTION**	
TO IND COM OTH PTY SCC		\$	\$	s	DATE DUE	s	DATE INCURRED	\$	
		SUBTOTALS \$	\$		\$	\$			
Schedule B Summary						(Enter (e) on Schedule E, Line 3))		
Loans received this period		******************	****************	\$	0_		•		
(Total Column (b) plus unitemized loan	s of less than \$100.)					(† /	Contributor Codes		
2. Loans paid or forgiven this periods						ND – Individual	Į		
(Total Column (c) plus loans under \$10 (Include loans paid by a third party that	00 paid or forgiven.)			, -		•	OM - Recipient Co (other than i	PTY or SCC)	
		•] P	OTH – Other (e.g., i TY – Political Part	v 1	
Net change this period. (Subtract Line Enter the net here and on the Summar	→ 2 from Line 1.) v Page, Column A. Line 2.	1***********************			0_	s	CC – Small Contri	butor Committee	
		_		(ME	y be a negative number)				
*Amounts forgiven or paid by another party also mo ** If required.	ust be reported on Schedule A.					nne a dutum of	FPPC Form	n 460 (Jan/2016)	

FPPC Advice: advice@fppc.ca.gov (866/275-3772)

www.fppc.ca.gov

Schedule E Payments Made	Amounts may be rounded to whole dollars.			Statem	Statement covers period CALIFO			
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				through	10-22-2016	Page	7 of 7	
Steven Nascimento for Turiock City Council - District 4, 2	016 					134164	7	
CODES: If one of the following codes accurately described CMP campaign paraphemalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundralising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member con MTG meetings an OFC office expens PET petition circu PHO phone banks POL polling and s POS postage, deli	nmunications d appearance ses lating urvey researd very and mes	s h	RAD radio : RFD return SAL campa TEL t.v. or TRC candid TRS staff/s TSF transfe VOT voter i	be the payment. airtime and production ed contributions aign workers' salaries cable airtime and prod date travel, lodging, an pouse travel, lodging, ser between committees registration ation technology costs	luction costs d meals and meals s of the same	ŕ	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	DR DE	SCRIPTION OF PA	YMENT		AMOUNT PAID	
MTA Brown Mail Masters 7801 McHenry Modesto, CA 95356		LIT					6213.90	
H&S Signs 418 Neal Street Grass Valley, CA 95945			Signs				316.97	
* Payments that are contributions or independent expenditures must also be	e summarized on Sche	dule D.			SU	BTOTAL\$	6530.87	
Schedule E Summary								
1. Itemized payments made this period. (Include all Schedule	e E subtotals.)	******	*************************	******************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$	6530.87	
2. Unitemized payments made this period of under \$100	*********************	************	****	*************	*******************	\$	246.51	
3. Total interest paid this period on loans. (Enter amount from	n Schedule B, Par	t 1, Columi	ı (e).)	*****************	***************************************	\$	0	
4. Total payments made this period. (Add Lines 1, 2, and 3. I	Enter here and on	the Summa	ary Page, Column	A, Line 6.)	T O	TAL \$	6777.38	