Recipient Committee
Campaign Statement
Cover Page

Statement covers period
from 1.1.18
through 9.22.18

Date of election if applicable:
(Month, Day, Year)
11/6/18

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.
   - Officeworker, Candidate Controlled Committee
   - State Candidate Election Committee
   - Recall
   - Primarily Formed Ballot Measure Committee
   - Controlled
   - Sponsored
   - General Purpose Committee
   - Sponsored
   - Small Contributor Committee
   - Primarily Formed Candidate/Officeholder Committee

2. Type of Statement:
   - Pre-election Statement
   - Semi-annual Statement
   - Termination Statement
   - Amendment (Explain below)

3. Committee Information
   ID NUMBER
   14111716
   COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE)
   DEBEBE PETERSON GROVER BEACH MAYOR 2018 MAKING YOUR TAX OLLARS GO FURTHER
   STREET ADDRESS (NO P.O. BOX)
   CITY
   GROVER BEACH
   STATE
   CA
   ZIP CODE
   93433
   MAILING ADDRESS
   NAME OF TREASURER
   DEBEBE PETERSON
   MAILING ADDRESS
   CITY
   GROVER BEACH
   STATE
   CA
   ZIP CODE
   93433
   Mailing ADDRESS
   NAME OF ASSISTANT TREASURER, IF ANY
   MAILING ADDRESS
   CITY
   GROVER BEACH
   STATE
   CA
   ZIP CODE
   93433
   MAILING ADDRESS
   OPTIONAL FAX / E-MAIL ADDRESS
   866 467 9612 / DEBBIEPETE805@GMAIL.COM
   OPTIONAL FAX / E-MAIL ADDRESS
   866 467 0612 / DEBBIEPETE805@GMAIL.COM

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 10.25.18
   Date
   Date
   Date
   Date

   Signature of Controlling Officeworker, Candidate, State Measure Proponent or Responsible Officer of Sponsor
   By
   Signature of Controlling Officeworker, Candidate State Measure Proponent
   By
## Contributions Received

| 1. Monetary Contributions | Schedule A, Line 3 | $1,338.00 |  |
| 2. Loans Received | Schedule B, Line 3 | $0 |  |
| 3. SUBTOTAL CASH CONTRIBUTIONS | Add Lines 1 + 2 | $1,338.00 |  |
| 4. Nonmonetary Contributions | Schedule C, Line 3 | $0 |  |
| 5. TOTAL CONTRIBUTIONS RECEIVED | Add Lines 3 + 4 | $1,338.00 |  |

## Expenditures Made

| 6. Payments Made | Schedule E, Line 4 | $624.38 |  |
| 7. Loans Made | Schedule H, Line 3 | $0 |  |
| 8. SUBTOTAL CASH PAYMENTS | Add Lines 6 + 7 | $624.38 |  |
| 9. Accrued Expenses (Unpaid Bills) | Schedule F, Line 3 | $-480.13 |  |
| 10. Nonmonetary Adjustment | Schedule C, Line 3 | $0 |  |
| 11. TOTAL EXPENDITURES MADE | Add Lines 8 + 9 + 10 | $144.25 |  |

## Current Cash Statement

| 12. Beginning Cash Balance | Previous Summary Page, Line 16 | $0 |  |
| 13. Cash Receipts | Column A, Line 3 above | $1338.00 |  |
| 14. Miscellaneous Increases to Cash | Schedule I, Line 4 | $0 |  |
| 15. Cash Payments | Column A, Line 8 above | $624.38 |  |
| 16. ENDING CASH BALANCE | Add Lines 12 + 13 + 14, then subtract Line 15 | $713.62 |  |

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

## Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)

| Date of Election (mm/dd/yy) | Total to Date | $ |  |
|  |  |  |  |

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

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**Note**: The form indicates that amounts may be rounded to whole dollars. The form is used for reporting campaign contributions and expenditures. The specific calculations and references to schedules and lines are provided for each section.