

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

| | | | | |
|--|--|--|---|--|
| NAME OF FILER Fast Forward Silicon Valley, A Committee to Support Anthony Phan and Mark | | Date of This Filing 11/5/16 | Date Stamp | CALIFORNIA FORM 496 For Official Use Only |
| AREA CODE/PHONE NUMBER 408-829-4476 | I.D. NUMBER (if applicable) 1390055 | Report No. 5 | City Clerk's Office NOV - 5 2016 RECEIVED | |
| STREET ADDRESS 4148 Snowbank Ct. | | <input type="checkbox"/> Amendment to Report No. (explain below) | | |
| CITY San Jose | STATE CA | ZIP CODE 95135 | No. of Pages 1 | |

1. List Only One Candidate or Ballot Measure

| | | | | | | | |
|---|--------------|--------------|--------|---|--------------|---------|--------|
| NAME OF CANDIDATE SUPPORTED OR OPPOSED Antony Phan | | | | NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED | | | |
| OFFICE SOUGHT OR HELD Milpitas City Council | DISTRICT NO. | SUPPORT X | OPPOSE | BALLOT NO./LETTER | JURISDICTION | SUPPORT | OPPOSE |

2. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets.

| DATE | DESCRIPTION OF EXPENDITURE | AMOUNT |
|---------|----------------------------|--------|
| 11/4/16 | Mailing | 875.00 |
| | | |
| | | |
| | | |
| | | |

Reason for Amendment: _____

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

| | | | | |
|--|--|---|-------------------|---|
| NAME OF FILER Fast Forward Silicon Valley, A Committee to Support Anthony Phan and Mark | | Date of This Filing 11/5/16 | Date Stamp | CALIFORNIA FORM 496 For Official Use Only |
| AREA CODE/PHONE NUMBER 408-829-4476 | I.D. NUMBER (if applicable) 1390055 | Report No. 6 | | |
| STREET ADDRESS 4148 Snowbank Ct. | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY San Jose | STATE CA | ZIP CODE 95135 | No. of Pages 1 | |

City Clerk's Office
NOV - 5 2016
RECEIVED

1. List Only One Candidate or Ballot Measure

| | | | | | | | |
|--|--------------|--|------------------------------------|---|--------------|-------------------------------------|------------------------------------|
| NAME OF CANDIDATE SUPPORTED OR OPPOSED Mark Tiernan | | | | NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED | | | |
| OFFICE SOUGHT OR HELD Milpitas City Council | DISTRICT NO. | SUPPORT <input checked="" type="checkbox"/> | OPPOSE <input type="checkbox"/> | BALLOT NO./LETTER | JURISDICTION | SUPPORT <input type="checkbox"/> | OPPOSE <input type="checkbox"/> |

2. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets.

| DATE | DESCRIPTION OF EXPENDITURE | AMOUNT |
|---------|----------------------------|--------|
| 11/4/16 | Mailing | 875.00 |
| | | |
| | | |
| | | |

Reason for Amendment: _____

** INBOUND NOTIFICATION : FAX RECEIVED SUCCESSFULLY **

STATUS Received

PAGES 2

DURATION 71

REMOTE CSID

TIME RECEIVED November 5, 2016 at 1:59:32 PM PDT

p.1

Nov 05 16 01:59p

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

| | | | | | |
|---|--|-------------------|--|-------------------------------------|---|
| NAME OF FILER Fast Forward Silicon Valley A Committee to support Anthony Phan and Mark | | | Date of This Filing 11/1/16 | Date Stamp | CALIFORNIA FORM 496 For Official Use Only |
| AREA CODE/PHONE NUMBER 408-829-4476 | I.D. NUMBER (if applicable) 1390055 | | Report No. 3 | City Clerk's Office NOV - 9 2016 | |
| STREET ADDRESS 4148 Snowbank Ct. | | | <input type="checkbox"/> Amendment to Report No. (explain below) | RECEIVED | |
| CITY Milpitas | STATE CA | ZIP CODE 95135 | No. of Pages 1 | | |

1. List Only One Candidate or Ballot Measure

| | | | | | | | |
|--|--------------|--------------|--------|---|--------------|---------|--------|
| NAME OF CANDIDATE SUPPORTED OR OPPOSED Anthony Phan | | | | NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED | | | |
| OFFICE SOUGHT OR HELD Milpitas City Council | DISTRICT NO. | SUPPORT X | OPPOSE | BALLOT NO./LETTER | JURISDICTION | SUPPORT | OPPOSE |

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

| DATE | DESCRIPTION OF EXPENDITURE | AMOUNT |
|----------|----------------------------|--------|
| 10/31/16 | Mailing | \$875 |
| | | |
| | | |
| | | |

Reason for Amendment: _____

** INBOUND NOTIFICATION : FAX RECEIVED SUCCESSFULLY **

TIME RECEIVED
November 1, 2016 at 8:10:58 PM PDT

REMOTE CSID

DURATION
75

PAGES
2

STATUS
Received

p.1

Nov 01 16:08:11p

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

p.2

| | | | | |
|---|---------------------------------------|---|-------------------|---|
| NAME OF FILER Fast Forward Silicon Valley A Committee to Support Anthony Phan and Mark | | Date of This Filing 11/1/16 | Date Stamp | CALIFORNIA FORM 496 For Official Use Only |
| AREA CODE/PHONE NUMBER 408-828-4476 | ID. NUMBER (if applicable) 1390055 | Report No. 4 | | |
| STREET ADDRESS 4148 Snowbank Ct. | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY Milpitas | STATE CA | ZIP CODE 95135 | No. of Pages 1 | |

1. List Only One Candidate or Ballot Measure

| | | | | | | | |
|--|--------------|--------------|--------|---|--------------|---------|--------|
| NAME OF CANDIDATE SUPPORTED OR OPPOSED Mark Tiernan | | | | NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED | | | |
| OFFICE SOUGHT OR HELD Milpitas City Council | DISTRICT NO. | SUPPORT X | OPPOSE | BALLOT NO./LETTER | JURISDICTION | SUPPORT | OPPOSE |

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

| DATE | DESCRIPTION OF EXPENDITURE | AMOUNT |
|----------|----------------------------|--------|
| 10/31/16 | Mailing | \$875 |
| | | |
| | | |
| | | |

Reason for Amendment: _____

Nov 01 16 08:11p

** INBOUND NOTIFICATION : FAX RECEIVED SUCCESSFULLY **

TIME RECEIVED
October 31, 2016 at 10:44:59 PM PDT

REMOE CSID

DURATION
53

PAGES
1

STATUS
Received

Oct 31 16 10:45p

p.1

497 Contribution Report

Amounts may be rounded to whole dollars.

| | | | | |
|--|---|--|---|----------------------------|
| NAME OF FILER Fast Forward Silicon Valley, A Committee to Support Anthony Ph | | Date of This Filing 10/31/16 | Date Stamp | CALIFORNIA FORM 497 |
| AREA CODE/PHONE NUMBER 408-829-4476 | I.D. NUMBER (if applicable) 1390055 | Report No. 3 | City Clerk's Office For Official Use Only | |
| STREET ADDRESS 4148 Snowbank Ct. | | <input type="checkbox"/> Amendment to Report No. (explain below) | NOV - 1 2016 | RECEIVED |
| CITY San Jose | STATE CA | ZIP CODE 95135 | No. of Pages 1 | |

1. Contribution(s) Received

| 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 |
|---------------|--|---|--|--|
| 10/28/16 | Geo-Logic 2777 E. Guasti Road, Ste 1 Ontario, CA 91761 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 5,000 <input type="checkbox"/> Check if Loan _____% Provide interest rate |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | <input type="checkbox"/> Check if Loan _____% Provide interest rate |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | <input type="checkbox"/> Check if Loan _____% Provide interest rate |

Reason for Amendment: _____

****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

497 Contribution Report

Amounts may be rounded to whole dollars.

| | | | | |
|---|---|--|---|---|
| NAME OF FILER Fast Forward Silicon Valley, A Committee to Support Anthony | | Date of This Filing 10/28/16 | Date Stamp | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER 408-829-4476 | I.D. NUMBER (if applicable) 1390055 | Report No. 2 | City Clerk's Office OCT 29 2016 RECEIVED | |
| STREET ADDRESS 4148 Snowbank Ct. | | <input type="checkbox"/> Amendment to Report No. (explain below) | | |
| CITY San Jose | STATE CA | ZIP CODE 95135 | No. of Pages 1 | |

1. Contribution(s) Received

| 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 |
|---------------|--|---|--|--|
| 10/27/16 | Armando Gomez 1487 Yosemite Dr. Milpitas, CA 95035 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self Employed Armando Gomez Consulting | 2,700.00 <input checked="" type="checkbox"/> Check if Loan 0.00 % Provide interest rate |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | <input type="checkbox"/> Check if Loan _____% Provide interest rate |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | <input type="checkbox"/> Check if Loan _____% Provide interest rate |

****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

Reason for Amendment: _____

** INBOUND NOTIFICATION : FAX RECEIVED SUCCESSFULLY **

TIME RECEIVED
October 28, 2016 at 8:16:55 PM PDT

p.1

Oct 28 16 08:17p

PAGES 1
STATUS Received

DURATION 51

REMOTE CSID

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

| | | | | | |
|--|--|-------------------|--|------------------------------------|---|
| NAME OF FILER Fast Forward Silicon Valley A Committee to Support Anthony Phan and Mar | | | Date of This Filing 10/28/16 | Date Stamp | CALIFORNIA FORM 496 For Official Use Only |
| AREA CODE/PHONE NUMBER 408-829-4476 | I.D. NUMBER (if applicable) 1390055 | | Report No. 2 | City Clerk's Office OCT 29 2016 | |
| STREET ADDRESS 4148 Snowbank Ct. | | | <input type="checkbox"/> Amendment to Report No. (explain below) | RECEIVED | |
| CITY San Jose | STATE CA | ZIP CODE 95135 | No. of Pages 1 | | |

1. List Only One Candidate or Ballot Measure

| | | | | | | | |
|--|--------------|--------------|--------|---|--------------|---------|--------|
| NAME OF CANDIDATE SUPPORTED OR OPPOSED Mark Tiernan | | | | NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED | | | |
| OFFICE SOUGHT OR FIELD Milpitas City Council | DISTRICT NO. | SUPPORT X | OPPOSE | BALLOT NO./LETTER | JURISDICTION | SUPPORT | OPPOSE |

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

| DATE | DESCRIPTION OF EXPENDITURE | AMOUNT |
|----------|----------------------------|----------|
| 10/27/16 | Mailing | 2,500.00 |
| | | |
| | | |
| | | |

Reason for Amendment: _____

** INBOUND NOTIFICATION : FAX RECEIVED SUCCESSFULLY **

REMOTE CSID

TIME RECEIVED
October 28, 2016 at 8:21:24 PM PDT

Oct 28 16 08:21p

PAGES 1
STATUS Received

DURATION 105

p.1

** INBOUND NOTIFICATION : FAX RECEIVED SUCCESSFULLY **

TIME RECEIVED
October 28, 2016 at 8:19:08 PM PDT

REMOTE CSID

DURATION 73

PAGES 2

STATUS Received

p.1

496 Independent Expenditure Report

Amounts may be rounded to whole dollars.

| | | | | |
|--|--|--|------------------------------------|---|
| NAME OF FILER Fast Forward Silicon Valley A Committee to Support Anthony Phan and Mar | | Date of This Filing 10/28/16 | Date Stamp | CALIFORNIA FORM 496 For Official Use Only |
| AREA CODE/PHONE NUMBER 408-829-4476 | I.D. NUMBER (if applicable) 1390055 | Report No. 1 | City Clerk's Office OCT 29 2016 | |
| STREET ADDRESS 4148 Snowbank Ct. | | <input type="checkbox"/> Amendment to Report No. (explain below) | RECEIVED | |
| CITY San Jose | STATE CA | ZIP CODE 95135 | | No. of Pages 2 |

1. List Only One Candidate or Ballot Measure

| | | | | | | | |
|--|--------------|--------------|--------|---|--------------|---------|--------|
| NAME OF CANDIDATE SUPPORTED OR OPPOSED Anthony Phan | | | | NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED | | | |
| OFFICE BOUGHT OR HELD Milpitas City Council | DISTRICT NO. | SUPPORT X | OPPOSE | BALLOT NO/LETTER | JURISDICTION | SUPPORT | OPPOSE |

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

| DATE | DESCRIPTION OF EXPENDITURE | AMOUNT |
|----------|----------------------------|----------|
| 10/27/16 | Mailing | 2,500.00 |
| | | |
| | | |
| | | |
| | | |

Reason for Amendment: _____

Oct 28 16:08:19p

496 Independent Expenditure Report

| | |
|----------------------------------|------------|
| CALIFORNIA FORM | 496 |
| I.D. NUMBER (if applicable) | |
| 1390055 | |

NAME OF FILER
Fast Forward Silicon Valley, A Committee to Support Anthony Phan and Mark Tiernan for Milpitas City Council

3. Contributions of \$100 or More Received*

| 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 | INTEREST RATES |
|---------------|--|---|--|-----------------|---|
| 10/27/16 | Armando Gomez 1487 Yosemite Dr Milpitas, CA 95035 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self Employed, Armando Gomez Consulting | 2,700.00 | If loan, enter interest rate, if any 0.00 % |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | If loan, enter interest rate, if any _____% |

*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

****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

FPPC Form 496 (Jan/2016)
 FPPC Advice: advice@fppc.ca.gov (866/275-3772)
 www.fppc.ca.gov

**Recipient Committee
Campaign Statement
Cover Page**

| | |
|--|----------------------------|
| Date Stamp City Clerk's Office OCT 27 2016 RECEIVED | CALIFORNIA FORM 460 |
| | Page <u>1</u> of <u>9</u> |
| | For Official Use Only |

| | |
|---|---|
| Statement covers period from <u>9/25/16</u> through <u>10/22/16</u> | Date of election if applicable: (Month, Day, Year) <u>11/8/16</u> |
|---|---|

SEE INSTRUCTIONS ON REVERSE

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

- | | |
|---|--|
| <input type="checkbox"/> Officeholder, Candidate Controlled Committee | <input type="checkbox"/> Primarily Formed Ballot Measure Committee |
| <input type="radio"/> State Candidate Election Committee | <input type="radio"/> Controlled |
| <input type="radio"/> Recall <i>(Also Complete Part 5)</i> | <input type="radio"/> Sponsored <i>(Also Complete Part 6)</i> |
| <input type="checkbox"/> General Purpose Committee | <input checked="" type="checkbox"/> Primarily Formed Candidate/Officeholder Committee <i>(Also Complete Part 7)</i> |
| <input type="radio"/> Sponsored | |
| <input type="radio"/> Small Contributor Committee | |
| <input type="radio"/> Political Party/Central Committee | |

2. Type of Statement:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Preelection Statement | <input type="checkbox"/> Quarterly Statement |
| <input type="checkbox"/> Semi-annual Statement | <input type="checkbox"/> Special Odd-Year Report |
| <input type="checkbox"/> Termination Statement (Also file a Form 410 Termination) | |
| <input type="checkbox"/> Amendment (Explain below) | |

3. Committee Information

I.D. NUMBER
1390055

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Fast Forward Silicon Valley, A Committee to Support Anthony Phan and Mark Tiernan for Milpitas City Council 2016

STREET ADDRESS (NO P.O. BOX)
4148 Snowbank Ct.

| | | | |
|-----------------|-----------|--------------|---------------------|
| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
| San Jose | CA | 95135 | 408-829-4476 |

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
Joshua Barousse

MAILING ADDRESS
4148 Snowbank Ct.

| | | | |
|-----------------|-----------|--------------|---------------------|
| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
| San Jose | CA | 95135 | 408-829-4476 |

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 correct.

Executed on 10/27/16
Date

Executed on 10/27/16
Date

Executed on _____
Date

Executed on _____
Date

By _____
Signature of Treasurer or Assistant Treasurer

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

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

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

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

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

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 | I.D. NUMBER |
|----------------|-------------|

| | |
|-------------------|---|
| NAME OF TREASURER | CONTROLLED COMMITTEE? <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? <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 <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 Anthony Phan | OFFICE SOUGHT OR HELD Milpitas City Council | <input checked="" type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE Mark Tiernan | OFFICE SOUGHT OR HELD Milpitas City Council | <input checked="" type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT <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 from <u>9/25/16</u> | CALIFORNIA FORM 460 |
| through <u>10/22/16</u> | |
| Page <u>3</u> of <u>8</u> | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Fast Forward Silicon Valley, A Committee to Support Anthony Phan and Mark Tiernan for Milpitas City Council 2016

I.D. NUMBER

1390055

Contributions Received

| | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|--|--|--|
| 1. Monetary Contributions..... Schedule A, Line 3 | \$ <u>7,841.15</u> | \$ <u>7,841.15</u> |
| 2. Loans Received..... Schedule B, Line 3 | \$ <u>0.00</u> | \$ <u>0.00</u> |
| 3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1 + 2 | \$ <u>7,841.15</u> | \$ <u>7,841.15</u> |
| 4. Nonmonetary Contributions..... Schedule C, Line 3 | \$ <u>0.00</u> | \$ <u>0.00</u> |
| 5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4 | \$ <u>7,841.15</u> | \$ <u>7,841.15</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

| | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|--|--|--|
| 6. Payments Made..... Schedule E, Line 4 | \$ <u>500.00</u> | \$ <u>500.00</u> |
| 7. Loans Made..... Schedule H, Line 3 | \$ <u>0.00</u> | \$ <u>0.00</u> |
| 8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7 | \$ <u>500.00</u> | \$ <u>500.00</u> |
| 9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3 | \$ <u>0.00</u> | \$ <u>0.00</u> |
| 10. Nonmonetary Adjustment..... Schedule C, Line 3 | \$ <u>0.00</u> | \$ <u>0.00</u> |
| 11. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10 | \$ <u>500.00</u> | \$ <u>500.00</u> |

**Expenditure Limit Summary for State
Candidates**

22. Cumulative Expenditures Made*
(If Subject to Voluntary Expenditure Limit)

| Date of Election (mm/dd/yy) | Total to Date |
|--------------------------------|---------------|
| ____/____/____ | \$ _____ |
| ____/____/____ | \$ _____ |

Current Cash Statement

| | |
|--|--------------------|
| 12. Beginning Cash Balance..... Previous Summary Page, Line 16 | \$ <u>0.00</u> |
| 13. Cash Receipts..... Column A, Line 3 above | \$ <u>7,841.15</u> |
| 14. Miscellaneous Increases to Cash..... Schedule I, Line 4 | \$ <u>0.00</u> |
| 15. Cash Payments..... Column A, Line 8 above | \$ <u>500.00</u> |
| 16. ENDING CASH BALANCE..... Add Lines 12 + 13 + 14, then subtract Line 15 | \$ <u>7,341.15</u> |

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

| | |
|--|----------------|
| 17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2 | \$ <u>0.00</u> |
|--|----------------|

Cash Equivalents and Outstanding Debts

| | |
|--|----------------|
| 18. Cash Equivalents..... See instructions on reverse | \$ <u>0.00</u> |
| 19. Outstanding Debts..... Add Line 2 + Line 9 in Column B above | \$ <u>0.00</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.

**Schedule A
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A

| | |
|---|-------------------------------|
| Statement covers period from <u>9/25/16</u> through <u>10/22/16</u> | CALIFORNIA FORM 460 |
| Page <u>4</u> of <u>8</u> | I.D. NUMBER 1390055 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Fast Forward Silicon Valley, A Committee to Support Anthony Phan and Mark Tiernan for Milpitas City Council 2016

| 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) |
|--------------------|--|---|---|-----------------------------|--|---------------------------------------|
| 10/21/16 | Central Valley Construction 1807 Navy Dr. #2 Stockton, CA 95206 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 5,000.00 | 5,000.00 | 5,000.00 |
| 10/14/16 | Josh Barousse for D8 San Jose City Council 2016 4148 Snowbank Ct. San Jose, CA 95135 Id#1381514 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 2841.15 | 2841.15 | 2841.15 |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| SUBTOTAL \$ | | | | 7,841.15 | | |

Schedule A Summary

| | |
|--|---------------------------------|
| 1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) | \$ <u>7,841.15</u> |
| 2. Amount received this period – unitemized monetary contributions of less than \$100 | \$ <u>0.00</u> |
| 3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)..... | TOTAL \$ <u>7,841.15</u> |

*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

**Schedule D
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Amounts may be rounded
to whole dollars.

SCHEDULE D

| | | |
|-------------------------|----------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 9/25/16 | |
| through | 10/22/16 | Page <u>5</u> of <u>8</u> |
| I.D. NUMBER | | 1390055 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Fast Forward Silicon Valley, A Committee to Support Anthony Phan and Mark Tiernan for Milpitas City Council 2016

| DATE | NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE | TYPE OF PAYMENT | DESCRIPTION (IF REQUIRED) | AMOUNT THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|--|---------------------------|--------------------|---|------------------------------------|
| 10/18/16 | Sergio Jiminez, San Jose City Council, District 2 | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure | | 100.00 | 100.00 | 100.00 |
| | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | | | | | |
| 10/18/16 | Sylvia Arenas, San Jose City Council, District 8 | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure | | 100.00 | 100.00 | 100.00 |
| | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | | | | | |
| 10/18/16 | Helen Chapman, San Jose City Council, District 6 | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure | | 100.00 | 100.00 | 100.00 |
| | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | | | | | |
| SUBTOTAL \$ | | | | 300.00 | | |

Schedule D Summary

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)..... \$ 500.00
- Unitemized contributions and independent expenditures made this period of under \$100..... \$ 0.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) TOTAL.. \$ 500.00

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

| | |
|---|---|
| Statement covers period from <u>9/25/16</u> through <u>10/22/16</u> | CALIFORNIA FORM 460 Page <u>6</u> of <u>8</u> |
| I.D. NUMBER 1390055 | |

NAME OF FILER

Fast Forward Silicon Valley, A Committee to Support Anthony Phan and Mark Tiernan for Milpitas City Council 2016

| DATE | NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE | TYPE OF PAYMENT | DESCRIPTION (IF REQUIRED) | AMOUNT THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|--|---------------------------|--------------------|---|------------------------------------|
| 10/18/16 | Ahmad Rafah, Santa Clara City Council Seat 7 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure | | 100.00 | 100.00 | 100.00 |
| 10/18/16 | Pattie Cortese, East Side Union High School District <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure | | 100.00 | 100.00 | 100.00 |
| | <input type="checkbox"/> Support <input type="checkbox"/> Oppose | <input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure | | | | |
| | <input type="checkbox"/> Support <input type="checkbox"/> Oppose | <input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure | | | | |
| SUBTOTAL \$ | | | | 200.00 | | |

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

| | |
|---|--------------------------------|
| Statement covers period from <u>9/25/16</u> through <u>10/22/16</u> | CALIFORNIA FORM 460 |
| | Page <u>7</u> of <u>8</u> |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Fast Forward Silicon Valley, A Committee to Support Anthony Phan and Mark Tiernan for Milpitas City Council 2016

I.D. NUMBER

1390055

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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| Sergio Jiminez for City Council 2016 ID#1381456 5389 Cedar Grove Circle San Jose, CA 95123 | CTB | | 100.00 |
| Neighbors for Sylvia Arenas for D8 City Council ID#1381896 2902 Lyon Estates Ct. San Jose, CA 95135 | CTB | | 100.00 |
| Neighbors for Helen Chapman City Council District 6 ID#1380240 1556 Hester Ave. San Jose, CA 95126 | CTB | | 100.00 |

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

SUBTOTAL \$

Schedule E Summary

| | | |
|--|-----------------|---------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.) | \$ | 500.00 |
| 2. Unitemized payments made this period of under \$100 | \$ | 0.00 |
| 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) | \$ | 0.00 |
| 4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) | TOTAL \$ | 500.00 |

**Schedule E
(Continuation Sheet)
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

| | | |
|--|----------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 9/25/16 | |
| through | 10/22/16 | Page <u>8</u> of <u>8</u> |
| NAME OF FILER | | I.D. NUMBER |
| Fast Forward Silicon Valley, A Committee to Support Anthony Phan and Mark Tiernan for Milpitas City Council 2016 | | 1390055 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Ahmad Rafah for City Council 2016 ID#1386181 PO Box 34 Santa Clara, CA 95052 | CTB | | | 100.00 |
| Pattie Cortese for East Side Union High School District Trustee 2016 ID#1381088 10840 Ridgeway Ave. San Jose, CA 95127 | CTB | | | 100.00 |
| | | | | |
| | | | | |
| | | | | |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL \$ 200.00**

497 Contribution Report

Amounts may be rounded to whole dollars.

| | | | | |
|---|---|---|--|---|
| NAME OF FILER Fast Forward Silicon Valley, A Committee to Support Anthony | | Date of This Filing 10/24/16 | Date Stamp City Clerk's Office OCT 25 2016 | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER 408-829-4478 | ID NUMBER (if applicable) 1390055 | Report No. 1 | | |
| STREET ADDRESS 4148 Snowbank Ct. | | <input type="checkbox"/> Amendment to Report No. (explain below) No. of Pages 1 | | |
| CITY San Jose | STATE CA | ZIP CODE 95135 | | |

1. Contribution(s) Received

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED |
|---------------|---|---|--|--|
| 10/21/16 | Central Valley Construction 1807 Navy Dr. #2 Stockton, CA 95206 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 5,000.00 <input type="checkbox"/> Check if Loan Provide receipt date |
| 10/14/16 | Josh Barousse for DB San Jose City Council 2016 4148 Snowbank Ct. San Jose, CA 95135 ID# 1381514 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 2,841.15 <input type="checkbox"/> Check if Loan Provide receipt date |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | <input type="checkbox"/> Check if Loan Provide receipt date |

Reason for Amendment: _____

***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

FFPC Form 497 (Jul) 2016
 FFPC Advice: advice@ffpc.ca.gov (866) 275-3773
 www.ffpc.ca.gov

** THROUGH NOTIFICATION: FAX RECEIVED SUCCESSFULLY **
 STATUS RECEIVED
 PAGES 1
 REMOTE CSIG
 TIME RECEIVED
 Oct 24 16:09:21P
 TIME RECEIVED
 Oct 24 16:09:21P

Recipient Committee Campaign Statement Cover Page

Date Stamp
CITY CLERK'S OFFICE
 SEP 29 2016
RECEIVED

CALIFORNIA FORM 460
 Page 1 of 3
 For Official Use Only

Statement covers period
 from 9/11/16
 through 9/24/16

Date of election if applicable:
 (Month, Day, Year)
11/8/16

SEE INSTRUCTIONS ON REVERSE

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

- 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)
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report

3. Committee Information

I.D. NUMBER
1390055

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Fast Forward Silicon Valley, A Committee to Support Anthony Phan for Milpitas City Council 2016

STREET ADDRESS (NO P.O. BOX)
4148 Snowbank Ct.

| | | | |
|-----------------|-----------|--------------|---------------------|
| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
| San Jose | CA | 95135 | 408-829-4476 |

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
Joshua Barousse

MAILING ADDRESS
4148 Snowbank Ct.

| | | | |
|-----------------|-----------|--------------|---------------------|
| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
| San Jose | CA | 95135 | 408-829-4476 |

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

| | | | |
|------|-------|----------|-----------------|
| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
| | | | |

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

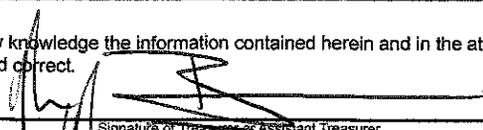
I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 9/29/16
Date

Executed on 9/29/16
Date

Executed on _____
Date

Executed on _____
Date

By 
Signature of Treasurer or Assistant Treasurer

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

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

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

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

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

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 | I.D. NUMBER |
|----------------|-------------|

| | |
|-------------------|---|
| NAME OF TREASURER | CONTROLLED COMMITTEE? <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? <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 <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 Anthony Phan | OFFICE SOUGHT OR HELD Milpitas City Council | <input checked="" type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE |
|--|---|--|

| | | |
|-----------------------------------|-----------------------|---|
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE |
|-----------------------------------|-----------------------|---|

| | | |
|-----------------------------------|-----------------------|---|
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE |
|-----------------------------------|-----------------------|---|

| | | |
|-----------------------------------|-----------------------|---|
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT <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 from <u>9/1/16</u> through <u>9/24/16</u> | CALIFORNIA FORM 460 |
| Page <u>3</u> of <u>3</u> | I.D. NUMBER 1390055 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Fast Forward Silicon Valley, A Committee to Support Anthony Phan for Milpitas City Council 2016

Contributions Received

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

**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

| | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|--|--|--|
| 6. Payments Made..... Schedule E, Line 4 | \$ 0 | \$ 0 |
| 7. Loans Made..... Schedule H, Line 3 | 0 | 0 |
| 8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7 | 0 | 0 |
| 9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3 | 0 | 0 |
| 10. Nonmonetary Adjustment..... Schedule C, Line 3 | 0 | 0 |
| 11. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10 | 0 | 0 |

**Expenditure Limit Summary for State
Candidates**

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

Current Cash Statement

| | |
|--|------|
| 12. Beginning Cash Balance..... Previous Summary Page, Line 16 | \$ 0 |
| 13. Cash Receipts..... Column A, Line 3 above | 0 |
| 14. Miscellaneous Increases to Cash..... Schedule I, Line 4 | 0 |
| 15. Cash Payments..... Column A, Line 8 above | 0 |
| 16. ENDING CASH BALANCE..... Add Lines 12 + 13 + 14, then subtract Line 15 | 0 |

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

| | |
|--|------|
| 17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2 | \$ 0 |
|--|------|

Cash Equivalents and Outstanding Debts

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