The following information was submitted by the referenced candidate for elective office.

**Office Sought:** El Cerrito City Councilmember

**Candidate’s Name:** Paul Fadelli

**Ballot Designation:** El Cerrito Councilmember

**Candidate Contact Information:**

**Mailing Address:**

**Primary Phone:** 510-210-4847

**Secondary Phone:**

**Email Address:** pfadelli@comcast.net

**Website:** fadelliforelcerrito.org

The following nomination documents are attached for public review. If a document is not included, it is an optional document that the candidate elected not to submit.

- ✔ Candidate Statement *(Optional)*
- ✔ Statement of Economic Interests (Form 700)
- ✔ Code of Fair Campaign Practices *(Optional)*
- ✔ Candidate Intention Statement (Form 501)
- ✔ Candidate Campaign Statement Short Form (Form 470) OR
- ✔ Statement of Organization (Form 410)

For questions, please contact the City Clerk at cityclerk@ci.el-cerrito.ca.us or 510-215-4305.
I am running for re-election to the El Cerrito City Council.
I grew up here. I know what this city used to be like and how far we've come.

As Mayor Pro Tem, I also know the challenges that lie ahead as we grow and change.
Our number one priority must be to make our city finances solvent. Twelve years since the 2008 recession, we must correct our financial path by balancing our budget, building our reserves and increasing our city revenues. That's why, in support of our General Fund, I helped lead efforts to pass Measure V to raise millions for our city, and was instrumental in passing Measure H to support our parks & pools.

Covid-19 and the death of George Floyd present new challenges. We must protect tenants and small landlords from eviction crises, and review and change local police policies and personnel that can harm residents. If re-elected, I will continue to expand fire prevention and response, work to reduce traffic congestion and plastic waste, enhance our local arts and businesses, and assure that future plans for a new library and changes at the Plaza BART station include adequate input from our residents.

Last year, I helped bring holiday tree lights to the Plaza and along San Pablo Avenue. Many residents told me the lights made them feel good and proud of our community. I ask for your vote so I may continue to work for El Cerrito and help keep us proud of our city.

By signing below, I confirm that I have reviewed the attached instructions and understand that no corrections or changes are allowed after the statement has been filed (pursuant to Elections Code section 13307). I also confirm and understand that Contra Costa County is mandated under the Voting Rights Act to provide voting materials and information in English, Spanish, and Chinese.

Signature: ___________________________ Date: ___________________________
1. Office, Agency, or Court

Agency Name (Do not use acronyms):
City Council
Council member

Division, Board, Department, District, if applicable

Your Position

If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: 
Position:

2. Jurisdiction of Office (Check at least one box)

- [ ] State
- [ ] Multi-County
- [x] City of El Cerrito

- [ ] Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- [ ] County of
- [ ] Other

3. Type of Statement (Check at least one box)

- [ ] Annual: The period covered is January 1, 2019, through December 31, 2019.
- [ ] The period covered is ________/_______, through December 31, 2019.

- [ ] Assuming Office: Date assumed ____/____/______

- [ ] Leaving Office: Date Left ______/____/______  (Check one circle.)
  - [ ] The period covered is January 1, 2019, through the date of leaving office.
  - [ ] The period covered is ________/_______, through the date of leaving office.

- [x] Candidate: Date of Election 11-3-20 and office sought, if different than Part 1:

4. Schedule Summary (must complete)  ► Total number of pages including this cover page: 

- [ ] Schedule A-1 - Investments - schedule attached
- [ ] Schedule A-2 - Investments - schedule attached
- [x] Schedule B - Real Property - schedule attached
- [ ] Schedule C - Income, Loans, & Business Positions - schedule attached
- [ ] Schedule D - Income - Gifts - schedule attached
- [ ] Schedule E - Income - Gifts - Travel Payments - schedule attached

- [ ] None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS: El Cerrito

Daytime Telephone Number: 

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed Aug 5, 2020

Signature (To be originally signed, paper attached in your log-official)
<table>
<thead>
<tr>
<th>NAME OF BUSINESS ENTITY</th>
<th>GENERAL DESCRIPTION OF THIS BUSINESS</th>
<th>FAIR MARKET VALUE</th>
<th>NATURE OF INVESTMENT</th>
<th>IF APPLICABLE, LIST DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>AT&amp;T</td>
<td>telecommunications</td>
<td>$10,001 - $100,000</td>
<td>Stock</td>
<td>19/19 19/19</td>
</tr>
<tr>
<td>Seachange</td>
<td>technology</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Walt Disney</td>
<td>Broadcast/Entertainment</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Comments:**
SCHEDULE B
Interests in Real Property
(Including Rental Income)

ASSessor’S PARCEL NUMBER OR STREET ADDRESS
CITY

FAIR MARKET VALUE  IF APPLICABLE, LIST DATE:
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

ACQUIRED  DISPOSED

NATURE OF INTEREST
☐ Ownership/Deed of Trust  ☐ Easement
☐ Leasehold  ☐ Other

Yrs. remaining

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ $0 - $499  ☐ $500 - $1,000  ☐ $1,001 - $10,000
☐ $10,001 - $100,000  ☐ OVER $100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.
☐ None

ASSessor’S PARCEL NUMBER OR STREET ADDRESS
CITY

FAIR MARKET VALUE  IF APPLICABLE, LIST DATE:
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

ACQUIRED  DISPOSED

NATURE OF INTEREST
☐ Ownership/Deed of Trust  ☐ Easement
☐ Leasehold  ☐ Other

Yrs. remaining

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ $0 - $499  ☐ $500 - $1,000  ☐ $1,001 - $10,000
☐ $10,001 - $100,000  ☐ OVER $100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.
☐ None

* You are not required to report loans from a commercial lending institution made in the lender’s regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender’s regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE  TERM (Month/Years)

%  ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD
☐ $500 - $1,000  ☐ $1,001 - $10,000
☐ $10,001 - $100,000  ☐ OVER $100,000

Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE  TERM (Month/Years)

%  ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD
☐ $500 - $1,000  ☐ $1,001 - $10,000
☐ $10,001 - $100,000  ☐ OVER $100,000

Guarantor, if applicable

Comments:
# SCHEDULE C
## Income, Loans, & Business Positions
(Other than Gifts and Travel Payments)

### 1. Income Received

<table>
<thead>
<tr>
<th>Name of Source of Income</th>
<th>City of El Cerrito</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Source of Income</td>
<td>City of El Cerrito</td>
</tr>
<tr>
<td>Address (Business Address Acceptable)</td>
<td>Address (Business Address Acceptable)</td>
</tr>
<tr>
<td>Business Activity, If Any, Of Source</td>
<td>Business Activity, If Any, Of Source</td>
</tr>
<tr>
<td>Your Business Position</td>
<td>City Council Member</td>
</tr>
</tbody>
</table>

#### GROSS INCOME RECEIVED
- [ ] $0 - $1,000
- [X] $1,001 - $10,000
- [X] $10,001 - $100,000
- [X] OVER $100,000

#### Consideration For Which Income Was Received
- [ ] Salary
- [ ] Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
- [ ] Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
- [ ] Sale of (Real property, car, boat, etc.)
- [ ] Loan repayment
- [ ] Commission or Rental Income, list each source of $10,000 or more
- [ ] Other (Describe)
- [ ] Pension (Describe)

### 2. Loans Received or Outstanding During the Reporting Period

* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

<table>
<thead>
<tr>
<th>Name of Lender*</th>
<th>Bank of America</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address (Business Address Acceptable)</td>
<td>P.O. Box 26249</td>
</tr>
<tr>
<td>Business Activity, If Any, Of Lender</td>
<td>Tampa, FL</td>
</tr>
<tr>
<td>Highest Balance During Reporting Period</td>
<td></td>
</tr>
<tr>
<td>$500 - $1,000</td>
<td></td>
</tr>
<tr>
<td>$1,001 - $10,000</td>
<td></td>
</tr>
<tr>
<td>$10,001 - $100,000</td>
<td></td>
</tr>
<tr>
<td>OVER $100,000</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Interest Rate</th>
<th>3.2%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Term (Months/Years)</td>
<td>30 yr</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Security For Loan</th>
<th>None</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal residence</td>
<td></td>
</tr>
<tr>
<td>Real Property</td>
<td>[Blacked Out]</td>
</tr>
<tr>
<td>Other</td>
<td>(Describe)</td>
</tr>
</tbody>
</table>

Comments: ____________________________
Pursuant to Elections Code section 20440, subscribing to the Code is voluntary.

There are basic principles of decency, honesty, and fair play which every candidate for public office in the State of California has a moral obligation to observe and uphold in order that, after vigorously contested but fairly conducted campaigns, our citizens may exercise their constitutional right to a free and untrammeled choice and the will of the people may be fully and clearly expressed on the issues.

THEREFORE:

(1) I SHALL CONDUCT my campaign openly and publicly, discussing the issues as I see them, presenting my record and policies with sincerity and frankness, and criticizing without fear or favor the record and policies of my opponents or political parties that merit this criticism.

(2) I SHALL NOT USE OR PERMIT the use of character defamation, whispering campaigns, libel, slander, or scurrilous attacks on any candidate or his or her personal or family life.

(3) I SHALL NOT USE OR PERMIT any appeal to negative prejudice based on a candidate's actual or perceived race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, marital status, age, sexual orientation, sex, including gender identity, or any other characteristic set forth in Section 12940 of the Government Code, or association with another person who has any of the actual or perceived characteristics set forth in Section 12940 of the Government Code.

(4) I SHALL NOT USE OR PERMIT any dishonest or unethical practice that tends to corrupt or undermine our American system of free elections, or that hampers or prevents the full and free expression of the will of the voters including acts intended to hinder or prevent any eligible person from registering to vote, enrolling to vote, or voting.

(5) I SHALL NOT coerce election help or campaign contributions for myself or for any other candidate from my employees.

(6) I SHALL IMMEDIATELY AND PUBLICLY REPUDIATE support deriving from any individual or group that resorts, on behalf of my candidacy or in opposition to that of my opponent, to the methods and tactics that I condemn. I shall accept responsibility to take firm action against any subordinate who violates any provision of this code or the laws governing elections.

(7) I SHALL DEFEND AND UPHOLD the right of every qualified American voter to full and equal participation in the electoral process.

I, the undersigned, candidate for election to public office in the State of California or treasurer or chairperson of a committee making any independent expenditures, hereby voluntarily endorse, subscribe to, and solemnly pledge myself to conduct my campaign in accordance with the above principles and practices.

Election Date: November 3, 2020

Candidate's Name: [Redacted] Date: July 19, 2020

Candidate Signature: [Redacted]
Candidate Intention Statement

Check One:  □ Initial  □ Amendment (Explain)  □ Update Election Year

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial)
Padelli, Paul

STREET ADDRESS

DAYTIME TELEPHONE NUMBER

FAX NUMBER (optional)

EMAIL (optional)

CITY

STATE

ZIP CODE

El Cerrito

CA

94530

OFFICE SOUGHT (POSITION TITLE)

AGENCY NAME

DISTRICT NUMBER, if applicable

NON-PARTISAN OFFICE

PARTY PREFERENCE:

□ State  (Complete Part 2.)

□ City  □ County  □ Multi-County:  (Name of Multi-County Jurisdiction)  □ PRIMARY / GENERAL  □ SPECIAL / RUNOFF

OFFICE JURISDICTION

2. State Candidate Expenditure Limit Statement:

(CalPERS and CalSTRS candidates, judges, judicial candidates, and candidates for local offices do not complete Part 2.)

☐ I accept the voluntary expenditure ceiling for the election stated above.

☐ I do not accept the voluntary expenditure ceiling for the election stated above.

Amendment:

☐ I did not exceed the expenditure ceiling in the primary or special election held on:  ____/____/____ and I accept the voluntary expenditure ceiling for the general or special run-off election.

☐ On  ____/____/____, I contributed personal funds in excess of the expenditure ceiling for the election stated above.

3. Verification:

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 12/9/19 (month, day, year)

Signature:

FPPC Form 501  [August/2018]

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

www.fppc.ca.gov
Statement of Organization
Recipient Committee

Statement Type:
- Initial
- Amendment
- Termination - See Part 5

I.D. Number:
1382065

Friends of Padelli for City Council 2020

Street Address (No P.O. Box):
El Cerrito, CA 94530

City: El Cerrito
County: Contra Costa County

FPPC Form 410 (August/2018)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
Statement of Organization
Recipient Committee

INSTRUCTIONS ON REVERSE

COMMITTEE NAME
Friends of Padelli for City Council 2020

4. Type of Committee (Continued)

General Purpose Committee: Not formed to support or oppose specific candidates or measures in a single election. Check only one box:
- CITY Committee
- COUNTY Committee
- STATE Committee

PROVIDE BRIEF DESCRIPTION OF ACTIVITY

Sponsored Committee
List additional sponsors on an attachment.

NAME OF SPONSOR

INDUSTRY GROUP OR AFFILIATION OF SPONSOR

STREET ADDRESS
NO. AND STREET
CITY
STATE
ZIP CODE
AREA CODE/PHONE

Small Contributor Committee

☐ Date qualified

5. Termination Requirements:

By signing the verification, the treasurer, assistant treasurer and/or candidate/officer/holder of proponent certify that all of the following conditions have been met:

- This committee has ceased to receive contributions and make expenditures;
- This committee does not anticipate receiving contributions or making expenditures in the future;
- This committee has eliminated or has no intention or ability to discharge all debts, loans received, and other obligations;
- This committee has no surplus funds; and
- This committee has filed all campaign statements required by the Political Reform Act disclosing all reportable transactions.

-- There are restrictions on the disposition of surplus campaign funds held by elected officers who are leaving office and by defeated candidates. Refer to Government Code Section 89519.

-- Leftover funds of ballot measure committees may be used for political, legislative or governmental purposes under Government Code Sections 89511 - 89518, and are subject to Elections Code Section 18580 and FPPC Regulation 18521.5.

FPPC Form 410 (August/2018)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
Statement of Organization
Recipient Committee

INSTRUCTIONS ON REVERSE

COMMITTEE NAME
Friends of Padelli for City Council 2020

- All committees must list the financial institution where the campaign bank account is located.

<table>
<thead>
<tr>
<th>NAME OF FINANCIAL INSTITUTION</th>
<th>AREA CODE/PHONE</th>
<th>BANK ACCOUNT NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Foundation Bank</td>
<td>(916) 203-8042</td>
<td></td>
</tr>
</tbody>
</table>

ADDRESS
1601 Response Road, Suite 190
Sacramento, CA 95815

4. Type of Committee: Complete the applicable section.

Controlled Committee

- List the name of each controlling officeholder, candidate, or state measure proponent. If candidate or officeholder controlled, also list the elective office sought or held, and district number, if any, and the year of the election.
- List the political party with which each officeholder or candidate is affiliated or check “nonpartisan.” Stating “No party preference” is acceptable.
- If this committee acts jointly with another controlled committee, list the name and identification number of the other controlled committee.

<table>
<thead>
<tr>
<th>NAME OF CANDIDATE/OFFICEHOLDER/STATE MEASURE PROponent</th>
<th>ELECTIVE OFFICE SOUGHT OR HELD (INCLUDE DISTRICT NUMBER IF APPLICABLE)</th>
<th>YEAR OF ELECTION</th>
<th>PARTY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paul Padelli</td>
<td>City Council Member: City of El Cerrito</td>
<td>2020</td>
<td>Nonpartisan X</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Partisan</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Nonpartisan</td>
<td>Partisan</td>
</tr>
</tbody>
</table>

Primarily Formed Committee
Primarily formed to support or oppose specific candidates or measures in a single election. List below:

<table>
<thead>
<tr>
<th>CANDIDATE(S) NAME OR MEASURE(S) FULL TITLE (INCLUDE BALLOT NO. OR LETTER)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CANDIDATE(S) OFFICE SOUGHT OR HELD OR MEASURE(S) JURISDICTION (INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

CHECK ONE:
- SUPPORT
- OPPOSE