COVER PAGE

Recipient Committee Campaign Statement Cover Page

Statement covers period	Date of Election if applicable	RECEIVED	CALIFORNIA FORM 460
from 01/01/2021		AUG 02 2021	Page 1 of 15
through 06/30/2021	(Month, Day, Year)	TOWN OF WINDSOR	For Official Use Only

1. Type of Recipient Committee

- ☐ Officeholder, Candidate Controlled Committee
  - ○ State Candidate Election Committee
  - ○ Recall
- ☐ General Purpose Committee
  - ○ Sponsored
  - ○ Small Contributor Committee
  - ○ Political Party/Central Committee
- ☐ Primarily Formed Ballot Measure Committee
  - ○ Controlled
  - ○ Sponsored
- ■ Primarily Formed Candidate/ Officeholder Committee

2. Type of Statement

- ☐ Pre-election Statement
- ■ Semi-Annual Statement
- ☐ Termination Statement
- ☐ Amendment
- ☐ Quarterly Statement
- ☐ Special Odd-Year Statement
- ☐ Supplemental Pre-election Statement - Attach Form 495

3. Committee Information

I.D. Number 1437782

COMMITTTEE NAME
United Residents For Recalling Foppoli

STREET ADDRESS (NO PO BOX)
[redacted]

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

MAILING ADDRESS (IF DIFFERENT)

CITY | STATE | ZIP CODE

OPTIONAL: FAX / E-MAIL ADDRESS [redacted]

Treasurer(s)

NAME OF TREASURER
Alan Ramey

STREET ADDRESS
[redacted]

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

NAME OF ASSISTANT TREASURER, IF ANY

STREET 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 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 8/1/21 By [redacted] OF TREASURER OR ASSISTANT TREASURER

Executed on 7/30/21 By [redacted] NDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

Executed on 7/30/21 By [redacted] OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on _____ By _____

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Recipient Committee Campaign Statement Cover Page - Part 2

COVER PAGE - PART 2

CALIFORNIA FORM **460**

Statement covers period
from 01/01/2021
through 06/30/2021

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

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

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 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 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 OR 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	
Dominic Foppoli	Mayor Town of Windsor	☐ 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

Campaign Disclosure Statement
Summary Page

Statement covers period
from 01/01/2021
through 06/30/2021

CALIFORNIA FORM **460**

NAME OF FILER United Residents For Recalling Foppoli

I.D. NUMBER 1437782

Contributions Received

		Column A (TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)	Column B (CALENDAR YEAR TOTAL TO DATE)
1.	Monetary Contributions ... *Schedule A, Line 3*	$ 21,041.00	$ 21,041.00
2.	Loans Received ... *Schedule B, Line 3*	0.00	0.00
3.	SUBTOTAL CASH CONTRIBUTIONS ... *Add Lines 1+ 2*	$ 21,041.00	$ 21,041.00
4.	Nonmonetary Contributions ... *Schedule C, Line 3*	316.06	316.06
5.	TOTAL CONTRIBUTIONS RECEIVED ... *Add Lines 3 + 4*	$ 21,357.06	$ 21,357.06

Expenditures Made

6.	Payments Made ... *Schedule E, Line 4*	$ 11,093.38	$ 11,093.38
7.	Loans Made ... *Schedule H, Line 3*	0.00	0.00
8.	SUBTOTAL CASH PAYMENTS ... *Add Lines 6 + 7*	$ 11,093.38	$ 11,093.38
9.	Accrued Expenses (Unpaid Bills) ... *Schedule F, Line 3*	0.00	0.00
10.	Nonmonetary Adjustment ... *Schedule C, Line 3*	316.06	316.06
11.	TOTAL EXPENDITURES MADE ... *Add Lines 8 + 9 + 10*	$ 11,409.44	$ 11,409.44

Current Cash Statement

12.	Beginning Cash Balance ... *Previous Summary Page, Line 16*	$ 0.00
13.	Cash Receipts ... *Column A, Line 3 above*	21,041.00
14.	Miscellaneous Increases to Cash ... *Schedule I, Line 4*	0.00
15.	Cash Payments ... *Column A, Line 8 above*	11,093.38
16.	**ENDING CASH BALANCE** *Add Lines 12 + 13 + 14, then subtract Line 15*	$ 9,947.62
17.	LOAN GUARANTEES RECEIVED ... *Schedule B, Part 2*	$ 0.00

Cash Equivalents and Outstanding Debts

18.	Cash Equivalents ...	$ 0.00
19.	Outstanding Debts ... *Add Lines 2 + Line 9 in Column B above*	$ 0.00

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 Limits)

_____ $_____

_____ $_____

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

Schedule A
Monetary Contributions Received

Statement covers period
from 01/01/2021
through 06/30/2021

CALIFORNIA FORM 460

NAME OF FILER United Residents For Recalling Foppoli

I.D. NUMBER 1437782

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF 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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/20/2021	Catherine Adams [redacted] Windsor, CA 95492	IND	Retired N.A.	100.00	100.00	
05/20/2021	Wayne Adams [redacted] Windsor, CA 95492	IND	Retired N.A.	100.00	100.00	
04/19/2021	Bethany Browning [redacted] Windsor, CA 95492	IND	Writer BethanyBrowning.com	200.00	200.00	
05/17/2021	Gary Clark [redacted] Santa Barbara, CA 93190	IND	Director/Collaboration Social Impact Santa Barbara Foundation	50.00	50.00	

SUBTOTAL $ 450.00

Schedule A Summary

1. Amount received this period - itemized contributions (Includes all Schedule A subtotals) . . . . . $ 20,701.00
2. Amount received this period - unitemized . . . . . $ 340.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page. Column A Line 1) . . . . . **TOTAL $** 21,041.00

** Contributor Codes
IND - Individual
COM - Recipient Committee (other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

SCHEDULE A

Schedule A (Continuation Sheet)
Monetary Contributions Received

Statement covers period
from 01/01/2021
through 06/30/2021

CALIFORNIA FORM 460

NAME OF FILER United Residents For Recalling Foppoli

I.D. NUMBER 1437782

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/14/2021	Tony Crabb [redacted] Healdsburg, CA 95448	IND	Retired N.A.	1,000.00	1,000.00	
05/20/2021	Donna DeRosa [redacted] Windsor, CA 95492	IND	Vice President-Marketing AccountMate Software Corp.	50.00	50.00	
05/15/2021	Lisa Eastman [redacted] Windsor, CA 95492	IND	Retired N.A.	50.00	50.00	
05/12/2021	Julene English [redacted] Fairfax, CA 94930	IND	Retired N.A.	50.00	50.00	
			SUBTOTAL $	1,150.00		

** Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

SCHEDULE A

Schedule A (Continuation Sheet)
Monetary Contributions Received

Statement covers period	CALIFORNIA FORM 460
from 01/01/2021	Page 6 of 15
through 06/30/2021	

NAME OF FILER United Residents For Recalling Foppoli

I.D. NUMBER 1437782

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/20/2021	Ever Flores [redacted] Santa Rosa, CA 95404	IND	School Counselor Healdsburg Unified School Dist	250.00	250.00	
05/13/2021	Barbara Grasseschi [redacted] Healdsburg, CA 95448	IND	Farmer Puma Springs Vineyards	1,000.00	1,000.00	
05/21/2021	Kristen Greenberg [redacted] Windsor, CA 95492	IND	Manager Papapietro Perry Winery	100.00	100.00	
05/11/2021	Brad Hall [redacted] Windsor, CA 95492	IND	Retired N.A.	50.00	50.00	
			SUBTOTAL $	1,400.00		

** Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

SCHEDULE A

Schedule A (Continuation Sheet)
Monetary Contributions Received

Statement covers period
from 01/01/2021
through 06/30/2021

CALIFORNIA FORM 460

NAME OF FILER United Residents For Recalling Foppoli

I.D. NUMBER 1437782

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/20/2021	Jennifer Hamelburg [redacted] Windsor, CA 95492	IND	Marriage & Family Therapist Self-empl no sep business name	50.00	50.00	
05/19/2021	Amy Hoover [redacted] Windsor, CA 95492	IND	Retired N.A.	50.00	50.00	
04/30/2021	Friends of Rachel Hundley for Sonoma City Council 2018 [redacted] Sonoma, CA 95476	COM	ID No. 1437782	5,000.00	5,000.00	
05/11/2021	Kara Jacobs [redacted] Windsor, CA 95492	IND	Retired N.A.	50.00	50.00	
			SUBTOTAL $	5,150.00		

** Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

SCHEDULE A

Schedule A (Continuation Sheet)
Monetary Contributions Received

Statement covers period
from 01/01/2021
through 06/30/2021

CALIFORNIA FORM 460

NAME OF FILER United Residents For Recalling Foppoli

I.D. NUMBER 1437782

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
04/20/2021	Stephen Lehmann [redacted] Windsor, CA 95492	IND	Retired N.A.	100.00	100.00	
05/20/2021	Eric Leland [redacted] Petaluma, CA 94952	IND	Technology FivePaths LLC	100.00	100.00	
05/11/2021	Larry Leonard [redacted] Sonoma, CA 95476	IND	Retired N.A.	50.00	50.00	
05/20/2021	Nena Meola [redacted] Windsor, CA 95492	IND	Real Estate Sales Nena Meola Realtor	50.00	50.00	
			SUBTOTAL $	300.00		

** Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

SCHEDULE A

Schedule A (Continuation Sheet)
Monetary Contributions Received

Statement covers period
from 01/01/2021
through 06/30/2021

CALIFORNIA FORM 460

NAME OF FILER United Residents For Recalling Foppoli

I.D. NUMBER 1437782

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/20/2021	Randy Mora [redacted] Healdsburg, CA 95448	IND	Business Owner Windsor Gymnastics Center	100.00	100.00	
04/22/2021	North Bay Labor Council Committee on Political Education [redacted] Santa Rosa, CA 95403	COM	ID No. 744444	10,000.00	10,000.00	
05/14/2021	Anita Patrone [redacted] Windsor, CA 95492	IND	Registered Nurse Sutter Health	100.00	100.00	
04/22/2021	Willow Ramsey [redacted] Cotati, CA 94931	IND	Cosmetologist Hue Salon	1,000.00	1,000.00	

SUBTOTAL $ 11,200.00

** Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

SCHEDULE A

Schedule A (Continuation Sheet)
Monetary Contributions Received

Statement covers period	CALIFORNIA FORM 460
from 01/01/2021	Page 10 of 15
through 06/30/2021	

NAME OF FILER United Residents For Recalling Foppoli

I.D. NUMBER 1437782

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
04/23/2021	Barbara Reitz [redacted] Mill Valley, CA 94941	IND	Chiropractor Align Chiropractic	100.00	100.00	
04/17/2021	Dennis Rutkowski [redacted] Windsor, CA 95492	IND	Firefighter Sonoma County Fire Dept	50.00	50.00	
05/20/2021	Catherine Shanahan [redacted] Windsor, CA 95492	IND	Retired N.A.	250.00	250.00	
05/14/2021	Victoria Shreiner [redacted] Windsor, CA 95492	IND	Technical Trainer F5 Networks	100.00	100.00	
			SUBTOTAL $	500.00		

** Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

SCHEDULE A

Schedule A (Continuation Sheet)
Monetary Contributions Received

Statement covers period
from 01/01/2021
through 06/30/2021

CALIFORNIA FORM 460

NAME OF FILER United Residents For Recalling Foppoli

I.D. NUMBER 1437782

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/06/2021	Sonoma County Democratic Party [redacted] Sacramento, CA 95841	COM	ID No. 742474	200.00	200.00	
04/17/2021	Diana Thomawong [redacted] Windsor, CA 95492	IND	Restauranteur Tomi Thai	100.00	100.00	
05/12/2021	Kristin Treiber [redacted] Petaluma, CA 94954	IND	Freelance writer Self-empl no sep business name	100.00	100.00	
05/21/2021	Lisa Zahner [redacted] San Francisco, CA 94117	IND	Real Estate Polaris Realty	100.00	100.00	
			SUBTOTAL $	500.00		

** Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

SCHEDULE A

Schedule A (Continuation Sheet)
Monetary Contributions Received

Statement covers period	CALIFORNIA FORM 460
from 01/01/2021	
through 06/30/2021	Page 12 of 15

NAME OF FILER United Residents For Recalling Foppoli

I.D. NUMBER 1437782

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
04/30/2021	Tim Zahner [redacted] Windsor, CA 95492	IND	Hospitality Marketing Sonoma Valley Visitors Bureau	1.00	367.06	
05/10/2021	Tim Zahner [redacted] Windsor, CA 95492	IND	Hospitality Marketing Sonoma Valley Visitors Bureau	50.00	367.06	

SUBTOTAL $ 51.00

** Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

Schedule C
Nonmonetary Contributions Received

Statement covers period
from 01/01/2021
through 06/30/2021

CALIFORNIA FORM 460

NAME OF FILER United Residents For Recalling Foppoli

I.D. NUMBER 1437782

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF OF CONTRIBUTOR	CONTRIBUTOR CODE	OCCUPATION & EMPLOYER OR COMMITTEE ID NO.	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/03/2021	Tim Zahner [redacted] Windsor, CA 95492	IND	Hospitality Marketing Sonoma Valley Visitors Bureau	Postage and mailbox service	203.09	367.06	
06/21/2021	Tim Zahner [redacted] Windsor, CA 95492	IND	Hospitality Marketing Sonoma Valley Visitors Bureau	Email and Web hosting	112.97	367.06	

SUBTOTAL $ 316.06

Schedule C Summary

1. Amount received this period - itemized contributions (Includes all Schedule C subtotals) . . . . . $ 316.06
2. Amount received this period - unitemized . . . . . $ 0.00
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page. Column A Lines 4 and 10.) . . . . . **TOTAL $** 316.06

** Contributor Codes
IND - Individual
COM - Recipient Committee (other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule E
Payments Made

Statement covers period	CALIFORNIA FORM 460
from 01/01/2021	
through 06/30/2021	Page 14 of 15

NAME OF FILER United Residents For Recalling Foppoli

I.D. NUMBER 1437782

CODES: If one of the following 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 production costs
FIL	candidate filing / ballot fees	PHO	phone banks	TRC	candidate travel, lodging and meals
FND	fundraising expenses	POL	polling and survey research	TRS	staff/spouse travel, lodging and meals
IND	independent expenditures supporting/opposing others	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	CODE or DESCRIPTION OF PAYMENT		AMOUNTPAID
Brandmetix [redacted] Huntington Beach, CA 92646	CMP		1,550.99
California Secretary of State - Political Reform Division [redacted] Sacramento, CA 95814	FIL		50.00
Mark William Malouf [redacted] Sonoma, CA 95476	PRO		800.00

SUBTOTAL $ 2,400.99

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	$	11,093.38
2. Unitemized payments made this period of under $100	$	0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	$	0.00
4. Total payments made this period. (Add Line 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) **TOTAL**	$	11,093.38

Schedule E (Continuation Sheet)
Payments Made

SCHEDULE E

Statement covers period
from 01/01/2021
through 06/30/2021

CALIFORNIA FORM **460**

NAME OF FILER United Residents For Recalling Foppoli

I.D. NUMBER 1437782

CODES: If one of the following 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 expenses
IND independent expenditures supporting/opposing others
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 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	CODE or DESCRIPTION OF PAYMENT		AMOUNTPAID
Dennis Rosatti [redacted] Sebastopol, CA 95472	CNS		3,340.00
Sonoma Media Investments LLC [redacted] Santa Rosa, CA 95401	PRT		343.00
Stripe [redacted] San Francisco, CA 94103	OFC		147.57
Sutton Law Firm [redacted] San Francisco, CA 94108	PRO		4,861.82

SUBTOTAL $ 8,692.39