

Recipient Committee Campaign Statement Cover Page — Part 2

5. Officeholder or Candidate Controlled Committees

NAME OF OFFICER/HOLDER OR CANDIDATE

Jain Society

Arcata City Council

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.

NAME OF TREASURER

CITY _____ STATE _____ ZIP CODE _____ AREA CODE/PHONE _____

COMMITTEE NAME

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

CITY _____ STATE _____ ZIP CODE _____ AREA CODE/PHONE # _____

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOON MEASURE

卷之三

SUPPORT OPPOSE

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

OFFICE SOUGHT OR HELD _____ DISTRICT NO. IF ANY _____

—

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

□ SUPPORT

卷之三

OPPOSE

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

Attach continuation sheets if necessary

**Campaign Disclosure Statement
Summary Page**

Amounts may be rounded
to whole dollars.

**SUMMARY PAGE
CALIFORNIA FORM 460**

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

The Committee to Reelect Sarah Schaefer, Arcata City Council 2024

Statement covers period
from 10/20/2024 through 12/31/2024 Page 3 of 5
I.D. NUMBER 1470992

Contributions Received

Column A
(FROM ATTACHED SCHEDULES)

Column B
CALENDAR YEAR
TOTAL TO DATE

1. Monetary Contributions.....	Schedule A, Line 3	\$ <u>637.75</u>	\$ <u>4941.75</u>
2. Loans Received.....	Schedule B, Line 3	\$ <u>0</u>	\$ <u>0</u>
3. SUBTOTAL CASH CONTRIBUTIONS.....	Add Lines 1 + 2	\$ <u>637.75</u>	\$ <u>4941.75</u>
4. Nonmonetary Contributions.....	Schedule C, Line 3	\$ <u>0</u>	\$ <u>0</u>
5. TOTAL CONTRIBUTIONS RECEIVED.....	Add Lines 3 + 4	\$ <u>637.75</u>	\$ <u>4941.75</u>

Expenditures Made

Column A
Schedule E, Line 4

Column B
Schedule H, Line 3

6. Payments Made.....	\$ <u>819.03</u>	\$ <u>4283.97</u>
7. Loans Made.....	\$ <u>0</u>	\$ <u>0</u>
8. SUBTOTAL CASH PAYMENTS.....	\$ <u>819.03</u>	\$ <u>4283.97</u>

9. Accrued Expenses (Unpaid Bills).....	\$ <u>0</u>	\$ <u>0</u>
10. Nonmonetary Adjustment.....	\$ <u>0</u>	\$ <u>0</u>
11. TOTAL EXPENDITURES MADE.....	\$ <u>819.03</u>	\$ <u>4283.97</u>

Current Cash Statement

12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 839.06

Column A
Column A, Line 3 above

Column B
Schedule E, Line 4

13. Cash Receipts	\$ <u>637.75</u>
14. Miscellaneous Increases to Cash	\$ <u>0</u>
15. Cash Payments	\$ <u>819.03</u>
16. ENDING CASH BALANCE	\$ <u>657.78</u>

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

17. LOAN GUARANTEES RECEIVED	\$ <u>0</u>
18. Cash Equivalents	\$ <u>0</u>
19. Outstanding Debts	\$ <u>0</u>

Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse

Column A
Schedule B, Part 2

Column B
See instructions on reverse

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).

Expenditure Limit Summary for State Candidates

Column A

Column B

22. Cumulative Expenditures Made*	\$ <u>4283.97</u>
(If Subject to Voluntary Expenditure Limit)	
Date of Election (mm/dd/yy)	
Total to Date	

20. Contributions Received	\$ <u>0</u>
21. Expenditures Made	\$ <u>0</u>

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

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).

1/1 through 6/30 7/1 to Date

**Schedule A
Monetary Contributions Received**

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE

The Committee to Reelect Sarah Schaefer, Arcata City Council 2024

Statement covers period <u>from 10/20/2024</u>	CALIFORNIA FORM 460
through <u>12/31/2024</u>	Page <u>4</u> of <u>5</u>
U.S. MAIL AND C.O.	

Schedule A Summary

1. Amount received this period – Itemized monetary contributions.
(Include all Schedule A subtotals.)
2. Amount received this period – unitemized monetary contributions of less than \$103
3. Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page. Column A, line 1)

SUBTOTAL \$ 0

*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**

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

The Committee to Reelect Sarah Schaefer, Arcata City Council 2024

Amounts may be rounded
to whole dollars.

Statement covers period from <u>10/20/2024</u>	CALIFORNIA FORM 460
through <u>12/31/2024</u>	Page <u>5</u> of <u>5</u>
	I.D. NUMBER <u>1470992</u>

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
CYC	civic donations	PET	petition circulating	TEL	tv 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	PR	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
Septentrio Winery 650 6th St, Arcata, CA 95521	FND	Event space and beverages for election night celebration	\$200.51
Mad River Union 791 Eighth St, Suite 8, Arcata, CA 95521	PRT		\$250
Times Printing 106 T St, Eureka, CA 95501	LIT		\$110

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

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) \$ 560.51
2. Unitemized payments made this period of under \$100 \$ 258.52
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) \$ 0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) **TOTAL \$ 819.03**