COVER PAGE

# Recipient Committee Campaign Statement Cover Page

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CITY OF PLACERVILLE
3101 CENTER STREET
PLACERVILLE, CA 95667

CALIFORNIA FORM **460**

Page ____ of ____

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SEE INSTRUCTIONS ON REVERSE

**Statement covers period**
from 10/2/26
through 10/17/26

**Date of election if applicable:**
(Month, Day, Year)
11/3/26

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

- [x] 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:

- [x] 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 1497838

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Evan Quirk for City Council 2026

[redacted]
STREET ADDRESS (NO P.O. BOX)

Placerville CA 95667 [redacted]
CITY STATE ZIP CODE AREA CODE/PHONE

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) Evan Quirk

NAME OF TREASURER

[redacted]
MAILING ADDRESS

Placerville CA 95667 [redacted]
CITY STATE ZIP CODE AREA CODE/PHONE

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 10/26/26 (Date) By [redacted] (Signature of Treasurer or Assistant Treasurer)

Executed on 10/26/26 (Date) By [redacted] (Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor)

Executed on ____ (Date) By ____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Executed on ____ (Date) By ____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

# Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2

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## 5. Officeholder or Candidate Controlled Committee

Evan Quirk

NAME OF OFFICEHOLDER OR CANDIDATE

City Council Member

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

[redacted] Placerville CA 95667

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? ☐ 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

Statement covers period
from 10/2/26
through 10/17/26

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Evan Quirk for City Council 2026

I.D. NUMBER
1497838

## Contributions Received

| | | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|---|---|---|---|
| 1. Monetary Contributions | Schedule A, Line 3 | $ | $ 1100 |
| 2. Loans Received | Schedule B, Line 3 | 80 | 80 |
| 3. SUBTOTAL CASH CONTRIBUTIONS | Add Lines 1 + 2 | $ 80 | $ 1180 |
| 4. Nonmonetary Contributions | Schedule C, Line 3 | | 1298.64 |
| 5. TOTAL CONTRIBUTIONS RECEIVED | Add Lines 3 + 4 | $ 80 | $ 2478.64 |

## 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 | $ N/A | $ 2478.64 |
| 21. Expenditures Made | $ N/A | $ 1223.81 |

## Expenditures Made

| | | | |
|---|---|---|---|
| 6. Payments Made | Schedule E, Line 4 | $ 213.73 | $ 1173.81 |
| 7. Loans Made | Schedule H, Line 3 | | |
| 8. SUBTOTAL CASH PAYMENTS | Add Lines 6 + 7 | $ 213.73 | $ 1173.81 |
| 9. Accrued Expenses (Unpaid Bills) | Schedule F, Line 3 | | |
| 10. Nonmonetary Adjustment | Schedule C, Line 3 | | 50 |
| 11. TOTAL EXPENDITURES MADE | Add Lines 8 + 9 + 10 | $ 213.73 | $ 1223.81 |

## 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 |
|---|---|
| 11/03/26 | $ 1223.81 |
| ____/____/____ | $ ____ |

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

## Current Cash Statement

| | | |
|---|---|---|
| 12. Beginning Cash Balance | Previous Summary Page, Line 16 | $ 139.92 |
| 13. Cash Receipts | Column A, Line 3 above | 80 |
| 14. Miscellaneous Increases to Cash | Schedule I, Line 4 | |
| 15. Cash Payments | Column A, Line 8 above | 213.73 |
| 16. **ENDING CASH BALANCE** | Add Lines 12 + 13 + 14, then subtract Line 15 | $ 6.19 |

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

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).

17. LOAN GUARANTEES RECEIVED — Schedule B, Part 2 — $ N/A

## Cash Equivalents and Outstanding Debts

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

# Schedule A
## Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Evan Quirk For City Council 2026

| 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) |
|---|---|---|---|---|---|---|
| 10/16/26 | Evan Quirk [redacted] Placerville, CA 95667 | ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Fintech Project Manager Gordon Rees Scully Mansukhani | $80.00 | $2478.64 | $2478.64 |
| | | ☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | | | | |
| | | ☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | | | | |
| | | ☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | | | | |
| | | ☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | | | | |
| | | | SUBTOTAL $ | | | |

### Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 80
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ ____
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL $ 80

*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 B – Part 1
## Loans Received

Amounts may be rounded to whole dollars.

SCHEDULE B - PART 1

Statement covers period
from 10/2/26
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NAME OF FILER
Evan Quirk for City Council 2026

I.D. NUMBER
1497838

| FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | (a) OUTSTANDING BALANCE BEGINNING THIS PERIOD | (b) AMOUNT RECEIVED THIS PERIOD | (c) AMOUNT PAID OR FORGIVEN THIS PERIOD* | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD | (e) INTEREST PAID THIS PERIOD | (f) ORIGINAL AMOUNT OF LOAN | (g) CUMULATIVE CONTRIBUTIONS TO DATE |
|---|---|---|---|---|---|---|---|---|
| Evan Quirk<br>[redacted] Placerville<br>CA 95667<br>†☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Fintech Project Manager<br>Gordon Rees Scully Mansukhani | $ 80 | $ 80 | ☑ PAID $ 0<br>☐ FORGIVEN $ | $ 80<br>10/31<br>DATE DUE | 0 %<br>RATE<br>$ 0 | $ 80<br>10/16<br>DATE INCURRED | CALENDAR YEAR $ 80<br>PER ELECTION** $ 80 |
| †☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | | $ | $ | ☐ PAID $<br>☐ FORGIVEN $ | $<br>DATE DUE | %<br>RATE<br>$ | $<br>DATE INCURRED | CALENDAR YEAR $<br>PER ELECTION** $ |
| †☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | | $ | $ | ☐ PAID $<br>☐ FORGIVEN $ | $<br>DATE DUE | %<br>RATE<br>$ | $<br>DATE INCURRED | CALENDAR YEAR $<br>PER ELECTION** $ |
| | SUBTOTALS | $ | $ | $ | $ | | | |

(Enter (e) on Schedule E, Line 3)

## Schedule B Summary

1. Loans received this period ..... $ 80
   (Total Column (b) plus unitemized loans of less than $100.)
2. Loans paid or forgiven this period ..... $ 0
   (Total Column (c) plus loans under $100 paid or forgiven.)
   (Include loans paid by a third party that are also itemized on Schedule A.)
3. Net change this period. (**Subtract** Line 2 from Line 1.) ..... NET $ 80
   Enter the net here and on the Summary Page, Column A, Line 2.

(May be a negative number)

†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

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.

# Schedule E
## Payments Made

Amounts may be rounded to whole dollars.

SCHEDULE E

Statement covers period
from 10/2/26
through 10/17/26

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Evan Quirk for City Council 2026

I.D. NUMBER
1497838

**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 |
|---|---|---|---|
| CA Secretary of State, Political Reform Division<br>1500 11th St., Room 495, Sacramento, CA 95814 | FIL | Filing Fee Form 410 | $50 |
| El Dorado Press and Blueprint<br>4100 Cameron Park Dr. Ste. 101, Cameron Park, CA 95682 | CMP | Large Stickers for Sign Configuration | $163.73 |
| | | | |

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

SUBTOTAL $ 213.73

## Schedule E Summary

| | | |
|---|---|---|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.) | $ | 213.73 |
| 2. Unitemized payments made this period of under $100 | $ | |
| 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 $ | 213.73 |

# Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from _____
through _____

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NAME OF FILER

I.D. NUMBER

**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 |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

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

**SUBTOTAL $**