Recipient Committee
Campaign Statement
Cover Page

Statement covers period
from 10/21/2018
through 12/31/2018

Date of election if applicable:
(Month, Day, Year) 11/06/2018

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

2. Type of Statement:
    □ Preelection Statement
    □ Semi-annual Statement
    □ Amendment (Explain below)
    □ Termination Statement
        (Also file a Form 410 Termination)
    □ Quarterly Statement
    □ Special Odd-Year Report

3. Committee Information

   COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE)
   Pamela DiGiovanni for Daly City Council

   STREET ADDRESS (NO P.O. BOX)
   Daly City CA 94015

   CITY STATE ZIP CODE AREA CODE/PHONE

   Mailing Address (if Different) No. and Street or P.O. Box
   Daly City CA 94015

   CITY STATE ZIP CODE AREA CODE/PHONE

   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 01-31-2019
   By ________
   Date

   Executed on 01-31-2019
   By ________
   Date

   Executed on
   By ________
   Date

   Executed on
   By ________
   Date

   FPPC Form 460 (Jan/2016)
   FPPC Advice: advice@fppc.ca.gov (866/275-3772)
### Contributions Received

1. Monetary Contributions .................................................. Schedule A, Line 3 
   
2. Loans Received .......................................................... Schedule B, Line 3 
   
3. SUBTOTAL CASH CONTRIBUTIONS .............................. Add Lines 1 + 2 
   
4. Nonmonetary Contributions ............................................ Schedule C, Line 3 
   
5. TOTAL CONTRIBUTIONS RECEIVED .............................. Add Lines 3 + 4 

### Expenditures Made

6. Payments Made .......................................................... Schedule E, Line 4 
   
7. Loans Made .............................................................. Schedule H, Line 3 
   
8. SUBTOTAL CASH PAYMENTS ................................ Add Lines 6 + 7 
   
9. Accrued Expenses (Unpaid Bills) ................................ Schedule F, Line 3 
   
10. Nonmonetary Adjustment ............................................. Schedule C, Line 3 
   
11. TOTAL EXPENDITURES MADE ..................................... Add Lines 8 + 9 + 10 

### Current Cash Statement

12. Beginning Cash Balance ............................................. Previous Summary Page, Line 16 
   
13. Cash Receipts .......................................................... Column A, Line 3 above 

14. Miscellaneous Increases to Cash ................................ Schedule I, Line 4 

15. Cash Payments .......................................................... Column A, Line 8 above 

16. ENDING CASH BALANCE ............................................. Add Lines 12 + 13 + 14, then subtract Line 15
   
   If this is a termination statement, Line 16 must be zero.

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

### Cash Equivalents and Outstanding Debts

18. Cash Equivalents ....................................................... See instructions on reverse 

19. Outstanding Debts ..................................................... Add Line 2 + Line 9 in Column B above 

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amounts Received</th>
<th>Amounts Made</th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
<td>Contributions Received</td>
<td>$2,283</td>
<td>$2,283</td>
</tr>
<tr>
<td>21</td>
<td>Expenditures Made</td>
<td>$3,582</td>
<td>$3,582</td>
</tr>
</tbody>
</table>

### Expenditure Limit Summary for State Candidates

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

   Date of Election (mm/dd/yy) 
   $2,283
   $3,582

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

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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).
### Schedule A
#### Monetary Contributions Received

- Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>Date Received</th>
<th>Full Name, Street Address, and Zip Code of Contributor</th>
<th>Contributor Code</th>
<th>If an Individual, Enter Occupation and Employer</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>10/3/2018</td>
<td>Suzanne Flecker, San Mateo, CA. 94401</td>
<td>IND</td>
<td>Retired</td>
<td>$200</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10/8/2018</td>
<td>Rick Bonilla, San Mateo, CA 94401</td>
<td>IND</td>
<td>City at San Mateo</td>
<td>$300</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Subtotal:** $1,600

### Schedule A Summary

1. Amount received this period – itemized monetary contributions.  
   (Include all Schedule A subtotals.) .......................................................... $2,200
2. Amount received this period – unitemized monetary contributions of less than $100 .......................................................... $700
3. Total monetary contributions received this period.  
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .......................................................... $2,900

*Contributor Codes
IND = Individual
COM = Recipient Committee
OTH = Other
type emitter, recipient, group or 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

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET 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>10/24/2018</td>
<td>San Francisco Laborers Local 611 3201 18th Street San Francisco CA 94116</td>
<td></td>
<td>Retired</td>
<td>$500</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10/24/2018</td>
<td>Alice Rosen 40nd Ave Daly City CA 94015</td>
<td></td>
<td>Retired</td>
<td>$250</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10/29/2018</td>
<td>Greg Erin Mendez Lake Oswego, OR 97035</td>
<td></td>
<td>Retired</td>
<td>$100</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10/28/2018</td>
<td>Law Office Dr. Marc 980 Pine Street San Francisco CA 94111</td>
<td></td>
<td>&quot;Attorney</td>
<td>$250</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11/23/2018</td>
<td>Rosario L. Carlin DiRicco South San Francisco, CA 90</td>
<td></td>
<td>Retired</td>
<td>$250</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

SUBTOTAL $1,200

*Contributor Codes
IND – Individual
COM – Recipient Committee
OTH – Other (e.g., business entity)
PTY – Political Party
CC – Small Contributor Committee

CALIFORNIA FORM 460
Page 4 of 8
Schd E  Payments Made

NAME OF FILER  Pamela DiGiovanni for Daly City Council 2016

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

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Google.com</td>
<td></td>
<td>Ads</td>
<td>$350</td>
</tr>
<tr>
<td>Google.com</td>
<td></td>
<td>Ads</td>
<td>$500</td>
</tr>
<tr>
<td>Sandhya Rao, San Francisco, CA</td>
<td></td>
<td>Graphics</td>
<td>$620</td>
</tr>
</tbody>
</table>

* 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.) .......................................................... $3,582
2. Unitemized payments made this period of under $100. .................................................................................. $0
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 $3,582
**Schedule E**
(Continuation Sheet)
Payments Made

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Pamela DiGiovanni for Daly City Council 2018

**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>
</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, e-mail)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sugs Event Center</td>
<td></td>
<td>Thank You Event</td>
<td>$900.00</td>
</tr>
<tr>
<td>32 Hillcrest Drive</td>
<td></td>
<td>Venue + Food</td>
<td></td>
</tr>
<tr>
<td>Daly City, CA 94015</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Secretary of State</td>
<td></td>
<td>Annual Fee</td>
<td>$50.00</td>
</tr>
<tr>
<td>Political Reform Division</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sacramento, CA</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pacific Printing</td>
<td></td>
<td>Lit</td>
<td>$1,162.42</td>
</tr>
<tr>
<td>San Jose, CA</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:** $2,112.42

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