

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

Date Stamp

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08/01/2022
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Filing ID:
204324150

Statement covers period

from 06/02/2022

through 06/30/2022

Date of election if applicable:
(Month, Day, Year)

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- Officeholder, Candidate Controlled Committee
 - State Candidate Election Committee
 - Recall
(Also Complete Part 5)
- General Purpose Committee
 - Sponsored
 - Small Contributor Committee
 - Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
 - Controlled
 - Sponsored
(Also Complete Part 6)
- Primarily Formed Candidate/Officeholder Committee
(Also Complete Part 7)

2. Type of Statement:

- 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
1437859

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
San Franciscans for Public Safety Supporting the Recall of Chesa Boudin

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>San Francisco</u>	<u>CA</u>	<u>94118</u>	<u>(628)899-6180</u>

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS
(415)358-9560 / political@viewavegrp.com

Treasurer(s)

NAME OF TREASURER
Mary Jung

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>San Francisco</u>	<u>CA</u>	<u>94118</u>	<u>(628)899-6180</u>

NAME OF ASSISTANT TREASURER, IF ANY

Patricia Mar
MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>San Francisco</u>	<u>CA</u>	<u>94118</u>	<u>(628)899-6180</u>

OPTIONAL: FAX / E-MAIL ADDRESS

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 in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 08/01/2022
Date

By Patricia Mar
Signature of Treasurer or Assistant Treasurer

Executed on _____
Date

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on _____
Date

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on _____
Date

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Recipient Committee
Campaign Statement
Cover Page — Part 2**

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

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.*

COMMITTEE NAME	I.D. NUMBER
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NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
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COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME	I.D. NUMBER
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NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
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COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE
Recall Chesa Boudin

BALLOT NO. OR LETTER	JURISDICTION District Attorney, San Francisco	<input checked="" type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY
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7. Primarily Formed Candidate/Officeholder Committee *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

SUMMARY PAGE

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page <u>3</u> of <u>30</u>
NAME OF FILER		I.D. NUMBER
San Franciscans for Public Safety Supporting the Recall of Chesa Boudin		1437859

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Franciscans for Public Safety Supporting the Recall of Chesa Boudin

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions Schedule A, Line 3	\$ 20,760.00	\$ 4,572,114.04
2. Loans Received Schedule B, Line 3	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 20,760.00	\$ 4,572,114.04
4. Nonmonetary Contributions Schedule C, Line 3	0.00	29,016.00
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 20,760.00	\$ 4,601,130.04

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

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

Expenditures Made

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made Schedule E, Line 4	\$ 141,864.89	\$ 4,603,187.05
7. Loans Made Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 141,864.89	\$ 4,603,187.05
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	-57,108.72	190,985.62
10. Nonmonetary Adjustment Schedule C, Line 3	0.00	29,016.00
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 84,756.17	\$ 4,823,188.67

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made*
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____

Current Cash Statement

12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 137,863.71
13. Cash Receipts Column A, Line 3 above	20,760.00
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00
15. Cash Payments Column A, Line 8 above	141,864.89
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 16,758.82

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

*Amounts in this section may be different from amounts reported in Column B.

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

17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ 0.00
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse	\$ 0.00
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ 190,985.62

Schedule A Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page <u>4</u> of <u>30</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER San Franciscans for Public Safety Supporting the Recall of Chesa Boudin	I.D. NUMBER 1437859
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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)
06/02/2022	SARAH DILULLO SAN FRANCISCO, CA 94118	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	NOT EMPLOYED NONE	1,500.00	1,500.00	
06/02/2022	GANG LI LOS GATOS, CA 95032	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PHYSICIAN GANG LI MD PAIN CARE, INC	100.00	100.00	
06/02/2022	HAI-YAN LI DEL MAR, CA 92014	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PHYSICIAN SCRIPPS CLINIC	100.00	100.00	
06/02/2022	SELINA SHEK SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ATTORNEY CALIFORNIA PUBLIC UTILITIES COMMISSION	250.00	350.00	
06/02/2022	SUSIE SHEK SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SOC DESIGN ENGINEER INTEL CORPORATION	250.00	250.00	
SUBTOTAL \$				2,200.00		

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 19,850.00
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 910.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 20,760.00

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

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page <u>5</u> of <u>30</u>

NAME OF FILER San Franciscans for Public Safety Supporting the Recall of Chesa Boudin	I.D. NUMBER 1437859
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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)
06/02/2022	KENAN SI SACRAMENTO, CA 95835	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PHYSICIAN KENAN & WANG, LLC	100.00	100.00	
06/02/2022	GEORGE STILL ATHERTON, CA 94027	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	VENTURE CAPITALIST STILL CAPITAL PARTNERS	100.00	100.00	
06/02/2022	MINNA TAO OAKLAND, CA 94612	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	NOT EMPLOYED NONE	500.00	500.00	
06/02/2022	MAX YOUNG SAN FRANCISCO, CA 94118	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	BAR OWNER MR. SMITH'S	500.00	500.00	
06/02/2022	WEIWEN ZHENG SAN FRANCISCO, CA, CA 94108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PHYSICIAN SELF-EMPLOYED/SAME NAME	250.00	250.00	
SUBTOTAL \$				1,450.00		

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 SCC – Small Contributor Committee

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page <u>6</u> of <u>30</u>

NAME OF FILER San Franciscans for Public Safety Supporting the Recall of Chesa Boudin	I.D. NUMBER 1437859
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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)
06/03/2022	KERRY KONRAD SAN FRANCISCO, CA 94105	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	50.00	1,100.00	
06/03/2022	DANIEL LOEB NEW YORK, NY 10001	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CHIEF EXECUTIVE OFFICER/CHIEF INVESTMENT OFFICER THIRD POINT LLC	9,900.00	9,900.00	
06/03/2022	CORINNA LUEBBE SAN FRANCISCO, CA 94111	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	GENERAL MANAGER TAJ CAMPTON PLACE	250.00	250.00	
06/03/2022	GREGORY MENDEZ SAN FRANCISCO, CA 94123	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ATTORNEY LAW OFFICE OF GREGORY GERARD MENDEZ	100.00	500.00	
06/03/2022	MARK PARCELLA SAN FRANCISCO, CA 94121	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ADVISOR SELF-EMPLOYED, SFS LLC	500.00	1,000.00	
SUBTOTAL \$				10,800.00		

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 SCC – Small Contributor Committee

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page <u>7</u> of <u>30</u>

NAME OF FILER San Franciscans for Public Safety Supporting the Recall of Chesa Boudin	I.D. NUMBER 1437859
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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)
06/03/2022	RANDY PETERSON SAN FRANCISCO, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PORTFOLIO MANAGER FIRST REPUBLIC BANK	1,000.00	1,000.00	
06/03/2022	JOSEPH TOBONI SAN FRANCISCO, CA 94127	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	BUILDER TOBONI GROUP	250.00	500.00	
06/04/2022	KAREN WONG SAN FRANCISCO, CA 94108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	25.00	100.00	
06/05/2022	JOHN CHEN AUSTIN, TX 78702	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	REAL ESTATE INVESTOR SELF-EMPLOYED/SAME NAME	100.00	125.00	
06/05/2022	JEFFREY HELLER BERKELEY, CA 94705	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ARCHITECT HELLER MANUS	100.00	150.00	
SUBTOTAL \$				1,475.00		

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 OTH – Other (e.g., business entity)
 PTY – Political Party
 SCC – Small Contributor Committee

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page <u>8</u> of <u>30</u>

NAME OF FILER San Franciscans for Public Safety Supporting the Recall of Chesa Boudin	I.D. NUMBER 1437859
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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)
06/05/2022	JOEL LUEBKEMAN SAN FRANCISCO, CA 94127	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	REALTOR COMPASS	100.00	350.00	
06/06/2022	DONNA CROWDER SAN FRANCISCO, CA 94114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	REAL ESTATE BROKER COLDWELL BANKER REALTY	250.00	350.00	
06/06/2022	MARK KLEIN SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SENIOR VICE PRESIDENT COMMONSPIRIT	250.00	250.00	
06/06/2022	PETER RADIN SAN MATEO, CA 94404	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	LAWYER SELF-EMPLOYED/SAME NAME	100.00	100.00	
06/06/2022	HERBERT STACKHOUSE SAN FRANCISCO, CA 94134	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	MATHEMATICIAN NTRT	50.00	190.00	
SUBTOTAL \$				750.00		

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 OTH – Other (e.g., business entity)
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 SCC – Small Contributor Committee

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page <u>9</u> of <u>30</u>

NAME OF FILER San Franciscans for Public Safety Supporting the Recall of Chesa Boudin	I.D. NUMBER 1437859
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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)
06/07/2022	TINA CEN SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ACCOUNTANT CITY AND COUNTY OF SAN FRANCISCO	100.00	100.00	
06/07/2022	ELIZABETH TAISCH MILL VALLEY, CA 94941	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	BROKER ASSOCIATE COMPASS	100.00	400.00	
06/07/2022	REBECCA WHITE SAN FRANCISCO, CA 94121	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SALES ASSOCIATE INTERO REAL ESTATE	100.00	600.00	
06/08/2022	VIKRAM AIYER SAN FRANCISCO, CA 94103	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DEPUTY DIRECTOR AMERICAN CIVIL LIBERTIES UNION	2,500.00	2,500.00	
06/17/2022	KAI HARE SAN FRANCISCO, CA 94127	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ATTORNEY SELF-EMPLOYED/SAME NAME	100.00	100.00	
SUBTOTAL \$				2,900.00		

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 OTH – Other (e.g., business entity)
 PTY – Political Party
 SCC – Small Contributor Committee

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page <u>10</u> of <u>30</u>

NAME OF FILER San Franciscans for Public Safety Supporting the Recall of Chesa Boudin	I.D. NUMBER 1437859
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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)
06/17/2022	KEVIN WALSH SAN FRANCISCO, CA 94941	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	100.00	800.00	
06/18/2022	LUCY BOAS SAN FRANCISCO, CA 94118	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PSYCHOTHERAPIST SELF-EMPLOYED/SAME NAME	25.00	125.00	
06/18/2022	STEPHEN MARTIN-PINTO SAN FRANCISCO, CA 94127	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	FIREFIGHTER SAN FRANCISCO FIRE DEPARTMENT	100.00	100.00	
06/19/2022	CALVIN LAU SAN FRANCISCO, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	50.00	250.00	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$				275.00		

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

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page 11 of 30
I.D. NUMBER		1437859

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Franciscans for Public Safety Supporting the Recall of Chesa Boudin

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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
CONVERGENCE TARGETED COMMUNICATIONS LLC WASHINGTON, DC 20036	LIT		SEE SCHEDULE G.	67,790.69
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			788.54
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			426.30

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

SUBTOTAL \$ 69,005.53

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	141,864.89
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 \$	141,864.89

**Schedule E
(Continuation Sheet)
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page <u>12</u> of <u>30</u>
NAME OF FILER		I.D. NUMBER
San Franciscans for Public Safety Supporting the Recall of Chesa Boudin		1437859

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Franciscans for Public Safety Supporting the Recall of Chesa Boudin

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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
EMPLOYERS PREFERRED INS. CO. HENDERSON, NV 89074	OFC			1,219.00
ANH TU NGUYEN SAN FRANCISCO, CA 94158	SAL			1,970.00
LILLY RAPSON SAN FRANCISCO, CA 94121	SAL	SEE SCHEDULE G.		4,000.00
RCBS PAYROLL SERVICES SACRAMENTO, CA 95841			EMPLOYER PAYROLL TAXES	1,068.71
RCBS PAYROLL SERVICES SACRAMENTO, CA 95841	OFC			315.00

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

SUBTOTAL \$ 8,572.71

**Schedule E
(Continuation Sheet)
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page <u>13</u> of <u>30</u>
NAME OF FILER		I.D. NUMBER
San Franciscans for Public Safety Supporting the Recall of Chesa Boudin		1437859

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Franciscans for Public Safety Supporting the Recall of Chesa Boudin

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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
ANDREA SHORTER SAN FRANCISCO, CA 94107	SAL		SEE SCHEDULE G.	8,000.00
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			173.80
PROMPT.IO, INC. SEATTLE, WA 98102			TEXT MESSAGING PLATFORM	20,000.00
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			34.70
AMALGAMATED BANK NEW YORK, NY 10001	OFC			575.00

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

SUBTOTAL \$ 28,783.50

**Schedule E
(Continuation Sheet)
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page <u>14</u> of <u>30</u>
NAME OF FILER		I.D. NUMBER
San Franciscans for Public Safety Supporting the Recall of Chesa Boudin		1437859

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Franciscans for Public Safety Supporting the Recall of Chesa Boudin

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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
KULLY HALL LLC dba KMM STRATEGIES SEATTLE, WA 98104	OFC		SEE SCHEDULE G.	952.73
KULLY HALL LLC dba KMM STRATEGIES SEATTLE, WA 98104	RAD		SEE SCHEDULE G.	2,000.00
KULLY HALL LLC dba KMM STRATEGIES SEATTLE, WA 98104	LIT		SEE SCHEDULE G.	6,869.25
KULLY HALL LLC dba KMM STRATEGIES SEATTLE, WA 98104	PRT		SEE SCHEDULE G.	750.00
KULLY HALL LLC dba KMM STRATEGIES SEATTLE, WA 98104	LIT		SEE SCHEDULE G.	10,657.13

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

SUBTOTAL \$ 21,229.11

**Schedule E
(Continuation Sheet)
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page <u>15</u> of <u>30</u>
NAME OF FILER		I.D. NUMBER
San Franciscans for Public Safety Supporting the Recall of Chesa Boudin		1437859

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Franciscans for Public Safety Supporting the Recall of Chesa Boudin

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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
ANH TU NGUYEN SAN FRANCISCO, CA 94158	SAL			1,190.00
LILLY RAPSON SAN FRANCISCO, CA 94121	SAL	SEE SCHEDULE G.		4,000.00
RCBS PAYROLL SERVICES SACRAMENTO, CA 95841			EMPLOYER PAYROLL TAXES	1,009.04
RCBS PAYROLL SERVICES SACRAMENTO, CA 95841	OFC			75.00
ANDREA SHORTER SAN FRANCISCO, CA 94107	SAL	SEE SCHEDULE G.		8,000.00

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

SUBTOTAL \$ 14,274.04

**Schedule F
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page 16 of 30
NAME OF FILER		I.D. NUMBER
San Franciscans for Public Safety Supporting the Recall of Chesa Boudin		1437859

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

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)

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
KULLY HALL LLC dba KMM STRATEGIES SEATTLE, WA 98104	CNS	5,000.00	0.00	0.00	5,000.00
KULLY HALL LLC dba KMM STRATEGIES SEATTLE, WA 98104	OFC SEE SCHEDULE G.	952.73	0.00	952.73	0.00
RMS ASSOCIATES PHONEIX, AZ 85012	CNS	10,000.00	0.00	0.00	10,000.00

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

SUBTOTALS \$	15,952.73\$	0.00\$	952.73\$	15,000.00
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Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) **INCURRED TOTALS \$** 33,130.08
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) **PAID TOTALS \$** 90,238.80
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** -57,108.72
May be a negative number

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page 17 of 30

NAME OF FILER San Franciscans for Public Safety Supporting the Recall of Chesa Boudin	I.D. NUMBER 1437859
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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
LT campaign literature and mailings	PRT print ads	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 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
KULLY HALL LLC dba KMM STRATEGIES SEATTLE, WA 98104	CNS	5,000.00	0.00	0.00	5,000.00
VIEW AVENUE GROUP LLC SAN FRANCISCO, CA 94118	PRO	3,500.00	0.00	0.00	3,500.00
LILLY RAPSON SAN FRANCISCO, CA 94121	TRS	16.50	0.00	0.00	16.50
KULLY HALL LLC dba KMM STRATEGIES SEATTLE, WA 98104	CNS	5,000.00	0.00	0.00	5,000.00
SUBTOTALS \$		13,516.50 \$	0.00 \$	0.00 \$	13,516.50

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page 18 of 30

NAME OF FILER San Franciscans for Public Safety Supporting the Recall of Chesa Boudin	I.D. NUMBER 1437859
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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
LT campaign literature and mailings	PRT print ads	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 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
VIEW AVENUE GROUP LLC SAN FRANCISCO, CA 94118	PRO	3,750.00	0.00	0.00	3,750.00
MAINARDI LAW SAN FRANCISCO, CA 94104	PRO	2,470.00	0.00	0.00	2,470.00
LILLY RAPSON SAN FRANCISCO, CA 94121	FND SEE SCHEDULE G.	2,680.46	0.00	0.00	2,680.46
LILLY RAPSON SAN FRANCISCO, CA 94121	TRS SEE SCHEDULE G.	648.00	0.00	0.00	648.00
SUBTOTALS \$		9,548.46 \$	0.00 \$	0.00 \$	9,548.46

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page 19 of 30

NAME OF FILER San Franciscans for Public Safety Supporting the Recall of Chesa Boudin	I.D. NUMBER 1437859
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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
LT campaign literature and mailings	PRT print ads	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 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
RMS ASSOCIATES PHONEIX, AZ 85012	CNS	10,000.00	0.00	0.00	10,000.00
LILLY RAPSON SAN FRANCISCO, CA 94121	TRS	44.13	0.00	0.00	44.13
KULLY HALL LLC dba KMM STRATEGIES SEATTLE, WA 98104	CNS	5,000.00	0.00	0.00	5,000.00
VIEW AVENUE GROUP LLC SAN FRANCISCO, CA 94118	PRO	6,000.00	0.00	0.00	6,000.00
SUBTOTALS \$		21,044.13 \$	0.00 \$	0.00 \$	21,044.13

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page 20 of 30

NAME OF FILER San Franciscans for Public Safety Supporting the Recall of Chesa Boudin	I.D. NUMBER 1437859
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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)

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

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
KULLY HALL LLC dba KMM STRATEGIES SEATTLE, WA 98104	RAD SEE SCHEDULE G.	2,000.00	0.00	2,000.00	0.00
KULLY HALL LLC dba KMM STRATEGIES SEATTLE, WA 98104	LIT SEE SCHEDULE G.	6,869.25	0.00	6,869.25	0.00
KULLY HALL LLC dba KMM STRATEGIES SEATTLE, WA 98104	PRT SEE SCHEDULE G.	750.00	0.00	750.00	0.00
MAINARDI LAW SAN FRANCISCO, CA 94104	PRO	3,087.50	0.00	0.00	3,087.50
SUBTOTALS \$		12,706.75 \$	0.00 \$	9,619.25 \$	3,087.50

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page 21 of 30

NAME OF FILER	I.D. NUMBER
San Franciscans for Public Safety Supporting the Recall of Chesa Boudin	1437859

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
LT campaign literature and mailings	PRT print ads	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 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
STOP CRIME ACTION SAN FRANCISCO, CA 94116	VIDEO FOOTAGE	4,042.06	0.00	0.00	4,042.06
LILLY RAPSON SAN FRANCISCO, CA 94121	FND SEE SCHEDULE G.	893.46	0.00	0.00	893.46
LILLY RAPSON SAN FRANCISCO, CA 94121	TRS SEE SCHEDULE G.	186.57	0.00	0.00	186.57
LILLY RAPSON SAN FRANCISCO, CA 94121	TRS SEE SCHEDULE G.	261.85	0.00	0.00	261.85
SUBTOTALS \$		5,383.94 \$	0.00 \$	0.00 \$	5,383.94

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page 22 of 30

NAME OF FILER San Franciscans for Public Safety Supporting the Recall of Chesa Boudin	I.D. NUMBER 1437859
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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)

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

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
KULLY HALL LLC dba KMM STRATEGIES SEATTLE, WA 98104	TEL SEE SCHEDULE G.	83,830.14	0.00	0.00	83,830.14
LILLY RAPSON SAN FRANCISCO, CA 94121	TRS	144.87	0.00	0.00	144.87
KULLY HALL LLC dba KMM STRATEGIES SEATTLE, WA 98104	LIT SEE SCHEDULE G.	10,657.13	0.00	10,657.13	0.00
CONVERGENCE TARGETED COMMUNICATIONS LLC WASHINGTON, DC 20036	LIT SEE SCHEDULE G.	67,790.69	0.00	67,790.69	0.00
SUBTOTALS \$		162,422.83 \$	0.00 \$	78,447.82 \$	83,975.01

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page 23 of 30
NAME OF FILER		I.D. NUMBER
San Franciscans for Public Safety Supporting the Recall of Chesa Boudin		1437859

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
LT	campaign literature and mailings	PRT	print ads	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 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
EMPLOYERS PREFERRED INS. CO. HENDERSON, NV 89074	OFC	1,219.00	0.00	1,219.00	0.00
VIEW AVENUE GROUP LLC SAN FRANCISCO, CA 94118	PRO	6,300.00	0.00	0.00	6,300.00
KULLY HALL LLC dba KMM STRATEGIES SEATTLE, WA 98104	CNS	0.00	5,000.00	0.00	5,000.00
KULLY HALL LLC dba KMM STRATEGIES SEATTLE, WA 98104	TEL SEE SCHEDULE G.	0.00	3,671.70	0.00	3,671.70
SUBTOTALS \$		7,519.00 \$	8,671.70 \$	1,219.00 \$	14,971.70

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page 24 of 30
NAME OF FILER		I.D. NUMBER
San Franciscans for Public Safety Supporting the Recall of Chesa Boudin		1437859

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
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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
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LT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

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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
KULLY HALL LLC dba KMM STRATEGIES SEATTLE, WA 98104	DESIGN SERVICES; SEE SCHEDULE G.	0.00	1,825.00	0.00	1,825.00
MAINARDI LAW SAN FRANCISCO, CA 94104	PRO	0.00	4,370.00	0.00	4,370.00
KULLY HALL LLC dba KMM STRATEGIES SEATTLE, WA 98104	CMP SEE SCHEDULE G.	0.00	4,701.25	0.00	4,701.25
PROMPT.IO, INC. SEATTLE, WA 98104	TEXT MESSAGING PLATFORM	0.00	13,500.00	0.00	13,500.00
SUBTOTALS \$		0.00 \$	24,396.25 \$	0.00 \$	24,396.25

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	06/02/2022	
through	06/30/2022	Page 25 of 30

NAME OF FILER	I.D. NUMBER
San Franciscans for Public Safety Supporting the Recall of Chesa Boudin	1437859

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 |
| LT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, e-mail) |

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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
LILLY RAPSON SAN FRANCISCO, CA 94121	TRS	0.00	62.13	0.00	62.13
SUBTOTALS \$		0.00 \$	62.13 \$	0.00 \$	62.13

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

Amounts may be rounded to whole dollars.

Statement covers period
 from 06/02/2022
 through 06/30/2022

SCHEDULE G

CALIFORNIA FORM 460

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Franciscans for Public Safety Supporting the Recall of Chesa Boudin

I.D. NUMBER

1437859

NAME OF AGENT OR INDEPENDENT CONTRACTOR

KULLY HALL LLC dba KMM STRATEGIES

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 |
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| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
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| 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) |

* 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
BAD ANIMALS SEATTLE, WA 98119	TEL			420.00
EXTREME REACH CHICAGO, IL 60604	TEL			1,600.00
DOUG LYONS SEATTLE, WA 98115	TEL			651.70
PLUTO WORKS INC. HALF MOON BAY, CA 94019			DESIGN SERVICES	1,825.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 4,496.70

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

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

Amounts may be rounded to whole dollars.

Statement covers period
 from 06/02/2022
 through 06/30/2022

CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Franciscans for Public Safety Supporting the Recall of Chesa Boudin

I.D. NUMBER

1437859

NAME OF AGENT OR INDEPENDENT CONTRACTOR

KULLY HALL LLC dba KMM STRATEGIES

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 |
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| 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) |

* 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
DOME PRINTING MCCLELLAN PARK, CA 95652	CMP			4,176.25

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 4,176.25

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

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

Amounts may be rounded to whole dollars.

Statement covers period
 from 06/02/2022
 through 06/30/2022

SCHEDULE G
CALIFORNIA FORM 460
 Page 28 of 30
 I.D. NUMBER
 1437859

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Franciscans for Public Safety Supporting the Recall of Chesa Boudin

NAME OF AGENT OR INDEPENDENT CONTRACTOR

LILLY RAPSON

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 |
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| 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 |
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| 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) |

* 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
RCBS PAYROLL SERVICES SACRAMENTO, CA 95841			EMPLOYEE PAYROLL TAXES	1,751.57
RCBS PAYROLL SERVICES SACRAMENTO, CA 95841			EMPLOYEE PAYROLL TAXES	1,751.57

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 3,503.14

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

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

Amounts may be rounded to whole dollars.

Statement covers period
 from 06/02/2022
 through 06/30/2022

SCHEDULE G

CALIFORNIA FORM 460

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I.D. NUMBER
1437859

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Franciscans for Public Safety Supporting the Recall of Chesa Boudin

NAME OF AGENT OR INDEPENDENT CONTRACTOR

ANDREA SHORTER

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) |

* 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
RCBS PAYROLL SERVICES SACRAMENTO, CA 95841			EMPLOYEE PAYROLL TAXES	2,836.18
RCBS PAYROLL SERVICES SACRAMENTO, CA 95841			EMPLOYEE PAYROLL TAXES	2,836.18

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 5,672.36

* 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.

**Additional Comments
For Form 460**

ADDITIONAL COMMENTS
CALIFORNIA FORM 460
Page 30 of 30
I.D. NUMBER
1437859

NAME OF FILER

San Franciscans for Public Safety Supporting the Recall of Chesa Boudin

FULL COMMITTEE NAME: SAN FRANCISCANS FOR AFFORDABLE HOUSING AND SAFE STREETS OPPOSING CAMPOS FOR ASSEMBLY 2022, SPONSORED BY THE CALIFORNIA ASSOCIATION OF REALTORS