Recipient Committee RECEIVED **CALIFORNIA Campaign Statement FORM** Cover Page (Government Code Sections 84200-84216.5) AUG 0 2 2022 Date of election if applicable: Statement covers period Page __1 (Month, Day, Year) 05/22/2022 City of Rancho Cordova For Official Use Only Office of the City Clerk through ___06/30/2022 SEE INSTRUCTIONS ON REVERSE 1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. 2. Type of Statement: Preelection Statement Officeholder, Candidate Controlled Committee Primarily Formed Ballot Measure Quarterly Statement State Candidate Election Committee Committee X Semi-annual Statement Special Odd-Year Report O Recall Controlled Termination Statement Supplemental Preelection (Also Complete Part 5) Sponsored (Also file a Form 410 Termination) Statement - Attach Form 495 (Also Complete Part 6) Amendment (Explain below) General Purpose Committee Primarily Formed Candidate/ Sponsored Officeholder Committee Small Contributor Committee (Also Complete Part 7) O Political Party/Central Committee I.D. NUMBER 3. Committee Information Treasurer(s) 1248483 COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) NAME OF TREASURER Rancho Cordova Chamber of Commerce PAC Denise Lewis MAILING ADDRESS STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE AREA CODE/PHONE CA 95841 Sacramento NAME OF ASSISTANT TREASURER, IF ANY CITY STATE ZIP CODE AREA CODE/PHONE Rancho Cordova CA 95670 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX MAILING ADDRESS CITY STATE ZIP CODE AREA CODE/PHONE STATE ZIP CODE AREA CODE/PHONE Sacramento CA 95841 OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS Verification I have used all reasonable diligence in preparing and reviewing this statement and to the d schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true 07/26/2022 Executed on -07/26/2022 Executed on . of Sponsor Executed on . Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on _ Signature of Controlling Officeholder, Candidate, State Measure Proponent FPPC Form 460 (Jan/2016)

COVER PAGE

Recipient Committee Campaign Statement Cover Page — Part 2

	COVERP	AGE-PART 2
	ORNIA DRM	460
Page _	2 (of

5.	Officeholder or Candidate Controlled Committee	6.	Primarily Formed Ballot	Measure	Committee	,	
	NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BALLOT MEASURE				
	OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIO	N .		SUPPORT OPPOSE
	RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP		Identify the controlling office	eholder, can	didate, or st	ate measure	e proponent, if any.
			NAME OF OFFICEHOLDER, CANE	DIDATE, OR PRO	OPONENT		
	Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.		OFFICE SOUGHT OR HELD	=======================================		DISTRICT NO	D. IF ANY
	COMMITTEE NAME I.D. NUMBER						
	NAME OF TREASURER CONTROLLED COMMITTEE? YES NO	7.	Primarily Formed Cand officeholder(s) or candidate(s)	idate/Office for which this	eholder Co committee is	ommittee oprimarily for	List names of rmed.
	COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)		NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
	CITY STATE ZIP CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
	COMMITTEE NAME I.D. NUMBER		NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
	NAME OF TREASURER CONTROLLED COMMITTEE? YES NO COMMITTEE ADDRESS (NO P.O. BOX)		NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
	CITY STATE ZIP CODE AREA CODE/PHONE		Attacl	o continuatio	n sheets if n	necessary	

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

		SUMMARY PAGE
Statement	covers period	CALIFORNIA 160
from	5/22/2022	FORM 400
through	6/30/2022	Page3 of7
		I.D. NUMBER

Contributions Received		Column A TOTALTHIS PERIOD (FROMATTACHED 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	\$	8,200.00	\$	9,300.00				
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	\$	8,200.00	\$	9,300.00	20. Contributions Received \$\$			
4. Nonmonetary Contributions		0.00		0.00	21 Evnenditures			
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	8,200.00	\$	9,300.00	Made \$ \$			
Expenditures Made					Expenditure Limit Summary for State			
6. Payments Made Schedule E, Line 4	\$	2,000.00	\$	3,600.41	Candidates			
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulative Expenditures Made*			
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	2,000.00	\$	3,600.41	(If Subject to Voluntary Expenditure Limit)			
9. Accrued Expenses (Unpaid Bills)		162.63		162.63	Date of Election Total to Date			
10. Nonmonetary Adjustment		0.00		0.00	(mm/dd/yy)			
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$	2,162.63	\$	3,763.04	\$			
Current Cash Statement			Γ		\$			
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	11,052.20	То	calculate Column B, add				
13. Cash Receipts		8,200.00		nounts in Column A to the				
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	om Column B of your last	*Amounts in this section may be different from amounts reported in Column B.			
15. Cash Payments		2,000.00		port. Some amounts in olumn A may be negative	·			
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	17,252.20	fig	ures that should be				
If this is a termination statement, Line 16 must be zero.			ре	eriod amounts. If this is				
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	fo	r this calendar year, only arry over the amounts				
Cash Equivalents and Outstanding Debts			fro	om Lines 2, 7, and 9 (if ay).	*			
18. Cash Equivalents See instructions on reverse	\$	0.00	1	.,				
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	162.63						
			I		FPPC Form 460 (Jan/2			

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

Schedule Monetary	Contributions Received		s may be rounded whole dollars.	Statement covers period CALIFORNIA FORM				
SEE INSTRUCTION	DNS ON REVERSE			through06/30/2	022	Page	4 of7	
NAME OF FILER Rancho Cord	ova Chamber of Commerce PAC					I.D. NU		
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 N (JAN. 1 - DEC	YEAR	PER ELECTION TO DATE (IF REQUIRED)	
06/30/2022	DP Global Solutions, LLC 12051 Mallard Lake Way Rancho Cordova, CA 95742	☐IND ☐COM ③OTH ☐ PTY ☐SCC		2,500.00 Received through inter Rancho Cordova Chamber 2729 Prospect Park Dri Rancho Cordova. CA 956	mediary: of Commerce ve, Suite 117	500.00		
06/30/2022	Elliott Homes Inc. 80 Iron Point Circle, Suite 110 Folsom, CA 95630	□IND □COM ☑OTH □PTY □SCC		2,500.00 Received through inter Rancho Cordova Chamber 2729 Prospect Park Dri Rancho Cordova, CR 956	mediary: of Commerce ye, Suite 117	500.00		
06/30/2022	Rancho Cordova Chamber of Commerce Rancho Cordova, CA 95670 Intermediary for Members Who Will Not Reach \$100 Threshold for the Year	□IND □COM ③OTH □PTY □SCC		1,200.00	1,	200.00		
06/30/2022	Region Business 1717 I Street Sacramento, CA 95811	□IND □COM ☑OTH □PTY □SCC		1,000.00 Received through inter Rancho Cordova Chamber 2729 Prospect Park Dri Rancho Cordova, CA 956	mediary: of Commerce we, Suite 117	000.00		
06/30/2022	Roger Niello for Senate 2022 (ID# 1443871) Sacramento, CA 95819	□IND □COM □OTH □PTY □SCC		1,000.00 Received through inter Rancho Cordova Chambers 2729 Prospect Park Dri Rancho Cordova, CA 956	mediary: of Commerce ye, Suite 117	000.00		
			SUBTOTAL	\$ 8,200.00				
1. Amount re	A Summary eceived this period – itemized monetary contributions. Il Schedule A subtotals.)		\$	8,200.00	IND			

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

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PTY - Political Party

8,200.00

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

SCC - Small Contributor Committee

3. Total monetary contributions received this period.

Schedule D SCHEDULE D Summary of Expenditures Statement covers period CALIFORNIA Amounts may be rounded Supporting/Opposing Other to whole dollars. **FORM** 05/22/2022 Candidates, Measures and Committees through __06/30/2022 Page __ 5 __ of __7 SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Rancho Cordova Chamber of Commerce PAC 1248483 CUMULATIVE TO DATE PER ELECTION NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR DESCRIPTION DATE TYPE OF PAYMENT AMOUNT THIS CALENDAR YEAR TO DATE MEASURE NUMBER OR LETTER AND JURISDICTION, (IF REQUIRED) PERIOD (JAN, 1 - DEC, 31) (IF REQUIRED) OR COMMITTEE 06/01/2022 Patrick Hume 2,000.00 2,000.00 X Monetary County Supervisor Contribution Sacramento County District 5 □ Nonmonetary Contribution Independent Expenditure X Support Oppose ■ Monetary Contribution □ Nonmonetary Contribution Independent Expenditure Support Oppose Contribution □ Nonmonetary Contribution Independent Support Oppose Expenditure SUBTOTAL \$ 2,000.00 Schedule D Summary

Schedule E Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER	Amounts may be rounded to whole dollars.			fre	Statement covers perion05/22/2022 rough06/30/2022	FOI	CALIFORNIA FORM 460 Page 6 of 7		
Rancho Cordova Chamber of Commerce PAC						124848	13		
CODES: If one of the following codes accurately describes CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* cvc civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings and OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, del	munications d appearance ses lating survey resea	ces		D radio airtime and prod D returned contributions L campaign workers' sa L.v. or cable airtime an C candidate travel, lodgir S staff/spouse travel, loc transfer between com T voter registration	uction costs laries Id production costs Ing, and meals Idging, and meals Idging, and meals Inittees of the sar	ne candidate/sponso		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPT	ION OF PAYMENT		AMOUNT PAID		
Hume for Supervisor 2022 (ID# 1438939) Elk Grove, CA 95624		СТВ					2,000.0		
* Payments that are contributions or independent expenditures m	ust also be summ	arized on	Schedule D.			SUBTOTAL\$	2,000.0		
Schedule E Summary									
Itemized payments made this period. (Include all Schedule B.)	E subtotals.)				UNION CONTROL	\$	2,000.00		
Unitemized payments made this period of under \$100	•					sessione sessione sessione			
3. Total interest paid this period on loans. (Enter amount from S									

Schedule F	Amounts may be round	led	Statement cove		SCHEDULE ORNIA 460
Accrued Expenses (Unpaid Bills) SEE INSTRUCTIONS ON REVERSE	to whole dollars.		from05/22/	2022	IXIV
NAME OF FILER Rancho Cordova Chamber of Commerce PAC				I.D. NUM 12484	
CODES: If one of the following codes accurately described 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 communication MTG meetings and appeara 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 nces earch messenger services	RAD radio airtime ar RFD returned contri SAL campaign work TEL t.v. or cable air TRC candidate trave TRS staff/spouse tra TSF transfer betwee VOT voter registrati	nd production costs butions kers' salaries time and production costs el, lodging, and meals avel, lodging, and meals en committees of the sar	ne candidate/sponsor
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
River City Business Services Sacramento, CA 95841	PRO	0.00	162.63	0.00	162.
* Payments that are contributions or independent expenditures must also be					
summarized on Schedule D.	SUBTOTALS	\$ 0.00\$	162.63	5 0.00\$	162.6

Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for		
accrued expenses of \$100 or more, plus total uniternized accrued expenses under \$100.)	INCURRED TOTALS \$	162.63

- 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.)

 NET \$ 162.63

 May be a negative number