

**Major Donor and
Independent Expenditure Committee
Campaign Statement**

RECEIVED CITY CLERK 17 JAN 31 PM 1:51 CITY OF COSTA MESA BY _____	CALIFORNIA FORM 461
	Page <u>1</u> of <u>2</u> For Official Use Only

Statement covers period from <u>01/01/2016</u> through <u>12/31/2016</u>	Date of election if applicable: (Month, Day, Year)
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SEE INSTRUCTIONS ON REVERSE

1. Name and Address of Filer

NAME OF FILER Vibhakerbhai B. Patel	
RESIDENTIAL OR MAILING ADDRESS (NO. AND STREET) 1117 7th Street	
CITY	STATE ZIP CODE
Calimesa	CA 92320
RESPONSIBLE OFFICER (If filer is other than an individual)	AREA CODE/DAYTIME PHONE
	951-880-7595

2. Nature and Interests of Filer (Complete each applicable section.)

A FILER WHO IS AN INDIVIDUAL MUST LIST THE NAME, ADDRESS, AND BUSINESS INTERESTS OF EMPLOYER OR, IF SELF-EMPLOYED, THE NAME, ADDRESS, AND NATURE OF THE BUSINESS

NAME OF EMPLOYER/BUSINESS Calimesa Inn	BUSINESS INTERESTS Hospitality Industry
ADDRESS OF EMPLOYER/BUSINESS 1205 Calimesa Blvd Calimesa, CA 92320	

A FILER THAT IS A BUSINESS ENTITY MUST DESCRIBE THE BUSINESS ACTIVITY IN WHICH IT IS ENGAGED

A FILER THAT IS AN ASSOCIATION MUST PROVIDE A SPECIFIC DESCRIPTION OF ITS INTERESTS

A FILER THAT IS NOT AN INDIVIDUAL, BUSINESS ENTITY, OR ASSOCIATION MUST DESCRIBE THE COMMON ECONOMIC INTEREST OF THE GROUP OR ENTITY

3. Summary

(Amounts may be rounded to whole dollars.)

1. Expenditures and contributions (including loans) of \$100 or more made this period. (Part 5.)	\$ <u>20,000.00</u>
2. Unitemized expenditures and contributions (including loans) under \$100 made this period.	\$ <u>0.00</u>
3. Total expenditures and contributions made this period. (Add Lines 1 + 2.)	SUBTOTAL \$ <u>20,000.00</u>
4. Total expenditures and contributions made from prior statement. (Enter amount from Line 5 of last statement filed. If this is the first statement for the calendar year, enter zero.)	\$ <u>0.00</u>
5. Total expenditures and contributions (including loans) made since January 1 of the current calendar year. (Add Lines 3 + 4.)	TOTAL \$ <u>20,000.00</u>

4. 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 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 1/23/17 By 
DATE SIGNATURE OF INDIVIDUAL DONOR OR RESPONSIBLE OFFICER IF OTHER THAN AN INDIVIDUAL

Amendment (Explain): _____

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vibhakerbhai B. Patel

5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made

(If more space is needed, use additional copies of this page for continuation sheets.)

DATE	NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATED TO THIS CANDIDATE, MEASURE, OR COMMITTEE
10/17/2016	Yes on Measure W Committee (ID# 1390927) [REDACTED]	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Yes on Measure W Committee, Major Funding by CBD, Inc. <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	20,000.00	20,000.00
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		<input type="checkbox"/> Support <input type="checkbox"/> Oppose		
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		<input type="checkbox"/> Support <input type="checkbox"/> Oppose		
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		<input type="checkbox"/> Support <input type="checkbox"/> Oppose		
SUBTOTAL \$					20,000.00	