

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

Date Stamp	CALIFORNIA 2001/02 FORM	460
RECEIVED	Page <u>1</u> of <u>5</u>	
SEP 24 2019	For Official Use Only	
CITY OF NOVATO		

Statement covers period from <u>7/1/19</u> through <u>9/21/19</u>	Date of election if applicable: (Month, Day, Year) _____
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SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee | <input type="checkbox"/> Ballot Measure Committee |
| <input type="checkbox"/> State Candidate Election Committee | <input type="checkbox"/> Primarily Formed |
| <input type="checkbox"/> Recall
<i>(Also Complete Part 5)</i> | <input type="checkbox"/> Controlled |
| <input type="checkbox"/> General Purpose Committee | <input type="checkbox"/> Sponsored
<i>(Also Complete Part 6)</i> |
| <input type="checkbox"/> Sponsored | <input type="checkbox"/> Primarily Formed Candidate/
Officeholder Committee
<i>(Also Complete Part 7)</i> |
| <input type="checkbox"/> Small Contributor Committee | |
| <input type="checkbox"/> Political Party/Central Committee | |

2. Type of Statement:

- | | |
|---|--|
| <input checked="" type="checkbox"/> Preelection Statement | <input type="checkbox"/> Quarterly Statement |
| <input type="checkbox"/> Semi-annual Statement | <input type="checkbox"/> Special Odd-Year Report |
| <input type="checkbox"/> Termination Statement | <input type="checkbox"/> Supplemental Preelection
Statement - Attach Form 495 |
| <input type="checkbox"/> Amendment (Explain below) | |

3. Committee Information

I.D. NUMBER
1316024

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Eric Lucan for City Council 2019

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Novato</u>	<u>CA</u>	<u>94947</u>	

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

Mitch Todd

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>San Rafael</u>	<u>CA</u>	<u>94903</u>	

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

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 9/24/19
Date

Executed on 9/24/19
Date

Executed on _____
Date

Executed on _____
Date

By _____
Signature of Treasurer or Assistant Treasurer

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Recipient Committee
Campaign Statement
Cover Page — Part 2**

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA FORM	460
Page <u>2</u> of <u>5</u>	

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE			
Eric Lucan			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)			
City Council District 3, City of Novato			
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP
	Novato	CA	94947

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? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

6. Ballot Measure Committee

NAME OF BALLOT MEASURE		
BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
Identify the controlling officeholder, candidate, or state measure proponent, if any.		
NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT		
OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY	

7. Primarily Formed 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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

Attach continuation sheets if necessary

**Campaign Disclosure Statement
Summary Page**

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

SUMMARY PAGE

Statement covers period from <u>7/1/19</u>	CALIFORNIA FORM 460
through <u>9/21/19</u>	
Page <u>3</u> of <u>5</u>	I.D. NUMBER <u>1316024</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Eric Lucan for City Council

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions <i>Schedule A, Line 3</i>	\$ <u>6,946.00</u>	\$ <u>20,696.00</u>
2. Loans Received <i>Schedule B, Line 3</i>		
3. SUBTOTAL CASH CONTRIBUTIONS <i>Add Lines 1 + 2</i>	\$ <u>6,946.00</u>	\$ <u>20,696.00</u>
4. Nonmonetary Contributions <i>Schedule C, Line 3</i>		
5. TOTAL CONTRIBUTIONS RECEIVED <i>Add Lines 3 + 4</i>	\$ <u>6,946.00</u>	\$ <u>20,696.00</u>

**Calendar Year Summary for Candidates
Running in Both the State Primary and
General Elections**

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

Expenditures Made

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made <i>Schedule E, Line 4</i>	\$ <u>6,580.96</u>	\$ <u>7,036.71</u>
7. Loans Made <i>Schedule H, Line 3</i>		
8. SUBTOTAL CASH PAYMENTS <i>Add Lines 6 + 7</i>	\$ <u>6,580.96</u>	\$ <u>7,036.71</u>
9. Accrued Expenses (Unpaid Bills) <i>Schedule F, Line 3</i>		
10. Nonmonetary Adjustment <i>Schedule C, Line 3</i>		
11. TOTAL EXPENDITURES MADE <i>Add Lines 8 + 9 + 10</i>	\$ <u>6,580.96</u>	\$ <u>7,036.71</u>

**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
____/____/____	\$ _____
____/____/____	\$ _____
____/____/____	\$ _____
____/____/____	\$ _____
____/____/____	\$ _____

Current Cash Statement

12. Beginning Cash Balance <i>Previous Summary Page, Line 16</i>	\$ <u>14,499.50</u>
13. Cash Receipts <i>Column A, Line 3 above</i>	<u>6,946.00</u>
14. Miscellaneous Increases to Cash <i>Schedule I, Line 4</i>	
15. Cash Payments <i>Column A, Line 8 above</i>	<u>6,580.96</u>
16. ENDING CASH BALANCE <i>Add Lines 12 + 13 + 14, then subtract Line 15</i>	\$ <u>14,864.54</u>

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

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).

17. LOAN GUARANTEES RECEIVED <i>Schedule B, Part 2</i>	\$ _____
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents <i>See instructions on reverse</i>	\$ _____
19. Outstanding Debts <i>Add Line 2 + Line 9 in Column B above</i>	\$ _____

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

Schedule A
Monetary Contributions Received

Name of Filer: Eric Lucan for City Council 2019
ID Number: 1316024

Statement Covers Period	
from 7/1/2019	
to 9/21/2019	

Date Received	Name of Contributor			Address	City	State	Zip	Contributor Code					Occupation and Employer	Amount Received this Period	Cumulative to Date Calendar Year	
	Last	First	Company					Ind	Com	Other	PTY	SCC				
7/31/19	Goldfinger	Jennifer			Novato	CA	94947	x						retired	\$100.00	\$100.00
8/1/19	Arnold	Judy			Novato	CA	94947	x						Marin Supervisor, County of Marin	\$200.00	\$200.00
8/2/19	Goodman	Marge			Novato	CA	94949	x						retired	\$100.00	\$100.00
8/8/19	Athas	Denise			Novato	CA	94947	x						Real Estate, Athas & Associates	\$300.00	\$400.00
8/11/19	Forsythe	Earlene			Reno	NV	89519	x						Nurse Practitioner, James W Forsythe, MD	\$250.00	\$250.00
8/11/19	Gabriel	David			Novato	CA	94949	x						retired	\$100.00	\$100.00
8/17/19	Engdahl	Marsha			Novato	CA	94945	x						Accountant, Self	\$200.00	\$200.00
8/23/19	Shaw	Tom			Novato	CA	94947	x						retired	\$75.00	\$75.00
8/25/19	Swanson	Lisa			Novato	CA	94947	x						Self. Marketing	\$100.00	\$100.00
8/25/19	Ahern	Melissa			Novato	CA	94947	x						RN, MarinHealth	\$25.00	\$25.00
8/26/19	Crumpler	Jim			Novato	CA	94947	x						retired	\$100.00	\$100.00
8/26/19	Kinsey	Steve			Forest Knolls	CA	94833	x						Self (CivicKnit), Planning	\$250.00	\$250.00
8/26/19	Nation	Susannah			Novato	CA	94945	x						Owner, real. kind.	\$100.00	\$100.00
8/27/19	Cameron	Coree			Novato	CA	94949	x						Accountant, Cameron Coffey & Kaye PC	\$400.00	\$400.00
8/27/19	Farmer	Kathy			Tiburon	CA	94920	x						VP Global Benefits, Levi Strauss & Co	\$100.00	\$100.00
8/27/19	Geyer	Cheryl			Novato	CA	94949	x						Teacher, Marin Christian Academy	\$100.00	\$100.00
8/27/19	Jacobs	Cliff			Novato	CA	94948	x						FLC, First Legal	\$51.00	\$51.00
8/27/19	Stancato	Patrice			Novato	CA	94947	x						retired	\$50.00	\$50.00
8/27/19	Curlice	Barb			Novato	CA	94947	x						Superintendent/marketing, Allen/self	\$50.00	\$50.00
8/27/19	Herrarias	Paul			Novato	CA	94949	x						Recruiter, Stanton Chase	\$200.00	\$200.00
8/28/19	Martin	Ken			Novato	CA	94945	x						CEO, Headlands Ventures LLC	\$400.00	\$400.00
8/28/19	Adams	Matt			Fairfax	CA	94930	x						President, Headlands Ventures	\$400.00	\$400.00
8/29/19	Todd	Mitch			San Rafael	CA	94903	x						Accountant, BikeSmart Inc.	\$200.00	\$200.00
8/29/19	Cameron	Troy			Novato	CA	94945	x						Retired	\$400.00	\$400.00
8/30/19	Dito	Larry			Petaluma	CA	94952	x						Grandparents	\$100.00	\$100.00
8/30/19	Maniscalco	Larry			Santa Rosa	CA	95409	x						Retired	\$200.00	\$200.00
8/30/19	Maniscalco	Joan			Santa Rosa	CA	95409	x						Retired	\$200.00	\$200.00
8/30/19	Thomas	Harry			Novato	CA	94947	x						Retired	\$200.00	\$200.00
8/31/19			Mike McGuire for State Senate 2022 ID#1414279		San Rafael	CA	94901	x							\$300.00	\$300.00
9/1/19	Whitcomb	Francesca			Novato	CA	94947	x						HR Manager, Healdsburg Unified School District	\$100.00	\$100.00
9/1/19	Frank	Michael			San Rafael	CA	94901	x						Consultant, Self	\$100.00	\$200.00
9/3/19	Brown Crow	Suzanne			Novato	CA	94945	x						Assistant Assessor, County of Marin	\$100.00	\$100.00
9/5/19	Jayakaran	Amit			Novato	CA	94945	x						CTO, eTrac Inc	\$150.00	\$150.00
9/9/19	Pearson	Michele			Novato	CA	94945	x						Advancement Officer, In Defence of Animals	\$250.00	\$250.00
9/9/19	Brockbank	Greg			San Rafael	CA	94901	x						Attorney, Self	\$50.00	\$50.00
9/12/19			Democratic Central Committee of Marin		Sacramento	CA	95841								\$100.00	\$100.00
9/13/19	Mariani	Jean			Novato	CA	94947	x						Retired	\$50.00	\$50.00
9/13/19	O'Connor	Amy			Novato	CA	94945	x						Editor, Wells Media Group	\$50.00	\$50.00
9/13/19			Novato Democratic Club		Novato	CA	94947								\$100.00	\$100.00
9/14/19	Bolton	Brian			Novato	CA	94949	x						Field Service/Prog, Empire Comm.	\$70.00	\$70.00
9/14/19	Grasser	Tanya			Novato	CA	94947	x						N/A	\$25.00	\$25.00
9/15/19	Kumar	Naveen			San Rafael	CA	94903	x						Physician, TPMG	\$400.00	\$400.00
9/18/19	Schatz	Mark			Novato	CA	94949	x						Architect/Educator, ELS Architects, UC Berkeley, Cal Poly	\$50.00	\$50.00
9/18/19	Weber	Leslie			Novato	CA	94945	x						Board Aide, County of Marin	\$100.00	\$100.00
													Subtotal:	\$ 6,946.00		

Schedule A Summary													
1. Amount received this period – contributions of \$25 or more. (Include all Schedule A subtotals.)													\$ 6,946.00
2. Amount received this period – unitemized contributions of less than \$25													
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)													\$ 6,946.00

Schedule E Payments Made		Statement Covers Period from 7/1/2019 to 9/21/2019		FORM 460 Page 5 of 5
Name of Filer: Eric Lucan for City Council			ID Number: 1316024	
Facebook 1 Hacker Way Menlo Park, CA 94025	WEB		\$ 204.11	
paypal.com 2211 North First Street San Jose, CA 95131	WEB		\$ 123.54	
City of Novato 922 Machin Ave Novato, CA 94945	FIL		\$ 519.00	
PMCohen Public Affairs PO Box 150268 San Rafael, California 94915-0268	CNS		\$ 1,450.00	
PMCohen Public Affairs PO Box 150268 San Rafael, California 94915-0268	OFC		\$ 700.00	
four waters media, inc. 3093 Lassen Street West Sacramento, CA 95691	CNS		\$ 900.00	
four waters media, inc. 3093 Lassen Street West Sacramento, CA 95691	CMP		\$ 2,459.31	
Sapasom Ridhikerd 1734 McGree Avenue Berkeley, CA 94703	PRO		\$ 75.00	
Democratic Central Committee of Marin PO Box 683 Fairfax, CA 94978	PRT		\$ 150.00	
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			\$ 6,580.96	

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$ 6,580.96
2. Unitemized payments made this period of under \$25	
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.)	\$ 6,580.96