

# Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

COVER PAGE

CALIFORNIA FORM 460

Page 1 of 16

For Official Use Only

Date Stamp

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### Statement covers period

from 07/01/2021

through 12/31/2021

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

SEE INSTRUCTIONS ON REVERSE

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

- Officeholder, Candidate Controlled Committee
  - State Candidate Election Committee
  - Recall  
*(Also Complete Part 5)*
- General Purpose Committee
  - Sponsored
  - Small Contributor Committee
  - Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
  - Controlled  
*(Also Complete Part 6)*
  - Sponsored  
*(Also Complete Part 6)*
- Primarily Formed Candidate/Officeholder Committee  
*(Also Complete Part 7)*

### 2. Type of Statement:

- Preelection Statement
- Semi-annual Statement
- Termination Statement  
*(Also file a Form 410 Termination)*
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report
- Supplemental Preelection Statement - Attach Form 495

### 3. Committee Information

I.D. NUMBER

1442358

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

No on C! Stop The Recall Of Faauuga Moliga

STREET ADDRESS (NO P.O. BOX)

| CITY          | STATE | ZIP CODE | AREA CODE/PHONE |
|---------------|-------|----------|-----------------|
| San Francisco | CA    | 94132    | (510) 423-4300  |

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

| CITY    | STATE | ZIP CODE | AREA CODE/PHONE |
|---------|-------|----------|-----------------|
| Oakland | CA    | 94607    |                 |

OPTIONAL: FAX / E-MAIL ADDRESS

filings@seowenscompany.com

### Treasurer(s)

NAME OF TREASURER

Stacy Owens

MAILING ADDRESS

| CITY    | STATE | ZIP CODE | AREA CODE/PHONE |
|---------|-------|----------|-----------------|
| Oakland | CA    | 94607    | (510) 423-4300  |

NAME OF ASSISTANT TREASURER, IF ANY

Peter Sullivan

MAILING ADDRESS

| CITY    | STATE | ZIP CODE | AREA CODE/PHONE |
|---------|-------|----------|-----------------|
| Oakland | CA    | 94618    | (510) 423-4300  |

OPTIONAL: FAX / E-MAIL ADDRESS

### 4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 01/24/2022  
Date

By Stacy Owens  
Signature of Treasurer or Assistant Treasurer

Executed on 01/24/2022  
Date

By Faauuga Moliga  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Recipient Committee  
Campaign Statement  
Cover Page — Part 2**

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE  
 Faaauga Moliga

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)  
 Board of Education: San Francisco, CA District 19

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP  
 San Francisco CA 941232

**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?<br><input type="checkbox"/> YES <input type="checkbox"/> 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?<br><input type="checkbox"/> YES <input type="checkbox"/> NO |
| COMMITTEE ADDRESS | STREET ADDRESS (NO P.O. BOX)  |
| CITY              | STATE ZIP CODE AREA CODE/PHONE  |

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE  
 Recall Faaauga Moliga

|                           |  |  |
|---------------------------|--|--|
| BALLOT NO. OR LETTER<br>C | JURISDICTION<br>City and County of San Francisco, CA | <input type="checkbox"/> SUPPORT<br><input checked="" type="checkbox"/> OPPOSE |
|---------------------------|--|--|

**Identify the controlling officeholder, candidate, or state measure proponent, if any.**

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD DISTRICT NO. IF ANY

**7. Primarily Formed Candidate/Officeholder Committee** *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

|                                   |                       |   |
|-----------------------------------|-----------------------|---|
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |

*Attach continuation sheets if necessary*

# Campaign Disclosure Statement Summary Page

SUMMARY PAGE

Amounts may be rounded  
to whole dollars.

|                         |            |                                |
|-------------------------|------------|--------------------------------|
| Statement covers period |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                    | 07/01/2021 |                                |
| through                 | 12/31/2021 | Page <u>3</u> of <u>16</u>     |
|                         |            | I.D. NUMBER<br>1442358         |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No on C! Stop The Recall Of Faauga Moliga

## Contributions Received

|   | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|---|--|--|
| 1. Monetary Contributions ..... Schedule A, Line 3    | \$ 18,705.00   | \$ 18,705.00                               |
| 2. Loans Received ..... Schedule B, Line 3            | 0.00   | 0.00                                       |
| 3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1 + 2  | \$ 18,705.00   | \$ 18,705.00                               |
| 4. Nonmonetary Contributions ..... Schedule C, Line 3 | 0.00   | 0.00                                       |
| 5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 + 4 | \$ 18,705.00   | \$ 18,705.00                               |

## 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      | \$ _____         | \$ _____    |

## Expenditures Made

|   | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|---|--|--|
| 6. Payments Made ..... Schedule E, Line 4                   | \$ 3,655.58  | \$ 3,655.58                                |
| 7. Loans Made ..... Schedule H, Line 3                      | 0.00   | 0.00                                       |
| 8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7             | \$ 3,655.58  | \$ 3,655.58                                |
| 9. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3 | 1,000.00   | 1,000.00                                   |
| 10. Nonmonetary Adjustment ..... Schedule C, Line 3         | 0.00   | 0.00                                       |
| 11. TOTAL EXPENDITURES MADE ..... Add Lines 8 + 9 + 10      | \$ 4,655.58  | \$ 4,655.58                                |

## Expenditure Limit Summary for State Candidates

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

| Date of Election<br>(mm/dd/yy) | Total to Date |
|--------------------------------|---------------|
| ____/____/____                 | \$ _____      |
| ____/____/____                 | \$ _____      |

## Current Cash Statement

|   |              |
|---|--------------|
| 12. Beginning Cash Balance ..... Previous Summary Page, Line 16             | \$ 0.00      |
| 13. Cash Receipts ..... Column A, Line 3 above                              | 18,705.00    |
| 14. Miscellaneous Increases to Cash ..... Schedule I, Line 4                | 0.00         |
| 15. Cash Payments ..... Column A, Line 8 above                              | 3,655.58     |
| 16. ENDING CASH BALANCE ..... Add Lines 12 + 13 + 14, then subtract Line 15 | \$ 15,049.42 |
| <i>If this is a termination statement, Line 16 must be zero.</i>            |              |
| 17. LOAN GUARANTEES RECEIVED ..... Schedule B, Part 2                       | \$ 0.00      |

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

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

## Cash Equivalents and Outstanding Debts

|   |             |
|---|-------------|
| 18. Cash Equivalents ..... See instructions on reverse            | \$ 0.00     |
| 19. Outstanding Debts ..... Add Line 2 + Line 9 in Column B above | \$ 1,000.00 |

**Schedule A  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A

|                                |                           |                            |
|--------------------------------|---------------------------|----------------------------|
| <b>Statement covers period</b> |                           | <b>CALIFORNIA FORM 460</b> |
| from <u>07/01/2021</u>         | through <u>12/31/2021</u> |                            |
|                                |                           | Page <u>4</u> of <u>16</u> |

SEE INSTRUCTIONS ON REVERSE

|   |                            |
|---|----------------------------|
| NAME OF FILER<br><br>No on C! Stop The Recall Of Faaauga Moliga | I.D. NUMBER<br><br>1442358 |
|---|----------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD  | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|--|--|---------------------------------------|
| 12/31/2021         | Natalie Ah Soon<br>Hayward, CA 94545  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Program Manager<br>RAMS, Inc.   | 100.00<br><br>Received through intermediary:<br>ActBlue<br>Cambridge, CA 02138 | 100.00   |                                       |
| 11/21/2021         | Andrew Ah Young<br>South San Francisco, CA 94080-1746   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Scientist<br>Dren Bio   | 300.00<br><br>Received through intermediary:<br>ActBlue<br>Cambridge, CA 02138 | 300.00   |                                       |
| 12/13/2021         | Matthew Alexander<br>San Francisco, CA 94116  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Director of Organizing<br>Faith In Action Bay Area  | 250.00<br><br>Received through intermediary:<br>ActBlue<br>Cambridge, CA 02138 | 250.00   |                                       |
| 11/26/2021         | Micah Ali<br>Compton, CA 90221  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | President<br>Compton United School District   | 500.00<br><br>Received through intermediary:<br>ActBlue<br>Cambridge, CA 02138 | 500.00   |                                       |
| 12/31/2021         | Rolando Bonilla<br>San Jose, CA 95127   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Advisor<br>VSA  | 250.00<br><br>Received through intermediary:<br>ActBlue<br>Cambridge, CA 02138 | 250.00   |                                       |
| <b>SUBTOTAL \$</b> |   |   |   | 1,400.00   |  |                                       |

**Schedule A Summary**

- Amount received this period – itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 17,800.00
- Amount received this period – unitemized monetary contributions of less than \$100 ..... \$ 905.00
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$** 18,705.00

\*Contributor Codes  
 IND – Individual  
 COM – Recipient Committee  
       (other than PTY or SCC)  
 OTH – Other (e.g., business entity)  
 PTY – Political Party  
 SCC – Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                                |            |                                |
|--------------------------------|------------|--------------------------------|
| <b>Statement covers period</b> |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                           | 07/01/2021 |                                |
| through                        | 12/31/2021 | Page <u>5</u> of <u>16</u>     |

|   |                            |
|---|----------------------------|
| NAME OF FILER<br><br>No on C! Stop The Recall Of Faaauga Moliga | I.D. NUMBER<br><br>1442358 |
|---|----------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD   | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|---|--|---------------------------------------|
| 12/28/2021         | Ernest Brown<br>San Francisco, CA 94131   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Psychologist<br>Rams, Inc.  | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 100.00   |                                       |
| 12/22/2021         | Californians for a Diverse and Effective Government (ID# 1386818)<br>San Francisco, CA 94108    | <input type="checkbox"/> IND<br><input checked="" type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 10,000.00   | 10,000.00  |                                       |
| 11/30/2021         | Verna Castro<br>San Leandro, CA 94577   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Program Administrator<br>San Francisco Unified School District                                | 250.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 250.00   |                                       |
| 12/13/2021         | Edward Center<br>San Francisco, CA 94115  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Educational Consultant<br>Self Employed/Same Name   | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 100.00   |                                       |
| 12/31/2021         | Cynthia Cirino<br>Vacaville, CA 95687   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Teacher<br>Vallejo City Unified School District   | 250.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 250.00   |                                       |
| <b>SUBTOTAL \$</b> |   |   |   | 10,700.00   |  |                                       |

\*Contributor Codes  
 IND – Individual  
 COM – Recipient Committee  
     (other than PTY or SCC)  
 OTH – Other (e.g., business entity)  
 PTY – Political Party  
 SCC – Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                                |            |                                |
|--------------------------------|------------|--------------------------------|
| <b>Statement covers period</b> |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                           | 07/01/2021 |                                |
| through                        | 12/31/2021 | Page <u>6</u> of <u>16</u>     |

|   |                            |
|---|----------------------------|
| NAME OF FILER<br><br>No on C! Stop The Recall Of Faauuga Moliga | I.D. NUMBER<br><br>1442358 |
|---|----------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD   | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|---|--|---------------------------------------|
| 12/21/2021         | Moafanua Clan<br>Sparks, NV 89434   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Owner<br>Lumasina LLC   | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small>   | 100.00   |                                       |
| 12/31/2021         | Joshua Davidson<br>San Francisco, CA 94102  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Chef<br>San Francisco Unified<br>School District  | 1,000.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 1,000.00   |                                       |
| 11/30/2021         | Omar Easley<br>Vallejo, CA 94589  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Realtor<br>ReMax  | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small>   | 200.00   |                                       |
| 12/29/2021         | Omar Easley<br>Vallejo, CA 94589  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Realtor<br>ReMax  | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small>   | 200.00   |                                       |
| 11/30/2021         | Jason Finau<br>San Francisco, CA 94122  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Supervising Deputy LPS<br>Conservator<br>City and County of San<br>Francisco                  | 250.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small>   | 250.00   |                                       |
| <b>SUBTOTAL \$</b> |   |   |   | 1,550.00  |  |                                       |

\*Contributor Codes  
 IND – Individual  
 COM – Recipient Committee  
       (other than PTY or SCC)  
 OTH – Other (e.g., business entity)  
 PTY – Political Party  
 SCC – Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                                |            |                                |
|--------------------------------|------------|--------------------------------|
| <b>Statement covers period</b> |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                           | 07/01/2021 |                                |
| through                        | 12/31/2021 | Page <u>7</u> of <u>16</u>     |

|   |                            |
|---|----------------------------|
| NAME OF FILER<br><br>No on C! Stop The Recall Of Faauuga Moliga | I.D. NUMBER<br><br>1442358 |
|---|----------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD   | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|---|--|---------------------------------------|
| 12/05/2021         | Jeff Harris<br>Los Angeles, CA 90043  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Consultant<br>JB Harirs Consulting  | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 100.00   |                                       |
| 12/31/2021         | Jeffery Harris<br>San Francisco, CA 94110   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Chief Executive Officer<br>The Junior Statesmen<br>Foundation                                 | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 100.00   |                                       |
| 12/17/2021         | Carol Hill<br>San Francisco, CA 94110   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Director<br>San Francisco Beacon<br>Initiative  | 250.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 250.00   |                                       |
| 12/13/2021         | Anabell Ibanez<br>San Francisco, CA 94131   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Political Director<br>United Educators Of San<br>Francisco                                    | 250.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 250.00   |                                       |
| 12/02/2021         | Salaia Lohkamp<br>Estacada, OR 97023  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Mail Processing Clerk<br>United States Postal<br>Service                                      | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 100.00   |                                       |
| <b>SUBTOTAL \$</b> |   |   |   | 800.00  |  |                                       |

\*Contributor Codes  
 IND – Individual  
 COM – Recipient Committee  
       (other than PTY or SCC)  
 OTH – Other (e.g., business entity)  
 PTY – Political Party  
 SCC – Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                                |            |                                |
|--------------------------------|------------|--------------------------------|
| <b>Statement covers period</b> |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                           | 07/01/2021 |                                |
| through                        | 12/31/2021 | Page <u>8</u> of <u>16</u>     |

|   |                            |
|---|----------------------------|
| NAME OF FILER<br><br>No on C! Stop The Recall Of Faauuga Moliga | I.D. NUMBER<br><br>1442358 |
|---|----------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(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) |
|--------------------|---|---|---|---|---|------------------------------------|
| 12/31/2021         | Vem Macaraeg<br>South San Francisco, CA 94080   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Registered Nurse<br>Dignity Health  | 250.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 250.00  |                                    |
| 12/31/2021         | Ann Mahina<br>San Francisco, CA 94130   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Case Manager<br>Social Vocational Services  | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 100.00  |                                    |
| 12/05/2021         | Clarissa Maliga<br>Pacifica, CA 94044   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Teacher<br>San Francisco Unified School District  | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 100.00  |                                    |
| 12/29/2021         | Gordon Mar<br>San Francisco, CA 94116   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Member, Board Of Supervisors<br>City And County Of San Francisco                              | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 100.00  |                                    |
| 12/31/2021         | Tomasita Medl<br>San Francisco, CA 94122  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Not Employed<br>N/A   | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 100.00  |                                    |
| <b>SUBTOTAL \$</b> |   |   |   | 650.00  |   |                                    |

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



**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                                |            |                                |
|--------------------------------|------------|--------------------------------|
| <b>Statement covers period</b> |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                           | 07/01/2021 |                                |
| through                        | 12/31/2021 | Page <u>9</u> of <u>16</u>     |

|   |                            |
|---|----------------------------|
| NAME OF FILER<br><br>No on C! Stop The Recall Of Faaauga Moliga | I.D. NUMBER<br><br>1442358 |
|---|----------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD   | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|---|--|---------------------------------------|
| 11/30/2021         | Muaiao Moliga<br>Pago Pago, AS 96799  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Clinical Case Manager<br>Department of Health   | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 100.00   |                                       |
| 12/28/2021         | Gilbert Murillo<br>Capitola, CA 95010   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Management<br>Santa Cruz County   | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 100.00   |                                       |
| 11/30/2021         | Fuifuilupe Niumeitolu<br>Oakland, CA 94603  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Teacher<br>University Of California,<br>Davis   | 200.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 200.00   |                                       |
| 12/01/2021         | Joseph Paaga<br>Manteca, CA 95337   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Move Team Member<br>United Airlines   | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 100.00   |                                       |
| 12/06/2021         | Tangi Paama<br>San Francisco, CA 94124  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Registered Nurse<br>Sutter Health   | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 100.00   |                                       |
| <b>SUBTOTAL \$</b> |   |   |   | 600.00  |  |                                       |

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

# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                                |            |                                |
|--------------------------------|------------|--------------------------------|
| <b>Statement covers period</b> |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                           | 07/01/2021 |                                |
| through                        | 12/31/2021 | Page <u>10</u> of <u>16</u>    |

|   |                            |
|---|----------------------------|
| NAME OF FILER<br><br>No on C! Stop The Recall Of Faauuga Moliga | I.D. NUMBER<br><br>1442358 |
|---|----------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD   | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|---|--|---------------------------------------|
| 12/31/2021         | David Palaita<br>San Francisco, CA 94132  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Associate Professor<br>City College Of San Francisco  | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 100.00   |                                       |
| 12/31/2021         | Warren Palega<br>San Francisco, CA 94134  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Not Employed<br>N/A   | 500.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 500.00   |                                       |
| 12/03/2021         | Ana Petero<br>Fairfield, CA 94534   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Professor<br>Solano Community College   | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 100.00   |                                       |
| 12/31/2021         | Mac Petty<br>San Francisco, CA 94107  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Social Worker<br>Hyde Street Community Services   | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 100.00   |                                       |
| 12/31/2021         | Tutoatasi Pula<br>Portland, OR 97233  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Student<br>N/A  | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 100.00   |                                       |
| <b>SUBTOTAL \$</b> |   |   |   | 900.00  |  |                                       |

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       (other than PTY or SCC)  
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 PTY – Political Party  
 SCC – Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                                |            |                                |
|--------------------------------|------------|--------------------------------|
| <b>Statement covers period</b> |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                           | 07/01/2021 |                                |
| through                        | 12/31/2021 | Page <u>11</u> of <u>16</u>    |

|   |                            |
|---|----------------------------|
| NAME OF FILER<br><br>No on C! Stop The Recall Of Faauuga Moliga | I.D. NUMBER<br><br>1442358 |
|---|----------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD   | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|---|--|---------------------------------------|
| 11/30/2021         | Sharlyne Puletasi<br>Ewa Beach, HI 96706  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Artist<br>Self Employed / Same Name   | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 100.00   |                                       |
| 12/28/2021         | Nelson Saez<br>Soquel, CA 95073   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Licensed Clinical Social Worker<br>Self Employed/Same Name                                    | 250.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 250.00   |                                       |
| 11/30/2021         | UrsulaAnn Siataga<br>San Francisco, CA 94110  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Policy Analyst<br>San Francisco Unified School District                                       | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 100.00   |                                       |
| 11/27/2021         | Susan Solomon<br>San Francisco, CA 94115  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | President<br>United Educators Of San Francisco  | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 100.00   |                                       |
| 11/27/2021         | Sweetie Tagata<br>Fairfield, CA 94533   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Pastor<br>Flaming Word Ministries   | 100.00<br><br><small>Received through intermediary:<br/>ActBlue<br/>Cambridge, CA 02138</small> | 100.00   |                                       |
| <b>SUBTOTAL \$</b> |   |   |   | 650.00  |  |                                       |

\*Contributor Codes  
 IND – Individual  
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       (other than PTY or SCC)  
 OTH – Other (e.g., business entity)  
 PTY – Political Party  
 SCC – Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

|                                |            |                                |
|--------------------------------|------------|--------------------------------|
| <b>Statement covers period</b> |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                           | 07/01/2021 |                                |
| through                        | 12/31/2021 | Page <u>12</u> of <u>16</u>    |

|   |                        |
|---|------------------------|
| NAME OF FILER<br>No on C! Stop The Recall Of Faauuga Moliga | I.D. NUMBER<br>1442358 |
|---|------------------------|

| DATE RECEIVED      | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD  | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|--------------------|---|---|---|--|--|---------------------------------------|
| 11/29/2021         | Kenneth Tray<br>San Francisco, CA 94110   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Not Employed<br>N/A   | 100.00<br><br>Received through intermediary:<br>ActBlue<br>Cambridge, CA 02138 | 100.00   |                                       |
| 11/27/2021         | Meri Veavea<br>Alameda, CA 94501  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Social Worker<br>Asian American Recovery Services   | 250.00<br><br>Received through intermediary:<br>ActBlue<br>Cambridge, CA 02138 | 250.00   |                                       |
| 12/31/2021         | VanCedric Williams<br>Oakland, CA 94611   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Teacher<br>San Francisco Unified School District  | 100.00<br><br>Received through intermediary:<br>ActBlue<br>Cambridge, CA 02138 | 100.00   |                                       |
| 12/31/2021         | Marcia Zorrilla<br>San Francisco, CA 94122  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Public Health Specialist<br>Stanford School Of Medicine                                       | 100.00<br><br>Received through intermediary:<br>ActBlue<br>Cambridge, CA 02138 | 100.00   |                                       |
|                    |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |  |  |                                       |
| <b>SUBTOTAL \$</b> |   |   |   | 550.00   |  |                                       |

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

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

|                         |            |                                |
|-------------------------|------------|--------------------------------|
| Statement covers period |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                    | 07/01/2021 |                                |
| through                 | 12/31/2021 | Page 13 of 16                  |
| I.D. NUMBER             |            | 1442358                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No on C! Stop The Recall Of Faauga Moliga

**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<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| ActBlue Technical Services<br>Cambridge, MA 02138                   | FND  |    |                        | 12.05       |
| ActBlue Technical Services<br>Cambridge, MA 02138                   | FND  |    |                        | 37.53       |
| ActBlue Technical Services<br>Cambridge, MA 02138                   | FND  |    |                        | 69.14       |

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

**SUBTOTAL \$** 118.72

**Schedule E Summary**

|  |                 |                 |
|--|-----------------|-----------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.) .....   | \$              | 3,605.58        |
| 2. Unitemized payments made this period of under \$100 .....   | \$              | 50.00           |
| 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.) ..... | <b>TOTAL \$</b> | <b>3,655.58</b> |

**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                   |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                      | 07/01/2021 |                                |
| through                                   | 12/31/2021 | Page <u>14</u> of <u>16</u>    |
| NAME OF FILER                             |            | I.D. NUMBER                    |
| No on C! Stop The Recall Of Faauga Moliga |            | 1442358                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No on C! Stop The Recall Of Faauga Moliga

**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<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|--|------|----|------------------------|-------------|
| ActBlue Technical Services<br>Cambridge, MA 02138  | FND  |    |                        | 4.94        |
| ActBlue Technical Services<br>Cambridge, MA 02138  | FND  |    |                        | 37.55       |
| ActBlue Technical Services<br>Cambridge, MA 02138  | FND  |    |                        | 7.91        |
| ActBlue Technical Services<br>Cambridge, MA 02138  | FND  |    |                        | 174.87      |
| Hiram Anoai<br>Daly City, CA 94015<br>Payment made through CheckmateHCM, 287 South Main Street, Concord, NH<br>03301 | SAL  |    |                        | 875.28      |

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

**SUBTOTAL \$** 1,100.55

**Schedule E  
(Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

|  |            |                                |
|--|------------|--------------------------------|
| Statement covers period                    |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from                                       | 07/01/2021 |                                |
| through                                    | 12/31/2021 | Page 15 of 16                  |
| NAME OF FILER                              |            | I.D. NUMBER                    |
| No on C! Stop The Recall Of Faauuga Moliga |            | 1442358                        |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No on C! Stop The Recall Of Faauuga Moliga

**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<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)    | CODE | OR | DESCRIPTION OF PAYMENT  | AMOUNT PAID |
|--|------|----|---|-------------|
| CheckmateHCM<br>Concord, NH 03301                                      | SAL  |    |   | 102.85      |
| Donor Stack, LLC<br>Oakland, CA 94607                                  | WEB  |    |   | 180.00      |
| S.E. Owens & Company<br>Oakland, CA 94607                              | PRO  |    |   | 576.95      |
| San Francisco Democratic Party (ID# 742051)<br>San Francisco, CA 94102 | MTG  |    | 12/01/21: Sponsorship of Holiday Party, Candidate in attendance | 500.00      |
| Spotlight Printing<br>San Francisco, CA 94107                          | CMP  |    |   | 1,026.51    |

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

**SUBTOTAL \$** 2,386.31

**Schedule F  
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded  
to whole dollars.

|                         |            |                            |
|-------------------------|------------|----------------------------|
| Statement covers period |            | <b>CALIFORNIA FORM 460</b> |
| from                    | 07/01/2021 |                            |
| through                 | 12/31/2021 | Page 16 of 16              |
| I.D. NUMBER             |            | 1442358                    |

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

No on C! Stop The Recall Of Faauuga Moliga

**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 CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR DESCRIPTION OF PAYMENT   | (a)<br>OUTSTANDING<br>BALANCE BEGINNING<br>OF THIS PERIOD | (b)<br>AMOUNT INCURRED<br>THIS PERIOD | (c)<br>AMOUNT PAID<br>THIS PERIOD<br>(ALSO REPORT ON E) | (d)<br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD |
|--|--|---|---------------------------------------|---|--|
| San Francisco Democratic Party (ID# 742051)<br>San Francisco, CA 94102 | MTG 12/01/21:<br>Sponsorship of Holiday<br>Party, Candidate in<br>attendance | 0.00  | 1,000.00                              | 0.00  | 1,000.00   |
|  |  |   |                                       |   |  |
|  |  |   |                                       |   |  |

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

|                     |        |            |        |          |
|---------------------|--------|------------|--------|----------|
| <b>SUBTOTALS \$</b> | 0.00\$ | 1,000.00\$ | 0.00\$ | 1,000.00 |
|---------------------|--------|------------|--------|----------|

**Schedule F Summary**

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) ..... **INCURRED TOTALS \$** 1,000.00
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) ..... **PAID TOTALS \$** 0.00
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... **NET \$** 1,000.00  
May be a negative number