

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)



Date Stamp	CALIFORNIA FORM 460
<div style="border: 1px solid red; padding: 5px; color: red;">E-Filed 01/31/2019 19:44:17 Filing ID: 176225687</div>	
Page <u>1</u> of <u>77</u>	
For Official Use Only	

Statement covers period	Date of election if applicable: (Month, Day, Year)
from <u>01/01/2018</u>	<u>11/05/2019</u>
through <u>12/31/2018</u>	

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- | | |
|---|--|
| <input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee
<input type="checkbox"/> State Candidate Election Committee
<input type="checkbox"/> Recall
<i>(Also Complete Part 5)</i> | <input type="checkbox"/> Primarily Formed Ballot Measure Committee
<input type="checkbox"/> Controlled
<input type="checkbox"/> Sponsored
<i>(Also Complete Part 6)</i> |
| <input type="checkbox"/> General Purpose Committee
<input type="checkbox"/> Sponsored
<input type="checkbox"/> Small Contributor Committee
<input type="checkbox"/> Political Party/Central Committee | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee
<i>(Also Complete Part 7)</i> |

2. Type of Statement:

- | | |
|--|---|
| <input type="checkbox"/> Preelection Statement | <input type="checkbox"/> Quarterly Statement |
| <input checked="" type="checkbox"/> Semi-annual Statement | <input type="checkbox"/> Special Odd-Year Report |
| <input type="checkbox"/> Termination Statement
(Also file a Form 410 Termination) | <input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
| <input type="checkbox"/> Amendment (Explain below) | |

3. Committee Information

I.D. NUMBER
1407918

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Vote Vallie Brown for Supervisor 2019

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>San Francisco</u>	<u>CA</u>	<u>94118</u>	<u>(628)899-6180</u>

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS

(415)221-3229 / political@viewavegrp.com

Treasurer(s)

NAME OF TREASURER

Vallie Brown

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>San Francisco</u>	<u>CA</u>	<u>94118</u>	<u>(628)899-6180</u>

NAME OF ASSISTANT TREASURER, IF ANY

Patricia Mar

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>San Francisco</u>	<u>CA</u>	<u>94118</u>	<u>(628)899-6180</u>

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 01/31/2019
Date

By Vallie Brown
Signature of Treasurer or Assistant Treasurer

Executed on 01/31/2019
Date

By Vallie Brown
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on _____
Date

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on _____
Date

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

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

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Vallie Brown

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

County Supervisor Supervisor: San Francisco District 5

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP
	San Francisco	CA	94118

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

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

COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

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

COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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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
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7. Primarily Formed Candidate/Officeholder Committee *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

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

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

SUMMARY PAGE

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>3</u> of <u>77</u>
		I.D. NUMBER 1407918

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vote Vallie Brown for Supervisor 2019

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions Schedule A, Line 3	\$ 93,228.27	\$ 93,228.27
2. Loans Received Schedule B, Line 3	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 93,228.27	\$ 93,228.27
4. Nonmonetary Contributions Schedule C, Line 3	69.82	69.82
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 93,298.09	\$ 93,298.09

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

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

Expenditures Made

	Column A	Column B
6. Payments Made Schedule E, Line 4	\$ 16,251.54	\$ 16,251.54
7. Loans Made Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 16,251.54	\$ 16,251.54
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	21,664.25	21,664.25
10. Nonmonetary Adjustment Schedule C, Line 3	69.82	69.82
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 37,985.61	\$ 37,985.61

Expenditure Limit Summary for State Candidates

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

Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____

Current Cash Statement

12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 0.00
13. Cash Receipts Column A, Line 3 above	93,228.27
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00
15. Cash Payments Column A, Line 8 above	16,251.54
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 76,976.73

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

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

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

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

18. Cash Equivalents See instructions on reverse	\$ 0.00
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ 21,664.25

Schedule A Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>4</u> of <u>77</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
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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)
08/09/2018	MATTHEW JOSEPH ROTHSCHILD SAN FRANCISCO, CA 94133	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ATTORNEY CITY AND COUNTY OF SAN FRANCISCO	500.00	500.00	
08/13/2018	ANNE THORNTON SAN FRANCISCO, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	100.00	350.00	
08/22/2018	LEELA GILL SAN FRANCISCO, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	MANAGER DIRECT COMMERCE	500.00	500.00	
08/22/2018	LAURENCE GRIFFIN SAN FRANCISCO, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	COMPLIANCE OFFICER CITY AND COUNTY OF SAN FRANCISCO	100.00	300.00	
08/22/2018	TERESA OLLE SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	POLICY & ADVOCACY CONSULTANT SELF-EMPLOYED/SAME NAME	500.00	500.00	
SUBTOTAL \$				1,700.00		

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 90,778.27
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 2,450.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 93,228.27

*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**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>5</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/22/2018	SUNSHINE POWERS SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OWNER LOVE ON HAIGHT	500.00	500.00	
08/22/2018	DAVID SALDIVAR SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PROPERTY MANAGER CRE PROPERTY MANAGEMENT	500.00	500.00	
08/22/2018	COREY SMITH SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ORGANIZER SAN FRANCISCO HOUSING ACTION COALITION	25.00	498.27	
08/22/2018	ISABEL WADE SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	NOT EMPLOYED NONE	100.00	350.00	
08/23/2018	DEREK REMSKI SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	LEGISLATIVE AIDE CITY AND COUNTY OF SAN FRANCISCO	250.00	500.00	
SUBTOTAL \$				1,375.00		

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 IND – Individual
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 PTY – Political Party
 SCC – Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>6</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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)
08/24/2018	WARREN LEGARIE SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SPORTS MANAGER LEGARIE MANAGEMENT, INC.	250.00	750.00	
08/24/2018	ANNE TAUPIER NOVATO, CA 94945	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PROJECT MANAGER CITY AND COUNTY OF SAN FRANCISCO	100.00	200.00	
08/25/2018	MARIANNE HESSE SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	NOT EMPLOYED NONE	100.00	210.00	
08/25/2018	ADRIAN WILLIAMS SAN FRANCISCO, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	EXECUTIVE DIRECTOR THE VILLAGE PROJECT	100.00	100.00	
08/27/2018	ELIZABETH COLEMAN EVERHARD ORLEANS, MA 2653	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	NOT EMPLOYED NONE	500.00	500.00	
SUBTOTAL \$				1,050.00		

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 (other than PTY or SCC)
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 PTY – Political Party
 SCC – Small Contributor Committee

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>7</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	----------------------------

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)
08/30/2018	CROCE CASCIATO PACIFICA, CA 94044	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	500.00	500.00	
08/31/2018	VICTORIA RIDEOUT SAN FRANCISCO, CA 94110	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RESEARCH CONSULTANT VJR CONSULTING	250.00	250.00	
09/05/2018	DAVID GOODSTEIN SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SCIENTIST LAWRENCE BERKELEY LAB	250.00	500.00	
09/05/2018	RICK THURBER SAN FRANCISCO, CA 94102	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	500.00	500.00	
09/06/2018	SF MODERATES (ID# 1245538) SAN RAFAEL, CA 94901	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
SUBTOTAL \$				2,000.00		

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 (other than PTY or SCC)
 OTH – Other (e.g., business entity)
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 SCC – Small Contributor Committee

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period
from 01/01/2018
through 12/31/2018

CALIFORNIA FORM 460
Page 8 of 77
I.D. NUMBER
1407918

NAME OF FILER

Vote Vallie Brown for Supervisor 2019

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/06/2018	MICHAEL SULLIVAN SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ATTORNEY ORRICK	500.00	500.00	
09/11/2018	DAVID CROMMIE SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	100.00	500.00	
09/11/2018	KAREN CROMMIE SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	100.00	525.00	
09/15/2018	ROBERT PATTERSON SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OWNER BLACK SANDS	250.00	250.00	
09/19/2018	BRIAN COYLE SAN FRANCISCO, CA 94121	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	BAR OWNER DANNY COYLE'S	250.00	250.00	
SUBTOTAL \$				1,200.00		

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IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>9</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/19/2018	SHERYL DAVIS SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	EXECUTIVE DIRECTOR CITY AND COUNTY OF SAN FRANCISCO	250.00	500.00	
09/20/2018	JAMES SPINGOLA SAN FRANCISCO, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DIRECTOR OF FACILITIES AND PARTNERSHIPS COLLECTIVE IMPACT	250.00	250.00	
09/21/2018	MICHAEL GAINES SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	MANAGEMENT CONSULTANT GAINES CONSULTING	250.00	250.00	
09/21/2018	EVAN MATTEO SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO BIG TREE PROPERTIES	500.00	500.00	
09/21/2018	MATTHEW NICHOLS SAN FRANCISCO, CA 94114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	GENERAL BUILDING CONTRACTOR DEEP ELM CONSTRUCTION, LLC	500.00	500.00	
SUBTOTAL \$				1,750.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>10</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/22/2018	MELONIE GREEN SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CO-EXECUTIVE DIRECTOR AFRICAN AMERICAN ART AND CULTURE COMPLEX	100.00	100.00	
09/23/2018	CYNTHIA CHAPMAN SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	FLIGHT ATTENDANT DELTA AIRLINES	100.00	125.00	
09/24/2018	FRANCISCO VARELA SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	VICE PRESIDENT, MOBILE PARTNERSHIPS FACEBOOK	100.00	100.00	
09/25/2018	CAT GOULET SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	INVESTIGATOR OFFICE OF THE FEDERAL PUBLIC DEFENDER	100.00	100.00	
09/25/2018	MELORRA GREEN SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CO- EXECUTIVE DIRECTOR AFRICAN AMERICAN ART AND CULTURE COMPLEX	100.00	100.00	
SUBTOTAL \$				500.00		

*Contributor Codes
 IND – Individual
 COM – Recipient Committee
 (other than PTY or SCC)
 OTH – Other (e.g., business entity)
 PTY – Political Party
 SCC – Small Contributor Committee

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>11</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/25/2018	LAURENCE GRIFFIN SAN FRANCISCO, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	COMPLIANCE OFFICER CITY AND COUNTY OF SAN FRANCISCO	200.00	300.00	
09/25/2018	SUSAN HORST SAN ANSELMO, CA 94960	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ATTORNEY CALIFORNIA APPELLATE LAW GROUP	100.00	100.00	
09/26/2018	NIKHIL CHANDHOK SAN FRANCISCO, CA 94110	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PRODUCT MANAGER FACEBOOK	250.00	250.00	
09/27/2018	TAMI BRYANT SAN FRANCISCO, CA 94115-3748	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	EMPLOYMENT SPECIALIST SAN FRANCISCO HUMAN SERVICES AGENCY	125.00	125.00	
09/27/2018	SHERYL DAVIS SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	EXECUTIVE DIRECTOR CITY AND COUNTY OF SAN FRANCISCO	250.00	500.00	
SUBTOTAL \$				925.00		

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 (other than PTY or SCC)
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 PTY – Political Party
 SCC – Small Contributor Committee

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>12</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/27/2018	MICHAEL HALL SAN FRANCISCO, CA 94102	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	TENNIS COACH SELF-EMPLOYED, SAME NAME	100.00	100.00	
09/27/2018	DEBBIE MESLOH SAN FRANCISCO, CA 94114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PRINCIPAL MESLOH STRATEGIES	100.00	200.00	
09/27/2018	LINDA FADEKE RICHARDSON SAN FRANCISCO, CA 94124 CONTRIBUTION RETURNED	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PRESIDENT & CEO ADR CONTINENTAL GROUP	500.00	0.00	
09/28/2018	MAJEID CRAWFORD SAN FRANCISCO, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	MEDIA PRODUCER SELF-EMPLOYED, SAME NAME	500.00	500.00	
09/28/2018	LENA EMMERY SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	REAL ESTATE BROKER LENA EMMERY REAL ESTATE BROKER	200.00	500.00	
SUBTOTAL \$				1,400.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>13</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/28/2018	BRUCE GLADSTONE SAN FRANCISCO, CA 94111	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	MANAGER VERDANT BUILDING	100.00	100.00	
09/28/2018	LAVONNE HICKERSON SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	IT BUSINESS ANALYST DELTA DENTAL	250.00	350.00	
09/28/2018	TIM HICKEY SAN FRANCISCO, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ADMINISTRATIVE OPERATIONS SPECIALIST CITY AND COUNTY OF SAN FRANCISCO	100.00	100.00	
09/28/2018	DE'ANTHONY JONES SAN FRANCISCO, CA 94109	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	NEIGHBORHOOD LIAISON CITY AND COUNTY OF SAN FRANCISCO	100.00	100.00	
09/28/2018	AWANEESH VERMA LODI, CA 95240	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PRODUCT MANAGER UBER	100.00	100.00	
SUBTOTAL \$				650.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>14</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/29/2018	KATHY CRUZ SAN ANTONIO, TX 78231	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CUSTOMER SERVICE REPRESENTATIVE AETNA	100.00	200.00	
10/01/2018	DALE DANLEY SAN FRANCISCO, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RESEARCH MANAGER UNIVERSITY OF CALIFORNIA, SAN FRANCISCO	100.00	100.00	
10/01/2018	TODD DAVID SAN FRANCISCO, CA 94114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	EXECUTIVE DIRECTOR SF HOUSING ACTION COALITION	250.00	250.00	
10/01/2018	ROXANE DIVOL SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	INDEPENDENT DIRECTOR WOLVERINE WORLDWIDE	250.00	250.00	
10/01/2018	LORI GANNON DALY CITY, CA 94015	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	HUMAN RIGHTS COMMISSION CAMPAIGN COORDINATOR CITY AND COUNTY OF SAN FRANCISCO	120.00	120.00	
SUBTOTAL \$				820.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 15 of 77

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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)
10/01/2018	CHARLES HIGGINS SAN FRANCISCO, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	STRATEGIST HIGGINS STRATEGY	100.00	100.00	
10/01/2018	RICHARD HILLIS SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	EXECUTIVE DIRECTOR FORT MASON CENTER	250.00	250.00	
10/01/2018	JONATHAN HOYT SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RECRUITER SINGULARITY UNIVERSITY	300.00	300.00	
10/01/2018	CHIP ISAAC SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	100.00	100.00	
10/01/2018	OWEN O'DONNELL SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	500.00	500.00	
SUBTOTAL \$				1,250.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 16 of 77

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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)
10/01/2018	CAITLIN STORHAUG SAN FRANCISCO, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	HEAD OF GLOBAL RECRUITMENT MARKETING & COMMUNICATION MCKINSEY & CO	25.00	125.00	
10/01/2018	AMAR THOMAS SAN FRANCISCO, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ATTORNEY CITY OF SAN FRANCISCO	100.00	100.00	
10/01/2018	MARISOL WAUTERS SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SENIOR PROJECT COORDINATOR COLLIERS INTERNATIONAL	100.00	100.00	
10/02/2018	BRANDON REIM SAN FRANCISCO, CA 94117-2813	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	MANAGER RHS PARTNERS	100.00	100.00	
10/02/2018	LINDA FADEKE RICHARDSON SAN FRANCISCO, CA 94124 RETURN OF CONTRIBUTION	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PRESIDENT & CEO ADR CONTINENTAL GROUP	-500.00	0.00	
SUBTOTAL \$				-175.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>17</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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)
10/03/2018	ANN BELDEN SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	FOOD STYLIST SELF-EMPLOYED, SAME NAME	500.00	500.00	
10/03/2018	CONSTANCE BERNSTEIN SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	FOUNDER AND PRINCIPAL CONSULTANT THE SYNCHRONICS GROUP TRIAL CONSULTANTS	100.00	200.00	
10/03/2018	RON LIBERTA PACIFICA, CA 94044	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	POLICE OFFICER CITY AND COUNTY OF SAN FRANCISCO	500.00	500.00	
10/03/2018	DEREK REMSKI SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	LEGISLATIVE AIDE CITY AND COUNTY OF SAN FRANCISCO	250.00	500.00	
10/04/2018	KEN CLEVELAND SAN FRANCISCO, CA 94134	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	100.00	100.00	
SUBTOTAL \$				1,450.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 18 of 77

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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)
10/04/2018	DAVID GOODSTEIN SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SCIENTIST LAWRENCE BERKELEY LAB	250.00	500.00	
10/04/2018	MICHAEL KROUSE SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ARTIST SELF-EMPLOYED, SAME NAME	500.00	500.00	
10/04/2018	DEREK LEE SAN FRANCISCO, CA 94133	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DIRECTOR OF COMPLIANCE & RESEARCH 50+1 STRATEGIES	100.00	100.00	
10/04/2018	JOANNA MCCLURE SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	NOT EMPLOYED NONE	100.00	100.00	
10/04/2018	TOM POSTON SAN FRANCISCO, CA 94117-4400	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DESIGNER/ACTIVIST SELF-EMPLOYED, SAME NAME	100.00	100.00	
SUBTOTAL \$				1,050.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 19 of 77

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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)
10/04/2018	COREY SMITH SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ORGANIZER SAN FRANCISCO HOUSING ACTION COALITION	473.27	498.27	
10/05/2018	JOEL ENGARDIO SAN FRANCISCO, CA 94132	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	MARKETING MANAGER FIREBRAND COMMUNICATIONS	250.00	250.00	
10/05/2018	ZACHARY FRANET SAN FRANCISCO, CA 94102	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PROJECT COORDINATOR ASSOCIATION RESERVES	500.00	500.00	
10/06/2018	MATT GOYNE SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	TRANSPORTATION PLANNER FEHR AND PEERS	100.00	100.00	
10/06/2018	SARAH NAGEL MISSION VIEJO, CA 92691	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CERTIFIED PUBLIC ACCOUNTANT SELF-EMPLOYED, SAME NAME	500.00	500.00	
SUBTOTAL \$				1,823.27		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>20</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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10/07/2018	ALEXANDER CRUZ SAN ANTONIO, TX 78231	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ADMINISTRATOR SAI INTERPRETATION	100.00	100.00	
10/07/2018	KATHY CRUZ SAN ANTONIO, TX 78231	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CUSTOMER SERVICE REPRESENTATIVE AETNA	100.00	200.00	
10/08/2018	LAUREN KAHN SAN FRANCISCO, CA 94109	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DIRECTOR HEALTHRIGHT 360	500.00	500.00	
10/11/2018	DOUGLAS DURKIN SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DESIGNER DOUGLAS DURKIN DESIGN	100.00	100.00	
10/15/2018	MARTHA EHRENFELD SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	NOT EMPLOYED NONE	500.00	500.00	
SUBTOTAL \$				1,300.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
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Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>21</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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10/19/2018	DAVID COHEN SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	REALTOR CITY REAL ESTATE	250.00	250.00	
10/22/2018	ERICK NEPLOKH SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PRESIDENT UNIF MANAGEMENT INC.	500.00	500.00	
10/22/2018	CAITLIN STORHAUG SAN FRANCISCO, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	HEAD OF GLOBAL RECRUITMENT MARKETING & COMMUNICATION MCKINSEY & CO	100.00	125.00	
10/24/2018	BRUCE AGID SAN FRANCISCO, CA 94158	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	MANAGING DIRECTOR - BUSINESS DEVELOPMENT ENERGY EXPERTS INTERNATIONAL	250.00	500.00	
10/25/2018	CRAIG NEWMARK SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CRAIGSLIST, INC. SOFTWARE ENGINEER	500.00	500.00	
SUBTOTAL \$				1,600.00		

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 SCC – Small Contributor Committee

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>22</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
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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)
10/30/2018	JUSTIN JONES RICHMOND, VA 23221	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	COMMUNICATIONS DIRECTOR SPANBERGER FOR CONGRESS	100.00	100.00	
10/31/2018	CONSTANCE BERNSTEIN SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	FOUNDER AND PRINCIPAL CONSULTANT THE SYNCHRONICS GROUP TRIAL CONSULTANTS	100.00	200.00	
11/01/2018	CHASEL LEE SAN FRANCISCO, CA 94132	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ANALYST STATE OF CALIFORNIA	100.00	100.00	
11/02/2018	KIMBERLY BRANDON SAN FRANCISCO, CA 94124	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	FINANCIAL ADVISOR MORGAN STANLEY	250.00	250.00	
11/02/2018	CYNTHIA CHAPMAN SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	FLIGHT ATTENDANT DELTA AIRLINES	25.00	125.00	
SUBTOTAL \$				575.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>23</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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)
11/02/2018	DAVID GOFF SAN FRANCISCO, CA 94115-4613	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	250.00	500.00	
11/02/2018	GENEVIEVE JOPANDA SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CHIEF OF STAFF, OFFICE OF FIONA MA STATE OF CALIFORNIA	100.00	100.00	
11/02/2018	THURSTON KASLOFSKY SAN FRANCISCO, CA 94118 CONTRIBUTION RETURNED	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PRINCIPAL KASLOFSKY & ASSOCIATES	100.00	0.00	
11/03/2018	ETHEL KONOPKA SAN FRANCISCO, CA 94112	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	EDUCATOR SAN FRANCISCO STATE UNIVERSITY	100.00	100.00	
11/03/2018	RICHARD MAGARY SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	NON-PROFITS ADMINISTRATOR CASTRO MERCHANTS	100.00	100.00	
SUBTOTAL \$				650.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>24</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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)
11/06/2018	ISABELLE MALOUF SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CAMPAIGN OPERATIONS MANAGER 50+1 STRATEGIES, LLC.	500.00	500.00	
11/06/2018	NATALIE NAGEL SANTA MONICA, CA 90406	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	BOOKKEEPER SELF-EMPLOYED, SAME NAME	500.00	500.00	
11/09/2018	BRUCE AGID SAN FRANCISCO, CA 94158	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	MANAGING DIRECTOR - BUSINESS DEVELOPMENT ENERGY EXPERTS INTERNATIONAL	50.00	500.00	
11/09/2018	MARCIA ANDERSON SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	200.00	200.00	
11/09/2018	KAYLEIGH LLOYD SAN FRANCISCO, CA 94133	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DIRECTOR OF OPERATIONS CITY AND COUNTY OF SAN FRANCISCO	250.00	250.00	
SUBTOTAL \$				1,500.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>25</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	----------------------------

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)
11/09/2018	LORING SAGAN SAN FRANCISCO, CA 94102 CONTRIBUTION RETURNED	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	FOUNDER, DIRECTOR OF INVESTMENT BUILD	500.00	0.00	
11/09/2018	JOSHUA URIBE-RAMIREZ SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	BARISTA STARBUCKS	100.00	100.00	
11/10/2018	CHRISTOPHER CORGAS SAN FRANCISCO, CA 94112	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SENIOR PROGRAM MANAGER CITY AND COUNTY OF SAN FRANCISCO	150.00	150.00	
11/11/2018	MIMI SPARROW SAN FRANCISCO, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DIRECTOR, PRODUCT MARKETING WESTERN UNION DIGITAL	100.00	100.00	
11/12/2018	VICTORIA HASSID SAN FRANCISCO, CA 94109	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ATTORNEY STATE OF CALIFORNIA	250.00	250.00	
SUBTOTAL \$				1,100.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>26</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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11/13/2018	THURSTON KASLOFSKY SAN FRANCISCO, CA 94118 RETURN OF CONTRIBUTION	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PRINCIPAL KASLOFSKY & ASSOCIATES	-100.00	0.00	
11/13/2018	ALIX ROSENTHAL SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ATTORNEY LYFT	250.00	250.00	
11/13/2018	LORING SAGAN SAN FRANCISCO, CA 94102 RETURN OF CONTRIBUTION	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	FOUNDER, DIRECTOR OF INVESTMENT BUILD	-500.00	0.00	
11/14/2018	DEREK JANSEN SAN FRANCISCO, CA 94109	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ACCOUNT MANAGER RALLY CAMPAIGNS	250.00	250.00	
11/14/2018	PHIL KIM SAN FRANCISCO, CA 94110	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	EDUCATOR KIPP BAY AREA PUBLIC SCHOOLS	100.00	100.00	
SUBTOTAL \$				0.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 27 of 77

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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11/14/2018	BRIAN MCGUIGAN SAN FRANCISCO, CA 94123	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DIRECTOR, PUBLIC AFFAIRS LYFT	100.00	100.00	
11/14/2018	TIFFANY NORMAN SAN FRANCISCO, CA 94133	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ATTORNEY TRN LAW	100.00	100.00	
11/14/2018	MARK RANNEBERGER SAN FRANCISCO, CA 94133	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ACCOUNT SUPERVISOR, PUBLIC RELATIONS EDELMAN	100.00	100.00	
11/14/2018	LAURA TENNANT SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	VICE PRESIDENT OF PEOPLE, PORTFOLIO SERVICES NORWEST VENTURE PARTNERS	500.00	500.00	
11/15/2018	DEBBIE MESLOH SAN FRANCISCO, CA 94114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PRINCIPAL MESLOH STRATEGIES	100.00	200.00	
SUBTOTAL \$				900.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 28 of 77

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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11/15/2018	JAMES MEYER SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	100.00	100.00	
11/15/2018	LAWRENCE SIMI SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO GREENBELT ALLIANCE	250.00	250.00	
11/15/2018	TANTRUM SAN FRANCISCO, CA 94117	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00	100.00	
11/15/2018	DEBRA WALKER SAN FRANCISCO, CA 94110	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ARTIST SELF-EMPLOYED, SAME NAME	500.00	500.00	
11/16/2018	LINDA BREWER SAN FRANCISCO, CA 94118	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	100.00	100.00	
SUBTOTAL \$				1,050.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 29 of 77

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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11/16/2018	DAVID CROMMIE SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	200.00	500.00	
11/16/2018	KAREN CROMMIE SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	200.00	525.00	
11/16/2018	MALCOLM GISSEN SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	FINANCIAL ADVISOR FIRST REPUBLIC BANK	150.00	150.00	
11/16/2018	JUDY GODDESS SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	50.00	100.00	
11/16/2018	JOE GOLDMARK SAN FRANCISCO, CA 94131	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PARTNER AMOEBIA MUSIC	250.00	250.00	
SUBTOTAL \$				850.00		

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Monetary Contributions Received**

SCHEDULE A (CONT.)

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to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 30 of 77

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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11/16/2018	DENISE LAPINS SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	NOT EMPLOYED NONE	100.00	100.00	
11/16/2018	TED LOWENBERG SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PRESIDENT HAIGHT-ASHBURY IMPROVEMENT ASSOCIATION	100.00	100.00	
11/16/2018	WILLIAM MAHER SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SENIOR ADVISOR TO THE DIRECTOR, SAN FRANCISCO AIRPORT CITY AND COUNTY OF SAN FRANCISCO	500.00	500.00	
11/16/2018	LOIC NICOLAS SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PHOTOGRAPHER SELF-EMPLOYED, SAME NAME	100.00	100.00	
11/16/2018	ROBERT STEINHORN WALNUT CREEK, CA 94596	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	BUSINESS MANAGEMENT CONSULTANT STEINHORN CONSULTING	100.00	100.00	
SUBTOTAL \$				900.00		

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

SCHEDULE A (CONT.)

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Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>31</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	----------------------------

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11/16/2018	LAURA VIOLA SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	JOB SITE ANALYST CLEARY & ASSOCIATES	100.00	100.00	
11/17/2018	DANIEL EWALD SAN FRANCISCO, CA 94103	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ARCHITECT EWALD TAJBAKSH ARCHITECTURE (ETA)	250.00	250.00	
11/25/2018	REGINA DICK-ENDRIZZI SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DIRECTOR, OFFICE OF SMALL BUSINESS CITY AND COUNTY OF SAN FRANCISCO	250.00	250.00	
11/26/2018	MARCUS GAETANI MILL VALLEY, CA 94941	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PROPERTY MANAGER SELF-EMPLOYED, SAME NAME	500.00	500.00	
11/28/2018	ERIC ANG OAKLAND, CA 94619	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	TRIAL PRESENTATION CONSULTANT BOOMERANG LITIGATION SERVICES	500.00	500.00	
SUBTOTAL \$				1,600.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

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Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>32</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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11/28/2018	ANDREA BRUSS SAN FRANCISCO, CA 94102	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DEPUTY CHIEF OF STAFF CITY AND COUNTY OF SAN FRANCISCO	100.00	100.00	
11/28/2018	YOYO CHAN SAN FRANCISCO, CA 94110	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PUBLIC AFFAIRS DIRECTOR GOLDEN STATE WARRIORS	250.00	250.00	
11/28/2018	ROSEMARY DILGER SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	MANAGER RDJ ENTERPRISES	250.00	250.00	
11/28/2018	DENNIS FLYNN SAN FRANCISCO, CA 94133	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	INVESTOR FLYNN INVESTMENTS	500.00	500.00	
11/28/2018	CONOR JOHNSTON SAN FRANCISCO, CA 94131	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CANNABIS CONSULTANT CONOR JOHNSTON CONSULTING	500.00	500.00	
SUBTOTAL \$				1,600.00		

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

Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>33</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
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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)
11/28/2018	JONATHAN LAU BERKELEY, CA 94703	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ECONOMIC DEVELOPMENT OFFICIAL CITY AND COUNTY OF SAN FRANCISCO	100.00	100.00	
11/29/2018	ERIC ANDRESEN SAN FRANCISCO, CA 94102	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PRESIDENT WEST COAST PROPERTY MANAGEMENT CO.	500.00	500.00	
11/29/2018	LUIS BELMONTE SAN FRANCISCO, CA 94118	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	500.00	500.00	
11/29/2018	NANCY BELMONTE SAN FRANCISCO, CA 94118	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	500.00	500.00	
11/29/2018	ALAN HEINEMAN SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	100.00	100.00	
SUBTOTAL \$				1,700.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>34</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
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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)
11/29/2018	ANDREA JADWIN SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	NOT EMPLOYED NONE	100.00	100.00	
11/30/2018	CHRISTOPHER BRICKER SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PROPERTY MANAGER MAXIMS	500.00	500.00	
11/30/2018	HONOR HEYWARD BULKLEY SAN FRANCISCO, CA 94108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PROPERTY MANAGER & OWNER RHP MANAGEMENT	250.00	250.00	
11/30/2018	BORIS DELEPINE SAN FRANCISCO, CA 94127	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ANALYST CITY AND COUNTY OF SAN FRANCISCO	100.00	100.00	
11/30/2018	IRENE DICK-ENDRIZZI SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ANALYST KAISER	500.00	500.00	
SUBTOTAL \$				1,450.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>35</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
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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)
11/30/2018	KATHLEEN DRESCHER SAN FRANCISCO, CA 94111	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	500.00	500.00	
11/30/2018	CHRIS DRESSEL SAN FRANCISCO, CA 94133	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	REAL ESTATE AGENT FLYNN INVESTMENTS	500.00	500.00	
11/30/2018	GILLIAN GILLETT SAN FRANCISCO, CA 94110	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	TRANSPORTATION COORDINATOR CITY AND COUNTY OF SAN FRANCISCO	100.00	100.00	
11/30/2018	JUDY GODDESS SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	50.00	100.00	
11/30/2018	ELIZABETH HILL WALNUT CREEK, CA 94596	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	HOMEMAKER NONE	500.00	500.00	
SUBTOTAL \$				1,650.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 36 of 77

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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)
11/30/2018	JASON HILL WALNUT CREEK, CA 94596	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PROPERTY MANAGER SELF-EMPLOYED, SAME NAME	500.00	500.00	
11/30/2018	AMY LEE SAN FRANCISCO, CA 94121	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	FOUNDER 3S LLC	250.00	250.00	
11/30/2018	SUSAN MAERKI SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	HEALTH CONSULTANT PRICEWATERHOUSECOOPERS	250.00	250.00	
11/30/2018	KENT MAR SAN MATEO, CA 94402	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PROPERTY MANAGER CENTRON MANAGEMENT GROUP, INC.	500.00	500.00	
11/30/2018	KEN MCNEELY SAN FRANCISCO, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PRESIDENT AT&T	500.00	500.00	
SUBTOTAL \$				2,000.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period
from 01/01/2018
through 12/31/2018

CALIFORNIA FORM 460
Page 37 of 77
I.D. NUMBER
1407918

NAME OF FILER

Vote Vallie Brown for Supervisor 2019

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)
11/30/2018	SUSAN MITCHELL SAN FRANCISCO, CA 94111	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	250.00	500.00	
11/30/2018	SUSAN MITCHELL SAN FRANCISCO, CA 94111	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	250.00	500.00	
11/30/2018	MARGARET MUIR OAKLAND, CA 94610	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CAMPAIGN CONSULTANT MAGGIE MUIR CONSULTING	500.00	500.00	
11/30/2018	BARTHOLOMEW MURPHY SAN FRANCISCO, CA 94110	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OWNER MURPHY INVESMENTS	500.00	500.00	
11/30/2018	MARILYN POLACCI PACIFICA, CA 94044	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	HOMEMAKER NONE	500.00	500.00	
SUBTOTAL \$				2,000.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 38 of 77

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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)
11/30/2018	SAN FRANCISCO APARTMENT ASSOCIATION POLITICAL ACTION COMMITTEE (ID# 840002) SAN FRANCISCO, CA 94102	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
11/30/2018	GERALDINE SANGIACOMO SAN FRANCISCO, CA 94127	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	HOMEMAKER NONE	500.00	500.00	
11/30/2018	JAMES SANGIACOMO SAN FRANCISCO, CA 94127	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PRINCIPAL TRINITY MANAGEMENT, LLC	500.00	500.00	
11/30/2018	SUSAN SANGIACOMO SAN FRANCISCO, CA 94103	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	REAL ESTATE INVESTOR TRINITY PROPERTIES	500.00	500.00	
11/30/2018	JOHN VIPIANA SAN RAFAEL, CA 94903	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	INSURANCE BROKER HEFFERNAN INSURANCE BROKERS	500.00	500.00	
SUBTOTAL \$				2,500.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>39</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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)
11/30/2018	DAVID WASSERMAN SAN FRANCISCO, CA 94118	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	REAL ESTATE AGENT DAVE WASSERMAN REAL ESTATE	500.00	500.00	
12/01/2018	SARA FLYNN SAN FRANCISCO, CA 94118	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ASSET MANAGER/PARTNER FLYNN INVESTMENTS	500.00	500.00	
12/02/2018	JEFFREY CRETAN SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	COMMUNICATIONS DIRECTOR CITY AND COUNTY OF SAN FRANCISCO	500.00	500.00	
12/03/2018	DERICK BROWN EL CERRITO, CA 94530	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SENIOR ADVISOR CITY AND COUNTY OF SAN FRANCISCO	200.00	200.00	
12/03/2018	DAVID HOLLOWAY SAN FRANCISCO, CA 94102	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	COMPUTER SCIENTIST GOOGLE	250.00	250.00	
SUBTOTAL \$				1,950.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>40</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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)
12/03/2018	JEREMY POLLOCK SAN FRANCISCO, CA 94110	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ADMINISTRATIVE ANALYST CITY AND COUNTY OF SAN FRANCISCO	100.00	100.00	
12/04/2018	SEAN DONNELLY LARKSPUR, CA 94939	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DIRECTOR, CONSTRUCTION MANAGEMENT TMG PARTNERS	500.00	500.00	
12/04/2018	CATHY GREENWOLD SN FRANCISCO, CA 94109	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SENIOR ADVISOR TMG PARTNERS	500.00	500.00	
12/04/2018	PLUMBERS AND PIPEFITTERS U.A. LOCAL #246 COPE COMMITTEE (ID# 870601) FRESNO, CA 93727	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
12/04/2018	ANDREW THOMAS SAN FRANCISCO, CA 94104	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PARTNER TMG PARTNERS	500.00	500.00	
SUBTOTAL \$				2,100.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>41</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
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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)
12/05/2018	DAVID CROPPER WOODSIDE, CA 94062	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DIRECTOR OF DEVELOPMENT TMG PARTNERS	500.00	500.00	
12/05/2018	ANN MACLEOD MILL VALLEY, CA 94941	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ATTORNEY TMG PARTNERS	500.00	500.00	
12/05/2018	AMY NECHES OAKLAND, CA 94611	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PARTNER TMG PARTNERS	500.00	500.00	
12/05/2018	BARBARA OLEKSIW SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PROPERTY MANAGER SELF-EMPLOYED, SAME NAME	500.00	500.00	
12/05/2018	SCOTT VERGES BERKELEY, CA 94705	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	REAL ESTATE DEVELOPER TMG PARTNERS	500.00	500.00	
SUBTOTAL \$				2,500.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period
from 01/01/2018
through 12/31/2018

**CALIFORNIA
FORM 460**

Page 42 of 77

NAME OF FILER

Vote Vallie Brown for Supervisor 2019

I.D. NUMBER

1407918

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)
12/05/2018	RICHARD WATKINS SAN FRANCISCO, CA 94118	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	REAL ESTATE DEVELOPER TMG PARTNERS	500.00	500.00	
12/05/2018	PETER WELTCHECK SAN FRANCISCO, CA 94118	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	MANAGING PARTNER, CAPITAL MARKETS TMG PARTNERS	500.00	500.00	
12/06/2018	ADAM CHALL BURLINGAME, CA 94010	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PARTNER TMG PARTNERS	500.00	500.00	
12/06/2018	KENNETH DUPEE BERKELEY, CA 94705	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PARTNER TMG PARTNERS	500.00	500.00	
12/06/2018	BRIAN FLEMING SAN FRANCISCO, CA 94123	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PARTNER TMG PARTNERS	500.00	500.00	
SUBTOTAL \$				2,500.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period
from 01/01/2018
through 12/31/2018

CALIFORNIA FORM 460

Page 43 of 77

NAME OF FILER

Vote Vallie Brown for Supervisor 2019

I.D. NUMBER

1407918

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)
12/06/2018	WESLEY FOOTRACER SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	NOT EMPLOYED NONE	100.00	100.00	
12/06/2018	CHARLES GIBSON SAN FRANCISCO, CA 94110	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PARTNER TMG PARTNERS	500.00	500.00	
12/06/2018	DANIEL MARKS CHICAGO, IL 60622	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO EMPORIUM SF	500.00	500.00	
12/07/2018	DAVID CROMMIE SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	200.00	500.00	
12/07/2018	KAREN CROMMIE SAN FRANCISCO, CA 94117 CONTRIBUTION RETURNED	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	225.00	525.00	
SUBTOTAL \$				1,525.00		

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(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>44</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
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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)
12/07/2018	LENA EMMERY SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	REAL ESTATE BROKER LENA EMMERY REAL ESTATE BROKER	300.00	500.00	
12/07/2018	IAN EPSTEIN SAN FRANCISCO, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	100.00	100.00	
12/07/2018	JONATHAN HILL PLEASANTON, CA 94566	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CFO YBC ASSOCIATES, INC.	500.00	500.00	
12/07/2018	DAN MCDONALD SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	LENDER NORTHERN CALIFORNIA COMMUNITY LOAN FUND	100.00	100.00	
12/07/2018	CAROLYN MCKENNA SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	250.00	250.00	
SUBTOTAL \$				1,250.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period
from 01/01/2018
through 12/31/2018

CALIFORNIA FORM 460

Page 45 of 77

NAME OF FILER

Vote Vallie Brown for Supervisor 2019

I.D. NUMBER

1407918

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)
12/10/2018	1001 17TH STREET ASSOCIATES LLC SAN FRANCISCO, CA 94131	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
12/10/2018	121 NINTH LLC SAN FRANCISCO, CA 94102	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
12/10/2018	MICHAEL COHEN SAN FRANCISCO, CA 94114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PRINCIPAL STRADA INVESTMENT GROUP	500.00	500.00	
12/10/2018	MARGHERITA SAGAN SAN FRANCISCO, CA 94102	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OWNER PICCINO CAF?	500.00	500.00	
12/10/2018	SALLY TAYLOR SAN FRANCISCO, CA 94107	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	FARMER SELF-EMPLOYED, SAME NAME	100.00	100.00	
SUBTOTAL \$				2,100.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>46</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
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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)
12/10/2018	UNITED ASSOCIATION NO. 159 CONSUMER PROTECTION FUND SPONSORED BY PLUMBERS & STEAMFITTERS LOCAL 159 (ID# 862085) MARTINEZ, CA 94553	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
12/11/2018	KING-MING LAM MONTEREY PARK, CA 91755	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	MECHANICAL ENGINEER GMTO CORP	500.00	500.00	
12/12/2018	KIERSTEN BUSHNELL SAN FRANCISCO, CA 94109	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ASSISTANT BUYER GRASSROOTS	500.00	500.00	
12/12/2018	GABRIELLE DUHL OAKLAND, CA 94610	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	COMMUNITY LIASON BARBARY COAST SAN FRANCISCO	100.00	100.00	
12/12/2018	KAREN DUNDERSTADT SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CLINICAL PROFESSOR UNIVERSITY OF CALIFORNIA SAN FRANCIACO	500.00	500.00	
SUBTOTAL \$				2,100.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>47</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
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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)
12/12/2018	KIMBERLEE HARTWIG SAN FRANCISCO, CA 94109	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OFFICE MANAGER LOWER POLK COMMUNITY BENEFIT DISTRICT	500.00	500.00	
12/12/2018	KEVIN JOHNSON SAN FRANCISCO, CA 94109-4707	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DIRECTOR GRASS ROOTS	500.00	500.00	
12/12/2018	TERRY MULLER SAN FRANCISCO, CA 94103	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	MANAGER BARBARY COAST SAN FRANCISCO	500.00	500.00	
12/12/2018	ELRIC NEUMANN SAN FRANCISCO, CA 94102	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	MANAGER BARBARY COAST SAN FRANCISCO	250.00	250.00	
12/12/2018	JESUS RIVERO SAN FRANCISCO, CA 94102	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	GENERAL MANAGER GRASS ROOTS	500.00	500.00	
SUBTOTAL \$				2,250.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 48 of 77

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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)
12/12/2018	CARLOS RODRIGUEZ SAN FRANCISCO, CA 94109	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	MANAGER GRASSROOTS	100.00	100.00	
12/12/2018	ALFRED WILLIAMS SAN FRANCISCO, CA 94116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OWNER ALFRED WILLIAMS CONSULTANCY	500.00	500.00	
12/13/2018	TANYA FEDAN OAKLAND, CA 94601	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	GENERAL ADMINISTRATOR BARBARY COST SF	500.00	500.00	
12/13/2018	NATHANIEL HAAS SAN FRANCISCO, CA 94114	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OWNER BARBARY COST SF	500.00	500.00	
12/13/2018	JESSE HENRY SAN FRANCISCO, CA 94110	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	EXECUTIVE DIRECTOR BARBARY COAST SF	500.00	500.00	
SUBTOTAL \$				2,100.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 49 of 77

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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)
12/13/2018	KATANYA HENRY SAN FRANCISCO, CA 94110	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	MEDICAL ASSISTANT STANFORD FUNCTIONAL GENOMICS FACILITY	500.00	500.00	
12/13/2018	GREGORY LONGACRE SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	GENERAL MANANGER BARBARY COAST SF	500.00	500.00	
12/13/2018	REVA LONGACRE SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PSYCHIATRIC NURSE PRACTITIONER FELTON INSTITUTE	500.00	500.00	
12/13/2018	PLUMBERS & PIPEFITTERS LOCAL UNION 442 PAC (ID# 871625) MODESTO, CA 95356	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
12/13/2018	PLUMBERS & PIPEFITTERS LOCAL UNION NO. 447 (ID# 822258) SACRAMENTO, CA 95819	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
SUBTOTAL \$				2,500.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 50 of 77

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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)
12/13/2018	PLUMBERS & STEAMFITTERS LOCAL NO 467 STATE & POLITICAL ACTION FUND BURLINGAME, CA 94010	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
12/13/2018	CHRISTOPHER SCHULMAN SAN FRANCISCO, CA 94109	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	GENERAL MANAGER GRASS ROOTS	500.00	500.00	
12/14/2018	GORDON JONG SAN FRANCISCO, CA 94116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	REAL ESTATE BROKER ASSOCIATE SELF-EMPLOYED, SAME NAME	500.00	500.00	
12/14/2018	AIMEE LAM MONTEREY PARK, CA 91755	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PHYSICAL THERAPIST ENSIGN	500.00	500.00	
12/14/2018	ZOA TOWN PIEDMONT, CA 94611	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	VICE PRESIDENT TMG PARTNERS	350.00	350.00	
SUBTOTAL \$				2,350.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>51</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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)
12/17/2018	BEN GUEVARA SAN FRANCISCO, CA 94121	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	500.00	500.00	
12/18/2018	450 9TH STREET, LLC SAN FRANCISCO, CA 94103	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
12/18/2018	BRUCE AGID SAN FRANCISCO, CA 94158	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	MANAGING DIRECTOR - BUSINESS DEVELOPMENT ENERGY EXPERTS INTERNATIONAL	200.00	500.00	
12/18/2018	CHE SHENG CHAO SAN FRANCISCO, CA 94132	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	500.00	500.00	
12/18/2018	BURK CHUNG SAN FRANCISCO, CA 94103	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	500.00	500.00	
SUBTOTAL \$				2,200.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 52 of 77

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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)
12/18/2018	ANASTASIA DOBRETSOVA OAKLAND, CA 94601	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	EXECUTIVE ASSISTANT RIAZ CAPITAL	500.00	500.00	
12/18/2018	JOHN JAMES ROCCA SAN FRANCISCO, CA 94112	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	STUDENT NONE	500.00	500.00	
12/18/2018	MARISA WILLIAMS SAN FRANCISCO, CA 94116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PROJECT ENGINEER SWINERTON BUILDERS	500.00	500.00	
12/19/2018	ARMANTINA HENRIQUEZ SAN FRANCISCO, CA 94116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	INTERPRETER CITY AND COUNTY OF SAN FRANCISCO	500.00	500.00	
12/19/2018	TAI PETER LAM SAN FRANCISCO, CA 94116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ARCHITECT ARCHITECTS LTD	500.00	500.00	
SUBTOTAL \$				2,500.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>53</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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)
12/19/2018	YUET-MEI LAM SAN FRANCISCO, CA 94116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	500.00	500.00	
12/19/2018	ANNE TAUPIER NOVATO, CA 94945	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PROJECT MANAGER CITY AND COUNTY OF SAN FRANCISCO	100.00	200.00	
12/19/2018	ANNE THORNTON SAN FRANCISCO, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	250.00	350.00	
12/19/2018	U. .A. LOCAL 38 COPE FUND (ID# 746875) SAN FRANCISCO, CA 94103	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
12/19/2018	RODRIGO WILLIAMS SAN FRANCISCO, CA 94116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	FIREMAN CITY AND COUNTY OF SAN FRANCISCO	500.00	500.00	
SUBTOTAL \$				1,850.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>54</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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)
12/20/2018	DENIS CULLINANE SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OWNER CULLINANE PLASTERING	500.00	500.00	
12/20/2018	NOEL CULLINANE SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OWNER CULLINANE PLASTERING	500.00	500.00	
12/20/2018	DENISE DAVID SAN FRANCISCO, CA 94132	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DOG WALKER D'S DAWGS	500.00	500.00	
12/20/2018	WILLEM DECKER SAN FRANCISCO, CA 94116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	STUDENT NONE	500.00	500.00	
12/20/2018	TREVOR GREENLAW SAN FRANCISCO, CA 94131	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PROJECT MANAGER AM ROCCA, INC.	500.00	500.00	
SUBTOTAL \$				2,500.00		

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 (other than PTY or SCC)
 OTH – Other (e.g., business entity)
 PTY – Political Party
 SCC – Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>55</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
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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)
12/20/2018	GEMMA MAHER SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	OFFICE MANAGER CULLINANE CONSTRUCTION	500.00	500.00	
12/20/2018	AIDAN O'ROURKE SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PRINCIPAL CULLINANE PLASTERING	500.00	500.00	
12/20/2018	ANNETTE ROCCA SAN FRANCISCO, CA 94112	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	VICE PRESIDENT, OPERATIONS AM ROCCA, INC.	500.00	500.00	
12/20/2018	JEFFREY ROCCA SAN FRANCISCO, CA 94112	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	BUILDING CONTRACTOR AM ROCCA, INC.	500.00	500.00	
12/20/2018	BRENDAN UNIACKE DALY CITY, CA 94104	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	500.00	500.00	
SUBTOTAL \$				2,500.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>56</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
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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)
12/20/2018	ISABEL WADE SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	NOT EMPLOYED NONE	250.00	350.00	
12/21/2018	STEVEN GUAN SAN FRANCISCO, CA 94122	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ACCOUNTANT SELF-EMPLOYED, SAME NAME	500.00	500.00	
12/21/2018	ELISABETH ROBERTS SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	LACTATION CONSULTANT/REGISTERED NURSE KAISER	500.00	500.00	
12/22/2018	AVA DECKER SAN FRANCISCO, CA 94116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	MANAGER SOUL CYCLE SF	500.00	500.00	
12/22/2018	MARISA HEDGPETH SAN FRANCISCO, CA 94127	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	NOT EMPLOYED NONE	500.00	500.00	
SUBTOTAL \$				2,250.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>57</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	----------------------------

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)
12/22/2018	MARIANNE HESSE SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	NOT EMPLOYED NONE	110.00	210.00	
12/23/2018	MARCUS DUPLESSIS SAN MATEO, CA 94401	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ASSET MANAGER YBC ASSOCIATES, INC.	500.00	500.00	
12/23/2018	HERMAN KWAN SAN FRANCISCO, CA 94116	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ACCOUNTANT SELF-EMPLOYED, SAME NAME	500.00	500.00	
12/27/2018	MAYAH CURTIS SAN FRANCISCO, CA 94125	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SENIOR PRINCIPAL, SOLUTIONS+INNOVATION, COMMERCIAL SERVICES IQVIA	500.00	500.00	
12/27/2018	STEVE EDMONDSON SAN FRANCISCO, CA 94102	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CONCIERGE CHIFT HOTEL	500.00	500.00	
SUBTOTAL \$				2,110.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 58 of 77

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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)
12/27/2018	DAVID GOFF SAN FRANCISCO, CA 94115-4613	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED NONE	250.00	500.00	
12/27/2018	LAVONNE HICKERSON SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	IT BUSINESS ANALYST DELTA DENTAL	100.00	350.00	
12/27/2018	ATHENA KONSTIN SAN FRANCISCO, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	HOMEMAKER NONE	500.00	500.00	
12/27/2018	JOHN KONSTIN SAN FRANCISCO, CA 94102	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RESTAURANT OWNER JOHN'S GRILL	500.00	500.00	
12/27/2018	NATHAPOL KULANET SAN FRANCISCO, CA 94102	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	MANAGER JOHN'S GRILL	500.00	500.00	
SUBTOTAL \$				1,850.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 59 of 77

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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)
12/27/2018	WARREN LEGARIE SAN FRANCISCO, CA 94117 CONTRIBUTION RETURNED	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	SPORTS MANAGER LEGARIE MANAGEMENT, INC.	500.00	750.00	
12/27/2018	GERALD PETERS SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ANIMATOR INSIGHT MEDIA	100.00	100.00	
12/27/2018	PHILIP SARRIS SAN FRANCISCO, CA 94117	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	BUILDING CONTRACTOR SARRIS CONSTRUCTION	200.00	200.00	
12/27/2018	MAURICIO SIBRIAN SAN FRANCISCO, CA 94102	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CHEF JOHN'S GRILL	500.00	500.00	
12/27/2018	ERNIE SINOTAS SAN FRANCISCO, CA 94131	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PRINCIPAL SINOTAS CONSULTING	500.00	500.00	
SUBTOTAL \$				1,800.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>60</u> of <u>77</u>

NAME OF FILER Vote Vallie Brown for Supervisor 2019	I.D. NUMBER 1407918
--	------------------------

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)
12/27/2018	JASON YOUNG SAN FRANCISCO, CA 94115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ENGINEER SELF-EMPLOYED, SAME NAME	500.00	500.00	
12/28/2018	ANDREW FUNG OAKLAND, CA 94602	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	REALTOR BEATITUDES REALTY	500.00	500.00	
12/28/2018	KANG PANG SAN LEANDRO, CA 94578	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ACCOUNTS RECEIVABLE SPECIALIST BAY REA HEALTHCARE CENTER	500.00	500.00	
12/28/2018	JAMES WARSELL SAN FRANCISCO, CA 94102	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	BUILDING INSPECTION COMMISSIONER CITY AND COUNTY OF SAN FRANCISCO	100.00	100.00	
12/30/2018	ANNEMARIE CONROY SAN FRANCISCO, CA 94127	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	LAWYER UNITED STATES DEPARTMENT OF JUSTICE	500.00	500.00	
SUBTOTAL \$				2,100.00		

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 SCC – Small Contributor Committee

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period
from 01/01/2018
through 12/31/2018

CALIFORNIA FORM 460
Page 61 of 77
I.D. NUMBER
1407918

NAME OF FILER

Vote Vallie Brown for Supervisor 2019

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)
12/30/2018	JOAQUIN TORRES SAN FRANCISCO, CA 94112	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	DIRECTOR, OFFICE OF ECONOMIC AND WORKFORCE DEVELOPMENT CITY AND COUNTY OF SAN FRANCISCO	100.00	100.00	
12/31/2018	JUDSON TRUE SAN FRANCISCO, CA 94102	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CHIEF OF STAFF CALIFORNIA STATE ASSEMBLY	100.00	100.00	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$				200.00		

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OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

**Schedule C
Nonmonetary Contributions Received**

Amounts may be rounded to whole dollars.

SCHEDULE C

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 62 of 77
I.D. NUMBER		1407918

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vote Vallie Brown for Supervisor 2019

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 OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
					SUBTOTAL \$		

Attach additional information on appropriately labeled continuation sheets.

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.)	\$	0.00
2. Amount received this period – unitemized nonmonetary contributions of less than \$100	\$	69.82
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 \$	69.82

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 PTY – Political Party
 SCC – Small Contributor Committee

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>63</u> of <u>77</u>
NAME OF FILER		I.D. NUMBER
Vote Vallie Brown for Supervisor 2019		1407918

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vote Vallie Brown for Supervisor 2019

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/13/2018	SAN FRANCISCO WOMEN'S POLITICAL COMMITTEE	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		500.00	500.00	
		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose				
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
		<input type="checkbox"/> Support <input type="checkbox"/> Oppose				
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
		<input type="checkbox"/> Support <input type="checkbox"/> Oppose				
SUBTOTAL \$				500.00		

Schedule D Summary

- Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) \$ 500.00
- Unitemized contributions and independent expenditures made this period of under \$100..... \$ 79.04
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL \$** 579.04

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 64 of 77
NAME OF FILER		I.D. NUMBER
Vote Vallie Brown for Supervisor 2019		1407918

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vote Vallie Brown for Supervisor 2019

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
WELLS FARGO BANK SAN FRANCISCO, CA 94105	OFC			22.00
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			3.95
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			126.17

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

SUBTOTAL \$ 152.12

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	16,084.54
2. Unitemized payments made this period of under \$100	\$	167.00
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 \$	<u>16,251.54</u>

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 65 of 77
NAME OF FILER		I.D. NUMBER
Vote Vallie Brown for Supervisor 2019		1407918

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vote Vallie Brown for Supervisor 2019

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
ZAC MAYBURY SACRAMENTO, CA 95814	WEB			700.00
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			47.47
WELLS FARGO BANK SAN FRANCISCO, CA 94105	OFC			41.55
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			28.52
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			17.47

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

SUBTOTAL \$ 835.01

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>66</u> of <u>77</u>
NAME OF FILER		I.D. NUMBER
Vote Vallie Brown for Supervisor 2019		1407918

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vote Vallie Brown for Supervisor 2019

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
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			87.28
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			127.55
POLITICAL DATA INC. NORWALK, CA 90650			VOTER DATA. PAID VIA PEX CARD, 462 7TH AVENUE, 21ST FLOOR, NEW YORK, NY 10018	500.00
BUDGET SIGNS SAN FRANCISCO, CA 94103	CMP			105.79
DENNIS HEARNE SAN FRANCISCO, CA 94133			PHOTOGRAPHY	700.00

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

SUBTOTAL \$ 1,520.62

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>67</u> of <u>77</u>
NAME OF FILER		I.D. NUMBER
Vote Vallie Brown for Supervisor 2019		1407918

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vote Vallie Brown for Supervisor 2019

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
MAINARDI LAW SAN FRANCISCO, CA 94104	PRO			170.00
MAINARDI LAW SAN FRANCISCO, CA 94104	PRO			212.50
ZAC MAYBURY SACRAMENTO, CA 95814	WEB			475.00
MARGARET MUIR OAKLAND, CA 94610	MTG		REIMBURSED EXPENSES	79.04
MARGARET MUIR OAKLAND, CA 94610	OFC		REIMBURSED EXPENSES	120.00

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

SUBTOTAL \$ 1,056.54

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 68 of 77
NAME OF FILER		I.D. NUMBER
Vote Vallie Brown for Supervisor 2019		1407918

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vote Vallie Brown for Supervisor 2019

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
POLITICAL DATA INC. NORWALK, CA 90650			VOTER DATA	238.93
LAURA SEEGMILLER WEAVERVILLE, CA 96093	CMP			200.00
LAURA SEEGMILLER WEAVERVILLE, CA 96093	OFC			950.00
SPOTLIGHT PRINTING SAN FRANCISCO, CA 94107	OFC			507.78
SPOTLIGHT PRINTING SAN FRANCISCO, CA 94107	CMP			1,356.25

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

SUBTOTAL \$ 3,252.96

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>69</u> of <u>77</u>
NAME OF FILER		I.D. NUMBER
Vote Vallie Brown for Supervisor 2019		1407918

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vote Vallie Brown for Supervisor 2019

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
SPOTLIGHT PRINTING SAN FRANCISCO, CA 94107	CMP			705.25
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			181.85
WELLS FARGO BANK SAN FRANCISCO, CA 94105	OFC			39.93
DENNIS HEARNE SAN FRANCISCO, CA 94133			PHOTOGRAPHY	200.00
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			22.90

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

SUBTOTAL \$ 1,149.93

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>70</u> of <u>77</u>
NAME OF FILER		I.D. NUMBER
Vote Vallie Brown for Supervisor 2019		1407918

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vote Vallie Brown for Supervisor 2019

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
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			29.65
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			32.66
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			8.28
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			3.95
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			42.09

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

SUBTOTAL \$ 116.63

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>71</u> of <u>77</u>
NAME OF FILER		I.D. NUMBER
Vote Vallie Brown for Supervisor 2019		1407918

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vote Vallie Brown for Supervisor 2019

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
WELLS FARGO BANK SAN FRANCISCO, CA 94105	OFC			58.25
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			96.12
PEX NEW YORK, NY 10018	OFC		PAID VIA PEX CARD, 462 7TH AVENUE, 21ST FLOOR, NEW YORK, NY 10018	49.95
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			104.05
KRISTINE EKSTRAND SAN ANSELMO, CA 94960	OFC			110.00

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

SUBTOTAL \$ 418.37

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>72</u> of <u>77</u>
NAME OF FILER		I.D. NUMBER
Vote Vallie Brown for Supervisor 2019		1407918

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vote Vallie Brown for Supervisor 2019

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
KRISTINE EKSTRAND SAN ANSELMO, CA 94960	CMP			600.00
VIEW AVENUE GROUP SAN FRANCISCO, CA 94118	PRO			486.20
VIEW AVENUE GROUP SAN FRANCISCO, CA 94118	PRO			2,128.50
VIEW AVENUE GROUP SAN FRANCISCO, CA 94118	PRO			1,152.00
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			11.64

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

SUBTOTAL \$ 4,378.34

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>73</u> of <u>77</u>
NAME OF FILER		I.D. NUMBER
Vote Vallie Brown for Supervisor 2019		1407918

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vote Vallie Brown for Supervisor 2019

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
THE POSTAL CHASE SAN FRANCISCO, CA 94117	POS		PAID VIA PEX CARD, 462 7TH AVENUE, 21ST FLOOR, NEW YORK, NY 10018	186.00
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			154.29
WELLS FARGO BANK SAN FRANCISCO, CA 94105	OFC			51.57
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			128.01
PEX NEW YORK, NY 10018	OFC		PAID VIA PEX CARD, 462 7TH AVENUE, 21ST FLOOR, NEW YORK, NY 10018	50.05

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

SUBTOTAL \$ 569.92

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page <u>74</u> of <u>77</u>
NAME OF FILER		I.D. NUMBER
Vote Vallie Brown for Supervisor 2019		1407918

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vote Vallie Brown for Supervisor 2019

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
TRADER JOE'S SAN FRANCISCO, CA 94103	MTG		PAID VIA PEX CARD, 462 7TH AVENUE, 21ST FLOOR, NEW YORK, NY 10018	144.00
SAN FRANCISCO WOMEN'S POLITICAL COMMITTEE (ID# 1243711) SAN FRANCISCO, CA 94122	CTB			500.00
SPOTLIGHT PRINTING SAN FRANCISCO, CA 94107	CMP			1,736.00
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			154.07
PEX NEW YORK, NY 10018	OFC		PAID VIA PEX CARD, 462 7TH AVENUE, 21ST FLOOR, NEW YORK, NY 10018	24.95

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

SUBTOTAL \$ 2,559.02

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 75 of 77
NAME OF FILER		I.D. NUMBER
Vote Vallie Brown for Supervisor 2019		1407918

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vote Vallie Brown for Supervisor 2019

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
DEMOCRACY ENGINE LLC WASHINGTON, DC 20001	OFC			75.08

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

SUBTOTAL \$ 75.08

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 76 of 77
NAME OF FILER		I.D. NUMBER
Vote Vallie Brown for Supervisor 2019		1407918

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

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 CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD		
BEDFORD GROVE SAN FRANCISCO, CA 92122	CNS	0.00	4,000.00	0.00	4,000.00		
BEDFORD GROVE SAN FRANCISCO, CA 92122	CNS	0.00	5,000.00	0.00	5,000.00		
BEDFORD GROVE SAN FRANCISCO, CA 92122	CNS	0.00	5,000.00	0.00	5,000.00		
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.		SUBTOTALS \$		0.00\$	14,000.00\$	0.00\$	14,000.00

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) **INCURRED TOTALS \$** 21,664.25
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) **PAID TOTALS \$** 0.00
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** 21,664.25
May be a negative number

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2018	
through	12/31/2018	Page 77 of 77

NAME OF FILER	I.D. NUMBER
Vote Vallie Brown for Supervisor 2019	1407918

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

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

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
LAURA SEEGMILLER WEAVERVILLE, CA 96093	CMP	0.00	200.00	0.00	200.00
BEDFORD GROVE SAN FRANCISCO, CA 92122	CNS	0.00	5,000.00	0.00	5,000.00
VIEW AVENUE GROUP SAN FRANCISCO, CA 94118	PRO	0.00	2,464.25	0.00	2,464.25
SUBTOTALS \$		0.00 \$	7,664.25 \$	0.00 \$	7,664.25