

**Recipient Committee**

**Campaign Statement**

**Cover Page**

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**Statement covers period**

from 02/16/2020
to 06/30/2020

**Date of election if applicable:**

(Month, Day, Year)

03/03/2020

**CITY OF SCOTTS VALLEY**

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1. **Type of Recipient Committee:** All Committees – Complete Parts 1, 2, 3, and 4.

- Primary Formed Ballot Measure Committee
- Controlled
- Sponsored
- Small Contributor Committee
- AllComplete Part 5

2. **Type of Statement:**

- Primary Formed Candidate Committee
- AllComplete Part 7

3. **Committee Information**

**I.D. NUMBER**

1423931

**COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE)**

Save Scotts Valley - Yes on Z Supported by Council Members Dilles, Johnson, Lind, Reed, and Timm

**STREET ADDRESS (NO P.O. BOX)**

226 Burlwood Drive

**CITY**

Scotts Valley

**STATE**

CA

**ZIP CODE**

95066

**AREA CODE/PHONE**

(831) 566-3180

**MAILING ADDRESS**

P. O. Box 66123

**CITY**

Scotts Valley

**STATE**

CA

**ZIP CODE**

95067

**AREA CODE/PHONE**

(831) 566-3180

**NAME OF TREASURER**

Jack Dilles

**MAILING ADDRESS**

P. O. Box 66123

**CITY**

Scotts Valley

**STATE**

CA

**ZIP CODE**

95067

**AREA CODE/PHONE**

(831) 566-3180

**NAME OF ASSISTANT TREASURER, IF ANY**

**MAILING ADDRESS**

**CITY**

**STATE**

**ZIP CODE**

**AREA CODE/PHONE**

**OPTIONAL: FAX / E-MAIL ADDRESS**

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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.

**Signature of Treasurer or Assistant Treasurer**

By [Signature]

[Signature on behalf of all controlling officeholders]

**Date**

7/6/2020

---

**Treasurer(s)**

**NAME OF TREASURER**

Jack Dilles

**MAILING ADDRESS**

P. O. Box 66123

**CITY**

Scotts Valley

**STATE**

CA

**ZIP CODE**

95067

**AREA CODE/PHONE**

(831) 566-3180

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**FPPC Form 460 (Jan/2016)**

FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
5. Officeholder or Candidate Controlled Committee

**NAME OF OFFICEHOLDER OR CANDIDATE**

**OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)**

**RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)**  
**CITY**  
**STATE**  
**ZIP**

**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**

**NAME OF TREASURER**

**CONTROLLED COMMITTEE?**  
**YES**  
**NO**

**COMMITTEE ADDRESS**  
**STREET ADDRESS (NO P.O. BOX)**  
**CITY**  
**STATE**  
**ZIP CODE**  
**AREA CODE/PHONE**

6. Primarily Formed Ballot Measure Committee

**NAME OF BALLOT MEASURE**

*City of Scotts Valley Sales tax “Scotts Valley City Services Protection Measure”*

**BALLOT NO. OR LETTER**

**JURISDICTION**  
City of Scotts Valley  
**SUPPORT**

**OPPOSE**

**Identify the controlling officeholder, candidate, or state measure proponent, if any.**

**NAME OF OFFICEHOLDER, CANDIDATE, OR PROponent**

1) Jack Dilles, 2) Randy Johnson, 3) Donna Lind, 4) Jim Reed, & 5) Derek Timm

**OFFICE SOUGHT OR HELD**

1), 2), 3), 4), & 5): City Council Member

**DISTRICT NO. IF ANY**

N/A

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**

**OPPOSE**

**NAME OF OFFICEHOLDER OR CANDIDATE**

**OFFICE SOUGHT OR HELD**

**SUPPORT**

**OPPOSE**

**NAME OF OFFICEHOLDER OR CANDIDATE**

**OFFICE SOUGHT OR HELD**

**SUPPORT**

**OPPOSE**

**NAME OF OFFICEHOLDER OR CANDIDATE**

**OFFICE SOUGHT OR HELD**

**SUPPORT**

**OPPOSE**

*Attach continuation sheets if necessary*
## Contributions Received

<table>
<thead>
<tr>
<th>Description</th>
<th>Schedule</th>
<th>Column A (Total This Period)</th>
<th>Column B (Calendar Year Total to Date)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monetary Contributions</td>
<td>A, Line 3</td>
<td>$13,050.00</td>
<td>$28,999.00</td>
</tr>
<tr>
<td>Loans Received</td>
<td>B, Line 3</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>SUBTOTAL CASH CONTRIBUTIONS</td>
<td>A, Line 2</td>
<td>$13,050.00</td>
<td>$28,999.00</td>
</tr>
<tr>
<td>Nonmonetary Contributions</td>
<td>C, Line 3</td>
<td>$70.00</td>
<td>$2,424.74</td>
</tr>
<tr>
<td>TOTAL CONTRIBUTIONS RECEIVED</td>
<td>A, Line 4</td>
<td>$13,120.00</td>
<td>$31,423.74</td>
</tr>
</tbody>
</table>

## Expenditures Made

<table>
<thead>
<tr>
<th>Description</th>
<th>Schedule</th>
<th>Column A (Total This Period)</th>
<th>Column B (Calendar Year Total to Date)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payments Made</td>
<td>E, Line 4</td>
<td>$18,103.80</td>
<td>$29,320.59</td>
</tr>
<tr>
<td>Loans Made</td>
<td>H, Line 3</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>SUBTOTAL CASH PAYMENTS</td>
<td>A, Line 2</td>
<td>$18,103.80</td>
<td>$29,320.59</td>
</tr>
<tr>
<td>Accrued Expenses (Unpaid Bills)</td>
<td>F, Line 3</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Nonmonetary Adjustment</td>
<td>C, Line 3</td>
<td>$70.00</td>
<td>$2,424.74</td>
</tr>
<tr>
<td>TOTAL EXPENDITURES MADE</td>
<td>E, Line 10</td>
<td>$18,173.80</td>
<td>$31,743.33</td>
</tr>
</tbody>
</table>

## Current Cash Statement

12. Beginning Cash Balance: $5,732.21
13. Cash Receipts: $13,050.00
14. Miscellaneous Increases to Cash: $0
15. Cash Payments: $18,103.80
16. ENDING CASH BALANCE: $678.41

If this is a termination statement, Line 16 must be zero.

## Cash Equivalents and Outstanding Debts

18. Cash Equivalents: $0
19. Outstanding Debts: $0

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To calculate Column B, add 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).

---

**Calendar Year Summary for Candidates Running in Both the State Primary and General Elections**

<table>
<thead>
<tr>
<th>Date Range</th>
<th>Contributions Received</th>
<th>Expenditures Made</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/1 through 6/30</td>
<td>$13,050.00</td>
<td>$28,999.00</td>
</tr>
<tr>
<td>7/1 to Date</td>
<td>$0</td>
<td>$0</td>
</tr>
</tbody>
</table>

**Expenditure Limit Summary for State Candidates**

22. Cumulative Expenditures Made:

- **Date of Election (mm/dd/yy)**: 
- **Total to Date**: $18,173.80

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

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

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) .......................................................... $13,050.00

2. Amount received this period – unitemized monetary contributions of less than $100 .................................................. $ - 0 -

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ........................................ TOTAL $ 13,050.00

*Contributor Codes
IND – Individual
COM – Recipient Committee
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

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**Schedule A**

**Monetary Contributions Received**

Amounts may be rounded to whole dollars.

**Statement covers period from 02/16/2020 through 06/30/2020**

**NAME OF FILER**

Save Scotts Valley - Yes on Z Supported by Council Members Dilles, Johnson, Lind, Reed, and Timm

**I.D. NUMBER**

1423931

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>02/18/2020</td>
<td>SVJ, LLC 8 North San Pedro, Suite 300 San Jose, CA 95110</td>
<td>☑ OTH</td>
<td></td>
<td>$1,000.00</td>
<td>$1,000.00</td>
<td></td>
</tr>
<tr>
<td>02/19/2020</td>
<td>Scotts Village, LLC c/o PGI Management, Inc. 1606 North Main Street Salinas, CA 93906</td>
<td>☑ OTH</td>
<td></td>
<td>$2,500.00</td>
<td>$2,500.00</td>
<td></td>
</tr>
<tr>
<td>02/19/2020</td>
<td>San Jose Police Officers Association Political Issues Committee (FPPC #1249833) 1151 North Fourth Street San Jose, CA 95112</td>
<td>☑ COM</td>
<td>self-employed Robert Slawinski Auctioneers</td>
<td>$5,000.00</td>
<td>$5,000.00</td>
<td></td>
</tr>
<tr>
<td>02/24/2020</td>
<td>Robert Slawinski 1500 Green Hills Road #100 Scotts Valley, CA 95066</td>
<td>☑ OTH</td>
<td></td>
<td>$500.00</td>
<td>$500.00</td>
<td></td>
</tr>
<tr>
<td>02/25/2020</td>
<td>Scott Kriens 18974 Monte Vista Drive Saratoga, CA 95070</td>
<td>☑ OTH</td>
<td>Chairman of the Board Juniper Networks</td>
<td>$3,500.00</td>
<td>$3,500.00</td>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTAL $ 12,500.00**
Schedule A (Continuation Sheet)  
Monetary Contributions Received

STATEMENT COVERS PERIOD
from 02/16/2020 through 05/30/2020

NAME OF FILER
Save on Scotts Valley - Yes on Z Supported by Council Members Dilles, Johnson, Lind, Reed, and Timm

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>03/09/2020</td>
<td>Heritage Real Estate Ventures, LLC 2455 Brooktree Ranch Road Aptos, CA 95003</td>
<td>□ IND</td>
<td>□ COM</td>
<td>$400</td>
<td>$400</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ OTH</td>
<td>□ PTY</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ SCC</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>03/09/2020</td>
<td>Todd Creamer 33 Polo Heights Scotts Valley, CA 95066</td>
<td>□ IND</td>
<td>□ COM</td>
<td>$150</td>
<td>$150</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ OTH</td>
<td>□ PTY</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ SCC</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

SUBTOTAL $ 550.00

*Contributor Codes
IND – Individual
COM – Recipient Committee
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee
Schedule C
Nonmonetary Contributions Received

Amounts may be rounded to whole dollars.

Statement covers period from 02/16/2020 through 06/30/2020

CALIFORNIA FORM 460
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NAME OF FILER
Save Scotts Valley - Yes on Z Supported by Council Members Dilles, Johnson, Lind, Reed, and Timm
I.D. NUMBER 1423931

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE*</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>DESCRIPTION OF GOODS OR SERVICES</th>
<th>AMOUNT/FAIR MARKET VALUE</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>SCC</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>SCC</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>SCC</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL $ - 0 -

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions.
   (Include all Schedule C subtotals.) .................................................. $ - 0 -

2. Amount received this period – unitemized nonmonetary contributions of less than $100 $ 70.00

3. Total nonmonetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) ........ TOTAL $ 70.00

*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

FPPC Form 460 (Jan/2016))
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www.fppc.ca.gov
Save Scotts Valley - Yes on Z Supported by Council Members Dilles, Johnson, Lind, Reed, and Timm

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- 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 communications
- MTG meetings and appearances
- OFC office expenses
- PET petition circulating
- PHO phone banks
- POL polling and survey research
- POS postage, delivery and messenger services
- PRO professional services (legal, accounting)
- PRT print ads
- 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
- TSF transfer between committees of the same candidate/sponsor
- VOT voter registration
- WEB information technology costs (internet, e-mail)

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sentinel Printers, Inc. 1025 Center Street, Santa Cruz, CA 95060</td>
<td>PRT</td>
<td>Print ad services</td>
<td>$3,130.00</td>
</tr>
<tr>
<td>Storefront Political Media 160 Pine Street, Suite 700, San Francisco, CA 94111</td>
<td>WEB</td>
<td>Digital media production and placement</td>
<td>$8,500.00</td>
</tr>
<tr>
<td>Maverick Mailing, LLC 1111 Ocean Street, Suite 101, Santa Cruz, CA 95060</td>
<td>POS</td>
<td>Mailing services and postage</td>
<td>$4,813.80</td>
</tr>
</tbody>
</table>

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

**SUBTOTAL $ 16,443.80**

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ........................................ $ 18,088.80
2. Unitemized payments made this period of under $100 ................................................................. $ 15.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ........... $ 0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ........................................... $ 18,103.80

FPPC Form 460 (Jan/2016))
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
**Schedule E**
(Continuation Sheet)
Payments Made

**NAME OF FILER**
Save Scotts Valley - Yes on Z Supported by Council Members Dilles, Johnson, Lind, Reed, and Timm

**I.D. NUMBER**
1423931

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CMP</td>
<td>campaign paraphernalia/misc.</td>
</tr>
<tr>
<td>CNS</td>
<td>campaign consultants</td>
</tr>
<tr>
<td>CTB</td>
<td>contribution (explain nonmonetary)*</td>
</tr>
<tr>
<td>CVC</td>
<td>civic donations</td>
</tr>
<tr>
<td>FIL</td>
<td>candidate filing/ballot fees</td>
</tr>
<tr>
<td>FND</td>
<td>fundraising events</td>
</tr>
<tr>
<td>IND</td>
<td>independent expenditure supporting/opposing others (explain)*</td>
</tr>
<tr>
<td>LEG</td>
<td>legal defense</td>
</tr>
<tr>
<td>LIT</td>
<td>campaign literature and mailings</td>
</tr>
<tr>
<td>MBR</td>
<td>member communications</td>
</tr>
<tr>
<td>MTG</td>
<td>meetings and appearances</td>
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<tr>
<td>OFC</td>
<td>office expenses</td>
</tr>
<tr>
<td>PET</td>
<td>petition circulating</td>
</tr>
<tr>
<td>PHO</td>
<td>phone banks</td>
</tr>
<tr>
<td>POL</td>
<td>polling and survey research</td>
</tr>
<tr>
<td>POS</td>
<td>postage, delivery and messenger services</td>
</tr>
<tr>
<td>PRO</td>
<td>professional services (legal, accounting)</td>
</tr>
<tr>
<td>PRT</td>
<td>print ads</td>
</tr>
<tr>
<td>RAD</td>
<td>radio airtime and production costs</td>
</tr>
<tr>
<td>RFD</td>
<td>returned contributions</td>
</tr>
<tr>
<td>SAL</td>
<td>campaign workers' salaries</td>
</tr>
<tr>
<td>TEL</td>
<td>t.v. or cable airtime and production costs</td>
</tr>
<tr>
<td>TRC</td>
<td>candidate travel, lodging, and meals</td>
</tr>
<tr>
<td>TRS</td>
<td>staff/spouse travel, lodging, and meals</td>
</tr>
<tr>
<td>TSF</td>
<td>transfer between committees of the same candidate/sponsor</td>
</tr>
<tr>
<td>VOT</td>
<td>voter registration</td>
</tr>
<tr>
<td>WEB</td>
<td>information technology costs (internet, e-mail)</td>
</tr>
</tbody>
</table>

**NAME AND ADDRESS OF PAYEE**
(If committee, also enter I.D. number)

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Code</th>
<th>Description</th>
<th>Amount Paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rendell Aguisanda</td>
<td>4610 Felton Street, #D, San Diego, CA 92116</td>
<td>PRT</td>
<td>Print ad design services</td>
<td>$1,355.00</td>
</tr>
<tr>
<td>Two Doors</td>
<td>18 Victor Square, Unit D, Scotts Valley, CA 95066</td>
<td>OFC</td>
<td>Refreshments for campaign volunteers</td>
<td>$290.00</td>
</tr>
</tbody>
</table>

**SUBTOTAL $ 1,645.00**