

Officeholder, Candidate,  
and Controlled Committee  
Campaign Statement — Long Form  
(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE - LONG FORM

SEE INSTRUCTIONS ON REVERSE

Check one of the following boxes to indicate the type of statement being filed:

- Pre-election Statement
- Supplemental Pre-election Statement (Attach a completed Form 495 to this statement.)
- Special Odd-Year Campaign Report
- Semi-annual Statement
- Termination Statement (Attach a completed Form 415 to this statement.)

Statement covers period from <u>1/1/99</u> through <u>6/30/99</u>	Date Stamp <u>1999 JUN 29 PM</u>	CALIFORNIA 1999 FORM <b>490</b>
Date of election if applicable: (Month, Day, Year) <u>Ø</u>	Page <u>1</u> of <u>4</u> For Official Use Only	
CITY CLERK CITY OF LOUISEVILLE		

I Officeholder, Candidate, and Controlled Committee  
Included in this Statement

NAME OF OFFICEHOLDER OR CANDIDATE  
Phillip Pennino

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)  
Lodi City Council

RESIDENTIAL OR BUSINESS ADDRESS (NO. AND STREET)  
1502 Keagle Way

CITY STATE ZIP CODE AREA CODE/DAYTIME PHONE  
Lodi CA 95242 (209) 368-2181

COMMITTEE NAME I.D. NUMBER  
Committee To Elect Phillip Pennino 902421

COMMITTEE ADDRESS (NO. AND STREET)  
1502 Keagle Way

CITY STATE ZIP CODE AREA CODE/DAYTIME PHONE  
Lodi CA 95242 (209) 368-2181

NAME OF TREASURER  
Matt McGladdery

RESIDENTIAL ADDRESS OF TREASURER (NO. AND STREET)  
751 Dorchester Circle

CITY STATE ZIP CODE AREA CODE/DAYTIME PHONE  
Lodi CA 95240 (209) 334-3497

II Other Committees Not Included in this Statement: List any other  
committees not included in this consolidated statement that are controlled by you and any  
committees of which you have knowledge that are primarily formed to receive contributions  
or to 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 (NO. AND STREET)	
CITY STATE ZIP CODE AREA CODE/DAYTIME PHONE	
COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS (NO. AND STREET)	
CITY STATE ZIP CODE AREA CODE/DAYTIME PHONE	

Attach additional information on appropriately labeled continuation sheets.

III Verification

I have used all reasonable diligence in preparing this statement. I have reviewed the 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 7/28/99 At Lodi CA

By Matt McGladdery  
SIGNATURE OF TREASURER

An officeholder or candidate who controls a committee must also verify the campaign statement. I have used all reasonable diligence and to the best of my knowledge the treasurer has used all reasonable diligence in preparing this statement. I have reviewed the 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 7/28/99 At Lodi CA

By Phillip Pennino  
SIGNATURE OF CANDIDATE/OFFICEHOLDER

Executed on \_\_\_\_\_ At \_\_\_\_\_

By \_\_\_\_\_  
SIGNATURE OF CANDIDATE/OFFICEHOLDER

Executed on \_\_\_\_\_ At \_\_\_\_\_

By \_\_\_\_\_  
SIGNATURE OF CANDIDATE/OFFICEHOLDER

Campaign Disclosure Statement  
Summary Page

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

SUMMARY PAGE

Statement covers period  
from 1/1/99  
through 6/30/99

CALIFORNIA  
DISCLOSURE  
FORM **490**

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SEE INSTRUCTIONS ON REVERSE

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

Committee to Elect Phillip Pennino

I.D. NUMBER

902421

Contributions Received

	Column A TOTAL THIS PERIOD (ADD ATTACHED SCHEDULES)	Column B* TOTAL PREVIOUS PERIOD (SEE NOTE BELOW)	Column C TOTAL TO DATE (ADD COLUMNS A + B)
1. Monetary Contributions ..... Schedule A, Line 3	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
2. Loans Received ..... Schedule B, Line 7	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1 + 2	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
4. Non-monetary Contributions ..... Schedule C, Line 3	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
5. SUBTOTAL CONTRIBUTIONS (Exclude Enforceable Promises) ..... Add Lines 3 + 4	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
6. Enforceable Promises (Exclude Loan Guarantees, Line 1B below) ..... Schedule D, Line 7	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
7. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 5 + 6	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>

Expenditures Made

8. Cash Payments (Other than Loans Made) ..... Schedule E, Line 5	\$ <u>176<sup>00</sup></u>	\$ <u>0</u>	\$ <u>176<sup>00</sup></u>
9. Loans Made ..... Schedule H, Line 7	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
10. SUBTOTAL CASH PAYMENTS ..... Add Lines 8 + 9	\$ <u>176<sup>00</sup></u>	\$ <u>0</u>	\$ <u>176<sup>00</sup></u>
11. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 5	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>
12. TOTAL EXPENDITURES MADE ..... Add Lines 10 + 11	\$ <u>176<sup>00</sup></u>	\$ <u>0</u>	\$ <u>176<sup>00</sup></u>

Current Cash Statement

13. Beginning Cash Balance ..... Previous Summary Page, Line 17	\$ <u>379<sup>51</sup></u>
14. Cash Receipts ..... Column A, Line 3 above	\$ <u>0</u>
15. Miscellaneous Increases to Cash ..... Schedule I, Line 4	\$ <u>0</u>
16. Cash Payments ..... Column A, Line 10 above	\$ <u>276<sup>00</sup></u>
17. ENDING CASH BALANCE ..... Add Lines 13 + 14 + 15, then subtract Line 16	\$ <u>103<sup>51</sup></u>

*If this is a termination statement, Line 17 must be zero.*

ENDING CASH BALANCE SHOULD NOT BE A NEGATIVE AMOUNT

\* From previous Statement Summary Page, Column C. However, if this is the first report filed for the calendar year, Column B should be blank except for Loans Received (Line 2), Enforceable Promises (Line 6), Loans Made (Line 9), and Accrued Expenses (Line 11).

Summary for Candidates in Both June and November Elections

	1/1 through 6/30	7/1 to Date
18. LOAN GUARANTEES RECEIVED ..... Schedule B, Part I, Column (b)	\$ <u>0</u>	
21. Contributions Received	\$ <u>0</u>	
19. Cash Equivalents and Outstanding Debts	\$ <u>0</u>	
22. Expenditures Made	\$ <u>276<sup>00</sup></u>	
20. Outstanding Debts ..... Add Line 2 + Line 11 in Column C above	\$ <u>0</u>	

Allocation Page — Part I  
 Contributions and Independent Expenditures  
 Made From Campaign Funds

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

ALLOCATION - PART I

Statement covers period from <u>1/1/99</u> through <u>6/30/99</u>	490
Page <u>3</u> of <u>4</u>	I.D. NUMBER <u>902421</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

Committee To Elect Phillip Perrino

List each contribution and independent expenditure of \$100 or more made from campaign funds to other committees or to support or oppose other candidates or ballot measures.

DATE	NAME OF OFFICEHOLDER, CANDIDATE, COMMITTEE, OR MEASURE	CHECK ONE		IND. EXP.	AMOUNT	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
		Support	Oppose				
3/29/99	Anthony Pescetti ID 962826 Pescetti for assembly District 10 State of CALIF.	X			100 <sup>00</sup>	100 <sup>00</sup>	

\* See reverse regarding independent expenditures.

SUBTOTAL \$ 100<sup>00</sup>

Attach additional information on appropriately labeled continuation sheets.

ALLOCATION — PART I SUMMARY

- Contributions and independent expenditures of \$100 or more made this period from campaign funds.  
 (Include all Allocation Page — Part I subtotals.) ..... \$ 100<sup>00</sup>
- Contributions and independent expenditures under \$100 made this period from campaign funds.  
 (Do not itemize.) ..... \$ 0
- Total contributions and independent expenditures made this period from campaign funds.  
 (Do not carry this total to the Summary Page.) ..... TOTAL \$ 100<sup>00</sup>

Schedule E  
 Payments and Contributions  
 (Other Than Loans) Made

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

SCHEDULE I

Statement covers period  
 from 1/1/99  
 through 6/30/99

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SEE INSTRUCTIONS ON REVERSE

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

Committee To Elect Phillip Pennino

I.D. NUMBER

902421

CODES FOR CLASSIFYING EXPENDITURES

If one of the following codes accurately describes the expenditure, you may enter the code and leave the "Description of Payment" column blank. Refer to the back of Schedule E-Continuation Sheet for detailed explanations of each category.

- \*C\* - MONETARY AND IN-KIND (NON-MONETARY) CONTRIBUTIONS TO OTHER CANDIDATES AND COMMITTEES
- \*B\* - BROADCAST ADVERTISING
- \*G\* - GENERAL OPERATIONS AND OVERHEAD
- \*I\* - INDEPENDENT EXPENDITURES
- \*N\* - NEWSPAPER AND PERIODICAL ADVERTISING
- \*T\* - TRAVEL, ACCOMMODATIONS AND MEALS (MUST BE DESCRIBED)
- \*L\* - LITERATURE
- \*O\* - OUTSIDE ADVERTISING
- \*S\* - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS
- \*P\* - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES
- \*F\* - FUNDRAISING EVENTS

NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION <small>(IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)</small>	IMPORTANT: DO NOT ITEMIZE THE PAYMENT OF ACCRUED EXPENSES ON SCHEDULE E. REPORT ONLY THE LUMP SUM OF SUCH PAYMENTS ON LINE 4 OF THE SUMMARY SECTION BELOW.			
NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION <small>(IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)</small>	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
<u>Anthony Pescetti</u> <u>ID 962826</u> <u>Pescetti for Assembly</u> <u>District 10</u> <u>State of Calif</u>	C			100 <sup>00</sup>
/				
/				

Important: Contributions and expenditures made out of campaign funds to or on behalf of other officeholders, candidates, committees, or ballot measures must also be entered on the Allocation Page, Part I.

SUBTOTAL \$ 100

Payments and Contributions Made Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$ <u>100</u>
2. Payments made this period of under \$100. (Do not itemize.)	\$ <u>176<sup>00</sup></u>
3. Total interest paid this period on outstanding loans. (Enter amount from Schedule B, Part II, Column (d).)	\$ <u>0</u>
4. Total accrued expenses paid this period. (Do not itemize. Enter amount from Schedule F, Line 4.)	\$ <u>0</u>
5. Total payments made this period. (Add Lines 1, 2, 3, and 4. Enter here and on the Summary Page, Column A, Line 8.)	TOTAL \$ <u>276<sup>00</sup></u>