Recipient Committee
Campaign Statement
Cover Page
(Government Code Sections 84200-84216.5)

Statement covers period
from 01/01/2021
through 06/30/2021

Date of election if applicable:
(Month, Day, Year)

Redlands City Clerk

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.
☐ Officeholder, Candidate Controlled Committee
☐ State Candidate Election Committee
☐ Recall
(Also Complete Part 5)
☐ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☐ Political Party/Central Committee
☐ Primarily Formed Ballot Measure Committee
☐ Controlled
☐ Sponsored
(Also Complete Part 6)
☐ Primarily Formed Candidate/Officeholder Committee
(Also Complete Part 7)

2. Type of Statement:
☐ Pre-election Statement
☐ Semi-annual Statement
☐ Termination Statement
(Also file a Form 410 Termination)
☐ Amendment (Explain below)
☐ Quarterly Statement
☐ Special Odd-Year Report
☐ Supplemental Pre-election Statement - Attach Form 495

3. Committee Information
I.D. NUMBER
1123169

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Redlands Police Officers Association Political Action Committee

STREET ADDRESS (NO P.O. BOX)
1121 L Street Suite 200

CITY
Sacramento
STATE
CA
ZIP CODE
95814
AREA CODE/PHONE
(916)556-1776

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

CITY
STATE
ZIP CODE
AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS
fpcc@rocksalaw.com

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 07/28/2021
Date

By
Signature of Treasurer or Assistant Treasurer

Executed on Date

By
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
5. Officeholder or Candidate Controlled Committee

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)</td>
</tr>
<tr>
<td>RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)</td>
</tr>
</tbody>
</table>

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.

<table>
<thead>
<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF TREASURER</td>
<td>CONTROLLED COMMITTEE?</td>
</tr>
<tr>
<td>COMMITTEE ADDRESS</td>
<td>STREET ADDRESS (NO P.O. BOX)</td>
</tr>
<tr>
<td>CITY</td>
<td>STATE</td>
</tr>
</tbody>
</table>

6. Primarily Formed Ballot Measure Committee

<table>
<thead>
<tr>
<th>NAME OF BALLOT MEASURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>BALLOT NO. OR LETTER</td>
</tr>
<tr>
<td>SUPPORT</td>
</tr>
</tbody>
</table>

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

| NAME OF OFFICEHOLDER, CANDIDATE, OR PROponent |
| OFFICE SOUGHT OR HELD | DISTRICT NO. IF ANY |

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

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
<th>SUPPORT</th>
<th>OPPOSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
<td>SUPPORT</td>
<td>OPPOSE</td>
</tr>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
<td>SUPPORT</td>
<td>OPPOSE</td>
</tr>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
<td>SUPPORT</td>
<td>OPPOSE</td>
</tr>
</tbody>
</table>

Attach continuation sheets if necessary
### Contributions Received

1. Monetary Contributions  
   - Schedule A, Line 3  
   - Column A: TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) $0.00  
   - Column B: CALENDAR YEAR TOTAL TO DATE $0.00

2. Loans Received  
   - Schedule B, Line 3  
   - Column A: $0.00  
   - Column B: $0.00

3. SUBTOTAL CASH CONTRIBUTIONS  
   - Add Lines 1 + 2  
   - Column A: $0.00  
   - Column B: $0.00

4. Nonmonetary Contributions  
   - Schedule C, Line 3  
   - Column A: $0.00  
   - Column B: $0.00

5. TOTAL CONTRIBUTIONS RECEIVED  
   - Add Lines 3 + 4  
   - Column A: $0.00  
   - Column B: $0.00

### Expenditures Made

6. Payments Made  
   - Schedule E, Line 4  
   - Column A: $50.00  
   - Column B: $50.00

7. Loans Made  
   - Schedule H, Line 3  
   - Column A: $0.00  
   - Column B: $0.00

8. SUBTOTAL CASH PAYMENTS  
   - Add Lines 6 + 7  
   - Column A: $50.00  
   - Column B: $50.00

9. Accrued Expenses (Unpaid Bills)  
   - Schedule F, Line 3  
   - Column A: $0.00  
   - Column B: $0.00

10. Nonmonetary Adjustment  
    - Schedule C, Line 3  
    - Column A: $0.00  
    - Column B: $0.00

11. TOTAL EXPENDITURES MADE  
    - Add Lines 8 + 9 + 10  
    - Column A: $50.00  
    - Column B: $50.00

### Current Cash Statement

12. Beginning Cash Balance  
    - Previous Summary Page, Line 16  
    - Column A: $65,795.42

13. Cash Receipts  
    - Column A, Line 3 above  
    - Column B: $0.00

14. Miscellaneous Increases to Cash  
    - Schedule I, Line 4  
    - Column A: $0.00  
    - Column B: $0.00

15. Cash Payments  
    - Column A, Line 8 above  
    - Column B: $0.00

16. ENDING CASH BALANCE  
    - Add Lines 12 + 13 + 14, then subtract Line 15  
    - Column A: $65,745.42

### 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 $ __________________

   / /  $ __________________

   / /  $ __________________

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

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).
Schedule C
Nonmonetary Contributions Received

<table>
<thead>
<tr>
<th>Date Received</th>
<th>Full Name, Street Address and Zip Code of Contributor (If Committee, Also Enter I.D. Number)</th>
<th>Contributor Code</th>
<th>Description of Goods or Services</th>
<th>Amount/Fair Market Value</th>
<th>Cumulative To Date Calendar Year (Jan 1 - Dec 31)</th>
<th>Per Election To Date (if Required)</th>
</tr>
</thead>
<tbody>
<tr>
<td>01/22/2021</td>
<td>Redlands Police Officers Association 1121 L Street (PO Box 282 Redlands CA 92373) Suite 200</td>
<td></td>
<td>PAC Administration</td>
<td>500.00 Memo</td>
<td>3,000.00</td>
<td></td>
</tr>
<tr>
<td>02/12/2021</td>
<td>Redlands Police Officers Association 1121 L Street (PO Box 282 Redlands CA 92373) Suite 200</td>
<td></td>
<td>PAC Administration</td>
<td>500.00 Memo</td>
<td>3,000.00</td>
<td></td>
</tr>
<tr>
<td>03/09/2021</td>
<td>Redlands Police Officers Association 1121 L Street (PO Box 282 Redlands CA 92373) Suite 200</td>
<td></td>
<td>PAC Administration</td>
<td>500.00 Memo</td>
<td>3,000.00</td>
<td></td>
</tr>
<tr>
<td>04/12/2021</td>
<td>Redlands Police Officers Association 1121 L Street (PO Box 282 Redlands CA 92373) Suite 200</td>
<td></td>
<td>PAC Administration</td>
<td>500.00 Memo</td>
<td>3,000.00</td>
<td></td>
</tr>
</tbody>
</table>

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 ..................... $ 0.00
3. Total nonmonetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) .................... TOTAL $ 0.00

*Contributor Codes
IND – Individual
COM – Recipient Committee
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee
Schedule C (Continuation Sheet)
Nonmonetary Contributions Received

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>DESCRIPTION OF GOODS OR SERVICES</th>
<th>AMOUNT/ FAIR MARKET VALUE</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>05/15/2021</td>
<td>Redlands Police Officers Association 1121 L Street (PO Box 282 Redlands CA 92373) Suite 200 Sacramento, CA 95814</td>
<td>☐ IND</td>
<td>☐ OTH</td>
<td>PAC Administration</td>
<td>500.00</td>
<td>3,000.00</td>
<td></td>
</tr>
<tr>
<td>06/07/2021</td>
<td>Redlands Police Officers Association 1121 L Street (PO Box 282 Redlands CA 92373) Suite 200 Sacramento, CA 95814</td>
<td>☐ IND</td>
<td>☐ OTH</td>
<td>PAC Administration</td>
<td>500.00</td>
<td>3,000.00</td>
<td></td>
</tr>
</tbody>
</table>

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL $ 0.00
Schedule E Payments Made

Amounts may be rounded to whole dollars.

Statement covers period from 01/01/2021 through 06/30/2021

Redlands Police Officers Association Political Action Committee

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

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

NAME AND ADDRESS OF PAYEE

<table>
<thead>
<tr>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
</table>

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

SUBTOTAL $ 0.00

Schedule E Summary

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