			and the second		COVER PAGE
Recipient Committee Campaign Statement				Date Stamp	CALIFORNIA 460
Cover Page	\cap			RECEIVED	
	from 3	tatement covers period	Date of election if applicable: (Month, Day, Year)	OCT 27 2022	Page of
SEE INSTRUCTIONS ON REVERSE	7/1	5/24/2022 /0-22-22	11/8/2022	CITY OF SCOTTS VAL	LEY
1. Type of Recipient Committee: All C	ommittees - Complete Pa	rts 1, 2, 3, and 4.	2. Type of Statement:		
Officeholder, Candidate Controlled Comm State Candidate Election Committee Recall (Also Complete Part 5)	ittee Primarily I Committee Contro Spons (Also Complete	olled sored	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 T Amendment (Explain b	nt fermination)	Quarterly Statement Special Odd-Year Report
General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee		Formed Candidate/ ler Committee Part 7)			
3. Committee Information	I.D. NUMBEI	R	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF N	1453125 O COMMITTEE)		NAME OF TREASURER		
TIMM FOR CITY COUNCIL 2022			Chuck Maffia		
			MAILING ADDRESS		
STREET ADDRESS (NO P.O. BOX)			CITY	STATE ZIE	P CODE AREA CODE/PHONE
STREET ADDRESS (NO 1.3. DOA)			Scotts Valley		5066 8313458889
CITY	TATE ZIP CODE	AREA CODE/PHONE	NAME OF ASSISTANT TREASUR		0000 001040000
Scotts Valley	CA 95066	8312399203			
MAILING ADDRESS (IF DIFFERENT) NO. AND STR			MAILING ADDRESS		
CITY	TATE ZIP CODE	AREA CODE/PHONE	CITY	STATE ZII	P CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS			OPTIONAL: FAX / E-MAIL ADDR	RESS	
4. Verification					
I have used all reasonable diligence in prepar	ing and reviewing this st	atement and to the best of my	knowledge the information contained	d herein and in the attached	schedules is true and complete. I
certify under penalty of perjury under the laws				1 .1	
Executed on	2	Ву	Signature of Treasurer or Assistar	affect	
Executed on 10-25-25	2	By Signature of Con	(don't	Proponent or Responsible Officer of Sp	ponsor
Executed on		Ву	Signature of Controlling Officeholder, Candidate,	State Measure Proponent	

Executed on __

Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (Jan/2016))

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

www.fppc.ca.gov

Campaign Disclosure Statement Summary Page

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NAME OF FILER

Amounts may be rounded to whole dollars.

SUMMARY PAGE

www.fppc.ca.gov

Statement covers period | CALIFORNIA | 460 | FORM |

TIMM FOR CITY COUNCIL 2022 Calendar Year Summary for Candidates Column A Column B Contributions Received TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) CALENDAR YEAR TOTAL TO DATE Running in Both the State Primary and **General Elections** 4644.98 1. Monetary Contributions Schedule A, Line 3 1/1 through 6/30 7/1 to Date 2. Loans Received...... Schedule B, Line 3 20. Contributions 3596.98 4644.98 3. SUBTOTAL CASH CONTRIBUTIONS...... Add Lines 1 + 2 Received 4. Nonmonetary Contributions...... Schedule C, Line 3 21. Expenditures 3596.98 4644.98 Made 5. TOTAL CONTRIBUTIONS RECEIVEDAdd Lines 3 + 4 \$ **Expenditures Made Expenditure Limit Summary for State** 3510.37 3742.44 6. Payments Made...... Schedule E. Line 4 Candidates 22. Cumulative Expenditures Made* 3510.37 3742.44 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 (If Subject to Voluntary Expenditure Limit) 9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 Date of Election Total to Date (mm/dd/yy) 3510.37 3742.4 **Current Cash Statement** 851.90 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ To calculate Column B. 3596.98 add amounts in Column 13. Cash Receipts Column A, Line 3 above A to the corresponding *Amounts in this section may be different from amounts 14. Miscellaneous Increases to Cash Schedule I, Line 4 amounts from Column B reported in Column B. 3510.37 of your last report. Some 15. Cash Payments Column A, Line 8 above amounts in Column A may 938.31 16. ENDING CASH BALANCEAdd Lines 12 + 13 + 14, then subtract Line 15 \$ be negative figures that should be subtracted from If this is a termination statement, Line 16 must be zero. previous period amounts. If this is the first report being filed for this calendar year, 17. LOAN GUARANTEES RECEIVED...... Schedule B. Part 2 \$ __ only carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ _ FPPC Form 460 (Jan/2016)) FPPC Advice: advice@fppc.ca.gov (866/275-3772)

Schedule A **Monetary Contributions Received**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE A

	OUTEDOLL A
Statement covers peri from $\frac{7/1/292}{}$ $9/25/3$	
through 9/24/2022 /6/2	Page 3 of 6
	I.D. NUMBER 1435125

TIMM FOR	CITY COUNCIL 2022				143512	5
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)
	13 CONTRIBUTIONS LESS THAN \$100	IND COM OTH PTY SCC		596.98	844.98	
	SEE ATTACHED LIST OF ITEMIZED CONTRIBUTIONS OF \$100	□IND □COM □OTH □PTY □SCC		3000	3000	
		□IND □COM □OTH □PTY □SCC				
		□IND □COM □OTH □PTY □SCC				
		□IND □COM □OTH □PTY □SCC				
			SUBTOTAL	\$ 3596.88		
Schedule	A Summary				*Contributor Co	

Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.)	\$ ³	00.00
	\$	596.88

COM - Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

3. Total monetary contributions received this period.

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

Name	Address	City	Sta	ZIP	Occupation/Emp;oyer	Contibution Code	 ount ceived	To [nulative Date
		Reporting perio	od 7/1	L/2022 t	0 9/24/2022				
Dennis Lane		Scotts Valley	CA	95066	VP/ Marketing Fox	IND	\$ 100.00	\$	100.00
Bijal Patel		Scotts Valley	CA	95066	Self/Hospitality	IND	\$ 100.00	\$	100.00
Umesh Patel		Scotts Valley	CA	95066	Self/Hospitality	IND	\$ 100.00	\$	100.00
Greg Wimp		Scotts Valley	CA	95066	Business Owner	IND	\$ 100.00	\$	100.00
Kristina Horn		Santa Cruz	CA	95060	Retired	IND	\$ 100.00	\$	100.00
Margaret Marigonda		Scotts Valley	CA	95066	Homemaker	IND	\$ 100.00	\$	100.00
Richard Marlais		Santa Cruz	CA	95060	Retired	IND	\$ 100.00	\$	100.00
Mike A Rein		Scotts Valley	CA	95066	Attorney	IND	\$ 100.00	\$	100.00
Steven Simonovich		Scotts Valley	CA	95066	Bisiness Owner	IND	\$ 100.00	\$	100.00
California RE PAC									
		Los Angles	CA	90071	PAC	OTH	\$ 100.00	\$	100.00
Donn Lind		Scotts Valley	CA	95066	City Council Member	IND	\$ 100.00	\$	100.00
Susan Drapper		Scotts Valley	CA	95067	Realtor	IND	\$ 100.00	\$	100.00
Ted Burke		Capitola	CA	95010	Restaurateur	IND	\$ 100.00	\$	100.00
Walter Stone		Scotts Valley	CA	95060	Attorney	IND	\$ 100.00	\$	100.00
Gracia Krakauer		Aptos	CA	95003	Restaurateur	IND	\$ 100.00	\$	100.00
Amber D McGough		Scotts Valley	CA	95066	Sales	IND	\$ 100.00	\$	100.00
Trish Melehan		Scotts Valley	CA	95066	Retired	IND	\$ 100.00	\$	100.00
David Weaver		Scotts Valley	CA	95066	Executive	IND	\$ 100.00	\$	100.00
Robert C. Kim		Scotts Valley	CA	95066	Attorney	IND	\$ 100.00	\$	100.00
Jieum B. Kim		Scotts Valley	CA	95066	Homemeaker	IND	\$ 100.00	\$	100.00
Val Rebhahn		Scotts Valley	CA	95066	Retired	IND	\$ 100.00	\$	100.00
Adina Licht		Scotts Valley	CA	95066	Self Consultant	IND	\$ 100.00	5	100.00
Sage Turowski		Scotts Valley	CA	95066	VP/Sales Rapid Dsisplay	IND	\$ 100.00	\$	100.00
Don Hutchinson		Scotts Valley	CA	95066	Retired	IND	\$ 100.00	\$	100.00
Julie Orr		Scotts Valley	CA	95067	Landscape Designer	IND	\$ 100.00	\$	100.00
Patrick Shipley		Carlsbad	CA	92009	Attorney	IND	\$ 100.00	\$	100.00
Gretchen Shiply		Carlsbad	CA	92009	Homemaker	IND	\$ 100.00	\$	100.00
Brian Ruf		Santa Cruz	CA	95066	Retired	IND	\$ 100.00	\$	100.00
Lindsey Rice		Scotts Vafiley	CA	95066	Homemaker	IND	\$ 100.00	\$	100.00
Janet Romanowski		Santa Cruz	CA	95062	Realtor	IND	\$ 100.00	\$	100.00

\$ 3,000.00 \$ 3,000.00

Schedule E	
Payments Made	

Amounts may be rounded to whole dollars.

0-	SCHEDULE E
Statement covers period from 7/1/2022 9/25/22	CALIFORNIA 460
through 9/24/2022 10/22/2	Page 5 of 6
V **	I.D. NUMBER
	1453125

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

TIMM FOR CITY COUNCIL 2022

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
SIGNS ON THE CHEAP Note: Shared Expense with Timms for City Council Reporting 50% of total expense	СМР	YARD SIGNS	829.00
BRUNO'S Note: Shared Expense with Timms for City Council Reporting 50% of total expense	FND	CAMPAIGN KICK OFF EVENT	190.73
SENTINEL PRINTERS Note: Shared Expense with Timms for City Council Reporting 50% of total expense	СМР	PRINTING INVOICE 307905 INVOICE 307891	1235.00 93.80

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

SUBTOTAL \$ 2348.53

Schedule E Summary

Itemized payments made this period. (Include all Schedule E subtotals.)	\$
2. Unitemized payments made this period of under \$100	\$
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$_3510.37

Schedule E (Continuation Sheet) **Payments Made**

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Statement covers period **CALIFORNIA** FORM from 6 Page. I.D. NUMBER 1453125

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

TIMM FOR CITY COUNCI 2022

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

CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses campaign workers' salaries CVC civic donations petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals

FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals IND independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services transfer between committees of the same candidate/sponsor TSF

LEG legal defense professional services (legal, accounting) VOT voter registration

campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
STRIPE Note: Expense not shared with Timms for City Council Reporting 100% of total expense	PRO	FEE CHARGED FOR PROCESSING CONTIBUTIONS RECEIVED ON LINE	79.13 * See memo
MAVERICK MAILING Note: Shared Expense with Timms for City Council Reporting 50% of total expense	POS	POSTAGE FOR MAILER	1111.84
SECRETARY OF STATE Reimbursement to candiate	FIL	FILING FEE	50.00
MEMO: Stripe deducted fee from each contribution. Fee amount not credited to account. Reported as an actual expense. Not reflected in bank balance.			

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