



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

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA FORM **460**

2 / 5

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE  
Anne Figueroa

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

Sought: City Council Member  
City Rancho Santa Margarita 2  
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP  
[REDACTED] 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 to make expenditures on behalf of your candidacy.

COMMITTEE NAME	I.D. NUMBER
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NAME OF TREASURER	CONTROLLED COMMITTEE?
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COMMITTEE ADDRESS	STREET ADDRESS (NO P.O.BOX)
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CITY	STATE	ZIP CODE	AREA CODE/PHONE
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COMMITTEE NAME	I.D. NUMBER
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NAME OF TREASURER	CONTROLLED COMMITTEE?
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COMMITTEE ADDRESS	STREET ADDRESS (NO P.O.BOX)
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CITY	STATE	ZIP CODE	AREA CODE/PHONE
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**6. Ballot Measure Committee**

NAME OF BALLOT MEASURE

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

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPOSER

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

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

**Campaign Disclosure Statement  
Summary Page**

SUMMARY PAGE

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

Statement covers period from <u>7/1/2021</u>	CALIFORNIA FORM <b>460</b>
through <u>12/31/2021</u>	3 / 5
	I.D. NUMBER 1410836

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Anne Figueroa for RSM City Council 2022

**Contributions Received**

		<b>Column A</b> TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	<b>Column B</b> CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions .....	Schedule A, Line 3	\$ 0.00	\$ 0.00
2. Loans Received .....	Schedule B, Line 7	\$ 0.00	\$ 8394.90
3. SUBTOTAL CASH CONTRIBUTIONS.....	Add Lines 1 + 2	\$ 0.00	\$ 8394.90
4. Nonmonetary Contributions .....	Schedule C, Line 3	\$ 0.00	\$ 0.00
5. TOTAL CONTRIBUTIONS RECEIVED.....	Add Lines 3 + 4	\$ 0.00	\$ 8394.90

**Expenditures Made**

6. Payments Made .....	Schedule E, Line 4	\$ 20.00	\$ 140.00
7. Loans Made .....	Schedule H, Line 7	\$ 0.00	\$ 0.00
8. SUBTOTAL CASH PAYMENTS.....	Add Lines 6 + 7	\$ 20.00	\$ 140.00
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	\$ 20.00	\$ 140.00

**Current Cash Statement**

12. Beginning Cash Balance .....	Previous Summary Page, Line 16	\$ 4863.82	To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).
13. Cash Receipts .....	Column A, Line 3 above	\$ 0.00	
14. Miscellaneous Increases to Cash .....	Schedule I, Line 4	\$ 0.00	
15. Cash Payments .....	Column A, Line 8 above	\$ 20.00	
16. ENDING CASH BALANCE.....	Add Lines 12 + 13 + 14, then subtract Line 15	\$ 4843.82	

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

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

18. Cash Equivalents .....	See instructions on reverse	\$ 0.00
19. Outstanding Debts .....	Add Line 2 + Line 9 in Column B above	\$ 8394.90

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

	1/1 through 6/30	7/1 to Date
20. Contribution Received	\$ 0.00	\$ 0.00
21. Expenditures Made	\$ 0.00	\$ 0.00

**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
	\$
	\$

\*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

**Schedule B – Part 1**  
**Loans Received**

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

SCHEDULE B - PART 1

Statement covers period from <u>7/1/2024</u>	CALIFORNIA FORM <b>460</b>
through <u>12/31/2024</u>	4 / 5
I.D. NUMBER  <u>1410836</u>	

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NAME OF FILER

Anne Figueroa for RSM City Council 2022

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN 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
Anne Figueroa [REDACTED]	Assemblymember Sanchez			<input type="checkbox"/> PAID \$ 0.00	\$ 1950.00	0.00 % RATE	\$ 1950.00	CALENDAR YEAR \$ 0.00
Rancho Santa Margarita CA 92688 ID: <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	District Director	\$ 1950.00	\$ 0.00	<input type="checkbox"/> FORGIVEN \$ 0.00	12/31/2026 DATE DUE	\$ 0.00 DATE INCURRED	01/01/2021	PER ELECTION* 8394.90 G 22
Anne Figueroa [REDACTED]	Assemblymember Sanchez			<input type="checkbox"/> PAID \$ 0.00	\$ 1000.00	0.00 % RATE	\$ 1000.00	CALENDAR YEAR \$ 0.00
Rancho Santa Margarita CA 92688 ID: <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	District Director	\$ 1000.00	\$ 0.00	<input type="checkbox"/> FORGIVEN \$ 0.00	12/31/2026 DATE DUE	\$ 0.00 DATE INCURRED	07/27/2021	PER ELECTION* 8394.90 G 22
Anne Figueroa [REDACTED]	Assemblymember Sanchez			<input type="checkbox"/> PAID \$ 0.00	\$ 5444.90	0.00 % RATE	\$ 5500.00	CALENDAR YEAR \$ 0.00
Rancho Santa Margarita CA 92688 ID: <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	District Director	\$ 5444.90	\$ 0.00	<input type="checkbox"/> FORGIVEN \$ 0.00	12/31/2026 DATE DUE	\$ 0.00 DATE INCURRED	11/11/2022	PER ELECTION* 8394.90 G 22
<b>SUBTOTALS</b>		\$ 0.00	\$ 0.00	\$ 8394.90	\$ 0.00			

**Schedule B Summary**

1. Loans received this period. \_\_\_\_\_ \$ 0.00

(Total Column (b) plus unitemized loans less than \$100.)

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

2. Loans paid or forgiven this period \_\_\_\_\_ \$ 0.00

(Total Column (c) plus loans under \$100 paid or forgiven.)

(Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) \_\_\_\_\_ Net \$ 0.00

Enter the net here and on the Summary Page, Column A, Line 2.

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

\*\* If required.

\*Contributor Codes

IND-Individual COM-Recipient Committee (other than PTY or SCC)

OTH-Other

PTY-Political Party

SCC-Small Contributor Committee

FPPC Form 460 (JAN/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC

# Schedule E Payments Made

SCHEDULE E

Type or print in ink.  
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**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

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

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

**SUBTOTAL \$** 0.00

## Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) ..... \$ 0.00
2. Unitemized payments made this period of under \$100. ..... \$ 20.00
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 \$ 20.00**