COVER PAGE

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

SEE INSTRUCTIONS ON REVERSE

Statement covers period from 1/1/2014 through 3/16/2014

Date of election if applicable: (Month, Day, Year) 6/3/2014

Date Stamp: RECEIVED 2014 MAY 20 PM 12:10 CITY OF TORRANCE CITY CLERK'S OFFICE

CALIFORNIA FORM 460

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For Official Use Only

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- [x] Officeholder, Candidate Controlled Committee
  - ◯ State Candidate Election Committee
  - ◯ Recall (Also Complete Part 5)
- [ ] General Purpose Committee
  - ◯ Sponsored
  - ◯ Small Contributor Committee
  - ◯ Political Party/Central Committee
- [ ] Primarily Formed Ballot Measure Committee
  - ◯ Controlled
  - ◯ Sponsored (Also Complete Part 6)
- [ ] Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)

2. Type of Statement:

- [ ] Preelection Statement
- [ ] Semi-annual Statement
- [ ] Termination Statement (Also file a Form 410 Termination)
- [x] Amendment (Explain below)
- [ ] Quarterly Statement
- [ ] Special Odd-Year Report
- [ ] Supplemental Preelection Statement - Attach Form 495

Correction to Schedule A page 7 of 14 -Cumulative to Date Calendar Year (Jan 1-Dec 31)

3. Committee Information

I.D. NUMBER: 1358352

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE): Geoff Rizzo for City Council 2014

STREET ADDRESS (NO P.O. BOX): [redacted]

CITY: Torrance STATE: CA ZIP CODE: 90503 AREA CODE/PHONE: [redacted]

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER: Donna M. Rizzo

MAILING ADDRESS: [redacted]

CITY: Torrance STATE: CA ZIP CODE: 90503 AREA CODE/PHONE: [redacted]

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

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 [redacted]

Executed on 5-20-14 (Date) By [redacted] Assistant Treasurer

Executed on 5-20-14 (Date) By [redacted] Signature Proponent or Responsible Officer of Sponsor

Executed on _____ (Date) By _____ Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on _____ (Date) By _____ Signature of Controlling Officeholder, Candidate, State Measure Proponent

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

Statement covers period
from 1/1/2014
through 3/17/2014

CALIFORNIA FORM 460

NAME OF FILER
Geoff Rizzo for City Council 2014

I.D. NUMBER
1358352

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/6/2014	Don Lee Insurance Services Inc 2401 E El Segundo Blvd, #400 El Segundo CA 90245	☐IND ☐COM ☑OTH ☐PTY ☐SCC	Don Lee Insurance Services Inc	100.00	100.00	100.00
2/6/2014	Uchima Corp 3838 W Carson St, #216 Torrance CA 90503	☐IND ☐COM ☑OTH ☐PTY ☐SCC	Uchima Corp	200.00	200.00	400.00
2/6/2014	Gale Apartments 3838 W Carson St, #216 Torrance CA 90503	☐IND ☐COM ☑OTH ☐PTY ☐SCC	Gale Apartments	100.00	300.00	500.00
2/6/2014	Beach Apartments 3838 W Carson St, #216 Torrance CA 90503	☐IND ☐COM ☑OTH ☐PTY ☐SCC	Beach Apartments	100.00	400.00	600.00
2/6/2014	Seville Terrace LTD 3838 W Carson St, #216 Torrance CA 90503	☐IND ☐COM ☑OTH ☐PTY ☐SCC	Seville Terrace LTD	100.00	500.00	700.00
			SUBTOTAL $	600.00		

*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