Recipient Committee Campaign Statement Cover Page					Piled Filed	
		fre	Statement covers period om_September 22, 2024	Date of election if applicable: (Month, Day, Year)	OCT 2 4 20	For Official Use Only
SEE INSTRUCTIONS ON REVERSE		th	rough October 19, 2024	November 5, 2024	By Deputy	la l
1. Type of Recipient Committee: A	II Committ	ees – Comple	te Parts 1, 2, 3, and 4.	2. Type of Statement:		
☐ Officeholder, Candidate Controlled Co ☐ State Candidate Election Committee ☐ Recall (Also Complete Part 5) ☐ General Purpose Committee ☐ Sponsored ☐ Small Contributor Committee ☐ Political Party/Central Committee		Comr C C S (Also Co	arily Formed Ballot Measure mittee ontrolled ponsored mplete Part 6) arily Formed Candidate/ cholder Committee mplete Part 7)	<ul> <li>✓ Preelection Statement</li> <li>Semi-annual Statement</li> <li>Termination Statement</li> <li>(Also file a Form 410 1</li> <li>Amendment (Explain b</li> </ul>	nt 🗔 t Fermination)	Quarterly Statement Special Odd-Year Report
3. Committee Information		I.D. NU 1466		Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME	F NO COM	MITTEE)		NAME OF TREASURER		
Committee to Elect Mike Holland				Kristen Lopez MAILING ADDRESS		
STREET ADDRESS (NO P.O. BOX)				CITY	STATE	ZIP CODE AREA CODE/PHONE
				Columbia	CA	95370
CITY	STATE	ZIP CODE	AREA CODE/PHONE	NAME OF ASSISTANT TREASU	RER, IF ANY	
Sonora MAILING ADDRESS (IF DIFFERENT) NO. AND	CA STREET OF	95370 R P.O. BOX	_	MAILING ADDRESS		
PO Box 3140	STATE	ZIP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE AREA CODE/PHONE
Sonora	CA	95370		- 10.20		
OPTIONAL: FAX / E-MAIL ADDRESS				OPTIONAL: FAX / E-MAIL ADDR	RESS	
4. Verification I have used all reasonable diligence in precertify under penalty of perjury under the last Executed on 10/22/2024  Date 10/22/2024		_			erein and in the attach	ned schedules is true and complete. I
Executed on 10/22/2024 Date			By ————————————————————————————————————		onent or Responsible Officer	of Sponsor

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on \_

Executed on \_\_\_

Date

Date

## **Campaign Disclosure Statement** Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period CALIFORNIA FORM from September 22, 2024 through October 19, 2024

SEE INSTRUCTIONS ON REVERSE I.D. NUMBER NAME OF FILER Committee to Elect Mike Holland 1466641

Contributions Received	(	Column A TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions	\$	1764.00	\$	17509.00	
2. Loans Received Schedule B, Line 3		0.00		5000.00	1
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	1764.00	\$	22509.00	20. Contributions 10096.00 \$ 7413.00
4. Nonmonetary Contributions		1473.80		1572.80	O4 Francischer
5. TOTAL CONTRIBUTIONS RECEIVEDAdd Lines 3 + 4	\$	2014.00	\$	24081.80	21. Expenditures 4253.63 \$ 12,370.58
Expenditures Made					Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$	5739.67	\$	12,370.58	Candidates
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	5739.67	\$	12,370.58	(if Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)		0.00		0.00	Date of Election Total to Date
10. Nonmonetary AdjustmentSchedule C, Line 3		0.00		0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$	5739.67	\$	12,370.58	/ \$
Current Cash Statement			Π		/ \$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	8496.09	To	calculate Column B.	
13. Cash Receipts		1764.00		ld amounts in Column to the corresponding	
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	aı	nounts from Column B	*Amounts in this section may be different from amounts reported in Column B.
15. Cash Payments		5739.67		your last report. Some mounts in Column A may	
16. ENDING CASH BALANCE	\$	4520.42	be	negative figures that	
If this is a termination statement, Line 16 must be zero.			pı	nould be subtracted from evious period amounts. If is is the first report being	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	fil OI	ed for this calendar year, nly carry over the amounts	
Cash Equivalents and Outstanding Debts		0.00		om Lines 2, 7, and 9 (if ny).	
18. Cash Equivalents See instructions on reverse	\$				
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	0.00			FPPC Form 460 (Jan/2016)
					FPPC Advice: advice@fppc.ca.gov (866/275-3772

www.fppc.ca.gov

Schedule	Α	
Monetary	<b>Contributions</b>	Received

Amounts may be rounded to whole dollars.

SCHEDULE A

www.fppc.ca.gov

CALIFORNIA 160

Statement covers period

			from September 2	22, 2024	FORM TO		
SEE INSTRUCTIO	DNS ON REVERSE			through October	19, 2024	Page	
NAME OF FILER Committee to	o Elect Mike Holland					1.D. NU 146664	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
9/24/2024	Jerold Gritz PO Box 4820 Sonora, CA 95370	☑IND □COM □OTH □PTY □SCC	Retired	100.00	100.00		
9/25/2024	Chris Walker Sonora, CA 95370	☑ IND □ COM □ OTH □ PTY □ SCC	Retired	100.00	200.00		
9/30/2024	Sherri Brennan Sonora, CA 95370	☑ IND □ COM □ OTH □ PTY □ SCC	Retired	250.00	250.00		
10/4/2024	David Wynne  Columbia, CA 95310	☑ IND □ COM □ OTH □ PTY □ SCC	Retired	200.00	200.00		
10/14/2024	Left Coast Land Clearing PO Box 4315 Sonora, CA 95370-1315	☐IND☐COM☐OTH☐PTY☐SCC		1000.00	1000.00		
			SUBTOTAL	\$			
Amount re     (Include al	A Summary ceived this period – itemized monetary contribution Il Schedule A subtotals.)		\$	4.00	IND- COM OTH PTY	(other – Other ( – Politica	al ent Committee than PTY or SCC) e.g., business entity)
3. Total mone (Add Lines	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, C	olumn A, Line	1.) <b>TOTAL \$</b> <sup>17</sup>	764.00	:PPC Advice: advi		C Form 460 (Jan/2016))

Schedule C			Amounts may be rounded to whole dollars.				SCHEDULE			
Nonmo	netary Contributions Received					Statement covers program September 22,			ORNIA 460	
	CTIONS ON REVERSE				thro	ough October 19,	2024	Page 4	of	
Committee	e to Elect Mike Holland							1.D. NUM 146664		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE*	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION GOODS OR SERV		AMOUNT/ FAIR MARKET VALUE	CUMULA DA CALENDA (JAN 1 -	TE AR YEAR	PER ELECTION TO DATE (IF REQUIRED)	
10/1/24	Cody Ritts Sonora, CA 95370	☑IND □COM □OTH □PTY □SCC		Website/Grapl Design Service		250.00	349.00			
10/7/24	Tuolumne County Republican Central Committee PO Box 4630, Sonora, CA 95370	□IND ☑COM □OTH □PTY □SCC		Campaign Materials - Postcards		1223.80	1223.80			
		□IND □COM □OTH □PTY □SCC								
		□IND □COM □OTH □PTY □SCC								
Attach ad	ditional information on appropriately labeled	continuation	sheets.	SUBTO	DTAL	\$				
1. Amount (Include	e C Summary received this period – itemized nonmonetal all Schedule C subtotals.)				\$ _	1473.80 0.00	IND COM	other th Other (e	nt Committee nan PTY or SCC) .g., business entity)	
Z. Amount	received this period – unitemized nonmone	tary contribut	tions of less than \$100		۔			- Political	Party ontributor Committee	

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 \$ \_

					SCHEDULE			
Schedule E	Amounts may b to whole de			Statement covers pe	CAL	IFORNIA 460		
Payments Made				f	rom September 22, 20	024 F	ORM TOU	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				t	hrough October 19, 2		5 of 6	
Committee to Elect Mike Holland						1466	5641	
CODES: If one of the following codes accurately describes  CMP campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  FND fundraising events  IND independent expenditure supporting/opposing others (explain)*  LEG legal defense  LIT campaign literature and mailings	MBR member com MTG meetings and OFC office expens PET petition circul PHO phone banks POL polling and s POS postage, deli	imunication d appearand les lating urvey resea very and me	s ces	RA RE SA TE TE TE TS VO	AD radio airtime and pro	oduction costs ns salaries and production co dging, and meals lodging, and theal mmittees of the sa	s ame candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR I	DESCRIP	TION OF PAYMENT		AMOUNT PAID	
T&C Signs		СМР					577.91	
Clark Broadcasting		RAD					1590.00	
Union Democrat		PRT					1500.00	
* Payments that are contributions or independent expenditures must also be	summarized on Sche	edule D.				SUBTOTA	L \$ 3667.91	
Schedule E Summary								
1. Itemized payments made this period. (Include all Schedule	E subtotals.)					\$	5739.67	
2. Unitemized payments made this period of under \$100						\$	0.00	
3. Total interest paid this period on loans. (Enter amount from	n Schedule B, Par	t 1, Colur	mn (e).)			\$	0.00	
4. Total payments made this period. (Add Lines 1, 2, and 3. E	Enter here and on	the Sum	mary Page, Colum	nn A, Li	ne 6.)	TOTAL \$	5739.67	

Schedule E (Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.	Statement covers period from July 1, 2024	SCHEDULE E (CONT.)  CALIFORNIA 460  FORM
SEE INSTRUCTIONS ON REVERSE		through September 21, 2024	Page of
NAME OF FILER			I.D. NUMBER
Committee to Elect Mike Holland			1466641
CODES: If one of the following codes accurately describ	pes the payment, you may enter the code. Oth	nerwise, describe the payment.	
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and prod TRC candidate travel, lodging, an	uction costs d meals
FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense	POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting)	TRS staff/spouse travel, lodging, TSF transfer between committees VOT voter registration	s of the same candidate/sponsor

PRT print ads

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

LIT campaign literature and mailings

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Clark Broadcasting	RAD		1368.00
T&C Signs	СМР		101.13
Mailings Unlimited	LIT		602.63

**SUBTOTAL \$** 2071.76

VOT voter registration
WEB information technology costs (internet, e-mail)