

Recipient Committee
Campaign Statement
Cover Page

COVER PAGE

Date Stamp RECEIVED City Clerks Office JUL 29 2026 City of Grass Valley 125 E. Main St.	CALIFORNIA FORM 460 Page <u>1</u> of <u>9</u> For Official Use Only
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SEE INSTRUCTIONS ON REVERSE

Statement covers period from <u>1-1-2026</u> through <u>6-30-2026</u>	Date of election if applicable: (Month, Day, Year) <u>11-3-2026</u>
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1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- | | |
|--|--|
| ☐ Officeholder, Candidate Controlled Committee
☐ State Candidate Election Committee
☐ Recall
<small>(Also Complete Part 5)</small> | ☐ Primarily Formed Ballot Measure Committee
☐ Controlled
☐ Sponsored
<small>(Also Complete Part 6)</small> |
| ☐ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☐ Political Party/Central Committee | ☒ Primarily Formed Candidate/Officeholder Committee
<small>(Also Complete Part 7)</small> |

2. Type of Statement:

- | | |
|--|--|
| ☐ Preelection Statement | ☐ Quarterly Statement |
| ☒ Semi-annual Statement | ☐ Special Odd-Year Report |
| ☐ Termination Statement
(Also file a Form 410 Termination) | |
| ☐ Amendment (Explain below) | |

3. Committee Information

I.D. NUMBER
1490138

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Scott Beesley for Grass Valley City Council 2026

STREET ADDRESS (NO P.O. BOX)

[REDACTED]

CITY STATE ZIP CODE AREA CODE/PHONE

Grass Valley CA 95945

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

Jennifer Bashall

MAILING ADDRESS

[REDACTED]

CITY STATE ZIP CODE AREA CODE/PHONE

Nevada City CA 95959

NAME OF ASSISTANT TREASURER, IF ANY

Leslie Rodriguez

MAILING ADDRESS

[REDACTED]

CITY STATE ZIP CODE AREA CODE/PHONE

Grass Valley CA 95945

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 July 23, 2026

Executed on July 22, 2026

Executed on _____

Executed on _____

By _____

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

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COVER PAGE - PART 2

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Scott Beesley

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

Grass Valley City Council

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

Grass Valley CA 95945

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?

☐ YES ☐ 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?

☐ YES ☐ 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

☐ SUPPORT
☐ 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

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Scott Beesley for Grass Valley City Council 2026

Statement covers period
from 1-1-2026
through 6-30-26

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I.D. NUMBER

1490138

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions..... Schedule A, Line 3	\$ 4219.71	\$ 4219.71
2. Loans Received..... Schedule B, Line 3	0	0
3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1 + 2	\$ 4219.71	\$ 4219.71
4. Nonmonetary Contributions..... Schedule C, Line 3	0	0
5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4	\$ 4219.71	\$ 4219.71

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

6. Payments Made..... Schedule E, Line 4	\$ 915.65	\$ 915.65
7. Loans Made..... Schedule H, Line 3	0	0
8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7	\$ 915.65	\$ 915.65
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	\$ 915.65	\$ 915.65

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	4219.71
14. Miscellaneous Increases to Cash..... Schedule I, Line 4	.01
15. Cash Payments..... Column A, Line 8 above	915.65
16. ENDING CASH BALANCE..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ 3304.07

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

17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2	\$ _____
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Cash Equivalents and Outstanding Debts

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

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>1-1-26</u> through <u>6-30-26</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Scott Beesley for Grass Valley City Council 2026

I.D. NUMBER

1490138

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)
5/1/26	Aman Awan [REDACTED] Farmington Hills, MI 48331	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Advisor DFCU	200.00		200.00
4/13/26	Andrew Burton [REDACTED] Rough & Ready, CA 95975	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self Employed Full Spectrum Marketing Services	100.00		100.00
4/19/26	Brian Grace [REDACTED] Wolverine Lake, MI 48390	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Sales KPMG	100.00		100.00
5/2/26	Cleat Walters III [REDACTED] Rough & Ready, CA 95975	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self Employed Attorney	500.00		500.00
4/17/26	Clifton Brown [REDACTED] Nevada City, CA 95959	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Management Consultant ESG Capital Group LLC	100.00		100.00
SUBTOTAL \$ 1000.00						

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 3904.25
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 315.46
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 4219.71

*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 A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>1-1-26</u> through <u>6-30-26</u>	CALIFORNIA FORM 460 Page <u>5</u> of <u>9</u>
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NAME OF FILER

Scott Beesley for Grass Valley City Council 2026

I.D. NUMBER

1490138

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)
4/22/26	Melanie Dixon [REDACTED] Grass Valley, CA 95945	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self Employed Financial Coach	100		100
4/19/26	Nicholas Rassmussen [REDACTED] White Bear Lake, MN 55110	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Financial Advisor Thrivent Financial	500		500
4/17/26	Tyler Zwick [REDACTED] Grass Valley, CA 95945	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self Employed Mobile Notary	100		100
6/3/26	Keoni Allen [REDACTED] Grass Valley, CA 95945	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Building Contractor Sierra Foothills Construction	103		103
6/9/26	Caleb Darick [REDACTED] Nevada City, CA 95959	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self Employed Consultant	180.25		180.25
SUBTOTAL \$ 883.25						

*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 460 (Jan/2016))

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

www.fppc.ca.gov

Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>1-1-26</u> through <u>6-30-26</u>	CALIFORNIA FORM 460 Page <u>406</u> of <u>9</u>
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NAME OF FILER Scott Beesley for Grass Valley City Council 2026	I.D. NUMBER 1490138
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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)
4/18/26	Dan King [REDACTED] Grass Valley, CA 95945	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Consultant Clarity Roofing Consulting	100		100
4/19/26	Kimberley Stine [REDACTED] Chico, CA 95926	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Emergency Preparedness County of Nevada	100		100
4/17/26	Kona Akina [REDACTED] Grass Valley, CA 95949	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self Employed Rolfer	200		200
4/13/26	Leslie Rodriguez [REDACTED] Grass Valley, CA 95945	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Consultant California Strategies	100		100
4/19/26	Mattew Hyatt [REDACTED] Nevada City, CA 95959	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Semiconductor Specialist Omron Automation	100		100
SUBTOTAL \$ 600						

*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 A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>1-1-26</u> through <u>6-30-26</u>	CALIFORNIA FORM 460 Page <u>7</u> of <u>9</u>
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NAME OF FILER Scott Beesley for Grass Valley City Council 2026	I.D. NUMBER 1490138
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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)
6/9/26	Sarah Cory [REDACTED] Grass Valley, CA 95945	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Business Amalyst Nevada County Superintendent of Schools	103.00		103.00
6/9/26	D L Clement [REDACTED] Nevada City, CA 95959	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	257.5		257.5
6/20/26	Stephanie Meyers [REDACTED] Nevada City, CA 95959	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	257.50		257.50
6/13/26	Julie Hardin [REDACTED] Penn Valley, CA 95946	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Administrator Twin Cities Concert Assn.	103.00		103.00
4/17/26	Kurt Stephens [REDACTED] Nevada City, CA 95959	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Bicycle Consultant YouBet! Bicycle Sales and Service	100.00		100.00
SUBTOTAL \$ 821.00						

*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

Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>1-1-26</u> through <u>6-30-26</u>	CALIFORNIA FORM 460 Page <u>8</u> of <u>9</u>
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NAME OF FILER

Scott Beesley for Grass Valley City Council 2026

I.D. NUMBER

1490138

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)
5/12/26	Denise Hockley-Cann [REDACTED] Penn Valley, CA 95946	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	500.00		500.00
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
SUBTOTAL \$ 500.00						

*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

Schedule E Payments Made

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period from <u>1-1-26</u> through <u>6-30-26</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Scott Beesley for Grass Valley City Council 2026

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
Squarespace [REDACTED] New York City, 10014	OFC	Website, Payment Processing	123.25
Sierra Custom Ink [REDACTED] Grass Valley, CA 95945	CMP	T-Shirts for the Parade	593.17

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

SUBTOTAL \$ 714.42

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 714.42
2. Unitemized payments made this period of under \$100	\$ 199.23
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ 0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$ 915.65