Recipient Committee
Campaign Statement
Cover Page
(Government Code Sections 84200-84216.5)

1. **Type of Recipient Committee:**
   - Check one:
     - Officeholder, Candidate Controlled Committee
       - State Candidate Election Committee
       - Recall
       - General Purpose Committee
       - Sponsored
       - Small Contributor Committee
       - Political Party/Central Committee
     - Primarily Formed Ballot Measure Committee
       - Controlled
       - Sponsored
     - Primarily Formed Candidate/Officeholder Committee
(Also Complete Part 5)

2. **Type of Statement:**
   - Check one:
     - Preelection Statement
     - Semi-annual Statement
     - Termination Statement
       - Also file a Form 410 Termination
     - Amendment (Explain below)
     - Quarterly Statement
     - Special Odd-Year Report
     - Supplemental Preelection Statement - Attach Form 495

3. **Committee Information**
   - I.D. NUMBER
     - 1369762
   - COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
     - Linda Canlas for School Board 2014
   - STREET ADDRESS (NO P.O. BOX)
     - Union City, CA 94587
   - Mailing Address (IF DIFFERENT) NO. AND STREET OR P.O. BOX
     - Union City, CA 94587
   - CITY
     - Union City
   - STATE
     - CA
   - ZIP CODE
     - 94587
   - TREASURER(S)
     - NAME OF TREASURER
       - Merci Del Rosario
     - MAILING ADDRESS
       - Union City, CA 94587
     - CITY
       - Union City
     - STATE
       - CA
     - ZIP CODE
       - 94587
     - NAME OF ASSISTANT TREASURER, IF ANY

4. **Verification**
   - I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and its attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the following is true:
   - Executed on __________
   - Executed on __________
   - Executed on __________

   By
   Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (January/05)
5. Officeholder or Candidate Controlled Committee

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>Rosalinda (Linda) V. Canlas</th>
</tr>
</thead>
<tbody>
<tr>
<td>SCHOOL BOARD, NEW HAVEN UNIFIED SCHOOL DISTRICT</td>
<td></td>
</tr>
<tr>
<td>SCHOOL BOARD, NEW HAVEN UNIFIED SCHOOL DISTRICT</td>
<td></td>
</tr>
<tr>
<td>RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)</td>
<td>CITY</td>
</tr>
<tr>
<td>Union City</td>
<td>CA</td>
</tr>
</tbody>
</table>

**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.

<table>
<thead>
<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME OF TREASURER</th>
<th>CONTROLLED COMMITTEE?</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
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</table>

<table>
<thead>
<tr>
<th>COMMITTEE ADDRESS</th>
<th>STREET ADDRESS (NO. P.O. BOX)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CITY</td>
<td>STATE</td>
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<tr>
<td>Union City</td>
<td>CA</td>
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6. Primarily Formed Ballot Measure Committee

<table>
<thead>
<tr>
<th>NAME OF BALLOT MEASURE</th>
<th>N/A</th>
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<tbody>
<tr>
<td>BALLOT NO. OR LETTER</td>
<td>JURISDICTION</td>
</tr>
<tr>
<td>SUPPORT</td>
<td>OPPOSE</td>
</tr>
</tbody>
</table>

Identify the controlling officeholder, candidate, or state measure proponent, if any.

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
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<table>
<thead>
<tr>
<th>OFFICE SOUGHT OR HELD</th>
<th>DISTRICT NO. IF ANY</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
<th>SUPPORT</th>
<th>OPPOSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
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</table>

<table>
<thead>
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<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
<th>SUPPORT</th>
<th>OPPOSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
<th>SUPPORT</th>
<th>OPPOSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**Attach continuation sheets if necessary**
### Contributions Received

1. Monetary Contributions ......................................... Schedule A, Line 3 $ 1545.00 $ 1607.05
2. Loans Received .................................................. Schedule B, Line 3 $ 3152.05
3. SUBTOTAL CASH CONTRIBUTIONS .............................. Add Lines 1 + 2 $ 500.00
4. Nonmonetary Contributions ...................................... Schedule C, Line 3 $ 3652.05
5. TOTAL CONTRIBUTIONS RECEIVED ............................. Add Lines 3 + 4 $ 3652.05

### Expenditures Made

6. Payments Made .................................................. Schedule E, Line 4 $ 3152.05
7. Loans Made ....................................................... Schedule H, Line 3 $ 0.00
8. SUBTOTAL CASH PAYMENTS ..................................... Add Lines 6 + 7 $ 3152.05
9. Accrued Expenses (Unpaid Bills) ............................... Schedule F, Line 3 $ 0.00
10. Nonmonetary Adjustment ........................................ Schedule C, Line 3 $ 0.00
11. TOTAL EXPENDITURES MADE ................................... Add Lines 8 + 9 + 10 $ 3152.05

### Current Cash Statement

12. Beginning Cash Balance ........................................ Previous Summary Page, Line 16 $ 0.00
13. Cash Receipts .................................................... Column A, Line 3 above $ 3152.05
14. Miscellaneous Increases to Cash ............................... Schedule I, Line 4 $ 0.00
15. Cash Payments ................................................... Column A, Line 8 above $ 3152.05
16. ENDING CASH BALANCE ......................................... Add Lines 12 + 13 + 14, then subtract Line 15 $ 0.00

If this is a termination statement, Line 16 must be zero.

### Cash Equivalents and Outstanding Debts

17. LOAN GUARANTEES RECEIVED ............................... Schedule B, Part 2 $ 0.00
18. Cash Equivalents ............................................... See instructions on reverse $ 0.00
19. Outstanding Debts ............................................... Add Line 2 + Line 9 in Column B above $ 1607.05

---

**Campaign Disclosure Statement**

**Summary Page**

Amounts may be rounded to whole dollars.

**Statement covers period**

- **from** January 1, 2014
- **through** Sept. 30, 2014

**NAME OF FILER**

Linda Canlas for School Board 2014

**I.D. NUMBER**

1369762

---

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

- **Contributions Received**
  - $ 1545.00
  - $ 1607.05

- **Expenditures Made**
  - $ 3152.05

---

**Expenditure Limit Summary for State Candidates**

- **Cumulative Expenditures Made**
  - $ 0.00

---

**Notes**

- **Calendar Year Summary** for candidates running in both the state primary and general elections.
- **Expenditure Limit Summary** for state candidates.
- **Cash Equivalents and Outstanding Debts** calculations.

---

**FPPC Form 460 (January/05)**

**FPPC Toll-Free Helpline:** 866/ASK-FPPC (866/275-3772)
<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
</table>
| 09/07/14      | Benjamin L. Espiritu  
Riverbank, CA 95367                                                                 | ✓IND    | Physician, Doctor's Medical Center, Modesto, CA                                             | $300                       | $300                                             |                                  |
| 09/07/14      | Wendy J. Gutierrez  
Union City, CA 94587                                                                 | ✓IND    | Registered Nurse, Sequios Hospital, Catholic Healthcare W.                                | $200                       | $200                                             |                                  |
| 09/07/14      | Deborah Chang Murayama  
Union City, CA 94587                                                                 | ✓IND    | Teacher, Hayward Unified School District                                                   | $200                       | $200                                             |                                  |
| 09/07/14      | Jennifer M. O'Sullivan  
San Ramon, CA 94583                                                                 | ✓IND    | Attorney-at-Law, Alameda County                                                            | $200                       | $200                                             |                                  |
| 09/07/14      | Swalwell for Congress  
Dublin, CA 94568                                                                 | ✓IND    | Swalwell for Congress ID# C00502294                                                       | $100                       | $100                                             |                                  |

**Schedule A Summary**

1. Amount received this period – itemized monetary contributions.  
   (Include all Schedule A subtotals.) ........................................... $ 1545.00
2. Amount received this period – unitemized monetary contributions of less than $100 .................. $ 0.00
3. Total monetary contributions received this period.  
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .................. TOTAL $ 1545.00
<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>09/07/14</td>
<td>Tim Devane</td>
<td>☑ IND</td>
<td>Engineer Northrop Grumman, Sunnyvale, CA</td>
<td>$100</td>
<td>$100</td>
<td></td>
</tr>
<tr>
<td></td>
<td>San Ramon, CA, 94583</td>
<td></td>
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</tr>
<tr>
<td>09/07/14</td>
<td>Claro P. Gonzales TTE</td>
<td>☑ IND</td>
<td>Retired</td>
<td>$50</td>
<td>$50</td>
<td></td>
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<tr>
<td></td>
<td>Union City, CA, 94587</td>
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</tr>
<tr>
<td>09/07/14</td>
<td>Virginia L. Cummins</td>
<td>☑ IND</td>
<td>Retired</td>
<td>$25</td>
<td>$25</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Union City, CA, 94587</td>
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</tr>
<tr>
<td>09/07/14</td>
<td>George H. Adas</td>
<td>☑ IND</td>
<td>Retired</td>
<td>$25</td>
<td>$25</td>
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<tr>
<td></td>
<td>Hayward, CA, 94545</td>
<td></td>
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<tr>
<td>09/07/14</td>
<td>Sarah Paler</td>
<td>☑ IND</td>
<td>Customer Analyst Pepsi Beverage Co., Hayward, CA</td>
<td>$25</td>
<td>$25</td>
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<tr>
<td></td>
<td>Hayward, CA, 94541</td>
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</tbody>
</table>

**SUBTOTAL $ 225**

*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
<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>09/07/14</td>
<td>Leopoldo D. Marzan, Union City, CA 94587</td>
<td>IND</td>
<td>Engineer, Ted Jacob Engineering Group, San Francisco</td>
<td>$100</td>
<td>$100</td>
<td></td>
</tr>
<tr>
<td>09/07/14</td>
<td>Nani Lozier, Pleasanton, CA</td>
<td>IND</td>
<td>Self-Employed, Polynesian Entertainer</td>
<td>$100</td>
<td>$100</td>
<td></td>
</tr>
<tr>
<td>09/07/14</td>
<td>Michael Richie, Union City, CA 94587</td>
<td>IND</td>
<td>Self-Employed, Marketing Consultant</td>
<td>$20</td>
<td>$20</td>
<td></td>
</tr>
<tr>
<td>09/23/14</td>
<td>Teodoro L. Del Rosario Jr., Union City, CA 94587</td>
<td>IND</td>
<td>Postal Carrier, USPS, San Francisco, CA</td>
<td>$100</td>
<td>$100</td>
<td></td>
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</tr>
</tbody>
</table>

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

Statement covers period from January 1, 2014 through Sept. 30, 2014

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Schedule B - Part 1

Loans Received

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Linda Canlas for School Board 2014

<table>
<thead>
<tr>
<th>Full Name, Street Address and Zip Code</th>
<th>Description</th>
<th>Outst. Bal. Beg. This Period</th>
<th>Amount Rec'd This Period</th>
<th>Am. Paid or Forgiven This Period</th>
<th>Outstanding Bal. at Close of Period</th>
<th>Interest Paid This Period</th>
<th>Orig. Amount of Loan</th>
<th>Cumulative Contributions to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dennis LaFlam</td>
<td>Manager,</td>
<td>0.00</td>
<td>$1607.05</td>
<td>N/A</td>
<td>$1607.05</td>
<td>N/A</td>
<td>$1607.05</td>
<td>N/A</td>
</tr>
<tr>
<td>Union City, CA 94587</td>
<td>Lockheed Martin Space Systems</td>
<td>$1607.05</td>
<td>$1607.05</td>
<td>N/A</td>
<td>N/A</td>
<td>09/07/14</td>
<td>0.00</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Schedule B Summary

1. Loans received this period .......................................................... $1607.05
   (Total Column (b) plus unitemized loans of less than $100.)

2. Loans paid or forgiven this period .............................................. $0.00
   (Total Column (c) plus loans under $100 paid or forgiven)
   (Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) ............... NET $1607.05
   Enter the net here and on the Summary Page, Column A, Line 2.

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.
## Schedule C
### Nonmonetary Contributions Received

Type or print in ink. Amounts may be rounded to whole dollars.

**NAME OF FILER**
Linda Canlas for School Board 2014

**DATE RECEIVED** | **FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)** | **CONTRIBUTOR CODE** | **DESCRIPTION OF GOODS OR SERVICES** | **AMOUNT/FAR MARKET VALUE** |
--- | --- | --- | --- | --- |
09/07/14 | Jacqueline Arens, 2339 Valentine Ave., Oakland, CA 94610 | IND | Attorney at Law, Reed Smith, San Francisco, CA | $100 |
09/07/14 | Janeth and Roel Ebuen, 10232 Rialto Blvd,. Fremont, CA 94555 | OTH | Musical Entertainment, Vintage Band | $250 |
09/07/14 | Teddy Del Rosario and Friends, 1101 Main St., Union City, CA 94587 | OTH | Musical Entertainment | $150 |

**Schedule C Summary**

1. Amount received this period - itemized nonmonetary contributions. (Include all Schedule C subtotals.) $500
2. Amount received this period - unitemized nonmonetary contributions of less than $100 $0.00
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) TOTAL $500

**Contributor Codes**
- IND - Individual
- COM - Recipient Committee (other than PTY or SCC)
- OTH - Other (e.g., business entity)
- PTY - Political Party
- SCC - Small Committee

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
## Schedule E Payments Made

Type or print in ink. Amounts may be rounded to whole dollars.

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.) $ 3152.05
2. Unitemized payments made this period of under $100 $ 0.00
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 Summary Page, Column A, Line 6.) TOTAL $ 3152.05

### Codes:
- 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
- MTG: Meetings and appearances
- OFC: Office expenses
- RET: Petition circulating
- PHI: Phone banks
- POL: Polling and survey research
- POS: Postage, delivery and messenger services
- PRO: Professional services (legal, accounting)
- RRT: 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
- TSC: Transfer between committees of the same candidate/sponsor
- VOT: Voter registration
- WEB: Information technology costs (internet, e-mail)

### Payments Made

<table>
<thead>
<tr>
<th>Name and Address of Payee</th>
<th>Code</th>
<th>Description of Payment</th>
<th>Amount Paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Linda Canlas for School Board 2014 - ID # 1369762</td>
<td>FIL</td>
<td>Candidate Filing/Ballot Fees</td>
<td>$1747.00</td>
</tr>
<tr>
<td>Linda Canlas for School Board 2014 - ID # 1369762</td>
<td>CMP</td>
<td>Campaign paraphernalia/misc.</td>
<td>$195.00</td>
</tr>
<tr>
<td>Linda Canlas for School Board 2014 - ID # 1369762</td>
<td>CMP</td>
<td>Campaign paraphernalia/misc. - precinct maps</td>
<td>$65.00</td>
</tr>
</tbody>
</table>

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

**Subtotal $** 2007.00
<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE OR I.D. NUMBER</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
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<tbody>
<tr>
<td>FolgerGraphics</td>
<td>CMP</td>
<td>Campaign paraphernalia/misc. - Sign labels 1 1/2 x 11 1/4</td>
<td>$403.30</td>
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<tr>
<td>FolgerGraphics</td>
<td>CMP</td>
<td>Campaign paraphernalia/misc. - Sign labels 1 3/4 x 6</td>
<td>$304.11</td>
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<tr>
<td>Costco Wholesale</td>
<td>FND</td>
<td>Food for Campaign Kick-Off BBQ on 09/07/14</td>
<td>$155.92</td>
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<tr>
<td>Walmart</td>
<td>FND</td>
<td>Miscellaneous for Campaign Kick-Off BBQ on 09/07/14 - napkins, tissue</td>
<td>$14.67</td>
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<tr>
<td>FolgerGraphics</td>
<td>CMP</td>
<td>Campaign paraphernalia/misc. - Handout Cards 3 1/2 x 8 1/2</td>
<td>$267.05</td>
</tr>
</tbody>
</table>

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

Total: $1145.05