Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84	1216.5)	S from throu	tatement covers period07/01/2022 agh09/24/2022	Date of election if applicable: (Month, Day, Year)	E-Filed 09/29/2022 15:06:26 Filing ID: 204900534		ALIFORNIA 460 FORM of 28 For Official Use Only
1. Type of Recipient Commit State Candidate Election Co Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee	lled Committee ommittee	es – Complete I Primarily Committe Contr Spon (Also Compl	Parts 1, 2, 3, and 4. Formed Ballot Measure ee colled secred lete Part 6) Formed Candidate/ der Committee	2. Type of Statement:		Suppleme	Statement dd-Year Report ntal Preelection - Attach Form 495
3. Committee Information COMMITTEE NAME (OR CANDIDATE'S Cummings for Supervisor 2 STREET ADDRESS (NO P.O. BOX)		I.D. NUMB 144030 IITTEE)		Treasurer(s) NAME OF TREASURER ROSS Albert MAILING ADDRESS	STATE	ZIP CODE	AREA CODE/PHONE
CITY	STATE	ZIP CODE	AREA CODE/PHONE	Santa Cruz NAME OF ASSISTANT TREASUR	CA RER IF ANY	95060	(925)788-9638
Santa Cruz	CA	95060	(773)319-3628	Justin Cummings	, /		
MAILING ADDRESS (IF DIFFERENT)			(773)319-3020	MAILING ADDRESS			
CITY	STATE	ZIP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
Santa Cruz	CA	95061		Santa Cruz	CA	95060	
OPTIONAL: FAX / E-MAIL ADDRESS cummings4supervisor@gmail	.com			OPTIONAL: FAX / E-MAIL ADDR	ESS		
under penalty of perjury under the last executed on09/29/ Executed on09/29/ Executed on	tws of the State of C 2022 ate		e foregoing is true and correct. By Ross Alber By Justin Cum	Signature of Treasurer or Assistant	Freasurer ponent or Responsible Officer of:		true and complete. I certify

Recipient Committee Campaign Statement Cover Page — Part 2

	COVER	PAG	E - PART	2
	FORNIA DRM		160	
Page _	2	of _	28	

Officeholder or Candidate Controlled Comm	nittee	6	6. Primarily Formed Ball	ot Measure Comm	nittee	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
Justin Cummings						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRIC	CT NUMBER IF APPLICABL	E)	BALLOT NO. OR LETTER	JURISDICTION		
County Supervisor: County District 3					L	OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	DITY STATE	ZIP	Identify the controlling of	ficeholder, candidate,	or state measure	proponent, if any
Sa	anta Cruz CA	95060	NAME OF OFFICEHOLDER, CA	NDIDATE OR PROPONEN	JT	
Related Committees Not Included in this Statement that are controlled by you contributions or make expenditures on behalf of your call.	or are primarily formed t		OFFICE SOUGHT OR HELD		DISTRICT NO	. IF ANY
COMMITTEE NAME	I.D. NUMBER				I	
NAME OF TREASURER	CONTROLLED COMMITT	EE?	7. Primarily Formed Can officeholder(s) or candidate(
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. B	BOX)		NAME OF OFFICEHOLDER OR	CANDIDATE OFFIC	E SOUGHT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP C	CODE AREA COD	DE/PHONE	NAME OF OFFICEHOLDER OR	CANDIDATE OFFIC	E SOUGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE OFFIC	E SOUGHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITT		NAME OF OFFICEHOLDER OR	CANDIDATE OFFIC	E SOUGHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. B	BOX)					
CITY STATE ZIP C	CODE AREA COD	DE/PHONE	Atta	ach continuation shee	ets if necessary	

www.fppc.ca.gov

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SU	MMARY PAGE
CALIFORNIA	460

Statement covers period **FORM** 07/01/2022 from _ Page ____3 ___ of ____28 09/24/2022 through _ I.D. NUMBER 1440307

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Cummings for Supervisor 2022

Cummings for Supervisor 2022					1440307
Contributions Received	(Column A TOTALTHIS PERIOD (FROM ATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions Schedule A, Line 3	\$	25,532.00	\$	63,761.00	
2. Loans Received Schedule B, Line 3		0.00		0.00	1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	25,532.00	\$	63,761.00	20. Contributions Received \$ \$
4. Nonmonetary Contributions Schedule C, Line 3		0.00		0.00	21. Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	25,532.00	\$	63,761.00	Made \$ \$
Expenditures Made					Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$	10,684.52	\$	57,940.23	Candidates
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	10,684.52	\$	57,940.23	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3		0.00		0.00	Date of Election Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3		0.00		0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$	10,684.52	\$	57,940.23	\$
Current Cash Statement					\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	2,263.22	То	calculate Column B, add	
13. Cash Receipts Column A, Line 3 above		25,532.00		ounts in Column A to the responding amounts	
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	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		10,684.52		ort. Some amounts in lumn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	17,110.70	figu	ures that should be	
If this is a termination statement, Line 16 must be zero.			pei	otracted from previous riod amounts. If this is first report being filed	
7. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for car	this calendar year, only ry over the amounts	
Cash Equivalents and Outstanding Debts		0.00	from an	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

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

DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE * C	Schedule A Monetary Contributions Received SEE INSTRUCTIONS ON REVERSE NAME OF FILER Cummings for Supervisor 2022			ts may be rounded whole dollars.	Statement cover from	022 Pa	CALIFORNIA FORM Page 4 of 28 I.D. NUMBER 1440307		
Chicago, IL 60643	DATE	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR		OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME	RECEIVED THIS	CALENDAR YEAR	_	TO DATE	
Santa Cruz, CA 95062	07/03/2022		□COM □OTH □PTY		200.00	300.	00 G2022	\$100.00	
Santa Cruz, CA 95064	07/10/2022		□COM □OTH □PTY		500.00	800.	00 G2022	\$400.00	
Santa Cruz, CA 95060	07/10/2022		□COM □OTH □PTY	University of California	525.00	525.	00		
Santa Cruz, CA 95061 COM OTH SCC SCC	07/10/2022		□COM □OTH □PTY		525.00	525.	00 G2022	\$250.00	
SUBTOTAL \$ 1,950.00	07/10/2022		□COM □OTH □PTY		200.00	600.	00 G2022	\$400.00	
				SUBTOTAL	\$ 1,950.00				

Schedule A Summary

Amount received this period – itemized monetary contributions.
 (Include all Schedule A subtotals.)

 Amount received this period – unitemized monetary contributions of less than \$100
 Total monetary contributions received this period.

*Contributor Codes

IND - Individual

25,532.00

COM – Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

			from07/01/	2022	ORM 400
			through ^{09/24/}	2022 Page	5 of28
NAME OF FILER				I.D. NI	JMBER
Cummings for Supervisor 2022				1440	307
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRI	BUTOR 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)
07/11/2022 Dana Frank Santa Cruz, CA 95060	⊠IND □COM □OTH □PTY □SCC	Professor Retired	525.00	525.00	
07/11/2022 Paula Mack Santa Cruz, CA 95062	⊠IND □COM □OTH □PTY □SCC	Not Employed Not Employed	300.00	400.00	G2022 \$100.00
07/11/2022 Roland Saher Santa Cruz, CA 95062		None None	300.00	325.00	G2022 \$25.00
07/11/2022 Pauline Seales Santa Cruz, CA 95060		Not employed Not employed	50.00	150.00	
07/11/2022 Jeffrey Smedberg Santa Cruz, CA 95062	⊠IND □ COM □ OTH □ PTY □ SCC	Not Employed Not Employed	525.00	550.00	G2022 \$25.00
		SUBTOTAL	\$ 1,700.00		

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA 160

Statement covers period

	from07/01	L/2022	ORM 400
	through09/24	Page _	6 of <u>28</u>
NAME OF FILER	_	I.D. NU	MBER
Cummings for Supervisor 2022		14403	07
DATE OCCUP	INDIVIDUAL, ENTER ATION AND EMPLOYER F-EMPLOYED, ENTER NAME OF BUSINESS) AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/12/2022 Jennie Duscheck Santa Cruz, CA 95060 XIND Retired COM OTH PTY SCC	525.00		G2022 \$500.00
07/13/2022 Scott Ducar Austin, TX 78741 Sam-cs Austin, TX 78741 Sam-cs	or 200.00	200.00	
07/15/2022 Jennifer Krach Monte Sereno, CA 95030 SIND COM OTH PTY SCC	525.00	1,025.00	G2022 \$500.00
07/15/2022 William Shanbrom Ojai, CA 93023 William Shanbrom Ojai, CA 93023 OTH PTY SCC		525.00	
	re Director 25.00 All Movement	225.00	G2022 \$125.00
	SUBTOTAL \$ 1,800.00		

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC) OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

		13 1111010		from07/01/	2022	ORM +	OU
				through09/24/	2022 Page	7 of2	28
IAME OF FILER			_		I.D. N	UMBER	
ummings for	Supervisor 2022				1440	307	
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 ELECT TO DATE (IF REQUIR	ED)
07/26/2022	Donna Ducar CHICAGO, IL 60655		Not Employed Not Employed	100.00	200.00	G2022	\$100.00
	Damiao Nunes Freedom, CA 95019	IND COM OTH PTY SCC	Electrician Shorebreak electric	50.00	250.00	G2022	\$100.00
	Pauline Seales Santa Cruz, CA 95060		Not employed Not employed	100.00	150.00		
	Political Action League for Monterey-Santa Cruz Building & Construction Trades Council Castroville, CA 95012	□IND □COM ☑OTH □PTY □SCC		550.00	2,050.00	G2022 \$1	,000.00
	Leah Evans Homer, AK 99603	☑IND □COM □OTH □PTY □SCC	Consultant Self	525.00	525.00		
			SUBTOTAL	1,325.00			

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A	(CONT.)
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CALIFORNIA 460

Statement covers period

Cummings for Supervisor 2022 Date RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CONTRIBUTOR CODE * (IF SELE-EMPLOYER LEMPLOYER LEMPLO					from07/01/	2022	F(JRM	
Cummings for Supervisor 2022 Date Date RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NAMBER) CODE * (IF SELECTIC CODE * CODE					through09/24/	2022	Page _	8 of .	28
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE * RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (FCOMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (CODE * CODE * STRIBUTOR (FSELF-EMPLOYED, ENTER NAME PERIOD) FAN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (CALENDAR YEAR (JAN. 1 - DEC. 31)) FOR EMPLOYER OR /04/2022 James Katovich Oak Park, IL 60304 SCOM OTH PTY SCC SIND COM OTH PTY SCC REMIND OTH PTY SCC OR /13/2022 Abraham Borker San Francisco, CA 94118 SIND COM OTH PTY SCC REMIND COM OTH PTY SCC SCC REMIND COM OTH PTY SCC SCC REMIND COM OTH PTY SCC SCC SCC SCC SCC SCC SCC SCC SCC SC	ME OF FILER			_			I.D. NU	MBER	
DATE RECEIVED COMMITTEE, ALSO ENTER ID. NUMBER; CODE * CONTRIBUTOR CODE * CODE * CONTRIBUTOR CODE * CODE * CONTRIBUTOR COD	mmings for	Supervisor 2022					14403	07	
Oak Park, IL 60304 COM OTH PTY SCC 08/06/2022 Stacey Falls Santa Cruz, CA 95060 08/13/2022 Abraham Borker San Francisco, CA 94118 08/15/2022 Kalinda Marshall Chicago, IL 60655 COM OTH PTY SCC Not Employed Not On Employed Not On It is not in the factor of the f				OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME	RECEIVED THIS	CALENDAR Y	EAR	TOD	DATE
Santa Cruz, CA 95060 COM OTH PTY SCC 08/13/2022 Abraham Borker San Francisco, CA 94118 08/15/2022 Kalinda Marshall Chicago, IL 60655 Santa Cruz High School COM OTH PTY SCC Santa Cruz High School Coordinator UCSC Santa Cruz High School Coordinator UCSC Santa Cruz High School Coordinator UCSC Socc RN Northwestern Medicine 100.00 100.00	8/04/2022		□COM □OTH □PTY		100.00	2	00.00	G2022	\$100.00
San Francisco, CA 94118 COM OTH PTY SCC 08/15/2022 Kalinda Marshall Chicago, IL 60655 RN Northwestern Medicine RN Northwestern Medicine	8/06/2022		□COM □OTH □PTY		50.00	1	40.00	G2022	\$40.00
Chicago, IL 60655 Chicago, IL 60655 OTH Northwestern Medicine	8/13/2022		□COM □OTH □PTY		200.00	4	00.00		
	8/15/2022		□COM □OTH □PTY		100.00	1	00.00		
Santa Cruz, CA 95062 Self	8/16/2022		□COM □OTH □PTY		100.00	1	00.00		
SUBTOTAL\$ 550.00				SUBTOTAL	\$ 550.00				

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

			from07/01/	2022	ORM 400
			through 09/24/	2022 Page	9 of28
IAME OF FILER		L		I.D. N	UMBER
dummings for Supervisor 2022				1440	307
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)
08/16/2022 Natasha Fraley Santa Cruz, CA 95060		Content Developer Self-employed	50.00	150.00	G2022 \$100.00
08/16/2022 Marianna Franks Tstee Grnt, Marianne Franks P Franks Santa Cruz, CA 95062		Retired Retired	100.00	325.00	G2022 \$75.00
08/16/2022 Maria Gitin-Torres Capitola, CA 95010		Not Employed Not Employed	50.00	100.00	G2022 \$50.00
08/16/2022 Denise Holbert Santa Cruz, CA 95062		Retired Retired	525.00	775.00	G2022 \$250.00
08/16/2022 Amy Lebichuck Santa Cruz, CA 95060		Social Worker UCSC	50.00	200.00	
		SUBTOTAL	\$ 775.00		

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

			from07/01/	2022	FORM 400
			through ^{09/24/}	2022 P 8	age10 of28
IAME OF FILER		_		I.I	D. NUMBER
ummings for Supervisor 2022				1	440307
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	TO DATE) (IF REQUIRED)
08/16/2022 Ellen Murtha Santa Cruz, CA 95060	IND COM OTH PTY SCC	Retired Retired	50.00	150	.00 G2022 \$100.00
08/16/2022 Rosemari Reimers-Rice Santa Cruz, CA 95060	⊠IND □COM □OTH □PTY □SCC	Retired Retired	100.00	100	.00
08/16/2022 Jill Susskind Santa Cruz, CA 95060		Not Employed Not Employed	500.00	600	.00
08/16/2022 Alec Webster Santa Cruz, CA 95060	IND COM OTH PTY SCC	Retired Retired	525.00	1,025	.00 G2022 \$500.00
08/16/2022 Claudia Lee Webster Santa Cruz, CA 95060	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	525.00	1,025	.00 G2022 \$500.00
		SUBTOTALS	1,700.00		

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

			from07/01/	2022	FC	ORM '	+00
			through09/24/	2022	Page _	11 of _	28
AME OF FILER		-			I.D. NUN	/IBER	
dummings for Supervisor 2022					144030	07	
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.	EAR 31)	PER ELE TO D (IF REQ	ATE UIRED)
08/17/2022 Sally Arnold Santa Cruz, CA 95060	⊠IND □COM □OTH □PTY □SCC	Retired Retired	500.00	90	00.00	G2022	\$400.00
08/17/2022 Suzy Bombaci Santa Cruz, CA 95065	⊠IND □COM □OTH □PTY □SCC	None None	525.00	72	25.00	G2022	\$200.00
08/17/2022 Carol Brenner Santa Cruz, CA 95060		Not Employed Not Employed	250.00	75	50.00		
08/17/2022 Debbie Bulger Santa Cruz, CA 95060	IND COM OTH PTY SCC	Retired Retired	100.00	10	00.00		
08/17/2022 Douglass Marshall Matteson, IL 60443	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	100.00	20	00.00	G2022	\$100.00
		SUBTOTAL	1,475.00				

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

		to whole t	ionais.	from07/01/	2022	FORM	400
				through09/24/	2022 P	age12	_ of28
IAME OF FILER					1.1	D. NUMBER	
ummings for	Supervisor 2022				1	440307	
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	?	ER ELECTION TO DATE F REQUIRED)
08/18/2022	Ami Chen Mills for Supervisor 2022 (ID# 1445326) Santa Cruz, CA 95060	□IND IND OTH PTY SCC		250.00	250	.00	
08/18/2022	Mark Andrews Santa Cruz, CA 95060	IND COM OTH PTY SCC	Retired Retired	100.00	200	.00 G2022	\$100.00
08/18/2022	Cathy Calfo Santa Cruz, CA 95060		Property Manager Self	100.00	625	.00 G2022	\$500.00
08/18/2022	Denise Elerick Aptos, CA 95003		Dental Hygienist Dr. Delacore	525.00	525	.00 G2022	\$500.00
08/18/2022	Tim Fitzmaurice Santa Cruz, CA 95060		Lecturer UCSC/ Will James Assoc.	250.00	250	.00	
			SUBTOTAL	\$ 1,225.00			

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA 460

Statement covers period

				from07/01/	2022	F	ORM	
				through09/24/	2022	Page	13 of _	28
NAME OF FILER			L			I.D. NU	MBER	
Cummings for	Supervisor 2022					14403	07	
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 Y (JAN. 1 - DEC.	EAR	PER ELE TO D (IF REQI	ATE
08/18/2022	Sabina Holber Santa Cruz, CA 95060		Risk Management Chase Bank	100.00		00.00		
08/18/2022	Alan Holbert Santa Cruz, CA 95062		Retired Retired	525.00	8	00.00	G2022	\$275.00
08/18/2022	Emma Ledvina Santa Cruz, CA 95060		COO Parents Center	100.00	1	00.00		
08/18/2022	Will Lightbourne Scotts Valley, CA 95066	☑IND □COM □OTH □PTY □SCC	Retired Retired	100.00	1	00.00		
08/18/2022	Karen Madura Santa Cruz, CA 95062	☑IND □COM □OTH □PTY □SCC	Owner Jury Room, Bradys	425.00	9	49.00	G2022	\$99.00
			SUBTOTAL	\$ 1,250.00				

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

	S		from07/01/	2022	ORM	400
			through09/24/	2022 Page	14 c	f28
NAME OF FILER		-		I.D. NU	JMBER	
Cummings for Supervisor 2022				1440	307	
DATE RECEIVED FULL NAME, STREET ADDRESS AND (IF COMMITTEE, ALSO EN			AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	(IF RI	ELECTION DATE EQUIRED)
08/18/2022 Ellen Murtha Santa Cruz, CA 95060		Retired Retired	50.00	150.00	G2022	\$100.00
08/18/2022 Matthew Nathanson Santa Cruz, CA 95060		Retired Retired	250.00	500.00	G2022	\$250.00
08/18/2022 Gary Patton Santa Cruz, CA 95060		Attorney Self	525.00	550.00		
08/18/2022 Daniel Spelce Santa Cruz, CA 95065		Teacher Retired	200.00	600.00	G2022	\$300.00
08/18/2022 Tane Tachyon Santa Cruz, CA 95060		Software/Web Developer Tachyon Labs	100.00	120.00	G2022	\$20.00
		SUBTOTAL	\$ 1,125.00			

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.) CALIFORNIA 460

Statement covers period

Santa Cruz, CA 95060					from07/01/	2022	FU	KIVI	
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR RECEIVED FAN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER SHEET ADDRESS AND ZIP CODE of CONTRIBUTOR CODE * CONTRIBUTOR OF SHEET ADDRESS AND ZIP COMMITTEE, ALSOENIFER DALMARER) FAN INDIVIDUAL ENTER OF SHEET ADDRESS AND ZIP COMMITTEE, ALSOENIFER DALMARER) FAN INDIVIDUAL ENTER OF SHEET ADDRESS AND ZIP COMMITTEE, ALSOENIFER DALMARER) FAN INDIVIDUAL ENTER OF SHEET ADDRESS AND ZIP COLUMN TO DATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) TODATE OF SHEET ADDRESS AND ZIP CALENDAR YEA					through ^{09/24/}	2022	Page	15 of	28
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE * COTTRIBUTOR COURT OF COURT OF COURT OF COURT OF CALENDARY YEAR (JAN.1 - DEC. 31)	NAME OF FILER						I.D. NUM	IBER	
CONTRIBUTOR CONTRIBUTOR CONTRIBUTOR CONTRIBUTOR CONTRIBUTOR CODE	Cummings for	Supervisor 2022					144030)7	
Santa Cruz, CA 95060			CONTRIBUTOR	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME	RECEIVED THIS	CALENDAR YEA	AR	TO DA	ATE
Santa Cruz, CA 95060	08/18/2022		□COM □OTH □PTY		300.00	60	0.00 G	32022	\$300.00
Chicago, IL 60655 COM OTH PTY SCC 08/19/2022 National Union of Healthcare Workers Candidate Committee for Quality Patient Care and Union Democracy (ID# 1318200) Sacramento, CA 95815 08/22/2022 shandara gill Santa Cruz, CA 95073 SCC SCC SCC Executive Director Yoga For All Movement SCC SCC SCC SCC SCC SCC SCC S	08/18/2022		□COM □OTH □PTY		500.00	50	0.00		
Candidate Committee for Quality Patient Care and Union Democracy (ID# 1318200) Sacramento, CA 95815 O8/22/2022 Shandara gill Santa Cruz, CA 95073 SIND COM OTH PTY SCC Sacramento, CA 95815 SIND COM OTH PTY SCC	08/19/2022		□COM □OTH □PTY		525.00	87	5.00 G	32022	\$350.00
Santa Cruz, CA 95073 COM OTH PTY SCC Yoga For All Movement	08/19/2022	Candidate Committee for Quality Patient Care and Union Democracy (ID# 1318200)	© COM □ OTH □ PTY		525.00	1,02	5.00 G	32022	\$500.00
SUBTOTAL \$ 1,875.00	08/22/2022		□COM □OTH □PTY		25.00	22	5.00 G	32022	\$125.00
				SUBTOTAL	1,875.00				

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may be rounded to whole dollars.		Statement covers period		CALIFORNIA 460		
				through09/24/	2022 Pa	nge <u>16</u> o	of <u>28</u>	
NAME OF FILER					1.0	D. NUMBER		
Cummings for	Supervisor 2022				14	140307		
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)	TO	ELECTION DATE EQUIRED)	
08/23/2022	Bob Campbell Santa Cruz, CA 95060		Not Employed Not Employed	100.00	100.	00		
08/24/2022	Sandra Brown Santa Cruz, CA 95062		Council member City of Santa Cruz	525.00	525.	00		
08/25/2022	Chris Krohn Santa Cruz, CA 95060		Internship Director UC Santa Cruz	100.00	100.	00		
08/26/2022	Diane Bridgeman Santa Cruz, CA 95060		Licensed clinical psychologist self-employed	100.00	200.	00 G2022	\$100.00	
08/26/2022	Paul Elerick Aptos, CA 95003	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	-25.00	475.	00 G2022	\$500.00	
			SUBTOTALS	800.00				

Amounts may be rounded

*Contributor Codes

IND - Individual

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(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded

SCHEDULE A (CONT.)

CALIFORNIA 4 CO

Statement covers period

-		to whole o	dollars.	from07/01/	2022	FORM	460
				through09/24/	2022 Pag	e <u>17</u> (of <u>28</u>
IAME OF FILER					I.D.	NUMBER	
ummings for	Supervisor 2022				144	0307	
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)	To	ELECTION D DATE EQUIRED)
08/26/2022	Javier Gomez Watsonville, CA 95062		Analyst Monterey County	100.00	100.0	0	
08/26/2022	William Malone Santa Cruz, CA 95060	IND COM OTH PTY SCC	Not Employed Not Employed	525.00	525.0	0	
08/26/2022	Political Action League for Monterey-Santa Cruz Building & Construction Trades Council Castroville, CA 95012	☐IND ☐COM ☑OTH ☐PTY ☐SCC		500.00	2,050.0	0 G2022	\$1,000.00
08/27/2022	Damiao Nunes Freedom, CA 95019		Electrician Shorebreak electric	50.00	250.0	0 G2022	\$100.00
08/29/2022	Jae Pasari Santa Cruz, CA 95062		Not Employed Not Employed	200.00	200.0	0	
			SUBTOTAL	\$ 1,375.00			

*Contributor Codes

IND - Individual

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(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

through 09/24/2022 NAME OF FILER		18 of 28 JMBER 307
	1440	
Aurilana fan Gward yn 2000		307
Cummings for Supervisor 2022	ULATIVE TO DATE	
DATE DATE (IFCOMMITTEE, ALSO ENTER I.D. NUMBER) CONTRIBUTION OCCUPATION AND EMPLOYER RECEIVED THIS CAI	LENDAR YEAR .N. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
O9/01/2022 Amanda Harris Altice Santa Cruz, CA 95060 COM OTH PTY SCC Not Employed 200.00 COM Society Scc	300.00	G2022 \$100.00
Reggie Meisler Santa Cruz, CA 95062 XIND Software Engineer S25.00 COM OTH PTY SCC SCC	525.00	
09/01/2022 Jasmeen Miah Santa Cruz, CA 95062 COM	525.00	
December 250.00 Santa Cruz, CA 95062 Sind Cruz, CA 95062 S	450.00	
Tim Madura Santa Rosa, CA 95403 Santa R	250.00	
SUBTOTAL \$ 1,650.00		

*Contributor Codes

IND - Individual

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(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

				from07/01/	2022	FORM 400		
				through ^{09/24/}	2022 P	rage 19 of 28		
IAME OF FILER					I	.D. NUMBER		
ummings for	Supervisor 2022				1	.440307		
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 YEA (JAN. 1 - DEC. 31	R TO DATE (IF REQUIRED)		
09/05/2022	Jan Karwin Santa Cruz, CA 95062	☑IND □COM □OTH □PTY □SCC	Retired Retired	200.00	200	.00		
09/08/2022	Pipe Trades District Council#36 PAC (ID# 910629) Fresno, CA 93727	□IND □COM □OTH □PTY ☑SCC		525.00	525	.00		
09/09/2022	Peoples Democratic Club of Santa Cruz (ID# 1359198) Santa Cruz, CA 95063	□IND □COM □OTH □PTY 区SCC		200.00	200	.00		
09/09/2022	Santa Cruz for Bernie PAC (ID# 1390568) Santa Cruz, CA 95062	□IND □COM □OTH □PTY ⊠SCC		200.00	200	.00		
09/13/2022	Andy Skemer Santa Cruz, CA 95064	☑IND □COM □OTH □PTY □SCC	Professor UCSC	100.00	100	.00		
	SUBTOTAL\$ 1,225.00							

*Contributor Codes

IND - Individual

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(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

	to whole t	dollars.	from07/01/	2022 F	ORM 40U
			through 09/24/	2022 Page	20 of 28
NAME OF FILER		l.		I.D. NU	JMBER
Cummings for Supervisor 2022				1440	307
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)
09/14/2022 Ron Pomerantz Santa Cruz, CA 95060		Not Employed Not Employed	250.00	350.00	
09/15/2022 Jessica Beckett Santa Cruz, CA 95061	⊠IND □COM □OTH □PTY □SCC	Foundation Ccof	100.00	100.00	
09/15/2022 Connie Croker Santa Cruz, CA 95062		Retired Retired	100.00	100.00	
09/16/2022 Michael Cooper Santa Cruz, CA 95060	⊠IND □COM □OTH □PTY □SCC	Not Employed Not Employed	150.00	150.00	
09/18/2022 Service Employees International Union Local 521 Candidate PAC (ID# 1297708) Sacramento, CA 95814	☐IND ☐COM ☐OTH ☐ PTY ☒SCC		1,000.00	2,000.00	G2022 \$1,000.00
		SUBTOTALS	1,600.00		

*Contributor Codes

IND - Individual

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(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

			from07/01/	2022	ORM 400
			through 09/24/	2022 Page	21 of28
IAME OF FILER		<u></u>		I.D. NU	JMBER
dummings for Supervisor 2022				1440	307
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CO (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)
09/19/2022 Marianna Franks Tstee Grnt, Marianne F Franks Santa Cruz, CA 95062	ranks P XIND COM OTH PTY SCC	Retired Retired	50.00	325.00	G2022 \$75.00
09/22/2022 shandara gill Santa Cruz, CA 95073	⊠IND □COM □OTH □PTY □SCC	Executive Director Yoga For All Movement	25.00	225.00	G2022 \$125.00
09/23/2022 Stacey Falls Santa Cruz, CA 95060		Teacher Santa Cruz High School	50.00	140.00	G2022 \$40.00
	☐IND ☐COM ☐OTH ☐PTY ☐SCC				
	☐IND ☐COM ☐OTH ☐PTY ☐SCC				
		SUBTOTALS	125.00		

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Schedule E
Payments Made

	SCHEDULE E
Statement covers pe	CALIFORNIA 160
from07/01/2022	FORM FOO
through09/24/2022	Page of28
	I.D. NUMBER
	1440307

NAME OF FILER

SEE INSTRUCTIONS ON REVERSE

Cummings for Supervisor 2022

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
CVC	civic donations	PET	petition circulating	TEL	t.v. 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	PRT	print ads	WEB	information technology costs (internet, e-mail)
LII	campaign incrature and mailings	1 131	print add	VVLD	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
ActBlue Donate Somerville, MA 02144-0031	WEB	Transaction F	rees	57.70
Digital Inspiration Mountain View, CA 94043	WEB			19.95
ActBlue Donate Somerville, MA 02144-0031	WEB	Transaction F	rees	112.53

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTAL\$	190.18
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Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	10,561.09
2. Unitemized payments made this period of under \$100	\$	123.43
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 \$	10,684.52

Schedule E	
(Continuation Sheet)
Payments Made	-

Statement covers period		CALIFORNIA 460
from	07/01/2022	FORM TOO
through_	09/24/2022	Page 23 of 28
		I.D. NUMBER
		1440307

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Cummings for Supervisor 2022

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 MTG meetings and appearances campaign consultants RFD returned contributions CNS CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals

FIL candidate filing/ballot fees

PHO phone banks

TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

EG legal defense PRO professional services (legal, accounting) VOT voter registration

LIT campaign literature and mailings PRT	print ads		WEB information technology cost	s (internet, e-mail)
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
GetThru Alameda, CA 94501	РНО			1,721.84
Service Employees International Union Local 521 Candidate PAC 1297708) Sacramento, CA 95814	(ID# OFC			300.00
Digital Inspiration Mountain View, CA 94043	WEB			19.95
London Nelson Santa Cruz, CA 95060	OFC			432.00
Community Printers Santa Cruz, CA 95062	LIT			185.43

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

SUBTOTAL \$

2,659.22

Schedule E	
(Continuation Sh	neet)
Payments Made	•

Statement covers period	CALIFORNIA 160
from07/01/2022	FORM 40U
through09/24/2022	Page24 of28
	I.D. NUMBER
	1440307

WEB information technology costs (internet, e-mail)

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

LIT

Cummings for Supervisor 2022

campaign literature and mailings

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

print ads

PRT

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
OfficeMax Santa Cruz, CA 95060	OFC		59.18
United States Postal Service Santa Cruz, CA 95060	POS		180.00
ActBlue Donate Somerville, MA 02144-0031	WEB	Transaction Fees	95.91
Santa Cruz Democratic Party Santa Cruz, CA 95060	MTG	Ticket for kick-off event	250.00
ActBlue Donate Somerville, MA 02144-0031	WEB	Transaction Fees	109.06

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

SUBTOTAL \$

694.15

Schedule E	
(Continuation	on Sheet)
Payments N	lade

Statement covers period	CALIFORNIA 460
from07/01/2022	FORM TOO
through09/24/2022	Page 25 of 28
	I.D. NUMBER
	1440307

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Cummings for Supervisor 2022

campaign literature and mailings

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 MTG meetings and appearances campaign consultants RFD returned contributions CNS CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries PET petition circulating CVC civic donations TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals staff/spouse travel, lodging, and meals fundraising events polling and survey research independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services

professional services (legal, accounting) VOT voter registration LEG legal defense

> PRT print ads

TSF transfer between committees of the same candidate/sponsor

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
ActBlue Donate Somerville, MA 02144-0031	WEB	Transaction Fees	31.75
Santa Cruz County Clerk Santa Cruz, CA 95060	FIL	Candidate Filing	1,485.00
Digital Inspiration Mountain View, CA 94043	WEB		29.95
Signrocket.com St Paul Park, MN 55071	LIT		1,862.50
Digital Inspiration Mountain View, CA 94043	WEB		19.95

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

SUBTOTAL \$

3,429.15

Schedule E	
(Continuation Shee	t)
Payments Made	

Statement covers period	CALIFORNIA 460
from07/01/2022	FORM TOO
through09/24/2022	Page 26 of 28
	I.D. NUMBER
	1440307

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Cummings for Supervisor 2022

campaign literature and mailings

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 MTG meetings and appearances campaign consultants RFD returned contributions CNS CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries PET petition circulating CVC civic donations TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals polling and survey research staff/spouse travel, lodging, and meals fundraising events

independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services professional services (legal, accounting) VOT voter registration LEG legal defense

> PRT print ads

TSF transfer between committees of the same candidate/sponsor

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
My Mom's Mole Watsonville, CA 95076	FND	Food	1,125.00
Community Printers Santa Cruz, CA 95062	LIT		227.51
Community Printers Santa Cruz, CA 95062	LIT		385.18
Safeway 2607 Santa Cruz, CA 95060	FND		31.84
Signrocket.com St Paul Park, MN 55071	LIT		312.50

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

SUBTOTAL \$

2,082.03

Schedule E	
(Continuation Sheet))
Payments Made	

Staten	nent covers period	CALIFORNIA 460
from	07/01/2022	FORM TOO
through_	09/24/2022	Page 27 of 28
		I.D. NUMBER
		1440307

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Cummings for Supervisor 2022

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 MTG meetings and appearances campaign consultants RFD returned contributions CNS CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals

FIL candidate filing/ballot fees

PHO phone banks

TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

LEG legal defense PRO professional services (legal, accounting) VOT voter registration

LIT campaign literature and mailings PRT 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
MailChimp c/o The Rocket Science Group, LLC Atlanta, GA 30308	WEB		59.00
Safeway 2607 Santa Cruz, CA 95060	OFC		22.69
ActBlue Donate Somerville, MA 02144-0031	WEB	Transaction Fees	56.61
BroPrints Santa Cruz, CA 95060	СМР	T-Shirts	328.02
Community Printers Santa Cruz, CA 95062	LIT		350.88

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$

817.20

Schedule E	
(Continuation Sh	eet)
Payments Made	

Statement covers period	CALIFORNIA 160
from07/01/2022	FORM 40U
through09/24/2022	Page28 of28
	I.D. NUMBER
	1440307

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Cummings for Supervisor 2022

campaign literature and mailings

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 MTG meetings and appearances campaign consultants RFD returned contributions CNS CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries PET petition circulating CVC civic donations TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals polling and survey research staff/spouse travel, lodging, and meals fundraising events independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services

professional services (legal, accounting) VOT voter registration LEG legal defense

PRT print ads TSF transfer between committees of the same candidate/sponsor

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
Digital Inspiration Mountain View, CA 94043	WEB		29.95
Digital Inspiration Mountain View, CA 94043	WEB		19.95
BroPrints Santa Cruz, CA 95060	CMP	Stickers	180.26
	SAL	Digital Content	400.00
	WEB		59.00

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

SUBTOTAL \$

689.16