Recipient Committee
Campaign Statement
(Government Code Sections 84200-84216.5)

Statement covers period
from 07/01/2014 through 09/30/2014

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

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.
   - [X] Officeholder, Candidate Controlled Committee
   - O State Candidate Election Committee
   - O Recall
     (Also Complete Part 5.)
   - O General Purpose Committee
     - Sponsored
     - Small Contributor Committee
     - Political Party/Central Committee
   - O Ballot Measure Committee
     - Primary Formed
     - Controlled
     - Sponsored
     (Also Complete Part 6.)
   - O Primary Formed Candidate/Officeholder Committee
     (Also Complete Part 7.)

2. Type of Statement:
   - O Pre-election Statement
   - O Semi-annual Statement
   - X Quarterly Statement
   - O Special Odd-Year Report
   - O Supplemental Preelection Statement - Attach Form 495

3. Committee Information

   COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
   Pauline Cutter for San Leandro Mayor 2014

   I.D. NUMBER
   1357155

   STREET ADDRESS (NO P.O. BOX)
   San Leandro, CA 94557

   MAILING ADDRESS
   San Leandro, CA 94577 (510) 895-2011

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

   CITY
   STATE
   ZIP CODE
   AREA CODE/PHONE

   OPTIONAL: FAX/MAIL ADDRESS
   (510) 895-2018
   kpocnca@spyrnet.com

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 10/06/2014
By

SIGNATURE OF TREASURER OR ASSISTANT TREASURER

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROONENT OR RESPONSIBLE OFFICER OF SPONSOR

Executed on 10/06/2014
By

Executed on
By

Executed on
By

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROONENT

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROONENT

FPPC Form 460 (JAN/95)
FPPC Toll-Free Helpline: 866/ASK-FPPC
State of California
5. Officeholder or Candidate Controlled Committee

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>Pauline Cutter</th>
</tr>
</thead>
<tbody>
<tr>
<td>OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)</td>
<td>Mayor City of San Leandro</td>
</tr>
<tr>
<td>RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)</td>
<td>San Leandro CA 94577</td>
</tr>
</tbody>
</table>

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 to make expenditures on behalf of your candidacy.

<table>
<thead>
<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>NAME OF TREASURER</th>
<th>CONTROLLED COMMITTEE?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐ YES ☐ NO</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>COMMITTEE ADDRESS</th>
<th>STREET ADDRESS (NO P.O. BOX)</th>
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<tbody>
<tr>
<td>CITY</td>
<td>STATE ZIP CODE AREA CODE/PHONE</td>
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</table>

6. Ballot Measure Committee

<table>
<thead>
<tr>
<th>NAME OF BALLOT MEASURE</th>
<th>BALLOT NO. OR LETTER</th>
<th>JURISDICTION</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>☑ SUPPORT ☐ OPPOSE</td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>OFFICE SOUGHT OR HELD</th>
<th>DISTRICT NO. IF ANY</th>
</tr>
</thead>
</table>

7. Primarily Formed Committee

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑ SUPPORT ☐ OPPOSE</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑ SUPPORT ☐ OPPOSE</td>
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</table>

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
</tr>
</thead>
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<tr>
<td>☑ SUPPORT ☐ OPPOSE</td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑ SUPPORT ☐ OPPOSE</td>
<td></td>
</tr>
</tbody>
</table>

Attach continuation sheets if necessary

FPPC Form 460 (JAN/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC
State of California
## Campaign Disclosure Statement
### Summary Page

**NAME OF FILER**
Pauline Cutter for San Leandro Mayor 2014

### Contributions Received

<table>
<thead>
<tr>
<th>1. Monetary Contributions</th>
<th>Schedule A, Line 3</th>
<th>$18726.20</th>
<th>$35907.85</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Loans Received</td>
<td>Schedule B, Line 7</td>
<td>0.00</td>
<td>1504.61</td>
</tr>
<tr>
<td>3. SUBTOTAL CASH CONTRIBUTIONS</td>
<td>Add lines 1 + 2</td>
<td>$18726.20</td>
<td>$37412.46</td>
</tr>
<tr>
<td>4. Nonmonetary Contributions</td>
<td>Schedule C, Line 3</td>
<td>0.00</td>
<td>1745.00</td>
</tr>
<tr>
<td>5. TOTAL CONTRIBUTIONS RECEIVED</td>
<td>Add lines 3 + 4</td>
<td>$18726.20</td>
<td>$39157.46</td>
</tr>
</tbody>
</table>

### Expenditures Made

| 6. Payments Made | Schedule E, Line 4 | $19597.30 | $21398.04 |
| 7. Loans Made    | Schedule H, Line 7 | 0.00       | 0.00      |
| 8. SUBTOTAL CASH PAYMENTS | Add lines 6 + 7 | $19597.30 | $21398.04 |
| 9. Accrued Expenses (Unpaid Bills) | Schedule F, Line 3 | 0.00       | 0.00      |
| 10. Nonmonetary Adjustment | Schedule C, Line 3 | 0.00       | 1745.00   |
| 11. TOTAL EXPENDITURES MADE | Add lines 8 + 9 + 10 | $19597.30 | $23143.04 |

### Current Cash Statement

| 12. Beginning Cash Balance | Previous Summary Page, Line 16 | $16885.52 |
| 13. Cash Receipts          | Column A, Line 3 above | 18726.20 |
| 14. Miscellaneous increases to Cash | Schedule I, Line 4 | 0.00 |
| 15. Cash Payments          | Column A, Line 8 above | 19597.30 |
| 16. ENDING CASH BALANCE    | Add lines 12 + 13 + 14, then subtract line 15 | $16014.42 |

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).

| 17. LOAN GUARANTEES RECEIVED | Schedule B, Part 2 | 0.00 |

### Cash Equivalents and Outstanding Debts

| 18. Cash Equivalents | See instructions on reverse | 0.00 |
| 19. Outstanding Debts | Add line 2 + line 9 in Column B above | $1504.61 |

---

**Calendar Year Summary for Candidates Running in Both the State Primary and General Elections**

<table>
<thead>
<tr>
<th>20. Contribution Received</th>
<th>1/1 through 6/30</th>
<th>7/1 to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>21. Expenditures Made</td>
<td>$0.00</td>
<td>0.00</td>
</tr>
</tbody>
</table>

---

**Expenditure Limit Summary for State Candidates**

<table>
<thead>
<tr>
<th>22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)</th>
<th>Date of Election (mm/dd/yyyy)</th>
<th>Total to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td></td>
</tr>
</tbody>
</table>

---

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.
**Schedule A Summary**

1. Amount received this period - contributions of $100 or more.
   (Include all Schedule A subtotals.) .................................................. $ 17029.00

2. Amount received this period - unitemized contributions of less than $100 ............................................ $ 1697.20

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ................. TOTAL $ 18726.20

---

**Schedule A**

**Monetary Contributions Received**

SEE INSTRUCTIONS ON REVERSE

**NAME OF FILER**
Pauline Cutter for San Leandro Mayor 2014

**I.D. Number**
1387155

**STATEMENT COVERS PERIOD**
from ______________ through ______________

**CALIFORNIA FORM 460**

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rcpt Dt: 08/09/2014</td>
<td>Miles F. Adler MD, San Leandro, CA 94578</td>
<td>X IND</td>
<td>Physician</td>
<td>100.00</td>
<td>100.00</td>
<td></td>
</tr>
<tr>
<td>Rcpt Dt: 09/30/2014</td>
<td>Lawrence Alphin, Castro Valley, CA 94552</td>
<td>X IND</td>
<td>Goldsmith</td>
<td>100.00</td>
<td>450.00</td>
<td></td>
</tr>
<tr>
<td>Rcpt Dt: 08/09/2014</td>
<td>Mary Beth Barloga, San Leandro, CA 94577</td>
<td>X IND</td>
<td>Docent</td>
<td>100.00</td>
<td>100.00</td>
<td></td>
</tr>
<tr>
<td>Rcpt Dt: 08/18/2014</td>
<td>Anthony A. Batarse Jr, Oakland, CA 94603</td>
<td>X IND</td>
<td>President - CEO</td>
<td>700.00</td>
<td>700.00</td>
<td></td>
</tr>
<tr>
<td>Rcpt Dt: 09/30/2014</td>
<td>Bay Area Citizens PAC, Emeryville, CA 94608</td>
<td>X IND</td>
<td></td>
<td>500.00</td>
<td>500.00</td>
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</tr>
</tbody>
</table>

**SUBTOTAL $**

---

*Contributor Codes
IND = Individual
COM = Recipient Committee
OTH = Other
PTY = Political Party
SCC = Small Contributor Committee

**FPPC Form 460 (JAN/08)**
FPPC Toll-Free Helpline: 866/ASK-FPPC
## Schedule A
### Monetary Contributions Received

Type or print in ink. 
Amounts may be rounded to whole dollars.

Statement covers period from __________ through __________ (5/24)

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CAI ENDAR YR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/2014</td>
<td>Nicholas M. Buscovich</td>
<td>X IND COM</td>
<td>Sales</td>
<td>100.00</td>
<td>100.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td>San Leandro CA 94577</td>
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<td></td>
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<tr>
<td>08/12/2014</td>
<td>Antonio Cardenas</td>
<td>X IND COM</td>
<td>Real Estate Broker</td>
<td>250.00</td>
<td>250.00</td>
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<tr>
<td></td>
<td>San Leandro CA 94577</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09/30/2014</td>
<td>Robert V. Caruso</td>
<td>X IND COM</td>
<td>Real Estate Developer</td>
<td>50.00</td>
<td>100.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td>San Leandro CA 94577</td>
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<td></td>
<td></td>
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</tr>
<tr>
<td>07/29/2014</td>
<td>Robert V. Caruso</td>
<td>X IND COM</td>
<td>Real Estate Developer</td>
<td>50.00</td>
<td>100.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td>San Leandro CA 94577</td>
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</tr>
<tr>
<td>07/02/2014</td>
<td>Anne Cawood</td>
<td>X IND COM</td>
<td>Management Consultant</td>
<td>100.00</td>
<td>100.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td>San Leandro CA 94577</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTAL $**

---

### Schedule A Summary

1. Amount received this period - contributions of $100 or more. 
   (Include all Schedule A subtotals.) $ __________

2. Amount received this period - unitemized contributions of less than $100 $ __________

3. Total monetary contributions received this period. 
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) TOTAL $ __________

---

*Contributor Codes:
IND - Individual
COM - Recipient Committee (other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

FPPC Form 460 (JAN/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC
## Schedule A
### Monetary Contributions Received

**Type or print in ink. Amounts may be rounded to whole dollars.**

<table>
<thead>
<tr>
<th>Date Received</th>
<th>Full Name, Mailing Address and Zip Code of Contributor (If Committee, Also Enter I.D. Number)</th>
<th>Contributor Code*</th>
<th>If an Individual, Enter Occupation and Employer (If Self-Employed, Enter Name of Business)</th>
<th>Amount Received This Period</th>
<th>Cumulative To Date CAl if NDA Year (Jan. 1 - Dec. 31)</th>
<th>Per Election To Date (If Required)</th>
</tr>
</thead>
<tbody>
<tr>
<td>09/30/2014</td>
<td>CWAL Inc</td>
<td>IND</td>
<td></td>
<td>100.00</td>
<td>100.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Oakland CA 94621</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>08/19/2014</td>
<td>Diane Deman</td>
<td>IND</td>
<td></td>
<td>25.00</td>
<td>525.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Vacaville CA 95688</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09/30/2014</td>
<td>Johanne Dicter</td>
<td>IND, COM, OTH</td>
<td>Consultant</td>
<td>100.00</td>
<td>200.00</td>
<td></td>
</tr>
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<td></td>
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<td></td>
</tr>
<tr>
<td>09/18/2014</td>
<td>Keith Foster</td>
<td>IND</td>
<td></td>
<td>100.00</td>
<td>100.00</td>
<td></td>
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</tr>
<tr>
<td>08/12/2014</td>
<td>Galvan San Leandro Properties LLC</td>
<td>IND</td>
<td></td>
<td>500.00</td>
<td>500.00</td>
<td></td>
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<tr>
<td></td>
<td>Castro Valley CA 95448</td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

**Schedule A Summary**

1. Amount received this period - contributions of $100 or more.
   (Include all Schedule A subtotals.) $ 

2. Amount received this period - unitemized contributions of less than $100 $ 

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) TOTAL $ 

---

*Contributor Codes
IND - Individual
COM - Recipient Committee
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee
Schedule A
Monetary Contributions Received

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Pauline Cutter for San Leandro Mayor 2014

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>09/30/2014</td>
<td>John P. Gooding</td>
<td>X IND COM OTH PTY SCC</td>
<td>Consultant</td>
<td>500.00</td>
<td>500.00</td>
<td>Milo Group</td>
</tr>
<tr>
<td>09/12/2014</td>
<td>Wayne Gregori</td>
<td>X IND COM OTH PTY SCC</td>
<td>Realtor</td>
<td>50.00</td>
<td>100.00</td>
<td>The Gregori Group</td>
</tr>
<tr>
<td>07/24/2014</td>
<td>Wayne Gregori</td>
<td>X IND COM OTH PTY SCC</td>
<td>Realtor</td>
<td>50.00</td>
<td>100.00</td>
<td>The Gregori Group</td>
</tr>
<tr>
<td>09/30/2014</td>
<td>Pandora Haune</td>
<td>X IND COM OTH PTY SCC</td>
<td>Pet Supplies</td>
<td>100.00</td>
<td>100.00</td>
<td>Mike's Feed &amp; Pets</td>
</tr>
<tr>
<td>09/30/2014</td>
<td>International Association of Firefighters Local 55 PAC</td>
<td>X IND COM OTH PTY SCC</td>
<td></td>
<td>500.00</td>
<td>500.00</td>
<td></td>
</tr>
</tbody>
</table>

**Schedule A Summary**

1. Amount received this period - contributions of $100 or more. (Include all Schedule A subtotals.) $ ______________
2. Amount received this period - unitemized contributions of less than $100 $ ______________
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) TOTAL $ ______________

*Contributor Codes
IND - Individual
COM - Recipient Committee
OTH - Other (other than PTY or SCC)
PTY - Political Party
SCC - Small Contributor Committee

FPPC Form 460 (JAN/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC
**Schedule A**  
**Monetary Contributions Received**

**NAME OF FILER**  
Pauline Cutter for San Leandro Mayor 2014

**I.D. Number**  
1367155

**DATE RECEIVED**  
<table>
<thead>
<tr>
<th>Rpt Dt:</th>
<th>FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/14/2014</td>
<td>INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS LOCAL 595 PAC</td>
<td>X IND</td>
<td>None</td>
<td>1500.00</td>
<td>1500.00</td>
<td></td>
</tr>
<tr>
<td>08/18/2014</td>
<td>INTERNATIONAL UNION OF ELEVATOR CONSTRUCTORS LOCAL 8 PAC SPONSORED BY INTERNATIONAL UNION OF ELEVATOR CONSTRUCTORS LOCAL 8</td>
<td>X IND</td>
<td>Manager</td>
<td>250.00</td>
<td>250.00</td>
<td></td>
</tr>
</tbody>
</table>
| 09/09/2014 | Milli-Ann Iuso-Cox  
San Leandro  
CA 94577 | X IND            | None                                                                                      | 100.00                    | 100.00                                          |                                   |
| 09/30/2014 | Jeffrey W. Jones  
Oakland  
CA 94612 | X IND            | Realtor                                                                                   | 100.00                    | 150.00                                          |                                   |
| 08/12/2014 | Robert Jones  
San Leandro  
CA 94577 | X IND            | Robert Jones & Associates                                                                 | 100.00                    | 150.00                                          |                                   |

**Schedule A Summary**

1. Amount received this period - contributions of $100 or more.  
   (Include all Schedule A subtotals.) .................................................. $ __________

2. Amount received this period - unitemized contributions of less than $100 .................. $ __________

3. Total monetary contributions received this period.  
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .................. TOTAL $ __________

**Contributor Codes**  
IND - Individual  
COM - Recipient Committee  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee  

**Form 460**  
FPPC Toll-Free Helpline: 866/ASK-FPPC
<table>
<thead>
<tr>
<th>Date Received</th>
<th>Full Name, Mailing Address and ZIP Code of Contributor (If Committee, Also Enter ID Number)</th>
<th>Contributor Code *</th>
<th>If an Individual, Enter Occupation and Employer (If Self-Employed, Enter Name of Business)</th>
<th>Amount Received This Period</th>
<th>Cumulative to Date Calendar Year (Jan. 1 - Dec. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/23/2014</td>
<td>Robert Jones</td>
<td>X IND</td>
<td>Realtor</td>
<td>50.00</td>
<td>150.00</td>
<td>Robert Jones &amp; Associates</td>
</tr>
<tr>
<td></td>
<td>San Leandro CA 94577</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>08/19/2014</td>
<td>J Patrick Kennedy</td>
<td>X IND</td>
<td>CEO</td>
<td>1000.00</td>
<td>1000.00</td>
<td>OSlsoft Inc</td>
</tr>
<tr>
<td></td>
<td>San Leandro CA 94577</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>08/20/2014</td>
<td>Laython Landis</td>
<td>X IND</td>
<td>None</td>
<td>1000.00</td>
<td>1000.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td>San Leandro CA 94579</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>07/03/2014</td>
<td>Laython Landis</td>
<td>X IND</td>
<td>None</td>
<td>99.00</td>
<td>1000.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td>San Leandro CA 94579</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09/22/2014</td>
<td>Carolyn J. Lizotte</td>
<td>X IND</td>
<td>Regional Sales Executive</td>
<td>200.00</td>
<td>300.00</td>
<td>Anixter</td>
</tr>
<tr>
<td></td>
<td>San Leandro CA 94577</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Schedule A Summary**

1. Amount received this period - contributions of $100 or more.
   (Include all Schedule A subtotals.) ........................................ $  

2. Amount received this period - unitemized contributions of less than $100  
   ........................................ $  

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ........................................ TOTAL $  

*Contributor Codes
IND - Individual
COM - Recipient Committee
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

FPPC Form 460 (JAN/08)
FPPC Toll-Free Helpline: 888/ASK-FPPC
### Schedule A
Monetary Contributions Received

#### Statement covers period
from: __________________________  through: 10 / 24

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>08/12/2014</td>
<td>Denise M. Martellacci</td>
<td>X</td>
<td>Loan Agent</td>
<td>50.00</td>
</tr>
<tr>
<td></td>
<td>Hayward CA 94541</td>
<td></td>
<td>Allways Mortgage</td>
<td>175.00</td>
</tr>
<tr>
<td>07/29/2014</td>
<td>Denise M. Martellacci</td>
<td>X</td>
<td>Loan Agent</td>
<td>125.00</td>
</tr>
<tr>
<td></td>
<td>Hayward CA 94541</td>
<td></td>
<td>Allways Mortgage</td>
<td>175.00</td>
</tr>
<tr>
<td>09/30/2014</td>
<td>MJC Employee Benefits and Insurance Services Inc</td>
<td></td>
<td></td>
<td>500.00</td>
</tr>
<tr>
<td></td>
<td>San Leandro CA 9457</td>
<td></td>
<td></td>
<td>500.00</td>
</tr>
<tr>
<td>09/22/2014</td>
<td>NATIONAL WOMEN'S POLITICAL CAUCUS ALAMEDA WOMEN'S POLITICAL ACTION COMMITTEE</td>
<td></td>
<td></td>
<td>250.00</td>
</tr>
<tr>
<td></td>
<td>Oakland CA 9431</td>
<td></td>
<td></td>
<td>250.00</td>
</tr>
<tr>
<td>08/18/2014</td>
<td>Dwight A. Ost</td>
<td>X</td>
<td>Warehouse Tech</td>
<td>100.00</td>
</tr>
<tr>
<td></td>
<td>San Francisco CA 94110</td>
<td></td>
<td>Stanford University</td>
<td>199.00</td>
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</table>

#### Schedule A Summary

1. Amount received this period - contributions of $100 or more.
   (Include all Schedule A subtotals.) .............................................................. $ 

2. Amount received this period - unitized contributions of less than $100 .................................................. $ 

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ........................................ TOTAL $ 

---

*Contributor Codes
- IND - Individual
- COM - Recipient Committee (other than PTY or SCC)
- OTH - Other
- PTY - Political Party
- SCC - Small Contributor Committee

FPPC Form 460 (JAN/05)
FPPC Toll-Free Helpline: 888/ASK-FPPC
## Schedule A

### Monetary Contributions Received

*Type or print in ink. Amounts may be rounded to whole dollars.*

**Statement covers period from___________________________through___________________________**

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (FOR SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
</table>
| Rcpt Dt: 08/11/2014 | Susan Patrick  
San Leandro, CA 94577 | X IND  
COM  
OTH  
PTY  
SCC | None | 100.00 | 200.00 |  |
| Rcpt Dt: 09/30/2014 | Adam J. Peterson  
San Ramon, CA 94582 | X IND  
COM  
OTH  
PTY  
SCC | Realtor | 300.00 | 300.00 |  |
| Rcpt Dt: 09/30/2014 | Garni L. Phillips  
San Leandro, CA 94577 | X IND  
COM  
OTH  
PTY  
SCC | Teacher | 100.00 | 100.00 |  |
| Rcpt Dt: 09/22/2014 | POLITICAL ACTION COMMITTEE FOR EXCELLENCE  
San Leandro, CA 94578 | X IND  
COM  
OTH  
PTY  
SCC | Hayward USD | 2000.00 | 2000.00 |  |
| Rcpt Dt: 09/30/2014 | Diana J. Prola  
San Leandro, CA 94577 | X IND  
COM  
OTH  
PTY  
SCC | None | 100.00 | 200.00 |  |

**SUBTOTAL**

### Schedule A Summary

1. Amount received this period - contributions of $100 or more.  
   (include all Schedule A subtotals.) ........................................................................... $

2. Amount received this period - unitemized contributions of less than $100  
   ........................................................................... $

3. Total monetary contributions received this period.  
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)  
   ........................................................................... TOTAL $

---

*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee*
**Schedule A Summary**

1. Amount received this period - contributions of $100 or more. (Include all Schedule A subtotals.) ........................................... $ 
2. Amount received this period - unitemized contributions of less than $100 ................................. $ 
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ................. TOTAL $ 

---

**Contributor Codes**
- IND - Individual
- COM - Recipient Committee
- OTH - Other
- PTY - Political Party
- SCC - Small Contributor Committee

_FPPC Form 460 (JAN/05) FPPC Toll-Free Helpline: 888/ASK-FPPC_
Schedule A
Monetary Contributions Received

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Pauline Cutter for San Leandro Mayor 2014

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rpt Dt: 09/30/2014</td>
<td>San Leandro Teachers Advocating New Directions San Leandro ID: 1264846 CA 94578</td>
<td>[ ] IND [X] COM [ ] OTH [ ] PTY [ ] SCC</td>
<td></td>
<td>100.00</td>
<td>100.00</td>
<td></td>
</tr>
<tr>
<td>Rpt Dt: 09/20/2014</td>
<td>Robert Scribner Oakland CA 94611</td>
<td>[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC</td>
<td>Attorney Scribner Law Office</td>
<td>250.00</td>
<td>530.00</td>
<td></td>
</tr>
<tr>
<td>Rpt Dt: 07/18/2014</td>
<td>Robert Scribner Oakland CA 94611</td>
<td>[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC</td>
<td>Attorney Scribner Law Office</td>
<td>30.00</td>
<td>530.00</td>
<td></td>
</tr>
<tr>
<td>Rpt Dt: 09/19/2014</td>
<td>Sprinkler Fitters &amp; Apprentices Local 483 Local PAC Sacramento ID: 1288012 CA 95814</td>
<td>[ ] IND [X] COM [ ] OTH [ ] PTY [ ] SCC</td>
<td></td>
<td>500.00</td>
<td>500.00</td>
<td></td>
</tr>
<tr>
<td>Rpt Dt: 09/30/2014</td>
<td>Audrey Velasquez San Leandro CA 94577</td>
<td>[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC</td>
<td>General Manager The Marina Inn on San Francisco Bay</td>
<td>100.00</td>
<td>100.00</td>
<td></td>
</tr>
</tbody>
</table>

SUBTOTAL $

Schedule A Summary

1. Amount received this period - contributions of $100 or more.
   (Include all Schedule A subtotals.) ........................................ $ 

2. Amount received this period - unitemized contributions of less than $100 ................................ $ 

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .................. TOTAL $ 

*Contributor Codes
IND - Individual
COM - Recipient Committee
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

FPPC Form 460 (JAN/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC
## Schedule A
### Monetary Contributions Received

**Type or print in ink. Amounts may be rounded to whole dollars.**

**Statement covers period**

<table>
<thead>
<tr>
<th>from</th>
<th>through</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>14 / 24</td>
</tr>
</tbody>
</table>

**I.D. Number**

<table>
<thead>
<tr>
<th>ID. Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>1367155</td>
</tr>
</tbody>
</table>

**NAME OF FILER**

Pauline Cutter for San Leandro Mayor 2014

### Full Name, Mailing Address, and ZIP Code of Contributor

<table>
<thead>
<tr>
<th>Date Received</th>
<th>Full Name, Mailing Address and ZIP Code of Contributor</th>
<th>Contributor Code</th>
<th>IF An Individual, Enter Occupation and Employer (If Self-Employed, Enter Name of Business)</th>
<th>Amount Received This Period</th>
<th>Cumulative to Date Calendar Year (Jan. 1 - Dec. 31)</th>
<th>Per Election To Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rpt Dt: 08/20/2014</td>
<td>Martin Vitz, San Leandro, CA 94577</td>
<td>X IND</td>
<td>None</td>
<td>50.00</td>
<td>100.00</td>
<td></td>
</tr>
<tr>
<td>Rpt Dt: 07/14/2014</td>
<td>Martin Vitz, San Leandro, CA 94577</td>
<td>X IND</td>
<td>None</td>
<td>50.00</td>
<td>100.00</td>
<td></td>
</tr>
<tr>
<td>Rpt Dt: 08/12/2014</td>
<td>Carmen M. Ward-Sullivan RN, San Leandro, CA 94578</td>
<td>X IND</td>
<td>Registered Nurse</td>
<td>100.00</td>
<td>100.00</td>
<td></td>
</tr>
<tr>
<td>Rpt Dt: 09/30/2014</td>
<td>Wise Education Technology Inc, Oakland, CA 94612</td>
<td>X IND</td>
<td>Summit Medical Center</td>
<td>500.00</td>
<td>500.00</td>
<td></td>
</tr>
<tr>
<td>Rpt Dt: 07/29/2014</td>
<td>Susan J. Young, San Leandro, CA 94577</td>
<td>X IND</td>
<td>None</td>
<td>200.00</td>
<td>200.00</td>
<td></td>
</tr>
</tbody>
</table>

**Subtotal**

$17029.00

### Schedule A Summary

1. **Amount received this period - contributions of $100 or more.**
   (Include all Schedule A subtotals.) $________

2. **Amount received this period - unitemized contributions of less than $100** $________

3. **Total monetary contributions received this period.**
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) TOTAL $________

---

**Contributor Codes**

- IND - Individual
- COM - Recipient Committee
- OTH - Other
- PTY - Political Party
- SCC - Small Contributor Committee

FPCC Form 460 (JAN/05)
FPCC Toll-Free Helpline: 866/ASK-FPCC
Schedule B - Part 1
Loans Received

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Pauline Cutter for San Leandro Mayor 2014

I.D. NUMBER
1367155

SCHEDULE B - PART 1

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER
(IF COMMITTEE, ALSO ENTER I.D. NUMBER)

IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF NOT FILLER, ALSO, 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

Calendar Year

<table>
<thead>
<tr>
<th>Name</th>
<th>Employer</th>
<th>Occupation</th>
<th>Outstan. Bal. Begg.</th>
<th>Received</th>
<th>Paid</th>
<th>Forgiven</th>
<th>Bal. at Close</th>
<th>Interest</th>
<th>Orig. Loan</th>
<th>Date Due</th>
<th>Date Incurred</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pauline Cutter</td>
<td>San Leandro USD</td>
<td>Consultant</td>
<td>$1504.61</td>
<td>0.00</td>
<td></td>
<td></td>
<td>$1504.61</td>
<td>0.00</td>
<td>$1504.61</td>
<td>12/31/2014</td>
<td>06/04/2014</td>
</tr>
</tbody>
</table>

SUBTOTALS

|   | $0.00 | $0.00 | $1504.61 | $0.00 |

Schedule B Summary

1. Loans received this period.
   (Total Column (b) plus unitemized loans less than $100.) $0.00

2. Loans paid or forgiven this period.
   (Total Column (c) plus loans under $100 paid or forgiven.) $0.00

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

3. Net change this period. (Subtract Line 2 from Line 1.) Net $0.00
   (may be a negative number)

*Contributor Codes

IND-Individual  COM-Recipient Committee (other than PTY or SCC)  CTH-Other  PTY-Political Party  SCC-Small Contributor Committee

FPPC Form 460 (JAN/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC
Schedule E Payments Made

Type or print in ink. Amounts may be rounded to whole dollars.

Statement covers period
from _______________ through _______________ 16 / 24

NAME OF FILER
Pauline Cutter for San Leandro Mayor 2014

I.D. NUMBER
1367155

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

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

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE OR CREDITOR</th>
<th>ID:</th>
<th>CODE OR DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alameda County Democratic Central Committee</td>
<td>747153</td>
<td>MTG</td>
<td>200.00</td>
</tr>
<tr>
<td>Hayward CA 94545</td>
<td></td>
<td>FND</td>
<td>200.00</td>
</tr>
<tr>
<td>Alta Mira Club</td>
<td></td>
<td>FND</td>
<td>115.83</td>
</tr>
<tr>
<td>San Leandro CA 94577</td>
<td></td>
<td>FND</td>
<td>115.83</td>
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<tr>
<td>Baked East Bay</td>
<td></td>
<td>FND</td>
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<tr>
<td>San Leandro CA 94577</td>
<td></td>
<td>FND</td>
<td>115.83</td>
</tr>
</tbody>
</table>

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL $ 19490.10

Schedule E Summary

1. Payments made this period of $100 or more. (Include all Schedule E subtotals.) $ 19490.10
2. Unitemized payments made this period of under $100. $ 107.20
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) $ 0.00
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) TOTAL $ 19597.30

FPPC Form 460 (JAN/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC
Schedule E Payments Made

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Pauline Cutter for San Leandro Mayor 2014

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

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)

<table>
<thead>
<tr>
<th>Name</th>
<th>ID</th>
<th>Code</th>
<th>Description of Payment</th>
<th>Amount Paid</th>
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</thead>
<tbody>
<tr>
<td>California Latino Voters' Guide</td>
<td></td>
<td>LIT</td>
<td></td>
<td>400.00</td>
</tr>
<tr>
<td>Los Angeles CA 90041</td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>City of San Leandro</td>
<td></td>
<td>FIL</td>
<td></td>
<td>900.00</td>
</tr>
<tr>
<td>San Leandro CA 94577</td>
<td></td>
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<tr>
<td>Coasters For Lease</td>
<td></td>
<td>CMP</td>
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<td>197.50</td>
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* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule E Summary

1. Payments made this period of $130 or more. (Include all Schedule E subtotals.) .................................................. $

2. Unitemized payments made this period of under $100. ......................................................................................... $

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 8.) .......... TOTAL $
Schedule E Payments Made

NAME OF FILER
Pauline Cutter for San Leandro Mayor 2014

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

<table>
<thead>
<tr>
<th>NAME OF PAYEE OR CREDITOR</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
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</thead>
<tbody>
<tr>
<td>COPS Voter Guide</td>
<td>LIT</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ID:</td>
<td></td>
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<tr>
<td>Folcom</td>
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<td></td>
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<tr>
<td></td>
<td>ID:</td>
<td></td>
</tr>
<tr>
<td>Jessica Cutter</td>
<td>FND</td>
<td></td>
</tr>
<tr>
<td>San Leandro</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>ID:</td>
<td>981859</td>
</tr>
<tr>
<td>Eden Area United Democratic Campaign</td>
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<td></td>
</tr>
<tr>
<td>San Leandro</td>
<td></td>
<td>94577</td>
</tr>
</tbody>
</table>

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

Schedule E Summary

1. Payments made this period of $100 or more. (Include all Schedule E subtotals.) $________________________

2. Unitemized payments made this period of under $100. $________________________

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 8.) $________________________

SUBTOTAL $________________________

CALIFORNIA 460

FPPC Form 460 (JAN/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC
Schedule E Payments Made

Type or print in ink. Amounts may be rounded to whole dollars.

Statement covers period

from _______ through _______ 19 / 24

NAME OF FILER

Pauline Cutter for San Leandro Mayor 2014

I.D. NUMBER

1367155

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

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)

<table>
<thead>
<tr>
<th>NAME AND ADDRESS</th>
<th>ID</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gloria Ritchie Associates LLC</td>
<td>CNS</td>
<td>3000.00</td>
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<tr>
<td>Fremont, CA 94538</td>
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<td>Gloria Ritchie Associates LLC</td>
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<td>Fremont, CA 94538</td>
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<tr>
<td>Gloria Ritchie Associates LLC</td>
<td>VOT</td>
<td>2200.00</td>
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</tr>
<tr>
<td>Fremont, CA 94538</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

SUBTOTAL $

Schedule E Summary

1. Payments made this period of $100 or more. (Include all Schedule E subtotals.) $ 
2. Unitized payments made this period of under $100. $ 
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.) TOTAL $
## Schedule E Payments Made

Type or print in ink. Amounts may be rounded to whole dollars.

### Statement covers period
- from
- through
- 20/24

### California Form 460
- I.D. NUMBER
- 1367155

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

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

### NAME AND ADDRESS OF PAYEE OR CREDITOR

<table>
<thead>
<tr>
<th>Name and Address of Payee or Creditor</th>
<th>ID</th>
<th>Code</th>
<th>Description of Payment</th>
<th>Amount Paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gloria Ritchie Associates LLC</td>
<td></td>
<td>CNS</td>
<td></td>
<td>1500.00</td>
</tr>
<tr>
<td>Fremont CA 94538</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gloria Ritchie Associates LLC</td>
<td></td>
<td>CNS</td>
<td></td>
<td>1500.00</td>
</tr>
<tr>
<td>Fremont CA 94538</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Gloria Ritchie Associates LLC</td>
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<td>LIT</td>
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<td>4917.00</td>
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<tr>
<td>Fremont CA 94538</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**SUBTOTAL $**

## Schedule E Summary

1. Payments made this period of $100 or more. (Include all Schedule E subtotals.) $ ________________
2. Unitemized payments made this period of under $100. $ ________________
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.) $ ________________

FPPC Form 460 (JAN/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC
# Schedule E Payments Made

**See Instructions on Reverse**

**NAME OF FILER**
Pauline Cutter for San Leandro Mayor 2014

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

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CMP</td>
<td>Campaign paraphernalia/misc.</td>
</tr>
<tr>
<td>CNS</td>
<td>Campaign consultants</td>
</tr>
<tr>
<td>CTB</td>
<td>Contribution (explain nonmonetary)*</td>
</tr>
<tr>
<td>CVC</td>
<td>Civic donations</td>
</tr>
<tr>
<td>F/L</td>
<td>Candidate filing/ballot fees</td>
</tr>
<tr>
<td>FND</td>
<td>Fundraising events</td>
</tr>
<tr>
<td>IND</td>
<td>Independent expenditure supporting/opposing</td>
</tr>
<tr>
<td>LEG</td>
<td>Legal defense</td>
</tr>
<tr>
<td>LIT</td>
<td>Campaign literature and mailings</td>
</tr>
<tr>
<td>MBR</td>
<td>Member communications</td>
</tr>
<tr>
<td>MTG</td>
<td>Meetings and appearances</td>
</tr>
<tr>
<td>OFC</td>
<td>Office expenses</td>
</tr>
<tr>
<td>PET</td>
<td>Petition circulating</td>
</tr>
<tr>
<td>PHO</td>
<td>Phone banks</td>
</tr>
<tr>
<td>POL</td>
<td>Polling and survey research</td>
</tr>
<tr>
<td>POS</td>
<td>Postage, delivery and messenger services</td>
</tr>
<tr>
<td>PRO</td>
<td>Professional services (legal, accounting)</td>
</tr>
<tr>
<td>PRT</td>
<td>Print ads</td>
</tr>
<tr>
<td>RAD</td>
<td>Radio airtime and production costs</td>
</tr>
<tr>
<td>RFD</td>
<td>Returned contributions</td>
</tr>
<tr>
<td>SAL</td>
<td>Campaign workers' salaries</td>
</tr>
<tr>
<td>TEL</td>
<td>T.V. or cable airtime and production costs</td>
</tr>
<tr>
<td>TRC</td>
<td>Candidate travel, lodging, and meals</td>
</tr>
<tr>
<td>TRS</td>
<td>Staff/spouse travel, lodging, and meals</td>
</tr>
<tr>
<td>TSF</td>
<td>Transfer between committees of the same candidate/sponsor</td>
</tr>
<tr>
<td>VOT</td>
<td>Voter registration</td>
</tr>
<tr>
<td>WEB</td>
<td>Information technology costs (internet, email)</td>
</tr>
</tbody>
</table>

**NAME AND ADDRESS OF PAYEE OR CREDITOR**

<table>
<thead>
<tr>
<th>Payee or Creditor</th>
<th>ID</th>
<th>Code</th>
<th>Description of Payment</th>
<th>Amount Paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gloria Ritchie Associates LLC</td>
<td></td>
<td>LIT</td>
<td></td>
<td>1868.00</td>
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<tr>
<td>Fremont, CA 94538</td>
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<tr>
<td>Louis Heystek</td>
<td></td>
<td>OFC</td>
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<td>49.00</td>
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<tr>
<td>San Leandro, CA 94577</td>
<td></td>
<td>POS</td>
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<td></td>
</tr>
</tbody>
</table>

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

**Schedule E Summary**

1. Payments made this period of $100 or more. (Include all Schedule E subtotals.) ........................................... $  
2. Unitized payments made this period of under $100. ................................................................. $  
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.) $  

**Subtotal $**

**FPPC Form 460 (JAN/05)**
FPPC Toll-Free Helpline: 866/ASK-FPPC
**Schedule E**  
Payments Made

Amounts may be rounded to whole dollars.  

**NAME OF FILER**  
Pauline Cutter for San Leandro Mayor 2014

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

**NAME AND ADDRESS OF PAYEE OR CREDITOR**  
([F COMMITTEE, ALSO ENTER I.D. NUMBER])  

<table>
<thead>
<tr>
<th>PAYEE/CREДIDOR</th>
<th>ID</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Louis Heystek</td>
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<td>OFC</td>
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<td>131.10</td>
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<td>San Leandro</td>
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<td>94577</td>
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<td>Patricia Minnis</td>
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*Payments that are contributions or independent expenditures must also be summarized on Schedule D.*

**Schedule E Summary**

1. Payments made this period of $100 or more. (Include all Schedule E subtotals.) .................................................. $
2. Unitemized payments made this period of under $100. .............................................................. $
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.) .................. TOTAL $
Schedule E Payments Made

Type or print in ink.
Amounts may be rounded to whole dollars.

Statement covers period
from ___________________ through ___________________
23 / 24

NAME OF FILER
Pauline Cutter for San Leandro Mayor 2014

I.D. NUMBER
1367155

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

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

NAME AND ADDRESS OF PAYEE OR CREDITOR

<table>
<thead>
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<th>City</th>
<th>State</th>
<th>Zip</th>
<th>ID</th>
<th>CODE</th>
<th>OR</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
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</tbody>
</table>

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

SUBTOTAL $

Schedule E Summary

1. Payments made this period of $100 or more. (Include all Schedule E subtotals.) $  
2. Unitemized payments made this period of under $100. $  
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.) TOTAL $
Schedule E Payments Made

Type or print in ink. Amounts may be rounded to whole dollars.

Statement covers period
from ____________ through ____________ 24 / 24

NAME OF FILER
Pauline Cutter for San Leandro Mayor 2014

NAME AND ADDRESS OF PAYEE OR CREDITOR
(SF COMMITTEE, ALSO ENTER (E.) NUMBER)

CODE OR DESCRIPTION OF PAYMENT

PAYPAL.com ID: OFC
San Jose CA 95131

San Leandro Education Foundation

San Leandro CA 94578
San Leandro Public Library Foundation

San Leandro CA 94577

CODE OR DESCRIPTION OF PAYMENT

PAYPAL.com ID: OFC
San Jose CA 95131

San Leandro Education Foundation

San Leandro CA 94578
San Leandro Public Library Foundation

San Leandro CA 94577

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

SUBTOTAL $ 19490.10

Schedule E Summary

1. Payments made this period of $100 or more. (Include all Schedule E subtotals.) $ 
2. Unitemized payments made this period of under $100. $ 
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.) TOTAL $