D16-1	2					COVER PAGE
Recipient Committe Campaign Statemer Cover Page Government Code Sections 84	nt			Date Stamp	CA	FORM 460
SEE INSTRUCTIONS ON REVERSE		Statement covers period from01/01/2022 through06/30/2022	Date of election if applicable: (Month, Day, Year)	den en en	Pag	For Official Use Only
Type of Recipient Co	mmittee: All Committees -	Complete Parts 1 2 3 and 4	2. Type of Statement:	THU -	- 25	0
	Controlled Committee tion Committee ittee mmittee		Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Term Amendment (Explain belo	mination)	Supplemen	statement d-Year Report stal Preelection - Attach Form 495
3. Committee Information	on	I.D. NUMBER 1445104	Treasurer(s)			
SANFORD FOR CITY COU			NAME OF TREASURER Cine D. Ivery MAILING ADDRESS CITY Inglewood	STATE CA	ZIP CODE 90301	AREA CODE/PHONE
CITY	STATE ZIP	CODE AREA CODE/PHONE	NAME OF ASSISTANT TREASURE		30301	
Inglewood MAILING ADDRESS (IF DIFFER	CA 90 RENT) NO. AND STREET OR P.O	0301 D. BOX	Michelle Moore Sanders MAILING ADDRESS			
CITY	STATE ZIP	CODE AREA CODE/PHONE	CITY Inglewood	STATE CA	ZIP CODE 90301	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADD	DRESS		OPTIONAL: FAX / E-MAIL ADDRES	SS		
4. Verification I have used all reasonable dil under penalty of perjury unde	ligence in preparing and reviever the laws of the State of Califo	ving this statement and to the best of my ke ornia that the foregoing is tru	nowledge the information contained bessi	the attached s	chedules is t	rue and complete. I certify
Executed on0	7/18/2022 Date	Ву				
Executed on0	7/18/2022 Date	Ву		ponsible Officer of S	ponsor	
Executed on	Date	Ву	Signature of Controlling Officeholder, Candidate, State	e Measure Proponent		
Executed on	Date	Ву	Signature of Controlling Officeholder, Candidate, State	e Measure Proponent		FPPC Form 460 (Jan/2016)

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

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2							
CALIF FC	FORNIA DRM	4	l 60				
Page	2	of	28				

NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BAL	LOT MEASURE			
Donnisha Sanford						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIS	STRICT NUMBER IF APPLICABLE)	BALLOT NO. (OR LETTER	JURISDICTION		SUPPORT
City Council Member						OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP Inglewood CA 90301	Identify the	controlling office	eholder, candi	idate, or state meas	ure proponent, if an
	Inglewood CA 90301	NAME OF OF	FICEHOLDER, CANDI	IDATE, OR PROP	ONENT	
Related Committees Not Included in this not included in this statement that are controlled by contributions or make expenditures on behalf of you	you or are primarily formed to receive	OFFICE SOU	GHT OR HELD	·	DISTRICT	NO. IF ANY
COMMITTEE NAME	I.D. NUMBER					<u> </u>
		7 Primarily	Formed Candi	date/Officeh	older Committee	1 liet names of
NAME OF TREASURER	CONTROLLED COMMITTEE?				nolder Committee	
	YES NO	officeholder(for which this c		formed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.	YES NO	officeholder((s) or candidate(s) t	NDIDATE	ommittee is primarily	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.	O. BOX)	NAME OF OF	(s) or candidate(s) f	NDIDATE C	OFFICE SOUGHT OR HE	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.	O. BOX) ZIP CODE AREA CODE/PHONE	NAME OF OF	(s) or candidate(s) t	NDIDATE C	ommittee is primarily DFFICE SOUGHT OR HE	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P. CITY STATE Z COMMITTEE NAME	O. BOX) ZIP CODE AREA CODE/PHONE	NAME OF OFI	(s) or candidate(s) f	NDIDATE C	OFFICE SOUGHT OR HE	FORMED. SUPPORT OPPOSE SLD SUPPORT OPPOSE SLD SUPPORT OPPOSE SLD SUPPORT
	O. BOX) ZIP CODE AREA CODE/PHONE I.D. NUMBER CONTROLLED COMMITTEE? YES NO	NAME OF OFI	(s) or candidate(s) f FICEHOLDER OR CAI FICEHOLDER OR CAI	NDIDATE C	OFFICE SOUGHT OR HE	SUPPORT OPPOSE SLD SUPPORT OPPOSE SLD SUPPORT OPPOSE

Campaign Disclosure Statement

SUMMARY PAGE

____ \$ _____

Total to Date

Summary Page	Amounts may be round to whole dollars.	ded	State	ment covers period	FORM			
SEE INSTRUCTIONS ON REVERSE				through .	06/30/2022	Page3	of28	
NAME OF FILER						I.D. NUMBER	₹	
SANFORD FOR CITY COUNCIL 2022						1445104		
Contributions Received		COLUMN A TOTAL THIS PERIOD (FROMATTACHED SCHEDULES)	Colum CALENDAR TOTAL TO	YEAR	Calendar Year S Running in Both General Election	h the State Prir		
1. Monetary Contributionss	Schedule A, Line 3	\$ 8,878.54	\$8	3,878.54			7/4 to Doto	
2. Loans Receiveds	Schedule B, Line 3	27,450.00	27	,450.00		1/1 through 6/30	7/1 to Date	
C. CURTOTAL CACUCONTRIBUTIONS		36 328 54	• 36	328 54	20. Contributions			

2,000.00

0.00

0.00

5.	TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 38,328.54	\$ 38,328.54
E	xpenditures Made		
6.	Payments Made Schedule E, Line 4	\$ 23,322.38	\$ 23,322.38
7.	Loans Made	0.00	0.00
8.	SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 23,322.38	\$ 23,322.38
9.	Accrued Expenses (Unpaid Bills)	5,628.28	5,628.28
10	. Nonmonetary Adjustment	2,000.00	2,000.00
11.	. TOTAL EXPENDITURES MADE	\$ 30,950.66	\$ 30,950.66

Expenditure Limit Summary for State Candidates

Received

21. Expenditures

Date of Election

Made

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)

(mm/dd/yy)	
	\$

12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 0.00
13. Cash Receipts Column A, Line 3 above	36,328.54
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00
15. Cash Payments	23,322.38
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 13,006.16
If this is a termination statement, Line 16 must be zero.	

17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ _

19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ ___

18. Cash Equivalents See instructions on reverse \$ _____

Cash Equivalents and Outstanding Debts

3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ ____

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).

To calculate Column B, add

36,328.54

2,000.00

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

> FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

Current Cash Statement

SEE INSTRUCTIONS ON REVERSE THOUGH _66/30/2922 Page 4 of _20 WARE OF FIER ENTRODO FOR CITY COUNCIL 2022 THOUGH _66/30/2922 LID. NUMBER AND THE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CODE ** RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF	Schedule A Monetary Contributions Received			ts may be rounded whole dollars.	Statement cov	ers period		-EDULE
AME OF FILE. SANFORD FOR CITY COUNCIL 2022 AND FOR CITY COUNCIL 2022 FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR PROCEEDINGS IN AND EMPLOYER PROCEDURED IN AND	•				from01/01/2	022		ŀOU
SAMPORD FOR CITY COUNCIL 2022 Date FULL NAME. STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE * FAM INDIVIDUAL STREET COMMUTEE, AUSO-BHIRLO, NAMES) PERIOD PERIOD		ONS ON REVERSE			through06/30/2	022		28
DATE RECEIVED FULL NAME. STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE * PARTICIPATION OF CODE * PARTICIPATION OF CODE OF CONTRIBUTOR OF CODE OF COD								
OCCUPATION AND EMPLOYER PERIOD AND EMPLOYER PERIOD CODE = COLLING AND EMPLOYER	SANFORD FOR	CITY COUNCIL 2022			1		1445104	
Rawthorne, CA 90250 Common				OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME	RECEIVED THIS	CALENDAR YEA	AR TO DAT	Έ
Hawthorne, CA 90250 COM	02/16/2022		□COM □OTH □PTY	Centinela Valley Union	Received through inter eFundraising Connectio 2831 G Street #120	mediary:)3.94	
Com	02/27/2022		□COM □OTH □PTY		Received through inter eFundraising Connectio 2831 G Street #120	mediary:	00.00	
Intern COM COM District Received through intermediary; edundarial received generations Received through intermediary; edundarial received generations Received through intermediary; edundarial received generations Received through intermediary; Re	03/02/2022		□COM □OTH □PTY	Self Employed - No	Received through inter eFundraising Connectio 2831 G Street #120	mediary:)3.94	
Santa Monica, CA 90405 COM	03/02/2022		□COM □OTH □PTY	Intern Perris Elementary School	Received through inter eFundraising Connectio 2831 G Street #120	mediary:)4.24	
*Contributor Codes I. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.)	03/04/2022		□COM □OTH □PTY		Received through inter eFundraising Connectio 2831 G Street #120	mediary:)7.56	
1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.)				SUBTOTAL	\$ 967.56		policy in several	
2. Amount received this period – uniternized monetary contributions of less than \$100	1. Amount re	eceived this period – itemized monetary contributions.		\$	7,368.00	IND-I	ndividual -Recipient Committee	CC)
/Add Lines 1 and 2 Enter here and an the Commons Dags Colores A Line 1 \ TOTAL 6 0 070 E/	3. Total mone	etary contributions received this period.		•	1,510.54 8,878.54	PTY-	Other (e.g., business Political Party	entity)

Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may to whole		Statement covers period from01/01/2022		CALIFORNIA 460		
				through 06/30/	2022	Page _	5 of 28	
NAME OF FILER						I.D. NU	MBER	
SANFORD FOR	CITY COUNCIL 2022	`				14451)4	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
03/08/2022	Gardena, CA 90249	□IND □COM 図OTH □PTY □SCC		125.00 Received through intererundraising Connection 2831 G Street #120 Sacramento, CA 95816	rmediary:	25.00		
03/12/2022	Jennifer Williams Los Angeles, CA 90047	⊠IND □COM □OTH □PTY □SCC	Certified Public Accountant City of Los Angeles	100.00 Received through inte ePundraising Connection 2831 G Street #120 Sacramento, CA 95816	mediary:	00.00		
03/15/2022	December Bolden Inglewood, CA 90303	XIND ☐COM ☐OTH ☐PTY ☐SCC	Not Employed None	103.94 Received through interepundraising Connectio 2831 G Street #120 Sacramento, CA 95816	mediary:	33.78		
03/15/2022	Albert Brady Los Angeles, CA 90056	⊠IND □COM □OTH □PTY □SCC	Retired None	108.02 Received through interefundraising Connection 2831 G Street #120 Sacramento, CA 95816	mediarv:	08.02		
03/19/2022	Christina Williams Riverside, CA 92503		School Social Worker Intern Perris Elementary School District	52.12 Received through interefundralsing Connectic 2831 G Street #120 Sacramento, CA 95816		04.24		
			SUBTOTAL	489.08				

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

		SCHEDULE A (CONT.)
v be rounded	Statement covers period	

Monetary	Contributions Received	Amounts may to whole o		from01/01/	1/01/2022 CALIFOR FORM 6/30/2022 Page 6			460
				through 06/30/	2022	Page_		28
NAME OF FILER					,	I.D. NU	MBER	
SANFORD FOR	CITY COUNCIL 2022			-,		14451	04	
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 CALENDAR Y (JAN. 1 - DEC	'EAR	то	LECTION DATE QUIRED)
03/22/2022	Los Angeles, CA 90036		Education and Community Development Aja Wellness	200.00 Received through interefundralsing Connection 2831 G Street #120 Sacramento, CA 95816	rmediary:	200.00		
03/28/2022	Donnisha Sanford Hawthorne, CA 90250	⊠IND □COM □OTH □PTY □SCC	Teacher Centinela Valley Union High School District	100.00 Received through inte ePundraising Connection 2831 G Street #120 Sacramento, CA 95816	rmediary:	50.00		
03/28/2022	Carla Thomas Inglewood, CA 90305	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Dentist The Smile Studio	250.00	2	50.00		
03/29/2022	December Bolden Inglewood, CA 90303		Not Employed None	129.84 Received through intererundralsing Connectio 2831 G Street #120 Sacramento, CA 95816		33.78		
04/07/2022	Kirsten Albrecht Los Angeles, CA 90019	⊠IND □COM □OTH □PTY □SCC	Attorney Self Employed - No Separate Business Name	103.94 Received through inter ePundraising Connection 2831 G Street #120 Sacramento, CA 95816	rmediary:	.03.94		a
			SUBTOTALS	\$ 783.78				

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

PTY - Political Party

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA 4 6

Statement covers period

,		to whole (dollars.	from01/01/ through06/30/			7_ of28
NAME OF FILER						I.D. NUM	BER
SANFORD FOR	CITY COUNCIL 2022					144510	4
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 CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
04/09/2022	Brittney Parkinson Los Angeles, CA 90013	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Not Employed None	Received through interefundralsing Connectic 2831 G Street #120 Sacramento, CA 95816	mediary:	00.00	
04/10/2022	Donnisha Sanford Hawthorne, CA 90250	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Teacher Centinela Valley Union High School District	Received through intererundraising Connectic 2831 G Street #120 Sacramento, CA 95816		50.00	
04/14/2022	Alex Vargas for Mayor 2024 (ID# 1375353) Hawthorne, CA 90250	□IND ⊠ COM □ OTH □ PTY □ SCC		2,500.00	2,5	00.00	
04/25/2022	Hawthorne, CA 90250	⊠IND □COM □OTH □PTY □SCC	Licensed Vocational Nurse Centinela Valley Union High School District	103.94 Received through interefundraising Connectic 2831 G Street #120 Sacramento, CA 95816		03.94	
04/27/2022	Kenneth Crowe Los Angeles, CA 90056	⊠IND □COM □OTH □PTY □SCC	Retired None	250.00	2	50.00	
			SUBTOTALS	3,053.94		,	

*Contributor Codes

IND - Individual

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(other than PTY or SCC)
OTH – Other (e.g., business entity)

PTY - Political Party

Schedule A (Continuation Sheet)

SCHEDULE A (CONT.)

Monetary	netary Contributions Received Amounts may be rounded to whole dollars.			Statement covers period from01/01/2022		california 460		
				through 06/30/	2022	Page	of	28
NAME OF FILER						I.D. NUM	BER	
SANFORD FOR	CITY COUNCIL 2022					144510	4	
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 CALENDAR YI (JAN. 1 - DEC.	EAR	TOI	ECTION DATE QUIRED)
04/27/2022	Los Angeles African American Women Political Action Committee (ID# 902629) Inglewood, CA 90301	□IND INCOM □OTH □PTY □SCC		250.00	2	50.00		
04/28/2022	Lasonjay Rogers Paramount, CA 90723	XIND ☐COM ☐OTH ☐PTY ☐SCC	Teacher Centinela Valley Union High School District	Received through integerundraising Connection		03.94		
05/01/2022	Kemisha Fields Lancaster, CA 93535	⊠IND □COM □OTH □PTY □SCC	Social Worker Los Angeles County	103.94 Received through interefundraising Connection Sacramento, CA 95816		03.94		
05/02/2022	Nicholas DeFrance Hawthorne, CA 90250	⊠IND □COM □OTH □PTY □SCC	Regional Operations Manager Self Employed - No Separate Business Name	Received through interpretation		03.94		
05/10/2022	Kasim Inc Santa Fe Springs, CA 90670	□IND □COM 図OTH □PTY □SCC		500.00 Received through integerundralsing Connection Sacramento, CA 95816	mediary:	00.00		
			SUBTOTAL	1,061.82				

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC) OTH – Other (e.g., business entity)

PTY - Political Party

Amounts may be rounded

CALIFORNIA 400

Statement covers period

-		to whole o	dollars.	from01/01/	/2022	FORM 460
				through 06/30/	^{/2022} F	age 9 of 28
NAME OF FILER			•		ı	.D. NUMBER
SANFORD FOR	CITY COUNCIL 2022				1	445104
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 D, CALENDAR YEA (JAN. 1 - DEC. 3	R TO DATE
. 05/22/2022	Meran Metters Palmdale, CA 93551	⊠IND □COM □OTH □PTY □SCC	Communications Manager City of Inglewood	Received through integerundraising Connection Sacramento, CA 95816		. 94
05/23/2022	Dr LaToya Brown Gardena, CA 90249	⊠IND □COM □OTH □PTY □SCC	School Administrator New Opportunities Organization Conejo Valley Unified School District	103.94 Received through integerundraising Connection Sacramento, CA 95816	-	.88
06/22/2022	Donald Sanford Altamonte Springs, FL 32714		Fitness Instructor Self Employed - No Separate Business Name	Received through interesting Connection Sacramento, CA 95816	mediary:	.00
06/22/2022	Olivia Valentine Hawthorne, CA 90250	⊠IND □COM □OTH □PTY □SCC	Arbitrator Self-Employed- No Separate Business Name	100.00	100	.00
06/23/2022	Dr LaTova Brown Gardena, CA 90249	∐сом	School Administrator New Opportunities Organization Conejo Valley Unified School District	Received through interesting Connection	mediarv:	. 88
			SUBTOTAL\$	511.82		

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC) OTH – Other (e.g., business entity) PTY – Political Party

SANFORD FOR C	CITY COUNCIL 2022				14451	.04
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)
06/30/2022	Christopher Sakamaki Hawthorne, CA 90250	XIND COM OTH PTY SCC	Assistant Credit Managerf Wedbush Securities	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

Schedule B – Part 1 Loans Received	Amounts may be rounded to whole dollars.			Statement cov	vers period	CALIFORN FORM	^{IA} 460	
SEE INSTRUCTIONS ON REVERSE					through06/3	0/2022	Page11	of <u>28</u>
NAME OF FILER							I.D. NUMBER	
SANFORD FOR CITY COUNCIL 2022							1445104"	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIOR	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Donnisha Sanford Hawthorne, CA 90250	Teacher Centinela Valley Union High School District	, Lines		PAID \$0.0 FORGIVEN		0_00% RATE	\$ _3,250.00	\$ 31,450.00 PER ELECTION**
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$0.00	\$3,250.00	\$0.0	02/04/2023 DATE DUE	\$0.00	02/04/2022 DATE INCURRED	\$
Debra Turner Hawthorne, CA 90250 Received through intermediary: eFundraising Connections, 2831 G Street #120, Sacramento, CA 95816	Retired None			PAID \$0_0 FORGIVEN	\$500.00	0_00% RATE	\$500.00	\$ 1,700.00 PER ELECTION **
†⊠ IND □ COM □ OTH □ PTY □ SCC		\$0.00	\$500.00	\$0_0	02/06/2022 DATE DUE	\$0_00	02/06/2022 DATE INCURRED	s
Hawthorne, CA 90250 Received through intermediary: eFundraising Connections, 2831 G Street #120, Sacramento, CA 95816	Teacher Centinela Valley Union High School District			PAID \$ 0.0	00 (07 (0000	0_00% RATE	\$ 1.000.00 02/27/2022	\$ 31,450.00 PER ELECTION**
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$0.00	\$1,000.00	\$0.0	DATE DUE	\$0.00	DATE INCURRED	\$
		SUBTOTALS \$	4,750.00	\$ 0.	4,750.00	\$ 0.00		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
Loans received this period (Total Column (b) plus unitemized loan				\$	27,450.00		Contributor Codes	
Loans paid or forgiven this period (Total Column (c) plus loans under \$10 (Include loans paid by a third party tha	0 paid or forgiven.) t are also itemized on Scheo	dule A.)				. IN	D – Individual DM – Recipient Co (other than TH – Other (e.g., TY – Political Part	ommittee PTY or SCC) business entity)
Net change this period. (Subtract Line Enter the net here and on the Summan	e 2 from Line 1.)ry Page, Column A, Line 2.			NET \$	27,450.00 (May be a negative number)	So	CC – Small Contrit	outor Committee
*Amounts forgiven or paid by another party also ** If required.	must be reported on Schedule A.						FPPC F	orm 460 (Jan/201

SCHEDULE B - PART 1 (CONT.)

Schedule B – Part 1 (Continuation Sheet) Loans Received Amounts may be rounded to whole dollars.					Statement cov	ers period	CALIFORN FORM	^A 460
SEE INSTRUCTIONS ON REVERSE					through06/3	0/2022	Page12	of <u>28</u>
NAME OF FILER					. , , , , , , , , , , , , , , , , , , ,		I.D. NUMBER	
SANFORD FOR CITY COUNCIL 2022							1445104	
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	AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAIL OR FORGIVE THIS PERIOL	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Hawthorne, CA 90250 Received through intermediary: eFundraising Connections, Sacramento, CA 95816	Retired None			\$0.00		0_00% RATE	\$200.00	\$ 1.700.00 PER ELECTION**
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$0.00	\$200.00	\$0.00	04/01/2023 DATE DUE	\$0.00	04/01/2022 DATE INCURRED	\$
Donnisha Sanford Hawthorne, CA 90250 Received through intermediary eFundraising Connections, Sacramento, CA 95816	Teacher Centinela Valley Union High School District			\$0.00	\$	0_00.% RATE	\$_2,000.00	\$ 31,450.00 PER ELECTION **
TIND □ COM □ OTH □ PTY □ SCC		\$0.00	\$2,000.00	\$0.00	05/14/2023 DATE DUE	\$0.00	05/14/2022 DATE INCURRED	\$
Donnisha Sanford Hawthorne, CA 90250	Teacher Centinela Valley Union High School District			PAID \$0.00 FORGIVEN		0_00.% RATE	\$ 15,000.00	\$ 31,450.00 PER ELECTION**
†⊠ IND □ COM □ OTH □ PTY □ SCC		\$0.00	\$15,000.00	\$0.00	05/17/2023 DATE DUE	\$0.00	DATE INCURRED	\$
Donnisha Sanford Hawthorne, CA 90250	Teacher Centinela Valley Union High School District			PAID \$0.00 FORGIVEN	\$5,000.00	<u>0.00</u> % RATE	\$ _5,000.00	\$ 31,450.00 PER ELECTION**
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$0.00	\$ 5.000.00	\$0.00	05/17/2023 DATE DUE	\$ 0.00	05/17/2022 DATE INCURRED	s
		SUBTOTALS \$	22,200.00	0.0	22,200.00	\$ 0.00		

†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 B - PART 1 (CONT.) Schedule B – Part 1 (Continuation Sheet) Statement covers period Amounts may be rounded **CALIFORNIA Loans Received** to whole dollars. **FORM** 01/01/2022 of <u>28</u> 06/30/2022 Page ____13__ through _ SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER 1445104 SANFORD FOR CITY COUNCIL 2022 (e) (a) OUTSTANDING (c) (d) OUTSTANDING (g) IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE **AMOUNT** CUMULATIVE INTEREST **ORIGINAL** AMOUNT PAID OCCUPATION AND EMPLOYER BALANCE BALANCEAT OF LENDER RECEIVED THIS PAID THIS CONTRIBUTIONS **AMOUNT OF** OR FORGIVEN (IF SELF-EMPLOYED, ENTER **BEGINNING THIS** CLOSE OF THIS (IF COMMITTEE, ALSO ENTER I.D. NUMBER) PERIOD PERIOD LOAN TO DATE NAME OF BUSINESS) THIS PERIOD PERIOD PERIOD Debra Turner Retired CALENDAR YEAR ☐ PAID None Hawthorne, CA 90250 \$ 1,700.00 500.00 0.00% \$ ____500.00 RATE FORGIVEN PER ELECTION** 06/20/2023 06/20/2022 0.00 500.00 DATE DUE DATE INCURRED □ COM □ OTH □ PTY □ SCC **CALENDAR YEAR** □ PAID RATE FORGIVEN PER ELECTION ** DATE DUE DATE INCURRED T☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC CALENDAR YEAR ☐ PAID RATE ☐ FORGIVEN PER ELECTION ** DATE DUE DATE INCURRED ☐ COM ☐ OTH ☐ PTY ☐ SCC ☐ PAID CALENDAR YEAR RATE FORGIVEN PER ELECTION ** DATE DUE DATE INCURRED □ COM □ OTH □ PTY □ SCC

SUBTOTALS \$

500.00\$

0.00\$

500.00\$

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

†Contributor Codes

IND - Individual

0.00

COM - Recipient Committee

(other than PTY or SCC)
OTH – Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

** If required.

Schedule C Nonmonetary Contributions Received			Amounts may be rounded to whole dollars.	ded Statement cover			nent covers period CALIFORNIA		SCHEDULE
	•				from	01/01/202	2	FOF	
SEE INSTRUC	TIONS ON REVERSE				through_	06/30/202	2	Page	14 of28
NAME OF FILE	R							I.D. NUMBI	ER
SANFORD FO	OR CITY COUNCIL 2022							1445104	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICE		MOUNT/ IR MARKET VALUE	D. CALEND	ATIVE TO ATE AR YEAR - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
04/24/2022	Faustino Corona Los Angeles, CA 90043	⊠IND □COM □OTH □PTY □SCC	Business Owner Formasters Plus	Yard Sign Expens	e	500.00		500.00	
5/09/2022	Jamie Harper Long Beach, CA 90802	⊠IND □COM □OTH □PTY □SCC	Finance Associate Taycor Financial	Website Editing Maintenance	&	1,500.00		1,500.00	
		☐IND ☐COM ☐OTH ☐PTY ☐SCC							
		□IND □COM □OTH □PTY □SCC							
Attach ad	ditional information on appropriately labe	eled continuat	ion sheets.	SUBTOTA	AL\$	2,000.00			
1. Amount	e C Summary received this period – itemized nonmonetar all Schedule C subtotals.)				•	2,000.0	IND	ntributor Cod – Individual M – Recipient	
2. Amount	received this period – unitemized nonmone nmonetary contributions received this period	tary contributio					 <u>0</u> OTI PT\	other that I – Other (e., I – Political Pa	n PTY or SCC) g., business entity)
	es 1 and 2. Enter here and on the Summar		n A, Lines 4 and 10.)	TOTAL	\$	2,000.0	<u>。</u>		

							SCHEDULE
Schedule E Payments Made Amounts may be rounded to whole dollars.			I	Statement covers period			DRNIA 460
SEE INSTRUCTIONS ON REVERSE				through	06/30/2022	Page1	.5 of <u>28</u>
NAME OF FILER SANFORD FOR CITY COUNCIL 2022						I.D. NUM 144510	
CODES: If one of the following codes accurately describes comparing paraphernalia/misc. CNS campaign consultants CNS contribution (explain nonmonetary)* CNC civic donations CIL candidate filing/ballot fees ND fundraising events independent expenditure supporting/opposing others (explain)* EG legal defense IT campaign literature and mailings	MBR member common meetings an office exper petition circumphone banks polling and spostage, del	imunications d appearance ises lating s survey resea ivery and me	es	RAD radio RFD return SAL cam TEL t.v. c TRC cance TRS staff TSF trans VOT vote	ribe the payment. o airtime and production red contributions paign workers' salaries or cable airtime and production didate travel, lodging, and step the setween committees or registration mation technology costs	uction costs I meals and meals s of the sam	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE	OR DESC	CRIPTION OF F	PAYMENT		AMOUNT PAID
Fundraising Connections Cacramento, CA 95816		CMP	Credit Card Fees				114.09
rolitical Reporting Plus		PRO	Political Account	ing - Reta	iner & Set-Up Fee		1,250.00
Fundraising Connections acramento, CA 95816		СМР	Credit Card Fees				17.8
Payments that are contributions or independent expenditures n	nust also be summ	arized on S	Schedule D.		SU	BTOTAL\$	1,381.8
Schedule E Summary							
. Itemized payments made this period. (Include all Schedule	E subtotals.)					\$	23,257.35
2. Unitemized payments made this period of under \$100			•••••		•••••	\$	65.03

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)......\$

0.00

Amounts may be rounded to whole dollars.

Staten	nent covers period	CALIFORNIA FORM	460		
from	01/01/2022	FORM 400			
through_	06/30/2022	Page16	of28		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

SANFORD FOR CITY COUNCIL 2022

I.D. NUMBER 1445104

SCHEDULE E (CONT.)

COL	ES: If one of the following codes accurately desc	ribes 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		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	АМО	UNT PAID
eFundraising Connections Sacramento, CA 95816	СМР	Credit Card Processing Fee		3.94
eFundraising Connections Sacramento, CA 95816	СМР	Credit Card Processing Fee		2.12
eFundraising Connections Sacramento, CA 95816	СМР	Credit Card Processing Fee		53.10
eFundraising Connections Sacramento, CA 95816	CMP	Credit Card Processing Fee		7.17
eFundraising Connections Sacramento, CA 95816	СМР	Credit Card Processing Fee		7.56
* Payments that are contributions or independent expenditures must also	be summarized on Schedule	D.	SUBTOTAL \$	73.89

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Statement covers period	CALIFORNIA 460
from01/01/2022	FORM TOU
through 06/30/2022	Page17 of28
	I.D. NUMBER
	1445104

SEE INSTRUCTIONS ON REVERSE NAME OF FILER SANFORD FOR CITY COUNCIL 2022

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 petition circulating t.v. or cable airtime and production costs PET FIL candidate filing/ballot fees phone banks candidate travel, lodging, and meals PHO FND fundraising events polling and survey research TRS staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF legal defense professional services (legal, accounting) LEG VOT voter registration campaign literature and mailings LIT 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 eFundraising Connections CMP Credit Card Processing Fee 2.05

CMP	Credit Card Processing Fee	2.12
СМР	Credit Card Processing Fee	1.70
CMP	Credit Card Processing Fee	4.68
CMP	Credit Card Processing Fee	4.98
	СМР	CMP Credit Card Processing Fee CMP Credit Card Processing Fee

SUBTOTAL \$ * Payments that are contributions or independent expenditures must also be summarized on Schedule D. 15.53

www.fppc.ca.gov

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Staten	nent covers period	CALIFORNIA 160
from	01/01/2022	FORM TOU
through_	06/30/2022	Page18 of28
		I.D. NUMBER
		1445104

SANFORD FOR CITY COUNCIL 2022

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
eFundraising Connections Sacramento, CA 95816	CMP	Credit Card Processing Fee	8.02
eFundraising Connections Sacramento, CA 95816	CMP	Credit Card Processing Fee	1.40
eFundraising Connections Sacramento, CA 95816	CMP	Credit Card Processing Fee	1.18
eFundraising Connections Sacramento, CA 95816	СМР	Credit Card Processing Fee	2.05
eFundraising Connections Sacramento, CA 95816	СМР	Credit Card Processing Fee	4.24
			SUPTOTAL 6

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

SUBTOTAL \$

16.89

Schedule E

SCHEDULE E ((CONT.)
--------------	---------

(Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA 460	
Payments Made	to whole dollars.	from01/01/2022	FORM 400	
SEE INSTRUCTIONS ON REVERSE		through 06/30/2022	Page 19 of 28	
NAME OF FILER			I.D. NUMBER	
SANFORD FOR CITY COUNCIL 2022			1445104	

COL	DES: If one of the following codes accurately describe	s the	payment, y	ou may	enter the code.	Otherwise,	describe the payment.
CMP	campaign paraphernalia/misc.	MBR	member com	munication	s	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and	l appearan	ices	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expens	ses		SAL	campaign workers' salaries
CVC	civic donations	PET	petition circul	ating		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 s	urvey rese	arch	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, deli	very and n	nessenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional	services (l	egal, 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	OP	DESCRIPTIO	IN OF PAYMENT

Credit Card Processing Fee 7 Credit Card Processing Fee 2
Credit Card Processing Fee 2
(
Credit Card Processing Fee 2
Credit Card Processing Fee
Credit Card Processing Fee 4

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL \$** 19.97

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA 160
from	01/01/2022	FORM 400
through .	06/30/2022	Page 20 of 28
		I.D. NUMBER
		1445104

SANFORD FOR CITY COUNCIL 2022

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 t.v. or cable airtime and production costs TEL FIL candidate filing/ballot fees РНО phone banks TRC candidate travel, lodging, and meals FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* TSF IND POS postage, delivery and messenger services transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) voter registration VOT campaign literature and mailings PRT WEB information technology costs (internet, e-mail) LIT print ads NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER)

eFundraising Connections Sacramento, CA 95816	CMP	Credit Card Processing Fee	3.80
	awa.		0.05
eFundraising Connections Sacramento, CA 95816	CMP	Credit Card Processing Fee	2.05
eFundraising Connections Sacramento, CA 95816	CMP	Credit Card Processing Fee	2.12
eFundraising Connections Sacramento, CA 95816	СМР	Credit Card Fees	9.18
eFundraising Connections Sacramento, CA 95816	CMP	Credit Card Processing Fee	3 . 94

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

SUBTOTAL \$

21.09

Schedule E ((P

SCHEDULE E (CONT.)

Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA 460
ayments Made	to whole dollars.	from01/01/2022	FORM TOO
E INSTRUCTIONS ON REVERSE		through 06/30/2022	Page21 of28
ME OF FILER			I.D. NUMBER
ANFORD FOR CITY COUNCIL 2022			1445104
ODES: If any of the following codes account	dalu dan ilban Aba an incent ilan and a dan Aba and a G	Mhanning dansiha dha anna	1

SANFORD FOR CITY COUNCIL 2022		14451	04
CNS campaign consultants MTG meet CTB contribution (explain nonmonetary)* OFC office CVC civic donations PET petitic FIL candidate filing/ballot fees PHO phon FND fundraising events POL pollin IND independent expenditure supporting/opposing others (explain)* POS posta	ber communications ings and appearance expenses on circulating e banks and survey researage, delivery and messional services (leg	RAD radio airtime and production costs returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production cost TRC candidate travel, lodging, and meals rsch TRS staff/spouse travel, lodging, and meals rssenger services TSF transfer between committees of the si	s ame candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
eFundraising Connections Sacramento, CA 95816	СМР	Credit Card Processing Fee	7.60
eFundraising Connections Sacramento, CA 95816	CMP	Credit Card Processing Fee	2.05
eFundraising Connections Sacramento, CA 95816	СМР	Credit Card Processing Fee	2.05
Dave Ross Consulting, Inc. La Habra, CA 90631	CNS	Consulting Services	5,000.00

Dave Ross Consulting, Inc. La Habra, CA 90631	CNS	Consulting Services	5,000.00
eFundraising Connections Sacramento, CA 95816	CMP	Credit Card Processing Fee	3.94

SUBTOTAL \$

5,015.64

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

SANFORD FOR CITY COUNCIL 2022

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
eFundraising Connections Sacramento, CA 95816	CMP	Credit Card Processing Fee	2.05
eFundraising Connections Sacramento, CA 95816	СМР	Credit Card Processing Fee	1.40
eFundraising Connections Sacramento, CA 95816	CMP	Credit Card Processing Fee	2.12
eFundraising Connections Sacramento, CA 95816	СМР	Credit Card Processing Fee	3.94
eFundraising Connections Sacramento, CA 95816	СМР	Credit Card Processing Fee	6.06

SUBTOTAL \$

15.57

SEE INSTRUCTIONS ON REVERSE

SANFORD FOR CITY COUNCIL 2022

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Statement covers period	CALIFORNIA 160
from01/01/2022	FORM TOO
through 06/30/2022	Page23 of28
	I.D. NUMBER
	1445104

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 candidate filing/ballot fees candidate travel, lodging, and meals FIL PHO phone banks TRC FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* transfer between committees of the same candidate/sponsor postage, delivery and messenger services TSF legal defense 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
eFundraising Connections Sacramento, CA 95816	CMP	Credit Card Processing Fee	3.94
eFundraising Connections Sacramento, CA 95816	СМР	Credit Card Processing Fee	2.12
Creative Print Consulting Long Beach, CA 90803	LIT	Post Cards	3,924.90
eFundraising Connections Sacramento, CA 95816	СМР	Credit Card Processing Fee	17.80
Creative Print Consulting Long Beach, CA 90803	LIT	Letterhead, Envelopes & Business Cards	2,949.19
* Payments that are contributions or independent expenditures must also be summarized of	on Schedule I	D. SUBTO	FAL \$ 6,897.95

Amounts may be rounded to whole dollars.

	SCHEDULE E (CONT.)
Statement covers period	CALIFORNIA 460
from01/01/2022	FORM TOO
through 06/30/2022	Page24 of28
	I.D. NUMBER
	1445104

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

SANFORD FOR CITY COUNCIL 2022

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 petition circulating PET TEL t.v. or cable airtime and production costs candidate filing/ballot fees FIL 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)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) VOT voter registration LIT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail) L CODE OR NAME AND ADDRESS OF DAVES

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Political Data Inc. Long Beach, CA 90806	CMP	Voter Data File Software Subscription	3,400.00
eFundraising Connections Sacramento, CA 95816	СМР	Credit Card Processing Fee	73.35
COGS South Signs Santa Ana, CA 92707	CMP	Campaign Signs	3,553.28
Impact Posting Santa Ana, CA 92707	CMP	Sign Posting Service	825.00
eFundraising Connections Sacramento, CA 95816	СМР	Credit Card Processing Fee	175.30
* Daymente that are contributions or independent expanditures must also be summerized en			TOTAL \$ 0.000 00

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

SUBTOTAL \$

8,026.93

SEE INSTRUCTIONS ON REVERSE

SANFORD FOR CITY COUNCIL 2022

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Stateme	ent covers period	CALIFORNIA ACO
from	01/01/2022	FORM 400
through	06/30/2022	Page 25 of 28
		I.D. NUMBER
		1445104

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 petition circulating TEL t.v. or cable airtime and production costs CVC civic donations PET candidate filing/ballot fees candidate travel, lodging, and meals FIL PHO phone banks TRC FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals POS postage, delivery and messenger services transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)* TSF LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail) LIT

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Political Reporting Plus Inglewood, CA 90301	PRO	Political Accounting - April, 2022	250.00
eFundraising Connections Sacramento, CA 95816	СМР	Credit Card Processing Fee	3.94
eFundraising Connections Sacramento, CA 95816	СМР	Credit Card Processing Fee	8.18
Political Reporting Plus The Manager Strate (Volume 1) Inglewood, CA 90301	PRO	Political Accounting - May 2022	250.00
California Families Vote Green (ID# 1408055) Norwalk, CA 90650	CMP	Slate Mailer	600.00
* Payments that are contributions or independent expenditures must also be summ	arized on Schedule [o. SUB1	**************************************

FPPC Form 460 (Jan/2016)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

www.fppc.ca.gov

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA 460
from	01/01/2022	FORM TOU
through_	06/30/2022	Page 26 of 28
		I.D. NUMBER
		1445104

SANFORD FOR CITY COUNCIL 2022

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
Families First Education Voter Guide (ID# 1398433) Norwalk, CA 90650	СМР	Slate Mailer	350.00
Latino Family Voter Guide (ID# 1386464) Norwalk, CA 90650	СМР	Slate Mailer	300.00
eFundraising Connections Sacramento, CA 95816	СМР	Credit Card Processing Fee	0.48
eFundraising Connections Sacramento, CA 95816	СМР	Credit Card Processing Fee	5.50
eFundraising Connections Sacramento, CA 95816	СМР	Credit Card Processing Fee	3.94
* Payments that are contributions or independent expenditures must also be summarize	ed on Schedule D.	SL	JBTOTAL \$ 659.92

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

www.fppc.ca.gov

Schedule F Accrued Expenses (Unpaid Bills) SEE INSTRUCTIONS ON REVERSE NAME OF FILER SANFORD FOR CITY COUNCIL 2022 CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants	Amounts may be round to whole dollars. es the payment, you may MBR member communication MTG meetings and appeara	v enter the code. Ot	Statement cove from01/01/2 through06/30/2 herwise, describe the RAD radio airtime ar RFD returned contril	Page . i.D. NUM 14451 ne payment. nd production costs	
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	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 SAL campaign workers' salaries t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sporvoter registration WEB information technology costs (internet, e-mail)				
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT			(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
COGS South Signs Santa Ana, CA 92707	CMP Campaign Signs	0.00	3,553.28	0.00	3,553.28
Impact Posting Santa Ana, CA 92707	CMP Sign Posting Service	0.00	825.00	0.00	825.00
Families First Education Voter Guide (ID# 1398433) Norwalk, CA 90650	CMP Slate Mailer	0.00	350.00	0.00	350.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS S	\$ 0.00\$	4,728.28	0.00\$	4,728.28
Schedule F Summary 1. Total accrued expenses incurred this period. (Include all Saccrued expenses of \$100 or more, plus total unitemized)			INICII		5,628.28
 Total accrued expenses paid this period. (Include all Scheaccrued expenses of \$100 or more, plus total unitemized) 	edule F, Column (c) subto	tals for payments on			
Net change this period. (Subtract Line 2 from Line 1. En on the Summary Page, Column A, Line 9.)				NE T \$	5 , 628 . 28 ay be a negative number

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

Statement covers period		CALIFORNIA 460				
from	01/01/2022	FORM 400				
through.	06/30/2022	Page 28 of 28				
		I.D. NUMBER				
		1445104				

NAME OF FILER

SANFORD FOR CITY COUNCIL 2022

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
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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
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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)

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

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Latino Family Voter Guide (ID# 1386464) Norwalk, CA 90650	CMP Slate Mailer	0.00	300.00	0.00	300,00
California Families Vote Green (ID# 1408055) Norwalk, CA 90650	CMP Slate Mailer	0.00	600.00	0.00	600.00
	SUBTOTALS	\$ 0,00	900,00	\$ 0.00	\$ 900.00