#### Recipient Committee Campaign Statement Cover Page

Page Date of election if applicable: Statement covers period AUG 2 1 2023 (Month, Day, Year) For Official Use Only from 01/01/2023 CITY CLERK TRACY 11/08/2022 through 06/30/2023 SEE INSTRUCTIONS ON REVERSE 2. Type of Statement: 1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. Preelection Statement Quarterly Statement Officeholder, Candidate Controlled Committee Primarily Formed Ballot Measure Semi-annual Statement Special Odd-Year Report O State Candidate Election Committee Committee Termination Statement O Recall Controlled (Also file a Form 410 Termination) Sponsored (Also Complete Part 5) Amendment (Explain below) (Also Complete Part 6) General Purpose Committee Registrar of Voter Refund received after 460 termination filed. Primarily Formed Candidate/ Sponsored Officeholder Committee Small Contributor Committee Political Party/Central Committee (Also Complete Part 7) I.D. NUMBER Treasurer(s) 3. Committee Information 1446883 NAME OF TREASURER COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Eleassia Davis Eleassia Davis for Mayor 2022 MAILING ADDRESS ZIP CODE AREA CODE/PHONE CITY STATE STREET ADDRESS (NO P.O. BOX) 95377 CA Tracy AREA CODE/PHONE NAME OF ASSISTANT TREASURER, IF ANY STATE ZIP CODE CITY 95377 Tracy MAILING ADDRESS MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX ZIP CODE AREA CODE/PHONE CITY AREA CODE/PHONE ZIP CODE CITY OPTIONAL: FAX / E-MAIL ADDRESS 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 August 20, 2023 Executed on. Executed on Executed on. Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on -Signature of Controlling Officeholder, Candidate, State Measure Proponent

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

COVER PAGE

**CALIFORNIA** 

**FORM** 

# Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period CALIFORNIA ACO

Summary Page	from 10/23/2022	FORM TOU
SEE INSTRUCTIONS ON REVERSE	through	Page of
NAME OF FILER		I.D. NUMBER
Eleassia Davis for Mayor of Tracy 2022		1446883

Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions       Schedule A, Line 3         2. Loans Received       Schedule B, Line 3         3. SUBTOTAL CASH CONTRIBUTIONS       Add Lines 1 + 2         4. Nonmonetary Contributions       Schedule C, Line 3         5. TOTAL CONTRIBUTIONS RECEIVED       Add Lines 3 + 4	\$ 0	\$ \frac{0}{0} \\ \$ \fra	1/1 through 6/30 7/1 to Date  20. Contributions Received \$ \$  21. Expenditures Made \$ \$
Expenditures Made  6. Payments Made	\$\frac{0}{714.36} 	\$\frac{714.36}{5.00}\$ \$\frac{714.36}{	Expenditure Limit Summary for State Candidates  22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)  Date of Election (mm/dd/yy)  \$
Current Cash Statement  12. Beginning Cash Balance	0 714.36 714.36 \$ 0 \$	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.  FPPC Form 460 (Jan/2016))
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	· \$		FPPC Form 460 (Jan/2016))  FPPC Advice: advice@fppc.ca.gov (866/275-3772)  www.fppc.ca.gov

Schedule E Payments Made	Amounts may be rounded to whole dollars.	Statement covers period from 01/01/2023	FORM 46
DESTRUCTIONS ON DEVERORS		through <u>06/30/2023</u>	Page

SEE INSTRUCTIONS ON REVERSE NAME OF FILER	I.D. NUMBER	
Eleassia Davis	1446883	
CODES: If one of the following codes accurately describes the payment, you 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 commenders of meetings and office expensions petition circular phone banks polling and supposing others (explain)*  POS postage, deliving professional supporting of professional suppositions of professional sup	radio airtime and production costs returned contributions s SAL campaign workers' salaries ting TEL t.v. or cable airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production costs radio airtime and production costs campaign workers' candidate travel, lodging, and meals	sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT AMOU	NT PAID
Hector John Cardoza	CNS Campaign Consultant Fees \$714.36	
* Payments that are contributions or independent expenditures must also be summarized on Sche	dule D. SUBTOTAL \$ 714.36	
Schedule E Summary	714.36	
1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	
Unitemized payments made this period of under \$100	4 Calvers (a) )	
<ol> <li>Total interest paid this period on loans. (Enter amount from Schedule B, Par</li> <li>Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on</li> </ol>	the Summary Page, Column A, Line 6.)	

FPPC Form 460 (Jan/2016))

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SCHEDULE E

Schedule I Miscellaneous	Increases	to	Cash
Wilscellaneous	increases	ıo	Casii

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

	SCHEDULE
Statement covers period	CALIFORNIA 460
from 01/01/2023	FORM TOU
through06/30/2023	Page of
	I.D. NUMBER
	1446983

COLEDINE

Eleassia Davis	3		1440003
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
02/09/2023	San Joaquin County Registrar of Voters 44 North San Joaquin Street Stockton, CA 95201	Candidate's Statement of Qualifications Refund	\$714.36
Attach add	ditional information on appropriately labeled continuation sheets.	SUBTOTA	L\$ 714.36

Schedule I Summary 2. Unitemized increases to cash of under \$100 this period. ...... $\$ \frac{0}{0}$ 3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) ......\$ \_\_\_\_\_\$

4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the 

FPPC Form 460 (Jan/2016))

Decimient Committee					COVER PAGE
Recipient Committee Campaign Statement Cover Page			Date Stamp	CALIFO	
Cover rage			RECEIVE	0	~
	Statement covers period	Date of election if applicable:	CITY CLERK'S	OFFIPage 1	of
	from 10/23/2022	(Month, Day, Year)	9000	For	Official Use Only
	from 10/23/2022		2023 JAN 31 PM	4 3: 56	
SEE INSTRUCTIONS ON REVERSE	through 12/31/2022	11/08/2022	CITY OF TR		
1. Type of Recipient Committee: All Committees - Cor	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:	* 17 M.L. 1 . L	7.8	
State Candidate Election Committee Recall (Also Complete Part 5)  General Purpose Committee Sponsored Small Contributor Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored Also Complete Part 6)  Primarily Formed Candidate/ Officeholder Committee Also Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te Amendment (Explain be Treasurer has been update	ermination) elow)	Quarterly Stateme Special Odd-Year	
3 Committee Information	D. NUMBER	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)	446883	NAME OF TREASURER			
Eleassia Davis for Mayor 2022		Eleassia Davis			
Dicussia Davis for transfer 2022		MAILING ADDRESS			
STREET ADDRESS (NO P.O. BOX)		CITY	STATE	ZIP CODE	AREA CODE/PHONE
		Tracy	CA	95377	
ZIP CO	DE AREA CODE/PHONE	NAME OF ASSISTANT TREASUR			
Tracy CA 9537	7				
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX		MAILING ADDRESS			
CITY STATE ZIP CO	DE AREA CODE/PHONE	CITY	STATE 2	ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS	14	OPTIONAL: FAX / E-MAIL ADDRE	ESS		
4. Verification I have used all reasonable diligence in preparing and reviewir certify under penalty of perjury under the laws of the State of			herein and in the attache	ed schedules is true	e and complete. I
Executed on January 30, 2023	Ву				
Executed on	By Signature of Control	olling Officeholder, Candidate, State Measure Pro	oponent or Responsible Officer of	Sponsor	
Executed on	ByS	ignature of Controlling Officeholder, Candidate, S	State Measure Proponent		

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on \_\_\_\_\_

Date

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**COVER PAGE** 

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

COVER PA	AGE - PART 2
CALIFORNIA FORM	460
	. 8
Page (	of

. Officeholder or Candidate Controlled Com	mittee			6.	Primarily Formed Ballo	t Measure (	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE		1.410			NAME OF BALLOT MEASURE		17131		
Eleassia Davis									
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIS	STRICT NUMBER	IF APPLIC	ABLE)		BALLOT NO. OR LETTER	JURISDICTIO	ON		SUPPORT
Mayor of Tracy									OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE CA	ZIP 95377		Identify the controlling office	eholder, candi	date, or state	measure prop	onent, if any.
	Tracy	CA	93311		NAME OF OFFICEHOLDER, CA	NDIDATE, OR P	ROPONENT		
Related Committees Not Included in this S not included in this statement that are controlled by you contributions or make expenditures on behalf of your ca	or are primarily andidacy.	formed to	nmittees receive		OFFICE SOUGHT OR HELD			DISTRICT NO.	IF ANY
NAME OF TREASURER	CONTROLL		ITTEE?	7.	Primarily Formed Cano officeholder(s) or candidate(s)	didate/Offic ) for which this	eholder Co committee is	ommittee Lis primarily forme	st names of d.
	☐ YES	□ NC	)		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOL	JGHT OR HELD	
COMMITTEE ADDRESS STREET ADDRESS (NO P.	O. BOX)				Eleassia Davis		Mayor		SUPPORT OPPOSE
CITY STATE ZI	P CODE	AREA CO	DE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBEI	R			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER  COMMITTEE ADDRESS STREET ADDRESS (NO P.	CONTROLL  YES	ED COMM			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOL	JGHT OR HELD	☐ SUPPORT ☐ OPPOSE
	P CODE	AREA CO	DE/PHONE		Atta	ach continuati	on sheets if n	ecessary	

#### Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statement covers from $\frac{10/23/2022}{}$	CALIFORNIA 460
through 12/31/2022	Page _3 of
	I.D. NUMBER
	1446883

Eleassia Davis for Mayor of Tracy 2022			1446883
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions	\$\frac{3054.49}{-\frac{3054.49}{500.00}}\$	\$\frac{34839.28}{-\frac{34839.28}{2950.00}}\$ \$\frac{35339.28}{\frac{35339.28}{35339.28}}\$	1/1 through 6/30 7/1 to Date  20. Contributions Received \$  21. Expenditures Made \$ \$
Expenditures Made  6. Payments Made	\$\frac{7,325.61}{-\frac{7325.61}{-7325.6	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Expenditure Limit Summary for State Candidates  22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)  Date of Election (mm/dd/yy)
Current Cash Statement  12. Beginning Cash Balance Previous Summary Page, Line 16  13. Cash Receipts Column A, Line 3 above  14. Miscellaneous Increases to Cash Schedule I, Line 4  15. Cash Payments Column A, Line 8 above  16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15  If this is a termination statement, Line 16 must be zero.  17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$\frac{4271.12}{3054.49} -\frac{7325.61}{0} \$\frac{-}{5}	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	*Amounts in this section may be different from amounts reported in Column B.
Cash Equivalents and Outstanding Debts  18. Cash Equivalents See instructions on reverse  19. Outstanding Debts Add Line 2 + Line 9 in Column B above		from Lines 2, 7, and 9 (if any).	FPPC Form 460 (Jan/2016)) FPPC Advice: advice@fppc.ca.gov (866/275-3772)

#### Schedule A Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A

www.fppc.ca.gov

CALIFORNIA 460

Statement covers period

Monetary				from 10/23/2022		FC	ORM 400
SEE INSTRUCTI	ONS ON REVERSE			through	)22	Page.	4ofS
NAME OF FILER Eleassia Davi	is for Mayor of Tracy 2022					1.D. NUI 1446883	
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 CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
10/24/2022	Kauai's Marketplace Online Only	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		100.00	100.00		
10/26/2022	Jennifer Speer	☑ IND □ COM □ OTH □ PTY □ SCC	Accenture/Manager	100.00	100.00		
10/27/2022	Annie Tatarian Tracy, CA. 953/6	☑ IND □ COM □ OTH □ PTY □ SCC	Realtor	100.00	100.00		
10/31/22	Frank Cameron Tracy, CA. 95377	☑ IND □ COM □ OTH □ PTY □ SCC	Retired	100.00	100/00		
10/31/22	Reliance Gas Investments 2450 Grantline Road Tracy, CA. 95376	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		200.00	200.00		
			SUBTOTAL	\$ 2207.49			
1. Amount re (Include a	A Summary eceived this period – itemized monetary contributions Il Schedule A subtotals.)		\$	07.49 7.00	IND COM	(other to Other ( Politica	al ent Committee than PTY or SCC) e.g., business entity)
3. Total mone (Add Lines	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Co	olumn A, Line 1	1.) <b>TOTAL</b> \$ 30	54.49	FPPC Advice: advi		C Form 460 (Jan/2016)) ca.gov (866/275-3772)

## **Schedule A (Continuation Sheet)**

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Monetary (	Contributions Received	to whole d		from <u>10/23/2022</u>	•	CALIF FO	ORNIA 460
				through 12/31/202	22	Page _5	5 of8
NAME OF FILER						I.D. NUN	
Eleassia Davis	s for Mayor 2022					144688	3
DATE	FULL NAME, STREET ADDRESS AND ZIP CODE OF	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	AMOUNT RECEIVED THIS	CUMULATIVE T	1	PER ELECTION TO DATE

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)
10/31/2022	Rickman for Supervisor 2024 P.O. Box 130 Hilmar, CA	☐ IND  ☑ COM ☐ OTH ☐ PTY ☐ SCC		500.00	500.00	
10/31/2022	Lesa Ballier-Melon P.O. Box 1053 Tracy, CA. 95376-1053	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self-Employed/ Caregiver	1,000.00	2,000.00	
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		,		
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
			SUBTOTAL	\$		

\*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

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#### Schedule C Nonmonetary Contributions Received

Amounts may be rounded to whole dollars.

Statement covers period from 10/23/22	CALIFORNIA 460
through 12/31/22	Page of
	I.D. NUMBER
	1//6883

SEE INSTRUC	CTIONS ON REVERSE				thro	ough <u>12/31/22</u>		Page 6	of <u>\J</u>
IAME OF FILI								I.D. NUME 1446883	
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)	DESCRIPTION GOODS OR SERV		AMOUNT/ FAIR MARKET VALUE	CUMULA <sup>-</sup> DA <sup>-</sup> CALENDA (JAN 1 - I	TE IR YEAR	PER ELECTION TO DATE (IF REQUIRED)
10/25/22	California Window Tint 493 E. 6th Street Tracy CA	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		Taco Fundraise	er	500.00	500.00		
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC							
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC						77	
		☐ IND☐ COM☐ OTH☐ PTY☐ SCC							
Attach add	ditional information on appropriately labeled	continuation	sheets.	SUBTO	OTAL:	\$			
I. Amount (Include	e C Summary received this period – itemized nonmoneta all Schedule C subtotals.)					500.00	IND - COM	(other the	
Total no	received this period – unitemized nonmonents  nmonetary contributions received this periodes 1 and 2. Enter here and on the Summar	d					PTY	- Political F	

FPPC Form 460 (Jan/2016))
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www.fppc.ca.gov

Sched	ule	E
<b>Payme</b>	nts	Made

Amounts may be rounded to whole dollars.

	SCHEDULE E
Statement covers period	CALIFORNIA 460
from 10/23/22	FORM 400
through <u>12/31/22</u>	Page 7 of \$
	I.D. NUMBER
	1446883

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LEG legal defense

Eleassia Davis for Mayor of Tracy 2022

campaign literature and mailings

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

PRT print ads

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

PRO professional services (legal, accounting)

VOT voter registration

WEB information technology costs (internet, e-mail)

	NAME AND ADDRESS OF PAYEE F COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE C	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Facebook 1 Hacker Way Menlo Park, CA 94025			Facebook Sponsored Ads	1901.86
99 Cents Only Store 2888 W Grant Line Rd Tracy, CA. 95376		FND	Fundraising Event Supplies	179.89
Safeway Stores 1801 W. 11th Street Tracy CA 95376		FND	Fundraising Event Supplies	172.42

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

**SUBTOTAL \$** 5,149.88

5140 88

#### **Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 0
2. Unitemized payments made this period of under \$100	\$ <u> </u>
3. Total interest paid this period on loans. (Enter amount from Schedule B. Part 1. Column (e).)	\$ 

FPPC Form 460 (Jan/2016))

FPPC Advice: advice@fppc.ca.gov (866/275-3772)

SCHEDU	JLE E	(CONT.)
OULLE	<i></i>	(00111.)

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

Amounts may be rounded to whole dollars.

	OOMEDOLL = (OOM
Statement covers period	CALIFORNIA / CO
from10/23/22	FORM 400
through 12/31/22	Page of
	I.D. NUMBER
	1446883

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Eleassia Davis for Mayor of Tracy 2022

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

RAD radio airtime and production costs MBR member communications CMP campaign paraphernalia/misc. RFD returned contributions MTG meetings and appearances CNS campaign consultants SAL campaign workers' salaries OFC office expenses CTB contribution (explain nonmonetary)\* TEL t.v. or cable airtime and production costs PET petition circulating CVC civic donations TRC candidate travel, lodging, and meals PHO phone banks FIL candidate filing/ballot fees

FIL candidate filing/ballot fees
FIND fundraising events
FIND independent expenditure supporting/opposing others (explain)\*
FIND independent expenditure supporting/opposi

LEG legal defense PRO professional services (legal, accounting) VOT voter registration

T campaign literature and mailings PRT print ads

WEB information technology costs (internet, e-mail)

LTT Campaign illerature and mainings	110 pintage		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Chrystena Rockett Tracy, CA	СМР	Reimbursement for campaign paraphanalia; fundraiser events expenses	1445.40
Tracy Press 95 W 11th St #203 Tracy, CA. 95376	PRT	Print Ad	230.00
Gravis Marketing Winter Springs, FL		Robo Calls and Text Messaging Services	2135.00
Walmart Superstore 3010 W Grant Line Rd Tracy CA 95304	FND	Fundraiser Supplies	383.21
Hector John Cardoza Tracy, CA 93370	CNS	Campaign Consultant Fees	728.70

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

**SUBTOTAL \$** 5,149.99

#### Recipient Committee Campaign Statement Cover Page

Cover rage		₹ Y	SECEME		1 0
	Statement covers period from 09/25/2022	Date of election if applicable: (Month, Day, Year)	OCT 27 202	2 + ag	e 1 of 8 For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through <u>10/22/2022</u>	November 8, 2022	TRAC	NA CONTRACTOR OF THE PARTY OF T	
1. Type of Recipient Committee: All Committees - Co	nplete Parts 1, 2, 3, and 4.	2. Type of Statement:	33450		
State Candidate Election Committee Recall (Also Complete Part 5)  General Purpose Committee Sponsored Small Contributor Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored Uso Complete Part 6  Primarily Formed Candidate/ Officeholder Committee Uso Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination Amendment (Explain below)	))	Quarterly St Special Odd	tatement I-Year Report
3. Committee Information	. NUMBER 446883	Treasurer(s)	=		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)		NAME OF TREASURER			
Eleassia Davis For Mayor Of Tracy 2022		Christina M. Gonzaga MAILING ADDRESS			
STREET ADDRESS (NO P.O. BOX)		CITY	STATE	ZIP CODE	AREA CODE/PHONE
		Tracy	CA	95377	
CITY STATE ZIP CO	DE AREA CODE/PHONE	NAME OF ASSISTANT TREASURER, IF ANY			
Tracy CA 9537 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX		MAILING ADDRESS			<u> </u>
CITY STATE ZIP CO	DE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRESS			
I have used all reasonable diligence in preparing and reviewin certify under penalty of perjury under the laws of the State of   Executed on   10/26/2022  Date  Executed on Date  Executed on Date	•		nd in the attach	ned schedules	is true and complete.
Executed onDate	БУ	Signature of Controlling Officeholder, Candidate, State Measur	e Proponent		
Executed on	Ву	Signature of Controlling Officeholder, Candidate, State Measur	e Proponent		PPC Form 460 (Jan/2016))

COVER PAGE

CALIFORNIA 460

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

5.

COVER PAGE - PART 2	4
CALIFORNIA 460 FORM	
Page _2 of _8	

Officeholder or Candidate Controlled Comm	ittee			6.	Primarily Formed Ballo	t Measure C	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE					NAME OF BALLOT MEASURE				
Eleassia Davis									
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	RICT NUMBER I	F APPLICA	ABLE)		BALLOT NO. OR LETTER	JURISDICTIO	)N	F	SUPPORT
Mayor (Current Councilmember) Tracy, CA									
RESIDENTIAL BOOKE OF A BOKE OF A CONTROL OF	ITY Tracy	STATE	ZIP 95377		Identify the controlling office	eholder, candid	iate, or state r	measure prop	onent, if any.
	Tracy				NAME OF OFFICEHOLDER, CA	NDIDATE, OR P	ROPONENT		
Related Committees Not Included in this Sta not included in this statement that are controlled by you or contributions or make expenditures on behalf of your cand	r are primarily f	st any con formed to	nmittees receive		OFFICE SOUGHT OR HELD			DISTRICT NO.	IF ANY
COMMITTEE NAME	I.D. NUMBER		TTEEO	7.	. Primarily Formed Cand	didate/Offic	eholder Co	mmittee Lis	st names of
NAME OF TREASURER	CONTROLLE	D COMMI			officeholder(s) or candidate(s)				a.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.					NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	IGHT OR HELD	✓ SUPPORT
OOM/WITTEE/TODICEO	,				Eleassia Davis		Mayor		OPPOSE
CITY STATE ZIP (	CODE	AREA CO	DE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	IGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER	₹			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLE	ED COMM			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.  CITY STATE ZIP	CODE	AREA CO	DDE/PHONE		Att	ach continuati	on sheets if n	ecessary	

## Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

Statement covers period from  $\frac{09/25/2022}{\text{through}}$   $\frac{10/22/2022}{\text{california}}$   $\frac{\text{CALIFORNIA}}{\text{FORM}}$   $\frac{460}{\text{FORM}}$   $\frac{8}{\text{I.D. NUMBER}}$ 

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1446883 Eleassia Davis For Mayor of Tracy 2022 Calendar Year Summary for Candidates Column B Column A CALENDAR YEAR Running in Both the State Primary and Contributions Received TOTAL THIS PERIOD TOTAL TO DATE (FROM ATTACHED SCHEDULES) **General Elections** 31,784.79 1. Monetary Contributions...... Schedule A, Line 3 1/1 through 6/30 7/1 to Date 2. Loans Received ...... Schedule B, Line 3 20. Contributions 31,784.79 2,194.79 SUBTOTAL CASH CONTRIBUTIONS...... Add Lines 1 + 2 \$ Received 2,450.00 0.00 21. Expenditures Nonmonetary Contributions...... Schedule C, Line 3 Made 34,234.79 2,194.79 5. TOTAL CONTRIBUTIONS RECEIVED......Add Lines 3 + 4 **Expenditure Limit Summary for State Expenditures Made** 28,012.67 7,816.87 Candidates 6. Payments Made..... Schedule E, Line 4 7. Loans Made..... Schedule H, Line 3 22. Cumulative Expenditures Made\* 28,012.67 7,816.87 (If Subject to Voluntary Expenditure Limit) 8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7 Total to Date 9. Accrued Expenses (Unpaid Bills) ...... Schedule F, Line 3 Date of Election (mm/dd/yy) 2450.00 10. Nonmonetary Adjustment...... Schedule C, Line 3 30,462.67 7,816.87 11. TOTAL EXPENDITURES MADE ...... Add Lines 8 + 9 + 10 **Current Cash Statement** 9,395.00 12. Beginning Cash Balance ...... Previous Summary Page, Line 16 To calculate Column B, 2,194.79 add amounts in Column 13. Cash Receipts ...... Column A, Line 3 above \*Amounts in this section may be different from amounts A to the corresponding 500.00 14. Miscellaneous Increases to Cash ...... Schedule I, Line 4 amounts from Column B reported in Column B. of your last report. Some 7,816,87 15. Cash Payments ...... Column A, Line 8 above amounts in Column A may 4,271.12 be negative figures that 16. ENDING CASH BALANCE ......Add Lines 12 + 13 + 14, then subtract Line 15 should be subtracted from previous period amounts. If If this is a termination statement, Line 16 must be zero. this is the first report being filed for this calendar year, 17. LOAN GUARANTEES RECEIVED...... Schedule B. Part 2 \$ \_\_\_\_\_ only carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). 18. Cash Equivalents ...... See instructions on reverse \$ \_\_ FPPC Form 460 (Jan/2016)) 19. Outstanding Debts ...... Add Line 2 + Line 9 in Column B above \$ \_ FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

#### Schedule A Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A

www.fppc.ca.gov

Monetary Contributions Received		to	whole dollars.	Statement covers period from 09/25/2022 through 10/22/2022		CALIFORNIA 460 FORM	
NAME OF FILER	ONS ON REVERSE					I.D. NUN	IBER
	is For Mayor of Tracy 2022					1446883	3
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF  CONTRIBUTOR  (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE T CALENDAR \() (JAN. 1 - DEC	/EAR	PER ELECTION TO DATE (IF REQUIRED)
10/05/2022	PI Singh Tracy, CA 95377	IND COM OTH PTY SCC	Dentist	200.00	200.00		
10/15/2022	Belmida Rickman 2 Fracy, CA 95376	IND COM OTH PTY SCC	Retired	50.00	150.00		
10/06/2022	Mattos Equipment Transport 8557 W. Schulte Rd., Tracy, CA 95376	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC	Business	214.44	642.78		
10/10/2022	Lesa Ballier-Mellion racy, CA 95376	IND COM OTH PTY SCC	Self Employed -Caregiver	1000.00	1000.00		
10/14/2022	Carlos Lima Tracy, CA 95377	IND COM OTH PTY	Retired	107.49	107.49		
			SUBTOTAL	\$ 1,571.93			
Amount re (Include a	A Summary eceived this period – itemized monetary contribution all Schedule A subtotals.)		\$	,099.20 5.59	IND CO OTI PT'	other ( d – Other ( of – Politica	ent Committee than PTY or SCC) e.g., business entity)
0 T-1-1	netary contributions received this period. es 1 and 2. Enter here and on the Summary Page, C			,194.79	FPPC Advice: adv		C Form 460 (Jan/2016)) .ca.gov (866/275-3772)

## Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA FORM

Statement covers period

				from <u>09/25/2022</u>		FC	<b>PRM</b> 400
				through	22		5 of
NAME OF FILER Eleassia Dav	is For Mayor of Tracy 2022					1.D. NUI 144688	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF  CONTRIBUTOR  (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME) OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
10/11/2022	Tracy Disposal 8400 Orazio Lane, Tracy, CA 95377	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC	Business	500.00	500.00		
10/19/2022	Elisa Stolit  Fracy, CA 95376	☑IND □COM □OTH □PTY □SCC	Stay at Home	27.27	27.27		
		☐IND ☐COM ☐OTH ☐PTY ☐SCC		•			
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					
			SUBTOTAL	<b>\$</b> 527.27			

\*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

S	СН	ΙE	Dί	IL	E	E

#### Schedule E **Payments Made**

Amounts may be rounded to whole dollars.

	SCHEDULL
Statement covers period	CALIFORNIA 460
from09/25/2022	FORM 400
through <u>10/22/2022</u>	Page of
	I.D. NUMBER
	1446883

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Eleassia Davis For Mayor of Tracy 2022

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE C	DESCRIPTION OF PAYMENT	AMOUNT PAID
Economy Signs 632 Industrial Blvd., Manteca, CA 95336	СМР	Campaign Signs	1,925.00
Tracy Press 95 W 11th Street, Tracy, CA 95376	PRT	Newspaper Ads	1,675.00
Gouldorellena - Families First Voter Guide 12501 Imperial Hwy. #200, Norwalk, CA 90650	LIT	Families First Voter Guides	1,410.00

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

**SUBTOTAL** \$ 5,010.00

7,816.87

-	S	ch	e	du	le	E	S	uı	m	m	a	ry
	5	cn	e	au	ıe		S	uı	m	m	а	гу

	Itemized payments made this period. (Include all Schedule E subtotals.)	<b></b>
2.	Unitemized payments made this period of under \$100	B
3.	Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	<b>5</b>
-		7.816.87

SCHEDUL	E E	(CONT.)
---------	-----	---------

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

Amounts may be rounded to whole dollars.

		SUNI	EDULE E (CONT.)
Statement covers period		CALIFOR	NA ACO
from	022	FORM	<b>400</b>
through 10/2	2/2022	Page 7	of
		I.D. NUMBER	
		1446883	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Eleassia Davis For Mayor of Tracy 2022

through 10/22/2022

Page 7 of 8

I.D. NUMBER

1446883

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE (	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Meta Platforms(Facebook) 1 Hacker Way, Menlo Park, CA 92025	WEB	Facebook Ads, fee to boost	2,700.00
Tracy City Center Association 20 W 11th Street, Tracy, CA 95376	MTG	Fee for Holiday Parade	40.00
EFundraisingconnections.com	FND	Fees for online Fundraising platform	66.87

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

**SUBTOTAL \$** 2,806.87

Schedule I Miscellaneous Increases to Cash		Amounts may be rounded to whole dollars.	Statement covers period from 09/25/2022	california 460	
			through	Page 8 of 8	
NAME OF FILER	For Mayor of Tracy 2022			I.D. NUMBER 1446883	
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH	
10/07/2022	Southside Community Organization 126 W First Street Tracy, CA 95376	Refund for fee	s paid	500.00	
	ditional information on appropriately labeled continuation sheets.		SUBTOTA	AL\$	
Schedule  1 Itemized i	I Summary ncreases to cash this period.		\$_500.00		
	ed increases to cash of under \$100 this period.				

3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) .....\$

4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the

500.00

CALIFORNIA 460

Date Stamp

#### Recipient Committee Campaign Statement Cover Page

Cover Page			(2)3	e 1 of 18
	Statement covers period from 07/01/2022	Date of election if applicable: (Month, Day, Year)	RECEIVED SPage	e of
SEE INSTRUCTIONS ON REVERSE	through 09/24/2022	11/08/2022	CITY CLERK TRACY	
1. Type of Recipient Committee: All Committees - C	Complete Parts 1, 2, 3, and 4.	2. Type of Statement:	(i)	
✓ 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)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Term Amendment (Explain belo	mination)	tatement I-Year Report
3 Committee Information	I.D. NUMBER 1446883	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE		NAME OF TREASURER		
Eleassia Davis for Mayor of Tracy 2022		Christina Gonzaga		
		MAILING ADDRESS		
STREET ADDRESS (NO P.O. BOX)		CITY	STATE ZIP CODE	AREA CODE/PHONE
		Tracy	CA	
CITY STATE ZIP C	CODE AREA CODE/PHONE	NAME OF ASSISTANT TREASURER	R, IF ANY	\ \
Tracy CA 953 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO		MAILING ADDRESS		
		- Alexy	CTATE ZID CODE	AREA CODE/PHONE
CITY STATE ZIP C		CITY	STATE ZIP CODE	AREA CODE/FHONE
Tracy CA 953 OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRES	S	
4. Verification I have used all reasonable diligence in preparing and review certify under penalty of perjury under the laws of the State of Executed on 09/27/22  Executed on Date  Executed on Date  Executed on Executed on Date		d correct.  Signature of Controlling Officeholder, Candidate, Sta	te Measure Proponent	is true and complete. I
Date		Signature of Controlling Officeholder, Candidate, Sta	e Measure Proponent	PPC Form 460 (Jan/2016))

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

# Recipient Committee Campaign Statement Cover Page — Part 2

CALIFORNIA 460						
Page 2	_ of <u>18</u> _					

NAME OF OFFICEHOLDER OR CANDIDATE				NAME OF BALLOT MEASURE				
Eleassia Davis				BALLOT NO. OR LETTER	JURISDICTION	ON	15	
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIS	TRICT NUMBER IF APP	LICABLE)		BALLOT NO. OR LETTER	001110010111			SUPPORT
City of Tracy Council Member				<u> </u>				OFFOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STA	ATE ZIP		Identify the controlling office	eholder candi	date or state	measure propo	nent. if any.
	Tracy Ca	A 95377					measure prope	
				NAME OF OFFICEHOLDER, C.	ANDIDATE, OR F	PROPONENT		
	4-4	•••						
Related Committees Not Included in this S not included in this statement that are controlled by you	tatement: List any	committees		OFFICE SOUGHT OR HELD			DISTRICT NO. I	FANY
contributions or make expenditures on behalf of your ca	ndidacy.	a to receive						
COMMITTEE NAME	I.D. NUMBER							
	CONTROLLER CO	MMITTEE2	7.	Primarily Formed Can	didate/Offic	eholder Co	ommittee Lis	t names of
NAME OF TREASURER	CONTROLLED CO		7.	Primarily Formed Can officeholder(s) or candidate(s)	didate/Offics) for which this	eholder Co committee is	primarily formed	t names of I.
33,000,000,000,000,000,000,000	☐ YES ☐	MMITTEE?	7.	officeholder(s) or candidate(s	s) for which this	committee is	primarily formed	·
	☐ YES ☐		7.	NAME OF OFFICEHOLDER OF	s) for which this	OFFICE SO	primarily formed	✓ SUPPORT
	YES D. BOX)	NO	7.	officeholder(s) or candidate(s	s) for which this	OFFICE SO Mayor	UGHT OR HELD	·
	YES D. BOX)		7.	NAME OF OFFICEHOLDER OF	R CANDIDATE	OFFICE SO Mayor	primarily formed	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.C	YES D. BOX)	NO	7.	NAME OF OFFICEHOLDER OF Eleassia Davis	R CANDIDATE	OFFICE SO Mayor	UGHT OR HELD	SUPPORT DPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.C	O. BOX)	NO	7.	NAME OF OFFICEHOLDER OF  RAME OF OFFICEHOLDER OF  RAME OF OFFICEHOLDER OF	R CANDIDATE	OFFICE SO  Mayor  OFFICE SO	UGHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.C	YES D. BOX)	NO	7.	NAME OF OFFICEHOLDER OF Eleassia Davis	R CANDIDATE	OFFICE SO  Mayor  OFFICE SO	UGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.C	O. BOX)	NO	7.	NAME OF OFFICEHOLDER OF  RAME OF OFFICEHOLDER OF  RAME OF OFFICEHOLDER OF	R CANDIDATE	OFFICE SO  Mayor  OFFICE SO	UGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.C.  CITY STATE ZIF	O. BOX)	CODE/PHONE	7.	NAME OF OFFICEHOLDER OF  NAME OF OFFICEHOLDER OF  NAME OF OFFICEHOLDER OF	R CANDIDATE  R CANDIDATE  R CANDIDATE	OFFICE SO  OFFICE SO  OFFICE SO	UGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.C	P CODE AREA  I.D. NUMBER  CONTROLLED CO	NO CODE/PHONE	7.	NAME OF OFFICEHOLDER OF  RAME OF OFFICEHOLDER OF  RAME OF OFFICEHOLDER OF	R CANDIDATE  R CANDIDATE  R CANDIDATE	OFFICE SO  OFFICE SO  OFFICE SO	UGHT OR HELD  UGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO P.C.  CITY STATE ZIF  COMMITTEE NAME  NAME OF TREASURER	P CODE AREA  I.D. NUMBER  CONTROLLED CO	CODE/PHONE	7.	NAME OF OFFICEHOLDER OF  NAME OF OFFICEHOLDER OF  NAME OF OFFICEHOLDER OF	R CANDIDATE  R CANDIDATE  R CANDIDATE	OFFICE SO  OFFICE SO  OFFICE SO	UGHT OR HELD  UGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.C.  CITY STATE ZIF	P CODE AREA  I.D. NUMBER  CONTROLLED CO	NO CODE/PHONE	7.	NAME OF OFFICEHOLDER OF  NAME OF OFFICEHOLDER OF  NAME OF OFFICEHOLDER OF	R CANDIDATE  R CANDIDATE  R CANDIDATE	OFFICE SO  OFFICE SO  OFFICE SO	UGHT OR HELD  UGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT

#### Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

Statement covers period from 07/01/22 CALIFORNIA FORM 460

through 09/24/22 Page 3 of 18

I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE		tillough		I.D. NUMBER
NAME OF FILER				1446883
Eleassia Davis for Mayor of Tracy 2022				
Contributions Received	COLUMN A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE		mary for Candidates e State Primary and
Loans Received	\$\frac{14,373.00}{0}\$ \$\frac{14,373.00}{2,450.00}\$ \$\frac{16,823.00}{2}\$	\$\frac{29,590.00}{0}\$ \$\frac{29,590.00}{2,450.00}\$ \$\frac{32,040.00}{0}\$	20. Contributions Received \$	\$\$
9. Accrued Expenses (Unpaid Bills)	\$\frac{11,580.00}{0}\$ \$\frac{11,580.00}{0}\$ \frac{0}{2,450.00}\$ \$\frac{14,183.00}{0}\$	\$\frac{20,194.00}{0}\$ \$\frac{20,194.00}{0}\$ \$\frac{0}{2,450.00}\$ \$\frac{22,797.00}{0}\$		Summary for State  ve Expenditures Made*  Voluntary Expenditure Limit)  Total to Date  \$
Current Cash Statement  12. Beginning Cash Balance	\$ \frac{6,602.00}{14,373.00} \frac{0}{0} \frac{14,373.00}{0} \frac	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).	reported in Column B.	may be different from amounts  FPPC Form 460 (Jan/2016)  vice@fppc.ca.gov (866/275-3772

Schedule	Α	
Monetary	Contributions	Received

Amounts may be rounded to whole dollars.

SCHEDULE A

Monetary Contributions Received		to	to whole dollars.		Statement covers period from 07/01/2022		CALIFORNIA 460	
SEE INSTRUCTI	IONS ON REVERSE			through <u>09/24/2022</u>		Page 4 of		
NAME OF FILER Eleassia Dav	ris For Mayor of Tracy 2022					1.D. NU 144688	JMBER 33	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE CALENDAR (JAN. 1 - DI	YEAR	PER ELECTION TO DATE (IF REQUIRED)	
07/01/22	Juana Dement Tracy, CA. 95376	☑ IND □ COM □ OTH □ PTY □ SCC	Dement Real Estate	100.00	12			
07/01/22	Leann Staas Tracy, CA. 95304	☑ IND □ COM □ OTH □ PTY □ SCC	Realtor, Kelly Williams Realty	200.00				
07/04/22	Tracy Grading and Paving 5431 West Grant Line Road Tracy, CA 95304	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		428.34				
07/05/22	Stephen Ridolfi Tracy, CA 95376	☑IND □COM □OTH □PTY □SCC	Retired	107.49				
07/05/22	Manpreet Shahi Tracy, CA. 95377	☑ IND □ COM □ OTH □ PTY □ SCC	Senior Director, Oracle America, Inc	107.49	407.49			
			SUBTOTAL	\$ 943.32			to the second	
Amount re (Include a     Amount re	A Summary ecceived this period – itemized monetary contribution all Schedule A subtotals.) ecceived this period – unitemized monetary contribution	tions of less tha	n \$100\$	14,373	O. b.	othe) TH – Other TY – Politic	ual bient Committee r than PTY or SCC) (e.g., business entity)	
<ol><li>Total mon (Add Line</li></ol>	netary contributions received this period. es 1 and 2. Enter here and on the Summary Page, C	Column A, Line	1.) <b>TOTAL \$</b>	14,575		FPI	PC Form 460 (Jan/2016)	

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

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

Gurvir Singh Gill

Tracy, CA. 95377

Tracy, CA. 95377

Tracy, CA. 95377

2430 Joe Pombo Way

1422 Souza

Dhaliwal Transportation

Harnam Corporation dba Arco AM/PM

Amounts may be rounded to whole dollars.

OTH
PTY
SCC

□ COM □ OTH

☐ PTY ☐ SCC ☐ IND

□сом

**▼** OTH

□ PTY
□ SCC

□сом

**▼** OTH

□ PTY
□ SCC

SCHEDULE A (CONT.)

CALIFORNIA

vionetary	Contributions Received			from <u>07/01/22</u>		FO	RM 460
				through <u>09/24/22</u>		Page 5	of 18
Eleassia Davi	is for Mayor of Tracy 2022					I.D. NUN	IBER
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 CALENDAR Y (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)
07/08/22	Kathy Takahashi Tracy, CA.	☑ IND □ COM □ OTH □ PTY □ SCC	Distributor to Tesla	107.49			
07/26/22	Ram K Tracy, CA. 95377	☑ IND □ COM □ OTH		100.00			

Retired

SUBTOTAL \$	1,257.49	

Statement covers period

250.00

300.00

500.00

\*Contributor Codes IND – Individual

09/16/22

09/16/22

09/16/22

COM - Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Schedule	Α		
Monetary	Contributions	Received	

Amounts may be rounded to whole dollars.

SCHEDULE A

www.fppc.ca.gov

Monetary Contributions Received		10	whole dollars.	from <u>07/01/22</u>	Statement covers period from $\frac{07/01/22}{}$		CALIFORNIA 460		
SEE INSTRUCT	IONS ON REVERSE			through <u>09/24/22</u>	2	Page	6 of \\\ \( \frac{\frac{1}{3}}{3} \)		
NAME OF FILER						I.D. NU 144688			
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 CALENDAR (JAN. 1 - DE	YEAR	PER ELECTION TO DATE (IF REQUIRED)		
08/08/22	Raquel Fairfield  Tracy, CA. 95377	☑IND □COM □OTH □PTY □SCC	Account Manager, Univar	100.00					
08/15/22	Boutique 115 580 West Cheyenne Avenue, Suite 90 Las Vegas, Nevada 89030	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		100.00					
08/18/22	John deJonge Tracy, CA. 95376	☑IND □COM □OTH □PTY □SCC	Retired	100.00					
09/09/22	John Moore Tracy, CA. 93370	OTH SCC	Consultant	300.00					
09/09/22	Tom Patti Stockton, CA 95205	IND COM OTH PTY SCC	Retired	250.00					
9			SUBTOTAL	\$ 850,00					
1. Amount re (Include a	A Summary ecceived this period – itemized monetary contributional Schedule A subtotals.) ecceived this period – unitemized monetary contribution				INI CC OT PT	other) H – Other ( Y – Politica	ient Committee than PTY or SCC) (e.g., business entity)		
	netary contributions received this period. es 1 and 2. Enter here and on the Summary Page, 0	Column A, Line 1	1.)TOTAL \$		FPPC Advice: ad		C Form 460 (Jan/2016)) .ca.gov (866/275-3772)		

## Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from $\frac{07/01/22}{}$	CALIFORNIA 460
through 09/24/22	Page 7 of 18
	I.D. NUMBER
	1446883

Eleassia Dav	is for Mayor of Tracy 2022				144688	83
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)
07/09/22	Dhaba 2242 W. Grantline Road Tracy CA 95376	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		300.00		
07/09/22	Germaine Clark Tracy CA 95377	✓ IND  ☐ COM  ☐ OTH  ☐ PTY  ☐ SCC		350.00	457.49	
07/09/22	Rene Senna Gustine, CA 95322	☑ IND □ COM □ OTH □ PTY □ SCC	Retired	200.00		
07/09/22	Julia Conover Tracy, CA. 95376	☑ IND □ COM □ OTH □ PTY □ SCC	Retired	200.00	300.00	
07/09/22	Michael Gasior Tracy, CA 95304	☑ IND □ COM □ OTH □ PTY □ SCC	Retired	200.00		
			SUPTOTAL	1757		

\*Contributor Codes

IND - Individual

NAME OF FILER

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

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

www.fppc.ca.gov

#### Schedule A Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A

CALIFORNIA 460

FPPC Advice: advice@fppc.ca.gov (866/275-3772)

www.fppc.ca.gov

Statement covers period

wonetary	Contributions Received			from 07/01/	2022	FC	ORM 46U
SEE INSTRUCT	IONS ON REVERSE		=	through OQ/	24/2022		
NAME OF FILER		raly.	2022			I.D. NU	MBER
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE CALENDAR (JAN. 1 - D	RYEAR	PER ELECTION TO DATE (IF REQUIRED)
07/09/22	Bellini's Transportation 6610 Durham Ferry Road Tracy, CA. 95304	☐IND ☐COM ✔OTH ☐PTY ☐SCC		200.00			
07/09/22	Jack Alvarez Tracy, CA 95304	▼IND □COM □OTH □PTY □SCC	Retired	200.00			
07/09/22	ZCommunications Inc. 568 W. 4th Tracy, CA. 95376	IND COM OTH PTY		100.00			
07/09/22	Merlyn Pittman  Manteca, CA. 95336	☑IND □COM □OTH □PTY □SCC	Business Owner, Chest of Hope	90.00	272.49		
07/14/22	Stuart Clever	☑IND □COM □OTH □PTY □SCC	Business Owner, Rusty's Pizza and Bar	200.00			
			SUBTOTAL	s 790°			
Amount re     (Include a      Amount re	A Summary eceived this period – itemized monetary contributions all Schedule A subtotals.) eceived this period – unitemized monetary contribution				O. b.	(other to TH – Other ( TY – Politica	al ent Committee than PTY or SCC) e.g., business entity)
<ol><li>Total mon (Add Line</li></ol>	netary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Co	lumn A, Line 1	1.) <b>TOTAL</b> \$			FPPC	Form 460 (Jan/2016))

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

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from 07/01/2022	CALIFORNIA 460
through 09/24/2022	Page of
	I.D. NUMBER

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)
08/30/22	J&S Investments 3553 Castro Valley Blvd. Castro Valley, CA. 94546	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		500.00		
08/19/22	Carlos Villapudua For Assembly (ID #1435856) PO Box 1282 Stockton, CA. 95201-1282	☐ IND  ☑ COM ☐ OTH ☐ PTY ☐ SCC		2,400.00	4,900.00	
09/16/22	Altamont Aviation Inc. 180 Airway Blvd. Livermore, CA.	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		300.00		
09/16/22	Grin Investments Inc 8106 N. El Dorado Stockon CA	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		1,000.00	1,500.00	
		□IND □COM □OTH □PTY □SCC				

\*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		
Monetary	Contributions	Received

Amounts may be rounded to whole dollars.

SCHEDULE A

FPPC Form 460 (Jan/2016))

www.fppc.ca.gov

FPPC Advice: advice@fppc.ca.gov (866/275-3772)

Statement covers period

Monetary Contributions Received		to	whole dollars.	from 07/01/2022 CALIFORNIA FORM			FORNIA 460
SEE INSTRUCTION	ONS ON REVERSE			through <u>09/24/20</u>	22		10 of 18
NAME OF FILER						I.D. NU	MBER
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 T CALENDAR ( (JAN. 1 - DE)	YEAR	PER ELECTION TO DATE (IF REQUIRED)
09/16/22	Charanjit Mudhar Tracy,CA 95377	✓ IND  ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	100.00			
09/16/22	Harleen Dhillion Tracy, CA 95304	☑IND □COM □OTH □PTY □SCC	Student	150.00			
09/16/22	City Food & Liquor 16470 Cambridge Dr. Lathrope, CA	□IND □COM ☑OTH □PTY □SCC	Business	200.00			
09/16/22	Sharanjit Dhillon Tracy, CA 95377	☑IND □COM ☑OTH □PTY □SCC	Dentist	200.00			
9/16/22	Burnell V Shull Trcay,CA 95376	☑IND □COM □OTH □PTY □SCC	Retired	300.00	300.00		
			SUBTOTAL	\$ 950.00			
Amount re (Include a	A Summary ecceived this period – itemized monetary contribution all Schedule A subtotals.)				OTI PT	(other of the of	ial ient Committee than PTY or SCC) (e.g., business entity) al Party
	etary contributions received this period			N .	SCO	C – Small	Contributor Committee

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

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA FORM

Statement covers period

•				from <u>07/01/2022</u>		FORM 400	
				through <u>09/24/20</u>	22	Page _	- 0.1-0.01
NAME OF FILER						I.D. NUI	MBER
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 CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
09/16/22	DS 135, INC 870 Schulte Rd. Tracy, CA 95376	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC	Business	250.00			
09/16/22	Sikandar Singh Tracy, CA 95377	IND COM OTH PTY SCC	Retired	250.00			
09/15/22	Alvarez Properties 421 W 11th St Tracy, CA 95376	□ IND □ COM ☑ OTH □ PTY □ SCC	Business	250.00	,		
09/14/22	Sunset Liquors, INC 2355 Parker Ave Tracy, CA 95376	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC	Business	250.00			
09/14/22	Surinderpal Atwal	☑ IND	Dentist	250.00			

**SUBTOTAL \$ 1,250** 

□отн

□ PTY □ SCC

\*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

Tracy, CA 95376

#### Schedule C Nonmonetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE C Statement covers period **CALIFORNIA** from 07/01/2022 **FORM** 

NAME OF FILE	etions on reverse ER vis for Mayor of Tracy 2022				through 09/24/2022		I.D. NUME 1446883	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION GOODS OR SERV		CUMULA DA' CALENDA (JAN 1 - I	R YEAR	PER ELECTION TO DATE (IF REQUIRED)
9/16/22	Dhaba 2242 W. Grantline Road Tracy, CA. 95376	□IND □COM ☑OTH □PTY □SCC		Venue, food, beverages for m and greet	2,000.00 neet			
07/09/22	Elaine Pombo Tracej Ca	☑IND □COM □OTH □PTY □SCC	Business Owner	Food and beverages for n and greet	450.00			
		□IND □COM □OTH □PTY □SCC		365				
		□IND □COM □OTH □PTY □SCC						
Attach add	ditional information on appropriately labeled	continuation	sheets.	SUBTO	DTAL\$ 2,450			
Cabadul	o C Summany					(*Con	tributor Co	dos

Schedule C Summary 1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.)....

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

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 \$

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Schedule	E
<b>Payments</b>	Made

Schedule E Summary

Amounts may be rounded to whole dollars.

Statement covers period CALIFORNIA

SCHEDULE E

Payments Made	from <u>07/01/22</u>	FURIVI
SEE INSTRUCTIONS ON REVERSE	through <u>09/24/22</u>	Page 13 of 16
NAME OF FILER		I.D. NUMBER
Eleassia Davis for Mayor of Tracy 2022		1446883
CONTROL CONTROL VICE AND		

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE C	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Economy Signs 632 Industrial Park Manteca, CA	СМР	Campaign signs	937.50
Rebecca's T-Shirts Tracy, CA	CMP	T-shirts	250.00
Centro Natural La Morenita 803 N. Central Avenue Tracy, CA	CMP	Campaign supplies	84.55

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

SUBTOTAL \$

	. Itemized payments made this period. (Include all Schedule E subtotals.)	11,427,00
2.	. Unitemized payments made this period of under \$100\$ —	
3.	. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	11 1177 00
4.	. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	11,901.00

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

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Statement covers period **CALIFORNIA** 07/01/22 **FORM** from . through 09/24/22 I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1446883 Eleassia Davis for Mayor of Tracy

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs MBR member communications CMP campaign paraphernalia/misc. RFD returned contributions MTG meetings and appearances CNS campaign consultants SAL campaign workers' salaries OFC office expenses CTB contribution (explain nonmonetary)\* TEL t.v. or cable airtime and production costs petition circulating CVC civic donations TRC candidate travel, lodging, and meals PHO phone banks candidate filing/ballot fees TRS staff/spouse travel, lodging, and meals polling and survey research FND fundraising events transfer between committees of the same candidate/sponsor postage, delivery and messenger services independent expenditure supporting/opposing others (explain)\* PRO professional services (legal, accounting) VOT voter registration LEG legal defense WEB information technology costs (internet, e-mail) PRT print ads campaign literature and mailings

	NAME AND ADDRESS OF PAYEE IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Hobby Lobby 3100 Naglee Road Tracy, CA	*	FND	Fundraiser supplies	21.92
Michaels 2940 W. Grantline Road Tracy, CA.		FND	Fundraiser supplies	21.20
Costco 3250 W. Grantline Road Tracy, CA.		FND	Fundraiser food, snacks, beverages	177.05
Melissa Flower Shop 828 Central Avenue Tracy, CA. 95376		FND	Fundraiser supplies	130.19

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

Schedule E	
(Continuation	Sheet)
Payments Ma	de

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

1446883

Statement covers period 07/01/22 from	california 460 form
through <u>09/24/22</u>	Page 15 of 18
	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Eleassia Davis for Mayor of Tracy 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.	MBR	member communications	RAD	radio airtime and production costs
	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
	contribution (explain nonmonetary)*	OFC	office expenses		campaign workers' salaries
	civic donations	PET	petition circulating		t.v. or cable airtime and production costs
	candidate filing/ballot fees	PHO	phone banks		candidate travel, lodging, and meals
	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
	legal defense	PRO	professional services (legal, accounting)		voter registration
	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		
CA Slates 249 Ocean Blvd. Long Beach, CA	LIT	Voter Guides	1,800.00	
City of Tracy 333 Civic Center Tracy, CA	FIL	Candidate Filing Fee	25.00	
Hella Pie Pizza 50 W. 10th Street Tracy, CA.	FND	Fundraiser event, food and supplies	370.42	
City of Tracy 333 Civic Center Tracy, CA	FIL	Candidate Statement Filing Fee	1,500.00	
South Side Community Organization 126 W. 1st Street Tracy, CA	CMP	Sponsorhip, community event	500.00	

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

SUBTOTAL \$ L1,195.47

#### SCHEDULE E (CONT.)

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

Amounts may be rounded to whole dollars.

Statement covers period 07/01/22 From Page 09/24/22 Of 1.D. NUMBER 1446883

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Eleassia Davis for Mayor of Tracy 2022

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

RAD radio airtime and production costs CMP campaign paraphernalia/misc. MBR member communications RFD returned contributions MTG meetings and appearances campaign consultants SAL campaign workers' salaries office expenses CTB contribution (explain nonmonetary)\* t.v. or cable airtime and production costs petition circulating CVC civic donations TRC candidate travel, lodging, and meals PHO phone banks candidate filing/ballot fees TRS staff/spouse travel, lodging, and meals polling and survey research fundraising events transfer between committees of the same candidate/sponsor POS postage, delivery and messenger services independent expenditure supporting/opposing others (explain)\*

LEG legal defense PRO professional services (legal, accounting) VOT voter registration print ads WEB information technical print ads

WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
COPS Voter Guide P.O. Box 214006 Sacramento. CA 95281	LIT	Voter Guide	1,284.00
Meta for Business/Facebook 1 Facebook Way Menlo Park, CA 94205	WEB	Online Marketing	1,137.33
Fedex Print 2116 W. Grantline Road Tracy, CA	LIT	Campaign literature	77.40
City of Tracy 333 Civic Center Tracy, CA	FND	Park Permit	94.00
Walmart 3010 W. Grantline Road Tracv, CA.	FND	Fundraising supplies	33.05

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

SUBTOTAL \$ 2,625.79

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Eleassia Davis for Mayor of Tracy 2022

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs MBR member communications CMP campaign paraphernalia/misc. RFD returned contributions MTG meetings and appearances campaign consultants SAL campaign workers' salaries OFC office expenses CTB contribution (explain nonmonetary)\* TEL t.v. or cable airtime and production costs petition circulating CVC civic donations TRC candidate travel, lodging, and meals candidate filing/ballot fees PHO phone banks TRS staff/spouse travel, lodging, and meals polling and survey research FND fundraising events

IND independent expenditure supporting/opposing others (explain)\*

LEG legal defense

LIT campaign literature and mailings

POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads 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 C	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
City of Tracy 333 Civic Center Tracy, CA		FND	Park Permit	56.00
Four Corners 7509 W. Linne Road Tracy, CA.	<i>y</i>	TRS	Staff lunch meeting	103.31
My Creative 3003 32nd. Avenue S Fargo, North Dakota		LIT	Campaign literature	537.00
Economy Signs 632 Industrial Blvd. Manteca, CA		CMP	Campaign Signs	937.50
Healthy Spot 2321 N. Tracy Blvd. Tracy, CA.		TRS	Staff Meeting	49.64

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

SUBTOTAL \$ 1,683,40

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Eleassia Davis for Mayor of Tracy 2022

CMP CNS CTB CVC FIL FND IND	campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR MTG OFC PET PHO POL POS PRO	member commeetings and office expense petition circular phone banks polling and supostage, deliverse	munication appearantes ating urvey rese very and n	ns nces	RAD RFD SAL TEL TRC TRS TSF VOT	radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals	e candidate/sponsor
	NAME AND ADDRESS OF PAYEE			CODE	OR	DESCRIPTION	ON OF PAYMENT	AMOUNT PAID

	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Dollar Tree Store 2691 N. Tracy Blvd. Tracy, CA.		FND	Fundraiser supplies	55.48
Costco 3250 W. Grantline Tracy, CA		FND	Fundraiser supplies	78.97
Bella's Party 257 W. Louise Avenue Manteca, CA	*	FND	Fundraiser supplies	99.24
Economy Signs 632 Industrial Blvd. Manteca, CA		CMP	Campaign signs	800.00

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

Recipient Committee Campaign Statement

Cover Page		A DEC	ENED E	FORM 460
	Statement covers period from 01/01/2022	Date of election if applicable (Month, Day, Year)	G 1= 2022 TRACY	age of
SEE INSTRUCTIONS ON REVERSE	through 06/30/2022	11/08/2022	CA	
1. Type of Recipient Committee: All Committees - Co	nplete Parts 1, 2, 3, and 4.	2. Type of Statement:	900	
O State Candidate Election Committee O Recall (Also Complete Part 5)	rimarily Formed Ballot Measure Committee Controlled Sponsored Uso Complete Part 6)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination) Amendment (Explain below)		y Statement Odd-Year Report
Small Contributor Committee	rimarily Formed Candidate/ Officeholder Committee Uso Complete Part 7)			
3 Committee Information	NUMBER 446883	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)		NAME OF TREASURER		
Eleassia Davis For Mayor of Tracy 2022		Christina GOnzaga MAILING ADDRESS		
STREET ADDRESS (NO P.O. BOX)		CITY	STATE ZIP CODE	AREA CODE/PHONE
		Tracy	CA 95376	9259180017
CITY STATE ZIP CO	DE AREA CODE/PHONE	NAME OF ASSISTANT TREASURER, IF ANY		
Tracy CA 9537 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX		MAILING ADDRESS		
Tracy (A 95377	DE AREA CODE/PHONE	CITY	STATE ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRESS		
4. Verification I have used all reasonable diligence in preparing and reviewi certify under penalty of perjury under the laws of the State of Executed on 07/29/2022  Executed on Date  Executed on Date	California that the foregoing is true and  By  By  Signature or confir		жолын еткон от оролон	ules is true and complete. I
Executed on	Ву	Signature of Controlling Officeholder, Candidate, State Measure	Proponent	— FPPC Form 460 (Jan/2016))

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

**COVER PAGE** 

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2
FORM 460
Page 2 of 17

Officeholder or Candidate Controlled	Committee			6.	Primarily Formed B	allot Measure	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE					NAME OF BALLOT MEASU	RE			
Eleassia Davis OFFICE SOUGHT OR HELD (INCLUDE LOCATION A	ND DISTRICT NUMBE	R IF APPLIC	ABLE)		BALLOT NO. OR LETTER	JURISDICTI	ON	1	SUPPORT
City of Tracy Councilmember									OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STR		STATE	ZIP		Identify the controlling	officeholder, candi	date, or state m	neasure propoi	nent, if any.
	Tracy	CA	95377		NAME OF OFFICEHOLDE	R, CANDIDATE, OR F	PROPONENT		
Related Committees Not Included in t not included in this statement that are controlled to contributions or make expenditures on behalf of y	by you or are primaril	List any con ly formed to	nmittees receive		OFFICE SOUGHT OR HEL	D		DISTRICT NO. IF	ANY
COMMITTEE NAME	I.D. NUMB	ER							
NAME OF TREASURER	CONTROL	LED COMM	ITTEE?	7.	. Primarily Formed C	Candidate/Offic	eholder Cor	nmittee List rimarily formed.	names of
	☐ YES	□ NC	)		NAME OF OFFICEHOLDE			GHT OR HELD	T
COMMITTEE ADDRESS STREET ADDRESS	(NO P.O. BOX)				Eleassia Davis	OR CANDIDATE	Mayor	5111 6111122	SUPPORT  OPPOSE
CITY STATE	ZIP CODE	AREA CO	DE/PHONE		NAME OF OFFICEHOLDE	R OR CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMB	ER			NAME OF OFFICEHOLDE	R OR CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	☐ YES	LED COMM			NAME OF OFFICEHOLDE	R OR CANDIDATE	OFFICE SOU	GHT OR HELD	☐ SUPPORT ☐ OPPOSE
COMMITTEE ADDRESS STREET ADDRESS CITY STATE	ZIP CODE	AREA CO	DE/PHONE			Attach continuat	ion sheets if ne	ecessary	

### Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

Statement covers period from 01/01/2022 CALIFORNIA FORM 460

through 06/30/2022 Page 3 of 17

SEE INSTRUCTIONS ON REVERSE		till Gugii _	I.D. NUMBER
NAME OF FILER			1446883
Eleassia Davis For Mayor of Tracy 2022  Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and
1. Monetary Contributions Schedule A, Line 3 2. Loans Received Schedule B, Line 3 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 4. Nonmonetary Contributions Schedule C, Line 3 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$\frac{15216.54}{0.00}\$ \$\frac{15216.54}{0.00}\$ \$\frac{15216.54}{5216.54}\$	\$\frac{15216.54}{0.00}\$ \$\frac{15216.54}{0.00}\$ \$\frac{15216.54}{0.00}\$	General Elections  1/1 through 6/30 7/1 to Date  20. Contributions Received \$ \$  21. Expenditures Made \$ \$
Expenditures Made  6. Payments Made	\$ 8613.55	\$ _8613.55	Expenditure Limit Summary for State Candidates
7. Loans Made	\$ 8613.55	\$ 8613.55	22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)	8613.55	e 8613.55	Date of Election Total to Date (mm/dd/yy)
11. TOTAL EXPENDITURES MADE	Φ		\$\$
12. Beginning Cash Balance	15216.54	To calculate Column B, add amounts in Column A to the corresponding	*Amounts in this section may be different from amounts
14. Miscellaneous Increases to Cash	8613.55 6602.99	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	reported in Column B.
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	this is the first report being filed for this calendar year, only carry over the amounts	
Cash Equivalents and Outstanding Debts	\$	from Lines 2, 7, and 9 (if any).	
18. Cash Equivalents			FPPC Form 460 (Jan/2016)) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

Schedule	Α	
Monetary	Contributions	Received

Amounts may be rounded to whole dollars.

SCHEDULE A

www.fppc.ca.gov

CALIFORNIA 460

Statement covers period

from 01/01/2022

NAME OF FILER				through 06/30/20	22	Page	MBER
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	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	D DATE EAR	PER ELECTION TO DATE (IF REQUIRED)
04/06/22	Carlos Villapudua for State Assm. Dist. 13  Fppc#1435858  Fo Box 1282  Stockton, CA	□IND ☑ COM □ OTH □ PTY □ SCC	Assembly member	2500.00	2500.00		
05/02/22	Naman Trucking 27664 Gerhart Tracy, CA	☐IND ☐COM ②OTH ☐PTY ☐SCC	Business	2000.00	2000.00		
05/02/22	S&E Bros. Trucking 955 Brookfield LAthrop, CA	□IND □COM ØOTH □PTY □SCC	Business	500.00	500.00		
05/20/22	GRIN Investments 6009 N El Dorado Stockton, CA	□IND □COM ☑OTH □PTY □SCC	Busines s	500.00	500.00		
	Manpreet Shahi Tracy, CA	☑ IND □ COM □ OTH □ PTY □ SCC	Oracle Sr. Director	300.00	300.00		
			SUBTOTAL S	\$ 5800.00			
OTH – Other (e.g. PTY – Political Pty – Pty							ient Committee than PTY or SCC) (e.g., business entity)
O T-1-1	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Co			5216.54	PPC Advice: adv		PC Form 460 (Jan/2016)) c.ca.gov (866/275-3772)

Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received	to whole dollars.	Statement covers period from $\frac{01/01/2022}{}$	CALIFORNIA 460
		through 06/30/2022	Page _5 of
NAME OF FILER			I.D. NUMBER
Eleassia Davis For Mayor of Tracy 2022			1446883

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/20/22	TCS Insurance 894 W. 11th Tracy, CA	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC	Business	200.00	414.44	
05/20/22	Christina Gonzaga Tracy, CA	ZIND COM OTH PTY SCC	Homemaker	166.00	477.00	
05/20/22	Alice English Tracy, CA	IND COM OTH PTY	Retired	166.00	436.00	
05/20/22	Gerilvn Martin-Featherston Tracy CA	IND COM OTH PTY	Chest of Hope Director HR	160.00	435.40	
04/13/22	Mariella Arroyo Tracy, CA	IND COM OTH PTY	Retired	100.00	100.00	
			SUBTOTAL	\$ 792.00		

\*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

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

## Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

**FORM** 

Statement covers period

from 01/01/2022

				through <u>06/30/20</u>	22	Page _	01
NAME OF FILER Eleassia Davis For Mayor of Tracy 2022						1.D. NUN 144688	
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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
06/08/22	Leroy Rickman Tracy, CA	IND COM OTH PTY SCC	Retired	100.00			
06/08/22	George Murphy Tracy, CA	IND COM OTH PTY	Retired	100.00			
06/13/22	Aman Sandhu Tracy, CA	IND COM OTH PTY	Self-Employed	100.00			
05/03/22	Aribella Inquez McCreary	IND COM OTH PTY	Self-Employed	500.00			
06/14/2022	Conrad Levoit Tracy, CA	☑IND □COM □OTH □PTY □SCC	Business Owner	160.96			
SUBTOTAL \$ 960.96							

\*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

Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received	to whole dollars.		Statement covers period CA from 01/01/2022			FORM 460		
			through _06/30/20	)22	Page _7	of 17		
NAME OF FILER					I.D. NUN			
Eleassia Davis For Mayor of Tracy					144688	3		
ELILL NAME STREET ADDRESS AND ZIP CODE OF	IF	AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE T	O DATE	PER ELECTION		

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF  CONTRIBUTOR  (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
06/23/22	Dan Evans Tracy, CA	IND COM OTH PTY	Jacobs Project Manager Leed	100.00		
06/13/2022	Elisa Solit Tracy, CA	IND COM OTH PTY	Self Employed	200.00		
05/11/22	Erika Weber Tracy, CA	☑IND □COM □OTH □PTY □SCC	GTA Mobile Business Owner	115.50		
05/15/22	Germaine Clark Tracy, CA	☑IND □COM □OTH □PTY □SCC	Retired	107.49		
05/6/22	Gina Trantina Union City, CA	☑IND □COM □OTH □PTY □SCC	Savemart Clerk	107.49		
SUBTOTAL \$ 630.48						

\*Contributor Codes

IND - Individual

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OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Schedule	Α	
Monetary	Contributions	Received

Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period

Monetary	Contributions Received	to	whole dollars.	Statement confrom 01/01/2022		CALI F	FORNIA 460  8 of 7
	IONS ON REVERSE			through06/30/20			JMBER
NAME OF FILER Eleassia Dav	ris For Mayor of Tracy 2022					144688	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE T CALENDAR \(\) (JAN. 1 - DE(	YEAR	PER ELECTION TO DATE (IF REQUIRED)
05/16/22	Jeff Brown Tracy, CA	IND COM OTH PTY SCC	Land Management Inc. Farmer	600.00			
06/27/22	Julie Andrade Tracy, CA	☑ IND □ COM □ OTH □ PTY □ SCC	Andrade Chiropractic Chiropractor	214.44			
06/13/22	Laurie Desousa Tracy, CA	☑ IND □ COM □ OTH □ PTY □ SCC	Retired	112.83			
06/08/22	Laurie Steed Tracy, CA	☑ IND □ COM □ OTH □ PTY □ SCC	Retired	70.00	170.00		
04/29/22	Laurie Steed Tracy, CA	☑ IND □ COM □ OTH □ PTY □ SCC	Retired	100.00			
			SUBTOTAL	\$ 1097.27			
Amount re (Include a     Amount re     Total mon	A Summary eceived this period – itemized monetary contribution all Schedule A subtotals.) eceived this period – unitemized monetary contribution netary contributions received this period. es 1 and 2. Enter here and on the Summary Page, Contributions	tions of less tha	n \$100\$		OTI PT' SC	(other H – Other Y – Politio C – Small	ual bient Committee r than PTY or SCC) (e.g., business entity) al Party Contributor Committee PC Form 460 (Jan/2016))
V - 33 - 31 - 11	, , , , , , , , , , , , , , , , , , ,				FPPC Advice: adv	vice@fpp	c.ca.gov (866/275-3772) www.fppc.ca.gov

Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received	to whole dollars.	Statement covers from <u>01/01/2022</u>	CA	FORM 460
		through 06/30/2022		e <b>6</b> 9 of 1
NAME OF FILER				NUMBER
Eleassia Davis For Mayor Of Tracy 2022			144	6883
		AMOUNT C	NAME TO DATE	DER ELECTION

	FULL NAME, STREET ADDRESS AND ZIP CODE OF	1	IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE TO DATE	PER ELECTION
DATE	CONTRIBUTOR	CONTRIBUTOR	OCCUPATION AND EMPLOYER	RECEIVED THIS	CALENDAR YEAR	TO DATE
RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	(IF SELF-EMPLOYED, ENTER NAME)	PERIOD	(JAN. 1 - DEC. 31)	(IF REQUIRED)
05/9/22	Mary-Lou Ramos Edwards Tracy, CA	IND COM OTH PTY	Zoom Loans Loan Officer	535.29		
05/19/22	Mary-Lou Ramos Edwards Tracy, CA	IND COM OTH PTY	zoom Loans Loan Officer	107.49	642.78	
04/27/22	Merlyn Pittman Tracy, CA	☑IND □COM □OTH □PTY □SCC	Chest of Hope Business Owner	75.00		
06/13/22	Merlyn Pittman Tracy, CA	IND COM OTH PTY	Chest of Hope Business Owner	107.49	182.49	
06/13/22	Alice English Tracy, CA	☑ IND □ COM □ OTH □ PTY □ SCC	Retired	70.00		
			SUBTOTAL	\$ 895.27		

\*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

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA 460

Statement covers period

from  $\frac{1/1/2022}{}$ 

**SUBTOTAL \$** 589.84

				through 6/30/202	2	Page _	910 of 17
NAME OF FILER Eleassia Dav	is For Mayor of Tracy 2022					1.D. NU 144688	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF  CONTRIBUTOR  (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE T CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
05/01/22	Ron Freitas  Lodi, CA	IND COM OTH PTY	SJ County Asst. District Atty	100.00			
05/22/22	Ron Freitas Lodi, CA	☑IND □COM □OTH □PTY □SCC	SJ County Asst. District Atty.	75.40	175.40		
06/14/22	Ryan Gunstream Yorba Linda, CA	IND COM OTH PTY SCC	Self Employed	214.44			
04/29/2022	Shawn Cannon Tracy, CA	☑IND □COM □OTH □PTY □SCC	NSMG Dir. of Mkt	100.00			
04/30/22	Tiffany Evans	☑IND □COM □OTH □PTY	Boyg Acctg Bookkeeper	100.00			

□scc

\*Contributor Codes IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

Tracy, CA

PTY – Political Party SCC – Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

**FORM** 

Statement covers period

from 01/01/2022

				through <u>06/30/20</u>	22	Page _	
NAME OF FILER Eleassia Davi	is For Mayor of Tracy 2022					1.D. NUI 144688	
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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
05/06/22	Stephen Ridolfi Tracy, CA	IND COM OTH PTY SCC	Retired	107.49			
06/3/2022	Vaughn Gates Tracy, CA	☑IND □COM □OTH □PTY □SCC	Retired	160.96			
5/9/22	Zahra Aziz Tracy, CA	IND COM OTH PTY SCC	Merchantech Editor	100.00			
05/3/22	Skyview, LLC 5749 South Tracy Blvd. Tracy, CA	□IND □COM ☑OTH □PTY □SCC		500.00			
06/13/22	Hella Pie Pizza Co. 50 West 10th Street Tracy, CA	□IND □COM ☑OTH □PTY □SCC		200.00			
			SUBTOTAL	\$ 1068.45			

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SCC - Small Contributor Committee

Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received	to whole dollars.	Statement covers period from $\frac{01/01/2022}{}$	CALIFORNIA 460
		through	Page of
NAME OF FILER Eleassia Davis For Mayor of Tracy 2022			I.D. NUMBER 1446883

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
06/23/22	Mattos Equipment 8567 West Schulte Tracy, CA	□IND □COM ØOTH □PTY □SCC		428.34		
06/24/22	Jays Gourmet Food 880 West Mt. Diablo Tracy, CA	□IND □COM ☑OTH □PTY □SCC		214.44		
05/2022	Christina Gonzaga Tracy, CA	IND COM OTH PTY SCC	Homemaker	311.00	477.00	
5/16/2022	TCS Insurance 894 W. 11th Street Tracy, CA	□IND □COM ☑OTH □PTY □SCC		100.00	514.44	
06/13/22	TCS Insurance 894 W. 11th Street Tracy, CA	□IND □COM ☑OTH □PTY □SCC		214.44	514.44	
		\$ 1268.28				

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PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received	to whole dollars.	Statement cov from <u>01/01/2022</u>	CALIF FO	FORM 460		
		through 06/30/20	22	Page1	3 of .	17_
NAME OF FILER				I.D. NUM	MBER	
Eleassia Davis For Mayor of Tracy 2022				144688	3	
FULL NAME STREET ADDRESS AND ZIP CODE	OF IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE T	O DATE	PER ELI	ECTION

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
06/24/2022	Alice English Tracy, CA	IND COM OTH PTY	Retired	200.00	436.00		
06/13/2022	Alice English Tracy, CA	ZIND COM OTH PTY SCC	Retired	70.00	436.00		
06/11/22	Gerlyn Martin Featherston Tracy, CA	IND COM OTH PTY	Chest of Hope Dir. HR	75.40	235.40		
06/13/2022	Gerilyn Martin-Featherston Tracy, CA	□IND □COM □OTH □PTY □SCC	Chest of Hope Dir HR	200.00	435.40		
05/11/22	Julia Conover Tracy, CA	ZIND  COM OTH  PTY  SCC	Retired	100.00	100.00		
	SUBTOTAL \$ 645.40						

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OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

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

Schedule	E
<b>Payments</b>	Made

Amounts may be rounded to whole dollars.

SCHEDULE E

Statement covers period

from 01/01/2022

through 06/30/2022

CALIFORNIA 460

FORM

I H

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I.D. NUMBER

1446883

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LIT

Eleassia Davis For Mayor of Tracy 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. MBR member communications RAD radio airtime and production costs campaign consultants MTG meetings and appearances RFD returned contributions 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

FIL candidate filing/ballot lees

FIND fundraising events

FIND independent expenditure supporting/opposing others (explain)\*

FIND independent expenditure supporting/opposing others (explain)\*

FIND pholie ballos

FIND pholie

IND independent expenditure supporting/opposing others (explain)\* POS postage, delivery and messenger services ISF transfer between committees of the same professional services (legal, accounting) VOT voter registration

campaign literature and mailings PRT print

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
Amazon Fullfillment Online Amazon. Com 1555 N. Chrisman Rd Tracy CA	СМР	Campaign giveaways, supplies, decor	359.13
City of Tracy 333 Civic Center Drive Traces CA 05277	FND	Park permits for kick off and fundraiser	412.00
Copy World 1375 University Ave	LIT	Printing services for campaign materials. signage	1546.80

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

**SUBTOTAL \$** 2317.80

7667 92

#### **Schedule E Summary**

1	Itemized payments made this period. (Include all Schedule E subtotals.)\$	; <u> </u>		
		9	945.63	
	Uniternized payments made this period of under \$100			
3.	Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)\$	<i>i</i> —		
4	Total payments made this period, (Add Lines 1, 2, and 3, Enter here and on the Summary Page, Column A, Line 6.)	<u>3</u> _8	3613.55	

SCHEDI	JLE E	(CONT.
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Amounts may be rounded to whole dollars.

Statement covers period 01/01/2022 from	CALIFORNIA 460
through <u>06/30/2022</u>	Page 6 of ) 7
	I.D. NUMBER

1446883

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Eleassia Davis For MAyor of Tracy 2022

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

RAD radio airtime and production costs MBR member communications CMP campaign paraphernalia/misc. RFD returned contributions MTG meetings and appearances CNS campaign consultants SAL campaign workers' salaries OFC office expenses CTB contribution (explain nonmonetary)\* TEL t.v. or cable airtime and production costs petition circulating PET CVC civic donations TRC candidate travel, lodging, and meals PHO phone banks candidate filing/ballot fees FIL

FIL candidate filing/ballot fees

FND fundraising events

FND fundraising events

FND independent expenditure supporting/opposing others (explain)\*

FND independent expenditure supporting/opposing others (explain)\*

FND independent expenditure supporting/opposing others (explain)\*

FND fundraising events

FND pholie ballos

FND polling and survey research

FNS staff/spouse travel, lodging, and meals

TRS 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)

Li Campaign illerature and manings	11tt print add			
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE O	R DESCRIPTION OF PAYMENT	AMOUNT PAID
Costco 3250 W. Grantline Rd	<b>6</b>	FND	Candy, snacks, supplies for fundraiser	514.91
Facebook  1 Hacker Way	<b>=</b>	WEB	Ads	123.83
Staples 2471 Naglee Rd		FND	Print services for campaign material	121.99
TCCA 24 W. 11th Street	0	MTG	Event Fee	140.00
The Press Wine Bar 165 W. 10th Street Tracy, CA		FND	Food For fundraiser 853.45 DJ fee 90.00	943.45

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

**SUBTOTAL \$** 1844.18

SCHEDU	II E	=	CONT

Amounts may be rounded to whole dollars.

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Statement covers period	CALIFORNIA 460
from	FORM 400
through <u>06/30/2022</u>	
	I.D. NUMBER

1446883

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LEG legal defense

Eleassia Davis For MAyor of Tracy 2022

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

RAD radio airtime and production costs MBR member communications CMP campaign paraphernalia/misc. MTG meetings and appearances RFD returned contributions CNS campaign consultants SAL campaign workers' salaries OFC office expenses CTB contribution (explain nonmonetary)\* petition circulating TEL t.v. or cable airtime and production costs CVC civic donations PET

TRC candidate travel, lodging, and meals PHO phone banks candidate filing/ballot fees TRS staff/spouse travel, lodging, and meals POL polling and survey research

FND fundraising events TSF transfer between committees of the same candidate/sponsor POS postage, delivery and messenger services independent expenditure supporting/opposing others (explain)\* IND VOT voter registration PRO professional services (legal, accounting)

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Walmart 310 W. Grantline	СМР	Campaign decor, giveaways, misc. supplies	170.07
Winco 2850 Pavilion Pkwy	FND	Food for fundraiser	135.69
FedEX 2116 W Grantline Rd Traces CA	LIT	Print Services for cmapaign materials	106.62
Heavenly 2035 Lugano Ct Manteca, CA 95337	FND	Balloon Arch	300.00
Menchies 1888 W. 11th Street Traces CA	FND	Froyo for fundraiser	400.00

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

**SUBTOTAL \$** 1112.31

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Amounts may be rounded to whole dollars.

Statement covers period 01/01/2022 from	CALIFORNIA 460 FORM
through <u>06/30/2022</u>	Page 6 17
	I.D. NUMBER
	1446883

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Eleassia Davis For MAyor of Tracy 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. MBR member communications meetings and appearances meetings and appearances office expenses SAL campaign workers' salaries

CVC civic donations

MBR member communications meetings and appearances office expenses office expenses SAL campaign workers' salaries

CVC civic donations

MBR member communications meetings and appearances office expenses SAL campaign workers' salaries

TEL tv. or cable and production costs returned contributions

TEL tv. or cable and production costs office expenses of ex

FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals staff/spouse travel, lodging, and meals polling and survey research TRS staff/spouse travel, lodging, and meals

IND independent expenditure supporting/opposing others (explain)\* POS postage, delivery and messenger services professional services (legal, accounting) POS 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 C	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
TAAA 356 W. Grantline Road T	MTG	Event Booth Fee	100.00
Ultimate print online doorhangers.com 2070 s. Hellman Ave Ontario, CA 91761	LIT	Print services for campaign materials, signage	2293.43

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

**SUBTOTAL \$** 2393.43