Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in i		Date Stamp	CALIFORNIA 460			
SEE INSTRUCTIONS ON REVERSE	Statement covers period from July 1, 2018 through Sept. 22, 2018	Date of election if applicable: (Month, Day, Year)  November 2016	SEP <b>2 7</b> 2018 City Clerk's Office City of Santa Clara	For Official Use Only			
<ul> <li>State Candidate Election Committee</li> <li>Recall</li> <li>(Also Complete Part 5)</li> <li>General Purpose Committee</li> <li>Sponsored</li> <li>Small Contributor Committee</li> </ul>	Amplete Parts 1, 2, 3, and 4.  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 To Amendment (Explain b	Spe	arterly Statement ecial Odd-Year Report oplemental Preelection tement - Attach Form 495			
	O. NUMBER 1410293 COUNCIL 2018	Treasurer(s)  NAME OF TREASURER  Srinivasan Sambathkumar					
STREET ADDRESS (NO P.O. BOX)  CHY STATE ZIP CO  Santa Clara CA 9505  MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. B  CITY STATE ZIP CO	<u>1</u>	CITY Santa Clara NAME OF ASSISTANT TREASUR MAILING ADDRESS CITY	CA 950 RER, IF ANY	CODE AREA CODE/PHONE			
OPTIONAL: FAX / E-MAIL ADDRESS  1. Verification		OPTIONAL: FAX / E-MAIL ADDR	RESS				
I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California  September 27, 2018	g this statement and to the a that the foregoing is true		he attached sched	ules is true and complete. I certify			

Date September 27, 2018 Executed on \_

Date

Executed on \_ Date

Executed on \_\_\_

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Signature of Controlling Officeholder, Candidate, State Measure Proponent

onsible Officer of Sponsor

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
State of California

## **Campaign Disclosure Statement Summary Page**

Type or print in ink.

Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period **CALIFORNIA FORM** July 1, 2018 from \_ \_ of \_\_\_5 Sept. 22, 2018 through \_ I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER SAMBATHKUMAR FOR SANTA CLARA CITY COUNCIL 2018 1410293

Contributions Received		Column A TOTAL THIS PERIOD (FROMATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and			
1. Monetary Contributions Schedule A, Line 3	\$		\$	0.00	General Elections  1/1 through 6/30 7/1 to Date			
2. Loans Received Schedule B, Line 3		5000.00		5000.00	ľ			
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	5000.00	\$	5000.00	20. Contributions Received \$na			
4. Nonmonetary Contributions Schedule C, Line 3		0.00		0.00	21 Expenditures			
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	5000.00	\$	5000.00	Made \$ na \$ na			
Expenditures Made					Expenditure Limit Summary for State			
6. Payments Made Schedule E, Line 4	\$		\$	275.34	Candidates			
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulative Expenditures Made*			
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	275.34	\$	275.34	(If Subject 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		0.00		0.00	(mm/dd/yy)			
11. TOTAL EXPENDITURES MADE	\$	275.34	\$	275.34	<u>na / na / na</u> \$na			
Current Cash Statement					na/_na			
12. Beginning Cash Balance Previous Summary Page, Line 16	\$		To	calculate Column B, add				
13. Cash Receipts		5000.00		ounts in Column A to the responding amounts				
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	m Column B of your last	*Amounts in this section may be different from amounts reported in Column B.			
15. Cash Payments		275.34		oort. Some amounts in lumn A may be negative				
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	4724.66		ures that should be otracted from previous				
If this is a termination statement, Line 16 must be zero.			pei	riod amounts. If this is				
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for car	this calendar year, only rry over the amounts				
Cash Equivalents and Outstanding Debts		0.00	fro an	m Lines 2, 7, and 9 (if y).				
18. Cash Equivalents See instructions on reverse	\$							
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	5000.00			FPPC Form 460 (January/05 FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772			

Schedule B – Part 1 Loans Received	to whole dollars.  fromJuly 1, 2018				CALIFORNI FORM	400		
SEE INSTRUCTIONS ON REVERSE					through Sept.	22, 2018	_ Page4	of5
NAME OF FILER	T I						I.D. NUMBER	
SAMBATHKUMAR FOR SANTA CLARA	CITY COUNCIL 2018						1410293	
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 PAIL OR FORGIVE THIS PERIOD	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD		(g) CUMULATIVE CONTRIBUTION TO DATE
Srinivasan Sambathkumar	CEO, Mayuri, Inc.			✓ PAID \$0.00	\$_5000.00	0%	\$_5000.00	CALENDAR YEAF
†□ IND □ COM □ OTH □ PTY □ SCC		\$	\$_5000.00	FORGIVEN  \$ 0.00	asap	* *	9/13/18 DATE INCURRED	PER ELECTION'
				PAID  \$ FORGIVEN	. \$	% RATE	\$	\$ PER ELECTION
T IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
				PAID  \$ FORGIVEN	\$	% RATE	\$	\$PER ELECTION
<sup>†</sup> □ IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
	·	SUBTOTALS \$	5000.00 \$	0.00	\$ 5000.00	\$ 0.0	00	
Schedule B Summary  1. Loans received this period	-			\$	5000.00	(Enter (e) on Schedule E, Line	3)	
(Total Column (b) plus unitemized loans of less than \$100.)						†Contributor Codes		

Enter the net here and on the Summary Page, Column A, Line 2.

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

\*\* If required.

IND – Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Schedule	E
<b>Payments</b>	Made

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

ĺ	Statem	ent covers period	CALIFORNIA A CO
	from	July 1, 2018	california 460 form
	through .	Sept. 22, 2018	Page5 of5
_			I.D. NUMBER
			1410293

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

SAMBATHKUMAR FOR SANTA CLARA CITY COUNCIL 2018

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

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	MBR member com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and s POS postage, del	munications d appearan uses lating survey rese ivery and n	s ces	RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION	N OF PAYMENT	AMOUNT PAID
San Jose Mailing 1445 Monterey St, San Jose, CA 95110		LIT				264.25

SUBTOTAL\$

264.25