Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)			Date Stamp E-Filed 04/27/2022		FORNIA DRM 460
SEE INSTRUCTIONS ON REVERSE	Statement covers period           from         01/01/2022           through         04/23/2022	Date of election if applicable: (Month, Day, Year)	06:16:34 Filing ID: 203595435		of or Official Use Only
<ul> <li>State Candidate Election Committee</li> <li>Recall         <ul> <li>(Also Complete Part 5)</li> </ul> </li> <li>Seneral Purpose Committee         <ul> <li>Sponsored</li> <li>Small Contributor Committee</li> </ul> </li> </ul>	omplete Parts 1, 2, 3, and 4. Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	<ul> <li><b>2. Type of Statement:</b> <ul> <li>X Preelection Statement</li> <li>Semi-annual Statement</li> <li>Termination Statement</li> <li>(Also file a Form 410 Te</li> <li>Amendment (Explain be</li> </ul> </li> </ul>		Quarterly State         Special Odd-Ye         Supplemental F         Statement - Att	ear Report Preelection
3. Committee Information		Treasurer(s) NAME OF TREASURER Anna Pine MAILING ADDRESS	STATE	ZIP CODE	AREA CODE/PHONE
CITY STATE ZIP C Fresno CA 937 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.	28 (559)442-3762	Fresno NAME OF ASSISTANT TREASUF MAILING ADDRESS	CA RER, IF ANY	93728	(559)442-3762
CITY STATE ZIP C Sacramento CA 958 OPTIONAL: FAX / E-MAIL ADDRESS compliance@olsonremcho.com		CITY OPTIONAL: FAX / E-MAIL ADDR	STATE	ZIP CODE	AREA CODE/PHONE
4. Verification I have used all reasonable diligence in preparing and reviewin under penalty of perjury under the laws of the State of Californ Executed on <u>04/26/2022</u> Date Executed on <u>04/26/2022</u> Executed on <u>04/26/2022</u> Date	By <u>Anna Pine</u>	Signature of Treasurer or Assistant	Freasurer		and complete. I certify
Date	_ ,	Signature of Controlling Officeholder, Candidate, St	ate Measure Proponent		

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

Executed on

Date

CALIF FC	FORNI DRM	<sup>A</sup> 2	60
Page _	2	_ of _	10

NAME OF OFFICEHOLDER OR CANE	DIDATE			
OFFICE SOUGHT OR HELD (INCLUD	E LOCATION AND DIS	TRICT NUMBE	R IF APPLICABLE)	
RESIDENTIAL/BUSINESS ADDRESS	(NO. AND STREET)	CITY	STATE	ZIP

**Related Committees Not Included in this Statement:** *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.* 

COMMITTEE NAME		I.D. N	UMBER	
NAME OF TREASURER		CONT	ROLLED COMMITTEE?	
			YES 🗌 NO	
COMMITTEE ADDRESS	STREET ADDRESS (N	IO P.O. BOX)		
CITY	STATE	ZIP CODE	AREA CODE/PHO	NE
COMMITTEE NAME			UMBER	
		1.D. N	UNDER	
NAME OF TREASURER		CONT	ROLLED COMMITTEE?	
			YES 🗌 NO	
COMMITTEE ADDRESS	STREET ADDRESS (N	IO P.O. BOX)		
CITY	STATE	ZIP CODE	AREA CODE/PHO	NE

### 6. Primarily Formed Ballot Measure Committee

BALLOT NO. OR LETTER	JURISDICTION	SUPPORT

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY

# 7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	U SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page		Amounts may be rounded to whole dollars.			01/01/2022	CALIFORNIA FORM 460	
SEE INSTRUCTIONS ON REVERSE				throug	Jh04/23/2022	Page of0	
NAME OF FILER					- -	I.D. NUMBER	
Fresno Police Officers Association Political Action Committee						861499	
Contributions Received	(F	Column A TOTAL THIS PERIOD ROMATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTAL TO DATE		nmary for Candidates ne State Primary and	
1. Monetary Contributions Schedule A, Line 3	\$	31,109.70	\$	31,109.70			
2. Loans Received Schedule B, Line 3		0.00		0.00	1/1	through 6/30 7/1 to Date	
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	31,109.70	\$	31,109.70	20. Contributions Received \$	\$	
4. Nonmonetary Contributions Schedule C, Line 3		0.00		0.00	21 Expenditures		
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	31,109.70	\$	31,109.70		\$	
Expenditures Made					Expenditure Limit	Summary for State	
6. Payments Made Schedule E, Line 4	\$	42,031.14	\$	42,031.14		2	
7. Loans Made Schedule H, Line 3		0.00		0.00		ve Expenditures Made*	
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	42,031.14	\$	42,031.14	(If Subject t	o Voluntary Expenditure Limit)	
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3		0.00		0.00	Date of Election	Total to Date	
10. Nonmonetary Adjustment Schedule C, Line 3		0.00		0.00	(mm/dd/yy)		
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$	42,031.14	\$	42,031.14	///	\$	
Current Cash Statement					///	\$	
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	199,430.65	Тс	calculate Column B, ad	d		
13. Cash Receipts Column A, Line 3 above		31,109.70		nounts in Column A to th prresponding amounts			
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	om Column B of your las	*Amounts in this section t reported in Column B.	may be different from amounts	
15. Cash Payments Column A, Line 8 above		42,031.14		port. Some amounts in plumn A may be negative			
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	188,509.21	fig	jures that should be libtracted from previous			
If this is a termination statement, Line 16 must be zero.			pe	eriod amounts. If this is e first report being filed			
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	fo	r this calendar year, onl	у		
Cash Equivalents and Outstanding Debts			fro	om Lines 2, 7, and 9 (if ny).			
18. Cash Equivalents See instructions on reverse	\$	0.00					
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	0.00					

Schedule	Α						SCHEDULE A	
Monetary Contributions Received			s may be rounded whole dollars.	Statement covers period from01/01/2022		CALIFORNIA FORM 460		
SEE INSTRUCTIO	DNS ON REVERSE			through	2022	Page _	4 of10	
NAME OF FILER						I.D. NUI	MBER	
Fresno Poli	ce Officers Association Political Action Committe	e				86149	9	
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 - DEC	/EAR	PER ELECTION TO DATE (IF REQUIRED)	
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
			SUBTOTAL	\$ 0.00				
1. Amount re (Include a	A Summary eceived this period – itemized monetary contributions. Il Schedule A subtotals.)					(other t	I nt Committee han PTY or SCC)	
3. Total mon	eceived this period – unitemized monetary contributions etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colu			31,109.70	PTY	<ul> <li>Political</li> </ul>	e.g., business entity) Party ontributor Committee	

#### www.netfile.com

Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees SEE INSTRUCTIONS ON REVERSE		Amounts may be to whole do		Statement covers from01/01/20 through04/23/20	22	CALIFORNIA FORM 460	
NAME OF FILER Fresno Poli	ce Officers Association Political Action Comm	lttee				I.D. NUMB 861499	ER
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE CALENDAR (JAN. 1 - DEC	YEAR	PER ELECTION TO DATE (IF REQUIRED)
04/05/2022	Cary Catalano City Council Member City of Fresno District: 1 X Support Oppose	<ul> <li>Monetary Contribution</li> <li>Nonmonetary Contribution</li> <li>Independent Expenditure</li> </ul>		9,700.00	9,	700.00	
04/05/2022	Luis Chavez City Council Member City of Fresno District: 5 X Support Oppose	<ul> <li>Monetary Contribution</li> <li>Nonmonetary Contribution</li> <li>Independent Expenditure</li> </ul>		9,200.00	9,	200.00	
04/05/2022	Nelson Esparza       City Council Member       City of Fresno       District: 7       X     Support       Oppose	<ul> <li>Monetary Contribution</li> <li>Nonmonetary Contribution</li> <li>Independent Expenditure</li> </ul>		9,700.00	9,	700.00	
			SUBTOTAL	\$ 28,600.00			

## Schedule D Summary

1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)	40,800.00
2. Unitemized contributions and independent expenditures made this period of under \$100 \$1.	0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	40,800.00

(Continuation Sheet) Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		of Expenditures Amounts may be rounded to whole dollars.			22 FC	SCHEDULE D (CONT.) FORNIA 460 DRM 60f10
NAME OF FILER					I.D. NUI	MBER
Fresno Poli	ce Officers Association Political Action Com	mittee			86149	<u> </u>
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	E PER ELECTION TO DATE (IF REQUIRED)
04/05/2022	Mike Karbassi State Assembly Person District: 27 X Support Oppose	<ul> <li>Monetary Contribution</li> <li>Nonmonetary Contribution</li> <li>Independent Expenditure</li> </ul>		9,700.00	9,700.00	0 ₽2022 \$9,700.00
04/22/2022	Anne Marie Schubert Attorney General Statewide X Support Oppose	X       Monetary         Contribution         Nonmonetary         Contribution         Independent         Expenditure		2,500.00	2,500.00	0 ₽2022 \$2,500.00
	Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure				
	Support Dppose	<ul> <li>Monetary Contribution</li> <li>Nonmonetary Contribution</li> <li>Independent Expenditure</li> </ul>				

Schedule E Payments Made	Amounts may be rounded	Statem	ent covers period	CALIFORNIA FORM 460	
	to whole dollars.	from	01/01/2022	FORM 400	
SEE INSTRUCTIONS ON REVERSE		through	04/23/2022	Page7 of10	
NAME OF FILER				I.D. NUMBER	
Fresno Police Officers Association Political Action	861499				

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT		AMOUNT PAID
Catalano for City Council 2022 (ID# 1434792) Fresno, CA 93704	СТВ				9,700.00
Chavez for Council 2022 (ID# 1387060) Fresno, CA 93710	СТВ				9,200.00
Esparza for Fresno City Council 2022 (ID# 1396365) Fresno, CA 93710	CTB				9,700.00
* Payments that are contributions or independent expenditures must als	so be summarized on	Schedule D.		SUBTOTAL \$	28,600.00

### Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)\$	42,031.14
2. Unitemized payments made this period of under \$100 \$	0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	42,031.14

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Schedule E (Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars. from01/01/2022			01/01/2022	CALIFO FOR	M 400	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				through	04/23/2022	Page	
Fresno Police Officers Association Political Action Com						I.D. NUMB 861499	ER
CODES: If one of the following codes accurately describe CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	es the payment, y MBR member con MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and POS postage, de	nmunications d appearance nses ulating s survey resea livery and me	es	RAD ra RFD re SAL ca TEL t.v TRC ca TRS sta TSF tra VOT vo	escribe the paymen dio airtime and productio turned contributions impaign workers' salarie , or cable airtime and pr indidate travel, lodging, a aff/spouse travel, lodging, ansfer between committed ther registration formation technology cos	t. on costs oduction costs and meals g, and meals ges of the san	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION O	F PAYMENT		AMOUNT PAID
Mike Karbassi for Assembly 2022 (ID# 1445419) Fresno, CA 93710		CTB					9,700.00
Olson Remcho LLP Sacramento, CA 95814		PRO					164.96
Olson Remcho LLP Sacramento, CA 95814		PRO					616.06
Olson Remcho LLP Sacramento, CA 95814		PRO					155.76
Olson Remcho LLP Sacramento, CA 95814		PRO					294.36

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

**SUBTOTAL \$** 10,931.14

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Schedule E (Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.		Sta from _	tement covers period		CHEDULE E (CONT.) RNIA 460	
SEE INSTRUCTIONS ON REVERSE				throug	Jh04/23/2022	Page	9 of
NAME OF FILER Fresno Police Officers Association Political Action Co	mmittee					I.D. NUMBE 861499	R
CODES: If one of the following codes accurately describe CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	munications d appearance ses lating urvey resear very and me	95	RAD RFD SAL TEL TRC TRS TSF VOT	describe the payment. radio airtime and production returned contributions campaign workers' salaries t.v. or cable airtime and prod candidate travel, lodging, an staff/spouse travel, lodging, transfer between committee voter registration information technology costs	costs duction costs d meals and meals s of the sam	e candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE (	OR	DESCRIPTION	I OF PAYMENT		AMOUNT PAID
Schubert for Attorney General 2022 (ID# 1437995) Sacramento, CA 95814		СТВ					2,500.00

**SUBTOTAL \$** 2,500.00

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Additional Comments For Form 460	ADDITIONAL COMMENTS CALIFORNIA FORM 460
	Page of
NAME OF FILER	I.D. NUMBER
Fresno Police Officers Association Political Action Committee	861499

Schedule A - Fresno Police Officers Association, 994 North Van Ness Avenue, Fresno, CA 93728, is the intermediary for all contributions.

Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Statement covers period           from         04/24/2022           through         06/30/2022	<b>Date of election if applicable:</b> (Month, Day, Year)	Date Stamp E-Filed 07/26/2022 08:01:38 Filing ID: 204216296	Page	IFORNIA ORM         460           1         of8           For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through				
○ State Candidate Election Committee       Cu         ○ Recall       ○         (Also Complete Part 5)       ○         ☑ General Purpose Committee       ○         ② Sponsored       □         ③ Small Contributor Committee       ○	nplete Parts 1, 2, 3, and 4. imarily Formed Ballot Measure pommittee ) Controlled ) Sponsored so Complete Part 6) imarily Formed Candidate/ fficeholder Committee so Complete Part 7)	<ul> <li>2. Type of Statement:</li> <li>Preelection Statement</li> <li>Semi-annual Statement</li> <li>Termination Statement (Also file a Form 410 Te</li> <li>Amendment (Explain b</li> </ul>	,	Quarterly Stat Special Odd- Supplemental Statement - A	/ear Report
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Fresno Police Officers Association Political	61499 Action Committee	Treasurer(s) NAME OF TREASURER Anna Pine MAILING ADDRESS			
STREET ADDRESS (NO P.O. BOX)		CITY Fresno	STATE	ZIP CODE 93728	AREA CODE/PHONE (559)442-3762
CITY STATE ZIP COL Fresno CA 93728 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO	3 (559)442-3762	NAME OF ASSISTANT TREASU		93120	(555) 442-5702
CITY STATE ZIP COL Sacramento CA 95814 OPTIONAL: FAX / E-MAIL ADDRESS			STATE	ZIP CODE	AREA CODE/PHONE
compliance@olsonremcho.com		OPTIONAL: FAX / E-MAIL ADDF	(ESS		
4. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California Executed on <u>07/26/2022</u> Date Executed on <u>07/26/2022</u> Date	that the foregoing is true and correct. By <u>Anna Pine</u>	nowledge the information contained her Signature of Treasurer or Assistant	Treasurer		and complete. I certify

By .

Ву \_

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on \_

Executed on

Date

Date

CALIF FC	Fornia Drm	Z	<b> 60</b>
Page _	2	of _	8

5.	Officeholder	or	Candidate	Controlled	Committee
----	--------------	----	-----------	------------	-----------

NAME OF OFFICEHOLDER OR CANE	DIDATE			
OFFICE SOUGHT OR HELD (INCLUD	E LOCATION AND DIS	TRICT NUMB	ER IF APPLICABLE)	
RESIDENTIAL/BUSINESS ADDRESS	(NO. AND STREET)	CITY	STATE	ZIP

**Related Committees Not Included in this Statement:** *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.* 

COMMITTEE NAME		I.D. N	IUMBER
NAME OF TREASURER		CONT	ROLLED COMMITTEE?
			YES 🗌 NO
COMMITTEE ADDRESS	STREET ADDRESS (N	O P.O. BOX)	
CITY	STATE	ZIP CODE	AREA CODE/PHONE
COMMITTEE NAME		I.D. N	IUMBER
NAME OF TREASURER		CONT	ROLLED COMMITTEE?
			YES 🗌 NO
COMMITTEE ADDRESS	STREET ADDRESS (N	IO P.O. BOX)	
CITY	STATE	ZIP CODE	AREA CODE/PHONE

#### 6. Primarily Formed Ballot Measure Committee

	MEASURE
БАНОЛ	IVIEASURE

BALLOT NO. OR LETTER	JURISDICTION	SUPPORT

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY

# 7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	U SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page		Amounts may be rounded to whole dollars.			atement covers period 04/24/2022	CALIFORNIA FORM 46	
SEE INSTRUCTIONS ON REVERSE				through	gh06/30/2022	Page <u>3</u> of <u>8</u>	
NAME OF FILER					-	I.D. NUMBER	
Fresno Police Officers Association Political Action Committee						861499	
Contributions Received	(F	<b>COLUMN A</b> TOTAL THIS PERIOD ROMATTACHED SCHEDULES)		COLUMN B CALENDAR YEAR TOTAL TO DATE		nmary for Candidates he State Primary and	
1. Monetary Contributions Schedule A, Line 3	\$	17,244.50	\$	48,354.20			
2. Loans Received Schedule B, Line 3		0.00		0.00	1/1	through 6/30 7/1 to Date	
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	17,244.50	\$	48,354.20	20. Contributions Received \$	\$	
4. Nonmonetary Contributions Schedule C, Line 3		0.00		0.00	21. Expenditures		
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$.	17,244.50	\$	48,354.20		\$	
Expenditures Made					Expenditure Limit	Summary for State	
6. Payments Made Schedule E, Line 4	\$	16,197.17	\$	58,228.31		-	
7. Loans Made Schedule H, Line 3		0.00		0.00		ive Expenditures Made*	
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	16,197.17	\$	58,228.31	(If Subject	to Voluntary Expenditure Limit)	
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3		0.00		0.00	Date of Election	Total to Date	
10. Nonmonetary Adjustment Schedule C, Line 3		0.00		0.00	(mm/dd/yy)		
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$	16,197.17	\$	58,228.31	///	\$	
Current Cash Statement					//	\$	
12. Beginning Cash Balance Previous Summary Page, Line 16	\$.	188,509.21	Тс	calculate Column B, ad	d		
13. Cash Receipts Column A, Line 3 above		17,244.50		nounts in Column A to the formation of the second			
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	om Column B of your las	*Amounts in this section reported in Column B.	may be different from amounts	
15. Cash Payments Column A, Line 8 above		16,197.17		port. Some amounts in plumn A may be negativ			
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$.	189,556.54	fig	ures that should be be be			
If this is a termination statement, Line 16 must be zero.			pe	eriod amounts. If this is e first report being filed			
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	fo	r this calendar year, on rry over the amounts	у		
Cash Equivalents and Outstanding Debts			fro	om Lines 2, 7, and 9 (if ny).			
18. Cash Equivalents See instructions on reverse	\$	0.00					
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	0.00					

Schedule A Amounts may be rounded **Monetary Contributions Received** to whole dollars.

Statement covers period CALIFORNIA FORM 04/24/2022 from

through \_\_\_\_\_06/30/2022

I.D. NUMBER

Page \_\_\_\_\_ of \_\_\_\_8

#### Fresno Police Officers Association Political Action Committee

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

861499 AMOUNT PER ELECTION IF AN INDIVIDUAL. ENTER CUMULATIVE TO DATE FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR DATE CONTRIBUTOR OCCUPATION AND EMPLOYER RECEIVED THIS CALENDAR YEAR TO DATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE \* RECEIVED (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) **IND** COM ☐OTH PTY SCC **IND** COM OTH □ PTY SCC IND OTH □ PTY SCC IND OTH **PTY** SCC **IND** ΠOTH □ PTY SCC 0.00

SUBTOTAL\$

#### Schedule A Summary \*Contributor Codes IND - Individual 1. Amount received this period – itemized monetary contributions. COM - Recipient Committee (Include all Schedule A subtotals.) ...... \$ \_\_\_\_\_ 0.00 (other than PTY or SCC) OTH - Other (e.g., business entity) 2. Amount received this period - uniternized monetary contributions of less than \$100 ...... \$ 17,244.50 PTY – Political Party 3. Total monetary contributions received this period. SCC – Small Contributor Committee 17,244.50

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

#### www.netfile.com

SCHEDULE A

6

Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		Amounts may b to whole do		Statement covers from04/24/20 through06/30/20	)22 )22 )22 P	CALIFORNIA       460         FORM       460         Page       5       of       8         I.D. NUMBER       1.0.       1.0.       1.0.       1.0.		
Fresno Poli	ce Officers Association Political Action Comm	ittee			8	361499		
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC. 3	AR TO DATE		
06/15/2022	Jim Patterson State Assembly Person District: 8 X Support Oppose Annalisa Perea City Council Member City of Fresno District: 1	Image: Second state in the second		4,900.00 9,700.00		00.00 P2022 \$2,500.00 G2022 \$4,900.00 00.00		
	Support Oppose	_ Independent Expenditure						
	Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure						
		•	SUBTOTAL	. \$ 14,600.00				

## Schedule D Summary

1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)	14,600.00
2. Unitemized contributions and independent expenditures made this period of under \$100 \$100	0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	14,600.00

Schedule E Payments Made	Amounts may be rounded	Statem	ent covers period	CALIFORNIA 460
	to whole dollars.	from	04/24/2022	FORM 400
SEE INSTRUCTIONS ON REVERSE		through .	06/30/2022	Page6 of8
NAME OF FILER				I.D. NUMBER
Fresno Police Officers Association Political Actio	n Committee			861499

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

a	P campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
Cl	IS campaign consultants	MTG	meetings and appearances	RFD	returned contributions
C	B contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
C	C civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FI	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FN		POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IN	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LE	G legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
Lľ	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 PAYMEN	г	AMOUNT PAID
Olson Remcho LLP Sacramento, CA 95814	PRO				1,367.41
Olson Remcho LLP Sacramento, CA 95814	PRO				229.76
Patterson for Assembly 2022 (ID# 1435401) Sacramento, CA 95814	СТВ				4,900.00
* Payments that are contributions or independent expenditures mus	t also be summarized on	Sched	ule D.	SUBTOTAL\$	6,497.17

### Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)\$	16,197.17
2. Unitemized payments made this period of under \$100 \$	0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	16,197.17

to whole dollars.		04/24/2022	CALIFO			
			thro	ugh	-	<u>7</u> of <u>8</u>
nittee					I.D. NUMB 861499	ER
MBR member com MTG meetings and OFC office expen PET petition circul PHO phone banks POL polling and s POS postage, deli	munications d appearance ses lating urvey reseativery and m	es Irch essenger services	RAD RFD SAL TEL TRC TRS TSF VOT	radio airtime and production returned contributions campaign workers' salaries t.v. or cable airtime and pro candidate travel, lodging, a staff/spouse travel, lodging transfer between committe voter registration	n costs s oduction costs nd meals , and meals es of the sar	ne candidate/sponsor
	CODE	OR	DESCRIPTI	ON OF PAYMENT		AMOUNT PAID
	СТВ					9,700.00
	to whole do nittee s the payment, y MBR member com MTG meetings and OFC office expen PET petition circul PHO phone banks POL polling and s POS postage, deli PRO professional	to whole dollars.	to whole dollars.	Amounts may be rounded to whole dollars. from thro hittee s the payment, you may enter the code. Otherwise MBR member communications RAD MTG meetings and appearances RFD OFC office expenses SAL PET petition circulating TEL PHO phone banks TRC POL polling and survey research TRS POS postage, delivery and messenger services TSF PRO professional services (legal, accounting) VOT PRT print ads WEE	to whole dollars.       from04/24/2022	Amounts may be rounded to whole dollars.       Statement covers period from04/24/2022       CALIFO FOR         from04/24/2022       through06/30/2022       Page         through06/30/2022       Page         nittee       1.D. NUMB         sthe payment, you may enter the code. Otherwise, describe the payment.       861499         MBR       member communications       RAD         MTG       metings and appearances       RFD         OFC       office expenses       SAL         PET       petition circulating       TEL         POL       polling and survey research       TRC         POS       postage, delivery and messenger services       TSF         PRO       professional services (legal, accounting)       TSF         PRO       print ads       DESCRIPTION OF PAYMENT

Additional Comments For Form 460	ADDITIONAL COMMENTS CALIFORNIA FORM 460
	Page <u>8</u> of <u>8</u>
NAME OF FILER	I.D. NUMBER
Fresno Police Officers Association Political Action Committee	861499

Schedule A - Fresno Police Officers Association, 994 North Van Ness Avenue, Fresno, CA 93728, is the intermediary for all contributions.

Ca Ca (Ga	ecipient Committee ampaign Statement over Page overnment Code Sections 84200-84216.5)		Statement covers period           from         07/01/2022           through         12/31/2022	Date of election if applicable: (Month, Day, Year) 	Date Stamp E-Filed 01/23/2023 15:28:03 Filing ID: 205986603		ILIFORNIA 460
_			-				
	Type of Recipient Committee: All Co         ○ Officeholder, Candidate Controlled Committ         ○ State Candidate Election Committee         ○ Recall         (Also Complete Part 5)         ☑ General Purpose Committee         ② Sponsored         ③ Small Contributor Committee         ○ Political Party/Central Committee	ee Pri Co O (Als Off	plete Parts 1, 2, 3, and 4. marily Formed Ballot Measure mmittee Controlled Sponsored o Complete Part 6) marily Formed Candidate/ iceholder Committee o Complete Part 7)	<ul> <li>2. Type of Statement:</li> <li>Preelection Statement</li> <li>X Semi-annual Statement</li> <li>Termination Statement</li> <li>(Also file a Form 410 T</li> <li>Amendment (Explain b</li> </ul>	Termination)	Supplement	tatement d-Year Report tal Preelection Attach Form 495
3.	Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO Fresno Police Officers Association	COMMITTEE)	NUMBER 1499 Action Committee	Treasurer(s) NAME OF TREASURER Anna Pine MAILING ADDRESS			
	STREET ADDRESS (NO P.O. BOX)			CITY	STATE	ZIP CODE 93728	AREA CODE/PHONE
	CITY STA	TE ZIP COD	E AREA CODE/PHONE	Fresno NAME OF ASSISTANT TREASU		93728	(559)442-3762
	Fresno CA		(559)442-3762				
	MAILING ADDRESS (IF DIFFERENT) NO. AND STR		. ,	MAILING ADDRESS			
	CITY STA Sacramento CA OPTIONAL: FAX / E-MAIL ADDRESS compliance@olsonremcho.com		E AREA CODE/PHONE	CITY OPTIONAL: FAX / E-MAIL ADD	STATE	ZIP CODE	AREA CODE/PHONE
	Verification I have used all reasonable diligence in preparing under penalty of perjury under the laws of the Sta	•	hat the foregoing is true and correct.		erein and in the attache	d schedules is tr	ue and complete. I certify
	Executed on		By <u>Anna Pine</u>	Signature of Treasurer or Assistan	tTreasurer		
	Executed on		By <u>Anna Pine</u> Signature of G	-		r of Sponsor	
	Executed on		Ву				

Ву \_

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on

Date

Date

CALIF FC	Fornia Drm	Z	<b> 60</b>
Page _	2	of _	8

5.	Officeholder	or	Candidate	Controlled	Committee
----	--------------	----	-----------	------------	-----------

NAME OF OFFICEHOLDER OR CANDIDATE				
OFFICE SOUGHT OR HELD (INCLUD	E LOCATION AND DIS	TRICT NUMB	ER IF APPLICABLE)	
RESIDENTIAL/BUSINESS ADDRESS	(NO. AND STREET)	CITY	STATE	ZIP

**Related Committees Not Included in this Statement:** *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.* 

COMMITTEE NAME		I.D. N	IUMBER
NAME OF TREASURER		CONT	ROLLED COMMITTEE?
			YES 🗌 NO
COMMITTEE ADDRESS	STREET ADDRESS (N	O P.O. BOX)	
CITY	STATE	ZIP CODE	AREA CODE/PHONE
COMMITTEE NAME		I.D. N	IUMBER
NAME OF TREASURER		CONT	ROLLED COMMITTEE?
			YES 🗌 NO
COMMITTEE ADDRESS	STREET ADDRESS (N	IO P.O. BOX)	
CITY	STATE	ZIP CODE	AREA CODE/PHONE

#### 6. Primarily Formed Ballot Measure Committee

	MEASURE
БАНОЛ	IVIEASURE

BALLOT NO. OR LETTER	JURISDICTION	SUPPORT

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY

# 7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	U SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT

Attach continuation sheets if necessary

Campaign Disclosure Statement Am Summary Page		nounts may be round to whole dollars.	led	Sta from	tement covers period	CALIFORNIA FORM 46
SEE INSTRUCTIONS ON REVERSE				throug	Jh12/31/2022	Page3 of8
NAME OF FILER						I.D. NUMBER
Fresno Police Officers Association Political Action Committee						861499
Contributions Received	(F	Column A TOTAL THIS PERIOD ROMATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTAL TO DATE		nmary for Candidates he State Primary and
1. Monetary Contributions Schedule A, Line 3	\$	40,940.80	\$	89,295.00		
2. Loans Received Schedule B, Line 3		0.00		0.00	1/1	through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	40,940.80	\$	89,295.00	20. Contributions Received \$	\$
4. Nonmonetary Contributions Schedule C, Line 3		0.00		0.00	21. Expenditures	
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	40,940.80	\$	89,295.00		\$
Expenditures Made					Expenditure Limit	Summary for State
6. Payments Made Schedule E, Line 4	\$	21,623.98	\$	79,852.29		
7. Loans Made Schedule H, Line 3		0.00		0.00		ve Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	21,623.98	\$	79,852.29	(If Subject	to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3		0.00		0.00	Date of Election	Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3		0.00		0.00	(mm/dd/yy)	
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$	21,623.98	\$	79,852.29	///	\$
Current Cash Statement					///	\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	189,556.54	Тс	calculate Column B, ad	b	
13. Cash Receipts Column A, Line 3 above		40,940.80	ar	nounts in Column A to th prresponding amounts	е	
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	om Column B of your las	*Amounts in this section reported in Column B.	may be different from amounts
15. Cash Payments Column A, Line 8 above		21,623.98		port. Some amounts in plumn A may be negative		
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	208,873.36	fig	jures that should be		
If this is a termination statement, Line 16 must be zero.			pe	btracted from previous eriod amounts. If this is a first report being filed		
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	the first report being filed for this calendar year, only carry over the amounts			
Cash Equivalents and Outstanding Debts			fro	om Lines 2, 7, and 9 (if ny).		
18. Cash Equivalents See instructions on reverse	\$	0.00				
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	0.00				

Schedule	Α						SCHEDULE A
	Contributions Received		s may be rounded whole dollars.	Statement covers period       CALIFORN         from       07/01/2022       FORM			NIA 460
SEE INSTRUCTION	DNS ON REVERSE			through12/31/2	022	Page4	of8
NAME OF FILER						I.D. NUMBE	R
Fresno Poli	ce Officers Association Political Action Committe	ee				861499	
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)
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					
			SUBTOTAL	\$ 0.00			
1. Amount re	<b>A Summary</b> eceived this period – itemized monetary contributions. Il Schedule A subtotals.)		\$	0.00	IND-	tributor Codes - Individual I – Recipient Co (other than	
2. Amount re	eceived this period – unitemized monetary contributior	ns of less than \$	§100 \$	40,940.80	OTH	- Other (e.g.,	business entity)
3. Total mon	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colu			40,940.80		<ul> <li>Political Part</li> <li>Small Contri</li> </ul>	y butor Committee
						FPPC	Form 460 (Jan/2016

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Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees SEE INSTRUCTIONS ON REVERSE NAME OF FILER		Amounts may be to whole do		Statement covers from07/01/20 through12/31/20	22	CALIFOR FORM Page I.D. NUMBE	400 5 of8
Fresno Poli	ce Officers Association Political Action Comm	ittee				861499	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIV CALENDA (JAN. 1 - E	R YEAR	PER ELECTION TO DATE (IF REQUIRED)
12/22/2022	Mike Karbassi City Council Member City of Fresno District: 2 X Support Oppose	<ul> <li>Monetary Contribution</li> <li>Nonmonetary Contribution</li> <li>Independent Expenditure</li> </ul>		9,500.00		9,500.00 ₽2	024 \$9,500.00
12/22/2022	Tyler Maxwell City Council Member City of Fresno District: 4 Support Oppose	<ul> <li>Monetary Contribution</li> <li>Nonmonetary Contribution</li> <li>Independent Expenditure</li> </ul>		9,500.00		9,500.00 ₽2	024 \$9,500.00
	Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
			SUBTOTAL	\$ 19,000.00			

## Schedule D Summary

1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)	\$19,000.00
2. Unitemized contributions and independent expenditures made this period of under \$100	\$0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	19,000.00

Schedule E Payments Made	Amounts may be rounded	Stater	CALIFORNIA 460		
	to whole dollars.	from	07/01/2022	FORM 400	
SEE INSTRUCTIONS ON REVERSE		through	12/31/2022	Page6 of8	
NAME OF FILER				I.D. NUMBER	
Fresno Police Officers Association Political Ac	861499				

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT		AMOUNT PAID
Mike Karbassi for Fresno City Council District 2, 2024 (ID# 1414852) Fresno, CA 93711	CTB				9,500.00
Olson Remcho LLP Sacramento, CA 95814	PRO				942.56
Olson Remcho LLP Sacramento, CA 95814	PRO				498.68
* Payments that are contributions or independent expenditures must also be sum	edule D. SUBT	OTAL \$	10,941.24		

### Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)\$	21,573.98
2. Unitemized payments made this period of under \$100 \$	50.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	21,623.98

Schedule E			SCHEDULE E (CONT.)
(Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA 460
Payments Made	to whole dollars.	from07/01/2022	FORM 400
SEE INSTRUCTIONS ON REVERSE		through <u>12/31/2022</u>	Page7 of8
NAME OF FILER		I.D. NUMBER	
Fresno Police Officers Association Political	Action Committee		861499
CODES: If one of the following codes accurat	ely describes the payment, you may enter the code.	. Otherwise, describe the payment	<u>.</u>
CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production	n costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions	
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries	6
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and pro	oduction costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, a	nd meals

legal defense LEG campaign literature and mailings LIT

FND IND

- fundraising events independent expenditure supporting/opposing others (explain)\* POL polling and survey research POS postage, delivery and messenger services TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor PRO professional services (legal, accounting) PRT print ads VOT voter registration WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OI	R DESCRIPTION OF PAYMENT	AMOUNT PAID
Olson Remcho LLP Sacramento, CA 95814	PRO		249.68
Olson Remcho LLP Sacramento, CA 95814	PRO		269.88
Olson Remcho LLP Sacramento, CA 95814	PRO		347.50
Olson Remcho LLP Sacramento, CA 95814	PRO		265.68
	СТВ		9,500.00
* Payments that are contributions or independent expenditures must also be summa	rized on Schedule D.	SUBTOTAL \$	10,632.74

Additional Comments For Form 460	ADDITIONAL COMMENTS CALIFORNIA FORM 460
	Page <u>8</u> of <u>8</u>
NAME OF FILER	I.D. NUMBER
Fresno Police Officers Association Political Action Committee	861499

Schedule A - Fresno Police Officers Association, 994 North Van Ness Avenue, Fresno, CA 93728, is the intermediary for all contributions.

Ca Ca (Ga	ampaign Statement over Page overnment Code Sections 84200-84216.5)		S from throu		Date of election if applicable: (Month, Day, Year)	Date Stamp E-Filed 03/27/2023 16:53:28 Filing ID: 207364627		For Official Use Only
	Fresno CA MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR	throu	igii	-				
	<ul> <li>Officeholder, Candidate Controlled Comr</li> <li>State Candidate Election Committee</li> <li>Recall (Also Complete Part 5)</li> <li>General Purpose Committee</li> <li>Sponsored</li> <li>Small Contributor Committee</li> </ul>		<ul> <li>Primarily</li> <li>Committee</li> <li>Contr</li> <li>Spon</li> <li>(Also Compile</li> <li>(Also Trimarily</li> </ul>	Formed Ballot Measure ee rolled hsored lete Part 6) Formed Candidate/ lder Committee	<ul> <li>2. Type of Statement:</li> <li>Preelection Statement</li> <li>X Semi-annual Statement</li> <li>Termination Statement</li> <li>(Also file a Form 410 T</li> <li>X Amendment (Explain b</li> <li>Amend to update Summer</li> </ul>	Fermination)		-Year Report
3.	COMMITTEE NAME (OR CANDIDATE'S NAME IF Fresno Police Officers Associati		,		Treasurer(s) NAME OF TREASURER Anna Pine MAILING ADDRESS	STATE	ZIP CODE	AREA CODE/PHONE
					Fresno NAME OF ASSISTANT TREASU	CA	93728	(559)442-3762
			ZIP CODE	AREA CODE/PHONE	NAME OF ASSISTANT TREASU	KER, IF ANT		
			93728 OR P.O. BOX	(559)442-3762	MAILING ADDRESS			
	Sacramento		ZIP CODE 95814	AREA CODE/PHONE	CITY OPTIONAL: FAX / E-MAIL ADDI	STATE	ZIP CODE	AREA CODE/PHONE
	Verification I have used all reasonable diligence in prepar under penalty of perjury under the laws of the Executed on	0	•	e foregoing is true and correct. By <u>Anna Pine</u> By Anna Pine	nowledge the information contained he Signature of Treasurer or Assistant ontrolling Officeholder, Candidate, State Measure Pre	Treasurer		ie and complete. I certify
	Executed on			Ву				

Ву \_

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on \_\_\_\_

Date

Date

CALIF FC	Fornia Drm	Z	<b> 60</b>
Page _	2	of _	8

5.	Officeholder	or	Candidate	Controlled	Committee
----	--------------	----	-----------	------------	-----------

NAME OF OFFICEHOLDER OR CANDIDATE								
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)								
RESIDENTIAL/BUSINESS ADDRESS	(NO. AND STREET)	CITY	STATE	ZIP				

**Related Committees Not Included in this Statement:** *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.* 

COMMITTEE NAME		I.D. N	JMBER	
NAME OF TREASURER		CONT	ROLLED COMMITTEE?	
			YES 🗌 NO	
COMMITTEE ADDRESS	STREET ADDRESS (N	IO P.O. BOX)		
CITY	STATE	ZIP CODE	AREA CODE/PH	ONE
COMMITTEE NAME		I.D. N	JMBER	
NAME OF TREASURER		CONT	ROLLED COMMITTEE?	
			YES 🗌 NO	
COMMITTEE ADDRESS	STREET ADDRESS (N	IO P.O. BOX)		
CITY	STATE	ZIP CODE	AREA CODE/PH	
	SIAIL			

#### 6. Primarily Formed Ballot Measure Committee

	MEASURE
БАНОЛ	IVIEASURE

BALLOT NO. OR LETTER JURISDI	CTION	UPPORT
------------------------------	-------	--------

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY

# 7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	U SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page		Amounts may be rounded Statem to whole dollars. from			atement covers period	CALIFORNIA FORM 460		
SEE INSTRUCTIONS ON REVERSE				throu	gh12/31/2022	Page3 of8		
NAME OF FILER					-	I.D. NUMBER		
Fresno Police Officers Association Political Action Committee						861499		
Contributions Received	(F	Column A TOTAL THIS PERIOD ROMATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTALTO DATE		mmary for Candidates he State Primary and		
1. Monetary Contributions Schedule A, Line 3	\$	43,804.60	\$	92,158.80	<u>0</u>			
2. Loans Received Schedule B, Line 3		0.00		0.0	<u>1/1</u>	through 6/30 7/1 to Date		
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	43,804.60	\$	92,158.8	20. Contributions Received \$	\$		
4. Nonmonetary Contributions Schedule C, Line 3		0.00		0.0	21 Expenditures			
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	43,804.60	\$	92,158.80		\$\$		
Expenditures Made					Expenditure Limit	Summary for State		
6. Payments Made Schedule E, Line 4	\$	21,623.98	\$	79,852.29		-		
7. Loans Made Schedule H, Line 3		0.00		0.0		ve Expenditures Made*		
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	21,623.98	\$	79,852.2	(If Subject	to Voluntary Expenditure Limit)		
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3		0.00		0.0	Date of Election	Total to Date		
10. Nonmonetary Adjustment Schedule C, Line 3		0.00		0.0	(mm/dd/yy)			
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$	21,623.98	\$	79,852.2	<u> </u>	\$		
Current Cash Statement					///	\$		
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	189,556.54	Тс	o calculate Column B, ad	bd			
13. Cash Receipts Column A, Line 3 above		43,804.60		nounts in Column A to t prresponding amounts				
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	om Column B of your la	st reported in Column B.	may be different from amounts		
15. Cash Payments Column A, Line 8 above		21,623.98		port. Some amounts in olumn A may be negativ				
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	211,737.16	fig	jures that should be libtracted from previous				
If this is a termination statement, Line 16 must be zero.			pe	eriod amounts. If this is e first report being filed				
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	fo	r this calendar year, or arry over the amounts				
Cash Equivalents and Outstanding Debts			fro	om Lines 2, 7, and 9 (if ny).				
18. Cash Equivalents See instructions on reverse	\$	0.00						
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	0.00						

Schedule	Α							
Monetary	Monetary Contributions Received		s may be rounded whole dollars.	Statement covers period         CALIFORN           from         07/01/2022         FORM				
SEE INSTRUCTION	ONS ON REVERSE			through _12/31/2	.022	Page	4 of8	
NAME OF FILER						I.D. NUMB	JER	
Fresno Poli	ce Officers Association Political Action Committe			861499				
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)	
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
			SUBTOTAL	\$ 0.00				
1. Amount re	<b>A Summary</b> eceived this period – itemized monetary contributions. Il Schedule A subtotals.)	\$	0.00	IND -	*Contributor Codes IND – Individual COM – Recipient Committee			
2. Amount re	eceived this period – unitemized monetary contributior	ns of less than \$	\$100\$	43,804.60		(other than PTY or SCC) I – Other (e.g., business entity)		
3. Total mon	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colu			43,804.60		- Political Pa - Small Cont	tributor Committee	
						FPP(	C Form 460 (Jan/2016	

Supportin Candidate	of Expenditures ng/Opposing Other es, Measures and Committees	Amounts may be to whole do		Statement covers from	CALIFORNIA       460         FORM       460         Page5 of _8       8         I.D. NUMBER       1			
Fresno Poli	ce Officers Association Political Action Comm	ittee			861499			
DATE	DATE NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE		DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIV CALENDA (JAN. 1 - [	R YEAR	٦	ELECTION TO DATE REQUIRED)
12/22/2022	Mike Karbassi City Council Member City of Fresno District: 2 X Support Oppose	<ul> <li>Monetary Contribution</li> <li>Nonmonetary Contribution</li> <li>Independent Expenditure</li> </ul>		9,500.00		9,500.00	₽2024	\$9,500.00
12/22/2022	Tyler Maxwell City Council Member City of Fresno District: 4 X Support Oppose	<ul> <li>Monetary Contribution</li> <li>Nonmonetary Contribution</li> <li>Independent Expenditure</li> </ul>		9,500.00		9,500.00	P2024	\$9,500.00
	Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure						
	·	•	SUBTOTAL	<b>\$</b> 19,000.00				

## Schedule D Summary

1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)	19,000.00
2. Unitemized contributions and independent expenditures made this period of under \$100 \$100	0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	19,000.00

Schedule E Payments Made	Amounts may be rounded	Stater	nent covers period	CALIFORNIA 460	
	to whole dollars.	from	07/01/2022	FORM 400	
SEE INSTRUCTIONS ON REVERSE		through	12/31/2022	Page of8	
NAME OF FILER				I.D. NUMBER	
Fresno Police Officers Association Political Action Committee				861499	

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT		AMOUNT PAID
Mike Karbassi for Fresno City Council District 2, 2024 (ID# 1414852) Fresno, CA 93711	CTB				9,500.00
Olson Remcho LLP Sacramento, CA 95814	PRO				942.56
Olson Remcho LLP Sacramento, CA 95814	PRO				498.68
* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SU			edule D. SUBT	OTAL \$	10,941.24

### Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)\$	21,573.98
2. Unitemized payments made this period of under \$100 \$	50.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) TOTAL \$	21,623.98

Schedule E						
(Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA 460			
Payments Made	to whole dollars.	from07/01/2022	FORM 400			
SEE INSTRUCTIONS ON REVERSE		through <u>12/31/2022</u>	Page7 of8			
NAME OF FILER	I.D. NUMBER					
Fresno Police Officers Association Political	Action Committee		861499			
CODES: If one of the following codes accurat	ely describes the payment, you may enter the code.	. Otherwise, describe the payment	•			
CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production	n costs			
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions				
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries	8			
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and pro	oduction costs			
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, a	nd meals			

legal defense LEG campaign literature and mailings LIT

FND IND

- fundraising events independent expenditure supporting/opposing others (explain)\* POL polling and survey research POS postage, delivery and messenger services TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor PRO professional services (legal, accounting) PRT print ads VOT voter registration WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE O	R DESCRIPTION OF PAYMENT	AMOUNT PAID
Olson Remcho LLP Sacramento, CA 95814	PRO		249.68
Olson Remcho LLP Sacramento, CA 95814	PRO		269.88
Olson Remcho LLP Sacramento, CA 95814	PRO		347.50
Olson Remcho LLP Sacramento, CA 95814	PRO		265.68
Tyler Maxwell for Fresno City Council 2024 (ID# 1415398) Fresno, CA 93704	СТВ		9,500.00
* Payments that are contributions or independent expenditures must also be summa	arized on Schedule D.	SUBTOTAL \$	10,632.74

Additional Comments For Form 460	ADDITIONAL COMMENTS CALIFORNIA FORM 460
	Page <u>8</u> of <u>8</u>
NAME OF FILER	I.D. NUMBER
Fresno Police Officers Association Political Action Committee	861499

Schedule A - Fresno Police Officers Association, 994 North Van Ness Avenue, Fresno, CA 93728, is the intermediary for all contributions.