Camp Cove	paign Statement Page ment Code Sections 84200-84216.5)				RECEIVE		FORM 460
SEE INST	TRUCTIONS ON REVERSE		Statement covers period from01/01/2021 through12/31/2021	Date of election if applicable: (Month, Day, Year)	JAN 2 0 2022 City of Rancho Co Office of the City	rdova	For Official Use Only
1. Тур	oe of Recipient Committee: All Comm	ittees – Co	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:	•		
	Officeholder, Candidate Controlled Committee State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee	_ C	Primarily Formed Ballot Measure Committee Controlled Sponsored Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee Also Complete Part 7)	☐ Preelection Statement ☐ Semi-annual Statement ☐ Termination Statement (Also file a Form 410 1	t Cermination)	Special Suppler	rly Statement Odd-Year Report mental Preelection ent - Attach Form 495
3. Coi	mmittee Information		D. NUMBER 1440928	Treasurer(s)			
Dor	MITTEE NAME (OR CANDIDATE'S NAME IF NO COnald Terry for City Council 2024 EET ADDRESS (NO P.O. BOX)	DMMITTEE)		Donald Terry MAILING ADDRESS CITY	STATE	ZIP COD	
CITY	Y STATE	ZIP CC	DDE AREA CODE/PHONE	Sacramento NAME OF ASSISTANT TREASU	CA RER. IF ANY	95815	
Sac	cramento CA	9581	.5	Shawnda Deane	,		
MAIL	ING ADDRESS (IF DIFFERENT) NO. AND STREET	OR P.O. B	BOX	MAILING ADDRESS			
CITY	STATE	ZIP CC	DDE AREA CODE/PHONE	CITY Sacramento	STATE CA	ZIP COD 95815	
OPTI	IONAL: FAX / E-MAIL ADDRESS			OPTIONAL: FAX / E-MAIL ADD		75015	
l hav	ification ye used all reasonable diligence in preparing an er penalty of perjury under the laws of the State			awledge the information contained he	erein and in the attached	schedules	s is true and complete. I certify
	Executed on	_			Responsible Officer of	Sponsor	_
	Executed onDate			Signature of Controlling Officeholder, Candidate,	State Measure Proponent		_
	Executed on		Ву	Signature of Controlling Officeholder, Candidate,	State Measure Proponent		

Recipient Committee

COVER PAGE

Date Stamp

Recipient Committee Campaign Statement Cover Page — Part 2

	COVERF			
CALIF FC	ORNIA ORM	4	60	
Page _	2	of _	11	

Officeholder or Candidate Controlled Commi	ttee	6.	Primarily Formed Ballo	t Measure (Committee		
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE				
Donald Terry	TAMBED IS ADDITIONED IN		BALLOT NO. OR LETTER	JURISDICTIO	N	Tr] SUPPORT
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRIC	NUMBER IF APPLICABLE)		DALLOTTION			l:	OPPOSE
City Council Member Rancho Cordova							
The state of the s	TY STATE ZIP		Identify the controlling offi	ceholder, can	didate, or st	ate measure	proponent, if any.
Sa	cramento CA 95815		NAME OF OFFICEHOLDER, CAN	DIDATE, OR PRO	OPONENT		
Related Committees Not Included in this State not included in this statement that are controlled by your contributions or make expenditures on behalf of your care.	or are primarily formed to receive		OFFICE SOUGHT OR HELD			DISTRICT NO.	IF ANY
COMMITTEE NAME	I.D. NUMBER	7.	. Primarily Formed Cand	lidate/Offic	eholder Co	ommittee <i>L</i>	ist names of
NAME OF TREASURER	CONTROLLED COMMITTEE?		officeholder(s) or candidate(s	for which this	s committee is	primarily forr	ned.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. B	ox)		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP C			NAME OF OFFICEHOLDER OR O	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. B	OX)						
CITY STATE ZIP C	CODE AREA CODE/PHONE		Attac	ch continuatio	on sheets if	necessary	

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

		SUMMARY PAGE
Staten	ent covers period	CALIFORNIA 460
from	01/01/2021	FORM TOU
through _	12/31/2021	Page3 of11
		I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1440928

ontributions Received	(COIUMN A TOTALTHIS PERIOD FROM ATTACHED SCHEDULES)		Column B GALENDAR YEAR TOTALTO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
Monetary Contributions Schedule A, Line 3	\$	4,000.00	\$ -	4,000.00	
Loans Received		0.00		0.00	1/1 through 6/30 7/1 to Date
SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	4,000.00	\$.	4,000.00	20. Contributions Received \$ \$
Nonmonetary Contributions Schedule C, Line 3		0.00		0.00	21. Expenditures
TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	4,000.00	\$	4,000.00	Made \$\$
xpenditures Made					Expenditure Limit Summary for State
Payments Made Schedule E, Line 4	\$	5,229.02	\$	5,229.02	Candidates
. Loans Made Schedule H, Line 3		0.00	-	0.00	22. Cumulative Expenditures Made*
. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	5,229.02	\$	5,229.02	(If Subject to Voluntary Expenditure Limit)
. Accrued Expenses (Unpaid Bills)Schedule F, Line 3		298.98	-	298.98	Date of Election Total to Date
0. Nonmonetary Adjustment Schedule C, Line 3		0.00	7	0.00	(mm/dd/yy)
1. TOTAL EXPENDITURES MADEAdd Lines 8 + 9 + 10	\$	5,528.00	\$	5,528.00	\$
Current Cash Statement					\$
2. Beginning Cash Balance Previous Summary Page, Line 16	\$	0.00	То	calculate Column B, add	
3. Cash Receipts Column A, Line 3 above		4,000.00		ounts in Column A to the responding amounts	
4. Miscellaneous Increases to Cash Schedule I, Line 4		3,269.43	from	m Column B of your last	*Amounts in this section may be different from amounts reported in Column B.
5. Cash Payments Column A, Line 8 above		5,229.02		ort. Some amounts in lumn A may be negative	
6. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	2,040.41	figu	ures that should be otracted from previous	
If this is a termination statement, Line 16 must be zero.			per	riod amounts. If this is first report being filed	1
7. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for car	this calendar year, only ry over the amounts	
a la El de la Contata del Dalata			from	m Lines 2, 7, and 9 (if y).	1
Cash Equivalents and Outstanding Debts					•
8. Cash Equivalents					

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Schedule A **Monetary Contributions Received**

Amounts may be rounded to whole dollars.

A	SCHEDULE /
Statement covers period	CALIFORNIA 160
from01/01/2021	FORM TOU
through _12/31/2021	Page4 of11
<u> </u>	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1440928 Donald Terry for City Council 2024

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)
09/10/2021	Schetter Electric, LLC 471 Bannon Street Sacramento, CA 95811 Responsible Officer: Frank Schetter	□IND □COM 図OTH □PTY □SCC		500.00	500.00	P2024 \$500.00
09/10/2021	Teichert, Inc. 3500 American River Drive Sacramento, CA 95864	□IND □COM ☑OTH □PTY □SCC		1,000.00	1,000.00	P2024 \$1,000.00
10/04/2021	Winn Communities 3001 I Street, Suite 300 Sacramento, CA 95816	□IND □COM 図OTH □PTY □SCC		2,500.00	2,500.00	P2024 \$2,500.00
		□IND □COM □OTH □PTY □SCC				
		□IND □COM □OTH □PTY □SCC				
V			SUBTOTAL	\$ 4,000.00		

Schedule A Summary 1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.)\$ 4,000.00 2. Amount received this period – unitemized monetary contributions of less than \$100\$ 0.00 3. Total monetary contributions received this period.

*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

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Schedule E Payments Made

Amounts may be rounded to whole dollars.

	SCHEDULE E
Statement covers period	CALIFORNIA 160
from01/01/2021	FORM TOO
through12/31/2021	Page5 of11
	1.D. NUMBER
	1440928

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Donald Terry for City Council 2024

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

CMP campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)*
CVC civic donations
FIL candidate filing/ballot fees
FND fundraising events

IND independent expenditure supporting/opposing others (explain)*
LEG legal defense

LIT campaign literature and mailings

MBR member communications RAD MTG meetings and appearances RFD

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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD, NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Citi Cards 399 Park Avenue New York, NY 10043	Credit	Card Payment	432.47
Citi Cards 399 Park Avenue New York, NY 10043	Credit	Card Payment	485.42
Citi Cards 399 Park Avenue New York, NY 10043	Credit	Card Payment	2,565.02
* Payments that are contributions or independent expenditures must also be summa	arized on Schedule	D. SUBTOTA	L\$ 3,482.91
Schedule E Summary			
1. Itemized payments made this period. (Include all Schedule E subtotals.)		\$	5,179.02
2. Unitemized payments made this period of under \$100		\$	50.00
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	ne Summary Page,	Column A, Line 6.) TOTAL \$	5,229.02

FPPC Form 460 (Jan/2016)

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www.fppc.ca.gov

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

	CONTEDUCE E (CONTE
Statement covers period	CALIFORNIA 460
from01/01/2021	FORM TOO
through12/31/2021	Page 6 of11
	1.D. NUMBER
	1440938

SEE INICIDII CTIONS ON REVERSE		through	Page6 of11
SEE INSTRU CTIONS ON REVERSE NAME OF FILER			1.D. NUMBER
Donald Terry for City Council 2024			1440928
IND independent expenditure supporting/opposing others (explain)* POS postage, de	mmunications , nd appearances enses ulating	radio airtime and production returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production TRC candidate travel, lodging, and TRS staff/spouse travel, lodging, TSF transfer between committees VOT voter registration WEB information technology costs	luction costs d meals and meals s of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DE	SCRIPTION OF PAYMENT	AMOUNT PAID
Deane & Company Sacramento, CA 95815	PRO		869.2
Deane & Company	PRO		339.3
Sacramento, CA 95815			
Deane & Company Sacramento, CA 95815	PRO		265.9
Angela Terry Rancho Cordova, CA 95742	PRT		221.6
* Payments that are contributions or independent expenditures must also be summarized o	on Schedule D.	SU	JBTOTAL \$ 1,696.1

Schedule F Accrued Expenses	(Unpaid Bills
SEE INSTRUCTIONS ON REVERSE	

Amounts may be rounded to whole dollars.

CALIFORNIA Statement covers period FORM 01/01/2021 from through __12/31/2021 Page ______ of ____1 I.D. NUMBER

NAME OF FILER 1440928 Donald Terry for City Council 2024 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

RAD radio airtime and production costs member communications CMP campaign paraphernalia/misc. RFD returned contributions meetings and appearances CNS campaign consultants SAL campaign workers' salaries office expenses contribution (explain nonmonetary)* TEL t.v. or cable airtime and production costs petition circulating PET CVC civic donations candidate travel, lodging, and meals phone banks candidate filing/ballot fees staff/spouse travel, lodging, and meals TRS polling and survey research FND fundraising events transfer between committees of the same candidate/sponsor TSF postage, delivery and messenger services independent expenditure supporting/opposing others (explain)* VOT voter registration professional services (legal, accounting) LEG legal defense WEB information technology costs (internet, e-mail) PRT print ads campaign literature and mailings

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINN OF THIS PERIOR	IING	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Citi Cards 399 Park Avenue New York, NY 10043	Credit Card Payment		0.00	298.98	0.00	298.98
* Payments that are contributions or independent expenditures must also be	SUBTOTALS	\$	0.00	298.98	\$ 0.00	\$ 298.98

summarized on Schedule D.

Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for

2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)

Schedule G				
Payments M	lade by an	Agent o	r Independ	ent
Contractor (on Behalf	of This (Committee)	

Amounts may be rounded to whole dollars.

	SCHEDULE G
Statement covers period	CALIFORNIA AGO
from01/01/2021	FORM 400
through	Page8 of11
	I.D.NUMBER
	1440928

VOT voter registration

WEB information technology costs (internet, e-mail)

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Donald Terry for City Council 2024

campaign literature and mailings

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Citi Cards

LEG legal defense

CO	DES: If one of the following codes accurately describe	es the	payment, you may enter the code.	Otherwise	e, describe the payment.
CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*		postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor

PRO professional services (legal, accounting)

PRT print ads

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Apple.com 1 Apple Park Way Cupertino, CA 95014	OFC		270.79
Apple.com 1 Apple Park Way Cupertino, CA 95014	OFC		54.32
Apple.com 1 Apple Park Way Cupertino, CA 95014	OFC		269.00
Apple.com 1 Apple Park Way Cupertino, CA 95014	OFC		1,630.16

^{*} 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.

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

2,224.27

Schedule G (Continuation Sheet)
Payments Made by an Agent or Independent
Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

		SCHEDULE G (CONT.)
State	ement covers period	CALIFORNIA 460
from	01/01/2021	FORM 400
through	12/31/2021	Page 9 of 11

I.D. NUMBER

1440928

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Donald Terry for City Council 2024

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Citi Cards

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

print ads

CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* PET CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND

independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services legal defense campaign literature and mailings PRT

RAD radio airtime and production costs member communications

RFD returned contributions meetings and appearances SAL campaign workers' salaries office expenses TEL t.v. or cable airtime and production costs petition circulating TRC candidate travel, lodging, and meals phone banks polling and survey research

TRS staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor TSF

VOT voter registration

WEB information technology costs (internet, e-mail)

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

CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
OFC		119.88
cvc		102.00
cvc		102.00
OFC		125.65
	CVC	CVC

professional services (legal, accounting)

* 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.

Attach additional information on appropriately labeled continuation sheets.

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TOTAL* \$

449.53

Schedule G (Continuation Sheet)	
Payments Made by an Agent or Independer	١t
Contractor (on Behalf of This Committee)	

Amounts may be rounded to whole dollars.

	SCHEDULE G (CON).
Statement covers period	CALIFORNIA AGO
from01/01/2021	FORM 400
through	Page 10 of 11
	I.D. NUMBER
	1440928

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Donald Terry for City Council 2024

NAME OF AGENT OR INDEPENDENT CONTRACTOR

campaign literature and mailings

Citi Cards

COI	DES: If one of the following codes accurately des	scribes the	payment, you may enter the co	ode. Otherw	ise, describe the payment.
CMP	campaign paraphernalia/misc.	MBR	member communications	RA	D radio airtime and production costs
	campaign consultants	MTG	meetings and appearances	RF	D returned contributions
	contribution (explain nonmonetary)*	OFC	office expenses		L campaign workers' salaries
	civic donations	PET	petition circulating		L t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks		C candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research		S staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain))* POS	postage, delivery and messenger ser	rvices TS	F transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAIL	D
Verizon Wireless 600 Hidden Ridge Irving, TX 75038	OFC		12	25.51
Verizon Wireless 600 Hidden Ridge Irving, TX 75038	OFC		12	25.51
Verizon Wireless 600 Hidden Ridge Irving, TX 75038	OFC		16	62.96
Attach additional information on appropriately labeled continu	ation sheets.		TOTAL* \$ 4:	13.98

* 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.

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independent expenditure supporting/opposing others (explain)* PRO professional services (legal, accounting) LEG legal defense

print ads

Schedule I				SCHEDULET	
discellaneous Increases to Cash		Amounts may be rounded to whole dollars.	Statement covers period from01/01/2021	CALIFORNIA 460 FORM Page11 of11	
			through		
EE INSTRUCTIONS ON REVERSE AME OF FILER				I.D. NUMBER	
onald Terry	for City Council 2024	1		1440928	
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH	
10/14/2021	Donald Terry for City Council 2020 (ID# 1356375)	Transfer of C	arryover Funds	3,269.43	
1	Sacramento, CA 95815				
Attach additional information on appropriately labeled continuation sheets.				L\$ 3,269.43	
Schedule	I Summary				
1. Itemized increases to cash this period\$				13	
2. Unitemized increases to cash of under \$100 this period\$					
				00	
4. Total misc	cellaneous increases to cash this period. (Add Lines 1, 2, Page, Line 14.)	and 3. Enter here and on th	е	43	