

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

COVER PAGE

CALIFORNIA FORM 460

Page 1 of 28

For Official Use Only

Date Stamp

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Filing ID:
192887798

Statement covers period

from 07/01/2020

through 09/19/2020

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

11/03/2020

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

1386336

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Martine Watkins for Santa Cruz City Council 2020

STREET ADDRESS (NO P.O. BOX)

| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|------------|-------|----------|-----------------|
| Santa Cruz | CA | 95062 | (619)861-6072 |

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

| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|------------|-------|----------|-----------------|
| Santa Cruz | CA | 95063 | |

OPTIONAL: FAX / E-MAIL ADDRESS

watkinsforcitycouncil@gmail.com

Treasurer(s)

NAME OF TREASURER

Linda Proctor

MAILING ADDRESS

| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|------------|-------|----------|-----------------|
| Santa Cruz | CA | 95062 | (619)861-6072 |

NAME OF ASSISTANT TREASURER, IF ANY

Brandon Proctor

MAILING ADDRESS

| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|------------|-------|----------|-----------------|
| Santa Cruz | CA | 95062 | (831)588-7267 |

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 09/22/2020
Date

By Linda Proctor
Signature of Treasurer or Assistant Treasurer

Executed on 09/22/2020
Date

By Martine Watkins
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
 Martine Watkins

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
 City Council Member: City of Santa Cruz

| | | | |
|---|------------|-------|-------|
| RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) | CITY | STATE | ZIP |
| | Santa Cruz | CA | 95062 |

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 |
| NAME OF TREASURER | CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO |
| COMMITTEE ADDRESS | STREET ADDRESS (NO P.O. BOX) |
| CITY | STATE ZIP CODE AREA CODE/PHONE |

| | |
|-------------------|---|
| COMMITTEE NAME | I.D. NUMBER |
| NAME OF TREASURER | CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO |
| 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

| | | |
|----------------------|--------------|---|
| BALLOT NO. OR LETTER | JURISDICTION | <input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE |
|----------------------|--------------|---|

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 |
|-----------------------|---------------------|

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 |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE |

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 | 07/01/2020 | |
| through | 09/19/2020 | Page <u>3</u> of <u>28</u> |
| | | I.D. NUMBER 1386336 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martine Watkins for Santa Cruz City Council 2020

Contributions Received

| | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|---|--|--|
| 1. Monetary Contributions Schedule A, Line 3 | \$ 22,749.00 | \$ 22,751.00 |
| 2. Loans Received Schedule B, Line 3 | 0.00 | 0.00 |
| 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 | \$ 22,749.00 | \$ 22,751.00 |
| 4. Nonmonetary Contributions Schedule C, Line 3 | 0.00 | 0.00 |
| 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 | \$ 22,749.00 | \$ 22,751.00 |

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 | Column B |
|---|-------------|-------------|
| 6. Payments Made Schedule E, Line 4 | \$ 8,667.13 | \$ 8,772.13 |
| 7. Loans Made Schedule H, Line 3 | 0.00 | 0.00 |
| 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 | \$ 8,667.13 | \$ 8,772.13 |
| 9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 | 0.00 | 0.00 |
| 10. Nonmonetary Adjustment Schedule C, Line 3 | 0.00 | 0.00 |
| 11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10 | \$ 8,667.13 | \$ 8,772.13 |

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 | \$ 59.00 |
| 13. Cash Receipts Column A, Line 3 above | 22,749.00 |
| 14. Miscellaneous Increases to Cash Schedule I, Line 4 | 0.00 |
| 15. Cash Payments Column A, Line 8 above | 8,667.13 |
| 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 | \$ 14,140.87 |

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 |
|---|---------|

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 | \$ 0.00 |

Schedule A Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page 4 of 28 |

SEE INSTRUCTIONS ON REVERSE

| | |
|---|------------------------|
| NAME OF FILER Martine Watkins for Santa Cruz City Council 2020 | I.D. NUMBER 1386336 |
|---|------------------------|

| 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) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 07/06/2020 | Brad Brereton Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | attorney Brereton Law Office | 400.00 | 400.00 | G2020 \$400.00 |
| 07/06/2020 | Daniel Wacks Campbell, CA 95008 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | CEO State Flower | 400.00 | 400.00 | G2020 \$400.00 |
| 07/07/2020 | Rachel Dann Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | supervisor's analyst County of Santa Cruz | 200.00 | 200.00 | G2020 \$200.00 |
| 07/07/2020 | Jago Macleod Capitola, CA 95010 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Pom Pom Projekt self employed | 200.00 | 200.00 | G2020 \$200.00 |
| 07/07/2020 | Laura Macleod Capitola, CA 95010 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | business owner Pom Pom Projekt | 200.00 | 200.00 | G2020 \$200.00 |
| SUBTOTAL \$ | | | | 1,400.00 | | |

Schedule A Summary

| | |
|---|---------------------------|
| 1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) | \$ 19,145.00 |
| 2. Amount received this period – unitemized monetary contributions of less than \$100 | \$ 3,604.00 |
| 3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) | TOTAL \$ 22,749.00 |

*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 | 07/01/2020 | |
| through | 09/19/2020 | Page <u>5</u> of <u>28</u> |

| | |
|---|------------------------|
| NAME OF FILER Martine Watkins for Santa Cruz City Council 2020 | I.D. NUMBER 1386336 |
|---|------------------------|

| 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) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 07/07/2020 | Samantha Schacher Denver, CO 80209 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | TV host Tegna | 100.00 | 100.00 | G2020 \$100.00 |
| 07/07/2020 | Michael Smith Oakland, CA 94611 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 100.00 | 100.00 | G2020 \$100.00 |
| 07/08/2020 | Steve Fuehrer Santa Cruz, CA 95062 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 200.00 | 200.00 | G2020 \$200.00 |
| 07/08/2020 | Robert Orrizzi Santa Cruz, CA 95062 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | bookkeeper self | 250.00 | 250.00 | G2020 \$250.00 |
| 07/08/2020 | Casey Protti Santa Cruz, CA 96050 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | owner Bookshop SC | 200.00 | 200.00 | G2020 \$200.00 |
| SUBTOTAL \$ | | | | 850.00 | | |

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

| | | |
|--------------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page <u>6</u> of <u>28</u> |

| | |
|---|------------------------|
| NAME OF FILER Martine Watkins for Santa Cruz City Council 2020 | I.D. NUMBER 1386336 |
|---|------------------------|

| 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) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 07/08/2020 | Helene Rubin Long Beach, NY 11561 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 100.00 | 100.00 | G2020 \$100.00 |
| 07/08/2020 | Jon Winston Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 200.00 | 200.00 | G2020 \$200.00 |
| 07/09/2020 | Amanda Jackson Miller Santa Cruz, CA 95065 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | attorney SC Superior Court | 100.00 | 100.00 | G2020 \$100.00 |
| 07/09/2020 | Frederick Keeley Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | professor Panetta Public Policy Institute | 400.00 | 400.00 | G2020 \$400.00 |
| 07/09/2020 | Grace McDonald Surrey, British Columbia, Canada, V4A2B5 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | counsellor self employed | 200.00 | 200.00 | G2020 \$200.00 |
| SUBTOTAL \$ | | | | 1,000.00 | | |

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 (other than PTY or SCC)
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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

| | | |
|--------------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page <u>7</u> of <u>28</u> |

| | |
|---|------------------------|
| NAME OF FILER Martine Watkins for Santa Cruz City Council 2020 | I.D. NUMBER 1386336 |
|---|------------------------|

| 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) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 07/12/2020 | Matt Farrell Santa Cruz,, CA 95062 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 100.00 | 100.00 | G2020 \$100.00 |
| 07/12/2020 | Carol Polhamus Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 250.00 | 250.00 | G2020 \$250.00 |
| 07/13/2020 | Reuben Helick Aptos, CA 95003 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | real estate agent Cushman & Wakefield | 200.00 | 200.00 | G2020 \$200.00 |
| 07/14/2020 | Kimlin McDaniel-Keith Santa Cruz, CA 95062 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | school nurse SC COE | 100.00 | 100.00 | G2020 \$100.00 |
| 07/15/2020 | John Burroughs Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 200.00 | 200.00 | G2020 \$200.00 |
| SUBTOTAL \$ | | | | 850.00 | | |

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 IND – Individual
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 (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 | 07/01/2020 | |
| through | 09/19/2020 | Page <u>8</u> of <u>28</u> |

| | |
|---|------------------------|
| NAME OF FILER Martine Watkins for Santa Cruz City Council 2020 | I.D. NUMBER 1386336 |
|---|------------------------|

| 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) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 07/15/2020 | Linda Burroughs Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 200.00 | 200.00 | G2020 \$200.00 |
| 07/15/2020 | Doug Erickson Santa Cruz,, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | community builder SC Works | 50.00 | 100.00 | G2020 \$100.00 |
| 07/16/2020 | Zach Friend Aptos, CA 95003 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | County Supervisor Santa Cruz County | 200.00 | 200.00 | G2020 \$200.00 |
| 07/16/2020 | Melissa Whatley Santa Cruz, CA 95065 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | public relations UCSC | 50.00 | 100.00 | G2020 \$100.00 |
| 07/17/2020 | Khristina Horn Santa Cruz,, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | business owner self employed | 100.00 | 100.00 | G2020 \$100.00 |
| SUBTOTAL \$ | | | | 600.00 | | |

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 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 | 07/01/2020 | |
| through | 09/19/2020 | Page <u>9</u> of <u>28</u> |

| | |
|---|------------------------|
| NAME OF FILER Martine Watkins for Santa Cruz City Council 2020 | I.D. NUMBER 1386336 |
|---|------------------------|

| 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) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 07/20/2020 | Krista Cook Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | realtor Lighthouse Realty | 250.00 | 250.00 | G2020 \$250.00 |
| 07/20/2020 | Peter Cook Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | realtor Lighthouse Realty | 250.00 | 250.00 | G2020 \$250.00 |
| 07/20/2020 | Colin Jessop Santa Cruz,, CA 95062 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 400.00 | 400.00 | G2020 \$400.00 |
| 07/20/2020 | Mari Tustin Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | property manager /Sr VP John Stewart Co. | 100.00 | 100.00 | G2020 \$100.00 |
| 07/23/2020 | David Plumlee Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 100.00 | 100.00 | G2020 \$100.00 |
| SUBTOTAL \$ | | | | 1,100.00 | | |

*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 | 07/01/2020 | |
| through | 09/19/2020 | Page <u>10</u> of <u>28</u> |

| | |
|---|------------------------|
| NAME OF FILER Martine Watkins for Santa Cruz City Council 2020 | I.D. NUMBER 1386336 |
|---|------------------------|

| 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) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 07/24/2020 | Geoffrey Dunn Santa Cruz, CA 95065 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | writer self employed | 250.00 | 250.00 | G2020 \$250.00 |
| 07/25/2020 | Janet Reed Santa Cruz,, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 100.00 | 200.00 | G2020 \$200.00 |
| 07/26/2020 | Al Ramadan Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | category designer Play Bigger | 400.00 | 400.00 | G2020 \$400.00 |
| 07/27/2020 | Coonerty for Co Supervr 2014 , (ID# 1360850) Santa Cruz, CA 95060 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 250.00 | 250.00 | G2020 \$250.00 |
| 07/27/2020 | Gerald Gleich Boylston, MA 01505 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 100.00 | 100.00 | G2020 \$100.00 |
| SUBTOTAL \$ | | | | 1,100.00 | | |

*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 | 07/01/2020 | |
| through | 09/19/2020 | Page 11 of 28 |

| | |
|---|------------------------|
| NAME OF FILER Martine Watkins for Santa Cruz City Council 2020 | I.D. NUMBER 1386336 |
|---|------------------------|

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 08/05/2020 | Don Lane Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | administrator the Appleton Foundation | 100.00 | 100.00 | G2020 \$100.00 |
| 08/07/2020 | Michael Watkins Aptos CA, CA 95003 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | n/a retired | 400.00 | 400.00 | G2020 \$400.00 |
| 08/10/2020 | Gregory Dougherty Aptos, CA 95003 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 100.00 | 100.00 | G2020 \$100.00 |
| 08/10/2020 | Diedre Hamilton Santa Cruz, CA 95062 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | land use consultant self employed | 100.00 | 100.00 | G2020 \$100.00 |
| 08/10/2020 | Bruce McPherson Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Supervisor SC County Board SC County | 200.00 | 200.00 | G2020 \$200.00 |
| SUBTOTAL \$ | | | | 900.00 | | |

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

| | | |
|--------------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page <u>12</u> of <u>28</u> |

| | |
|---|------------------------|
| NAME OF FILER Martine Watkins for Santa Cruz City Council 2020 | I.D. NUMBER 1386336 |
|---|------------------------|

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 08/10/2020 | McPherson for Supervisor 2020 (ID# 1343208) Felton, CA 95018 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 200.00 | 200.00 | G2020 \$200.00 |
| 08/11/2020 | Courtney Ross Scotts Valley, CA 95066 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | RN Comm Hosp of Monterey Peninsula | 100.00 | 100.00 | G2020 \$100.00 |
| 08/12/2020 | Antonette DAmico Aptos, CA 95003 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | secretary SC COE | 100.00 | 100.00 | G2020 \$100.00 |
| 08/12/2020 | Eileen Proctor Greenwood, CA 95635 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | psychologist self employed | 100.00 | 100.00 | G2020 \$100.00 |
| 08/13/2020 | Andrew Tatum Santa Cruz, CA 95062 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | respiratory therapist Dominican Hosp | 100.00 | 100.00 | G2020 \$100.00 |
| SUBTOTAL \$ | | | | 600.00 | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

| | | |
|--------------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page <u>13</u> of <u>28</u> |

| | |
|---|------------------------|
| NAME OF FILER Martine Watkins for Santa Cruz City Council 2020 | I.D. NUMBER 1386336 |
|---|------------------------|

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 08/13/2020 | Melissa Whatley Santa Cruz, CA 95065 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | public relations UCSC | 50.00 | 100.00 | G2020 \$100.00 |
| 08/15/2020 | Laura Brown South Salem, NY 10590 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 100.00 | 100.00 | G2020 \$100.00 |
| 08/15/2020 | Sara Nash Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 125.00 | 125.00 | G2020 \$125.00 |
| 08/16/2020 | Jean Harrison Watsonville, CA 95076 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | business owner Cafe Rio | 200.00 | 200.00 | G2020 \$200.00 |
| 08/17/2020 | Charles Dixon Santa Cruz, CA 95062 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 120.00 | 120.00 | G2020 \$120.00 |
| SUBTOTAL \$ | | | | 595.00 | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

| | | |
|-------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page 14 of 28 |

| | |
|---|------------------------|
| NAME OF FILER Martine Watkins for Santa Cruz City Council 2020 | I.D. NUMBER 1386336 |
|---|------------------------|

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 08/17/2020 | Carol Fuller Santa Cruz, CA 96060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 100.00 | 100.00 | G2020 \$100.00 |
| 08/17/2020 | Todd Prindle Santa Cruz, CA 95065 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 100.00 | 100.00 | G2020 \$100.00 |
| 08/18/2020 | Mark Mesti-Miller Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 200.00 | 200.00 | G2020 \$200.00 |
| 08/18/2020 | Donna Murphy Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 200.00 | 200.00 | G2020 \$200.00 |
| 08/20/2020 | Elizabeth Clifton Santa Cruz, CA 95062 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | consultant Clifton Doolin Consultants | 200.00 | 200.00 | G2020 \$200.00 |
| SUBTOTAL \$ | | | | 800.00 | | |

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

| | | |
|--------------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page 15 of 28 |

| | |
|---|------------------------|
| NAME OF FILER Martine Watkins for Santa Cruz City Council 2020 | I.D. NUMBER 1386336 |
|---|------------------------|

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 08/21/2020 | Scott Roseman Santa Cruz, CA 95062 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 100.00 | 100.00 | G2020 \$100.00 |
| 08/22/2020 | Ken Carlson Santa Cruz, CA 95062 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | real estate self employed | 400.00 | 400.00 | G2020 \$400.00 |
| 08/22/2020 | Patrick Duggan Watsonville, CA 95076 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retail Pajaro Valley Golf Course | 100.00 | 100.00 | G2020 \$100.00 |
| 08/22/2020 | George Newell Santa Cruz, CA 95062 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 100.00 | 350.00 | G2020 \$350.00 |
| 08/22/2020 | George Ow Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | land developer Ow Family | 100.00 | 100.00 | G2020 \$100.00 |
| SUBTOTAL \$ | | | | 800.00 | | |

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 (other than PTY or SCC)
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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period
from 07/01/2020
through 09/19/2020

**CALIFORNIA
FORM 460**

Page 16 of 28

NAME OF FILER: Martine Watkins for Santa Cruz City Council 2020 I.D. NUMBER: 1386336

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|--|---|--|-----------------------------|---|------------------------------------|
| 08/22/2020 | Brandon Proctor Santa Cruz, CA 95062 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | teacher SC COE | 400.00 | 400.00 | G2020 \$400.00 |
| 08/22/2020 | Janet Reed Santa Cruz,, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 100.00 | 200.00 | G2020 \$200.00 |
| 08/22/2020 | David Terrazas Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | attorney Brereton Law Offices | 150.00 | 150.00 | G2020 \$150.00 |
| 08/22/2020 | Anne Watkins Aptos, CA 95003 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | consultant self employed | 400.00 | 400.00 | G2020 \$400.00 |
| 08/26/2020 | Al Crevello Soquel, CA 95073 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 250.00 | 250.00 | G2020 \$250.00 |
| SUBTOTAL \$ | | | | 1,300.00 | | |

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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 | 07/01/2020 | |
| through | 09/19/2020 | Page 17 of 28 |

| | |
|---|------------------------|
| NAME OF FILER Martine Watkins for Santa Cruz City Council 2020 | I.D. NUMBER 1386336 |
|---|------------------------|

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 08/26/2020 | Roberta Hunter Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | financial advisor WaveCrest Wealth Management | 400.00 | 400.00 | G2020 \$400.00 |
| 08/26/2020 | Renee Golder for City Council (ID# 1423339) Santa Cruz, CA 95060 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 100.00 | 100.00 | G2020 \$100.00 |
| 08/31/2020 | Casey Beyer Aptos, CA 95003 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | CEO SC County Chamber of Commerce | 100.00 | 100.00 | G2020 \$100.00 |
| 08/31/2020 | Neal Coonerty Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 100.00 | 100.00 | G2020 \$100.00 |
| 08/31/2020 | Gary Filizetti Milpitas, CA 95035 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | contractor Devcon Construction | 200.00 | 200.00 | G2020 \$200.00 |
| SUBTOTAL \$ | | | | 900.00 | | |

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

| | | |
|--------------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page 18 of 28 |

| | |
|---|------------------------|
| NAME OF FILER Martine Watkins for Santa Cruz City Council 2020 | I.D. NUMBER 1386336 |
|---|------------------------|

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 08/31/2020 | Victor Gomez Hollister, CA 95023 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | consultant Pinnacle Strategy | 400.00 | 400.00 | G2020 \$400.00 |
| 08/31/2020 | Eric Grodberg Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | handyman self employed | 400.00 | 400.00 | G2020 \$400.00 |
| 08/31/2020 | George Jarrow Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 200.00 | 200.00 | G2020 \$200.00 |
| 08/31/2020 | Susan Karon Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | property manager self employed | 200.00 | 200.00 | G2020 \$200.00 |
| 08/31/2020 | Richard Kezirian Pacific Grove, CA 93950 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 200.00 | 200.00 | G2020 \$200.00 |
| SUBTOTAL \$ | | | | 1,400.00 | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

| | | |
|--------------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page 19 of 28 |

| | |
|---|------------------------|
| NAME OF FILER Martine Watkins for Santa Cruz City Council 2020 | I.D. NUMBER 1386336 |
|---|------------------------|

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 08/31/2020 | Joshua Mader Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | UKN UKN | 100.00 | 100.00 | G2020 \$100.00 |
| 08/31/2020 | Tom Manheim Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 150.00 | 150.00 | G2020 \$150.00 |
| 08/31/2020 | George Newell Santa Cruz, CA 95062 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 250.00 | 350.00 | G2020 \$350.00 |
| 08/31/2020 | Larry Pearson Santa Cruz, CA 95065 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | owner Pacific Cookie Co | 100.00 | 100.00 | G2020 \$100.00 |
| 08/31/2020 | Rowland Rebele Santa Cruz, CA 95065 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 200.00 | 200.00 | G2020 \$200.00 |
| SUBTOTAL \$ | | | | 800.00 | | |

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

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|--------------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page <u>20</u> of <u>28</u> |

| | |
|---|----------------------------|
| NAME OF FILER Martine Watkins for Santa Cruz City Council 2020 | I.D. NUMBER 1386336 |
|---|----------------------------|

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 08/31/2020 | Reggie Watkins Oakland, CA 94602 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 400.00 | 400.00 | G2020 \$400.00 |
| 09/02/2020 | Katherine Roberts Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | exec director MB Economic Partnership | 100.00 | 100.00 | G2020 \$100.00 |
| 09/03/2020 | Jack Dilles Scotts Valley, CA 95066 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | city council member City of Scotts Valley | 100.00 | 100.00 | G2020 \$100.00 |
| 09/03/2020 | Elizabeth McCarty Santa Cruz, CA 95065 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 100.00 | 100.00 | G2020 \$100.00 |
| 09/03/2020 | Barbara Sprenger Felton, CA 95018 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | manager Satellite Centers | 100.00 | 100.00 | G2020 \$100.00 |
| SUBTOTAL \$ | | | | 800.00 | | |

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

| | | |
|--------------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page <u>21</u> of <u>28</u> |

| | |
|---|------------------------|
| NAME OF FILER Martine Watkins for Santa Cruz City Council 2020 | I.D. NUMBER 1386336 |
|---|------------------------|

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 09/04/2020 | Justin Watkins Oakland, CA 94610 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | public health planner San Mateo County | 200.00 | 400.00 | G2020 \$400.00 |
| 09/05/2020 | Brian Simmons Marina, CA 93933 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | professor CSUMB | 100.00 | 100.00 | G2020 \$100.00 |
| 09/06/2020 | David Baskin Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 200.00 | 200.00 | G2020 \$200.00 |
| 09/11/2020 | Marvin Christie Santa Cruz, CA 95065 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | real estate broker Anderson Christie Real Estate | 200.00 | 200.00 | G2020 \$200.00 |
| 09/11/2020 | Doug Erickson Santa Cruz,, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | community builder SC Works | 50.00 | 100.00 | G2020 \$100.00 |
| SUBTOTAL \$ | | | | 750.00 | | |

*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 | 07/01/2020 | |
| through | 09/19/2020 | Page 22 of 28 |

| | |
|---|------------------------|
| NAME OF FILER Martine Watkins for Santa Cruz City Council 2020 | I.D. NUMBER 1386336 |
|---|------------------------|

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 09/11/2020 | Manuel Prado Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | CEO Viva Transcription | 400.00 | 400.00 | G2020 \$400.00 |
| 09/12/2020 | Hollie Locatelli Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | bookkeeper self employed | 100.00 | 100.00 | G2020 \$100.00 |
| 09/14/2020 | Marta Beckwith Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | lawyer Techsea Law | 200.00 | 200.00 | G2020 \$200.00 |
| 09/14/2020 | Angela Chesnut Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | analyst SC County | 100.00 | 100.00 | G2020 \$100.00 |
| 09/14/2020 | Steve Miller Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 100.00 | 100.00 | G2020 \$100.00 |
| SUBTOTAL \$ | | | | 900.00 | | |

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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 | 07/01/2020 | |
| through | 09/19/2020 | Page <u>23</u> of <u>28</u> |

| | |
|---|------------------------|
| NAME OF FILER Martine Watkins for Santa Cruz City Council 2020 | I.D. NUMBER 1386336 |
|---|------------------------|

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 09/17/2020 | Richard Robinson Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | dentist SC Dental Group | 100.00 | 100.00 | G2020 \$100.00 |
| 09/17/2020 | Robert Stone Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 200.00 | 200.00 | G2020 \$200.00 |
| 09/18/2020 | Tom Burns Santa Cruz, CA 95062 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 200.00 | 200.00 | G2020 \$200.00 |
| 09/18/2020 | Democratic Women's Club of SC County (ID# 1306050) Santa Cruz, CA 95061 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 400.00 | 400.00 | G2020 \$400.00 |
| 09/18/2020 | Hayes Noel Aptos, CA 95003 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | retired n/a | 100.00 | 100.00 | G2020 \$100.00 |
| SUBTOTAL \$ | | | | 1,000.00 | | |

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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
from 07/01/2020
through 09/19/2020

**CALIFORNIA
FORM 460**

Page 24 of 28

NAME OF FILER

Martine Watkins for Santa Cruz City Council 2020

I.D. NUMBER

1386336

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 09/18/2020 | Halimah Prado Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | attorney Google | 400.00 | 400.00 | G2020 \$400.00 |
| 09/18/2020 | Judy Warner Santa Cruz, CA 95060 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | UKN UKN | 100.00 | 100.00 | G2020 \$100.00 |
| 09/19/2020 | Justin Watkins Oakland, CA 94610 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | public health planner San Mateo County | 200.00 | 400.00 | G2020 \$400.00 |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| SUBTOTAL \$ | | | | 700.00 | | |

*Contributor Codes
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 (other than PTY or SCC)
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 SCC – Small Contributor Committee

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

| | | |
|--|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page 25 of 28 |
| NAME OF FILER | | I.D. NUMBER |
| Martine Watkins for Santa Cruz City Council 2020 | | 1386336 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martine Watkins for Santa Cruz City Council 2020

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 |
|---|------|----|-------------------------------------|-------------|
| USPS Santa Cruz, CA 95062 | POS | | PO Box rental | 59.00 |
| Squarespace New York, NY 10014 | WEB | | reimburse to Celeste Gutierrez | 144.00 |
| County of Santa Cruz Santa Cruz, CA 95060 | FIL | | candidate statement on city webpage | 1,678.00 |

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

SUBTOTAL \$ 1,881.00

Schedule E Summary

| | | |
|--|-----------------|-----------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.) | \$ | 8,613.16 |
| 2. Unitemized payments made this period of under \$100 | \$ | 53.97 |
| 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 \$ | 8,667.13 |

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

Amounts may be rounded
to whole dollars.

| | | |
|--|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page <u>26</u> of <u>28</u> |
| NAME OF FILER | | I.D. NUMBER |
| Martine Watkins for Santa Cruz City Council 2020 | | 1386336 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martine Watkins for Santa Cruz City Council 2020

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 |
|---|------|----|------------------------------------|-------------|
| Sentinel Printers Santa Cruz, CA 95060 | LIT | | | 430.00 |
| Maverick Mailing LLC Santa Cruz, CA 95060 | LIT | | | 964.17 |
| Maverick Mailing LLC Santa Cruz, CA 95060 | LIT | | | 848.73 |
| Facebook Menlo Park, CA 94025 | WEB | | reimbursement to Celeste Gutierrez | 50.41 |
| Maverick Mailing LLC Santa Cruz, CA 95060 | LIT | | | 331.79 |

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

SUBTOTAL \$ 2,625.10

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

Amounts may be rounded
to whole dollars.

| | | |
|--|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page 27 of 28 |
| NAME OF FILER | | I.D. NUMBER |
| Martine Watkins for Santa Cruz City Council 2020 | | 1386336 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martine Watkins for Santa Cruz City Council 2020

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 |
|---|------|----|------------------------------------|-------------|
| Sentinel Printers Santa Cruz, CA 95060 | LIT | | | 320.00 |
| Facebook Menlo Park, CA 94025 | WEB | | reimbursement to Celeste Gutierrez | 60.09 |
| Community Printers Santa Cruz, CA 95062 | LIT | | | 3,072.17 |
| Facebook Menlo Park, CA 94025 | WEB | | reimbursement to Celeste Gutierrez | 50.00 |
| County of Santa Cruz Santa Cruz, CA 95060 | CMP | | voter lists | 50.00 |

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

SUBTOTAL \$ 3,552.26

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

Amounts may be rounded
to whole dollars.

| | | |
|--|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page 28 of 28 |
| NAME OF FILER | | I.D. NUMBER |
| Martine Watkins for Santa Cruz City Council 2020 | | 1386336 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Martine Watkins for Santa Cruz City Council 2020

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 |
|---|------|----|------------------------------------|-------------|
| Facebook Menlo Park, CA 94025 | WEB | | reimbursement to Celeste Gutierrez | 60.07 |
| USPS Santa Cruz, CA 95062 | POS | | | 98.50 |
| PayPal San Jose, CA 95131 | OFC | | fees for 7/1/20 thru 9/19/20 | 396.23 |
| | | | | |
| | | | | |

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

SUBTOTAL \$ 554.80