Recipient Committee			Date Stamp	CALIFORNIA A CO
Campaign Statement Cover Page (Government Code Sections 84200-84216.5)			RECEIVED	FORM 460
SEE INSTRUCTIONS ON REVERSE	Statement covers period from07/01/2021 through12/31/2021	Date of election if applicable: (Month, Day, Year)	JAN 31 2022 allejo City Clerk	Page 1 of 24  For Official Use Only
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	rimarily Formed Ballot Measure committee ) Controlled ) Sponsored so Complete Part 6) rimarily Formed Candidate/ fficeholder Committee so Complete Part 7)	2. Type of Statement:  Preelection Statement  Semi-annual Statement  Termination Statement  (Also file a Form 410 T  Amendment (Explain b	Speci Supplermination) States	terly Statement fal Odd-Year Report lemental Preelection ment - Attach Form 495
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  Tara Beasley-Stansberry for City Council 2022	NUMBER 438175	Treasurer(s)  NAME OF TREASURER  Tara Beasley-Stansber  MAILING ADDRESS		
CITY STATE ZIP COL	DX	NAME OF ASSISTANT TREASU Nancy L Warren MAILING ADDRESS CITY	STATE ZIP CC	
A. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the State of California  Executed on	that the foregoing is true and correct.  By  By	Signature of Treasurer or Assistant Beasey - Shurstone	rein and in the attached schedul	es is true and complete. I certify
Executed on  Date  Date	Ву	Signature of Controlling Officeholder, Candidate, Signature of Controlling Officeholder, Candidate, Signature of Controlling Officeholder, Candidate, Signature		  FPPC Form 460 (Jan/2016)

Recipient Committee
Campaign Statement
Cover Page — Part 2

COVER PAGE - PART 2							
CALIFORNIA FORM	460						
Page2	of <u>24</u>						

i. Officeholder or Candidate Contr	olled Committee	6.	Primarily Formed Ballo	ot Measure	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE	<del> </del>		NAME OF BALLOT MEASURE				
Tara Beasley-Stansberry							
OFFICE SOUGHT OR HELD (INCLUDE LOCATI	ON AND DISTRICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICT	ION		SUPPORT
City Council Member Vallejo Dist	rict 5			_			OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. ANI	O STREET) CITY STATE ZIP		Identify the controlling off	iceholder, ca	andidate, or state m	neasure p	roponent, if any.
			NAME OF OFFICEHOLDER, CAN	IDIDATE, OR P	ROPONENT		
Related Committees Not Include	d in this Statement: List any committees						
	trolled by you or are primarily formed to receive		OFFICE SOUGHT OR HELD		DISTR	RICT NO. IF	ANY
COMMITTEE NAME	I.D. NUMBER		-				
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Can				
NAME OF TREASURER	YES NO		officeholder(s) or candidate(s	) for which th	is committee is prima	arily forme	ed.
COMMITTEE ADDRESS STREET ADDR	RESS (NO P.O. BOX)		NAME OF OFFICEHOLDER OR C	CANDIDATE	OFFICE SOUGHT O	R HELD	SUPPORT OPPOSE
CITY	TATE ZIP CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR O	CANDIDATE	OFFICE SOUGHT O	R HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER						
			NAME OF OFFICEHOLDER OR C	CANDIDATE	OFFICE SOUGHT O	IK HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?  YES NO		NAME OF OFFICEHOLDER OR C	CANDIDATE	OFFICE SOUGHT O	R HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDR	RESS (NO P.O. BOX)		,				
CITY	TATE ZIP CODE AREA CODE/PHONE		Attac	ch continuati	ion sheets if necess	sary	

# Campaign Disclosure Statement .Summary Page

Amounts may be rounded to whole dollars.

		SUMMARY PAGE
Statem	ent covers period	CALIFORNIA 460
from	07/01/2021	FORM 400
through _	12/31/2021	Page3 of24
		LD. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Tara Beasley-Stansberry for City Council 2022

through 12/31/2021 Page 3 of 24

I.D. NUMBER

1438175

Contributions Received  1. Monetary Contributions	Column A TOTAL THIS PERIOD FROM ATTACHED SCHEDULES) 3,911.00	\$	Column B CALENDAR YEAR TOTALTODATE 7,644.00	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections  1/1 through 6/30 7/1 to Date
2. Loans Received Schedule 8, Line 3	0.00		0.00	
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 3,911.00	\$	7,644.00	20. Contributions  Received \$ \$
4. Nonmonetary Contributions Schedule C, Line 3	0.00		0.00	21. Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 3,911.00	\$	7,644.00	Made \$ \$
Expenditures Made				Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4		\$	3,919.75	Candidates
7. Loans Made Schedule H, Line 3			0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7			3,919.75	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3			0.00	Date of Election Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3			0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$ 2,422.88	\$	3,919.75	\$
Current Cash Statement				J\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 2,898.21		calculate Column B, add	
13. Cash Receipts Column A, Line 3 above	3,911.00		nounts in Column A to the rresponding amounts	*Assessment in this position may be different from amounts
14. Miscellaneous Increases to Cash Schedule I, Line 4	40.74	fro	m Column B of your last	*Amounts in this section may be different from amounts reported in Column B.
15. Cash Payments Column A, Line 8 above	3,084.89	Co	oort. Some amounts in slumn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 3,765.06		ures that should be btracted from previous	
If this is a termination statement, Line 16 must be zero.	 	the	riod amounts. If this is a first report being filed	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ 0.00	ca	this calendar year, only rry over the amounts	
Cash Equivalents and Outstanding Debts			m Lines 2, 7, and 9 (if y).	
18. Cash Equivalents See instructions on reverse				
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ 0.00			

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

Schedule A Monetary Contributions Received .			its may be rounded whole dollars.	Statement coverage from07/01/2		california 460			
SEE INSTRUCTION	ONS ON REVERSE			through <u>12/31/2</u>	021 p	age4	_ of24		
NAME OF FILER					1,1	D. NUMBER			
Tara Beasle	y-Stansberry for City Council 2022				1	438175			
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 DA' CALENDAR YEAR (JAN. 1 - DEC. 31)	re Per	R ELECTION TO DATE REQUIRED)		
08/03/2021	Tanir Ami	⊠IND □COM □OTH □PTY □SCC	Non-Profit Administrator CARESTAR Foundation	250.00	250	.00 P2022	\$250.00		
11/23/2021	Yolanda Banks	IND  COM  OTH  PTY  SCC	Filmmaker Uniting Creativity	100.00	100	.00 P2022	\$100.00		
07/13/2021	Aisha Beasley-Johnson	⊠IND □COM □OTH □PTY □SCC	Retired None	10.00	155	.00 P2022	\$155.00		
07/27/2021	Aisha Beasley-Johnson	⊠IND □COM □OTH □PTY □SCC	Retired None	10.00	155	.00 P2022	\$155.00		
08/10/2021	Aisha Beasley-Johnson	⊠IND □COM □OTH □PTY □SCC	Retired None	10.00	155	.00 P2022	\$155.00		
			SUBTOTAL\$	380.00			11000000		
1. Amount re (Include a	A Summary ceived this period – itemized monetary contributions. Il Schedule A subtotals.)			3,836.00 75.00	IND – Ind COM – R (c OTH – O	ecipient Comn other than PT ther (e.g., but	Y or SCC)		
3. Total mone	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colu			3,911.00		litical Party nall Contributo	r Committee		

SCHEDULE A (CONT.)

Monetary	Contributions Received	Ontributions Received  Amounts may be rounded to whole dollars.		Statement cove		california 460		
				through12/31/	<sup>/2021</sup> F	age5	of24	
NAME OF FILER			<u>_</u>			.D. NUMBER	?	
Tara Beasley	-Stansberry for City Council 2022				:	L438175		
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 D CALENDAR YEA (JAN. 1 - DEC. 3	R	PER ELECTION TO DATE (IF REQUIRED)	
08/24/2021	Aisha Beasley-Johnson	⊠IND □COM □OTH □PTY □SCC	Retired None	10.00	155	.00 P202	22 \$155.00	
09/07/2021	Aisha Beasley-Johnson	⊠IND □COM □OTH □PTY □SCC	Retired None	10.00	155	.00 P202	\$155.00	
09/21/2021	Aisha Beasley-Johnson		Retired None	10.00	155	.00 P202	22 \$155.00	
10/05/2021	Aisha Beasley-Johnson	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired None	10.00	155	.00 P202	22 \$155.00	
10/19/2021	Aisha Beasley-Johnson	⊠IND □COM □OTH □PTY □SCC	Retired None	10.00	155	.00 P202	\$155.00	
			SUBTOTALS	50.00				

\*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party

SCHEDULE A (CONT.)

Monetary	Ionetary Contributions Received		be rounded dollars.	Statement cove	2021	california 460 form		
				through12/31/		Page 6	_ of	
NAME OF FILER						I.D. NUMBER		
Tara Beasley	-Stansberry for City Council 2022	,				1438175		
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 D CALENDAR YEA (JAN. 1 - DEC. S	AR	ER ELECTION TO DATE REQUIRED)	
11/02/2021	Aisha Beasley-Johnson	⊠IND □COM □OTH □PTY □SCC	Retired None	10.00	15	5.00 P2022	\$155.00	
11/16/2021	Aisha Beasley-Johnson	⊠IND □COM □OTH □PTY □SCC	Retired None	10.00	15	5.00 P2022	\$155.00	
11/30/2021	Aisha Beasley-Johnson	⊠IND □COM □OTH □PTY □SCC	Retired None	10.00	15	5.00 P2022	\$155.00	
12/19/2021	Chandra L Brooks	⊠IND □COM □OTH □PTY □SCC	Founder The Powerhouse Women	100.00	10	0.00 P2022	\$100.00	
07/22/2021	Rhonda Harris	⊠IND □COM □OTH □PTY □SCC	Veterans Housing Manager RF and Associates	75.00	72	5.00 P2022	\$725.00	
			SUBTOTALS	205.00		r kroest.		

\*Contributor Codes

IND - Individual

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OTH – Other (e.g., business entity) PTY – Political Party

SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may be rounded to whole dollars.		Statement covers period from07/01/2021		california 460 form		
				through 12/31/	2021 F	age7_	of24	
NAME OF FILER					ï	.D. NUMBER		
Tara Beasley	-Stansberry for City Council 2022					438175		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, 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 D CALENDAR YEA (JAN. 1 - DEC. 3	R	PER ELECTION TO DATE IF REQUIRED)	
07/22/2021	Rhonda Harris	⊠IND □COM □OTH □PTY □SCC	Veterans Housing Manager RF and Associates	75.00	725	.00 P2022	\$725.00	
08/22/2021	Rhonda Harris	⊠IND □COM □OTH □PTY □SCC	Veterans Housing Manager RF and Associates	75.00	725	.00 P2022	\$725.00	
09/22/2021	Rhonda Harris	⊠IND □COM □OTH □PTY □SCC	Veterans Housing Manager RF and Associates	75.00	725	.00 P2022	\$725.00	
10/22/2021	Rhonda Harris	⊠IND □COM □OTH □PTY □SCC	Veterans Housing Manager RF and Associates	75.00	725	.00 P2022	\$725.00	
11/22/2021	Rhonda Harris	⊠IND □COM □OTH □PTY □SCC	Veterans Housing Manager RF and Associates	75.00	725	.00 P2022	\$725.00	
			SUBTOTALS	375.00	april de la companya de la companya La companya de la co			

\*Contributor Codes

IND - Individual

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OTH – Other (e.g., business entity) PTY – Political Party

# Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded

SCHEDULE A (	CONT.)
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Monetary	to whole		dollars.	from 07/01/	CA	FORM 460			
				through12/31/	2021 Pag	je <u> </u>	of		
NAME OF FILER					I.D.	NUMBER			
Tara Beasley	-Stansberry for City Council 2022				14:	38175			
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 DAT CALENDAR YEAR (JAN. 1 - DEC. 31)	(IF	RELECTION TO DATE REQUIRED)		
12/22/2021	Rhonda Harris	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Veterans Housing Manager RF and Associates	75.00		00 P2022	\$725.00		
11/22/2021	Janie Holland	⊠IND □COM □OTH □PTY □SCC	Community Building and Engagement Director Community Housing Development Corporation	100.00	100.6	00 P2022	\$100.00		
12/23/2021	Rodesha Jimmerson	⊠IND □COM □OTH □PTY □SCC	Senior Eligibility Worker City and County of San Francisco	200.00	200.6	00 P2022	\$200.00		
12/17/2021	Jay King	⊠IND □COM □OTH □PTY □SCC	President California Black Chamber	400.00	400.0	00 P2022	\$400.00		
11/20/2021	Rachel Lucas	⊠IND □COM □OTH □PTY □SCC	Fleet Supervisor McGeeAir	250.00		00 P2022	\$250.00		
			SUBTOTAL \$	1,025.00	in programme and		ari wasan ka asilalio walio		

\*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 A (Continuation Sheet)** SCHEDULE A (CONT.) **Monetary Contributions Received** Amounts may be rounded Statement covers period **CALIFORNIA** to whole dollars. **FORM** 07/01/2021 from 12/31/2021 through\_ Page \_\_\_\_9 of \_\_\_24 I.D. NUMBER NAME OF FILER 1438175 Tara Beasley-Stansberry for City Council 2022 AMOUNT PER ELECTION IF AN INDIVIDUAL, ENTER CUMULATIVE TO DATE FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR DATE RECEIVED THIS TO DATE OCCUPATION AND EMPLOYER CALENDAR YEAR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED CODE \* (IF REQUIRED) (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN, 1 - DEC. 31) OF BUSINESS) 125.00 P2022 \$125.00 12/27/2021 Ramona M Mann Teacher 125.00 X IND Swing Education ПСОМ ПОТН □ PTY □ SCC 07/15/2021 Paris Mason Career Transition 25.00 375.00 P2022 \$375.00 [X]IND Specialist ☐ COM Treasure Island Job Corps ☐ OTH □ PTY □ SCC 375.00 P2022 07/30/2021 Career Transition 25.00 \$375.00 Paris Mason X IND Specialist ПСОМ Treasure Island Job Corps ПОТН □ PTY SCC 375.00 P2022 25.00 \$375.00 08/13/2021 Paris Mason Career Transition X IND Specialist ПСОМ Treasure Island Job Corps ПОТН □ PTY SCC

Career Transition

Treasure Island Job Corps

SUBTOTAL\$

Specialist

XIND

□ COM

□OTH □PTY □SCC

\*Contributor Codes

IND - Individual

08/27/2021

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

Paris Mason

PTY - Political Party

SCC - Small Contributor Committee

375.00 P2022

\$375.00

25.00

225.00

**Schedule A (Continuation Sheet)** Monetary Contributions Received

SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may to whole		Statement cove	-	FORM 460			
				through 12/31/	2021	Page of			
NAME OF FILER			· · · · · · · · · · · · · · · · · · ·			I.D. NUMBE	R		
Tara Beasley	-Stansberry for City Council 2022					1438175			
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 CALENDAR YE (JAN. 1 - DEC.	AR 31)	PER ELECTION TO DATE (IF REQUIRED)		
09/10/2021	Paris Mason	⊠IND □COM □OTH □PTY □SCC	Career Transition Specialist Treasure Island Job Corps	25.00	375.00				
09/24/2021	Paris Mason	⊠IND □COM □OTH □PTY □SCC	Career Transition Specialist Treasure Island Job Corps	25.00	375.00		22 \$375.00		
10/08/2021	Paris Mason		Career Transition Specialist Treasure Island Job Corps	25.00	37	5.00 P20	22 \$375.00		
10/22/2021	Paris Mason	⊠IND □COM □OTH □PTY □SCC	Career Transition Specialist Treasure Island Job Corps	25.00		5.00 P20			
11/05/2021	Paris Mason	⊠IND □COM □OTH □PTY □SCC	Career Transition Specialist Treasure Island Job Corps	25.00	37	5.00 P20	22 \$375.00		
			SUBTOTAL\$	125.00	ingsantingespale		469-540096		

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

# Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded

SCHEDULE A (	(CONT.)
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Monetary	Contributions Received	Amounts may be rounded to whole dollars.		Statement covers period from07/01/2021		CALIFORNIA 46	
				through12/31/	2021	Page11 of24	
NAME OF FILER						I.D. NUMBER	₹
Tara Beasley	-Stansberry for City Council 2022					1438175	
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 I CALENDAR YE (JAN. 1 - DEC.	AR 31)	PER ELECTION TO DATE (IF REQUIRED)
11/19/2021	Paris Mason	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Career Transition Specialist Treasure Island Job Corps	25.00		5.00 P20	
12/03/2021	Paris Mason	⊠IND □COM □OTH □PTY □SCC	Career Transition Specialist Treasure Island Job Corps	25.00	375.00		22 \$375.00
12/17/2021	Paris Mason	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Career Transition Specialist Treasure Island Job Corps	25.00	37	5.00 P20	22 \$375.00
12/31/2021	Paris Mason	⊠IND □COM □OTH □PTY □SCC	Career Transition Specialist Treasure Island Job Corps	25,00		5.00 P20	
11/25/2021	Siddig Moody Jihad	⊠IND □COM □OTH □PTY □SCC	Principal Denim Culture Corp	501.00	50	1.00 P20	\$501.00
			SUBTOTAL \$	601.00			

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PTY - Political Party

SCHEDULE A (CONT.)

Monetary	Contributions Received	Amounts may to whole		Statement cove	2021	FORM 460	
····				through12/31/	1 45	e 12	of
NAME OF FILER					I.D.	NUMBER	
Tara Beasley	-Stansberry for City Council 2022				143	8175	<u> </u>
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT CUMULATIVE TO D. RECEIVED THIS CALENDAR YEA PERIOD (JAN. 1 - DEC. 3:		(IF i	ELECTION TO DATE REQUIRED)
12/18/2021	Rowena Pascual	⊠IND □COM □OTH □PTY □SCC	Office Specialist III Social Services Agency	100.00		0 P2022	\$100.00
09/28/2021	Mia Livas Porter	⊠IND □COM □OTH □PTY □SCC	Not employed Not employed	100.00	100.0	0 P2022	\$100.00
11/15/2021	Fane Rogers	⊠IND □COM □OTH □PTY □SCC	Manager Family Love Homecare	100.00	100.0	0 P2022	\$100.00
09/25/2021	Patricia Seith	⊠IND □COM □OTH □PTY □SCC	Homemaker None	100.00	100.0	0 P2022	\$100.00
11/08/2021	Courtney Welch	⊠IND □COM □OTH □PTY □SCC	Director of Policy and Communications Bay Area Community Land Trust	200.00	200.0	0 P2022	\$200.00
			SUBTOTAL	600.00			

\*Contributor Codes

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OTH - Other (e.g., business entity)

PTY - Political Party

**Schedule A (Continuation Sheet)** SCHEDULE A (CONT.) **Monetary Contributions Received** Amounts may be rounded Statement covers period **CALIFORNIA** to whole dollars. **FORM** 07/01/2021 from 12/31/2021 through \_\_ Page \_\_\_\_13 of \_\_24 I.D. NUMBER NAME OF FILER 1438175 Tara Beasley-Stansberry for City Council 2022 AMOUNT CUMULATIVE TO DATE PER ELECTION IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR DATE RECEIVED THIS CALENDAR YEAR TO DATE OCCUPATION AND EMPLOYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE \* RECEIVED PERIOD (IF REQUIRED) (IF SELF-EMPLOYED, ENTER NAME (JAN. 1 - DEC. 31) OF BUSINESS) \$100.00 100.00 P2022 Clarissa Williams 100.00 11/26/2021 Retired XIND Retired □ COM Потн □ PTY □scc 175.00 P2022 07/14/2021 Sylvia Williams Retired 150,00 \$175.00 XIND None COM □ OTH □ PTY SCC □ COM ПОТH PTY SCC

SUBTOTAL\$

250.00

□ COM □ OTH □ PTY □scc ☐ IND □ coм □ OTH □ PTY □ SCC

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

Schedule E Payments Made  SEE INSTRUCTIONS ON REVERSE NAME OF FILER	S Made Amounts may be rounded to whole dollars.  ONS ON REVERSE			01/2021 31/2021	CALIFORNIA FORM Page I.D. NUMBER	400
Tara Beasley-Stansberry for City Council 2022					1438175	
CODES: If one of the following codes accurately described CMP campaign paraphernalia/misc. CNS campaign consultants contribution (explain nonmonetary)* CVC civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LTC campaign literature and mailings	MBR member communical MTG meetings and appea OFC office expenses PET petition circulating PHO phone banks POL polling and survey r	tions trances esearch d messenger services	RAD radio airtim RFD returned co SAL campaign v TEL t.v. or cable TRC candidate tr TRS staff/spouse TSF transfer bet VOT voter regist	e and production of intributions vorkers' salaries airtime and production avel, lodging, and travel, lodging, a ween committees	action costs meals nd meals of the same cand	lidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	E OR	DESCRIPTION OF PAYMEN	T	AM	OUNT PAID
Anedot	FND		100 100 100			2.00
Anedot	FND					6.60
Anedot	FND					2.00
Payments that are contributions or independent expenditures	must also be summarized	on Schedule D.		SUE	BTOTAL\$	10.6
Schedule F Summary						

0.00

<sup>^</sup> Schedule E				SCHEDULE E (CON			
(Continuation Sheet)  Payments Made	Amounts may be rounded to whole dollars.			Statement covers period from 07/01/2021	california 460		
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				through 12/31/2021	Page 15 of 24		
Tara Beasley-Stansberry for City Council 2022					1438175		
CODES: If one of the following codes accurately  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 (expled legal defense)  LIT campaign literature and mailings	MBR member con MTG meetings an OFC office exper PET petition circu PHO phone bank POL polling and lain)* POS postage, de	nmunications d appearance uses ulating s survey resea livery and me	95	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries t.v. or cable airtime and protract candidate travel, lodging, at Staff/spouse travel, lodging	n costs  duction costs  d meals , and meals es of the same candidate/sponsor		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DES	CRIPTION OF PAYMENT	AMOUNT PAID		
Anedot		FND			10.30		
Anedot		FND			2.00		
Anedot		FND			3.30		
Anedot		FND			2.00		
Anedot		FND			1.30		

 $<sup>^{\</sup>star}$  Payments that are contributions or independent expenditures must also be summarized on Schedule D.

<sup>1</sup> Schedule E						sc	CHEDULE E (CONT.)	
(Continuation Sheet)	Amounts may b	s may be rounded			Statement covers period	CALIFOR	CALIFORNIA 460	
∝ Payments Made	to whole do	ollars.		fron	from 07/01/2021 FORM			
SEE INSTRUCTIONS ON REVERSE				thro	ough <u>12/31/2021</u>	Page <u>.1</u>	.6 of <u>24</u>	
NAME OF FILER						I.D. NUMBEI	R	
Tara Beasley-Stansberry for City Council 2022						1438175		
CODES: If one of the following codes accurately d	lescribes the payment, y	ou may	enter the code.	Otherwise	, describe the paymen	t.		
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 temporary) LEG legal defense LIT campaign literature and mailings		d appearainses ilating s survey rese livery and i	nces	RFD SAL TEL TRC TRS TSF VOT	campaign workers' salarie t.v. or cable airtime and pr candidate travel, lodging, a staff/spouse travel, lodging transfer between committe	es roduction costs and meals g, and meals ees of the same	·	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTI	ON OF PAYMENT		AMOUNT PAID	
Anedot		FND					2.00	
Anedot		FND					9.60	
Anedot		FND					4.30	
Anedot		FND					2.00	
Anedot		FND					6.60	
* Payments that are contributions or independent expenditures	must also be summarized on	Schedule	D.	······································	S	SUBTOTAL \$	24.50	

* Schedule E (Continuation Sheet)  Payments Made  SEE INSTRUCTIONS ON REVERSE		Amounts may be rounded to whole dollars.			SCHEDULE E (CON	
NAME OF FILER				•	I.D. NUMBE	₽R
Tara Beasley-Stansberry for City Council 2022					1438175	
CODES: If one of the following codes accurately decomposition of the following codes accurately decomposition (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  FND fundraising events  IND independent expenditure supporting/opposing others (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  FND fundraising events  IND independent expenditure supporting/opposing others (explain defense)  LEG legal defense  LIT campaign literature and mailings	MBR member con MTG meetings an OFC office exper PET petition circu PHO phone bank POL polling and in)* POS postage, de	imunications d appearance ises lating s survey resea ivery and me	es	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaried t.v. or cable airtime and production RFD candidate travel, lodging, a staff/spouse travel, lodging transfer between committed voter registration WEB rediction redict	on costs  es roduction costs and meals g, and meals ees of the sam	e candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DE	SCRIPTION OF PAYMENT		AMOUNT PAID
Anedot		FND				2.00
Anedot		FND				12.60
Anedot		FND				12.30
Anedot		FND				36.54
Anedot		FND				2.00
* Payments that are contributions or independent expenditures i	must also be summarized on	Schedule D.	1	S	SUBTOTAL \$	65.44

<sup>5</sup> Schedule E					8	SCHEDULE E (CONT
(Continuation Sheet)	Amounts may b	e rounded		Statement covers period	CALIFO	PRNIA 460
∡ Payments Made	to whole do	llars.		from 07/01/2021	FOR	M 400
SEE INSTRUCTIONS ON REVERSE				through 12/31/2021		18 of 24
NAME OF FILER					I.D. NUMB	ER
Tara Beasley-Stansberry for City Council 2022					1438179	5
CODES: If one of the following codes accurately describ	es the payment, y	ou may er	nter the code. Oth	erwise, describe the payme	nt.	
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 com MTG meetings an OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, del PRO professional PRT print ads	d appearance ses lating survey resear ivery and me	ch	RAD radio airtime and product RFD returned contributions SAL campaign workers' salari t.v. or cable airtime and product randidate travel, lodging, taff/spouse travel, lodging transfer between commit voter registration WEB	les production costs and meals ng, and meals tees of the san	ne candidate/sponso
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE (	OR DE	SCRIPTION OF PAYMENT		AMOUNT PAID
Anedot		FND				27.5
Anedot		FND				11.6
Anedot		FND				1.3
Credit One Bank		OFC				0.5
Credit One Bank		OFC		•		208.9
Cleart one pank		Orc				200.9
* Payments that are contributions or independent expenditures must al	so he summarized on :	Schedule D		· <del></del>	SUBTOTAL \$	249.8

Schedule E (Continuation Sheet)	Amounts may be rounded to whole dollars.			Si	atement covers period	CALIFO FOR	
· Payments Made	to whole dollars.				07/01/2021	FUR	IVI
SEE INSTRUCTIONS ON REVERSE				throu	gh 12/31/2021	Page	19 of 24
NAME OF FILER					. '	I.D. NUMB	ER
Tara Beasley-Stansberry for City Council 2022						143817	5
CODES: If one of the following codes accurately described CMP campaign paraphernalia/misc.	es the payment, y	•	nter the code. (		describe the payme		
CNS campaign consultants.  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	MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and POS postage, del	d appearance nses slating s survey resear livery and me	ch	RFD SAL TEL TRC TRS TSF VOT	returned contributions campaign workers' salar t.v. or cable airtime and candidate travel, lodging, staff/spouse travel, lodgi transfer between commit voter registration information technology c	ries production costs , and meals ing, and meals ttees of the sar	me candidate/sponso
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTIO	N OF PAYMENT		AMOUNT PAID
Credit One Bank		OFC					40.1
Credit One Bank		OFC					10.4
Credit One Bank		WEB					59.4
Credit One Bank		WEB					118.9
Credit One Bank			OFC/WEB				119.0
* Boumonte that are contributions or independent expanditures must al	eo ha cummarizad on	Schadula D				SUBTOTAL \$	347.9

ˆ Schedule E (Continuation Sheet) ₄ Payments Made	Amounts may b to whole do	fre	Statement covers period	CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE			th	rough 12/31/2021	Page 20 of 24
NAME OF FILER					I.D. NUMBER
Tara Beasley-Stansberry for City Council 2022					. 1438175
CODES: If one of the following codes accurately de 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 legal defense) LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings an OFC office expen PET petition circu PHO phone banks POL polling and s in)* POS postage, del	munications d appearances ses lating	RF RF SA TE TF TF ger services TS ccounting)	AD radio airtime and production returned contributions AL campaign workers' salaries Lt.v. or cable airtime and production candidate travel, lodging, a staff/spouse travel, lodging	on costs  ss reduction costs and meals g, and meals sees of the same candidate/spons
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIP	TION OF PAYMENT	AMOUNT PAID
Secretary of State		FIL			50
wepac LLC		PRO	)/OFC		352
wepac LLC		PRO	)/OFC		309
wepac LLC		PRO	)/OFC		278
wepac LLC		PRO	)/OFC		270
* Payments that are contributions or independent expenditures n	nust also be summarized on	Schedule D.			SUBTOTAL \$ 1,260.

Payments Made  SEE INSTRUCTIONS ON REVERSE NAME OF FILER	Amounts may be rounded to whole dollars.		from	07/01/2021 ugh12/31/2021	CALIFO FOR	21 of 24 BER	
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  MTC  OFC  PET  PHC  PHC  PHC  POS  PHC  POS  PRC	R member com G meetings and Office expen petition circui phone banks polling and s postage, deli	munications d appearance ses lating curvey resear livery and me	s	RAD RFD SAL TEL TRC TRS TSF VOT	describe the paymer radio airtime and product returned contributions campaign workers' salari t.v. or cable airtime and product travel, lodging, staff/spouse travel, lodging transfer between committ voter registration information technology or	es production cost and meals g, and meals lees of the sa	s me candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	DR D	ESCRIPTIO	ON OF PAYMENT		AMOUNT PAID
wepac LLC			PRO/OFC				270.00
wepac LLC			PRO/OFC				540.00
wepac LLC			PRO/OFC				297.10

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

SUBTOTAL \$

1,107.10

ີ Schedule F , Accrued Expenses (Unpaid Bills)	Amounts may be round to whole dollars.	đed	Statement cover from07/01/	(2021 FC	SCHEDUL FORNIA <b>46(</b> ORM
SEE INSTRUCTIONS ON REVERSE			tillough ==-//	Page	22 of 24
NAME OF FILER				I.D. NU	MBER
Tara Beasley-Stansberry for City Council 2022				1438	175
CODES: If one of the following codes accurately described.  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 communicatio MTG meetings and appears OFC office expenses PET petition circulating PHO phone banks POL polling and survey res POS postage, delivery and PRO professional services PRT print ads	ns inces search messenger services	RAD radio airtime a RFD returned contr SAL campaign wor TEL t.v. or cable air TRC candidate trave TRS staff/spouse tr TSF transfer betwe VOT voter registrati	nd production costs ibutions kers' salaries rtime and production cosel, lodging, and meals avel, lodging, and meals en committees of the sa	; ame candidate/sponso
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
wepac LLC	PRO/OFC	352.60	0.00		
77.0	PRO/ORC	200.43	1 000	1 200 41	1

	1	OF THIS PERIOD		V.1220 /12. 01.1 01.1 2,	OI THIS ! ENIOD
wepac LLC	PRO/OFC	352.60	0.00	352.60	0.00
wepac LLC	PRO/OFC	309.41	0.00	309.41	0.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS \$	662.01	\$ 0.00 <b>\$</b>	662.01\$	0.00

#### Schedule F Summary

Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)	INCURRED TOTALS \$	0.00
Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)	PAID TOTALS \$	662.01
Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)	NET \$	-662.01 May be a negative number

Schedule G							SCHEDULE G
Payments Made by an Agent or Independent	Aı	Amounts may be rounded to whole dollars.			Statement covers period from07/01/2021		RNIA 160
Contractor (on Behalf of This Committee)				fro			FORM 400
SEE INSTRUCTIONS ON REVERSE				thi	ough 12/31/2021	- Page2	23 of24
NAME OF FILER				I		I.D. NUMBE	ER
Tara Beasley-Stansberry for City Council 2022						1438175	
NAME OF AGENT OR INDEPENDENT CONTRACTOR							
Credit One Bank							
CODES: If one of the following codes accurately describ	oes the paym	ent, you may	enter the code	e. Otherwis	e, describe the paymer	nt.	
CMP campaign paraphernalia/misc.		er communicatio			radio airtime and production	n costs	
CNS campaign consultants CTB contribution (explain nonmonetary)*		gs and appears	inces	RFD SAL	returned contributions campaign workers' salaries		
CVC civic donations		expenses n circulating		TEL	. •		
FIL candidate filing/ballot fees	PHO phone			TRC	•		
FND fundraising events	POL polling	and survey res	earch	TRS		, and meals	
IND independent expenditure supporting/opposing others (explain)*			messenger service		transfer between committee	es of the same	e candidate/sponsor
LEG legal defense LIT campaign literature and mailings	PRO profess PRT print a		(legal, accounting)	VOT	voter registration information technology cost	te /internet e-r	nail\
* Payments that are contributions or independent expenditures must a	•		. D	VVCD	montation technology cost	is (internet, e-n	nany
	iso be summanz	- I Scriedule	. D.		· · · · · · · · · · · · · · · · · · ·		l .
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTIO	N OF PAYMENT		AMOUNT PAID
UPS Store		OFC					150.00
					· · · · · · · · · · · · · · · · · · ·		
			1				]

Attach additional information on appropriately labeled continuation sheets.

TOTAL\* \$

150.00

<sup>\*</sup> Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule I				SCHEDULE
Miscellaneous Increases to Cash		Amounts may be rounded to whole dollars.	Statement covers period	CALII ORIGIA
		to whole donars.	from07/01/2021	FORM TOU
OFF INOTOLICTIONS ON BEVED	ee e		through 12/31/2021	Page <u>24</u> of <u>24</u>
SEE INSTRUCTIONS ON REVER NAME OF FILER		I.D. NUMBER		
Tara Beasley-Stansbern	ry for City Council 2022			1438175
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DE	SCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
Attach additional inform	nation on appropriately labeled continuation sheets.		SUBTO	OTAL \$ 0.00
Schedule I Summa	ry			
	o cash this period		\$	0.00
	es to cash of under \$100 this period			40.74
3. Total of all interest re	eceived this period on loans made to others. (Sch	edule H, Column (e).)	\$	0.00
	increases to cash this period. (Add Lines 1, 2, a e 14.)		TOTAL \$	40.74