Recipient Committee Campaign Statement Cover Page

COVER PAGE

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TOWN OF WINDSOR

CALIFORNIA FORM 460

Page 1 of 15

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SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 10/18/2020
through 12/31/2020

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

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:

- [ ] Preelection Statement
- [x] 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: 1425416

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Friends of Dominic Foppoli for Mayor 2020

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

CITY: Windsor | STATE: CA | ZIP CODE: 95492 | AREA CODE/PHONE: [redacted]

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
Elisa Lawson

MAILING ADDRESS
[redacted]

CITY: Santa Rosa | STATE: CA | ZIP CODE: 95401 | AREA CODE/PHONE: [redacted]

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 01/27/2021 (Date) By [redacted] (Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor)

Executed on 01/27/2021 (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

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
Dominic Foppoli

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
Mayor - Windsor, CA

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) | CITY | STATE | ZIP
[redacted] | Windsor | CA | 95492

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 10/18/2020
through 12/31/2020

CALIFORNIA FORM 460

Page 3 of 15

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Friends of Dominic Foppoli for Mayor 2020

I.D. NUMBER
1425416

Contributions Received

		Column A (TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)	Column B (CALENDAR YEAR TOTAL TO DATE)
1. Monetary Contributions	*Schedule A, Line 3*	$ 36,525.00	$ 91,342.00
2. Loans Received	*Schedule B, Line 3*	0	0
3. SUBTOTAL CASH CONTRIBUTIONS	*Add Lines 1 + 2*	$ 36,525.00	$ 91,342.00
4. Nonmonetary Contributions	*Schedule C, Line 3*	0	
5. TOTAL CONTRIBUTIONS RECEIVED	*Add Lines 3 + 4*	$ 36,525.00	$ 91,342.00

Expenditures Made

6. Payments Made	*Schedule E, Line 4*	$ 44,785.11	$ 87,805.37
7. Loans Made	*Schedule H, Line 3*	0	0
8. SUBTOTAL CASH PAYMENTS	*Add Lines 6 + 7*	$ 44,785.11	$ 87,805.37
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*	$ 44,785.11	$ 87,805.37

Current Cash Statement

12. Beginning Cash Balance	*Previous Summary Page, Line 16*	$ 33,381.53
13. Cash Receipts	*Column A, Line 3 above*	36,525.00
14. Miscellaneous Increases to Cash	*Schedule I, Line 4*	0
15. Cash Payments	*Column A, Line 8 above*	44,785.11
16. ENDING CASH BALANCE	*Add Lines 12 + 13 + 14, then subtract Line 15*	$ 25,121.42

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).

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	$	$

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
__/__/__	$
__/__/__	$

*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 10/18/2020
through 12/31/2020

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Friends of Dominic Foppoli for Mayor 2020

I.D. NUMBER
1425416

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)
10/19/2020	UA of Journeymen and Apprentices of the Plumbing and Pipe Fitting Industry - Local Union No. 38 [redacted]San Francisco, CA 94103	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		2,500	2,500	
10/21/2020	Thomas Birdsall [redacted] Santa Rosa, CA 95404	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self-Employed Black Kite Cellars	500	500	
10/21/2020	Ajaib Bhadare [redacted] Santa Rosa, CA 95403	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Founder & Chairman Billa Management LLC	500	500	
10/21/2020	Dilraj Bhadare [redacted] Mill Valley, CA 94941	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	President Billa Management LLC	500	500	
10/21/2020	Gagan Kaur Gill [redacted] Mill Valley, CA 94941	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Homemaker	500	500	
			SUBTOTAL $ 4,500			

Schedule A Summary

1. Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) ..... $ 36,500.00

2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 25.00

3. Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL $ 36,525.00

*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 10/18/2020
through 12/31/2020

CALIFORNIA FORM 460

NAME OF FILER
Friends of Dominic Foppoli for Mayor 2020

I.D. NUMBER
1425416

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)
10/21/2020	Lawrence Amaturo [redacted] Santa Rosa, CA 95404	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner Amaturo Sonoma Media Group LLC	1,000	1,000	
10/23/2020	Sprinkler Fitters & Apprentices Local 483 PAC# [redacted] [redacted] Hayward, CA 94545	☐ IND ☐ COM ☐ OTH ☑ PTY ☐ SCC		2,500	2,500	
10/23/2020	Erin Brooks [redacted] San Francisco, CA 94114	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner Grand Cru Custom Crush	500	500	
10/24/2020	Donald Green [redacted] Santa Rosa, CA 95403	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	500	500	
10/26/2020	Schellinger Brothers, LP [redacted] Santa Rosa, CA 95403	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		2,000	2,000	
			SUBTOTAL $	6,500		

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IND – Individual
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Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
from 10/18/2020
through 12/31/2020

CALIFORNIA FORM 460

NAME OF FILER
Friends of Dominic Foppoli for Mayor 2020

I.D. NUMBER
1425416

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)
10/26/2020	Operating Engineers Local Union No. 3 District 10 PAC [redacted] Alameda, CA 94502	☐ IND ☐ COM ☐ OTH ☑ PTY ☐ SCC		500	500	
10/29/2020	Cameron Middleton [redacted] Redding, CA 96001	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Realtor House of Realty, Inc.	100	100	
10/29/2020	Glenn Smith [redacted] Santa Rosa, CA 95401	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Lawyer/Partner Smith Dollar	500	500	
10/30/2020	Terry Fowler [redacted] Healdsburg, CA 95448	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Broker Fowler Associates Real Estate	200	200	
10/30/2020	Gary Plass [redacted] Healdsburg, CA 95448	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner America Liberty Investigations	150	150	
			SUBTOTAL $	1,450		

*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 10/18/2020
through 12/31/2020

CALIFORNIA FORM 460

NAME OF FILER
Friends of Dominic Foppoli for Mayor 2020

I.D. NUMBER
1425416

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)
10/31/2020	Kirk Veale [redacted] Santa Rosa, CA 95401	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner Veale Investment Properties	500	500	
10/31/2020	Amos Flint [redacted] Santa Rosa, CA 95407	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	President Flint General Engineering	1,000	1,000	
10/31/2020	William Gallaher [redacted] Windsor, CA 95492	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner Oakmont Senior Living	10,000	10,000	
10/31/2020	Cynthia Gallaher [redacted] Windsor, CA 95492	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner Oakmont Senior Living	10,000	10,000	
11/02/2020	Ben Van Zutphen [redacted] Healdsburg, CA 95448	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Developer Redwood Equities, LLC	250	250	
			SUBTOTAL $	21,750		

*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 10/18/2020
through 12/31/2020

CALIFORNIA FORM 460

NAME OF FILER
Friends of Dominic Foppoli for Mayor 2020

I.D. NUMBER
1425416

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)
11/05/2020	Sheet Metal Worker's Int'l Assn Local No. 104 PAC# [redacted] [redacted]San Ramon, CA 94583	☐ IND ☐ COM ☐ OTH ☑ PTY ☐ SCC		1,000	1,000	
11/05/2020	Curtis Michelini [redacted] Santa Rosa, CA 95407	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	President Industrial Carting	300	300	
12/04/2020	Kelly Carroll [redacted] Santa Rosa, CA 95404	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Homemaker	1,000	1,000	
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
				SUBTOTAL $ 2,300		

*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
from 10/18/2020
through 12/31/2020

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Friends of Dominic Foppoli for Mayor 2020

I.D. NUMBER
1425416

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)
10/18/2020	Melanie Bagby for Cloverdale City Council 2020 ID# [redacted] [redacted] Cloverdale, CA 95425 ☑ Support ☐ Oppose	☑ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure	Melanie Bagby Cloverdale City Council	200	200	
10/18/2020	David Hagele for City Council 2020 ID# [redacted] [redacted] Healdsburg, CA 95448 ☑ Support ☐ Oppose	☑ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure	David Hagele Healdsburg City Council	250	250	
10/26/2020	Committee to Elect Evert Fernandez ID# [redacted] [redacted] Sebastobol, CA 95472 ☑ Support ☐ Oppose	☑ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure	Evert Fernandez Sebastopol City Council	250	250	
			SUBTOTAL $	700		

Schedule D Summary

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) ..... $ 800
2. Unitemized contributions and independent expenditures made this period of under $100 ..... $ 0
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ..... TOTAL .. $ 800

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 10/18/2020
through 12/31/2020

CALIFORNIA FORM 460

NAME OF FILER
Friends of Dominic Foppoli for Mayor 2020

I.D. NUMBER
1425416

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)
10/31/2020	Re-elect Jenni Klose for Santa Rosa School Board ID# [redacted] [redacted] Santa Rosa, CA 95404 ☑ Support ☐ Oppose	☑ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure	Jenni Klose Santa Rosa School Board	100	100	
	☐ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
	☐ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
	☐ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				

SUBTOTAL $ 100

Schedule E
Payments Made

Amounts may be rounded to whole dollars.

SCHEDULE E

Statement covers period
from 10/18/2020
through 12/31/2020

CALIFORNIA FORM 460

Page 11 of 15

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Friends of Dominic Foppoli for Mayor 2020

I.D. NUMBER
1425416

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)*
CVC civic donations
FIL candidate filing/ballot fees
FND fundraising events
IND independent expenditure supporting/opposing others (explain)*
LEG legal defense
LIT campaign literature and mailings
MBR member communications
MTG meetings and appearances
OFC office expenses
PET petition circulating
PHO phone banks
POL polling and survey research
POS postage, delivery and messenger services
PRO professional services (legal, accounting)
PRT print ads
RAD radio airtime and production costs
RFD returned contributions
SAL campaign workers' salaries
TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
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
Melanie Bagby for Cloverdale City Council 2020 ID# [redacted] [redacted] Cloverdale, CA 95425	CTB		200.00
David Hagele for City Council 2020 ID# [redacted] [redacted] Healdsburg, CA 95448	CTB		250.00
Sonoma Media Investments LLC [redacted] Santa Rosa, CA 95401	WEB	Advertising - Mobile & Desktop	500.00

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

SUBTOTAL $ 950.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 43,866.12
2. Unitemized payments made this period of under $100 ..... $ 918.99
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 $ 44,785.11

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from 10/18/2020 through 12/31/2020

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Dominic Foppoli for Mayor 2020

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1425416

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)*
CVC civic donations
FIL candidate filing/ballot fees
FND fundraising events
IND independent expenditure supporting/opposing others (explain)*
LEG legal defense
LIT campaign literature and mailings
MBR member communications
MTG meetings and appearances
OFC office expenses
PET petition circulating
PHO phone banks
POL polling and survey research
POS postage, delivery and messenger services
PRO professional services (legal, accounting)
PRT print ads
RAD radio airtime and production costs
RFD returned contributions
SAL campaign workers' salaries
TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
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
Walmart [redacted] Windsor, CA 95492	CMP	Campaign supplies	278.26
Ad-Vantage Marketing Inc. [redacted] Santa Rosa, CA 95401	LIT		6,493.16
Printmarket Solutions [redacted] Santa Rosa, CA 95409	LIT		10,722.55
El Gallo Negro [redacted] Windsor, CA 95492	FND, TRC		887.18
Facebook Ads [redacted] Menlo Park, CA 94025	WEB		214.06

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

SUBTOTAL $ 18,595.21

Schedule E
(Continuation Sheet)
Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 10/18/2020
through 12/31/2020

CALIFORNIA FORM 460

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NAME OF FILER
Friends of Dominic Foppoli for Mayor 2020

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CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)*
CVC civic donations
FIL candidate filing/ballot fees
FND fundraising events
IND independent expenditure supporting/opposing others (explain)*
LEG legal defense
LIT campaign literature and mailings
MBR member communications
MTG meetings and appearances
OFC office expenses
PET petition circulating
PHO phone banks
POL polling and survey research
POS postage, delivery and messenger services
PRO professional services (legal, accounting)
PRT print ads
RAD radio airtime and production costs
RFD returned contributions
SAL campaign workers' salaries
TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
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
SC Graphic Design [redacted] Santa Rosa, CA 95404	LIT, WEB	Graphic Design for all campaign literature and mailings	2,922.57
Committee to Elect Evert Fernandez ID# [redacted] Sebastobol, CA 95472	CTB		250.00
Re-elect Jenni Klose for Santa Rosa School Board ID# [redacted] Santa Rosa, CA 95404	CTB		100.00
Muelrath Public Affairs, Inc [redacted] Santa Rosa, CA 95404	PRO, WEB		1,032.29
Amy Holter [redacted] Petaluma, CA 94952	CMP, TRC, TRS	Reimbursements for expenditures on campaign supplies and meals	1,051.05

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

SUBTOTAL $ 5,355.91

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 10/18/2020
through 12/31/2020

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Friends of Dominic Foppoli for Mayor 2020

I.D. NUMBER
1425416

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)*
CVC civic donations
FIL candidate filing/ballot fees
FND fundraising events
IND independent expenditure supporting/opposing others (explain)*
LEG legal defense
LIT campaign literature and mailings
MBR member communications
MTG meetings and appearances
OFC office expenses
PET petition circulating
PHO phone banks
POL polling and survey research
POS postage, delivery and messenger services
PRO professional services (legal, accounting)
PRT print ads
RAD radio airtime and production costs
RFD returned contributions
SAL campaign workers' salaries
TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
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
Nick Patrick [redacted] Santa Rosa, CA 95407		Campaign Aid - putting up signs, distributing literature	900.00
Reese Martin [redacted] Santa Rosa, CA 95405		Campaign Aid - putting up signs, distributing literature	900.00
Robert (Bobby) Navarro [redacted] Santa Rosa, CA 95405		Campaign Aid - putting up signs, distributing literature	455.00
Elisa Lawson [redacted] Santa Rosa, CA 95401	PRO	2020 Professional Services	6,075.00
Active 20-30 Santa Rosa #50 [redacted] Santa Rosa, CA 95402	CVC		735.00

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

SUBTOTAL $ 9,065.00

Schedule E
(Continuation Sheet)
Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 10/18/2020
through 12/31/2020

CALIFORNIA FORM 460

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NAME OF FILER
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I.D. NUMBER
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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Gary Schmalzriedt [redacted] Healdsburg, CA 95448		Storage Fees - 2 yrs for storage of campaign material	1,500.00
Sonoma Media Group [redacted] Santa Rosa, CA 95405	RAD		8,400.00

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

SUBTOTAL $ 9,900.00