Recipient Committee
Campaign Statement
Cover Page
(Government Code Sections 84200-84216.5)

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.
   - Officeholder, Candidate Controlled Committee
   - Primarily Formed Ballot Measure Committee
   - Recall
   - Semi-annual Statement
   - General Purpose Committee
   - Major Party/Central Committee
   - Primarily Formed Candidate/Officeholder Committee

2. Type of Statement:
   - Prelection Statement
   - Quarterly Statement
   - Special Odd-Year Report
   - Amendment (Explain below)

3. Committee Information
   LID NUMBER:
   COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
   Steve Martin for City Council 2016

   STREET ADDRESS (NO P.O. BOX)
   31500 Grape St., #3-264
   CITY:
   Lake Elsinore
   STATE:
   CA
   ZIP CODE:
   92532
   AREA CODE/PHONE:
   (951) 263-8962

   MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
   525 E. Seaside Way, #101-C
   CITY:
   Long Beach
   STATE:
   CA
   ZIP CODE:
   90802
   AREA CODE/PHONE:
   (562) 983-0815

   OPTIONAL: FAX / E-MAIL ADDRESS
   gary@crummittandassociates.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.

   Executed on 09/28/2016
   By
   Date

   Executed on 09/28/2016
   By
   Date

   Executed on
   By
   Date

   Executed on
   By
   Date

   Signature of Controlling Officerholder, Candidate, State Measure Proponent

   Signature of Controlling Officerholder, Candidate, State Measure Proponent

   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

Steve Martin

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

City Council Member: Lake Elsinore

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

4152 Alderwood Pl. Lake Elsinore CA 92530

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

BALLOT NO. OR LETTER JURISDICTION

SUPPORT OPPOSE

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

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPOSOR

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.

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

www.netfile.com

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

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monetary Contributions</td>
<td>$350.00</td>
<td>$350.00</td>
<td>Loans Received</td>
<td>$2,000.00</td>
</tr>
<tr>
<td>Loans Received</td>
<td>$2,000.00</td>
<td>$2,000.00</td>
<td>SUBTOTAL CASH CONTRIBUTIONS</td>
<td>$2,350.00</td>
</tr>
<tr>
<td>Nonmonetary Contributions</td>
<td>$1,250.00</td>
<td>$1,250.00</td>
<td>TOTAL CONTRIBUTIONS RECEIVED</td>
<td>$3,600.00</td>
</tr>
</tbody>
</table>

### Expenditures Made

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payments Made</td>
<td>$812.00</td>
<td>$812.00</td>
<td>Loans Made</td>
<td>$0.00</td>
</tr>
<tr>
<td>SUBTOTAL CASH PAYMENTS</td>
<td>$812.00</td>
<td>$812.00</td>
<td>Accrued Expenses (Unpaid Bills)</td>
<td>$391.99</td>
</tr>
<tr>
<td>Nonmonetary Adjustment</td>
<td>$1,250.00</td>
<td>$1,250.00</td>
<td>TOTAL EXPENDITURES MADE</td>
<td>$2,453.99</td>
</tr>
</tbody>
</table>

### Current Cash Statement

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginning Cash Balance</td>
<td>$0.00</td>
<td>Previous Summary Page, Line 16</td>
<td></td>
</tr>
<tr>
<td>Cash Receipts</td>
<td>$2,350.00</td>
<td>Column A, Line 3 above</td>
<td></td>
</tr>
<tr>
<td>Miscellaneous Increases to Cash</td>
<td>$0.00</td>
<td>Schedule I, Line 4</td>
<td></td>
</tr>
<tr>
<td>Cash Payments</td>
<td>$812.00</td>
<td>Column A, Line 8 above</td>
<td></td>
</tr>
<tr>
<td>ENDING CASH BALANCE</td>
<td>$3,538.00</td>
<td>Add Lines 12 + 13 + 14, then subtract Line 15</td>
<td></td>
</tr>
</tbody>
</table>

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).

### Expenditure Limit Summary for State Candidates

<table>
<thead>
<tr>
<th>Description</th>
<th>Date of Election</th>
<th>Total to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>22. Cumulative Expenditures Made*</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Amounts in this section may be different from amounts reported in Column B.
Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

Statement covers period
from 01/01/2016
through 09/24/2016

CALIFORNIA
FORM 460

Page 5 of 8

I.D. NUMBER
1389210

Steve Martin for City Council 2016

<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>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>08/31/2016</td>
<td>Lona Tomlinson 19011 Calle Juanito Murrieta, CA 92562</td>
<td>□ IND</td>
<td>Principal Thom &amp; Associates</td>
<td>100.00</td>
<td>100.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ COM</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ OTH</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ PTY</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>
</tr>
</tbody>
</table>

SUBTOTAL $ 100.00

Schedule A Summary

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) .................................................. $ 100.00

2. Amount received this period – unitemized monetary contributions of less than $100 .......................... $ 250.00

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ......................... TOTAL $ 350.00

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

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FPCC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
# Schedule B – Part 1
## Loans Received

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>(B) OUTSTANDING BALANCE BEGINNING THIS PERIOD</th>
<th>(C) AMOUNT PAID OR FORGIVEN THIS PERIOD</th>
<th>(D) OUTSTANDING BALANCE CLOSE AT 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>President Instructional Access Inc.</td>
<td>$0.00</td>
<td>$2,000.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ IND □ COM □ OTH □ PTY □ SCC</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>⁹ IND □ COM □ OTH □ PTY □ SCC</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ IND □ COM □ OTH □ PTY □ SCC</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ IND □ COM □ OTH □ PTY □ SCC</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### SUBTOTALS

<p>| | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$2,000.00</td>
<td>0.00</td>
<td>$2,000.00</td>
<td>0.00</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Schedule B Summary

1. Loans received this period .................................................. $2,000.00
   (Total Column (b) plus unitemized loans of less than $100.)

2. Loans paid or forgiven this period ..................................... $0.00
   (Total Column (c) plus loans under $100 paid or forgiven.)
   (Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) ........... NET $2,000.00
   (May be a negative number)

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.
### Schedule C
Nonmonetary Contributions Received

Amounts may be rounded to whole dollars.

<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>09/20/2016</td>
<td>Pierre Cobbaert 27503 Sunnyslope Ave, Lake Elsinore, CA 92530</td>
<td>☑ IND</td>
<td>Web Designer Calkewalk Websites.com</td>
<td>Website design</td>
<td>1,250.00</td>
<td>1,250.00</td>
<td></td>
</tr>
</tbody>
</table>

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL $ 1,250.00**

---

### Schedule C Summary

1. **Amount received this period – itemized nonmonetary contributions.**
   
   (Include all Schedule C subtotals.) ................................................................. $ 1,250.00

2. **Amount received this period – unitemized nonmonetary contributions of less than $100** $ 0.00

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 $ 1,250.00

---

*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

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Schedule E Payments Made

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>NAME OF FILER</th>
<th>Name</th>
<th>Address 1</th>
<th>Address 2</th>
<th>City/State/Zip</th>
</tr>
</thead>
<tbody>
<tr>
<td>Steve Martin for City Council 2016</td>
<td>Crummitt and Associates</td>
<td>525 E. Seaside Way #101-C</td>
<td>Long Beach, CA 90802</td>
<td></td>
</tr>
</tbody>
</table>

**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>C/P</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>ID</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>
</tr>
<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>

<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>Crummitt and Associates</td>
<td>PRO</td>
<td></td>
<td>750.00</td>
</tr>
</tbody>
</table>

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

**SUBTOTAL $** 750.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ............................................ $ 750.00
2. Unitemized payments made this period of under $100 .............................. $ 62.00
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 $ 812.00

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Schedule F
Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

Statement covers period
from 01/01/2016
through 09/24/2016

NAME OF FILER
Steve Martin for City Council 2016

ICODES: 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>
<th>CODE</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>G/P</td>
<td>campaign paraphernalia/misc.</td>
<td>MBR</td>
<td>member communications</td>
</tr>
<tr>
<td>CNS</td>
<td>campaign consultants</td>
<td>MTG</td>
<td>meetings and appearances</td>
</tr>
<tr>
<td>CTB</td>
<td>contribution (explain nonmonetary)*</td>
<td>OFC</td>
<td>office expenses</td>
</tr>
<tr>
<td>CVC</td>
<td>civic donations</td>
<td>PET</td>
<td>petition circulating</td>
</tr>
<tr>
<td>FIL</td>
<td>candidate filing/ballot fees</td>
<td>PHO</td>
<td>phone/banks</td>
</tr>
<tr>
<td>PND</td>
<td>fundraising events</td>
<td>POL</td>
<td>polling and survey research</td>
</tr>
<tr>
<td>IND</td>
<td>independent expenditure supporting/opposing others (explain)*</td>
<td>POS</td>
<td>postage, delivery and messenger services</td>
</tr>
<tr>
<td>LEG</td>
<td>legal defense</td>
<td>PRO</td>
<td>professional services (legal, accounting)</td>
</tr>
<tr>
<td>LIT</td>
<td>campaign literature and mailings</td>
<td>PRT</td>
<td>print ads</td>
</tr>
</tbody>
</table>

D'Amileau Baulk
31500 Grape St., #3-264
Lake Elsinore, CA 92532

P.O. Box rental
0.00
207.00
0.00
207.00

Peggy Martin
4152 Alderwood Pl.
Lake Elsinore, CA 92530

OFC
0.00
184.99
0.00
184.99

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

<table>
<thead>
<tr>
<th>CODE OR DESCRIPTION</th>
<th>OUTSTANDING BALANCE BEGINNING OF THIS PERIOD</th>
<th>AMOUNT INCURRED THIS PERIOD</th>
<th>AMOUNT PAID THIS PERIOD</th>
<th>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>P.O. Box rental</td>
<td>0.00</td>
<td>207.00</td>
<td>0.00</td>
<td>207.00</td>
</tr>
<tr>
<td>OFC</td>
<td>0.00</td>
<td>184.99</td>
<td>0.00</td>
<td>184.99</td>
</tr>
</tbody>
</table>

SUBTOTALS $
0.00$
391.99$
0.00$
391.99$

Schedule F Summary
1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of $100 or more, plus total unitemized accrued expenses under $100.)

INCURRED TOTALS $ 391.99

2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of $100 or more, plus total unitemized payments on accrued expenses under $100.)

PAID TOTALS $ 0.00

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)

NET $ 391.99

May be a negative number

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