Cover Page

Type or print in ink.


Date of election if applicable (Month, Day, Year)

1. Type of Recipient Committee
   - Officerholder Candidate Controlled Committee
   - State Candidate Election Committee
   - Recall (Also Complete Part B)
   - General/Specific Purpose Committee
   - Sponsored
   - Small Contributor Committee
   - Political Party/Central Committee

2. Type of Statement:
   - Primary Statement
   - Polling Statement
   - Recall
   - Special Quarter-Year Report
   - Special Odd-Year Report
   - Amendment (Explain below)

Believed committee had been terminated as of the 12/31/08 filing, however, form 410 had not been filed.

3. Committee Information
   - Treasurer(s)
   - Name of Treasurer
   - N/A
   - Mailing Address
   - City
   - State
   - Zip Code
   - Area Code
   - Phone

4. Verification
   - Executed on 7/13/10
   - Executed on Date
   - Executed on Date
   - Executed on Date

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.

[Signature]

Executed on 7/13/10

CITY CLERK’S OFFICE

CITY OF ATASCADERO

RECEIVED
JUL 13 2010
CALIFORNIA FORM 460

Page 1 of 3

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[Signature]
5. Officeholder or Candidate Controlled Committee

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>Jerry L. Clay Sr</th>
</tr>
</thead>
<tbody>
<tr>
<td>OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)</td>
<td>Atascadero City Council Member</td>
</tr>
<tr>
<td>RESIDENTIAL/BUSINESS ADDRESS (RD AND STREET), CITY, STATE, ZIP</td>
<td>Atascadero, CA 9342</td>
</tr>
</tbody>
</table>

6. Primarily Formed Ballot Measure Committee

<table>
<thead>
<tr>
<th>BALLOT TITLE OR LETTER</th>
<th>JURISDICTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>SUPPORT</td>
<td>OPPOSE</td>
</tr>
</tbody>
</table>

Identify the controlling officeholder candidate, or state measure proponent, if any.

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT</th>
<th>OFFICE SOUGHT OR HELD</th>
<th>DISTRICT NO IF ANY</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

7. Primarily Formed Candidate/Officeholder Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
<th>SUPPORT</th>
<th>OPPOSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
<td>SUPPORT</td>
<td>OPPOSE</td>
</tr>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
<td>SUPPORT</td>
<td>OPPOSE</td>
</tr>
</tbody>
</table>

Attach continuation sheets if necessary.
**Campaign Disclosure Statement**

**Summary Page**

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

<table>
<thead>
<tr>
<th>Statement covers period</th>
<th>from</th>
<th>through</th>
<th>Page</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1/1/2010</td>
<td>6/30/2010</td>
<td>3</td>
<td>1308914</td>
</tr>
</tbody>
</table>

**NAME OF FILER**
Committee to Re-Elect Jerry Clay Sr

<table>
<thead>
<tr>
<th>Contributions Received</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Monetary Contributions</td>
<td>Schedule A, Line 3</td>
<td>$</td>
</tr>
<tr>
<td>2 Loans Received</td>
<td>Schedule B, Line 3</td>
<td>$</td>
</tr>
<tr>
<td>3 SUBTOTAL CASH CONTRIBUTIONS</td>
<td>Add Lines 1 &amp; 2</td>
<td>$</td>
</tr>
<tr>
<td>4 Nonmonetary Contributions</td>
<td>Schedule C, Line 3</td>
<td>$</td>
</tr>
<tr>
<td>5 TOTAL CONTRIBUTIONS RECEIVED</td>
<td>Add Lines 2 + 4</td>
<td>$</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Expenditures Made</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>6 Payments Made</td>
<td>Schedule E, Line 4</td>
<td>$</td>
</tr>
<tr>
<td>7 Loans Made</td>
<td>Schedule H, Line 3</td>
<td>$</td>
</tr>
<tr>
<td>8 SUBTOTAL CASH PAYMENTS</td>
<td>Add Lines 6 + 7</td>
<td>$</td>
</tr>
<tr>
<td>9 Accrued Expenses (Unpaid Bills)</td>
<td>Schedule F, Line 3</td>
<td>$</td>
</tr>
<tr>
<td>10 Nonmonetary Adjustment</td>
<td>Schedule C, Line 3</td>
<td>$</td>
</tr>
<tr>
<td>11 TOTAL EXPENDITURES MADE</td>
<td>Add Lines 8 + 9 + 10</td>
<td>$</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Current Cash Statement</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 Beginning Cash Balance</td>
<td>Previous Summary Page, Line 16</td>
<td>$</td>
</tr>
<tr>
<td>13 Cash Receipts</td>
<td>Column A, Line 3 above</td>
<td>$</td>
</tr>
<tr>
<td>14 Miscellaneous Increases to Cash</td>
<td>Schedule I, Line 4</td>
<td>$</td>
</tr>
<tr>
<td>15 Cash Payments</td>
<td>Column A, Line 8 above</td>
<td>$</td>
</tr>
<tr>
<td>16 ENDING CASH BALANCE</td>
<td>Add Lines 12 + 13 + 14, then subtract Line 15</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>if this is a termination statement, Line 15 must be zero.</td>
<td>$</td>
</tr>
<tr>
<td>17 LOAN GUARANTEES RECEIVED</td>
<td>Schedule B, Part 2</td>
<td>$</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Cash Equivalents and Outstanding Debts</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>18 Cash Equivalents</td>
<td>See instructions on reverse</td>
<td>$</td>
</tr>
<tr>
<td>19 Outstanding Debts</td>
<td>Add Line 2 + Line 3 in Column B above</td>
<td>$</td>
</tr>
</tbody>
</table>

**Calendar Year Summary for Candidates Running in Both the State Primary and General Elections**

<table>
<thead>
<tr>
<th>Calendar Year</th>
<th>Contributions Received</th>
<th>Expenditures Made</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/1 through 6/30</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>7/1 to Date</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

**Expenditure Limit Summary for State Candidates**

<table>
<thead>
<tr>
<th>Date of Election</th>
<th>Total to Date</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>(mm/dd/yy)</td>
<td></td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

Amounts in this section may be different from amounts reported in Column B.

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).

FPPC Form 460 (January/50)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)