Recipient Committee
Campaign Statement
Cover Page

SEE INSTRUCTIONS ON REVERSE

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

2. Type of Statement:
   □ Pre-election Statement
   □ Semi-annual Statement
   □ Termination Statement
     (Also file a Form 410 Termination)
   □ Amendment (Explain below)

3. Committee Information
   LD. NUMBER
   1416478
   COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
   JUSLYN MANALO FOR DALY CITY COUNCIL 2020
   CITY ADDRESS
   STREET NAME (NO P.O. BOX)
   CITY
   STATE
   ZIP CODE
   AREA CODE/PHONE
   Oakland
   CA
   94605
   (650)
   MAILING ADDRESS
   Mailing Address (if different) No. and Street or P.O. Box
   CITY
   STATE
   ZIP CODE
   AREA CODE/PHONE
   Other:
   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 certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

   Executed on 7/3/19
   By
   Executed on 7/3/19
   By
   Executed on
   Date
   Executed on
   Date
   Executed on
   Date
   Executed on
   Date

   TREASURER(S)
   NAME OF TREASURER
   Christigale Fernandez
   MAILING ADDRESS
   CITY
   STATE
   ZIP CODE
   AREA CODE/PHONE
   Oakland
   CA
   94605
   (650)
   NAME OF ASSISTANT TREASURER, IF ANY
   Juslyn Manalo
   MAILING ADDRESS
   CITY
   STATE
   ZIP CODE
   AREA CODE/PHONE
   Daly City
   CA
   94014
   (650)
   OPTIONAL: FAX / E-MAIL ADDRESS

   FPPC Form 460 (Jan/2016)
   FPPC Advice: advice@fppc.ca.gov (866/275-3772)
5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

JUSLYN MANALO FOR DALY CITY COUNCIL 2020

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

DALY CITY COUNCIL

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

Oakland CA 94605

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.

<table>
<thead>
<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF TREASURER</td>
<td>CONTROLLED COMMITTEE?</td>
</tr>
<tr>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>COMMITTEE ADDRESS</td>
<td>STREET ADDRESS (NO P.O. BOX)</td>
</tr>
<tr>
<td>CITY</td>
<td>STATE</td>
</tr>
</tbody>
</table>

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER JURISDICTION

<table>
<thead>
<tr>
<th>SUPPORT</th>
<th>OPPOSE</th>
</tr>
</thead>
</table>

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.

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

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</thead>
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<td>OPPOSE</td>
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<tr>
<td>SUPPORT</td>
<td>OPPOSE</td>
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</tbody>
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<tr>
<td>SUPPORT</td>
<td>OPPOSE</td>
</tr>
<tr>
<td>SUPPORT</td>
<td>OPPOSE</td>
</tr>
</tbody>
</table>

Attach continuation sheets if necessary
Contributions Received

<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TOTAL CONTRIBUTIONS RECEIVED</strong></td>
<td><strong>TOTAL CONTRIBUTIONS RECEIVED</strong></td>
</tr>
<tr>
<td><strong>Add Lines 3 + 4</strong></td>
<td><strong>Add Lines 3 + 4</strong></td>
</tr>
<tr>
<td>$5075.25</td>
<td>$5075.25</td>
</tr>
</tbody>
</table>

Expenses Made

<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TOTAL EXPENDITURES MADE</strong></td>
<td><strong>TOTAL EXPENDITURES MADE</strong></td>
</tr>
<tr>
<td><strong>Add Lines 8 + 9 + 10</strong></td>
<td><strong>Add Lines 8 + 9 + 10</strong></td>
</tr>
<tr>
<td>$235.95</td>
<td>$235.95</td>
</tr>
</tbody>
</table>

Current Cash Statement

<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ENDING CASH BALANCE</strong></td>
<td><strong>ENDING CASH BALANCE</strong></td>
</tr>
<tr>
<td><strong>Add Lines 12 + 13 + 14 + 15</strong>, then subtract Line 15</td>
<td><strong>Add Lines 12 + 13 + 14 + 15</strong>, then subtract Line 15</td>
</tr>
<tr>
<td>$4839.30</td>
<td>$4839.30</td>
</tr>
</tbody>
</table>

Cash Equivalents and Outstanding Debts

<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CASH EQUIVALENTS</strong></td>
<td><strong>CASH EQUIVALENTS</strong></td>
</tr>
<tr>
<td><strong>Add Line 2 + Line 3 above</strong></td>
<td><strong>Add Line 2 + Line 3 above</strong></td>
</tr>
<tr>
<td>$800</td>
<td>$800</td>
</tr>
</tbody>
</table>

Expenditure Limit Summary for State Candidates

<table>
<thead>
<tr>
<th>Date of Election (mm/dd/yy)</th>
<th>Total to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>/ / /</td>
<td>$</td>
</tr>
</tbody>
</table>

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).

SUMMARY PAGE

Statement covers period
from 1/01/19 through 6/30/19

CALIFORNIA FORM 460
Page 3 of 7

NAME OF FILER
JUSLYN MANALO FOR DALY CITY COUNCIL 2020

Amounts may be rounded to whole dollars.
## Schedule A
**Monetary Contributions Received**

Amounts may be rounded to whole dollars.

**Statement covers period from 1/01/19 through 6/30/19**

**JUSLYN MANALO FOR DALY CITY COUNCIL 2020**

<table>
<thead>
<tr>
<th>DATE</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. 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>1/27/19</td>
<td>Maybelle Manilo</td>
<td>IND COM</td>
<td>Real Estate Agent, Keller Williams</td>
<td>100</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td>1/28/19</td>
<td>Ray Satorre</td>
<td>IND COM</td>
<td>President, Filipino Bayanihan Resource Center</td>
<td>500</td>
<td>500</td>
<td>500</td>
</tr>
<tr>
<td>1/27/19</td>
<td>Sylvester for DC Council 2016</td>
<td>IND COM</td>
<td></td>
<td>200</td>
<td>200</td>
<td>200</td>
</tr>
<tr>
<td>1/27/19</td>
<td>Ray Buenaventura Committee to Re-Elect for Daly City Council 2019</td>
<td>IND COM</td>
<td></td>
<td>500</td>
<td>500</td>
<td>500</td>
</tr>
<tr>
<td>2/16/19</td>
<td>David Canepa for Supervisor 2020</td>
<td>IND COM</td>
<td></td>
<td>250</td>
<td>250</td>
<td>250</td>
</tr>
</tbody>
</table>

**SUBTOTAL $ 1550**

### Schedule A Summary

1. **Amount received this period – itemized monetary contributions.**
   (Include all Schedule A subtotals.) ........................................... $ 2680.25
2. **Amount received this period – unitemized monetary contributions of less than $100** .................................... $ 1595
3. **Total monetary contributions received this period.**
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ........................................... TOTAL $ 4275.25

*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

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
### Schedule A (Continuation Sheet)
#### Monetary Contributions Received

**NAME OF FILER**

JUSLYN MANALO FOR DALY CITY COUNCIL 2020

**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)**
--- | --- | --- | --- | --- | --- | ---
5/02/19 | Art Belenson | ☑ IND | Broker Associate, Scott Keys Properties | 500 | 500 | 
1/27/19 | Sonia Delen | ☑ IND | Senior Vice President, Bank of America Merrill Lynch | 242.45 | 242.45 | 
1/27/19 | Jane Kim | ☑ IND | Unemployed | 145.35 | 145.35 | 
3/21/19 | April Veneracion | ☑ IND | Government Affairs Relations, HMS Associates | 242.45 | 242.45 | 

**SUBTOTAL $** 1130.25

---

*Contributor Codes
IND – Individual
COM – Recipient Committee
OTHER – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee*
**Schedule B - Part 1**

Loans Received

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>Statement covers period</th>
<th>Page of</th>
</tr>
</thead>
<tbody>
<tr>
<td>from 1/01/19</td>
<td>6</td>
</tr>
<tr>
<td>through 6/30/19</td>
<td></td>
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</tbody>
</table>

**JSYLN MANALO FOR DALY CITY COUNCIL 2020**

**FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER**

| 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 | CALENDAR YEAR | PER ELECTION*
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<tr>
<td>slyn Manalo</td>
<td>$_______</td>
<td>$_______</td>
<td>□ PAID</td>
<td>$_______</td>
<td>---% RATE</td>
<td>$_______</td>
<td>CALENDAR YEAR</td>
<td>$_______</td>
<td>PER ELECTION**</td>
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<tr>
<td>ivy City, CA 94014</td>
<td>Community Engagement Associate, Forest City</td>
<td></td>
<td>□ FORGIVEN</td>
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<td>CALENDAR YEAR</td>
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<td>$_______</td>
<td>CALENDAR YEAR</td>
<td>$_______</td>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTALS** $800 $800 $800

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

**Schedule B Summary**

Loans received this period ........................................ $800

(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 $800

(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

FPCC Form 460 (Jan/2016)
FPCC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
Schedule E
Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 1/01/19
through 6/30/19

CALIFORNIA FORM 460
Page 7 of 7
I.D. NUMBER
1416478

NAME OF FILER
JUSLYN MANALO FOR DALY CITY COUNCIL 2020

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)
RAT radio airtime and production costs
RFD returned contributions
SAL campaign workers' salaries
TEL TV 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, e-mail)

NAME AND ADDRESS OF PAYEE
(PF COMMITTEE, ALSO ENTER I.D. NUMBER)

Carlos Fishburn
Daly City, CA 94015

CODE OR DESCRIPTION OF PAYMENT
AMOUNT PAID
FND DJ Services for Fundraiser $ 100

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

SUBTOTAL $ 100

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) $ 100
2. Unitized payment of $100 or under $100 $ 135.95
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) $ 235.95
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) $ 435.95

FPPC Form 460 (Jan/2016)
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