Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in	ink.	Date Stamp	VIII)	COVER PAGE LIFORNIA 460 FORM 5
(Government Code Sections 84200-04210.3)	Statement covers period from1/1/14	Date of election if applicable: (Month, Day, Year)	83:39PH	Pag	e 1 of 5 For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through6/30/14				
1. Type of Recipient Committee: All Committees - C	omplete Parts 1, 2, 3, and 4.	2. Type of Statement:		***	
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Ten Amendment (Explain bel		Supplement	atement -Year Report al Preelection Attach Form 495
	D. NUMBER 1313179	Treasurer(s)			15
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE		NAME OF TREASURER			
Terry Tornek for City Council 2013		Terry E. Tornek	y ======		
STREET ADDRESS (NO P.O. BOX)		CITY	STATE	ZIP CODE	AREA CODE/PHONE
		Pasadena	CA	91106	
CITY STATE ZIP C		NAME OF ASSISTANT TREASURE	R, IF ANY		
Pasadena CA 9110 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.		Maria Tornek MAILING ADDRESS			
		i de la companya de			
CITY STATE ZIP C	ODE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
		Pasadena	CA	91106	
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRES	SS		
4. Verification					
I have used all reasonable diligence in preparing and reviewin under penalty of perjury under the laws of the State of Californ		owledge the information contained herei	n and in the attached	schedules is tru	e and complete. I certify
7.16.14	Ву	Em L' formest			
Date		Signature on Treasurer or Assistant Tre	asurer		
7.16.14 Date	By Signature of Co	introlling Officeholder, Candidate, State Measure Propor	nent or Responsible Officer of	Sponsor	
Executed on	Ву	Signature of Controlling Officeholder, Candidate, State			
Executed on	Ву	Signature of Controlling Officeholder, Candidate, State	Measure Proponent		FPPC Form 460 (January/05)
			FPPC Toll		66/ASK-FPPC (866/275-3772) State of California

Type or print in ink.

Recipient Committee Campaign Statement Cover Page — Part 2 CALIFORNIA 460
FORM
Page 2 of 5

NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE	700			
Terry Tornek							
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) Pasadena City Council District 7			BALLOT NO. OR LETTER	JURISDICTION		SUPPORT OPPOSE	
							OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREE	T) CITY STATE ZIP	•					
P		Identify the controlling of	fficeholder, ca	andidate, or s	tate measure	proponent, if an	
		-	NAME OF OFFICEHOLDER, CA	NDIDATE, OR P	ROPONENT		
Related Committees Not Included in th	ie Statement: List and a million						
not included in this statement that are controlled b	20. 그림 - 그는 그리고 하는 것이 없는 것이다.		OFFICE SOUGHT OR HELD		1E2725166	DISTRICT NO.	FANY
contributions or make expenditures on behalf of y						-	
COMMITTEE NAME	I.D. NUMBER	•6					
		-	D-iib- F	-d:-d-4-1066	b-ld 0		10 (2)
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Car				
IAME OF TREASURER	CONTROLLED COMMITTEE?	7.	officeholder(s) or candidate(s) for which th	is committee i	s primarily form	
	☐ YES ☐ NO	7.		s) for which th	is committee i		
COMMITTEE ADDRESS STREET ADDRESS (NO	YES NO	- 7. -	officeholder(s) or candidate(S) for which the	OFFICE SOL	s primarily form	ed.
COMMITTEE ADDRESS STREET ADDRESS (NO	☐ YES ☐ NO	7.	officeholder(s) or candidate(S) for which the	OFFICE SOL	s primarily form	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO EITY STATE	YES NO D P.O. BOX) ZIP CODE AREA CODE/PHONE	- 7. -	officeholder(s) or candidate(S) for which the	OFFICE SOL	s primarily form	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO STATE	YES NO	- 7. -	officeholder(s) or candidate(candidate	OFFICE SOU	s primarily form	SUPPORT OPPOSE SUPPORT OPPOSE
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OMMITTEE ADDRESS STREET ADDRESS (NO ITY STATE OMMITTEE NAME AME OF TREASURER	ZIP CODE AREA CODE/PHONE I.D. NUMBER CONTROLLED COMMITTEE? YES NO	7.	Officeholder(s) or candidate(NAME OF OFFICEHOLDER OR NAME OF OFFICEHOLDER OR NAME OF OFFICEHOLDER OR	s) for which the CANDIDATE CANDIDATE CANDIDATE	OFFICE SOU	IGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Type or print in ink.

Amounts may be rounded to whole dollars.

Terry Tornek for City Council 2013		1313179		
Contributions Received Schedule A, Line 3 1. Monetary Contributions Schedule A, Line 3 2. Loans Received Schedule B, Line 3 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 4. Nonmonetary Contributions Schedule C, Line 3 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	s	0 0000).	Column B	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	,		•	Expenditure Limit Summary for State
6. Payments Made	\$ 10,29	0 50.00 0 0 0 0 50.00	\$ 10,250.00 0 \$ 10,250.00 0 0 \$ 10,250.00	Candidates 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) Date of Election (mm/dd/yy)
Current Cash Statement 12. Beginning Cash Balance Previous Summary Page, Line 16 13. Cash Receipts Column A, Line 3 above 14. Miscellaneous Increases to Cash Schedule I, Line 4 15. Cash Payments Column A, Line 8 above 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 If this is a termination statement, Line 16 must be zero.	10,25	0	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	*Amounts in this section may be different from amounts reported in Column B.
17. LOAN GUARANTEES RECEIVED	\$		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 (January// FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-37:

Schedule B – Part 1 Loans Received	Type or print in ink. Amounts may be rounded to whole dollars.				Statement co	vers period /1/14	CALIFORNIA		
SEE INSTRUCTIONS ON REVERSE					through6/30/14		Page 4	of	
NAME OF FILER							I.D. NUMBER		
Terry Tornek for City Council 2013							1313179		
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (FCOMMITTEE, ALSO ENTER LD. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIOL	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE	
Terry E. Tornek Pasadena, CA. 91106	Real Estate Investor Hudson Properties, LLC	21,500.	0	\$ 10,000.	s11,500.	O NATE	s_10,000.	S 21,500. PER ELECTION**	
[†] ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		5	5	5	DATE DUE	5	DATE INCURRED	s	
† IND COM OTH PTY SCC		s	s	PAID S FORGIVEN S	DATE DUE	%	S	SPER ELECTION **	
TO IND COM OTH PTY SCC		s	\$	PAID S FORGIVEN S	S	RATE %	S	CALENDAR YEAR S PER ELECTION ** S	
		SUBTOTALS \$	0 \$	10,000	. \$ 11,500.	\$ 0	PARTIE	No.	
Schedule B Summary 1. Loans received this period				\$	0	(Enter (e) on Schedule E, Line 3)			
2. Loans paid or forgiven this period				\$	10,000.	- IN CC	tContributor Codes IND – Individual COM – Recipient Committee (other than PTY or SCC) OTH – Other (e.g., business entity) PTY – Political Party		
Net change this period. (Subtract Line 2 from Line 1.) Enter the net here and on the Summary Page, Column A, Line 2.				NET \$	(10,000). May be a negative number)		CC - Small Contrib		
*Amounts forgiven or paid by another party also	must be renorted on Schedule A	1							

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

** If required.

Schedule E Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.			Statem	1/1/14 6/30/14	CALIFOI FORI	_M 400	
SEE INSTRUCTIONS ON REVERSE				through .	0/30/14	Page	01	
NAME OF FILER						I.D. NUMB		
Terry Tornek for City Council 2013						1313179)	
CODES: If one of the following codes accurately describe			r the code. Other					
OMP campaign paraphernalia/misc.		ommunications			airtime and production	costs		
CNS campaign consultants CTB contribution (explain nonmonetary)*					RFD returned contributions SAL campaign workers' salaries			
CVC civic donations	OFC office expenses 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 TSF transfer between committees of the same candidate/s				
ND independent expenditure supporting/opposing others (explain)* LEG legal defense				TSF transfer between committees of the sa VOT voter registration			arie candidate/sporisor	
LT campaign literature and mailings	PRT print ads	WEB information technology costs (in				(internet, e-mail)		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE OF	R DI	ESCRIPTION OF PA	AYMENT		AMOUNT PAID	
Political Data			Voter Lists		- 2		\$250.	
Norwalk, CA. 90652						= =		
Terry Tomek Pasadena, CA, 91106			Loan Repayme	ent			\$10,000.	
Pasadella, CA. 91100			11					
* Payments that are contributions or independent expenditures i	must also be sum	marized on Scl	nedule D.		su	BTOTAL\$	10,250.	
Schedule E Summary								
Itemized payments made this period. (Include all Schedule	E subtotals.)					\$	10,250.	
Unitemized payments made this period of under \$100							0	
3. Total interest paid this period on loans. (Enter amount from							0	
4. Total payments made this period. (Add Lines 1, 2, and 3. E	inter here and on	the Summary	Page, Column A	A, Line 6.)	то	TAL \$	10,250.	