					COVER PAGE
Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)			Date Stamp	CA	FORM 460
SEE INSTRUCTIONS ON REVERSE	Statement covers period from07/01/2024 through09/21/2024	Date of election if applicable: (Month, Day, Year)		CIT	For Official Use Only CLERK'S OFFICE 27 2024 ANO9:51
1. Type of Recipient Committee: All Committees	Complete Barte 1 2 2 and 4	2. Type of Statement:			
 Type of Recipient Committee. All committees ∑ Officeholder, Candidate Controlled Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Ter Amendment (Explain be	•	Suppleme	Statement Id-Year Report ntal Preelection - Attach Form 495
3. Committee Information	I.D. NUMBER 1456692	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTED BODDIE Singh-Allen for Mayor 2024 STREET ADDRESS (NO P.O. BOX)	EE)	NAME OF TREASURER Denise Lewis MAILING ADDRESS 5445 Madison Avenue CITY	STATE	ZIP CODE	AREA CODE/PHONE
5445 Madison Avenue CITY STATE ZI	P CODE AREA CODE/PHONE	Sacramento NAME OF ASSISTANT TREASURI	CA ER. IF ANY	95841	(916)348-9100
	95841 (916)348-9100	Marissa Russell			
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR F		MAILING ADDRESS 5445 Madison Avenue			
CITY STATE ZI	P CODE AREA CODE/PHONE	CITY Sacramento	STATE CA	ZIP CODE 95841	AREA CODE/PHONE (916)348-9100
OPTIONAL: FAX / E-MAIL ADDRESS (916)348-9111 / campaigns@rcbs.us		OPTIONAL: FAX / E-MAIL ADDRE	SS		-
4. Verification I have used all reasonable diligence in preparing and revieunder penalty of perjury under the laws of the State of Cali Executed on	fornia that the foregoing is true and	Signature of Treasurer or Assistant Treasurer of Controlling Officeholder, Gendidate, State Measure Prop	easurar onent or Responsible Officer o		true and complete. I certify
Executed on	Ву	Signature of Controlling Officeholder, Candidate, Sta			6
Date		and the state of t			FPPC Form 460 (Jan/2016)

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

Recipient Committee Campaign Statement Cover Page — Part 2

CALIFORNIA FORM 460

Page 2 of 15

. Officeholder or Candidate Controlled Co	mmittee		6.	Primarily Formed Ballo	t Measure	Committee	•	
NAME OF OFFICEHOLDER OR CANDIDATE				NAME OF BALLOT MEASURE				
Bobbie Singh-Allen								
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DI	STRICT NUMBER IF APPLICABL	E)		BALLOT NO, OR LETTER	JURISDICTIO	N	3	SUPPORT
Mayor City of Elk Grove				·				OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE Sacramento CA	ZIP 95757		Identify the controlling off	ceholder, can	didate, or st	tate measure	e proponent, if any.
Poloted Committees Not Included in this				NAME OF OFFICEHOLDER, CAN	DIDATE, OR PR	OPONENT		
Related Committees Not Included in this not included in this statement that are controlled by contributions or make expenditures on behalf of you	you or are primarily formed t			OFFICE SOUGHT OR HELD			DISTRICT NO). IF ANY
COMMITTEE NAME	I.D. NUMBER			22				
NAME OF TREASURER	CONTROLLED COMMITT	EE?	7.	Primarily Formed Can				
*	☐ YES ☐ NO			officeholder(s) or candidate(s) for which this	committee is	s primarily to	rmed.
COMMITTEE ADDRESS STREET ADDRESS (NO	P.O. BOX)			NAME OF OFFICEHOLDER OR O	CANDIDATE	OFFICE SOU	IGHT OR HELD	SUPPORT OPPOSE
CITY STATE	ZIP CODE AREA COD	DE/PHONE		NAME OF OFFICEHOLDER OR O	ANDIDATE	OFFICE SOU	IGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER			NAME OF OFFICEHOLDER OR O	CANDIDATE	OFFICE SOU	IGHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITT			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	IGHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO CITY STATE		DE/PHONE		Atta	ch continuatio	on sheets if	necessary	1

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

				SUM	IMARY PAGE
Statem	ent covers period	CALI	FORN	IIA	160
from	07/01/2024		ORM		400
through _	09/21/2024	Page _	3	_ of	15

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Bobbie Singh-Allen for Mayor 2024

ı	Statem	Statement covers period			CALIFORNIA 160					
	from	07/01/2024	F	ORM		+00				
	through _	09/21/2024	Page _	3	_ of _	15				
			I.D. N	JMBER						
			1456	692						

1. Monetary Contributions	TOTAL PREPRIND TOTAL PREPRINT TOTAL	Bobble Singh-Affen for Mayor 2024					1430032
1. Monetary Contributions Schedule A, Line 3 \$ 16,900.00 \$ 59,965.00 \$ 0	1. Monetary Contributions	Contributions Received	(TOTAL THIS PERIOD		CALENDARYEAR	Running in Both the State Primary and
2. Loans Received	2. Loans Received Schedule 8, Line 3 0.00 0.00 0.00 \$ 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1+2 \$ 4. Nonmonetary Contributions Schedule C, Line 3 0.00 \$ 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3+4 \$ 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3+4 \$ 5. Payments Made \$ 5. Payments Made Schedule E, Line 4 \$ 6. Payments Made Schedule F, Line 3 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0	1. Monetary Contributions Schedule A, Line 3	\$	16,900.00	\$	59,965.00	
Received Sample Schedule C, Line 3 Schedule	\$ Solit Of AL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	2. Loans Received Schedule B, Line 3		0.00		0.00	1/1 through 6/30 //1 to Date
4. Nonmonetary Contributions Schedule C, Line 3	4. Nonmonetary Contributions Schedule C, Line 3 0.00 5.9,965.00 Expenditures Made 5. Payments Made Schedule E, Line 4 \$ 22,884.92 \$ 36,476.22 \$ 36,47	3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	16,900.00	\$	59,965.00	
Expenditures Made 6. Payments Made 7. Loans Made 8. Subtotal Cash Payments 9. Accrued Expenses (Unpaid Bills) 10. Nonmonetary Adjustment 11. TOTAL EXPENDITURES MADE 12. Beginning Cash Balance 13. Cash Receipts 14. Miscellaneous Increases to Cash 15. Cash Payments 16. ENDING CASHBALANCE 17. Loans Guiden Reliable to Column A, Line 8 above 18. Cash Equivalents and Outstanding Debts 18. Cash Equivalents 18. Cash Equivalents 19. Add Lines 14 + 13 + 14, then subtract Line 15 19. Cash Equivalents 19. Schedule B, Part 2 19. Add Lines 8 + 9 + 10 19. Schedule B, Part 2 19. Add Lines 8 + 9 + 10 19. Schedule B, Part 2 19. Add Lines 8 + 9 + 10 19. Schedule B, Part 2 19. Cash Equivalents 19. Cash Equivalents 19. Cash Equivalents 19. Cash Equivalents 19. Schedule B, Part 2 19. Add Lines 8 + 9 + 10 19. Cash Equivalents 19. Cash Equivalents 19. Schedule B, Part 2 19. Cash Equivalents 19. Schedule B, Part 2 19. Cash Equivalents 22. 884. 92 23. 6, 951. 39 24. 42, 527. 61 24. 480. 45 16. 20. 00. 00 0. 00	Expenditures Made 5. Payments Made 5. Payments Made 6. Payments Made 6. Payments Made 7. Loans Made 8. SUBTOTAL CASH PAYMENTS 8. SUBTOTAL CASH PAYMENTS 8. Add Lines 6+7 9. Accrued Expenses (Unpaid Bills) 10. Nonmonetary Adjustment 10. Nonmonetary Adjustment 11. TOTAL EXPENDITURES MADE 12. Beginning Cash Balance 13. Cash Receipts 14. Miscellaneous Increases to Cash 15. Cash Payments 16. ENDING CASH BALANCE 16. ENDING CASH BALANCE 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 Sche	4. Nonmonetary Contributions		0.00		0.00	21 Expenditures
6. Payments Made Schedule E, Line 4 \$ 22,884.92 \$ 36,476.22 7. Loans Made Schedule H, Line 3 0.00 8. SUBTOTAL CASH PAYMENTS Add Lines 6+7 \$ 22,884.92 \$ 36,476.22 9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 0.00 10. Nonmonetary Adjustment Schedule F, Line 3 0.00 11. TOTAL EXPENDITURES MADE Add Lines 8+9+10 \$ 22,495.14 \$ 42,527.61 Current Cash Statement 12. Beginning Cash Balance Previous Summary Page, Line 16 16. Cash Receipts Column A, Line 3 above 19. Column A, Line 8 above 19. Column A, Line 8 above 19. ENDING CASH BALANCE Add Lines 12+13+14, then subtract Line 15 \$ 258,495.54 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ 0.00 Cash Equivalents and Outstanding Debts 18. Cash Equivalents Schedule Sche	Schedule E, Line 4 \$ 22,884.92 \$ 36,476.22 \$ 0.00 \$	5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	16,900.00	\$	59,965.00	Made \$ \$
7. Loans Made Schedule H, Line 3 0.00 0.00 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ 22,884.92 \$ 36,476.22 9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 0.00 0.00 11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10 \$ 22,495.14 \$ 42,527.61 Current Cash Statement 12. Beginning Cash Balance Previous Summary Page, Line 16 13. Cash Receipts Column A, Line 3 above 14. Miscellaneous Increases to Cash Schedule I, Line 4 15. Cash Payments Column A, Line 8 above 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ 258,495.54 If this is a termination statement, Line 16 must be zero. Cash Equivalents and Outstanding Debts 18. Cash Equivalents See instructions on reverse \$ 0.00 Cash Equivalents S	7. Loans Made	Expenditures Made					Expenditure Limit Summary for State
8. SUBTOTAL CASH PAYMENTS	8. SUBTOTAL CASH PAYMENTS	6. Payments Made Schedule E, Line 4	\$	22,884.92	\$	36,476.22	Candidates
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ 22, 884.92 \$ 36, 476.22 \$ (if Subject to Voluntary Expenditure Limit) 9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 0.00 0.00 10. Nonmonetary Adjustment Schedule C, Line 3 0.00 0.00 11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10 \$ 22, 495.14 \$ 42,527.61	8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ 22,884.92 \$ 36,476.22 \$ (#Subject to Voluntary Expenditure Limit) 9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 0.00 0.00 11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10 \$ 22,495.14 \$ 42,527.61 12. Beginning Cash Balance Previous Summary Page, Line 16 13. Cash Receipts Column A, Line 3 above 14. Miscellaneous Increases to Cash Schedule I, Line 4 15. Cash Payments Column A, Line 8 above 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ 258,495.54 If this is a termination statement, Line 16 must be zero. 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ 6,051.39 Add Line 2 + Line 9 in Column B above \$ 6,051.39 Add Line 2 + Line 9 in Column B above \$ 6,051.39 Add Line 2 + Line 9 in Column B above \$ 6,051.39 To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column B of your last report. Some amounts in Column B above subtracted from previous period amounts. If this is the first report being filled for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any). FPPC Form 460 (4.10 to Da (#18 to Da	7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulative Expenditures Made*
10. Nonmonetary Adjustment	10. Nonmonetary Adjustment	8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	22,884.92	\$	36,476.22	
11. TOTAL EXPENDITURES MADE	11. TOTAL EXPENDITURES MADE	9. Accrued Expenses (Unpaid Bills)		-389.78		6,051.39	
Current Cash Statement 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 264, 480.46 13. Cash Receipts Column A, Line 3 above 14. Miscellaneous Increases to Cash Schedule I, Line 4	Current Cash Statement 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 264, 480, 46 13. Cash Receipts Column A, Line 3 above 14. Miscellaneous Increases to Cash Schedule I, Line 4 15. Cash Payments Column A, Line 8 above 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ 258, 495.54 If this is a termination statement, Line 16 must be zero. 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ 0.00 18. Cash Equivalents and Outstanding Debts 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ 6,051.39 Schedule B, Part 2 \$ 0.00 6,051.39 To calculate Column B, add amounts in Column A to the corresponding amounts in Column B or open amounts in Column B or open amounts in Column B or open amounts in Column B. To calculate Column B, add amounts in Column B of the corresponding amounts in Column B or open amounts in Column B or open amounts in Column B or open amounts in Column B. To calculate Column B, add amounts in Column B or open amounts. If this is the first report being filled for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any). FPPC Form 460 (c.	10. Nonmonetary Adjustment Schedule C, Line 3		0.00		0.00	(mm/dd/yy)
12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 264, 480.46	12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 16,900.00 11. Miscellaneous Increases to Cash Schedule I, Line 4 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 16,900.00 17. Cash Payments Column A, Line 8 above If this is a termination statement, Line 16 must be zero. 18. Cash Equivalents and Outstanding Debts 19. Outstanding Debts Add Line 2 + Line 9 in Column B above States and Outstanding Debts 19. Outstanding Debts 5 10. Cash Balance Previous Summary Page, Line 16 Schedule B, Part 2 \$ 264,480.46 16,900.00 16,	11. TOTAL EXPENDITURES MADE	\$	22,495.14	\$	42,527.61	\$
13. Cash Receipts	13. Cash Receipts	Current Cash Statement					\$
14. Miscellaneous Increases to Cash Schedule I, Line 4	14. Miscellaneous Increases to Cash Schedule I, Line 4 15. Cash Payments Column A, Line 8 above 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ 258, 495.54 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 \$ 6,051.39	12. Beginning Cash Balance Previous Summary Page, Line 16	\$	264,480.46	То	calculate Column B, add	
14. Miscellaneous Increases to Cash	14. Miscellaneous Increases to Cash	13. Cash Receipts Column A, Line 3 above		16,900.00			
16. ENDING CASH BALANCE	Column A, Line 8 above 16. ENDING CASH BALANCE	14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	om Column B of your last	
16. ENDING CASH BALANCE	16. ENDING CASH BALANCE	15. Cash Payments		22,884.92			
If this is a termination statement, Line 16 must be zero. 17. LOAN GUARANTEES RECEIVED	If this is a termination statement, Line 16 must be zero. 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ 0.00 18. Cash Equivalents See instructions on reverse \$ 0.00 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ 6,051.39 FPPC Form 460 (16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	258,495.54	fig	ures that should be	
17. LOAN GUARANTEES RECEIVED	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 \$ 6,051.39 FPPC Form 460 (A	If this is a termination statement, Line 16 must be zero.			ре	eriod amounts. If this is	
Cash Equivalents and Outstanding Debts 18. Cash Equivalents	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 \$ 6,051.39 FPPC Form 460 (7. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for	r this calendar year, only	
See instructions on reverse \$	19. Outstanding Debts	Cash Equivalents and Outstanding Debts			fro	om Lines 2, 7, and 9 (if	
19. Outstanding Debts	FPPC Form 460 (18. Cash Equivalents See instructions on reverse	\$	0.00	l		
	,	19. Outstanding Debts	\$	6,051.39			

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Schedule A **Monetary Contributions Received**

Amounts may be rounded to whole dollars.

SCF	IEDU	LE	Α

CALIFORNIA

FORM

Statement covers period

07/01/2024

				from07/01/2	024	F	ORM	
EE INSTRUCTION	NS ON REVERSE			through _09/21/2	024	Page	4	of15
AME OF FILER						I.D. N	UMBER	
obbie Singh	n-Allen for Mayor 2024					1456	692	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD, NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	TO	ELECTION D DATE EQUIRED)
8/07/2024	Denny's #6766 8707 Elk Grove Blvd Elk Grove, CA 95624	□IND □COM ☑OTH □PTY □SCC		1,000.00	2,	500.00	G2024	\$2,500.00
08/07/2024	Denny's #7379 7401 Elsie Ave Sacramento, CA 95828	□IND □COM ☑OTH □PTY □SCC		500.00	2,:	500.00	G2024	\$2,500.00
08/07/2024	Elk Laguna Inc Denny's #6620 116 S State St Clarks Summit, PA 18411	□IND □COM ☑OTH □PTY □SCC		1,000.00	2,	500.00	G2024	\$2,500.00
07/08/2024	Empower PAC (ID# 1467150) 3135 Wiltse Road Placerville, CA 95667	□IND ☑COM □OTH □PTY □SCC		2,000.00	2,	000.00	G2024	\$2,000.00
07/01/2024	Samarjit Malhi Sacramento, CA 95835	□ IND □ COM □ OTH □ PTY □ SCC	Owner Samarjit Inc	500.00		500.00	G2024	\$500.00
			SUBTOTAL	\$ 5,000.00				
Amount re (Include al Amount re	A Summary ceived this period – itemized monetary contributions. Il Schedule A subtotals.)				IND- COM OTH PTY	othe) I – Othe – Politic	ual pient Comm r than PTY r (e.g., bus al Party	
	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colu	ımn A, Line 1.) TOTAL \$_	16,900.00	(500	- Oman		
V 2	, ,	10	An exercise of the construction from Affect	31			EDDC For	n 460 / Jan/201

Schodule A (Continuation Shoot)

Sacramento Metropolitan Chamber PAC (ID#840819)

455 Capitol Mall, Suite 600 Sacramento, CA 95814

Breeze Singh

Carmichael, CA 95608

\$5,500.00

\$500.00

Monetary Contributions Received		Amounts may to whole o		Statement covers period				460
				from		Page.		of15
NAME OF FILER						I.D. NU	MBER	
Bobbie Singh	-Allen for Mayor 2024					14566	92	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	AR TO DATE	
09/05/2024	R.J. Reynolds Tobacco Company and Its Affiliates 401 N Main Street Winston Salem, NC 27101 Made by its service company, RAI Services Company, at the same address	☐IND ☐COM ☑OTH ☐PTY ☐SCC		2,500.00	2,5	500.00	G2024	\$2,500.00
08/26/2024	Baldev Randhawa EIR Grove, CA 95624	IND COM OTH PTY	Retired n/a	500.00	Ē	00.00	G2024	\$500.00

		□scc				
09/12/2024	Stonewall Democratic Club of Greater Sacramento (ID# 1247892)	□IND	250.00	250.00	G2024	\$250.00
	1700 Tribute Road, Ste 201	⊠COM				
	Sacramento, CA 95815	□отн				
		□PTY				
		□scc				

Realtor Team Singh LLC

SUBTOTAL\$

COM

□отн □ PTY □scc

☑ IND COM

□отн □PTY

*Contributor Codes

IND - Individual

09/06/2024

09/11/2024

COM - Recipient Committee

(other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

5,500.00 G2024

500.00 G2024

5,500.00

500.00

9,250.00

Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Amounts may be rounded

Statement covers period

CALLEGRNIA

•		to whole dollars.		from07/01/2024		FORM 460		460
			A	through09/21/	2024	Page	6 of_	15
NAME OF FILER						I.D. NUMB	3ER	
Bobbie Singh-	Allen for Mayor 2024					1456692	t	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC.	(EAR 2. 31)	PER ELE TO D (IF REQ	OATE QUIRED)
07/08/2024	Angelo G. Tsakopoulos 1435 River Park Drive, Ste 500 Sacramento, CA 95815	COM OTH PTY SCC	Principal Tsakopoulos Investments	2,500.00	2,5	600.00 G2	2024	\$2,500.00
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						

SUBTOTAL\$

2,500.00

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

Amounts may be rounded to whole dollars.

		SCHEDULE I
State	ment covers period	CALIFORNIA AGO
from	07/01/2024	FORM 400
through	09/21/2024	Page 7 of 15
		I.D. NUMBER
		1456600

SEE INSTRUCTI	ONS ON REVERSE		through09/21/20	Page _	7 of 15	
NAME OF FILER Bobbie Sing	h-Allen for Mayor 2024				I.D. NUI 14566	
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)
08/16/2024	Dawnte Early Mayor City of West Sacramento Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure		500.00	500.00	G2024 \$500.0
_	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure				
	Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure				
			SUBTOTAL \$	500.00		
						

Schedule D Summary

1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)	\$	500.00
2. Unitemized contributions and independent expenditures made this period of under \$100	\$	0.00
3 Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	TOTAL \$	500.00

Schedule E
Payments Made

Amounts may be rounded to whole dollars.

		SCHEDULE E
Stateme	ent covers period	CALIFORNIA 160
from	07/01/2024	FORM 400
through _	09/21/2024	Page8 of15
		I.D. NUMBER
		1456692

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

INTINE OF THEER

Bobbie Singh-Allen for Mayor 2024

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
СТВ	contribution (explain nonmonetary)*	OFC	office expenses	ŞAL	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
ND	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
ЦΤ	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Shan Allen EIK Grove, CA 95757	WEB		1,500.00
Shan Allen Elk Grove, CA 95757	WEB		750.00
AREAA Greater Sacramento Chapter 2395 El Camino Ave, #3 Sacramento, CA 95821	MTG	8/19/2024, AREAA Event, 4, Candidate	650.00
* Baymants that are contributions or independent expanditures m	ust also be summerized on	Sahadula D. OUD	70741 \$ 3,000,00

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

SUBTOTAL\$

2,900.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)\$	22,884.9
2. Unitemized payments made this period of under \$100\$	0.0
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)\$	0.0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	22,884.9

Amounts may be rounded to whole dollars.

SCHEDUL	EE(CONT.)

Statement covers period	CALIFORNIA 160	
from07/01/2024	FORM TOU	
through 09/21/2024	Page 9 of 15	
:	I.D. NUMBER	
	1456692	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Bobbie Singh-Allen for Mayor 2024

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

CMP campaign paraphemalia/misc. MBR member communications meetings and appearances office expenses petition circulating meetings and appearances office expenses 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 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
LEG legal defense PRO professional services (legal, accounting)

TSF transfer between committees of the same candidate/sponsor VOT voter registration

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

ET campaign increase and mainings	TTG Print das		THE INICIAL CONTOCOLY CONTOCOLY	(interior, o man)
NAME AND ADDRESS OF PAYE (IF COMMITTEE, ALSO ENTER LD. NUME	EE COI	DDE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
City of Elk Grove 8401 Laguna Palms Way Elk Grove, CA 95758	F)	IL		4,960.0
Commerce Printing Services 322 North 12th St Sacramento, CA 95811	Ch	MP		4,037.3
Andrew Domek West Sacramento, CA 95691	r.	IT		600.0
				4
eFundraising Connections 2831 G Street, Suite 200 Sacramento, CA 95816	OE	FC		205.0
eFundraising Connections 2831 G Street, Suite 200 Sacramento, CA 95816	121 OF	FC		23.0
			A117	

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

SUBTOTAL \$

9,825.34

Amounts may be rounded to whole dollars.

		SCHEDULE E (CONT.)
Statement covers period		CALIFORNIA 160
from	07/01/2024	FORM 40U
through_	09/21/2024	Page 10 of 15
		I.D. NUMBER

1456692

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Bobbie Singh-Allen for Mayor 2024

COD	ES: 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
ND	independent expenditure supporting/opposing others (exp	lain)* POS	postage, delivery and messenger service	s TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
Щ	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

DESCRIPTION OF PAYMENT	AMOUNT PAID
	2.75
	23.00
	23.00
	2.75
ule 'G' for Individual Credit Card Payees	6,220.31
	SUBTOTAL S

Amounts may be rounded to whole dollars.

SCHEDU	LE E (CC	NT.)

Statement covers period	CALIFORNIA 160
from07/01/2024	FORM 400
through09/21/2024	Page 11 of 15
"	I.D. NUMBER
	1456692

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Bobbie Singh-Allen for Mayor 2024 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

MBR member communications RAD radio airtime and production costs CMP campaign paraphernalia/misc. campaign consultants MTG meetings and appearances returned contributions SAL campaign workers' salaries CTB contribution (explain nonmonetary)* OFC office expenses petition circulating TEL t.v. or cable airtime and production costs CVC civic donations PET candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals FIL staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research TRS transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF legal defense professional services (legal, accounting) VOT voter registration information technology costs (internet, e-mail) campaign literature and mailings PRT print ads ЦΤ NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) 163.39 Elan Financial Services OFC 9321 Olive Blvd Saint Louis, MO 63132 320.75 Elan Financial Services CVC 9321 Olive Blvd Saint Louis, MO 63132 See Schedule 'G' for Individual Credit Card Payees 1,169.80 Elan Financial Services 9321 Olive Blvd Saint Louis, MO 63132 Stephen Green LIT 850.00 Citrus Heights, CA 95621 500.00 John Patterson CNS Citrus Heights, CA 95621

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

SUBTOTAL \$

3,003.94

Amounts may be rounded to whole dollars.

SCHEDU	JLE E (CONT.)
ALICODALIA	

Statement covers period	CALIFORNIA 160
from07/01/2024	FORM 400
through09/21/2024	Page of
1	I.D. NUMBER
	1456692

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Bobbie Singh-Allen for Mayor 2024

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 polling and survey research TRS staff/spouse travel, lodging, and meals ND independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor

LEG legal defense professional services (legal, accounting) VOT voter registration

LIT campaign literature and mailings	PRT print ads		WEB information technology costs	s (internet, e-mail)
NAME AND ADDRESS OF PA (IF COMMITTEE, ALSO ENTER I.D. NU	YEE MBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
River City Business Services 5445 Madison Ave Sacramento, CA 95841		PRO		220.86
*				
Fiver City Business Services 5445 Madison Ave Sacramento, CA 95841		PRO		478.51
River City Business Services 5445 Madison Ave Sacramento, CA 95841		PRO		184.46
				IDTOTAL &

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

SUBTOTAL \$

883.83

Schedule F Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

State	ment covers period	CALIFORNIA 460			
from	07/01/2024	FORM 400			
through	09/21/2024	Page13 of15			
		I.D. NUMBER			

1456692

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Bobbie Singh-Allen for Mayor 2024

Bobbie Bingh Allen for Mayor 2024

СО	DES: If one of the following codes accurately describe	s the	payment, you may enter the code.	Otherwise	e, describe the payment.
CMP	campaign paraphemalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
ств	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
ND	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
ЦT	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
Elan Financial Services 9321 Olive Blvd Saint Louis, MO 63132	See Schedule 'G' for Individual Credit Card Payees	6,220.31	0.00	6,220.31	0.00
Elan Financial Services 9321 Olive Blvd Saint Louis, MO 63132	See Schedule 'G' for Individual Credit Card Payees	0.00	6,051.39	0.00	6,051.39
River City Business Services 5445 Madison Ave Sacramento, CA 95841	PRO	220.86	0.00	220.86	0.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	6,441.17	6,051.39	6,441.17	6,051.39

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 \$	6,051.39
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.)	6,441.17

3.	Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and			
	on the Summary Page, Column A, Line 9.)	JET S	5	-389.7
		'	May be	a negative number

Schedule G	
Payments Made by an Agent or Independent	t
Contractor (on Behalf of This Committee)	

Amounts may be rounded to whole dollars.

		SCHEDULE G
State	ement covers period	CALIFORNIA 160
from	07/01/2024	FORM 400
through	09/21/2024	Page 14 of 15
		I.D. NUMBER

1456692

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Bobbie Singh-Allen for Mayor 2024

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Elan Financial Services

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 CNS campaign consultants MTG meetings and appearances CTB contribution (explain nonmonetary)* OFC office expenses petition circulating CVC civic donations PET FIL candidate filing/ballot fees PHO phone banks FND fundraising events POL polling and survey research independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services ND

legal defense professional services (legal, accounting) print ads

LEG campaign literature and mailings PRT ЦΠ

RAD radio airtime and production costs

RFD returned contributions SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs candidate travel, lodging, and meals

staff/spouse travel, lodging, and meals TRS

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 PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AM	MOUNT PAID
Dr. Dawnte Early for Mayor 2024 (ID# 1471106) 1700 Tribute Road, Suite 201 Sacramento, CA 95815	CTB				500.00
Elk Grove Food Bank 9888 Kent Street Elk Grove, CA 95624	cvc				1,300.00
Political Data Inc. 3780 Kilroy Airport Way, Ste 200 #992 Long Beach, CA 90806	LIT				4,675.00
Staples 9146 East Stockton Blvd Elk Grove, CA 95624	CVC				320.75
Attach additional information on appropriately labeled continuation sheets.				TOTAL* \$	6,795.75

^{*} 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.

Schedule G (Continuation Sheet)
Payments Made by an Agent or Independent
Contractor (on Behalf of This Committee)

independent expenditure supporting/opposing others (explain)*

Amounts may be rounded to whole dollars.

SCHEDULE G (CONT.)

Statement covers period from 07/01/2024 CALIFORNIA 460

through 09/21/2024 Page 15 of 15

I.D. NUMBER

1456692

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

FIL

ND

LEG

UT

Bobbie Singh-Allen for Mayor 2024

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Elan Financial Services

candidate filing/ballot fees

campaign literature and mailings

fundraising events

legal defense

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
CNS campaign consultants MTG meetings and appearances
CTB contribution (explain nonmonetary)* OFC office expenses
CVC civic donations PET petition circulating

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 PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Visit Sacramento 1608 I Street Sacramento, CA 95814	MTG	9/8/2024, Sacramento Tower Bridge Dinner, 2, Candidate and Member of Candidates Household	600.00
			18
Attach additional information on appropriately labeled continuation sheets.		TOTAL* \$	600.00

^{*} 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.