Cover Page Recipient Committee Campaign Statement SEE INSTRUCTIONS ON REVERSE 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 complete. Verification Committee Information Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. LOMPOC STREET ADDRESS (NO P.O. BOX) COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE OPTIONAL: FAX / E-MAIL ADDRESS LOMPOC P.O. BOX 2208 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX 1104 WEST PINE AVE VICTOR VEGA COMMITTEE TO ELECT FOR CITY COUNCIL General Purpose Committee Officeholder, Candidate Controlled Committee (Also Complete Part 5) Recall State Candidate Election Committee Executed on Executed on Executed on Executed on Political Party/Central Committee Small Contributor Committee Sponsored 10-27-2018 10-27-2018 STATE CA STATE CA 93436 93438 ZIP CODE ZIP CODE NOT YET RECIEVED Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 6) Primarily Formed Ballot Measure Committee from through Controlled Statement covers period 805 588-2703 805-588-2703 AREA CODE/PHONE AREA CODE/PHONE SEPT-3/2018 OCT2/2018 Date of election if applicable: OPTIONAL: FAX / E-MAIL ADDRESS MAILING ADDRESS NAME OF ASSISTANT TREASURER, IF ANY LOMPOC P.O.BOX 2208 MAILING ADDRESS VICTOR VEGA NAME OF TREASURER Treasurer(s) Type of Statement: (Month, Day, Year) Amendment (Explain below) Semi-annual Statement Preelection Statement 11-6-2018 (Also file a Form 410 Termination) Termination Statement date, State Measure Proponent or Responsible Officer of Sponso Chy of Lompoc - City Clock's City a Date Sprop OCT 25 STATE CA STATE 2018 93438 Special Odd-Year Report Quarterly Statement ZIP CODE ZIP CODE CALIFORNIA Page FORM For Official Use Only 805-588-2703 AREA CODE/PHONE AREA CODE/PHONE of COVER PAGI 5

Summary Page Campaign Disclosure Statement

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Summary Page	to whole dollars.	Stater	Statement covers period SEPT- 2018	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE		through_	OCT- 2018	Page 2 of 5
NAME OF FILER VICTOR VEGA				NOT YET RECIEVED
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidate Running in Both the State Primary and	Calendar Year Summary for Candidates Running in Both the State Primary and
1. Monetary Contributions Schedule A, Line 3 \$	1,449.00 \$		General Elections	
Loans Received Schedule B. Line 3			1/1 th	1/1 through 6/30 7/1 to Date
SUBTOTAL CASH CONTRIBUTIONS Add Lines 1+	69		20. Contributions Received \$	0 \$ 2,302.71
4. Nonmonetary Contributions Schedule C, Line 3			21. Expenditures	
5. TOTAL CONTRIBUTIONS RECEIVED	69		Made \$	64
Expenditures Made			Expenditure Limit Summary for State	ummary for State
ade	733.71 \$		Candidates	
8. SUBTOTAL CASH PAYMENTS	733.71 \$		22. Cumulativ	Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3	1		Date of Election	Total to Date
10. Nonmonetary AdjustmentSchedule C, Line 3	4		(mm/dd/yy)	
11. TOTAL EXPENDITURES MADEAdd Lines 8 + 9 + 10 \$	733.71 \$			€9
Current Cash Statement				€9
12. Beginning Cash Balance Previous Summary Page, Line 16 \$	1,595.29 To ca	To calculate Column B,		
13. Cash Receipts Column A, Line 3 above	add a	add amounts in Column		
14. Miscellaneous Increases to Cash Schedule I, Line 4	A to t	A to the corresponding amounts from Column B	*Amounts in this section megorted in Column B.	*Amounts in this section may be different from amounts reported in Column B.
15. Cash Payments	853.71 of yo	of your last report. Some		
16. ENDING CASH BALANCEAdd Lines 12 + 13 + 14, then subtract Line 15 \$	1,595.29 be no	be negative figures that		
If this is a termination statement, Line 16 must be zero.	previ	should be subtracted from previous period amounts. If		
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$	filed	filed for this calendar year, only carry over the amounts		
Cash Equivalents and Outstanding Debts	from any).	from Lines 2, 7, and 9 (if any).		
18. Cash Equivalents See instructions on reverse \$				
19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$			مراد معراد المعراد المعراد	EPPC Form 460 (Jan/201)
			FPPC Advice: adv	1001001000. Ca. gov (866/2/5-3///

Schedule A Monetary Contributions Received

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

Statement covers period SEPT-

through OCT- 2018

from .

CALIFORNIA FORM

2018

Page . ω of G

I.D. NUMBER

NOT YET RECIEVED

			SUBTOTAL \$			
		150.00		OTH SCC	MORRIS SOBHANI GLORIA SOBHANI 204 RAMETTO RD INDUSTRIAL PARK SANTA BARBARA CA 93108	10-2@-2018
		100.00		OTH SCC	AL & S INC. LOMPOC CA 93436	10-28-2018
		99.00		IND IND OTH SCC	JACK BODGER	10-11-2018
		100.00		OTH SCC	EARLS RV 321 NORTH G ST LOMPOC CA	10-11-2018
		500.00		OTH SCC	PANKAJ T PATEL DANKSA PATEL 528 N H. ST LOMPOC CA 93436	10-11-2018
PER ELECTION TO DATE (IF REQUIRED)	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	AMOUNT RECEIVED THIS PERIOD	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELFEMPLOYED, ENTER NAME OF BUSINESS)	CONTRIBUTOR CODE *	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DATE
NOT YET RECIEVED	NOT				EGA	VICTOR VEGA

Schedule A Summary

- Amount received this period itemized monetary contributions.

 (Include all Schedule A subtotals.)......
- 2. Amount received this period unitemized monetary contributions of less than \$100 ...
- 3. Total monetary contributions received this period.
- (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.).......

...TOTAL \$

1,449.00

*Contributor Codes

IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity) PTY - Political Party

: Ġ

1,449.00

FPPC Form 460 (Jan/2016)

SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

		49	SUBTOTAL \$			
				OTH SCC		
				O PTY SCC		
				OTH SCC		
				□ COM □ SCC		
		500.00		□ IND □ COM □ PTY □ SCC	EIPM INC. 160 NORTH FAIRVIEW AVE SUITE 4 GOLETA CA 93117	10-2 6 -2018
PER ELECTION TO DATE (IF REQUIRED)	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	AMOUNT RECEIVED THIS PERIOD	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	CONTRIBUTOR CODE *	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	DATE
NOT YET RECIEVED	NOT '				GA	VICTOR VEGA
4 of 5	OCT- 2018 Page	through OCT-				
CALIFORNIA 460		Statement covers period from SEPT- 2018	Olidis	to whole dollars.	Monetary Contributions Received	Monetary C

*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

Supporting/Opposing Other Summary of Expenditures Schedule D Candidates, Measures and Committees

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

VICTOR VEGA

Amounts may be rounded to whole dollars.

Statement covers period SEPT-2018

SCHEDULE D

from_ through OCT- 2018 Page _ CALIFORNIA 460 NOT YET RECIEVED I.D. NUMBER 5 of. 5

			10-5-2018				10-1-2018			9-29-2018	DATE
	☐ Support ☐ Oppose	LOMPOC CA 93436	VICTOR VEGA COMMITTEE TO ELECT FOR CITY	☐ Support ☐ Oppose		COUNCIL LOMBOC CA 93436	VICTOR VEGA COMMITTEE TO ELECT FOR CITY	☐ Support ☐ Oppose	LOMPOC CA 93436	VICTOR VEGA COMMITTEE TO ELECT FOR CITY	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE
	Contribution Nonmonetary Contribution Independent Expenditure			Contribution Nonmonetary Contribution Independent Expenditure			Monetary Contribution Nonmonetary Contribution Independent Expenditure			TYPE OF PAYMENT	
SUBTOTAL \$		SECRETARY OF STATE				HILTON GARDEN INN CAMPAIGN			DESCRIPTION (IF REQUIRED)		
\$	733.71			50.00					AMOUNT THIS PERIOD		
											CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)
											PER ELECTION TO DATE (IF REQUIRED)

Schedule D Summary

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)..... 60

2. Unitemized contributions and independent expenditures made this period of under \$100......\$100.....

5

2,302.71

2302.71

