Recipient Committee  
Campaign Statement  
Cover Page

Statement covers period  
from 01-01-18  
through 06-30-18

Date of election if applicable:  
(Month, Day, Year)  
N/A

1. Type ofRecipient 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 Ballot Measure Committee  
☐ Controlled  
☐ Sponsored  
(Also Complete Part 6)

☐ Primarily Formed Candidate/Officerholder Committee  
(Also Complete Part 7)

2. Type of Statement:

☐ Preelection Statement  
☐ Semi-annual Statement  
☒ Termination Statement  
(Also file a Form 410 Termination)

☐ Amendment (Explain below)

Treasurer(s)

NAME OF TREASURER:  
Eric P. Selb

MAILING ADDRESS

629 Coast Range Drive

CITY:  Scotts Valley  
STATE:  CA  
ZIP CODE:  95066  
AREA CODE/PHONE:  (831) 234-3322

NAME OF ASSISTANT TREASURER, IF ANY:  
Jim Reed

MAILING ADDRESS

225 Navigator Drive

CITY:  Scotts Valley  
STATE:  CA  
ZIP CODE:  95066  
AREA CODE/PHONE:  (831) 419-1701

OPTIONAL: FAX / E-MAIL ADDRESS

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 7/19/18

By  
Signature of Treasurer or Assistant Treasurer

Executed on

Date

By  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on

Date

By  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on

Date

By  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

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

<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)</td>
<td>CALENDAR YEAR TOTAL TO DATE</td>
</tr>
<tr>
<td>1. Monetary Contributions</td>
<td>Schedule A, Line 3</td>
</tr>
<tr>
<td>2. Loans Received</td>
<td>Schedule B, Line 3</td>
</tr>
<tr>
<td>3. SUBTOTAL CASH CONTRIBUTIONS</td>
<td>Add Lines 1 + 2</td>
</tr>
<tr>
<td>4. Nonmonetary Contributions</td>
<td>Schedule C, Line 3</td>
</tr>
<tr>
<td>5. TOTAL CONTRIBUTIONS RECEIVED</td>
<td>Add Lines 3 + 4</td>
</tr>
</tbody>
</table>

### Expenditures Made

<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)</td>
<td>CALENDAR YEAR TOTAL TO DATE</td>
</tr>
<tr>
<td>6. Payments Made</td>
<td>Schedule E, Line 4</td>
</tr>
<tr>
<td>7. Loans Made</td>
<td>Schedule H, Line 3</td>
</tr>
<tr>
<td>8. SUBTOTAL CASH PAYMENTS</td>
<td>Add Lines 6 + 7</td>
</tr>
<tr>
<td>9. Accrued Expenses (Unpaid Bills)</td>
<td>Schedule F, Line 3</td>
</tr>
<tr>
<td>10. Nonmonetary Adjustment</td>
<td>Schedule C, Line 3</td>
</tr>
<tr>
<td>11. TOTAL EXPENDITURES MADE</td>
<td>Add Lines 8 + 9 + 10</td>
</tr>
</tbody>
</table>

### Current Cash Statement

<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0.00</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

To calculate Column B, add the amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

### Expenditure Limit Summary for State Candidates

<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cumulative Expenditures Made*</td>
<td>Total to Date</td>
</tr>
<tr>
<td>$0.00</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

*Amounts in this section may be different from amounts reported in Column B.

### Campaign Disclosure Statement

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Scotts Valley Town Center Now

CALIFORNIA FORM 460

Statement covers period
from 01-01-18
through 06-30-18

I.D. NUMBER
1275172

SUMMARY PAGE

Page 2 of 2

FPPC Form 460 (Jan/2016)
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