

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

COVER PAGE - PART 2

**CALIFORNIA
FORM 460**

Page 2 of 14

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Anne Figueroa

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

City Council Member Rancho Santa Margarita

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

Rancho Santa Margarita, CA 92688

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?
 YES 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?
 YES NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER JURISDICTION

SUPPORT
 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

**Campaign Disclosure Statement
Summary Page**

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

**CALIFORNIA
FORM 460**

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Anne Figueroa for RSM City Council 2022

Statement covers period
from 01/01/2024
through 06/30/2024

Page 3 of 14

I.D. NUMBER
1410836

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	<i>Schedule A, Line 3</i> \$ <u>0.00</u>	\$ <u>0.00</u>
2. Loans Received	<i>Schedule B, Line 3</i> \$ <u>0.00</u>	\$ <u>8,394.90</u>
3. SUBTOTAL CASH CONTRIBUTIONS.....	<i>Add Lines 1 + 2</i> \$ <u>0.00</u>	\$ <u>8,394.90</u>
4. Nonmonetary Contributions	<i>Schedule C, Line 3</i> \$ <u>0.00</u>	\$ <u>0.00</u>
5. TOTAL CONTRIBUTIONS RECEIVED.....	<i>Add Lines 3 + 4</i> \$ <u>0.00</u>	\$ <u>8,394.90</u>

Expenditures Made

6. Payments Made	<i>Schedule E, Line 4</i> \$ <u>120.00</u>	\$ <u>120.00</u>
7. Loans Made	<i>Schedule H, Line 3</i> \$ <u>0.00</u>	\$ <u>0.00</u>
8. SUBTOTAL CASH PAYMENTS.....	<i>Add Lines 6 + 7</i> \$ <u>120.00</u>	\$ <u>120.00</u>
9. Accrued Expenses (Unpaid Bills)	<i>Schedule F, Line 3</i> \$ <u>0.00</u>	\$ <u>0.00</u>
10. Nonmonetary Adjustment	<i>Schedule C, Line 3</i> \$ <u>0.00</u>	\$ <u>0.00</u>
11. TOTAL EXPENDITURES MADE.....	<i>Add Lines 8 + 9 + 10</i> \$ <u>120.00</u>	\$ <u>120.00</u>

Current Cash Statement

12. Beginning Cash Balance	<i>Previous Summary Page, Line 16</i> \$ <u>4,983.82</u>
13. Cash Receipts.....	<i>Column A, Line 3 above</i> \$ <u>0.00</u>
14. Miscellaneous Increases to Cash	<i>Schedule I, Line 4</i> \$ <u>0.00</u>
15. Cash Payments	<i>Column A, Line 8 above</i> \$ <u>120.00</u>
16. ENDING CASH BALANCE	<i>Add Lines 12 + 13 + 14, then subtract Line 15</i> \$ <u>4,863.82</u>

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

17. LOAN GUARANTEES RECEIVED.....	<i>Schedule B, Line 2</i> \$ <u>0.00</u>
-----------------------------------	--

Cash Equivalents and Outstanding Debts

18. Cash Equivalents.....	See instructions on reverse	\$ <u>0.00</u>
19. Outstanding Debts	<i>Add Line 2 + Line 9 in Column B above</i>	\$ <u>8,394.90</u>

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).

**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	\$ <u>0.00</u>	\$ <u>0.00</u>
21. Expenditures Made	\$ <u>0.00</u>	\$ <u>0.00</u>

**Expenditures Limit Summary for State
Candidates**

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

Date of Election (mm/dd/yy)	Total to Date
	\$ <u> </u>

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

Schedule A
Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

CALIFORNIA
FORM
460

Statement covers period

from 01/01/2024

through 06/30/2024

Page 4 of 14

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Anne Figueroa for RSM City Council 2022

ID. NUMBER

1410836

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF 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)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				

Schedule A Summary

1. Amount received this period - itemized monetary contributions.
(Include all Schedule A subtotals.) ----- \$ 0.00
2. Amount received this period - unitemized monetary contributions of less than \$100 ----- \$ 0.00
3. Total monetary contributions received this period.
(add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ----- \$ 0.00

* 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

SUBTOTAL \$

Schedule B - Part 1
Loans Received

Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 1

**CALIFORNIA
FORM 460**

Page **5** of **14**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Anne Figueroa for RSM City Council 2022

I.D. NUMBER

1410836

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD		(b) AMOUNT RECEIVED THIS PERIOD		(c) AMOUNT PAID OR FORGIVEN THIS PERIOD **		(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD		(e) INTEREST PAID THIS PERIOD		(f) ORIGINAL AMOUNT OF LOAN		(g) CUMULATIVE CONTRIBUTIONS TO DATE	
		NAME	POSITION	AMOUNT	AMOUNT	PAID	FORGIVEN	AMOUNT	DATE DUE	AMOUNT	DATE DUE	AMOUNT	DATE DUE	AMOUNT	DATE DUE
Anne Figueroa [REDACTED] Rancho Santa Margarita, CA 92688	Assemblymember Sanchez District Director	\$ 1,950.00	\$ 0.00	<input type="checkbox"/> PAID \$ 0.00	<input type="checkbox"/> FORGIVEN \$ 0.00	\$ 1,950.00	12/31/2026	0.00	0.00	\$ 1,950.00	01/01/2021	\$ 1,950.00	DATE INCURRED	CALENDAR YEAR \$ 0.00 PER ELECTION** 8,394.90 G-2022	
* <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC															
Anne Figueroa [REDACTED] Rancho Santa Margarita, CA 92688	Assemblymember Sanchez District Director	\$ 1,000.00	\$ 0.00	<input type="checkbox"/> PAID \$ 0.00	<input type="checkbox"/> FORGIVEN \$ 0.00	\$ 1,000.00	12/31/2026	0.00	0.00	\$ 1,000.00	07/27/2021	\$ 1,000.00	DATE INCURRED	CALENDAR YEAR \$ 0.00 PER ELECTION** 8,394.90 G-2022	
* <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC															
Anne Figueroa [REDACTED] Rancho Santa Margarita, CA 92688	Assemblymember Sanchez District Director	\$ 5,444.90	\$ 0.00	<input checked="" type="checkbox"/> PAID \$ 55.10	<input type="checkbox"/> FORGIVEN \$ 0.00	\$ 5,444.90	12/31/2026	0.00	0.00	\$ 5,500.00	11/11/2022	\$ 5,500.00	DATE INCURRED	CALENDAR YEAR \$ 0.00 PER ELECTION** 8,394.90 G-2022	
* <input checked="" 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															

SUBTOTALS \$ 0.00 \$ 55.10 \$ 8,394.90 \$ 0.00

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.

(Enter (e) on
Schedule E, Line 3)

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

Schedule B - Part 1
Loans Received

Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 1

CALIFORNIA
FORM **460**

Page 6 of 14

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Anne Figueroa for RSM City Council 2022

I.D. NUMBER

1410836

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD **	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE	0.00 % RATE \$ _____	\$ _____ DATE INCURRED	CALENDAR YEAR \$ 0.00 PER ELECTION**

* IND COM OTH PTY SCC

Schedule B Summary

1. Loans received this period - - - - - \$ 0.00
(Total Column (b) plus unitemized loans of less than \$100.)

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

3. Net change this period. (Subtract Line 2 from Line 1.) - - - - - NET \$ 0.00
Enter the net here and on the Summary Page, Column A, Line 2
(May be a negative number)

* 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

SUBTOTALS \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.

(Enter (e) on
Schedule E, Line 3)

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

Schedule B - Part 2
Loan Guarantors

Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 2

CALIFORNIA FORM 460

Statement covers period
from 01/01/2024
through 06/30/2024

Page 7 of 14

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Anne Figueroa for RSM City Council 2022

I.D. NUMBER
1410836

FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER DATE		CALENDAR DATE \$ PER ELECTION (IF REQUIRED)	

SUBTOTAL \$

Enter on Summary
Page, Line 17 only.



Schedule C
Nonmonetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE C

CALIFORNIA FORM 460

Statement covers period
from 01/01/2024
through 06/30/2024

Page 8 of 14

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Anne Figueroa for RSM City Council 2022

I.D. NUMBER

1410836

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE*	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
		<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					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Schedule C Summary

1. Amount received this period - itemized nonmonetary contributions.

(Include all Schedule C subtotals.) ----- \$ 0.00

2. Amount received this period - unitemized nonmonetary contributions of less than \$100

----- \$ 0.00

3. Total nonmonetary contributions received this period.

(add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)

----- **TOTAL \$ 0.00**

* 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

SUBTOTAL \$

Schedule D
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures, and Committees

Amounts may be rounded
to whole dollars.

Statement covers period
from 01/01/2024

through 06/30/2024

SCHEDULE D

CALIFORNIA
FORM **460**

Page 9 of 14

NAME OF FILER

Anne Figueroa for RSM City Council 2022

I.D. NUMBER
1410836

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				

Support Oppose

SCHEDULE D SUMMARY

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) - - - - - \$ 0.00
2. Unitemized contributions and independent expenditures made this period of under \$100 - - - - - \$ 0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) - - - - - **TOTAL \$ 0.00**

SUBTOTAL \$

Schedule E
Payments Made

Amounts may be rounded
to whole dollars.

SCHEDULE E

CALIFORNIA
FORM **460**

Statement covers period
from 01/01/2024
through 06/30/2024

Page 10 of 14

I.D. NUMBER
1410836

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Anne Figueroa for RSM City Council 2022

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

CMP campaign paraphernalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure supporting/opposing others (explain)*

LEG legal defense

LIT campaign literature and mailings

MBR member communications

MTG meetings and appearances

OFC office expenses

PET petition circulating

PHO phone banks

POL polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

PRT print ads

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Integrated Solutions: Political [REDACTED] San Diego, CA 92116	OFC			120.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	-----	\$ 120.00
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 \$ 120.00

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

SUBTOTAL \$ 120.00

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

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

Amounts may be rounded
to whole dollars.

SCHEDULE F

**CALIFORNIA
FORM 460**

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Anne Figueroa for RSM City Council 2022

Statement covers period
from 01/01/2024
through 06/30/2024

Page 11 of 14

I.D. NUMBER

1410836

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

CMP campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)*
CVC civic donations
FIL candidate filing/ballot fees
FND fundraising events
IND independent expenditure supporting/opposing others (explain)*
LEG legal defense
LIT campaign literature and mailings

MBR member communications
MTG meetings and appearances
OFC office expenses
PET petition circulating
PHO phone banks
POL polling and survey research
POS postage, delivery and messenger services
PRO professional services (legal, accounting)
PRT print ads

RAD radio airtime and production costs
RFD returned contributions
SAL campaign workers' salaries
TEL tv. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF 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

SCHEDULE F SUMMARY

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) **INCURRED TOTALS \$** 0.00
2. 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 \$** 0.00
3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** 0.00

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

SUBTOTALS \$ \$ \$ \$

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

Amounts may be rounded to whole dollars.

SCHEDULE G

CALIFORNIA FORM 460

Statement covers period
 from 01/01/2024
 through 06/30/2024

Page 12 of 14

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Anne Figueroa for RSM City Council 2022

NAME OF AGENT OR INDEPENDENT CONTRACTOR

I.D. NUMBER

1410836

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

CMP campaign paraphernalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure supporting/opposing others (explain)*

LEG legal defense

LIT campaign literature and mailings

MBR member communications

MTG meetings and appearances

OFC office expenses

PET petition circulating

PHO phone banks

POL polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

PRT print ads

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID

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

TOTAL * \$

** 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.

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

Schedule H
Loans Made to Others*

Amounts may be rounded
to whole dollars.

SCHEDULE H

CALIFORNIA
FORM **460**

Page 13 of 14

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Anne Figueroa for RSM City Council 2022

Statement covers period
from 01/01/2024
through 06/30/2024

I.D. NUMBER
1410836

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD *	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
		\$ _____	\$ _____	<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	\$ _____ DATE DUE	_____ % RATE	\$ _____ DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION**

SUBTOTALS \$ \$ \$ \$

*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E

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

Schedule I
Miscellaneous Increases to Cash

Amounts may be rounded
to whole dollars.

SCHEDULE I

CALIFORNIA
FORM **460**

Statement covers period

from 01/01/2024

through 06/30/2024

Page 14 of 14

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Anne Figueroa for RSM City Council 2022

I.D. NUMBER

1410836

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Schedule I Summary

1. Itemized increases to cash this period. ----- \$ 0.00
2. Unitemized increases to cash of under \$100 this period. ----- \$ 0.00
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) ----- \$ 0.00
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) ----- \$ 0.00

TOTAL \$ 0.00

SUBTOTAL \$