Recipient Committee
Campaign Statement
Cover Page

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1, 3, 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:
   - [x] Preelection Statement
   - [x] Semi-Annual Statement
   - [ ] Reel Statement
   - [ ] Amendment (Explain below)
   - [ ] Changes to the Summary page
   - [ ] Change to Cover page Part 2, ID added.

3. Committee Information
   - COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
     Hawkins for City Council 2020
   - STREET ADDRESS (NO P.O. BOX)
   - CITY
   - STATE
   - ZIP CODE
   - AREA CODE/PHONE
     San Jacinto
     Ca
     92583
   - MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
   - CITY
   - STATE
   - ZIP CODE
   - AREA CODE/PHONE
     San Jacinto
     Ca
     92581
   - NAME OF TREASURER
     Terri A. Fort
     MAILING ADDRESS
     CITY
     STATE
     ZIP CODE
     AREA CODE/PHONE
     San Jacinto
     Ca
     92581
   - NAME OF ASSISTANT TREASURER, IF ANY
     N/A
     MAILING ADDRESS
     CITY
     STATE
     ZIP CODE
     AREA CODE/PHONE
     N/A
     N/A
   - OPTIONAL: FAX / E-MAIL ADDRESS
     Hawkins4citycouncil2020@gmail.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 December 1, 2020
   By [Signature of Treasurer or Assistant Treasurer]
   Date

   Executed on December 1, 2020
   By [Signature of Controlling Officer/ Candidate, State Measure Proponent or Responsible Oficier of Sponsor]
   Date

   Executed on
   By [Signature of Controlling Officer/ Candidate, State Measure Proponent]
   Date

   Executed on
   By [Signature of Controlling Officer/ Candidate, State Measure Proponent]
   Date

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
5. Officeholder or Candidate Controlled Committee

| NAME OF OFFICEHOLDER OR CANDIDATE | Hawkins, Brian E. |
| OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) | San Jacinto City Council |
| RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) | N/A |
| CITY | San Jacinto |
| STATE | Ca |
| ZIP | 92583 |

6. Primarily Formed Ballot Measure Committee

| NAME OF BALLOT MEASURE | N/A |
| BALLOT NO. OR LETTER | N/A |
| JURISDICTION | N/A |
| SUPPORT | N/A |
| OPPOSE | N/A |

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

| NAME OF OFFICEHOLDER, CANDIDATE, OR PROONENT | N/A |
| OFFICE SOUGHT OR HELD | N/A |

7. Primarily Formed Candidate/Officeholder Committee

| NAME OF OFFICEHOLDER OR CANDIDATE | N/A |
| OFFICE SOUGHT OR HELD | N/A |
| SUPPORT | N/A |
| OPPOSE | N/A |

| NAME OF OFFICEHOLDER OR CANDIDATE | N/A |
| OFFICE SOUGHT OR HELD | N/A |
| SUPPORT | N/A |
| OPPOSE | N/A |

| NAME OF OFFICEHOLDER OR CANDIDATE | N/A |
| OFFICE SOUGHT OR HELD | N/A |
| SUPPORT | N/A |
| OPPOSE | N/A |

| NAME OF OFFICEHOLDER OR CANDIDATE | N/A |
| OFFICE SOUGHT OR HELD | N/A |
| SUPPORT | N/A |
| OPPOSE | N/A |

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 | Hawkins for City Council 2020 |
| I.D. NUMBER | N/A |
| NAME OF TREASURER | Terri A. Fort |
| CONTROLLED COMMITTEE? | NO |
| COMMITTEE ADDRESS | N/A |
| STREET ADDRESS (NO P.O. BOX) | N/A |
| CITY | San Jacinto |
| STATE | Ca |
| ZIP CODE | 92583 |
| AREA CODE/PHONE | N/A |

| COMMITTEE NAME | N/A |
| I.D. NUMBER | N/A |
| NAME OF TREASURER | N/A |
| CONTROLLED COMMITTEE? | NO |
| COMMITTEE ADDRESS | N/A |
| STREET ADDRESS (NO P.O. BOX) | N/A |
| CITY | N/A |
| STATE | N/A |
| ZIP CODE | N/A |
| AREA CODE/PHONE | N/A |

Attach continuation sheets if necessary.
### Campaign Disclosure Statement

**Summary Page**

Amounts may be rounded to whole dollars.

**Statement covers period**
from **September 20, 2020**
through **October 17, 2020**

**Page 3 of 17**

**NAME OF FILER**
Hawkins for City Council 2020

### Contributions Received

<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TOTAL THIS PERIOD</strong></td>
<td><strong>TOTAL TO DATE</strong></td>
</tr>
<tr>
<td><strong>(FROM ATTACHED SCHEDULES)</strong></td>
<td><strong>(Filing Period)</strong></td>
</tr>
</tbody>
</table>

1. Monetary Contributions ................................ Schedule A, Line 3 $0.00 $3,493.00
2. Loans Received ........................................... Schedule B, Line 3 $0.00 $600.00
3. SUBTOTAL CASH CONTRIBUTIONS ...................... Add Lines 1 + 2 $0.00 $4,093.00
4. Nonmonetary Contributions ............................ Schedule C, Line 3 $0.00 $80.00
5. TOTAL CONTRIBUTIONS RECEIVED ..................... Add Lines 3 + 4 $0.00 $4,173.00

### Expenditures Made

<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TOTAL THIS PERIOD</strong></td>
<td><strong>TOTAL TO DATE</strong></td>
</tr>
<tr>
<td><strong>(FROM ATTACHED SCHEDULES)</strong></td>
<td><strong>(Filing Period)</strong></td>
</tr>
</tbody>
</table>

6. Payments Made ......................................... Schedule E, Line 4 $0.00 $3,864.50
7. Loans Made ............................................. Schedule H, Line 3 $0.00 0.00
8. SUBTOTAL CASH PAYMENTS ............................. Add Lines 6 + 7 $0.00 $3,864.50
9. Accrued Expenses (Unpaid Bills) .................... Schedule F, Line 3 $0.00 0.00
10. Nonmonetary Adjustment .............................. Schedule G, Line 3 $0.00 0.00
11. TOTAL EXPENDITURES MADE .......................... Add Lines 8 + 9 + 10 $0.00 $3,864.50

### Current Cash Statement

12. Beginning Cash Balance ............................... Previous Summary Page, Line 16 $0.00
13. Cash Receipts ............................................. Column A, Line 3 above $0.00
14. Miscellaneous Increases to Cash ................... Schedule I, Line 4 $0.00
15. Cash Payments ............................................ Column A, Line 4 above $0.00
16. ENDING CASH BALANCE ............................... Add Lines 12 + 13 + 14, then subtract Line 15 $228.50

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

17. LOAN GUARANTEES RECEIVED .......................... Schedule B, Part 2 $0.00

### 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 $0.00

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

<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TOTAL THIS PERIOD</strong></td>
<td><strong>TOTAL TO DATE</strong></td>
</tr>
<tr>
<td><strong>(FROM ATTACHED SCHEDULES)</strong></td>
<td><strong>(Filing Period)</strong></td>
</tr>
</tbody>
</table>

20. Contributions Received ........................... 1/1 through 6/30 $0.00 $0.00
21. Expenditures Made ................................. 7/1 to Date $0.00 $0.00

### Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made*

   *(If Subject to Voluntary Expenditure Limit)*

   **Date of Election**
   **mm/dd/yyyy**

   **Total to Date**

   **11/03/2020** $0.00

---

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

---

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
# Schedule A
## Monetary Contributions Received

### See Instructions on Reverse

**NAME OF FILER**
Hawkins for City Council 2020

### Statement covers period
from September 20, 2020 through October 17, 2020

<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)</th>
<th>AMOUNT RECEIVED THIS PERIOD</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>8/5/2020</td>
<td>Richard J. Perry</td>
<td></td>
<td>Car Salesperson</td>
<td>$200.00</td>
<td>$200.00</td>
<td>N/A</td>
</tr>
<tr>
<td>8/6/2020</td>
<td>2Brothers LLC.</td>
<td></td>
<td>VIP Auto</td>
<td>$100.00</td>
<td>$100.00</td>
<td>N/A</td>
</tr>
<tr>
<td>8/7/2020</td>
<td>Krystyne Gray</td>
<td></td>
<td>Retired</td>
<td>$500.00</td>
<td>$500.00</td>
<td>N/A</td>
</tr>
<tr>
<td>8/10/2020</td>
<td>Stephany Panlilio</td>
<td></td>
<td>Realtor</td>
<td>$1,000.00</td>
<td>$1,000.00</td>
<td>N/A</td>
</tr>
<tr>
<td>8/18/2020</td>
<td>Jack Tretko</td>
<td></td>
<td>Assistant Director of Pharmacy Community Memorial Hospital</td>
<td>$200.00</td>
<td>$200.00</td>
<td>N/A</td>
</tr>
</tbody>
</table>

### Schedule A Summary

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) $3,000.00

2. Amount received this period – unitemized monetary contributions of less than $100 $493

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) $53,493.00
### Schedule A (Continuation Sheet)

**Monetary Contributions Received**

**NAME OF FILER**
Hawkins for City Council 2020

**DATE RECEIVED** | **FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR** (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | **CONTRIBUTOR CODE** | **IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME)** | **AMOUNT RECEIVED THIS PERIOD** | **CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)** | **PER ELECTION TO DATE (IF REQUIRED)** |
--- | --- | --- | --- | --- | --- | --- |
8/24/2020 | Scott Vowles | ☑ IND | CEO | $200.00 | N/A | N/A |
| | | | Alpine Financial | | | |
8/31/2020 | Jeff Talbott | ☑ IND | Chief of Public Safety | $100.00 | N/A | N/A |
| | | | University of Redlands | | | |
9/10/2020 | Khadejah Baratzadeh | ☑ IND | Retired | $700.00 | N/A | N/A |

N/A | N/A | ☑ IND | N/A | N/A | N/A |

**SUBTOTAL $ 1,000.00**

*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 B – Part 1
### Loans Received

Amounts may be rounded to whole dollars.

**Statement covers period from September 20, 2020 through October 17, 2020**

### See Instructions on Reverse

**Name of Filer:** Hawkins for City Council 2020

<table>
<thead>
<tr>
<th>Lender</th>
<th>Occupation</th>
<th>Outstanding Balance Beginning This Period</th>
<th>Amount Received This Period</th>
<th>Amount Paid or Forgiven This Period</th>
<th>Outstanding Balance At Close of This Period</th>
<th>Interest Paid This Period</th>
<th>Original Amount of Loan</th>
<th>Cumulative Contributions to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brian Hawkins</td>
<td>Pastor</td>
<td>$0.00</td>
<td>$600.00</td>
<td>0%</td>
<td>$0</td>
<td>0%</td>
<td>$600.00</td>
<td>CALENDAR YEAR $600.00</td>
</tr>
<tr>
<td>Brian Hawkins</td>
<td>Worship Center</td>
<td>0.00</td>
<td>646.50</td>
<td>0%</td>
<td>646.50</td>
<td>0%</td>
<td>646.50</td>
<td>CALENDAR YEAR $646.50</td>
</tr>
<tr>
<td>Brian Hawkins</td>
<td>Worship Center</td>
<td>0.00</td>
<td>160.00</td>
<td>0%</td>
<td>160.00</td>
<td>0%</td>
<td>160.00</td>
<td>CALENDAR YEAR $160.00</td>
</tr>
</tbody>
</table>

### SUBTOTALS

- $1,406.50
- $806.50
- $600.00

### Schedule B Summary

1. Loans received this period .............................................................. $1,406.50
2. Loans paid or forgiven this period .................................................. $806.50
3. Net change this period. (Subtract Line 2 from Line 1) ...................... $600.00

*Amounts forgiven or paid by another party also must be reported on Schedule A.

**If required.**

---

**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

---

FPCC Form 460 (Jan/2016))
FPCC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
### Schedule B - Part 2
**Loan Guarantors**

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<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>Loan</th>
<th>Amount Guaranteed This Period</th>
<th>Cumulative to Date</th>
<th>Balance Outstanding to Date</th>
</tr>
</thead>
</table>
| N/A | N/A | LENDER 
N/A | 0.00 | CALENDAR YEAR 
0.00 | 0.00 |
| N/A | N/A | LENDER 
N/A | 0.00 | CALENDAR YEAR 
0.00 | 0.00 |
| N/A | N/A | LENDER 
N/A | 0.00 | CALENDAR YEAR 
0.00 | 0.00 |
| N/A | N/A | LENDER 
N/A | 0.00 | CALENDAR YEAR 
0.00 | 0.00 |

**Subtotal**: $0.00

---

*FPCC Form 460 (Jan/2016))
FPCC Advice: advice@fpcc.ca.gov (866/275-3772)
www.fpcc.ca.gov*
### Schedule C
Nonmonetary Contributions Received

**Amounts may be rounded to whole dollars.**

**Statement covers period from** September 20, 2020 **through October 17, 2020**

**NAME OF FILER**
Hawkins for City Council 2020

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR</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>8/19/20</td>
<td>Elias Hutchison</td>
<td>□ IND □ COM □ OTH □ PTY □ SCC</td>
<td>Solo Wrap</td>
<td>8 Magnetic Car Signs</td>
<td>$80.00</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>N/A</td>
<td></td>
<td>□ IND □ COM □ OTH □ PTY □ SCC</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>N/A</td>
<td></td>
<td>□ IND □ COM □ OTH □ PTY □ SCC</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL $** $80.00

### Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions.
   (Include all Schedule C subtotals.)
   
   $0.00

2. Amount received this period – itemized nonmonetary contributions of less than $100
   
   $80.00

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 $80.00

---

*Contributor Codes
IND = Individual
COM = Recipient Committee
OTH = Other (e.g., business entity)
PTY = Political Party
SCC = Small Contributor Committee*
## Schedule D Summary

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) ........................................... $ 0.00

2. Unititemized contributions and independent expenditures made this period of under $100. ........................................................................... $ 0.00

3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ........... TOTAL.. $ 0.00
### Schedule D (Continuation Sheet)
#### Summary of Expenditures
Supporting/Opposing Other Candidates, Measures and Committees

**NAME OF FILER**
Hawkins for City Council 2020

<table>
<thead>
<tr>
<th>DATE</th>
<th>NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE</th>
<th>TYPE OF PAYMENT</th>
<th>DESCRIPTION (IF REQUIRED)</th>
<th>AMOUNT THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
</table>
| N/A  | □ Monetary Contribution  
□ Nonmonetary Contribution  
□ Independent Expenditure | N/A | N/A | N/A | N/A |
| N/A  | □ Monetary Contribution  
□ Nonmonetary Contribution  
□ Independent Expenditure | N/A | N/A | N/A | N/A |
| N/A  | □ Monetary Contribution  
□ Nonmonetary Contribution  
□ Independent Expenditure | N/A | N/A | N/A | N/A |
| N/A  | □ Monetary Contribution  
□ Nonmonetary Contribution  
□ Independent Expenditure | N/A | N/A | N/A | N/A |

**SUBTOTAL $ 0.00**
## Schedule E Payments Made

Amounts may be rounded to whole dollars.

**Statement covers period**
from: September 20, 2020
through: October 17, 2020

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

- **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 communications
- **MTG**: meetings and appearances
- **OFC**: office expenses
- **PET**: petition circulating
- **PHO**: phone banks
- **POL**: polling and survey research
- **POS**: postage, delivery and messenger services
- **PRO**: professional services (legal, accounting)
- **PRT**: print ads
- **RAD**: radio airtime and production costs
- **RFD**: returned contributions
- **SAL**: campaign workers' salaries
- **TEL**: t.v. or cable airtime and production costs
- **TRC**: candidate travel, lodging, and meals
- **TRS**: staff/spouse travel, lodging, and meals
- **TSF**: transfer between committees of the same candidate/sponsor
- **VOT**: voter registration
- **WEB**: information technology costs (internet, e-mail)

### NAME AND ADDRESS OF PAYEE
(BOTH COMMITTEE ALSO ENTER E.D. NUMBER)

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Solo Wrap</td>
<td>CMP</td>
<td>Mobile Campaign Car Wrap Banners</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$2,250.00</td>
</tr>
<tr>
<td>Namercs</td>
<td>CMP</td>
<td>Magnetic Car Signs</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Flyers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$646.50</td>
</tr>
<tr>
<td>Anedot Inc.</td>
<td>OFC</td>
<td>Service fees</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$51.00</td>
</tr>
</tbody>
</table>

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

**SUBTOTAL $ 2,947.50**

### Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ................................................................. $ 3,864.00
2. Unitemized payments made this period of under $100. ............................................................................................... $ 0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ......................... $ 0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) TOTAL $ 3,864.00

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

**Payments Made**

Amounts may be rounded to whole dollars.

**Statement covers period**
- **from** September 20, 2020
- **through** October 17, 2020

**NAME OF FILER**
Hawkins for City Council 2020

**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>
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<td>VOT</td>
<td>voter registration</td>
</tr>
<tr>
<td>WEB</td>
<td>information technology costs (internet, e-mail)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name and Address of Payee</th>
<th>Code</th>
<th>Description of Payment</th>
<th>Amount Paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brian Hawkins</td>
<td>CMP</td>
<td>Namerr's- campaign signs</td>
<td>$646.50</td>
</tr>
<tr>
<td></td>
<td>CMP</td>
<td>Elevate Print- T Shirts</td>
<td>$160.00</td>
</tr>
<tr>
<td>AK Limited Partnership</td>
<td>OFC</td>
<td>Office Space Deposit</td>
<td>$50.00</td>
</tr>
<tr>
<td>AK Limited Partnership</td>
<td>OFC</td>
<td>Office Space Monthly Payment</td>
<td>$50.00</td>
</tr>
</tbody>
</table>

**SUBTOTAL $ 916.50**

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

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**CALIFORNIA FORM 460**

**Page 12 of 17**

FPPC Form 460 (Jan/2016)

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

www.fppc.ca.gov
Schedule F
Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>NAME OF FILER</th>
<th>Hawkins for City Council 2020</th>
</tr>
</thead>
</table>

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

- CMP campaign paraphernalia/misc.
- CNS campaign consultants
- CTB contribution (explain nonmonetary)*
- CVC civic donations
- FIL candidate filing/ballot fees
- FND fundraising events
- LEG legal defense
- LIT campaign literature and mailings
- MSR member communications
- MTC meetings and appearances
- OFC office expenses
- PET petition circulating
- PHO phone banks
- POL polling and survey research
- PRO professional services (legal, accounting)
- PRT print ads
- RAD radio airtime and production costs
- RFD returned contributions
- SAL campaign workers’ salaries
- TEL tv or cable airtime and production costs
- TRC candidate travel, lodging, and meals
- TRS staff/spouse travel, lodging, and meals
- TSF transfer between committees of the same candidate/sponsor
- VOT voter registration
- WEB information technology costs (internet, e-mail)

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF CREDITOR (IF COMMITTEE ALSO ENTER ID NUMBER)</th>
<th>CODE OR DESCRIPTION OF PAYMENT</th>
<th>OUTSTANDING BALANCE BEGINNING OF THIS PERIOD</th>
<th>AMOUNT INCURRED THIS PERIOD</th>
<th>AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)</th>
<th>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
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<td>N/A</td>
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<tr>
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<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

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

**Schedule F Summary**

1. 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 $ 0.00**

2. 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**

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)

   **NET $ 0.00**
### Schedule F (Continuation Sheet)  
**Accrued Expenses (Unpaid Bills)**

**NAME OF FILER**  
Hawkins for City Council 2020

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

- **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 communications  
**MTG** meetings and appearances  
**OFG** office expenses  
**PET** petition circulating  
**PHO** phone banks  
**POL** polling and survey research  
**POS** postage, delivery and messenger services  
**PRO** professional services (legal, accounting)  
**PRT** print ads  
**RAD** radio airtime and production costs  
**RFD** returned contributions  
**SAL** campaign workers' salaries  
**TEL** t.v. or cable airtime and production costs  
**TRC** candidate travel, lodging, and meals  
**TRS** staff/spouse travel, lodging, and meals  
**TSF** transfer between committees of the same candidate/sponsor  
**VOT** voter registration  
**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 ONE) | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD |
|---|---|---|---|---|---|---|
| N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| N/A | N/A | N/A | N/A | N/A | N/A | N/A |

**SUBTOTALS:**  
$0.00  
$0.00  
$0.00  
$0.00
**Schedule G**
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

**NAME OF FILER**
Hawkins for City Council 2020

**NAME OF AGENT OR INDEPENDENT CONTRACTOR**

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

<table>
<thead>
<tr>
<th>CMP</th>
<th>campaign paraphernalia/misc.</th>
</tr>
</thead>
<tbody>
<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>
</tbody>
</table>

<table>
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<tr>
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</thead>
<tbody>
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<td>WEB</td>
<td>information technology costs (internet, e-mail)</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENTS</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
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<td>N/A</td>
<td>N/A</td>
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<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Attach additional information on appropriately labeled continuation sheets.

---

*Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.*

**TOTAL** $ 0.00
Schedule H
Loans Made to Others*

Amounts may be rounded to whole dollars.

Statement covers period from September 20, 2020
through October 17, 2020

SCHEDULE H
CALIFORNIA FORM 460
Page 16 of 17

NAME OF FILER
Hawkins for City Council 2020

<table>
<thead>
<tr>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD</th>
<th>(b) AMOUNT LOANED THIS PERIOD</th>
<th>(c) REPAYMENT OR FORGIVENESS THIS PERIOD*</th>
<th>(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
<th>(e) INTEREST RECEIVED</th>
<th>(f) ORIGINAL AMOUNT OF LOAN</th>
<th>(g) CUMULATIVE LOANS TO DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>N/A</td>
<td>0.00</td>
<td>0.00</td>
<td>□ PAID</td>
<td>$0.00</td>
<td>0% RATE</td>
<td>$0.00</td>
<td>N/A</td>
</tr>
<tr>
<td>N/A</td>
<td>N/A</td>
<td>0.00</td>
<td>0.00</td>
<td>□ PAID</td>
<td>$0.00</td>
<td>0% RATE</td>
<td>$0.00</td>
<td>N/A</td>
</tr>
</tbody>
</table>

*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.

SUBTOTALS $0.00 $0.00 $0.00 $0.00

Schedule H Summary

1. Loans made this period ........................................................................................................... $0.00
   (Total Column (b) plus unitemized loans of less than $100.)

2. Payments received on loans .................................................................................................. $0.00
   (Total Column (c) plus unitemized payments of less than $100.)

3. Net change this period. (Subtract Line 2 from Line 1.) ...................................................... NET $0.00
   (Enter the net here and on the Summary Page, Column A, Line 7.)

   **If Required

   (May be a negative number)

   FPPC Form 460 (Jan/2016)
   FPPC Advice: advice@fppc.ca.gov (866/275-3772)
   www.fppc.ca.gov
Schedule I
Miscellaneous Increases to Cash

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME AND ADDRESS OF SOURCE (OF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>DESCRIPTION OF RECEIPT</th>
<th>AMOUNT OF INCREASE TO CASH</th>
</tr>
</thead>
<tbody>
<tr>
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Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL $ 0.00

Schedule I Summary
1. Itemized increases to cash this period. .......................................................... $ 0.00
2. Unitemized increases to cash of under $100 this period. .................................. $ 0.00
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) .................................................. $ 0.00
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) .................................................. TOTAL $ 0.00