

**Recipient Committee  
Campaign Statement  
Cover Page**

Date Stamp <b>RECEIVED</b>  SEP 23 2018  SONOMA CITY CLERK	<b>CALIFORNIA FORM 460</b>
	Page <u>1</u> of <u>7</u>
	For Official Use Only

Statement covers period from <u>7/1/18</u>  through <u>9/22/18</u>	Date of election if applicable: (Month, Day, Year)  <u>11/6/18</u>
-----------------------------------------------------------------------------	-----------------------------------------------------------------------------

SEE INSTRUCTIONS ON REVERSE

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

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

**2. Type of Statement:**

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

**3. Committee Information**

I.D. NUMBER  
1407666

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
Friends of Rachel Hundley for City Council 2018

STREET ADDRESS (NO P.O. BOX)

[REDACTED]

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Sonoma	CA	95476	(707)999-8394

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

PO Box 648

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Sonoma	CA	95476	(707)999-8394

OPTIONAL: FAX / E-MAIL ADDRESS

friendsofrachelhundley@gmail.com

**Treasurer(s)**

NAME OF TREASURER  
Rachel Hundley

MAILING ADDRESS  
PO Box 684

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Sonoma	CA	95476	(707)999-8394

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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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 9/27/18  
Date

Executed on 9/27/18  
Date

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

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

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

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

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

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

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE  
Rachel Hundley

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)  
City Council Member, City of Sonoma

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP  
[REDACTED] Sonoma, CA 95476

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

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

  

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

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE

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

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

*Attach continuation sheets if necessary*

**Campaign Disclosure Statement  
Summary Page**

Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>7/1/18</u> through <u>9/22/18</u>	<b>CALIFORNIA FORM</b>	<b>460</b>
	Page <u>3</u> of <u>7</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Rachel Hundley

I.D. NUMBER

1407666

**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>11,878.99</u>	\$ <u>11,878.99</u>
2. Loans Received..... <i>Schedule B, Line 3</i>	\$ <u>1,070.00</u>	\$ <u>1,070.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS..... <i>Add Lines 1 + 2</i>	\$ <u>12,948.99</u>	\$ <u>12,948.99</u>
4. Nonmonetary Contributions..... <i>Schedule C, Line 3</i>	\$ <u>1,279.85</u>	\$ <u>1,279.85</u>
5. TOTAL CONTRIBUTIONS RECEIVED..... <i>Add Lines 3 + 4</i>	\$ <u>14,228.84</u>	\$ <u>14,228.84</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>1,300.98</u>	\$ <u>1,300.98</u>
7. Loans Made..... <i>Schedule H, Line 3</i>	\$ <u>0</u>	\$ <u>0</u>
8. SUBTOTAL CASH PAYMENTS..... <i>Add Lines 6 + 7</i>	\$ <u>1,300.98</u>	\$ <u>1,300.98</u>
9. Accrued Expenses (Unpaid Bills)..... <i>Schedule F, Line 3</i>	\$ <u>0</u>	\$ <u>0</u>
10. Nonmonetary Adjustment..... <i>Schedule C, Line 3</i>	\$ <u>1,281.85</u>	\$ <u>1,279.85</u>
11. TOTAL EXPENDITURES MADE..... <i>Add Lines 8 + 9 + 10</i>	\$ <u>2,582.83</u>	\$ <u>2,582.83</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>	\$ _____
13. Cash Receipts..... <i>Column A, Line 3 above</i>	\$ <u>12,948.99</u>
14. Miscellaneous Increases to Cash..... <i>Schedule I, Line 4</i>	\$ <u>0</u>
15. Cash Payments..... <i>Column A, Line 8 above</i>	\$ <u>1,300.98</u>
16. ENDING CASH BALANCE..... <i>Add Lines 12 + 13 + 14, then subtract Line 15</i>	\$ <u>11,348.45</u>

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

17. LOAN GUARANTEES RECEIVED..... <i>Schedule B, Part 2</i>	\$ <u>0</u>
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**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents..... <i>See instructions on reverse</i>	\$ <u>0</u>
19. Outstanding Debts..... <i>Add Line 2 + Line 9 in Column B above</i>	\$ <u>1,070.00</u>

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.

**Schedule A  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A

Statement covers period from <u>7/1/18</u> through <u>9/22/18</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>4</u> of <u>7</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Rachel Hundley	I.D. NUMBER 1407666
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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)
7/16/2018	Bill Dodd for Senate 2020 PO Box 5482 Napa, CA 94581 FPPC No. 1392482	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		200	200	
7/26/2018	Mike McGuire for State Senate 2018 369B 3rd St., Ste. 652 San Rafael, CA 94901 FPPC No. 1373364	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		200	200	
7/26/2018	Mike Thompson for Congress PO Box 10541 Napa, CA 94581 FEC ID No. C00326363	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		200	200	
8/17/2018	Jim Wood for Assembly 2018 401 Center St., #18 Healdsburg, CA 95448 FPPC No. 1392333	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		200	200	
9/20/18	Northern California Carpenters Regional Council Oakland, CA 94621 FPPC No. 972104	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		200	200	

**SUBTOTAL \$ 1000.00**

**Schedule A Summary**

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) .....	\$ 9777.00
2. Amount received this period – unitemized monetary contributions of less than \$100 .....	\$ 2101.99
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.).....	<b>TOTAL \$ 11878.99</b>

\*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

DATE RECEIVED	FIRST NAME	LAST NAME	ADDRESS	CITY	STATE	ZIP CODE	CODE	OCCUPATION	EMPLOYER	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED
8/12/2018	Marge Evans			Sonoma	CA	94576	IND	Retired	Retired	100	100
8/12/2018	Audrey & Ron Chapman			Sonoma	CA	95476	IND	Retired	Retired	100	100
8/12/2018	W. Harris			Sonoma	CA	95476	IND	Retired	Retired	100	100
8/12/2018	Tom & Irene McHugh			Sonoma	CA	95476	IND	Retired	Retired	100	100
8/12/2018	Marge Evans			Sonoma	CA	95476	IND	Retired	Retired	100	200
									Redwood Credit		
8/12/2018	Sheila O'Neil			Sonoma	CA	95476	IND	Mortgage Banker	Union	200	200
8/12/2018	Amy Harrington Sandoval			Sonoma	CA	95476	IND	Attorney	Harrington Law, PC	200	200
									David B. Wells		
8/12/2018	David Wells			Sonoma	CA	95476	IND	Marketing	Consulting	200	200
8/12/2018	Karen & Mike Carroll			Sonoma	CA	95476	IND	Retired	Retired	200	200
									Hospitality		
8/12/2018	Pat Howard			Sonoma	CA	95476	IND	Management	Andaz Hotel	200	200
									Golden Gate		
8/12/2018	Julie Leitzell			Sonoma	CA	95476	IND	Realtor	Sothebeys	200	200
8/12/2018	Jim & Christine Bohar			Sonoma	CA	95476	IND	Investor	Self employed	200	200
8/12/2018	Mirja & John Muncy			Sonoma	CA	95476	IND	Retired	Retired	200	200
8/12/2018	Jonathan Clark			Sonoma	CA	95476	IND	Self Employed	Self Employed	200	200
8/13/2018	Kathy King			Sonoma	CA	94127	IND	Executive Director	Sonoma	\$100.00	\$100.00
									Overnight Support		
8/20/2018	Brett Wilkins Wakako Uritani			San Francisco	CA	94117	IND	Legal Assistant	Lunski Law	\$100.00	\$100.00
8/20/2018	Erich Pearson			San Francisco	CA	94928	IND	CEO	SPARC	\$200.00	\$200.00
8/20/2018	Joseph J Palla			California	CA	95425	IND	Retired	Retired	\$200.00	\$200.00
8/20/2018	Bob Edwards			Sonoma	CA	95476	IND	Attorney/Mediator	Self	\$100.00	\$100.00
8/20/2018	Karin Skooglund			Sonoma	CA	95476	IND	Publicist	Retired	\$200.00	\$200.00
8/22/2018	ROBERT Karen Smith			Sonoma	CA	95467	IND	Attorney	Self	\$100.00	\$100.00
8/25/2018	Todd Evans			Sonoma	CA	94576	IND	Retired	Retired	100	100
8/25/2018	Ted Elliot Jr.			Sonoma	CA	95476	IND	Retired	Retired	100	100
8/25/2018	Karen Elliot			Sonoma	CA	95476	IND	Retired	Retired	100	100
8/25/2018	Ken Gross			Sonoma	CA	95476	IND	Attorney	Self employed	100	100
									St Frances Solano		
8/25/2018	Una Dockery			Sonoma	CA	95476	IND	Teacher	School	100	100
8/25/2018	Vic Conforti			Sonoma	CA	95476	IND	Architect	Self employed	200	200
8/25/2018	Art Grandy			Sonoma	CA	95476	IND	Retired	Retired	200	200
8/25/2018	Margaret Grandy			Sonoma	CA	95476	IND	Retired	Retired	200	200
8/25/2018	Thale MacRostie			Sonoma	CA	95476	IND	Retired	Retired	200	200
8/25/2018	Steve MacRostie			Sonoma	CA	95476	IND	Winemaker	MacRostie Wines	200	200
8/25/2018	Katherine Conforti			Sonoma	CA	95476	IND	Retired	Retired	200	200
8/27/2018	Cathy Wade Shepard			Sonoma	CA	95476	IND	Real Estate Broker	Sotheby's International Realty	\$100.00	\$100.00
8/28/2018	Jorge Avila			Merritt Island	FL	32952	IND	Pilot	Delta Air Lines	\$100.00	\$100.00
8/28/2018	Susan Rosenberg			Palo Alto	CA	94306	IND	Retired	Retired	\$200.00	\$200.00

DATE RECEIVED	FIRST NAME	LAST NAME	ADDRESS	CITY	STATE	ZIP CODE	CODE	OCCUPATION	EMPLOYER	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE AMOUNT RECEIVED
8/28/2018	Joshua	Glasman		San Francisco	CA	94102	IND	Software	Citrix	\$100.00	\$100.00
8/28/2018	Robert	Chandler		Seattle	WA	98024	IND	Self Employed	Self Employed	\$100.00	\$100.00
8/28/2018	Doug	Kelly		San Anselmo	CA	94960	IND	Computer Sales	Performance POS	\$100.00	\$100.00
8/28/2018	Michael H	Kieschnick		Palo Alto	CA	94301	IND	Activist	Self Employed	\$100.00	\$100.00
8/28/2018	Paul	Mariano		Martinez	CA	94553	IND	Documentary Filmmaker	Self Employed	\$200.00	\$200.00
8/28/2018	Nicholas	Butterworth		New York	NY	10013	IND	Digital Media Executive	Time Inc	\$100.00	\$100.00
8/29/2018	Deborah	Danielewicz		San Jose	CA	95125	IND	Maker	Self Employed	\$100.00	\$100.00
8/29/2018	John	Brand		Port Hueneme	CA	93020	IND	Management Analyst	Retired	\$100.00	\$100.00
8/31/2018	Catherine	O'Neil		Sonoma	CA	95476	IND	Retired	Retired	200	200
8/31/2018	Ted	Elliot Sr.		Sonoma	CA	94576	IND	US Ambassador	Retired	200	200
8/31/2018	Chris	Cooke		Mayflower	AR	72106	IND	Retired	Retired	\$100.00	\$100.00
8/31/2018	TIM	NEWCOMB		ROCHESTER	MI	48306	IND	Strategic Technology Manager	Lubrizol	\$200.00	\$200.00
9/2/2018	John	Fletcher		Boca Raton	FL	33487	IND	Entrepreneur	SK Crescent	\$100.00	\$100.00
9/2/2018	Karen	Moran		Washington	DC	20015	IND	Retired	Retired	\$100.00	\$100.00
9/3/2018	Sarah	Stierch		SONOMA	CA	95476	IND	Writer	Self	\$150.00	\$150.00
9/4/2018	Matisse	Enzer		San Francisco	CA	94110-6216	IND	Software	Apple Inc.	\$100.00	\$100.00
9/7/2018	Sam	Ghods		San Francisco	CA	94103	IND	Cofounder	Box, Inc.	\$200.00	\$200.00
9/10/2018	Jeffrey	Gray		Claremont	CA	91711	IND	Entertainer/ Medical Educator	Self Employed	\$127.00	\$127.00
9/11/2018	Martin J.	Bennett		Sonoma	CA	95476	IND	Instructor	Santa Rosa Junior College	\$100.00	\$100.00
9/12/2018	Robert	Nowicki		Pasadena	CA	91101	IND	Software	Caltech	\$200.00	\$200.00
9/14/2018	John	Godfrey		Sonoma	CA	95476	IND	VP, Creative Director	Meredith Corp.	\$200.00	\$200.00
9/16/2018	Terry	Birt		Sonoma	CA	95476	IND	Realtor		100	100
9/16/2018	Karen	Collins		Sonoma	CA	95476	IND	Retired	Retired	100	100
9/27/2018	Ronita	Kalyk		Sonoma	CA	95476	IND	Retired	Retired	100	100
9/27/2018	Sandy	peterson		Sonoma	CA	95476	IND	Retired	Retired	200	200
<b>Subtotal:</b>										<b>\$8,777.00</b>	

# Schedule B – Part 1 Loans Received

Amounts may be rounded  
to whole dollars.

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	7/1/18	
through	9/22/18	Page <u>5</u> of <u>7</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Rachel Hundley

I.D. NUMBER

1407666

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Sean Hamlin [REDACTED] Sonoma CA 95476  † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Campaign Manager, Jim Wood for Assembly 2018	\$ 200	\$ 200	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ 200  DATE DUE _____	_____% RATE \$ _____	\$ 200  6/19/18 DATE INCURRED	CALENDAR YEAR \$ 200 PER ELECTION** \$ _____
Sean Hamlin [REDACTED] Sonoma CA 95476  † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Campaign Manager, Jim Wood for Assembly	\$ _____	\$ 870	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ 870  DATE DUE _____	_____% RATE \$ _____	\$ 870  8/8/18 DATE INCURRED	CALENDAR YEAR \$ 1070 PER ELECTION** \$ _____
   † <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____  DATE DUE _____	_____% RATE \$ _____	\$ _____  DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
<b>SUBTOTALS \$</b>								

## Schedule B Summary

(Enter (e) on  
Schedule E, Line 3)

- Loans received this period ..... \$ 1,070  
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period ..... \$ \_\_\_\_\_  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (**Subtract** Line 2 from Line 1.) ..... **NET \$** 1070  
Enter the net here and on the Summary Page, Column A, Line 2. (May be a negative number)

†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

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

\*\* If required.

**Schedule C  
Nonmonetary Contributions Received**

Amounts may be rounded to whole dollars.

SCHEDULE C

Statement covers period from <u>7/1/18</u> through <u>9/22/18</u>	<b>CALIFORNIA FORM 460</b>
Page <u>6</u> of <u>7</u>	I.D. NUMBER <b>1407666</b>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Rachel Hundley

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
9/13/18	SALLY TOMATOES CATERING HEADQUARTERS 1100 VALLEY HOUSE DRIVE ROHNERT PARK, CA 94928	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Food for campaign event	525	525	
9/11/18	OPERATING ENGINEERS LOCAL UNION 3 DISTRICT 10 PAC FPPC #891395	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		In-kind contribution for signs from approved printer	500	500	
9/13/18	Kimberly Blattner [REDACTED] Sonoma, CA 95476	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	Beverages at campaign event	200	200	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL \$ 1225.00**

**Schedule C Summary**

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.).....	\$ 1225.00
2. Amount received this period – unitemized nonmonetary contributions of less than \$100 .....	\$ 54.85
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.).....	<b>TOTAL \$ 1279.85</b>

**\*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 E  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	7/1/18	
through	9/22/18	Page <u>7</u> of <u>7</u>
NAME OF FILER		I.D. NUMBER
Rachel Hundley		1407666

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |                                                                   |                                               |                                                               |
|-------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants                                          | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations                                               | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events                                            | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense                                                 | PRO professional services (legal, accounting) | VOT voter registration                                        |
| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
DigitalXpress 401 Center St Healdsburg, CA 95448	CMP		233.33
Staples 977 West Napa St. Sonoma, CA 95476	LIT		268.26
Rally.org 995 Market Street, 2nd Floor San Francisco, CA 94105		Transaction fees	468.53

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

**SUBTOTAL \$** 970.01

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$	970.01
2. Unitemized payments made this period of under \$100.....	\$	330.97
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$	
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	<b>TOTAL \$</b>	1300.98