Dee								COVER PAGE
Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)						Date Stamp		LIFORNIA 460
(0000			St	atement covers period	Date of election if applicable:	07/28/2020 17:05:42	Dem	e1 of18
			from	02/16/2020	(Month, Day, Year)	Filing ID:	Page	For Official Use Only
						191401632)	
SEE IN	ISTRUCTIONS ON REVERSE		throu	gh06/30/2020				
1. Ty	ype of Recipient Committee: All of	ommittees	- Complete P	arts 1, 2, 3, and 4.	2. Type of Statement:			
co	 Officeholder, Candidate Controlled Comm State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee Ommittee Information DMMITTEE NAME (OR CANDIDATE'S NAME IF N Gan Jose Police Officers' Associa 		Committe Contro Spons (Also Comple Primarily Officehold (Also Comple I.D. NUMBE 951339	olled sored <i>te Part 6)</i> Formed Candidate/ der Committee <i>ete Part 7)</i>		ermination)	Supplementa	atement -Year Report al Preelection Attach Form 495
					MAILING ADDRESS			
ST	REET ADDRESS (NO P.O. BOX)				CITY	STATE	ZIP CODE	AREA CODE/PHONE
					San Jose	CA	95112	(408)298-1133
CI	TY S	TATE ZIF	CODE	AREA CODE/PHONE	NAME OF ASSISTANT TREASU	RER, IF ANY		
S	San Jose (CA 9	5112	(408)298-1133	Paul Kelly			
M	AILING ADDRESS (IF DIFFERENT) NO. AND ST	REET OR P.	O. BOX		MAILING ADDRESS			
CI	TY S	TATE ZIF	CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
S	Sacramento (CA 9	5814		San Jose	CA	95112	(408)298-1133
	PTIONAL: FAX / E-MAIL ADDRESS 408)298-3151 / info@olsonhagel.c	om			OPTIONAL: FAX / E-MAIL ADDF	RESS		
۱h	erification ave used all reasonable diligence in preparir der penalty of perjury under the laws of the S				owledge the information contained he	rein and in the attached	schedules is tru	ue and complete. I certify

Executed on	07/14/2020	Bv	Franco Vado	
	Date		Signature of Treasurer or Assistant Treasurer	
Executed on	07/14/2020	By	Franco Vado	
	Date		Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor	
Executed on		Bv		
	Date		Signature of Controlling Officeholder, Candidate, State Measure Proponent	
Executed on		Bv		
	Date		Signature of Controlling Officeholder, Candidate, State Measure Proponent	 FPF

Page _	2	of _	18

5. Officeholder or Candidate Controlled Committee NAME OF BALLOT MEASURE NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) STATE RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY ΖIΡ 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 CONTROLLED COMMITTEE? NAME OF TREASURER ☐ 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

BALLOT NO. OR LETTER	JURISDICTION	SUPPORT
----------------------	--------------	---------

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
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page		Amounts may be rounded to whole dollars.			Statem m	ent covers period	CALIFORNIA FORM 46		
SEE INSTRUCTIONS ON REVERSE				thro	ough _	06/30/2020	Page of8		
NAME OF FILER					•		I.D. NUMBER		
San Jose Police Officers' Association PAC							951339		
Contributions Received	(F	Column A TOTAL THIS PERIOD FROMATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTALTO DATE			nmary for Candidates ne State Primary and		
1. Monetary Contributions Schedule A, Line 3	\$	0.00	\$	0.	.00				
2. Loans Received Schedule B, Line 3		0.00		0.	.00	1/1	through 6/30 7/1 to Date		
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	0.00	\$	0.	.00	20. Contributions Received \$	\$		
4. Nonmonetary Contributions Schedule C, Line 3		600.00		1,000.	. 00	21. Expenditures			
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	600.00	\$	1,000.	. 00	Made \$	\$		
Expenditures Made						Expenditure Limit	Summary for State		
6. Payments Made Schedule E, Line 4	\$	76,255.80	\$	124,357.	. 44	Candidates			
7. Loans Made Schedule H, Line 3		0.00		0.	.00	22 Cumulati	va Expandituraa Madat		
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	76,255.80	\$	124,357.	. 44		ve Expenditures Made* o Voluntary Expenditure Limit)		
9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3		-14,142.40		9,016.	.66	Date of Election	Total to Date		
10. Nonmonetary Adjustment Schedule C, Line 3		600.00		1,000.	.00	(mm/dd/yy)			
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$	62,713.40	\$	134,374.	.10	////	\$		
Current Cash Statement						///////	\$		
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	293,860.82	Т	o calculate Column B,	add				
13. Cash Receipts Column A, Line 3 above		0.00	ar	mounts in Column A to prresponding amounts	o the				
14. Miscellaneous Increases to Cash Schedule I, Line 4		33.53	fro	om Column B of your	last	*Amounts in this section may be different from a reported in Column B.			
15. Cash Payments Column A, Line 8 above		76,255.80		port. Some amounts olumn A may be nega					
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	217,638.55	fig	gures that should be					
If this is a termination statement, Line 16 must be zero.			pe	ubtracted from previo eriod amounts. If this e first report being fil	is				
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	fo	r this calendar year, arry over the amounts	only				
Cash Equivalents and Outstanding Debts			fro	om Lines 2, 7, and 9 ny).					
18. Cash Equivalents See instructions on reverse	\$	0.00							
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	9,016.66							

Schedule C

Nonmonetary Contributions Received						Statement covers period from02/16/2020			CALIFORNIA FORM 460		
SEE INSTRUC	TIONS ON REVERSE				throug	h06/30/202	20	Page	<u>1</u> of _	18	
NAME OF FILE								I.D. NUMBE	R		
San Jose I	Police Officers' Association PAC							951339			
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)	DESCRIPTION GOODS OR SERV		AMOUNT/ FAIR MARKET VALUE	DA CALEND	ATIVE TO ATE AR YEAR DEC 31)	то	LECTION DATE QUIRED)	
02/17/2020	South Bay AFL-CIO Labor Council Committee on Political Education (COPE) Sponsored by: South Bay AFL-CIO Labor Council (ID# 744711) San Jose, CA 95125	□IND IND IND IND IND IND IND IND		Data		200.00		1,000.00			
02/19/2020	South Bay AFL-CIO Labor Council Committee on Political Education (COPE) Sponsored by: South Bay AFL-CIO Labor Council (ID# 744711) San Jose, CA 95125	□IND IND ICOM OTH IPTY ISCC		Data		200.00		1,000.00			
02/26/2020	South Bay AFL-CIO Labor Council Committee on Political Education (COPE) Sponsored by: South Bay AFL-CIO Labor Council (ID# 744711) San Jose, CA 95125	□IND IND COM OTH PTY SCC		Data		200.00		1,000.00			
		□IND □COM □OTH □PTY □SCC									
Attach ad	ditional information on appropriately label	ed continuati	ion sheets.	SUBTC	TAL \$	600.00					
1. Amount	e C Summary received this period – itemized nonmonetary all Schedule C subtotals.)				\$	600.0	IND	ntributor Cod – Individual 1 – Recipient		e	

2. Amount received this period – uniternized nonmonetary contributions of less than \$100 \$ _

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 \$_ 600.00

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

0.00

Supportin Candidate SEE INSTRUCTION NAME OF FILER	of Expenditures ng/Opposing Other es, Measures and Committees	Amounts may b to whole do		Statement covers)20	CALIFORNIA 460 FORM 460 Page 5 of 18 I.D. NUMBER 951339		
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 CALENDAR (JAN. 1 - DE	YEAR	PER ELECTION TO DATE (IF REQUIRED)	
02/25/2020	Sylvia Arenas City Council Member City of San Jose District: 8 X Support Oppose	Image: Second state sta		600.00		600.00		
02/25/2020	Magdalena Carrasco County Supervisor Santa Clara County X Support Oppose	Image: Second state Monetary Contribution Nonmonetary Contribution Independent Expenditure Expenditure		1,000.00	1	,000.00		
02/17/2020	Jim Zito City Council Member City of San Jose District: 8	□ Monetary Contribution □ Nonmonetary Contribution □ Independent Expenditure	Design, Data, Printing and Postage for Mailer	9,634.03	56	,312.68		
	•		SUBTOTAL	\$ 11,234.03				

Schedule D Summary

1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)	46,528.18
2. Unitemized contributions and independent expenditures made this period of under \$100 \$.	0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	46,528.18

 of Expenditures ng/Opposing Other es, Measures and Committees 		dollars.	from02/16/20			M 400
					-	
lice Officers' Association PAC					951339	
NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CALENDAR	YEAR	PER ELECTION TO DATE (IF REQUIRED)
Jim Zito City Council Member City of San Jose District: 8	 Monetary Contribution Nonmonetary Contribution Independent Expenditure 	Design, Data, Printing and Postage for Mailer	9,634.03	56,	312.68	
Jim Zito City Council Member City of San Jose District: 8	 Monetary Contribution Nonmonetary Contribution Independent Expenditure 	Production for Digital Ads	3,000.00	56,	312.68	
Jim Zito City Council Member City of San Jose District: 8	Monetary Contribution Nonmonetary Contribution X Independent Expenditure	Digital Ads	2,000.00	56,	312.68	
Jim Zito City Council Member City of San Jose District: 8	Monetary Contribution Nonmonetary Contribution X Independent Expenditure	Text Messages	517.92	56,	312.68	
	Ing/Opposing Other es, Measures and Committees lice Officers' Association PAC NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE Jim Zito City Council Member City of San Jose District: 8	Independent to wnote the set. Interview of the set of t	Interview Ite of ficers' Association PAC Interview NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION. OR COMMITTEE TYPE OF PAYMENT DESCRIPTION (FREQURED) Jim Zito City of San Jose Onthibution Pesign, Data, Printing and Postage for Mailer Jim Zito City of San Jose Nonmonetary Contribution Period Jim Zito City of San Jose Monetary Contribution Production for Digital Ads Jim Zito City of San Jose Monetary Contribution Production for Digital Ads Jim Zito City of San Jose Monetary Contribution Production for Digital Ads Jim Zito City of San Jose Monetary Contribution Digital Ads Jim Zito City of San Jose Monetary Contribution Digital Ads Jim Zito City of San Jose District: 8 Monetary Contribution Pigital Ads Jim Zito City Council Member City of San Jose District: 8 Monetary Contribution Pigital Ads City of San Jose District: 8 Monetary Contribution Text Messages City of San Jose District: 8 Independent Text Messages	Independent est, Measures and Committees from02/16/20 Ince officers' Association PAC mode dollars. Ince officers' Association PAC measures and Committees Ince officers' Association PAC measures and District or of Compose Inter of Compose measures and committees Inter of Compose measures and committees Inter of Compose measures and committees Inter of San Jose mode dollars. Inter of San Jose	Independent Image of the contrasts from02/16/2020	Indext Common biology Townoor addition of the common biology The common biology Commo biology Common biology Common

Summary Supporti	ation Sheet) y of Expenditures ng/Opposing Other es, Measures and Committees	Amounts may to whole c		Statement covers from02/16/20 through06/30/20	20	iod CALIFORNIA 460		
NAME OF FILER						I.D. NUMB		
San Jose Pc	lice Officers' Association PAC					951339		
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 1 CALENDAR (JAN. 1 - DEC	YEAR	PER ELECTION TO DATE (IF REQUIRED)	
02/26/2020	Sergio Jimenez City Council Member City of San Jose District: 2 X Support Oppose	 Monetary Contribution Nonmonetary Contribution Independent Expenditure 	Design, Consulting, Data, Printing and Postage for Mailer	9,542.20	9,	542.20		
02/25/2020	Sergio Jimenez City Council Member City of San Jose District: 2	 Monetary Contribution Nonmonetary Contribution Independent Expenditure 		600.00		600.00		
02/24/2020	Santa Clara County Voter Information Project to Support Magdalena Carrasco for Supervisor 2020	 Monetary Contribution Nonmonetary Contribution Independent Expenditure 		10,000.00	10,	000.00		
	Support Oppose	 Monetary Contribution Nonmonetary Contribution Independent Expenditure 						

Schedule E	Amounts may be rounded	Statem	ent covers period	CALIFORNIA 460	
Payments Made	to whole dollars.	from	02/16/2020	FORM 400	
SEE INSTRUCTIONS ON REVERSE		through	06/30/2020	Page8 of18	
NAME OF FILER				I.D. NUMBER	
San Jose Police Officers' Association PAC				951339	

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 POL polling and survey research TRS staff/spouse travel, lodging, and meals FND fundraising events independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor IND legal defense PRO professional services (legal, accounting) VOT voter registration LEG 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	م	MOUNT PAID
3Shades Design Los Angeles, CA 90027	IND	Design for Mailer/Oppose Jim Zito		700.00
3Shades Design Los Angeles, CA 90027	IND	Design for Mailer/Oppose Jim Zito		700.00
3Shades Design Los Angeles, CA 90027	IND	Design for Mailer/Oppose Jim Zito		700.00
* Payments that are contributions or independent expenditu	ires must also be summarized on	Schedule D.	SUBTOTAL \$	2,100.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) \$	76,255.80
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 Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	76,255.80

Schedule E (Continuation Sheet) Payments Made	Amounts may be to whole do			Statement covers period from02/16/2020	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER San Jose Police Officers' Association PAC				through06/30/2020	Page9 of18 I.D. NUMBER 951339
CODES: If one of the following codes accurately described of the following codes accurately described of the 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 com MTG meetings and OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, deli	munications d appearance ses lating urvey researd very and mes	S	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and prod TRC candidate travel, lodging, an TRS staff/spouse travel, lodging,	costs duction costs d meals and meals s of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE (DR DES	SCRIPTION OF PAYMENT	AMOUNT PAID
- 3Shades Design Los Angeles, CA 90027		IND	Design for Maile:	r/Support Sergio Jimenez	700.00

	IND	Website/Oppose Jim Zito	4,991.00
Arenas for City Council District 8 2020 (ID# 1420866) Sacramento, CA 95815	СТВ		600.00
Jeffery Barrera Santa Clara, CA 95054	IND	Production for Digital Ads/Oppose Jim Zito	3,000.00
Magdalena Carrasco for Santa Clara County Supervisor 2020 (ID# 1415588) San Jose, CA 95148	СТВ		1,000.00
* Payments that are contributions or independent expenditures must also be summarized on	Schedule D.	SUBTOTAL \$	10,291.00

Schedule E					S	CHEDULE E (CONT.)
Continuation Sheet) Amounts may be rounded Statement cover		Statement covers peri from02/16/2020	od CALIFOR			
				through06/30/2020	Page	10 of18
SEE INSTRUCTIONS ON REVERSE NAME OF FILER					I.D. NUMBE	
San Jose Police Officers' Association PAC					951339	
CODES: If one of the following codes accurately descr 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 com MTG meetings and OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, deli	munications d appearance ses lating survey resear ivery and me	s	RAD radio airtime and pr RFD returned contributio SAL campaign workers' TEL t.v. or cable airtime TRC candidate travel, loc TRS staff/spouse travel,	oduction costs ins salaries and production costs dging, and meals lodging, and meals ommittees of the sam	e candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	DR D	ESCRIPTION OF PAYMENT		AMOUNT PAID
Franchise Tax Board Sacramento, CA 95826		OFC				114.00
Sergio Jimenez for San Jose City Council 2020 (ID# 14 San Jose, CA 95123	19734)	CTB				600.00
Olson Remcho LLP Sacramento, CA 95814		PRO				703.35
Olson Remcho LLP Sacramento, CA 95814		PRO				4,444.71
Olson Remcho LLP Sacramento, CA 95814		PRO				595.30
* Payments that are contributions or independent expenditures must	also be summarized on	Schedule D.			SUBTOTAL \$	6,457.36

Schedule E			SCHEDULE E (CONT.)
(Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA 160
Payments Made	to whole dollars.	from02/16/2020	FORM 400
SEE INSTRUCTIONS ON REVERSE		through06/30/2020	Page <u>11</u> of <u>18</u>
NAME OF FILER			I.D. NUMBER
San Jose Police Officers' Association PAC			951339
CODES: If one of the following codes accurately describe	es the payment, you may enter the code. Oth	nerwise, describe the payment	t.
CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production	n 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 pro	
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, a	
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging	
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services		es 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 cos	its (internet, e-mail)

		i
CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
PRO		374.5
PRO		106.7
IND	Printing and Postage for Mailer/Oppose Jim Zito	8,734.0
IND	Printing and Postage for Mailer/Oppose Jim Zito	8,734.0
IND	Printing and Postage for Mailer/Oppose Jim Zito	8,734.0
	PRO PRO PRO IND	PRO PRO PRO PRO IND Printing and Postage for Mailer/Oppose Jim Zito IND Printing and Postage for Mailer/Oppose Jim Zito

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Schedule E (Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.	Statement covers period from02/16/2020	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through06/30/2020	Page <u>12</u> of <u>18</u>
NAME OF FILER			I.D. NUMBER
San Jose Police Officers' Association PAC			951339
CODES: If one of the following codes accura	ately describes the payment, you may enter the code	e. Otherwise, describe the payment.	
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)*	MBR member communications MTG meetings and appearances OFC office expenses	RAD radio airtime and productior RFD returned contributions SAL campaign workers' salaries	

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

PET petition circulating

POL polling and survey research

PHO phone banks

mailings	PRO professional PRT print ads	services (I	egal, accounting)	VOT voter registration WEB information technology costs (internet	et, e-mail)
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
		IND	Printing and	l Postage for Mailer/Oppose Jim Zito	8,734.03
		IND	Printing and Jimenez	l Postage for Mailer/Support Sergio	8,392.20
		PRO			830.00
		IND	Consulting/S	Support Sergio Jimenez	250.00
		IND	Digital Ads/	Oppose Jim Zito	2,000.00
	NAME AND ADDRESS OF PAYEE	mailings PRT print ads NAME AND ADDRESS OF PAYEE Image: Comparison of the second secon	mailings PRT print ads NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE IND IND IND PRO IND IND	mailings PRT print ads COL Or NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) IND Printing and IND Printing and Jimenez IND Printing and Jimenez IND Printing and Jimenez IND PRO IND IND IND IND Provide and Dimenez IND Printing and Dimenez	mailings PRT print ads WEB information technology costs (internet internet int

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

SUBTOTAL \$ 20,206.23

TEL t.v. or cable airtime and production costs

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

TRC candidate travel, lodging, and meals

_

CVC civic donations

candidate filing/ballot fees

independent expenditure supporting/opposing others (explain)*

fundraising events

FIL

FND

IND

Schedule E (Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.	Statement covers period from02/16/2020	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through06/30/2020	Page <u>13</u> of <u>18</u>
NAME OF FILER			I.D. NUMBER
San Jose Police Officers' Association PAC			951339
CODES: If one of the following codes accurate	tely describes the payment, you may enter the code	e. Otherwise, describe the payment	
CMPcampaign paraphernalia/misc.CNScampaign consultantsCTBcontribution (explain nonmonetary)*CVCcivic donations	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating	RAD radio airtime and productio RFD returned contributions SAL campaign workers' salarie: TEL t.v. or cable airtime and pro	S

polling and survey research

POS postage, delivery and messenger services

PHO phone banks

POL

LEG legal defense LIT campaign literature and mailings	PRO professional PRT print ads	services (le	gal, accounting)	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
Saggau Derollo, LLC San Jose, CA 95113		IND	Text Messages	:/Oppose Jim Zito	517.92
Santa Clara County Voter Information Project to Suppo Carrasco for Supervisor 2020 (ID# 1424012) Los Angeles, CA 90017	rt Magdalena	СТВ			10,000.00

TRC candidate travel, lodging, and meals

TRS

staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

_

FIL

FND

IND

candidate filing/ballot fees

independent expenditure supporting/opposing others (explain)*

fundraising events

SCHEDULE F

Schedule F Accrued Expenses (Unpaid Bills)	Amounts may be rounded to whole dollars.		Statement cover from02/16/2 through06/30/2	020 FO	$\begin{array}{c} \text{CALIFORNIA} \\ \text{FORM} \end{array} \begin{array}{c} \textbf{460} \\ \textbf{Page} \\ \underline{14} \\ \textbf{of} \\ \underline{18} \end{array}$	
SEE INSTRUCTIONS ON REVERSE						
NAME OF FILER				I.D. NUM	IBER	
San Jose Police Officers' Association PAC				95133	9	
CODES: If one of the following codes accurately describe 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	es the payment, you may MBR member communication MTG meetings and appeara OFC office expenses PET petition circulating PHO phone banks POL polling and survey rest POS postage, delivery and PRO professional services (PRT print ads	ns nces earch messenger services	RAD radio airtime and RFD returned contrib SAL campaign worke TEL t.v. or cable airti TRC candidate travel. TRS staff/spouse trav TSF transfer between VOT voter registration	d production costs utions ers' salaries me and production costs lodging, and meals rel, lodging, and meals n committees of the sar	ne candidate/sponsor	
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	
Pacific Printing, Inc. San Jose, CA 95110	IND Printing and Postage for Mailer/Oppose Jim Zito	8,734.03	0.00	8,734.03	0.00	
3Shades Design Los Angeles, CA 90027	IND Website/Oppose Jim Zito	4,991.00	0.00	4,991.00	0.00	
Pacific Printing, Inc. San Jose, CA 95110	IND Printing and Postage for Mailer/Oppose Jim Zito	8,734.03	0.00	8,734.03	0.00	
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$ 22,459.06	0.00\$	22,459.06 \$	0.00	
Schedule F Summary						
 Total accrued expenses incurred this period. (Include all S accrued expenses of \$100 or more, plus total unitemized 			INCUF	RED TOTALS \$ _	9,016.66	
2. Total accrued expenses paid this period. (Include all Sche accrued expenses of \$100 or more, plus total unitemized				PAID TOTALS \$ _	23,159.06	
3. Net change this period. (Subtract Line 2 from Line 1. En	ter the difference here and	b		NET ¢	-14,142,40	

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SCHEDULE F (CONT.)

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)	Amounts may be rounded to whole dollars.	Statement covers period from02/16/2020	CALIFORNIA FORM 460
		through06/30/2020	Page <u>15</u> of <u>18</u>
NAME OF FILER			I.D. NUMBER
San Jose Police Officers' Association PAC			951339

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
- independent expenditure supporting/opposing others (explain)* IND

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

- legal defense LEG
- campaign literature and mailings LIT

- MBR member communications
- MTG meetings and appearances
- OFC office expenses
- petition circulating PET
- 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 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
3Shades Design Los Angeles, CA 90027	IND Design for Mailer/Oppose Jim Zito	700.00	0.00	700.00	0.00
Pacific Printing, Inc. San Jose, CA 95110	OFC	0.00	9,016.66	0.00	9,016.66
	SUBTOTALS	700.00	9,016.66	700.00	\$ 9,016.66

SCHEDULE G

7

CALIFORNIA

FORM

I.D. NUMBER

951339

Page <u>16</u> of <u>18</u>

Schedule G
Payments Made by an Agent or Independent
Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars. from

through	06/30/2020

Statement covers period

02/16/2020

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Jose Police Officers' Association PAC NAME OF AGENT OR INDEPENDENT CONTRACTOR

Pacific Printing, Inc.

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 campaign consultants MTG meetings and appearances RFD returned contributions CNS CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals FND fundraising events

- IND independent expenditure supporting/opposing others (explain)*
- LEG legal defense
- LIT campaign literature and mailings

- POL polling and survey research
- POS postage, delivery and messenger services
- PRO professional services (legal, accounting)
- PRT print ads

- TEL t.v. or cable airtime and production costs
- 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)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
U.S. Postal Service San Jose, CA 95113	IND	Postage for Mailer	4,030.04
U.S. Postal Service San Jose, CA 95113	IND	Postage for Mailer	4,030.04
U.S. Postal Service San Jose, CA 95113	IND	Postage for Mailer	2,860.00
Attach additional information on appropriately labeled continuation charts			10 000 00

Attach additional information on appropriately labeled continuation sneets.

TOTAL* \$ 10,920.08

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

SCHEDULE G

Schedule G
Payments Made by an Agent or Independent
Contractor (on Behalf of This Committee)

Statement covers period

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)	Amounts may be rounded to whole dollars.	Statement covers period from02/16/2020	california 460 form	
SEE INSTRUCTIONS ON REVERSE		through06/30/2020	Page <u>17</u> of <u>18</u>	
NAME OF FILER			I.D. NUMBER	
San Jose Police Officers' Association PAC			951339	
Saggau Derollo, LLC CODES: If one of the following codes accurately describ	es the payment, you may enter the code. O	otherwise, describe the paymen	t.	
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	MBRmember communicationsMTGmeetings and appearancesOFCoffice expensesPETpetition circulatingPHOphone banksPOLpolling and survey researchPOSpostage, delivery and messenger servicesPROprofessional services (legal, accounting)	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and prod TRC candidate travel, lodging, and TRS staff/spouse travel, lodging, TSF transfer between committees VOT voter registration	costs luction costs d meals and meals s of the same candidate/sponsor	
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 PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Facebook, Inc. Palo Alto, CA 94301	IND	Digital Ads	2,000.00
Thrutext Fremont, CA 94538	IND	Text Messages	517.92
Attach additional information on appropriately labeled continuation sheets.		TOTAL*	\$ 2,517.92

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule I **Miscellaneous Increases to Cash**

Miscellaneous Ind	creases to Cash	Amounts may be rounded to whole dollars.	Statement covers period from02/16/2020	CALIFORNIA FORM 460
EE INSTRUCTIONS ON REVER	SE		through06/30/2020	Page <u>18</u> of <u>18</u>
AME OF FILER				I.D. NUMBER
an Jose Police Office	ers' Association PAC			951339
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DE	ESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
Attach additional infor	mation on appropriately labeled continuation sheets.		SUBTOTA	 L \$

Schedule I Summary

1. Itemized increases to cash this period.	\$ 0.00
2. Unitemized increases to cash of under \$100 this period.	\$ 33.53
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)	\$ 0.00
 Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) TOTAL 	\$ 33.53

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

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SCHEDULE I