Recipient Committee
Campaign Statement
Cover Page

Statement covers period
from 07-01-20
through 09-19-20

Date of election if applicable:
(Month, Day, Year)
11-03-20

Type of Recipient 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/Officeholder Committee
(Also Complete Part 7)

Type of Statement:
☑ Pre-election Statement
☐ Semi-annual Statement
☐ Termination Statement
(Also file a Form 410 Termination)
☐ Amendment (Explain below)

Committee Information
I.D. NUMBER
1267489

COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE)
Randy Johnson for Scotts Valley City Council 2020 Re-Election Committee

STREET ADDRESS (NO P.O. BOX)
145 Zinfandel Drive

CITY
Scotts Valley

STATE
CA

ZIP CODE
95066

AREA CODE/PHONE
(831) 439-9041

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

MAILING ADDRESS

CITY

STATE

ZIP CODE

AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

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 9-23-2020
By
Signature of Treasurer or Assistant Treasurer

Executed on 9-24-2020
By
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By
Signature of Controlling Officeholder, Candidate, State Measure Proponent

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

**NAME OF OFFICEHOLDER OR CANDIDATE**
Randy Johnson for Scotts Valley City Council 2020 Re-Election Committ

**OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)**
Council Member, City of Scotts Valley

**RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP**
145 Zinfandel Drive Scotts Valley, CA 95066

**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.

<table>
<thead>
<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>NAME OF TREASURER</th>
<th>CONTROLLED COMMITTEE?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>□ YES □ NO</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>COMMITTEE ADDRESS</th>
<th>STREET ADDRESS (NO P.O. BOX)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
<th>AREA CODE/PHONE</th>
</tr>
</thead>
</table>

6. **Primarily Formed Ballot Measure Committee**

**NAME OF BALLOT MEASURE**

**BALLOT NO. OR LETTER JURISDICTION**

- □ SUPPORT
- □ OPPOSE

**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.

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>□ SUPPORT □ OPPOSE</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>□ SUPPORT □ OPPOSE</td>
</tr>
</tbody>
</table>

**Attach continuation sheets if necessary**

---

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

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A (From Attached Schedules)</th>
<th>Column B (Calendar Year Total to Date)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monetary Contributions</td>
<td>$635.63</td>
<td>$1,130.63</td>
</tr>
<tr>
<td>Loans Received</td>
<td>$571.00</td>
<td>$571.00</td>
</tr>
<tr>
<td>SUBTOTAL CASH CONTRIBUTIONS</td>
<td>$1,206.63</td>
<td>$1,701.63</td>
</tr>
<tr>
<td>Nonmonetary Contributions</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>TOTAL CONTRIBUTIONS RECEIVED</td>
<td>$1,206.63</td>
<td>$1,701.63</td>
</tr>
</tbody>
</table>

### Expenditures Made

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payments Made</td>
<td>$727.00</td>
<td>$1,371.42</td>
</tr>
<tr>
<td>Loans Made</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>SUBTOTAL CASH PAYMENTS</td>
<td>$727.00</td>
<td>$1,371.42</td>
</tr>
<tr>
<td>Accrued Expenses (Unpaid Bills)</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Nonmonetary Adjustment</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>TOTAL EXPENDITURES MADE</td>
<td>$727.00</td>
<td>$1,371.42</td>
</tr>
</tbody>
</table>

### Current Cash Statement

12. Beginning Cash Balance

   Previous Summary Page, Line 16: $38.63

13. Cash Receipts

   Column A, Line 3 above: $1,206.63

14. Miscellaneous Increases to Cash

   Schedule I, Line 4: $0.00

15. Cash Payments

   Column A, Line 8 above: $727.00

16. ENDING CASH BALANCE

   Add Lines 12 + 13 + 14, then subtract Line 15: $441.00

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

### Cash Equivalents and Outstanding Debts

18. Cash Equivalents

   See instructions on reverse: $__________

19. Outstanding Debts

   Add Line 2 + Line 9 in Column B above: $__________

---

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

- Contributions Received: $__________ $__________
- Expenditures Made: $__________ $__________

---

**Expenditure Limit Summary for State Candidates**

22. Cumulative Expenditures Made*

   (If Subject to Voluntary Expenditure Limit)

   Date of Election (mm/dd/yy): $__________

---

*Amounts in this section may be different from amounts reported in Column B.
<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID. NUMBER)</th>
<th>CONTRIBUTOR CODE</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</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>
</table>
| 08-12-20      | Jim Reed  
200 E. Santa Clara St.  
San Jose, CA 95113 | □ IND  
□ COM  
□ OTH  
□ PTY  
□ SCC | Chief of Staff City of San Jose  
□ IND  
□ COM  
□ OTH  
□ PTY  
□ SCC | 100.00  
□ IND  
□ COM  
□ OTH  
□ PTY  
□ SCC | 100.00  
□ IND  
□ COM  
□ OTH  
□ PTY  
□ SCC | 100.00  
□ IND  
□ COM  
□ OTH  
□ PTY  
□ SCC |
| 098-12-20     | Lea Reed  
225 Navigator Dr  
Scotts Valley, CA | □ IND  
□ COM  
□ OTH  
□ PTY  
□ SCC | Homemaker  
□ IND  
□ COM  
□ OTH  
□ PTY  
□ SCC | 100.00  
□ IND  
□ COM  
□ OTH  
□ PTY  
□ SCC | 100.00  
□ IND  
□ COM  
□ OTH  
□ PTY  
□ SCC | 100.00  
□ IND  
□ COM  
□ OTH  
□ PTY  
□ SCC |
| 09-17-20      | Patricia Melehan  
256 Spreading Oak Dr.  
Scotts Valley, CA | □ IND  
□ COM  
□ OTH  
□ PTY  
□ SCC | Retired  
□ IND  
□ COM  
□ OTH  
□ PTY  
□ SCC | 100.00  
□ IND  
□ COM  
□ OTH  
□ PTY  
□ SCC | 100.00  
□ IND  
□ COM  
□ OTH  
□ PTY  
□ SCC | 100.00  
□ IND  
□ COM  
□ OTH  
□ PTY  
□ SCC |

**Schedule A Summary**

1. Amount received this period – itemized monetary contributions.  
   (Include all Schedule A subtotals.) .............................................. $ 300.00

2. Amount received this period – unitemized monetary contributions of less than $100 ............... $ 335.63

3. Total monetary contributions received this period.  
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .................. TOTAL $ 635.63

*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
### Schedule B – Part 1

**Loans Received**

Amounts may be rounded to whole dollars.

**Statement covers period**

from 07-01-20 
through 09-19-20

**NAME OF FILER**

Randy Johnson for Scotts Valley City Council 2020 Re-Election Committee

**I.D. NUMBER**

1267489

<table>
<thead>
<tr>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD</th>
<th>(b) AMOUNT RECEIVED THIS PERIOD</th>
<th>(c) AMOUNT PAID OR FORGIVEN THIS PERIOD</th>
<th>(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
<th>(e) INTEREST PAID THIS PERIOD</th>
<th>(f) ORIGINAL AMOUNT OF LOAN</th>
<th>(g) CUMULATIVE CONTRIBUTIONS TO DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Randy Johnson</td>
<td>Insurance</td>
<td>$200.00</td>
<td>$0.00</td>
<td>$200.00</td>
<td>0% RATE</td>
<td>$200.00</td>
<td>03-09-17</td>
<td>CALENDAR YEAR</td>
</tr>
<tr>
<td>145 Zinfandel Drive</td>
<td>Scotts Valley, CA 95066</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>PER ELECTION**</td>
</tr>
<tr>
<td>□ IND □ COM □ OTH □ Pty □ SCC</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Randy Johnson</td>
<td>Insurance</td>
<td>$0.00</td>
<td>$571.00</td>
<td>$571.00</td>
<td>0% RATE</td>
<td>$571.00</td>
<td>08-07-20</td>
<td>CALENDAR YEAR</td>
</tr>
<tr>
<td>145 Zinfandel Drive</td>
<td>Scotts Valley, CA 95066</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>PER ELECTION**</td>
</tr>
<tr>
<td>□ IND □ COM □ OTH □ Pty □ SCC</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTALS** $571.00 $0.00 $571.00 $0.00

---

**Schedule B Summary**

1. Loans received this period

(Total Column (b) plus unitemized loans of less than $100.)

$571.00

2. Loans paid or forgiven this period

(Total Column (c) plus loans under $100 paid or forgiven.)

(Include loans paid by a third party that are also itemized on Schedule A.)

$0.00

3. Net change this period. (Subtract Line 2 from Line 1.)

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

NET $571.00

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

**If required.

---

*Contributor Codes

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

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www.fppc.ca.gov
Schedule E Payments Made

Amounts may be rounded to whole dollars.

Statement covers period from 07-01-20 through 09-19-20

Randy Johnson for Scotts Valley City Council 2020 Re-Election Committee

I.D. NUMBER 1267489

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>Santa Cruz County Clerk</td>
<td>FIL</td>
<td></td>
<td>$571.00</td>
</tr>
<tr>
<td>701 Ocean Street, Room 310</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Santa Cruz, CA 95060</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wix.com</td>
<td>WEB</td>
<td></td>
<td>156.00</td>
</tr>
<tr>
<td>100 Gansevoort St.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>New York, New York 10014</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

SUBTOTAL $ 727.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) .................................................. $ 727.00
2. Unitemized payments made this period of under $100 .................................................................................. $ 0.00
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.) .................................................. TOTAL $ 727.00

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