Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in ink.		Ssessor-Recorder-Confesses-Recorder-Confesses-Recorder-Confesses-Recorder	sion CA	LIFORNIA 460 FORM
(Government Code Geodella GAZOG-GAZAGG)	Statement covers period from 1/1/2015	Date of election if applicable: (Month, Day, Year)	AHA)	Page	For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through6/30/2015	- Cu	Deputy Recorder	-Clerk	
1. Type of Recipient Committee: All Committees - C ✓ 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)	2. Type of Statement: ☐ Preelection Statement ☐ Semi-annual Statement ☐ Termination Statement (Also file a Form 410 Ter ☐ Amendment (Explain be	mination)	Supplementa	atement -Year Report al Preelection Attach Form 495
3. Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE Friends of Alfredo Pedroza for Supervisor 2016 STREET ADDRESS (NO P.O. BOX)		Treasurer(s) NAME OF TREASURER Michael Murray MAILING ADDRESS 11 Corbett Court CITY	STATE	ZIP CODE	AREA CODE/PHONE
11 Corbett Court CITY STATE ZIP C Napa CA 9455 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.	707 656-9223	Napa NAME OF ASSISTANT TREASURE MAILING ADDRESS	CA ER, IF ANY	94558	707 656-9223
CITY STATE ZIP C	ODE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRE	ss		
4. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of Californ 7/27/2015 Executed on 7/27/2015 Executed on Date Executed on Date	ByBy	Signature of Treesurer or Assistant Treesurer of Controlling Officeholder, Candidate, State Measure Proposition	gasdfer gasdfer officer of	<u> </u>	e and complete. I certify
Executed on	Ву	Signature of Controlling Officeholder, Candidate, State	e Measure Proponent		FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
State of California

	COVE	R PAGE - PART 2
	FORN DRM	^{1A} 460
Page _	2	of 18

NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BALLOT MEASURE			
Alfredo Pedroza					
OFFICE SOUGHT OR HELD (INCLUDE LOCAT	TION AND DISTRICT NUMBER IF APPLICABLE)	BALLOT NO. OR LETTER	JURISDICT	ION	SUPPORT
Held: Supervisor, Dist 4, County of	of Napa				OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AN	ID STREET) CITY STATE ZIP				
332 Troon Drive	Napa, CA 94558	Identify the controlling o			proponent, if a
		NAME OF OFFICEHOLDER, CA	ANDIDATE, OR PI	ROPONENT	
	ed in this Statement: List any committees ntrolled by you or are primarily formed to receive ehalf of your candidacy.	OFFICE SOUGHT OR HELD		DISTRICT NO). IF ANY
COMMITTEE NAME	I.D. NUMBER				
NAME OF TREASURER	CONTROLLED COMMITTEE?	7. Primarily Formed Car			
NAME OF TREASURER	CONTROLLED COMMITTEE?	officeholder(s) or candidate((s) for which th	is committee is primarily fo	med.
			(s) for which th		med.
COMMITTEE ADDRESS STREET ADD	YES NO	officeholder(s) or candidate((s) for which the	is committee is primarily fo	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADD	☐ YES ☐ NO RESS (NO P.O. BOX)	officeholder(s) or candidate((s) for which the	OFFICE SOUGHT OR HELL	SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADD	YES NO RESS (NO P.O. BOX) STATE ZIP CODE AREA CODE/PHONE	Officeholder(s) or candidate	(s) for which the CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGHT OR HELD OFFICE SOUGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT
COMMITTEE ADDRESS STREET ADD CITY S COMMITTEE NAME NAME OF TREASURER	TESS (NO P.O. BOX) STATE ZIP CODE AREA CODE/PHONE I.D. NUMBER CONTROLLED COMMITTEE?	NAME OF OFFICEHOLDER OR	(s) for which the CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGHT OR HELD OFFICE SOUGHT OR HELD OFFICE SOUGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE

Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE			through	6/30/2015	Page 3 of 18
NAME OF FILER Friends of Alfredo Pedroza for Supervisor 2016					I.D. NUMBER 1374964
Contributions Received 1. Monetary Contributions	\$ 57669.18 2100.00	\$ 576 21	7EAR ATE 669.18	Running in Both to General Elections 1/1 20. Contributions Received \$	mmary for Candidates the State Primary and through 6/30 7/1 to Date \$\$
Expenditures Made 6. Payments Made Schedule E, Line 4 7. Loans Made Schedule H, Line 3 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 10. Nonmonetary Adjustment Schedule C, Line 3 11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 4005.21 \$ 4005.21 \$ 2100.00	\$ 40 21	005.21 005.21 000.00 000.00	Expenditure Limit Candidates 22. Cumulati	Summary for State ive Expenditures Made* to Voluntary Expenditure Limit) Total to Date
Current Cash Statement 12. Beginning Cash Balance	\$ 57669.18 4005.21 \$ 53663.97	To calculate Columamounts in Column corresponding amfrom Column B of report. Some amo Column A may be figures that should subtracted from period amounts. If the first report being for this calendar y carry over the amortom Lines 2, 7, an any).	n A to the counts your last punts in negative I be revious f this is ng filed ear, only ounts	*Amounts in this section reported in Column B.	may be different from amounts
19. Outstanding Debts Add Line 2 + Line 9 in Column B above				FPPC Toll-Free Helpli	FPPC Form 460 (January/05) ne: 866/ASK-FPPC (866/275-3772)

Schedule A **Monetary Contributions Received**

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A Statement covers period CALIFORNIA 1/1/2015 FORM

from 6/30/2015 through. I.D. NUMBER 1374964

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Alfredo Pedroza for Supervisor 2016

chedule	A Summary				*Contributor Co	odes
			SUBTOTAL\$	8469.18		
3/27/2015	Janet Llamas 10 Hahnemann Ln Napa, CA 94558	☑IND □COM □OTH □PTY □SCC	CPA Moss Adams	150.00	150.00	
3 <i>[</i> 27/15	Gordon Huether 1821 Monticello Rd Napa, CA 94558	☑IND □COM □OTH □PTY □SCC	Owner Gordon Huether Studio	300.00	300.00	
3/27/15	Treasury Wine Estates 610 Airpark Rd Napa, CA 94558	□IND □COM ☑OTH □PTY □SCC		1000.00	1000.00	
3/26/15	Alfredo Pedroza 332 Troon Dr Napa, CA 94558	☑IND □COM □OTH □PTY □SCC	Banker Mechanics Bank	100.00	100.00	
1/26/15	Friends of Alfredo Pedroza for City Council 2012 11 Corbett Court Napa, CA 94558 ID #1346133	□IND □COM □OTH □PTY □SCC		6919.18	6919.18	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)

- 1. Amount received this period itemized monetary contributions. 55919.18 (Include all Schedule A subtotals.)\$ 1750.00 2. Amount received this period – unitemized monetary contributions of less than \$100\$
- 3. Total monetary contributions received this period. 57669.18

IND - Individual

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OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
1/1/2015

CALIFORNIA 460

through 6/30/2015 Page 5

from.

age 2 of [0

I.D. NUMBER 1374964

FULL NAME. STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR IF AN INDIVIDUAL, ENTER AMOUNT CUMULATIVE

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/26/15	Comcast 1701 JFK Blvd Philadelphia, PA 19103	☐IND ☐COM ☑OTH ☐PTY ☐SCC		300.00	300.00	
4/1/15	Sonoma RSA Inc 1515 4th St Napa, CA 94559	☐IND ☐COM ØOTH ☐PTY ☐SCC		500.00	500.00	
4/1/15	Teaderman Business Park LLC 221 Devlin Rd Napa, CA 94558	☐IND ☐COM ØOTH ☐PTY ☐SCC		1500.00	1500.00	
3/30/15	Vinolio Imports & Exports LLC 1000 Main St Napa, CA 94559	□IND □COM ☑OTH □PTY □SCC		500.00	500.00	
4/2/15	Napa LW Hotel Associates LP 8100 E 22nd St Wichita, KS 67226	□IND □COM ☑OTH □PTY □SCC		500.00	500.00	
			SUBTOTAL\$	3300.00		7000

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Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

1/1/2015

CALIFORNIA 460

FORM

through 6/30/2015 Page of

from

Page __P of __ 0

NAME OF FILER

Friends of Alfredo Pedroza for Supervisor 2016

1374964

DATE RECEIVED	FULL. NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/26/15	John Robertson for Sheriff 2014 1535 Airport Blvd Napa, CA 94558	☐IND ☐COM ☐OTH ☐PTY ☐SCC		150.00	150.00	
2/24/15	Kenzo Estate Inc 3200 Monticello Rd Napa, CA 94558	☐IND ☐COM ☑OTH ☐PTY ☐SCC	-	2500.00	2500.00	
2/23/15	The Doctors Company PAC 185 Greenwood Rd Napa, CA 94558 ID #923140	□INC □COM □OTH □PTY □SCC		1500.00	1500.00	
3/27/15	Antinori California 3700 Soda Canyon Rd Napa, CA 94558	□IND □COM ☑OTH □PTY □SCC		1500.00	1500.00	
3/13/15	Waste Connections Inc 3 Waterway Square Place The Woodlands, TX 77380	□IND □COM ☑OTH □PTY □SCC		1500.00	1500.00	
			SUBTOTAL\$	7150.00		A Sire and

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Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statem	nent covers period 1/1/2015	CALIFORNIA 460
through	6/30/2015	Page 7 of 18
L	-	I.D. NUMBER
		1374964

NAME OF FILER

Friends of Alfredo Pedroza for Supervisor 2016

AMOUNT IF AN INDIVIDUAL, ENTER **CUMULATIVE TO DATE** PER ELECTION FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR DATE OCCUPATION AND EMPLOYER RECEIVED THIS CALENDAR YEAR TO DATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE * RECEIVED (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) **IND** California Real Estate PAC COM 525S Virgil Ave 500.00 3/16/15 500.00 OTH Los Angeles, CA 90020 PTY ID #890106 SCC MIND AT&T California Employee PAC COM 3/10/15 525 Market St 300.00 300.00 □ OTH San Francisco, CA 94105 **□PTY** ID #991470 □SCC MIND Kershaw, Cutter & Ratinoff LLP ☐ COM 2/25/15 401 Watt Ave 500.00 500.00 **☑** OTH Sacramento, CA 95864 PTY SCC ☐ IND **Rutherford Grove Winery** СОМ 1673 St. Helena Hwy 3/4/15 500.00 500.00 **☑** OTH St. Helena, CA 94574 □ PTY SCC □IND Ghisletta Vineyards Ltd ПСОМ 2140 Jefferson 2/25/15 2500.00 2500.00 OTH Napa, CA 94558 PTY SCC 4300.00 SUBTOTAL\$

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Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
from 1/1/2015

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FORM 460

through 6/30/2015

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NAME OF FILER
Friends of Alfredo Pedroza for Supervisor 2016

I.D. NUMBER 1374964

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/22/15	Amuse Bouche LLC 1040 Main St Napa, CA 94559	☐IND ☐COM ☑OTH ☐PTY ☐SCC		500.00	500.00	
3/6/15	George Nielson 1033 Oakmont Court Napa, CA 94558	☑IND □COM □OTH □PTY □SCC	Owner GD Nielson Construction	1500.00	1500.00	
3/26/15	Jill Techel 1075 Round Hill Circle Napa, CA 94558	☑IND □COM □OTH □PTY □SCC	Consultant Self-employed	150.00	150.00	
3/13/15	Greg Kelley 3216 Vichy Ave Napa, CA 94558	☑IND □COM □OTH □PTY □SCC	President Recovery Products & Services, Inc.	250.00	250.00	•
3/16/15	Carmen Policy 1155 State Ln Yountville, CA 94599	☑IND □COM □OTH □PTY □SCC	Owner Casa Piena	1500.00	1500.00	
			SUBTOTAL\$	3900.00		Mary Contract of

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Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CC	NT.)	
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Statement covers period	CALIFORNIA ACO
from 1/1/2015	FORM 400
through6/30/2015	Page 9 of 18
	I.O. NUMBER

NAME OF FILER

Friends of Alfredo Pedroza for Supervisor 2016

1374964

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/17/15	Robledo Family Winery Inc 21901 Bonness Rd Sonoma, CA 95475	□IND □COM ☑OTH □PTY □SCC		500.00	500.00	
4/13/15	Paul Onorato 1040 Main St Napa, CA 94559	DIND COM OTH PTY	Dist Rep Congressman Mike Thompson	1000.00	1000.00	
2/11/15	Silverado Partners 855 Bordeaux Way Napa, CA 94558	□IND □COM ☑OTH □PTY □SCC		1500.00	1500.00	
2/11/15	Zapolski Real Estate LLC 501 Washington St Durham, NC 27701	☐IND ☐COM ☑OTH ☐PTY ☐SCC		500.00	500.00	
2/10/15	Tsutomu Tanka 22 Broadmoor St Moraga, CA 94556	☑IND □COM □OTH □PTY □SCC	President Kenzo Estate	500.00	500.00	
			SUBTOTAL \$	4000.00	्रा । । । । । । । । । । । । । । । । । । ।	11.

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Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Stateme	nt covers period 1/1/2015	CALIFORNIA 460
through	6/30/2015	Page 10 of 18
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		1374964

NAME OF FILER

Friends of Alfredo Pedroza for Supervisor 2016

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/13/15	Garen Staglin 1570 Bella Oaks Ln Rutherford, CA 94573	☑IND □COM □OTH □PTY □SCC	Owner Staglin Vineyards	250.00	250.00	
4/1/15	Craig Hall 6801 Gaylord Parkway Frisco, TX 75034	☑IND □COM □OTH □PTY □SCC	Owner Hall Wines	300.00	300.00	
2/1/15	Brian Kelly 1792 Pine St Napa, CA 94558	☑IND □COM □OTH □PTY □SCC	Consultant Self-employed	500.00	500.00	
3/27/15	Holman Teague Roche & Anglin, LLP 1455 First St Napa, CA 94559	□IND □COM ☑OTH □PTY □SCC		2500.00	2500.00	
3/24/15	Stagecoach Vineyards 1345 Hestia Way Napa, CA 94558	□IND □COM □OTH □PTY □SCC		1500.00	1500.00	
			SUBTOTAL\$	5050.00		Hara Tri

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Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Staten	nent covers period 1/1/2015	CALIFORNIA 460
through_	6/30/2015	Page 11 of 1 8
	***************************************	I.D. NUMBER 1374964

NAME OF FILER

Friends of Alfredo Pedroza for Supervisor 2016

AMOUNT PER ELECTION **CUMULATIVE TO DATE** IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR DATE RECEIVED THIS CALENDAR YEAR TO DATE OCCUPATION AND EMPLOYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE * RECEIVED PERIOD (IF REQUIRED) (IF SELF-EMPLOYED, ENTER NAME (JAN. 1 - DEC. 31) OF BUSINESS) MIND Altamura Enterprises ПСОМ 101 S Coombs St 2500.00 2500.00 3/27/15 MOTH Napa, CA 94559 PTY SCC DIND Investor William Bacigalupi COM 2255 N Third St 500.00 500.00 3/9/15 ПОТН Napa, CA 94558 PTY □scc DIND William Kelley Manager ПСОМ Napa Recycling & Waste 3216 Vichy Ave 250.00 250.00 3/25/15 ПОТН Napa, CA 94558 Services PTY □scc **IND** McKenzie Kelley None ☐ COM 250.00 250.00 3/15/15 3216 vichy Ave Потн Napa, CA 94558 □ PTY SCC **ZIND** Medley Kelley Bookkeeper ПСОМ 3216 Vichy Ave 600 Tower Road 250.00 250.00 3/24/15 **□OTH** Operations Napa, CA 94558 PTY ☐SCC SUBTOTAL \$ 3750.00

*Contributor Codes

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(other than PTY or SCC)
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SCC - Small Contributor Committee

Schedule A (Continuation Sheet)

Type or print in ink.

SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may be rounded Statement covers period to whole dollars. 1/1/2015				CALIFORNIA 460		
				through 6	3/30/2015	Page _	12 of_	18_
NAME OF FILER						I.D. NUM	BER	
Friends of	Alfredo Pedroza for Supervisor 2016					137496	64	
	FULL MAME STREET ADDRESS AND 710 CODE OF CONTRIBUTO		IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE	TO DATE	PER ELEC	TION

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/15/15	B & K Napa Waste LLC 3216 Vichy Ave Napa, CA 94558	□IND □COM ☑OTH □PTY □SCC		250.00	250.00	
3/17/15	Andrew Kelley 3216 Vichy Ave Napa, CA 94558	☑IND □COM □OTH □PTY □SCC	Manager Crowdfunder	250.00	250.00	
3/25/15	Amanda Baker 2500 NW Regency St Bend, OR 97701	☑IND □COM □OTH □PTY □SCC	None	250.00	250.00	
3/26/15	John Salmon 10 Lighthouse Ct Napa, CA 94558	☑IND □COM □OTH □PTY □SCC	Consultant Self-employed	300.00	300.00	
3/26/15	D.J. Smith 1184 Hagen Rd Napa, CA 94558	☑IND □COM □OTH □PTY □SCC	President Smith, Watts & Martinez, LLC	500.00	500.00	
			SUBTOTAL\$	1550.00	中。	

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OTH - Other (e.g., business entity)

PTY-Political Party

SCC-Small Contributor Committee

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (C)	OTTO
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Stater	nent covers period 1/1/2015	CALIFORNIA 460
through_	6/30/2015	Page 13 of 18
		I.D. NUMBER

NAME OF FILER

Friends of Alfredo Pedroza for Supervisor 2016

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/26/15	Hudson & Luros, LLP 1436 Second St Napa, CA 94559	☐IND ☐COM ØOTH ☐PTY ☐SCC		150.00	150.00	
2/17/15	BLT Enterpries of Fremont LLC 41149 Boyce rd Fremont, CA 94536	☐IND ☐COM ØOTH ☐PTY ☐SCC		500.00	500.00	
3/25/15	Latitude 38 Entertainment 1436 Second St Napa, CA 94559	☐IND ☐COM ☑OTH ☐PTY ☐SCC		500.00	500.00	
2/23/15	Darius Anderson 20730 Fifth St E Sonoma, CA 94576	☑IND □COM □OTH □PTY □SCC	Owner Platinum Advisors	2500.00	2500.00	
2/23/15	Tom Anyos 1155 Castle Oaks Dr Napa, CA 94558	☑IND □COM □OTH □PTY □SCC	Retired	200.00	200.00	
			SUBTOTAL\$	3850.00		148023

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PTY - Political Party

SCC-Small Contributor Committee

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SCHEDULE A (CONT.) Statement covers period **CALIFORNIA** 1/1/2015 **FORM** from. 6/30/2015 through. I.D. NUMBER

1374964

NAME OF FILER

DATE

Friends of Alfredo Pedroza for Supervisor 2016

FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR | CONTRIBUTOR

AMOUNT CUMULATIVE TO DATE PER ELECTION IF AN INDIVIDUAL, ENTER RECEIVED THIS OCCUPATION AND EMPLOYER CALENDAR YEAR TO DATE

RECEIVED	(IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE *	(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	PERIOD	(JAN. 1 - DEC. 31)	(IF REQUIRED)
3/20/15	John Collins 285 Cold Springs Rd Angwin, CA 94508	☑IND □COM □OTH □PTY □SCC	Retired	1000.00	1000.00	
3/24/15	Elliott Faxstein 161 Stone Mountain Cir Napa, CA 94558	☑IND □COM □OTH □PTY □SCC	Realtor Wine Valley Real Estate	150.00	150.00	`
3/26/15	Belia-Eugenia Ramos 4381 Broadway American Canyon, CA 94503	☑IND □COM □OTH □PTY □SCC	President Raise the Bar, LLC	150.00	150.00	
3/16/15	Recovery Products & Service, Inc. 3216 Vichy Ave Napa, CA 94558	□IND □COM □OTH □PTY □SCC		250.00	250.00	
3/26/15	James V Jones Law Offices 1564 First St Napa, CA 94559	☐IND ☐COM ØOTH ☐PTY ☐SCC		150.00	150.00	
			SUBTOTAL\$	1700.00		g Water for the

*Contributor Codes

IND - Individual

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OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period
1/1/2015

CALIFORNIA 460
FORM

through _____6/30/2015

from_

Page 15. of 18

I.D. NUMBER 1374964

NAME OF FILER

Friends of Alfredo Pedroza for Supervisor 2016

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/23/15	Sheet Metal Works Intl Assoc PAC 2610 Crow Canyon Rd San Ramon, CA 94583 ID #850831	☐IND ☐COM ☐OTH ☐PTY ☐SCC		500.00	500.00	
2/13/15	Renteria Vineyard Management LLC 1106 Clark St Napa, CA 94558	☐IND ☐COM ØOTH ☐PTY ☐SCC		2500.00	2500.00	
3/13/15	Madorom Vineyards LLC 1850 W Imola Ave Napa, CA 94558	□IND □COM ☑OTH □PTY □SCC		1500.00	1500.00	
3/18/15	Brozos Bridge Pharmaceuticals Inc 1564 Milton Rd Napa, CA 94558	□IND □COM ☑OTH □PTY □SCC		150.00	150.00	
3/20/15	Christian Palmaz 4029 Hagen Rd Napa, CA 94558	☑IND □COM □OTH □PTY □SCC	Owner Palmaz Vineyards	4100.00	4100.00	

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SCHEDULE A (CONT.)

Statement cover	s period	CALIFORNIA A CO			
from1/1/20	015	FORM 40U			
through6/30/	2015	Page 16 of 18			
		I.D. NUMBER			
		1374964			

Friends of Alfredo Pedroza for Supervisor 2016

FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
Lake Street Company LLC 158 11th Ave San Francisco, CA 94118	□IND □COM ☑OTH □PTY □SCC		150.00	150.00		
	□IND □COM □OTH □PTY □SCC					
	□IND □COM □OTH □PTY □SCC					
,	□IND □COM □OTH □PTY □SCC					
	□IND □COM □OTH □PTY □SCC					
	Lake Street Company LLC 158 11th Ave	Lake Street Company LLC 158 11th Ave San Francisco, CA 94118 IND COM OTH PTY SCC IND COM OTH PTY SCC	CONTRIBUTION CODE * CODE * CODE * COCUPATION AND EMPLOYER (IF SELF-EMPLOYER (IF S	CONTRIBUTOR (FCOMMITTEE ALSO ENTER LD. NUMBER) CODE * CODE	CONTRIBUTOR (FECOMMITTEE, ALSO ENTER ID. NUMBER) CONTRIBUTOR CODE * COCCUPATION AND EMPLOYER (FEST-EMPLOYDE AND EMPLOYDE AND EMPLOYER (FEST-EMPLOYDE AND EMPLOYDE AND EMPLOYER (FEST-EMPLOYDE AND EMPLOYDE AND	FULL NAME, SINEEL AUDRESS AND ZIP COUP OF CONTRIBUTOR COOPE (FOR PRODUCTION AND EMPLOYER (FOR PERIOD) Lake Street Company LLC OND OTH PTY SCC OND OTH PTY SCC OTH PTY OTH PTY

*Contributor Codes

IND-Individual

NAME OF FILER

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Schedule C Nonmonetary Contributions Received

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period from 1/1/2015 CALIFORNIA 460 FORM 460 LD. NUMBER 1374964

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Alfredo Pedroza for Supervisor 2016

Therids of Alliedo T datoza for daportidor 2010								
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)	
3/1/2015	Silver Oak Cellars 915 Oakville Cross Rd Oakville, CA 94562	□IND □COM ☑OTH □PTY □SCC		One case of Cebernet Sauvignon	700.00	700.00		
3/1/2015	Black Stallion Winery 4089 Silverado Tr. Napa, CA 94558	□IND □COM ☑OTH □PTY □SCC		One case of Chardonnay	600.00	600.00		
3/1/2015	Antica 3700 Soda Canyon Rd Napa, CA 94558	□IND □COM ☑OTH □PTY □SCC		One case of cabernet sauvignon	800.00	800.00		
		□IND □COM □OTH □PTY □SCC						
Attach add	ditional information on appropriately la	beled continuation	on sheets.	SUBTOTAL \$				

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions.
(Include all Schedule C subtotals.) \$ 2100.00

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

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IND - Individual

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Schedule E Payments Made		Type or print in ink. Amounts may be rounded to whole dollars.			Statement covers period from 1/1/2015		CALIFORNIA 460			
SEE INSTRUCTIONS ON DEVERSE				through	6/30/2015	Page (8 of 18			
SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D										
Friends of Alfredo Pedroza for Supervisor 2016						1374964				
CODES: If one of the following codes accurately describe:	s the pay	yment, you may e	enter the code.	Otherwise, descr	ribe the payment.					
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	member communication neetings and appeara office expenses petition circulating whone banks colling and survey resi postage, delivery and professional services (print ads	nces earch messenger services	RFD retu SAL carr TEL t.v. TRC can TRS staf s TSF tran VOT vote	o airtime and productioned contributions apaign workers' salarior cable airtime and pdidate travel, lodging, if/spouse travel, lodging sfer between committer registration technology commation technology co	es production costs and meals ag, and meals dees of the same	oction costs meals nd meals of the same candidate/sponsor				
NAME AND ADDRESS OF PAYEE (F COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION OF	PAYMENT		AMOUNT PAID			
Silverado Resorts 1600 Atlas Peak Rd Napa, CA 94458		FND					3412.58			
Puertas Abiertas 952 Napa St Napa, CA 94458		cvc					500.00			
Payments that are contributions or independent expenditures in	nust also	be summarized on	Schedule D.		5	SUBTOTAL\$	3912.58			
Schedule E Summary							3912.58			
1. Itemized payments made this period. (Include all Schedule E subtotals.)\$										
2. Unitemized payments made this period of under \$100\$										
Total interest paid this period on loans. (Enter amount from						\$	-0			

4005.21