



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

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE  
Roseann Mikos

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)  
City Councilmember (Moorpark)

RESIDENTIAL/BUSINESS ADDRESS (NO AND STREET) CITY STATE ZIP  
[REDACTED] Moorpark, CA 93021

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

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE

|                      |              |   |
|----------------------|--------------|---|
| BALLOT NO. OR LETTER | JURISDICTION | <input type="checkbox"/> SUPPORT<br><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 Candidate/Officeholder 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<br><input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |

*Attach continuation sheets if necessary*

**Campaign Disclosure Statement  
Summary Page**

Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

|   |                                |
|---|--------------------------------|
| Statement covers period<br>from <u>01/01/2017</u> | <b>CALIFORNIA<br/>FORM 460</b> |
| through <u>06/30/2017</u>                         |                                |
| Page <u>3</u> of <u>6</u>                         | I.D. NUMBER<br><u>982461</u>   |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Roseann Mikos/Roseann Mikos for Council 2016

**Contributions Received**

|   | <b>Column A</b><br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | <b>Column B</b><br>CALENDAR YEAR<br>TOTAL TO DATE |
|---|---|---|
| 1. Monetary Contributions..... <i>Schedule A, Line 3</i>    | \$ <u>0.00</u>  | \$ <u>0.00</u>                                    |
| 2. Loans Received..... <i>Schedule B, Line 3</i>            | \$ <u>-540.00</u>   | \$ <u>0.00</u>                                    |
| 3. SUBTOTAL CASH CONTRIBUTIONS..... <i>Add Lines 1 + 2</i>  | \$ <u>-540.00</u>   | \$ <u>0.00</u>                                    |
| 4. Nonmonetary Contributions..... <i>Schedule C, Line 3</i> | \$ <u>0</u>   | \$ <u>0.00</u>                                    |
| 5. TOTAL CONTRIBUTIONS RECEIVED..... <i>Add Lines 3 + 4</i> | \$ <u>-540.00</u>   | \$ <u>0.00</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**

|   |                  |                  |
|---|------------------|------------------|
| 6. Payments Made..... <i>Schedule E, Line 4</i>                   | \$ <u>226.01</u> | \$ <u>226.01</u> |
| 7. Loans Made..... <i>Schedule H, Line 3</i>                      | \$ <u>0</u>      | \$ <u>0</u>      |
| 8. SUBTOTAL CASH PAYMENTS..... <i>Add Lines 6 + 7</i>             | \$ <u>226.01</u> | \$ <u>226.01</u> |
| 9. Accrued Expenses (Unpaid Bills)..... <i>Schedule F, Line 3</i> | \$ <u>0</u>      | \$ <u>0</u>      |
| 10. Nonmonetary Adjustment..... <i>Schedule C, Line 3</i>         | \$ <u>0</u>      | \$ <u>0</u>      |
| 11. TOTAL EXPENDITURES MADE..... <i>Add Lines 8 + 9 + 10</i>      | \$ <u>226.01</u> | \$ <u>226.01</u> |

**Expenditure Limit Summary for State  
Candidates**

| <b>22. Cumulative Expenditures Made*</b><br>(If Subject to Voluntary Expenditure Limit) |               |
|---|---------------|
| Date of Election<br>(mm/dd/yy)  | Total to Date |
| ____/____/____  | \$ _____      |
| ____/____/____  | \$ _____      |

**Current Cash Statement**

|   |                   |
|---|-------------------|
| 12. Beginning Cash Balance..... <i>Previous Summary Page, Line 16</i>             | \$ <u>2067.71</u> |
| 13. Cash Receipts..... <i>Column A, Line 3 above</i>                              | \$ <u>-540.00</u> |
| 14. Miscellaneous Increases to Cash..... <i>Schedule I, Line 4</i>                | \$ <u>35.92</u>   |
| 15. Cash Payments..... <i>Column A, Line 8 above</i>                              | \$ <u>226.01</u>  |
| 16. ENDING CASH BALANCE..... <i>Add Lines 12 + 13 + 14, then subtract Line 15</i> | \$ <u>1336.72</u> |

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).

\*Amounts in this section may be different from amounts reported in Column B.

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

|   |             |
|---|-------------|
| 17. LOAN GUARANTEES RECEIVED..... <i>Schedule B, Part 2</i> | \$ <u>0</u> |
|---|-------------|

**Cash Equivalents and Outstanding Debts**

|   |             |
|---|-------------|
| 18. Cash Equivalents..... <i>See instructions on reverse</i>            | \$ <u>0</u> |
| 19. Outstanding Debts..... <i>Add Line 2 + Line 9 in Column B above</i> | \$ <u>0</u> |

# Schedule B – Part 1 Loans Received

Amounts may be rounded  
to whole dollars.

|  |                            |
|--|----------------------------|
| Statement covers period<br>from <u>01/01/2017</u><br>through <u>06/30/2017</u> | <b>CALIFORNIA FORM 460</b> |
|  | Page <u>4</u> of <u>6</u>  |

SEE INSTRUCTIONS ON REVERSE

|   |                           |
|---|---------------------------|
| NAME OF FILER<br><br>Roseann Mikos/Roseann Mikos for Council 2016 | I.D. NUMBER<br><br>982461 |
|---|---------------------------|

| 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)<br>OUTSTANDING BALANCE BEGINNING THIS PERIOD | (b)<br>AMOUNT RECEIVED THIS PERIOD | (c)<br>AMOUNT PAID OR FORGIVEN THIS PERIOD*  | (d)<br>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD | (e)<br>INTEREST PAID THIS PERIOD | (f)<br>ORIGINAL AMOUNT OF LOAN                    | (g)<br>CUMULATIVE CONTRIBUTIONS TO DATE                             |
|--|--|--|------------------------------------|--|--|----------------------------------|---|---|
| Roseann Mikos<br>14371 E. Cambridge St.<br>Moorpark, CA 93021<br><br>† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | self-employed insurance agent & educ/trg/grant consult.) Roseann Mikos, Ph.D.              | \$ <u>540</u>                                    | \$ <u>0</u>                        | <input checked="" type="checkbox"/> PAID<br>\$ <u>540</u><br><input type="checkbox"/> FORGIVEN | \$ <u>0</u><br><br>DATE DUE                        | <u>    </u> %<br>RATE            | \$ <u>500</u><br><br><u>1998</u><br>DATE INCURRED | CALENDAR YEAR<br>\$ <u>0</u><br>PER ELECTION**<br>\$ <u>    </u>    |
| † <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC   |  | \$ <u>    </u>                                   | \$ <u>    </u>                     | <input type="checkbox"/> PAID<br>\$ <u>    </u><br><input type="checkbox"/> FORGIVEN           | \$ <u>    </u><br><br>DATE DUE                     | <u>    </u> %<br>RATE            | \$ <u>    </u><br><br>DATE INCURRED               | CALENDAR YEAR<br>\$ <u>    </u><br>PER ELECTION**<br>\$ <u>    </u> |
| † <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC   |  | \$ <u>    </u>                                   | \$ <u>    </u>                     | <input type="checkbox"/> PAID<br>\$ <u>    </u><br><input type="checkbox"/> FORGIVEN           | \$ <u>    </u><br><br>DATE DUE                     | <u>    </u> %<br>RATE            | \$ <u>    </u><br><br>DATE INCURRED               | CALENDAR YEAR<br>\$ <u>    </u><br>PER ELECTION**<br>\$ <u>    </u> |
| <b>SUBTOTALS \$</b>  |  | <b>0 \$</b>                                      | <b>540 \$</b>                      | <b>0 \$</b>  | <b>0 \$</b>  |                                  |   |   |

(Enter (e) on  
Schedule E, Line 3)

## Schedule B Summary

- Loans received this period ..... \$ 00  
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period ..... \$ 540  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (Subtract Line 2 from Line 1.) ..... NET \$ -540  
Enter the net here and on the Summary Page, Column A, Line 2.  
(May be a negative number)

†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.

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

|                         |            |                                |
|-------------------------|------------|--------------------------------|
| Statement covers period |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                    | 01/01/2017 |                                |
| through                 | 06/30/2017 | Page 5 of 6                    |
| I.D. NUMBER             |            | 982461                         |

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

Roseann Mikos/Roseann Mikos for 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<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)     | CODE OR | DESCRIPTION OF PAYMENT                                    | AMOUNT PAID |
|---|---------|---|-------------|
| Bank of America (credit card)<br>P.O. Box 15019<br>Wilmington, DE 19886 |         | NOTE: All amounts were individually less than \$100 each. | \$104.01    |
|   |         |   |             |
|   |         |   |             |

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

**SUBTOTAL \$ 104.01**

**Schedule E Summary**

|   |                 |               |
|---|-----------------|---------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.).....   | \$              | 104.01        |
| 2. Unitemized payments made this period of under \$100.....   | \$              | 122.00        |
| 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....                   | \$              | 0             |
| 4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)..... | <b>TOTAL \$</b> | <b>226.01</b> |

**Schedule I  
Miscellaneous Increases to Cash**

Amounts may be rounded  
to whole dollars.

SCHEDULE I

|  |                            |
|--|----------------------------|
| Statement covers period<br>from <u>01/01/2017</u><br>through <u>06/30/2017</u> | <b>CALIFORNIA FORM 460</b> |
|  | Page <u>6</u> of <u>6</u>  |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Roseann Mikos/Roseann Mikos for Council 2016

I.D. NUMBER

982461

| DATE RECEIVED | FULL NAME AND ADDRESS OF SOURCE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | DESCRIPTION OF RECEIPT                             | AMOUNT OF INCREASE TO CASH |
|---------------|---|--|----------------------------|
| 2/10/17       | City of Moorpark<br>799 Moorpark Ave.<br>Moorpark, CA 93021               | Refund of overpayment for ballot measure printing. | \$35.02                    |
|               |   |  |                            |
|               |   |  |                            |
|               |   |  |                            |
|               |   |  |                            |
|               |   |  |                            |

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL \$**

35.02

**Schedule I Summary**

|   |                       |
|---|-----------------------|
| 1. Itemized increases to cash this period. ....   | \$ 35.02              |
| 2. Unitemized increases to cash of under \$100 this period. ....  | \$                    |
| 3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) .....                            | \$                    |
| 4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) ..... | <b>TOTAL \$ 35.02</b> |