

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

COVER PAGE

RECEIVED
JUL 31 2018
CITY CLERK'S OFFICE

CALIFORNIA FORM **460**

Page 1 of 200
For Official Use Only

Statement covers period

from 01/01/2018

through 06/30/2018

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.

- | | |
|---|---|
| <input type="checkbox"/> Officeholder, Candidate Controlled Committee | <input type="checkbox"/> Primarily Formed Ballot Measure Committee |
| <input type="radio"/> State Candidate Election Committee | <input type="radio"/> Controlled |
| <input type="radio"/> Recall
<i>(Also Complete Part 5)</i> | <input type="radio"/> Sponsored
<i>(Also Complete Part 6)</i> |
| <input checked="" type="checkbox"/> General Purpose Committee | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee
<i>(Also Complete Part 7)</i> |
| <input checked="" type="radio"/> Sponsored | |
| <input type="radio"/> Small Contributor Committee | |
| <input type="radio"/> Political Party/Central Committee | |

2. Type of Statement:

- | | |
|---|---|
| <input type="checkbox"/> Preelection Statement | <input type="checkbox"/> Quarterly Statement |
| <input checked="" type="checkbox"/> Semi-annual Statement | <input type="checkbox"/> Special Odd-Year Report |
| <input type="checkbox"/> Termination Statement
<i>(Also file a Form 410 Termination)</i> | <input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
| <input type="checkbox"/> Amendment (Explain below) | |

3. Committee Information

I.D. NUMBER
831553

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
San Rafael Police Association Political Action Committee

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
San Rafael	CA	94901	

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE
San Rafael	CA	94915-1557	

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

Ms. Beth Minka

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
San Rafael	CA	94901	

NAME OF ASSISTANT TREASURER, IF ANY

Ms. Stacy E. Owens

MAILING ADDRESS

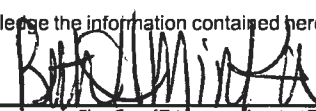
CITY	STATE	ZIP CODE	AREA CODE/PHONE
Oakland	CA	94618	

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 07/31/2018
Date

By 
Signature of Treasurer or Assistant Treasurer

Executed on 07/31/2018
Date

By _____
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

FPPC Form 460 (Jan/2016)

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

www.fppc.ca.gov

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

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

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

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Related Committees Not Included in this Statement: *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

COMMITTEE NAME	I.D. NUMBER
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NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
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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? <input type="checkbox"/> YES <input type="checkbox"/> NO
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COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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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
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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 <input type="checkbox"/> OPPOSE
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NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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Attach continuation sheets if necessary

**Campaign Disclosure Statement
Summary Page**

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>01/01/2018</u> through <u>06/30/2018</u>	CALIFORNIA FORM 460
	Page <u>3</u> of <u>200</u>
I.D. NUMBER 831553	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Rafael Police Association Political Action Committee

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions <i>Schedule A, Line 3</i>	\$ <u>14,736.30</u>	\$ <u>14,736.30</u>
2. Loans Received <i>Schedule B, Line 3</i>	<u>0.00</u>	<u>0.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS <i>Add Lines 1 + 2</i>	\$ <u>14,736.30</u>	\$ <u>14,736.30</u>
4. Nonmonetary Contributions <i>Schedule C, Line 3</i>	<u>0.00</u>	<u>0.00</u>
5. TOTAL CONTRIBUTIONS RECEIVED <i>Add Lines 3 + 4</i>	\$ <u>14,736.30</u>	\$ <u>14,736.30</u>

**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 TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made <i>Schedule E, Line 4</i>	\$ <u>2,230.57</u>	\$ <u>2,230.57</u>
7. Loans Made <i>Schedule H, Line 3</i>	<u>0.00</u>	<u>0.00</u>
8. SUBTOTAL CASH PAYMENTS <i>Add Lines 6 + 7</i>	\$ <u>2,230.57</u>	\$ <u>2,230.57</u>
9. Accrued Expenses (Unpaid Bills) <i>Schedule F, Line 3</i>	<u>146.35</u>	<u>146.35</u>
10. Nonmonetary Adjustment <i>Schedule C, Line 3</i>	<u>0.00</u>	<u>0.00</u>
11. TOTAL EXPENDITURES MADE <i>Add Lines 8 + 9 + 10</i>	\$ <u>2,376.92</u>	\$ <u>2,376.92</u>

**Expenditure Limit Summary for State
Candidates**

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

Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____

Current Cash Statement

12. Beginning Cash Balance <i>Previous Summary Page, Line 16</i>	\$ <u>82,756.79</u>
13. Cash Receipts <i>Column A, Line 3 above</i>	<u>14,736.30</u>
14. Miscellaneous Increases to Cash <i>Schedule I, Line 4</i>	<u>4.30</u>
15. Cash Payments <i>Column A, Line 8 above</i>	<u>2,230.57</u>
16. ENDING CASH BALANCE <i>Add Lines 12 + 13 + 14, then subtract Line 15</i>	\$ <u>95,266.82</u>

If this is a termination statement, Line 16 must be zero.

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.

17. LOAN GUARANTEES RECEIVED <i>Schedule B, Part 2</i>	\$ <u>0.00</u>
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents <i>See instructions on reverse</i>	\$ <u>0.00</u>
19. Outstanding Debts <i>Add Line 2 + Line 9 in Column B above</i>	\$ <u>146.35</u>

**Schedule A
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 4 of 200

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Rafael Police Association Political Action Committee

I.D. NUMBER

831553

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I D NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
01/15/2018	Elisha Adams C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
01/31/2018	Elisha Adams C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
02/15/2018	Elisha Adams C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
02/28/2018	Elisha Adams C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
03/15/2018	Elisha Adams C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
SUBTOTAL \$				81.50		

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 14,582.20
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 154.10
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 14,736.30

*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.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page <u>5</u> of <u>200</u>

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I D NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
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04/15/2018	Elisha Adams C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
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SUBTOTAL \$				81.50		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page <u>6</u> of <u>200</u>

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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02/15/2018	Raul Aguilar C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sergeant City of San Rafael	16.30	195.60	
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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page <u>7</u> of <u>200</u>

NAME OF FILER San Rafael Police Association Political Action Committee	I.D NUMBER 831553
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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
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01/15/2018	Anthony Augustyn C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page <u>9</u> of <u>200</u>

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03/15/2018	Anthony Augustyn C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
03/31/2018	Anthony Augustyn C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
SUBTOTAL \$				81.50		

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 (other than PTY or SCC)
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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 10 of 200

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
---	---------------------------

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
04/15/2018	Anthony Augustyn C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
04/30/2018	Anthony Augustyn C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
05/15/2018	Anthony Augustyn C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
05/31/2018	Anthony Augustyn C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
06/15/2018	Anthony Augustyn C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
SUBTOTAL \$				81.50		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 11 of 200

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
06/30/2018	Anthony Augustyn C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
01/15/2018	James Bellamy C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Corporal City of San Rafael	16.30	195.60	
01/31/2018	James Bellamy C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Corporal City of San Rafael	16.30	195.60	
02/15/2018	James Bellamy C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Corporal City of San Rafael	16.30	195.60	
02/28/2018	James Bellamy C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Corporal City of San Rafael	16.30	195.60	
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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 12 of 200

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
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03/31/2018	James Bellamy C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Corporal City of San Rafael	16.30	195.60	
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04/30/2018	James Bellamy C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Corporal City of San Rafael	16.30	195.60	
05/15/2018	James Bellamy C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Corporal City of San Rafael	16.30	195.60	
SUBTOTAL \$				81.50		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 13 of 200

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I D NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
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06/15/2018	James Bellamy C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Corporal City of San Rafael	16.30	195.60	
06/30/2018	James Bellamy C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Corporal City of San Rafael	16.30	195.60	
01/15/2018	Todd Berringer C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sergeant City of San Rafael	16.30	195.60	
01/31/2018	Todd Berringer C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sergeant City of San Rafael	16.30	195.60	
SUBTOTAL \$				81.50		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER	I.D. NUMBER
San Rafael Police Association Political Action Committee	831553

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/15/2018	Todd Berringer C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sergeant City of San Rafael	16.30	195.60	
02/28/2018	Todd Berringer C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sergeant City of San Rafael	16.30	195.60	
03/15/2018	Todd Berringer C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sergeant City of San Rafael	16.30	195.60	
03/31/2018	Todd Berringer C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sergeant City of San Rafael	16.30	195.60	
04/15/2018	Todd Berringer C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sergeant City of San Rafael	16.30	195.60	
SUBTOTAL \$				81.50		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 15 of 200

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
04/30/2018	Todd Berringer C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sergeant City of San Rafael	16.30	195.60	
05/15/2018	Todd Berringer C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sergeant City of San Rafael	16.30	195.60	
05/31/2018	Todd Berringer C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sergeant City of San Rafael	16.30	195.60	
06/15/2018	Todd Berringer C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sergeant City of San Rafael	16.30	195.60	
06/30/2018	Todd Berringer C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sergeant City of San Rafael	16.30	195.60	
SUBTOTAL \$				81.50		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 16 of 200

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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01/15/2018	Lynne Bracken C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Call Taker & Records Specialist City of San Rafael	12.70	152.40	
01/31/2018	Lynne Bracken C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Call Taker & Records Specialist City of San Rafael	12.70	152.40	
02/15/2018	Lynne Bracken C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Call Taker & Records Specialist City of San Rafael	12.70	152.40	
02/28/2018	Lynne Bracken C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Call Taker & Records Specialist City of San Rafael	12.70	152.40	
03/15/2018	Lynne Bracken C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Call Taker & Records Specialist City of San Rafael	12.70	152.40	
SUBTOTAL \$				63.50		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 17 of 200

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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05/15/2018	Lynne Bracken C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Call Taker & Records Specialist City of San Rafael	12.70	152.40	
05/31/2018	Lynne Bracken C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Call Taker & Records Specialist City of San Rafael	12.70	152.40	
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Schedule A (Continuation Sheet)
Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 18 of 200

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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06/30/2018	Lynne Bracken C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Call Taker & Records Specialist City of San Rafael	12.70	152.40	
01/15/2018	Zachary Brickell C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City Of San Rafael	16.30	195.60	
01/31/2018	Zachary Brickell C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City Of San Rafael	16.30	195.60	
02/15/2018	Zachary Brickell C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City Of San Rafael	16.30	195.60	
SUBTOTAL \$				74.30		

*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.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 19 of 200

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/28/2018	Zachary Brickell C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City Of San Rafael	16.30	195.60	
03/15/2018	Zachary Brickell C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City Of San Rafael	16.30	195.60	
03/31/2018	Zachary Brickell C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City Of San Rafael	16.30	195.60	
04/15/2018	Zachary Brickell C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City Of San Rafael	16.30	195.60	
04/30/2018	Zachary Brickell C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City Of San Rafael	16.30	195.60	
SUBTOTAL \$				81.50		

*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.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 20 of 200

NAME OF FILER	I.D. NUMBER
San Rafael Police Association Political Action Committee	831553

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
05/15/2018	Zachary Brickell C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City Of San Rafael	16.30	195.60	
05/31/2018	Zachary Brickell C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City Of San Rafael	16.30	195.60	
06/15/2018	Zachary Brickell C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City Of San Rafael	16.30	195.60	
06/30/2018	Zachary Brickell C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City Of San Rafael	16.30	195.60	
01/31/2018	Rudolf Buhlman C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Recruit City Of San Rafael	12.70	143.30	
SUBTOTAL \$				77.90		

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 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.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 21 of 200

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
---	-----------------------

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/15/2018	Rudolf Buhlman C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Recruit City Of San Rafael	12.70	143.30	
02/28/2018	Rudolf Buhlman C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Recruit City Of San Rafael	12.70	143.30	
03/15/2018	Rudolf Buhlman C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Recruit City Of San Rafael	12.70	143.30	
03/31/2018	Rudolf Buhlman C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Recruit City Of San Rafael	12.70	143.30	
04/15/2018	Rudolf Buhlman C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Recruit City Of San Rafael	12.70	143.30	
SUBTOTAL \$				63.50		

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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.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page <u>22</u> of <u>200</u>
NAME OF FILER		I.D. NUMBER
San Rafael Police Association Political Action Committee		831553

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
04/30/2018	Rudolf Buhlman C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Recruit City Of San Rafael	12.70	143.30	
05/15/2018	Rudolf Buhlman C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Recruit City Of San Rafael	12.70	143.30	
05/31/2018	Rudolf Buhlman C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Recruit City Of San Rafael	12.70	143.30	
06/15/2018	Rudolf Buhlman C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Recruit City Of San Rafael	12.70	143.30	
06/30/2018	Rudolf Buhlman C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Recruit City Of San Rafael	16.30	143.30	
SUBTOTAL \$				67.10		

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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.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
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NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
01/15/2018	Antonette Bullock C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Community Service Officer City of San Rafael	12.70	152.40	
01/31/2018	Antonette Bullock C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Community Service Officer City of San Rafael	12.70	152.40	
02/15/2018	Antonette Bullock C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Community Service Officer City of San Rafael	12.70	152.40	
02/28/2018	Antonette Bullock C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Community Service Officer City of San Rafael	12.70	152.40	
03/15/2018	Antonette Bullock C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Community Service Officer City of San Rafael	12.70	152.40	
SUBTOTAL \$				63.50		

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 (other than PTY or SCC)
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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.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page <u>24</u> of <u>200</u>

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
03/31/2018	Antonette Bullock C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Community Service Officer City of San Rafael	12.70	152.40	
04/15/2018	Antonette Bullock C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Community Service Officer City of San Rafael	12.70	152.40	
04/30/2018	Antonette Bullock C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Community Service Officer City of San Rafael	12.70	152.40	
05/15/2018	Antonette Bullock C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Community Service Officer City of San Rafael	12.70	152.40	
05/31/2018	Antonette Bullock C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Community Service Officer City of San Rafael	12.70	152.40	
SUBTOTAL \$				63.50		

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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.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 25 of 200

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
06/15/2018	Antonette Bullock C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Community Service Officer City of San Rafael	12.70	152.40	
06/30/2018	Antonette Bullock C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Community Service Officer City of San Rafael	12.70	152.40	
01/15/2018	Michael Byers C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of San Rafael	16.30	195.60	
01/31/2018	Michael Byers C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of San Rafael	16.30	195.60	
02/15/2018	Michael Byers C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of San Rafael	16.30	195.60	
SUBTOTAL \$				74.30		

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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.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
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NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/28/2018	Michael Byers C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of San Rafael	16.30	195.60	
03/15/2018	Michael Byers C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of San Rafael	16.30	195.60	
03/31/2018	Michael Byers C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of San Rafael	16.30	195.60	
04/15/2018	Michael Byers C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of San Rafael	16.30	195.60	
04/30/2018	Michael Byers C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of San Rafael	16.30	195.60	
SUBTOTAL \$				81.50		

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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 A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page <u>27</u> of <u>200</u>

NAME OF FILER San Rafael Police Association Political Action Committee	I.D NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I D NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/15/2018	Michael Byers C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of San Rafael	16.30	195.60	
05/31/2018	Michael Byers C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of San Rafael	16.30	195.60	
06/15/2018	Michael Byers C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of San Rafael	16.30	195.60	
06/30/2018	Michael Byers C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer City of San Rafael	16.30	195.60	
01/15/2018	Shelly Cade C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Dispatcher City of San Rafael	12.70	152.40	
SUBTOTAL \$				77.90		

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 (other than PTY or SCC)
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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 28 of 200

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
01/31/2018	Shelly Cade C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Dispatcher City of San Rafael	12.70	152.40	
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02/28/2018	Shelly Cade C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Dispatcher City of San Rafael	12.70	152.40	
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03/31/2018	Shelly Cade C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Dispatcher City of San Rafael	12.70	152.40	
SUBTOTAL \$				63.50		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 29 of 200

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 30 of 200

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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SUBTOTAL \$				77.90		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page <u>31</u> of <u>200</u>

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
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SUBTOTAL \$				81.50		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page <u>32</u> of <u>200</u>

NAME OF FILER San Rafael Police Association Political Action Committee	ID NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
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SUBTOTAL \$				81.50		

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

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 33 of 200

NAME OF FILER	I.D. NUMBER
San Rafael Police Association Political Action Committee	831553

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 34 of 200
NAME OF FILER		I.D. NUMBER
San Rafael Police Association Political Action Committee		831553

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page <u>35</u> of <u>200</u>

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 36 of 200

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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SUBTOTAL \$				81.50		

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 (other than PTY or SCC)
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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page <u>37</u> of <u>200</u>

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
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01/15/2018	Edward Chiu C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page <u>38</u> of <u>200</u>

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/28/2018	Edward Chiu C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 39 of 200

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I D NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
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01/15/2018	Robert Cleland C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Corporal City of San Rafael	16.30	195.60	
SUBTOTAL \$				81.50		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 40 of 200

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page <u>41</u> of <u>200</u>

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page <u>42</u> of <u>200</u>

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTER I D NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
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02/15/2018	Christopher Coale C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sergeant City of San Rafael	16.30	195.60	
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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
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NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
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NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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01/15/2018	Thomas Collins C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
01/31/2018	Thomas Collins C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
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Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
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NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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02/28/2018	Thomas Collins C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
03/15/2018	Thomas Collins C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
03/31/2018	Thomas Collins C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
04/15/2018	Thomas Collins C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
SUBTOTAL \$				81.50		

*Contributor Codes
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COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 46 of 200

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTER I D NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
04/30/2018	Thomas Collins C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
05/15/2018	Thomas Collins C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
05/31/2018	Thomas Collins C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
06/15/2018	Thomas Collins C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
06/30/2018	Thomas Collins C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
SUBTOTAL \$				81.50		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 47 of 200

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTER ID NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
01/15/2018	Jenna Cotta c/o San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Communications Dispatcher City of San Rafael	12.70	152.40	
01/31/2018	Jenna Cotta c/o San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Communications Dispatcher City of San Rafael	12.70	152.40	
02/15/2018	Jenna Cotta c/o San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Communications Dispatcher City of San Rafael	12.70	152.40	
02/28/2018	Jenna Cotta c/o San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Communications Dispatcher City of San Rafael	12.70	152.40	
03/15/2018	Jenna Cotta c/o San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Communications Dispatcher City of San Rafael	12.70	152.40	
SUBTOTAL \$				63.50		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 48 of 200

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
03/31/2018	Jenna Cotta c/o San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Communications Dispatcher City of San Rafael	12.70	152.40	
04/15/2018	Jenna Cotta c/o San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Communications Dispatcher City of San Rafael	12.70	152.40	
04/30/2018	Jenna Cotta c/o San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Communications Dispatcher City of San Rafael	12.70	152.40	
05/15/2018	Jenna Cotta c/o San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Communications Dispatcher City of San Rafael	12.70	152.40	
05/31/2018	Jenna Cotta c/o San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Communications Dispatcher City of San Rafael	12.70	152.40	
SUBTOTAL \$				63.50		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page <u>49</u> of <u>200</u>

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
06/15/2018	Jenna Cotta c/o San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Communications Dispatcher City of San Rafael	12.70	152.40	
06/30/2018	Jenna Cotta c/o San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Communications Dispatcher City of San Rafael	12.70	152.40	
01/15/2018	Ryan De Marta C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
01/31/2018	Ryan De Marta C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
02/15/2018	Ryan De Marta C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
SUBTOTAL \$				74.30		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	06/30/2018	Page 50 of 200

NAME OF FILER San Rafael Police Association Political Action Committee	I.D. NUMBER 831553
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/28/2018	Ryan De Marta C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
03/15/2018	Ryan De Marta C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
03/31/2018	Ryan De Marta C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
04/15/2018	Ryan De Marta C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
04/30/2018	Ryan De Marta C/o: San Rafael Police Association 1520 Fifth Avenue San Rafael, CA 94901 Union member's dues received through intermediary: San Rafael Police Association, 1520 Fifth Avenue, San Rafael, CA 94901	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Officer City of San Rafael	16.30	195.60	
SUBTOTAL \$				81.50		

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