Desirient Committee				COVER PAGE
Recipient Committee Campaign Statement Cover Page			Date Stamp	CALIFORNIA 460 FORM
Government Code Sections 84200-84216.5)	Statement covers period from07/01/2015	Date of election if applicable: (Month, Day, Year)	01/19/2016	Page1 of12 For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through12/31/2015	11/08/2016	133313243	
I. Type of Recipient Committee: All Committees - Co	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:		
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	rimarily Formed Ballot Measure committee Controlled Sponsored Nso Complete Part 6) rimarily Formed Candidate/ Officeholder Committee Nso Complete Part 7)	☐ Preelection Statement ☐ Semi-annual Statement ☐ Termination Statement (Also file a Form 410 Te ☐ Amendment (Explain be	Special Suppler Statemer	ly Statement Odd-Year Report mental Preelection ent - Attach Form 495
3. Committee Information). NUMBER 1377822	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)		NAME OF TREASURER		
Russ Melton for City Council 2016		Russell Melton		
		MAILING ADDRESS		
STREET ADDRESS (NO P.O. BOX)		CITY Sunnyvale	STATE ZIP COD CA 94087	E AREA CODE/PHONE (650)455-1163
CITY STATE ZIP CO	DE AREA CODE/PHONE	NAME OF ASSISTANT TREASUR	ER, IF ANY	
Sunnyvale CA 9408 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. B		WALLING ADDRESS		
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. B	OX	MAILING ADDRESS		
CITY STATE ZIP CO	DE AREA CODE/PHONE	CITY	STATE ZIP COD	E AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS russell.w.melton@gmail.com		OPTIONAL: FAX / E-MAIL ADDRI		
. Verification				
I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California	g this statement and to the best of my kn a that the foregoing is true and correct.	owledge the information contained here	ein and in the attached schedules	is true and complete. I certify
Executed on	ByRussell Me	lton Signature of Treasurer or Assistant T	reasurer	_
Executed on	By Russell Me Signature of Co	lton ntrolling Officeholder, Candidate, State Measure Prop	onent or Responsible Officer of Sponsor	_
Executed on	Ву	Signature of Controlling Officeholder, Candidate, Sta		_
Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, Sta	ate Measure Proponent	 FPPC Form 460 (Jan/2016)

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Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2								
	FORNIA DRM		l 60					
Page _	2	of _	12					

Officeholder or Candidate Controlled Com	nmittee	•	6.	Primarily Formed Ballo	ot Measure	Committee	€	
NAME OF OFFICEHOLDER OR CANDIDATE				NAME OF BALLOT MEASURE				
Russell Melton								
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIST		E)		BALLOT NO. OR LETTER	JURISDICTIO	NC]	SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE	ZIP		Identify the controlling off	iceholder ca	ndidate or s	tate measure	proponent if any
	Sunnyvale CA	94087		NAME OF OFFICEHOLDER, CAN	,	•		proposition, in all
Related Committees Not Included in this S not included in this statement that are controlled by yo contributions or make expenditures on behalf of your	ou or are primarily formed to			OFFICE SOUGHT OR HELD			DISTRICT NO	. IF ANY
COMMITTEE NAME	I.D. NUMBER						1	
NAME OF TREASURER	CONTROLLED COMMITTI	EE?	7.	Primarily Formed Can officeholder(s) or candidate(s				
COMMITTEE ADDRESS STREET ADDRESS (NO P.C	D. BOX)			NAME OF OFFICEHOLDER OR (CANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT OPPOSE
CITY STATE ZII	P CODE AREA COD	E/PHONE		NAME OF OFFICEHOLDER OR (CANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER			NAME OF OFFICEHOLDER OR (CANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTI	EE?		NAME OF OFFICEHOLDER OR (CANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.C	o. BOX)							
CITY STATE ZII	P CODE AREA COD	E/PHONE		Atta	ch continuati	on sheets if	necessary	

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

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CALIFORNIA 1	30

SLIMMARY PAGE

Statement covers period **FORM** 07/01/2015 from . Page ____3 of ____12 12/31/2015 through _ I.D. NUMBER

1377822

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Russ Melton for City Council 2016

Contributions Received	Column A TOTALTHIS PERIOD (FROM ATTACHED SCHEDULES)			Column B CALENDAR YEAR TOTALTO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections			
1. Monetary Contributions Schedule A, Line 3	\$	7,035.00	\$	7,432.00				
2. Loans Received Schedule B, Line 3		0.00		3,000.00	1/1 through 6/30 7/1 to Date			
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	7,035.00	\$	10,432.00	20. Contributions Received \$\$			
4. Nonmonetary Contributions		30.00		30.00	21 Expanditures			
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	7,065.00	\$	10,462.00	Made \$ \$			
Expenditures Made					Expenditure Limit Summary for State			
6. Payments Made Schedule E, Line 4	\$	2,176.23	\$	2,970.47	Candidates			
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulative Expenditures Made*			
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	2,176.23	\$	2,970.47	(If Subject to Voluntary Expenditure Limit)			
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3		0.00		0.00	Date of Election Total to Date			
10. Nonmonetary Adjustment Schedule C, Line 3		30.00		30.00	(mm/dd/yy)			
11. TOTAL EXPENDITURES MADE	\$	2,206.23	\$	3,000.47	/\$			
Current Cash Statement					/ \$			
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	2,602.76	То	calculate Column B, add				
13. Cash Receipts		7,035.00		nounts in Column A to the				
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.23	fro	rresponding amounts m Column B of your last	*Amounts in this section may be different from amounts reported in Column B.			
15. Cash Payments		2,176.23		oort. Some amounts in blumn A may be negative				
16. ENDING CASH BALANCE	\$	7,461.76	figures that should be					
If this is a termination statement, Line 16 must be zero.			ре	btracted from previous riod amounts. If this is a first report being filed				
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for	this calendar year, only rry over the amounts				

carry over the amounts from Lines 2, 7, and 9 (if

any).

3,000.00

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Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse

19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$

Schedule	A	_						SCHEDULE	
Monetary Contributions Received			Amounts may be rounded to whole dollars.			ers period	CALIFORNIA 460		
SEE INSTRUCTION	ONS ON REVERSE			throug	h <u>12/31/2</u>	015	Page	4 of12	
NAME OF FILER							I.D. N	JMBER	
Russ Melton	for City Council 2016						1377	822	
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)	RECE	MOUNT IVED THIS ERIOD	CUMULATIVE T CALENDAR ((JAN. 1 - DEC	YEAR	PER ELECTION TO DATE (IF REQUIRED)	
07/06/2015	Mark Veeh San Jose, CA 95118		Director of Finance Operations Yahoo		100.00		100.00		
07/16/2015	James Chang Sunnyvale, CA 94085		Engineer Maxim Integrated		200.00		200.00		
08/20/2015	Glenn Hendricks Sunnyvale, CA 94087		Program Manager PayPal		200.00		200.00		
08/29/2015	Carlotta Castillo Sunnyvale, CA 94089		Sr. Internal Communications Specialist Spansion		250.00		250.00		
09/02/2015	Two Lions Consulting, Inc. Sunnyvale, CA 94087	☐IND ☐COM ☒OTH ☐PTY ☐SCC			100.00		100.00		
			SUBTOTAL \$	5	850.00				
	A Summary						ntributor (

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.)\$ ____ 6,550.00 2. Amount received this period – unitemized monetary contributions of less than \$100\$ 3. Total monetary contributions received this period.

COM - Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

7,035.00

SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A	(CONT.)
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CALIFORNIA 460

Statement covers period

				from07/01/	2015	FC	DRM • • •			
				through12/31/	2015	Page _	5 of12			
IAME OF FILER		I.D. NUI	MBER							
uss Melton for City Council 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)			
09/08/2015	Ian Bain Redwood City, CA 94061		Public Relations EQUINIX	100.00	1	00.00				
09/22/2015	Jim Pollart East Palo Alto, CA 94303	⊠IND □COM □OTH □PTY □SCC	Senior Vice President Classic Communities, Inc.	125.00	1	25.00				
09/25/2015	Sequoia Del Ray San Jose, CA 95113	□IND □COM ☑OTH □PTY □SCC		250.00	2	50.00				
09/28/2015	Adam Kates East Palo Alto, CA 94303	☑IND □COM □OTH □PTY □SCC	Real Estate Developer Classic Communities, Inc.	125.00	1	25.00				
10/06/2015	Phil Gibson Sunnyvale, CA 94087	☑IND □COM □OTH □PTY □SCC	Vice President Infineon	100.00	1	00.00				
			SUBTOTAL\$	700.00						

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded to whole dollars.

Monetary	Contributions Received	Amounts may to whole		Statement cove	7/01/2015		FORM 460		
				through12/31/	2015	Page _	6 of12		
NAME OF FILER						I.D. NUN	MBER		
Russ Melton f	For City Council 2016					13778	22		
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 CALENDAR Y (JAN. 1 - DEC.	EAR . 31)	PER ELECTION TO DATE (IF REQUIRED)		
11/15/2015	Charles Melton Houston, TX 77043	⊠IND □COM □OTH □PTY □SCC	Information Technology United States Government	1,000.00	1,0	00.00			
11/19/2015	Vicki Reeder Los Altos, CA 94022		Retired Retired	1,000.00	1,0	00.00			
11/29/2015	John Melton Palo Alto, CA 94306		Retired Retired	1,000.00	1,0	00.00			
12/02/2015	Tomi Ryba Emerald Hills, CA 94062	☑IND □COM □OTH □PTY □SCC	El Camino Hospital CEO	250.00	2	50.00			
12/14/2015	Claudia Coleman Los Altos, CA 94022	☑IND □COM □OTH □PTY □SCC	Retired Retired	250.00	2	50.00			
	SUBTOTAL\$ 3,500.00								

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded

SCHEDULE A (CONT.)

CALIFORNIA 4 CO

Statement covers period

_	to whole dollars.			from07/01/	2015	FORM 460			
		through12/31/2015		Page7 of12					
NAME OF FILER					I	.D. NUMBER			
Russ Melton f	or City Council 2016				1	377822			
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 D CALENDAR YEA (JAN. 1 - DEC. 3	R TO DATE			
12/16/2015	Louise Spangler Los Altos, CA 94022	IND COM OTH PTY SCC	Retired Retired	100.00	100	.00			
12/21/2015	Eve Melton Palo Alto, CA 94306	IND COM OTH PTY SCC	Retired Retired	1,000.00	1,000	.00			
12/23/2015	Gerald Glaser Sunnyvale, CA 94087		Technical Advisor - Operations Motiv Power Systems	150.00	150	.00			
12/31/2015	Lauren McGrath Portland, OR 97217	☑IND □COM □OTH □PTY □SCC	Specialist PayChex	250.00	250	.00			
		□IND □COM □OTH □PTY □SCC							
			SUBTOTAL	1,500.00					

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

							SCHE	DULE B - PART 1
Schedule B – Part 1 Loans Received Amounts may be rounded to whole dollars.						ers period	CALIFORN	^A 460
Loans Received		to whole donar	J.		from07/0	1/2015	FORM	700
SEE INSTRUCTIONS ON REVERSE					through12/3	1/2015	Page8	of <u>12</u>
NAME OF FILER							I.D. NUMBER	
Russ Melton for City Council 2016							1377822	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVED THIS PERIOD	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Russell Melton Sunnyvale, CA 94087	Manager None			PAID \$ 0.00 FORGIVEN		% RATE	\$_3,000.00	\$ 3,001.00 PER ELECTION**
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$_3,000.00	\$0.00	\$	DATE DUE	\$0.00	06/03/2015 DATE INCURRED	\$ G2016 3,001.00
				PAID \$ FORGIVEN	. \$	% RATE	\$	\$ PER ELECTION **
[†] □ IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
				PAID \$ FORGIVEN	\$	% RATE	\$	CALENDAR YEAR \$ PER ELECTION **
† IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
		SUBTOTALS \$	0.00	0.0	3,000.00	\$ 0.00		

Schedule B Summary

Schedule E, Line 3)

1.	Loans received this period(Total Column (b) plus unitemized loans of less than \$100.)	\$_	0.00
2.	Loans paid or forgiven this period	\$ _	0.00

†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

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

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

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ATE FI	or City Council 2016 FULL NAME STREET ADDRESS AND CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION	throug		15	Page I.D. NUMB	
Melton for Ci	or City Council 2016 FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CONTRIBUTOR CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER		OF				
ATE FI	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CONTRIBUTOR CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER		OF			1277000	
ALE	ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER		OF			13//822	
	□IND	10 1112 01 200111200)	GOODS OR SER		AMOUNT/ FAIR MARKET VALUE	CUMULA DA CALENDA (JAN 1 -	ΓΕ AR YEAR	PER ELECTION TO DATE (IF REQUIRED)
	□COM □OTH □PTY □SCC							
	□IND □COM □OTH □PTY □SCC							
	□IND □COM □OTH □PTY □SCC							
	□IND □COM □OTH □PTY □SCC							
ch additional in	SCC	n sheets.	SUBTO	DTAL \$		_		

Schedule C Summary

 *Contributor Codes
IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other (e.g., business entity)

Schedule E
Payments Made

NAME OF FILER

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

		SCHEDULE E
Statem	ent covers period	CALIFORNIA 160
from	07/01/2015	FORM TOU
through .	12/31/2015	Page of
		I.D. NUMBER
		1377822

Russ Melton for City Council 2016

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	TSF	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
Edward Chuck Photography Sunnyvale, CA 94086	PRO	180.00
Pacific Printing San Jose, CA 95112	LIT	989.63
United States Post Office Sunnyvale, CA 94087	POS	193.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL\$ 1,362.63

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	1,954.57
2. Unitemized payments made this period of under \$100\$	221.66
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.)	2,176.23

Schedule E	
(Continuation She	et)
Payments Made	·

Amounts may be rounded to whole dollars.

Statement covers period	CALIFORNIA 160
from07/01/2015	FORM 400
through12/31/2015	Page11 of12
	I.D. NUMBER
	1377822

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Russ Melton for City Council 2016

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

campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs campaign consultants meetings and appearances RFD returned contributions CNS 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

ND fundraising events

POL polling and survey research

TRS staff/spouse travel, lodging, and meals

EG legal defense PRO professional services (legal, accounting) VOT voter registration

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

Lit campaign illerature and mailings		PKT print aus	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			
Local Biz Network, LLC San Jose, CA 95117			WEB			179.94			
Aristotle, Inc. Washington, DC 20003			PRO			412.00			

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

SUBTOTAL \$

591.94

Schedule I				SCHEDULE	
Miscellaneous Increases to Cash		Amounts may be rounded to whole dollars.	Statement covers period	CALIFORNIA 460	
			from <u>07/01/2015</u>	_	
SEE INSTRUCTIONS ON REVER	SE		through 12/31/2015	Page12 of12	
NAME OF FILER	-			I.D. NUMBER	
Russ Melton for City C	Council 2016			1377822	
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DE	SCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH	
Attach additional inforr	mation on appropriately labeled continuation sheets.		SUBTO	TAL \$	
Schedule I Summa	ıry				
1. Itemized increases t	to cash this period		\$	0.00	
2. Unitemized increase	es to cash of under \$100 this period		\$	0.23	
3. Total of all interest re	eceived this period on loans made to others. (Schedule	H, Column (e).)	\$	0.00	
	increases to cash this period. (Add Lines 1, 2, and 3.				
Summary Page, Lin	e 14.)		TOTAL \$	0.23	