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Executed on By	1/20/19	11/2018	1000	Traspror	
Date    Signature of Controlling Officeholder Candidate, State Measure Prepagent or Responsible Officer of Spensor	Executed on Date	Signature of Contra	olling Officeholder Candidate, State Measure Pro	eponent or Responsible Officer of Spenso	
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Date Signature of Controlling Officeholder, Candidate, State Meagure Proponent	Date		signature of Controlling Officeholder, Candidate, §	State Measure Proponent	
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## Campaign Disclosure Statement Summary Page

SEÉ INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statem from	ent covers period 07/01/18	CALIFORNIA 460			
through	12/31/18	Page 2 of 3			
		I.D. NUMBER 1382478			

NAME OF FILER Brian Goodell for City Council			1.D. NUMBER 1382478		
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and		
1. Monetary Contributions	\$		General Elections  1/1 through 6/30  7/1 to Date  20. Contributions Received \$ \$ \$  21. Expenditures Made \$ \$		
Expenditures Made  6. Payments Made	\$ 199	\$ 199  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	Expenditure Limit Summary for State Candidates  22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)  Date of Election Total to Date (mm/dd/yy)  \$  *Amounts in this section may be different from amounts reported in Column B.		
17. LOAN GUARANTEES RECEIVED	\$	this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).	FPPC Form 460 (Jan/2016) FPPC Advice: ádvice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov		

chédule E Amounts may be rounded to whole dollars.		State:	07/01/18	CALIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE NAME OF FILER  Brian Goodell for City Council		y and a safe	through	12/31/18	Page 3 I.D. NUMBER 1382478	
CODES: If one of the following codes accurately described campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  FND fundraising events  IND independent expenditure supporting/opposing others (explain)*  LEG legal defense  LIT campaign literature and mailings	MBR member con MTG meetings and OFC office expens PET petition circu PHO phone banks POL pelling and s POS postage, deli	nmunications d appearances ses lating	RAD radio RFD retul SAL cam TEL t.v. c TRC can TRS staff S TSF trans VOT vote	ribe the payment.  pairtime and production of the contributions of the contribution of the contributio	ction costs medis nd meals of the same ca	0.52001
NAME AND ADDRESS OF PAYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTION OF F	AYMENT		AMOUNT PAID
* Payments that are contributions or independent expenditures must also		dule D.		SUB	TOTAL \$	
Schedule E Summary						•
1. Itemized payments made this period. (Include all Schedu						199
2. Uniternized payments made this period of under \$100			33.11		•	
<ul><li>3. Total interest paid this period on loans. (Enter amount fro</li><li>4. Total payments made this period. (Add Lines 1, 2, and 3.</li></ul>						199

FPPC Form 460 (Jan/2016)

FPPC Advice: advice@fppc.ca.gov (866/275-3772)