Recipient Committe	ee						COVER PAGE
Campaign Stateme Cover Page					Date Stamp	•	california 460
SEE INSTRUCTIONS ON REVERSE			Statement covers period	Date of election if applicable: (Month, Day, Year) 11/03/2020	Filed Dat 09/23/2020 (PM		Page1 of5 For Official Use Only
SEE INSTRUCTIONS ON REVERSE			through09/19/2020	- -			
1. Type of Recipient Co	mmittee: AI	l Committees -	- Complete Parts 1, 2, 3, and 4.	2. Type of Statement:			
 ✓ Officeholder, Candidate C ○ State Candidate Elect ○ Recall (Also Complete Part 5) ☐ General Purpose Commit ○ Sponsored ○ Small Contributor Con ○ Political Party/Central 	ion Committee tee nmittee		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 Te ☐ Amendment (Explain be	ermination)	_	erly Statement al Odd-Year Report
3. Committee Information	on	1.	D. NUMBER 1367465	Treasurer(s)			
COMMITTEE NAME (OR CANDID Jim Oddie for Alameda (*		NAME OF TREASURER Susan Reyes MAILING ADDRESS			
STREET ADDRESS (NO P.O. BO)	X)			CITY	STATE ZIF	D CODE	AREA CODE/PHONE
OTTEET ABBITEOU (NOT :0: BOX	• ,			Alameda		⊃CODE 1 501	(510)882-4536
CITY	STATE	ZIP CODE	AREA CODE/PHONE	NAME OF ASSISTANT TREASUR	ER, IF ANY		
Alameda	CA	94501	(415)509-1964				
MAILING ADDRESS (IF DIFFERE	NT) NO. AND STRE	ET OR P.O. BOX		MAILING ADDRESS			
CITY Alameda	STATE CA	ZIP CODE 94501	AREA CODE/PHONE (415)509-1964	CITY	STATE ZIF	CODE	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRE	ss			OPTIONAL: FAX / E-MAIL ADDRE	SS		
jhoddie@pacbell.net				ssjreyes@comcast.net			
			ng this statement and to the best of my California that the foregoing is true and By By Signature of Co		nt Treasurer		
Executed on	Date		Ву	Signature of Controlling Officeholder, Candidate	, State Measure Proponent		
Executed on			Ву				

Date

. Officeholder or Candidate Controlled Com	ımittee	6.	Primarily Formed Ballo	t Measure	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE Jim Oddie			NAME OF BALLOT MEASURE				
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICTIVE City Council Member: City of Alameda	RICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIO	N		SUPPORT OPPOSE
,	ITY STATE ZIP lameda CA 94501		Identify the controlling office	holder, candid	date, or state n	neasure prop	onent, if any.
			NAME OF OFFICEHOLDER, CAN	IDIDATE, OR PR	ROPONENT		
Related Committees Not Included in this S not included in this statement that are controlled by yo contributions or make expenditures on behalf of your ca	u or are primarily formed to receive		OFFICE SOUGHT OR HELD			DISTRICT NO.	IF ANY
COMMITTEE NAME	I.D. NUMBER						
Councilmember Oddie Legal Defense Funds	1402812						
NAME OF TREASURER Susan Reyes	CONTROLLED COMMITTEE? ✓ YES NO	7.	Primarily Formed Can officeholder(s) or candidate(s)				
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	BOX)		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP CODE	AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT
Alameda CA 94501	(415)509-1964						OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT
NAME OF TREASURER	CONTROLLED COMMITTEE? YES NO		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	DUA)				1		
CITY STATE ZIP CODE	AREA CODE/PHONE		Attac	ch continuatio	n sheets if nec	essary	

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Summary Page	to whole donars.	Statemen	t covers period	CALIFORNIA	460
		from	07/01/2020	FORM	400
EE INSTRUCTIONS ON REVERSE		through	09/19/2020	Page3 of	25
IAME OF FILER				I.D. NUMBER	
Jim Oddie for Alameda City Council 2020				1367465	

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 Schedule A, Line 3	\$ 27,238.00	\$	31,162.00	
2. Loans Received	500.00		500.00	1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 27,738.00	\$	31,662.00	20. Contributions Received \$ 0.00 \$ 33,009.46
4. Nonmonetary Contributions	446.78		1,347.46	21. Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 28,184.78	\$	33,009.46	Made \$ 0.00 \$ 11,018.68
Expenditures Made				Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$ 5,367.48	\$	6,671.22	Candidates
7. Loans Made	0.00		3,000.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	·	\$	9,671.22	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	0.00		0.00	Date of Election Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3	446.78		1,347.46	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 5,814.26	\$	11,018.68	<u>11/03/2020</u> \$ <u>11,018.68</u>
Current Cash Statement				/
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	То	calculate Column B,	l / / s
13. Cash Receipts Column A, Line 3 above	27,738.00		d amounts in Column o the corresponding	*Amounts in this section may be different from amounts
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00	am	ounts from Column B our last report. Some	reported in Column B.
15. Cash Payments Column A, Line 8 above	5,367.48	am	ounts in Column A may	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 22,887.67		negative figures that ould be subtracted from	
If this is a termination statement, Line 16 must be zero.		this	vious period amounts. If s is the first report being	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ 0.00	onl	d for this calendar year, y carry over the amounts m Lines 2, 7, and 9 (if	
Cash Equivalents and Outstanding Debts		any		
18. Cash Equivalents See instructions on reverse				FPPC Form 460 (Jan/2016)
19. Outstanding Debts	\$ 500.00			FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

Schedule A			Amount	s may be rounded			SCHEDULE A		
	Contributions Received		to v	whole dollars.	Statement cove	rs period	CALI		
_					from07/s	01/2020		orm 460	
SEE INSTRUCTION	NS ON REVERSE				through09/	19/2020	Page	e4 of25	
NAME OF FILER							I.D. N	JMBER	
Jim Oddie f	for Alameda City Council 2020						13674	65	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	l .	NTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
7/17/2020	Unite Here Tip State & Local Fund ID#810437 New York NY 10001		IND COM OTH PTY SCC		1,250.00	1	,250.00	1,500.00 G-18 1,250.00 G-20	
8/1/2020	Variphy Inc. Lafayette CA 94549		IND COM		5,000.00	5	,000.00	2,000.00 G-18 5,000.00 G-20	
8/3/2020	Melissa Hernandez Dublin CA 94568		IND COM OTH PTY SCC	Health Care & Social Services Alameda County District 1	250.00		250.00	250.00 G-20	
8/4/2020	Alan Pryor-Dolphin Alameda CA 94501		IND COM OTH PTY SCC	Retired Retired	125.00		125.00	300.00 G-18 125.00 G-20	
8/4/2020	Eric Strimling Alameda CA 94501		IND COM OTH PTY SCC	Carpenter County of Alameda	100.00		100.00	50.00 G-18 100.00 G-20	
				SUBTOTAL \$	6,725.00				
 Amount red (Include all Amount red Total mone 	A Summary ceived this period – itemized monetary contribution Schedule A subtotals.) ceived this period – unitemized monetary contribution tary contributions received this period.	ıs of	less than	ı \$100 \$ <u> </u>	25,930.00 1,308.00 27,238.00	IND – COM · OTH - PTY –	(other - Other (- Politica - Small (al ent Committee than PTY or SCC) e.g., business entity) I Party Contributor Committee	
(Add Lines	s 1 and 2. Enter here and on the Summary Page, Col	umr	n A, Line ´	1.) TOTAL \$	<u> </u>	PPC Advice: adv		PPC Form 460 (Jan/2016) pc.ca.gov (866/275-3772) www.fppc.ca.gov	

Schedule A (Continuation Sheet) Amounts may be rounded SCHEDULE A (CONT.) to whole dollars. Statement covers period **Monetary Contributions Received CALIFORNIA FORM** 07/01/2020 from _ _ of __ ²⁵ 09/19/2020 5 through NAME OF FILER I.D. NUMBER Jim Oddie for Alameda City Council 2020 1367465 IF AN INDIVIDUAL, ENTER AMOUNT CUMULATIVE TO DATE PER ELECTION CONTRIBUTOR FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR DATE OCCUPATION AND EMPLOYER RECEIVED CALENDAR YEAR TO DATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED CODE * (IF SELF-EMPLOYED, ENTER NAME THIS PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS **√** IND Retired COM Retired Gabrielle Pryor-Dolphin 600.00 G-18 П отн 8/4/2020 125.00 125.00 125.00 G-20 PTY Alameda CA 94501 □ scc AT&T Californis Employee Employee Political Action IND Committee ID#981470 COM 8/7/2020 500.00 500.00 | 500.00 G-20 PTY San Francisco CA 94108 SCC **✓** IND Attorney COM Boxer & Gerson John Harrigan \Box oth 8/10/2020 1,000.00 1,000.00 G-20 500.00 □ PTY Oakland CA 94612 SCC **√** IND Attorney □ сом Boxer & Gerson John Harrigan \square oth 1,000.00 1,000.00 G-20 8/11/2020 500.00 □ PTY Oakland CA 94612 □ scc **√** IND **Executive Director** Doug Biggs COM Alameda Point Collaborative 300.00 G-18 □ oth 8/18/2020 250.00 350.00 250.00 G-20 \bigcap PTY

SUBTOTAL \$

1,875.00

 \square scc

*Contributor Codes

IND – Individual

COM – Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

Alameda CA 94501

PTY - Political Party

Schedule A (Continuation Sheet) Amounts may be rounded SCHEDULE A (CONT.) to whole dollars. Statement covers period **Monetary Contributions Received CALIFORNIA FORM** 07/01/2020 from _ 25 09/19/2020 6 through NAME OF FILER I.D. NUMBER Jim Oddie for Alameda City Council 2020 1367465 IF AN INDIVIDUAL, ENTER AMOUNT CUMULATIVE TO DATE PER ELECTION FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR DATE OCCUPATION AND EMPLOYER RECEIVED CALENDAR YEAR TO DATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED CODE * (IF SELF-EMPLOYED, ENTER NAME THIS PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) **√** IND Council Member Aisha Wahab COM City of Hayward □ OTH 100.00 100.00 G-20 8/19/2020 100.00 PTY Hayward CA 94541 □ scc **✓** IND Architect Studio T-SQ, INC Chek Fong Tang COM 8/19/2020 500.00 500.00 | 500.00 G-20 PTY Oakland CA 94612 SCC **✓** IND **Deputy Director** Audubon California COM Gaylon Parsons 50.00 G-18 OTH 8/19/2020 100.00 100.00 100.00 G-20 □ PTY Alameda CA 94501 SCC **√** IND Planning Programs Manager delivering TDM & Vision Zero safet □ сом John Know White San Francisco Municipal Transportation Agency ОТН 8/19/2020 130.00 130.00 | 130.00 G-20 ☐ PTY Alameda CA 94501 ☐ scc **✓** IND Artist Ryan LaLonde COM Self Employed 8/19/2020 250.00 250.00 | 250.00 G-20 \bigcap PTY

 \square scc

*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

Vernon Hills IL 60061

PTY - Political Party

SCC - Small Contributor Committee

1,080.00

SUBTOTAL \$

Schedule A (Continuation Sheet) Amounts may be rounded SCHEDULE A (CONT.) to whole dollars. Statement covers period **Monetary Contributions Received CALIFORNIA FORM** 07/01/2020 from _ Page $\frac{7}{}$ of $\frac{25}{}$ 09/19/2020 through NAME OF FILER I.D. NUMBER Jim Oddie for Alameda City Council 2020 1367465 IF AN INDIVIDUAL, ENTER AMOUNT CUMULATIVE TO DATE PER ELECTION FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR DATE OCCUPATION AND EMPLOYER RECEIVED CALENDAR YEAR TO DATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED CODE * (IF SELF-EMPLOYED, ENTER NAME THIS PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) **√** IND Business Intelligence Analyst COM **Buck Farmer** Alphabet □ OTH 500.00 500.00 G-20 8/20/2020 500.00 PTY Alameda CA 94501 □ scc **✓** IND Retired Writer/Editor Jon Spangler COM □ oth 8/21/2020 50.00 150.00 | 150.00 G-20 ☐ PTY Alameda CA 94501 SCC **✓** IND Engineer COM Zac Bowling Google OTH 100.00 100.00 G-20 8/21/2020 100.00 □ PTY Alameda CA 94501 □scc **√** IND Owner □ сом Michaan/s Auctions Allen Michaan 150.00 G-18 \square oth 8/23/2020 100.00 100.00 100.00 G-20 ☐ PTY Alameda CA 94501 □ scc **√** IND Architect David Burton COM KTGY Group, Inc. □ oth 8/23/2020 100.00 100.00 | 100.00 G-20 \bigcap PTY

SUBTOTAL \$

850.00

 \square scc

*Contributor Codes IND – Individual

COM – Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

Alameda CA 94501

PTY - Political Party

Schedule A (Continuation Sheet) Amounts may be rounded SCHEDULE A (CONT.) to whole dollars. Statement covers period **Monetary Contributions Received CALIFORNIA FORM** 07/01/2020 from _ of __ ²⁵ 09/19/2020 8 through NAME OF FILER I.D. NUMBER Jim Oddie for Alameda City Council 2020 1367465 IF AN INDIVIDUAL, ENTER AMOUNT CUMULATIVE TO DATE PER ELECTION FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR DATE OCCUPATION AND EMPLOYER **RECEIVED** CALENDAR YEAR TO DATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED CODE * (IF SELF-EMPLOYED, ENTER NAME THIS PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) **√** IND Technical Account Manager COM Optimizely, Inc. Denyse Trepanier П отн 500.00 500.00 G-20 8/24/2020 500.00 PTY Alameda CA 94501 □ scc **✓** IND Public Affairs Evan Corder COM **DeBoo Communications** 8/24/2020 100.00 100.00 100.00 G-20 PTY Sacramento CA 95864 SCC **✓** IND Deputy District Attorney Alameda County District Attorney's Office COM Glenn Kim \Box oth 8/24/2020 250.00 | 250.00 G-20 250.00 □ PTY Walnut Creek CA 94598 SCC Shawn Kumagai for Danville City Council 2022 IND ID#1406764 √ COM \square oth 250.00 | 250.00 G-20 8/24/2020 250.00 □ PTY Dublin CA 94568 □ scc **√** IND President William Crotinger COM Argent Materials □ oth 8/24/2020 1.000.00 1.000.00 | 1.000.00 G-20 \bigcap PTY

SUBTOTAL \$

2,100.00

 \square scc

*Contributor Codes

IND – Individual

COM – Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

Oakland CA 94608

PTY - Political Party

Schedule A (Continuation Sheet) Amounts may be rounded SCHEDULE A (CONT.) to whole dollars. Statement covers period **Monetary Contributions Received CALIFORNIA FORM** 07/01/2020 from _ 25 09/19/2020 through NAME OF FILER I.D. NUMBER Jim Oddie for Alameda City Council 2020 1367465 IF AN INDIVIDUAL, ENTER AMOUNT CUMULATIVE TO DATE PER ELECTION CONTRIBUTOR FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR DATE OCCUPATION AND EMPLOYER **RECEIVED** CALENDAR YEAR TO DATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED CODE * (IF SELF-EMPLOYED, ENTER NAME THIS PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) **√** IND Sales Executive Yong Jin Park COM Coty 400.00 G-18 □ OTH 8/24/2020 250.00 250.00 250.00 G-20 PTY Long Beacg CA 90808 ☐ scc **✓** IND Solution Architect Monina Contarciego COM ATT □ oth 8/25/2020 100.00 100.00 100.00 G-20 PTY Livermore CA 94511 SCC **✓** IND Owner COM Bay Area Crossings Robert (Winston) Ellinthorpe 250.00 G-18 OTH 8/25/2020 250.00 250.00 250.00 G-20 □ PTY Alameda CA 94501 SCC **√** IND retired N/A Brendalynn Goodall COM \square oth 8/26/2020 100.00 100.00 | 100.00 G-20 □ PTY Oakland CA 94605 □ scc **√** IND Retired Cynthia Bonta COM N/A 100.00 G-18 □ oth 8/26/2020 250.00 350.00 350.00 G-20 □ PTY

SUBTOTAL \$

950.00

□ scc

*Contributor Codes IND – Individual

COM – Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

Alameda CA 94502

PTY - Political Party

Schedule A (Continuation Sheet) Amounts may be rounded SCHEDULE A (CONT.) to whole dollars. Statement covers period **Monetary Contributions Received CALIFORNIA FORM** 07/01/2020 from _ . of __ ²⁵ 09/19/2020 through NAME OF FILER I.D. NUMBER Jim Oddie for Alameda City Council 2020 1367465 IF AN INDIVIDUAL, ENTER AMOUNT CUMULATIVE TO DATE PER ELECTION FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR DATE OCCUPATION AND EMPLOYER **RECEIVED** CALENDAR YEAR TO DATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED CODE * (IF SELF-EMPLOYED, ENTER NAME THIS PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) **√** IND **Executive Director** COM Alameda Point Collaborative Doug Biggs 300.00 G-18 □ OTH 8/26/2020 100.00 350.00 250.00 G-20 PTY Alameda CA 94501 □ scc **✓** IND Owner/CEO Alameda Auto Body Services Ky Vo Truong COM 1,000.00 G-18 8/26/2020 1.000.00 1,000.00 1.000.00 G-20 ☐ PTY Alameda CA 94501 SCC **✓** IND CEO COM Portman Enterprises Mark Hersman 250.00 G-18 OTH 8/26/2020 250.00 250.00 250.00 G-20 □ PTY Alameda CA 94501 SCC **√** IND Screen Printer □ сом B2B Signs & Prints Ryan Agabao 250.00 G-18 ОТН 8/26/2020 100.00 100.00 100.00 G-20 ☐ PTY Alameda CA 94501 □scc **√** IND President Danny Tran COM Variphy 5,000.00 G-18

□ oth

 \bigcap PTY

 \square scc

*Contributor Codes IND – Individual

8/27/2020

COM – Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

Lafayette CA 94549

PTY - Political Party

SCC - Small Contributor Committee

250.00

250.00 G-20

250.00

1,700.00

SUBTOTAL \$

Schedule A (Continuation Sheet) Amounts may be rounded SCHEDULE A (CONT.) to whole dollars. Statement covers period **Monetary Contributions Received CALIFORNIA FORM** 07/01/2020 from _ Page ___11 . of __ ²⁵ 09/19/2020 through NAME OF FILER I.D. NUMBER Jim Oddie for Alameda City Council 2020 1367465 IF AN INDIVIDUAL, ENTER AMOUNT CUMULATIVE TO DATE PER ELECTION CONTRIBUTOR FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR DATE OCCUPATION AND EMPLOYER **RECEIVED** CALENDAR YEAR TO DATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED CODE * (IF SELF-EMPLOYED, ENTER NAME THIS PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) **√** IND Owner Kathy Neal COM Kneal Resource System □ OTH 100.00 100.00 G-20 8/27/2020 100.00 PTY Oakland CA 94611 □ scc **✓** IND Legislative and Regulatory Advocate K Street Consulting Max Mikalonis COM 8/27/2020 100.00 100.00 100.00 G-20 ☐ PTY West Sacramento CA 95691 SCC **✓** IND Owner/Manager COM Ron Mooney Daisy's OTH 100.00 100.00 G-20 8/27/2020 100.00 □ PTY Alameda CA 94501 □scc **√** IND Powerhouse Operator □ сом San Francisco Municipal Transportation Agency Bruce Langley 50.00 G-18 \square oth 8/31/2020 100.00 100.00 100.00 G-20 □ PTY Alameda CA 94501 □scc U.S. Freight Systems, Inc. COM 1,000.00 G-18 ✓ OTH 9/1/2020 1.000.00 1.000.00 1.000.00 G-20 □ PTY

SUBTOTAL \$

1,400.00

 \square scc

*Contributor Codes IND – Individual

COM – Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

Oakland CA 94607

PTY - Political Party

Schedule A (Continuation Sheet) Amounts may be rounded SCHEDULE A (CONT.) to whole dollars. Statement covers period **Monetary Contributions Received CALIFORNIA FORM** 07/01/2020 from _ Page $\frac{12}{}$ of $\frac{25}{}$ 09/19/2020 through NAME OF FILER I.D. NUMBER Jim Oddie for Alameda City Council 2020 1367465 IF AN INDIVIDUAL, ENTER AMOUNT CUMULATIVE TO DATE PER ELECTION CONTRIBUTOR FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR DATE OCCUPATION AND EMPLOYER **RECEIVED** CALENDAR YEAR TO DATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED CODE * (IF SELF-EMPLOYED, ENTER NAME THIS PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) Operating Engineers Local Union No. 3 District 20 PAC ✓ COM ID#811396 2,000.00 G-18 □ OTH 9/2/2020 1.500.00 1.500.00 1,500.00 G-20 PTY Alameda CA 94502 □scc IND Alameda Chiropractic Society COM **✓** OTH 9/3/2020 200.00 200.00 200.00 G-20 ☐ PTY Oakland CA 94607 SCC IND COM Careplus Chiropractic Health Center ✓ OTH 500.00 | 500.00 G-20 9/3/2020 500.00 □ PTY Oakland CA 94607 SCC **√** IND Finance Manager Myers Restaurant Supply Chung Ming Chan П сом \square oth 200.00 200.00 G-20 9/3/2020 200.00 □ PTY Alameda CA 94501

SCC IND COM

☐ PTY

 \square scc

*Contributor Codes

IND – Individual

9/3/2020

COM – Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

Dianne Martinez for City Council 2018 ID#1366707

Emeryville CA 946083310

PTY - Political Party

SCC - Small Contributor Committee

100.00 | 100.00 G-20

100.00

2,500.00

SUBTOTAL \$

Schedule A (Continuation Sheet) Monetary Contributions Received			ts may be rounded whole dollars.	Statement cove	ers period	SCHEDULE A (CONT	
Worldary	Contributions Received			from07/	01/2020	F	orm 460
				through09/	19/2020	Page	e13 of25
NAME OF FILER Jim Oddie	for Alameda City Council 2020					I.D. NI 13674	JMBER 65
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 I CALENDAR YEA (JAN. 1 - DEC. 3	٩R	PER ELECTION TO DATE (IF REQUIRED)
9/3/2020	Formality Real Estate, Inc. Alameda CA 94502	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		500.00	5	500.00	500.00 G-20
9/3/2020	Keith Duong Alameda CA 94501	IND COM OTH PTY SCC	Financial Analyst GAP Inc.	100.00	1	00.00	100.00 G-20
9/3/2020	Law Offices of Hoa T. Cocc Oakland CA 94607	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		100.00	1	00.00	100.00 G-20
9/3/2020	Sandy Chang Alameda CA 94501	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Housewife Unemployed	300.00	3	300.00	300.00 G-20
9/3/2020	United Brothers Enterprises, Inc. Walnut Creek CA 94597	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		500.00	5	500.00	500.00 G-20

SUBTOTAL \$

1,500.00

*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

PTY – Political Party SCC – Small Contributor Committee

Schedule A (Continuation Sheet) Amounts may be rounded SCHEDULE A (CONT.) to whole dollars. Statement covers period **Monetary Contributions Received CALIFORNIA FORM** 07/01/2020 from _ _ of ___²⁵ 09/19/2020 through NAME OF FILER I.D. NUMBER Jim Oddie for Alameda City Council 2020 1367465 IF AN INDIVIDUAL, ENTER AMOUNT CUMULATIVE TO DATE PER ELECTION FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR DATE OCCUPATION AND EMPLOYER **RECEIVED** CALENDAR YEAR TO DATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED CODE * (IF SELF-EMPLOYED, ENTER NAME THIS PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) IND US Regional Funding In. COM ✓ OTH 300.00 300.00 G-20 9/3/2020 300.00 PTY Oakland CA 94607 □ scc **✓** IND Teacher NUSD Wesley Swedlow COM □ oth 9/6/2020 50.00 100.00 100.00 G-20 PTY Alameda CA 94501 SCC **✓** IND Accounting Manager ECS Refining COM Pat Potter \Box oth 100.00 100.00 G-20 9/7/2020 100.00 □ PTY Alameda CA 94501 □ scc IND Campaign For Equality ID#840821 √ COM \square oth 500.00 | 500.00 G-20 9/8/2020 500.00 □ PTY Berkeley CA 94701 ☐ scc **✓** IND Owner/Sepf Employed Dry Clean Time of America Daniel Ng COM □ oth 9/8/2020 300.00 300.00 300.00 G-20 \bigcap PTY

SUBTOTAL \$

1,250.00

 \square scc

*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

Alameda CA 94502

PTY - Political Party

Schedule A (Continuation Sheet) Amounts may be rounded SCHEDULE A (CONT.) to whole dollars. Statement covers period **Monetary Contributions Received CALIFORNIA FORM** 07/01/2020 from _ _ of __ ²⁵ 09/19/2020 15 through NAME OF FILER I.D. NUMBER Jim Oddie for Alameda City Council 2020 1367465 IF AN INDIVIDUAL, ENTER AMOUNT CUMULATIVE TO DATE PER ELECTION FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR DATE OCCUPATION AND EMPLOYER **RECEIVED** CALENDAR YEAR TO DATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED CODE * (IF SELF-EMPLOYED, ENTER NAME THIS PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) Sheet Metal Workers International Association Local No 104 PAC ID#850381 ✓ COM 3,000.00 G-18 □ OTH 9/8/2020 1.250.00 1.250.00 1,250.00 G-20 ☐ PTY San Ramon CA 94583 ☐ scc **✓** IND Software Engineer Douglas Letterman COM **PIXAR** 9/11/2020 250.00 250.00 | 250.00 G-20 ☐ PTY Alameda CA 94501 SCC Asian Pacific American Labor Alliance (APALA) Alameda ▼ COM County ID#981395 □ отн 500.00 | 500.00 G-20 9/17/2020 500.00

Executive Director

East Bay Center for the Blind

SUBTOTAL \$

□ PTY

□ отн

□ PTY

☐ SCC ✓ IND

□ oth

 \bigcap PTY

 \square scc

COM

SCC
IND
O

*Contributor Codes IND – Individual

9/18/2020

9/19/2020

COM – Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

Oakland CA 94619

Concord CA 94548

Alameda CA 94501

Jan Santos

U.A. Local 342 P.A.C. Fund ID#890268

PTY - Political Party

SCC - Small Contributor Committee

300.00 G-18

100.00 | 100.00 G-20

1,250.00 G-20

1,250.00

1,250.00

100.00

3,350.00

	A (Continuation Sheet)		ts may be rounded whole dollars.	Statement cove	.u. u. auta d	SCHEDULE A (CONT.)	
Monetary	Contributions Received			from07/01/2020		FORM 460	
				through09/	19/2020	Page16 of25	
NAME OF FILER Jim Oddie	for Alameda City Council 2020					.D. NUMBER 367465	
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 DA CALENDAR YEAR (JAN. 1 - DEC. 31	R TO DATE	
9/19/2020	Jon Spangler Alameda CA 94501	IND COM OTH PTY SCC	Retired Writer/Editor N/A	100.00	15	0.00 150.00 G-20	
9/19/2020	W Salon San Ramon CA 94583	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		500.00	50	0.00 500.00 G-20	
9/19/2020	Wesley Swedlow Alameda CA 94501	IND COM OTH SCC	Teacher NUSD	50.00	10	0.00 100.00 G-20	
		IND COM OTH PTY SCC					
		IND COM OTH PTY SCC					
			SUBTOTAL	\$ 650.00			

*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

S	C	h	е	d	ul	е	В	_	Part	1
	\sim	2	n	e	P	Δ	^_	iv	Δd	

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

Amounts may be rounded

SCHEDULE B - PART 1

Loans Received		to whole dollars.			Statement co	overs period 07/01/2020	CALIFORNI FORM	^{IA} 460
-					from	7170172020	- I-OIXIVI	
SEE INSTRUCTIONS ON REVERSE					through	09/19/2020	Page17	of
NAME OF FILER							I.D. NUMBER	
Jim Oddie for Alameda City Council 2020							1367465	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PA OR FORGIVE THIS PERIO	EN CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
	VP Finance/General Counsel			PAID				CALENDAR YEAR
Jim Oddie	Variphy			\$0.0	_ >		\$500.00	\$\$46.15
Alameda CA 94501 † IND COM OTH PTY SCC		\$0.00	\$500.00	\$0.0	00 12/31/2024 DATE DUE	_ \$0.00	07/29/2020 DATE INCURRED	546.15 G-20
				PAID				CALENDAR YEAR
				\$FORGIVEN	<u> </u>		\$	\$ PER ELECTION**
†		\$	\$	\$	_	_		\$
TOTAL OTH PTY SCC					DATE DUE		DATE INCURRED	
				PAID	•	0.00 %		CALENDAR YEAR
				FORGIVEN		RATE	4	PER ELECTION**
† IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	_ \$	DATE INCURRED	\$
		SUBTOTALS	\$ 500.00	\$ 0	0.00 \$ 500.0	0.00		
						(Enter (e) on Schedule E, Line 3)	
Schedule B Summary								
Loans received this period (Total Column (b) plus unitemized loan				\$	500.0		ontributor Codes	
2. Loans paid or forgiven this period				\$ _	0.0	o INI	D – Individual DM – Recipient Co	
(Total Column (c) plus loans under \$10 (Include loans paid by a third party that		ule A.)					other than F ΓΗ – Other (e.g., b ϓ – Political Party	
3. Net change this period. (Subtract Line :	2 from Line 1.)			NET \$_	500.0	o so	CC – Small Contrib	
Enter the net here and on the Summar	y Page, Column A, Line 2.				(May be a negative number)			

Schedule C Nonmonetary Contributions Received

Amounts may be rounded to whole dollars.

					S	CHEDULE C
		Statement covers p	eriod	CALIFO		460
	fron	07/01/20	20	FO	RM	400
	thro	ugh09/19/20	20	Page	¹⁸ of	25
				I.D. NUMB 1367465	ER	
ION SERV	OF /ICES	AMOUNT/ FAIR MARKET VALUE	CUMULA DAT CALENDA (JAN 1 - [TE AR YEAR	то	LECTION DATE (QUIRED)
vent own	t Tavern	400.63		400.63	400.63 G	-20
ls		46.15		546.15	546.15 G	-20
DT0	TAL ¢	446.78				

					Trom	07701720			
SEE INSTRUC	TIONS ON REVERSE				throu	ugh09/19/20	20	Page	18 of 25
NAME OF FILE	ER ddie for Alameda City Council 2020							I.D. NUMB 1367465	ER
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	CUMULAT DAT CALENDA (JAN 1 - E	E R YEAR	PER ELECTION TO DATE (IF REQUIRED)
8/27/2020	Alameda Firefighters Association, IAFF Local 689 PAC ID#890076 Alameda CA 94501	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC		Fundraising Event Drinks from Town		400.63		400.63	400.63 G-20
8/31/2020	Jim Oddie Alameda CA 94501	IND COM OTH PTY SCC	VP Finance/General Counsel Variphy	Facebook Ads		46.15		546.15	546.15 G-20
		☐ IND☐ COM☐ OTH☐ PTY☐ SCC							
		☐ IND☐ COM☐ OTH☐ PTY☐ SCC							
Attach add	ditional information on appropriately labeled	continuation	sheets.	SUBTO	TAL \$	446.78			
1. Amount (Include 2. Amount	e C Summary received this period – itemized nonmonetary all Schedule C subtotals.) received this period – unitemized nonmonetary					446.7 0.0	IND - COM - OTH - PTY -	other that Other (e.g Political Pa	t Committee an PTY or SCC) g., business entity)
(Add Lin	es 1 and 2. Enter here and on the Summary	Page, Columi	n A, Lines 4 and 10.)	TOTA	AL \$	446.7	8	FPPC	Form 460 (Jan/2016)

Schedule E Payments Made	Amounts may be rounded to whole dollars.	Statem	ent covers period	CALIFORNIA	460		
		from	07/01/2020	FORM	400		
SEE INSTRUCTIONS ON REVERSE		through _	09/19/2020	_ Page 19 c	of <u>25</u>		
NAME OF FILER				LD NUMBER			

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT	AMOUNT PAID	
Nationbuilder				
Los Angeles CA 90071	WEB		59.00	
Stripe	OFC		0.74	
San Francisco CA 94103	010		0.74	
City of Alameda				
Alameda CA 94501	FIL		125.00	
GoFundMe for Black Achievers Alliance				
Redwood City CA 94063	CVC	GoFundMe Fundraiser for Black Alliance donation online	500.00	

SUBTOTAL \$ * Payments that are contributions or independent expenditures must also be summarized on Schedule D. 684.74

Schedule E Summary

Jim Oddie for Alameda City Council 2020

1. Itemized payments made this period. (Include all Schedule E subtotals.)\$	5,363.48
2. Unitemized payments made this period of under \$100\$	4.00
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.)	5,367.48

I.D. NUMBER

1367465

	_								SCHEDU	LE E (CONT
Schedule E (Continuation Sheet)		Amounts may be rounded to whole dollars.					Statement covers period from 07/01/2020			460
Payments Made										
SEE INSTRUCTIONS ON REVERSE					throu	ugh	09/19/2020	Page _	o	f <u>25</u>
NAME OF FILER Jim Oddie for Alameda City Council 2020								I.D. NUI 136746		
CODES: If one of the following codes accurately describes			•	he code. Otherw	•					
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	explain nonmonetary)* (explain nonmonetary)* ns ng/ballot fees events expenditure supporting/opposing others (explain)* MTG meetings and appearances office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and mess			ch senger services	VOT voter registration				te/sponsor	
LIT campaign literature and mailings NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	PRT	print ads	CODE (DR .	DESCRIPTION		ation technology costs	s (internet, e	, 	JNT PAID
Stripe San Francisco CA 94103			OFC							15.6
Stripe San Francisco CA 94103			OFC							7.5
Stripe										

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 268.77

OFC

OFC

CMP

San Francisco CA 94103

San Francisco CA 94103

Firefighters Print & Design

Sacramento CA 95833

Stripe

1.75

15.83

				SCHEDULE E (CONT					
Schedule E		Amounts may be rounded to whole dollars.			Statement covers period CA			CALIFORNIA A	
(Continuation Sheet)				from		07/01/2020	FO	FORM 4	
Payments Made						00/10/000		04	0.5
SEE INSTRUCTIONS ON REVERSE				throu	ugh	09/19/2020	Page _	o ₁	
NAME OF FILER							I.D. NUI		
Jim Oddie for Alameda City Council 2020							136746	5	
CODES: If one of the following codes accurately describes	the payment, you	may enter	the code. Otherw	vise, descr	ribe th	e 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	metary)* MBR member communications meetings and appearances office expenses PET petition circulating PHO phone banks POL polling and survey research pporting/opposing others (explain)* POS postage, delivery and messenger services PRO professional services (legal, accounting)			RAD RFD SAL TEL TRC TRS TSF VOT WEB	return campa t.v. or candid staff/s transf voter	airtime and production ed contributions aign workers' salaries cable airtime and producte travel, lodging, an spouse travel, lodging, er between committee registration nation technology costs	luction costs d meals and meals s of the sam	ne candida	de/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION	ON OF P	PAYMENT		AMOL	JNT PAID
Stripe San Francisco CA 94103		OFC							16.5
Stripe									
Our Francisco OA 04400		OFC							7.5
San Francisco CA 94103									
Nationbuilder		_							

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 135.64

WEB

OFC

OFC

Los Angeles CA 90071

San Francisco CA 94103

San Francisco CA 94103

Stripe

Stripe

59.00

30.19

			SCHEDULE E (CONT				
Schedule E	Amounts may be to whole do		State	ment covers period	CALIFORNIA 460		
(Continuation Sheet) Payments Made			from	07/01/2020	FORM 400		
SEE INSTRUCTIONS ON REVERSE			through	09/19/2020	Page of		
NAME OF FILER Jim Oddie for Alameda City Council 2020			•		I.D. NUMBER 1367465		
CODES: If one of the following codes accurately descril	oes the payment, you	may enter the code. Othe	rwise, 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	campaign consultants contribution (explain nonmonetary)* civic donations CIL candidate filing/ballot fees ND fundraising events ND independent expenditure supporting/opposing others (explain)* CIL candidate filing/ballot fees ND independent expenditure supporting/opposing others (explain)* CIL candidate filing/ballot fees ND phone banks ND polling and s ND postage, deli ND professional			dio airtime and production turned contributions impaign workers' salaries or cable airtime and procindidate travel, lodging, an aff/spouse travel, lodging, unsfer between committees ter registration formation technology costs	duction costs Id meals and meals s of the same candidate/sponsor		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTION C	DF PAYMENT	AMOUNT PAID		
Stripe San Francisco CA 94103		OFC			3.50		
Stripe		OFC			22.95		

San Francisco CA 94103	OFC		32.79
* Payments that are contributions or independent expenditures must also be summarized on Schedu	ule D.	SUBTOTAL	\$ 175.06

OFC

OFC

San Francisco CA 94103

San Francisco CA 94103

San Francisco CA 94103

Stripe

Stripe

Stripe

65.90

			SCHEDULE E (C				
Schedule E	Amounts may be to whole do		Statement covers period	CALIFORNIA 460			
(Continuation Sheet) Payments Made			from07/01/2020	FORM 400			
SEE INSTRUCTIONS ON REVERSE			through09/19/2020	Page23 of25			
NAME OF FILER Jim Oddie for Alameda City Council 2020				I.D. NUMBER 1367465			
CODES: If one of the following codes accurately describe:	s the payment, you	may enter the code. Otherwis	se, 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	MTG meetings at OFC office expet PET petition circ PHO phone bank POL polling and POS postage, de	ulating	RAD radio airtime and production of RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production of the candidate travel, lodging, and the staff/spouse travel, lodging, and transfer between committees to the voter registration were made information technology costs	uction costs d meals and meals s of the same candidate/sponsor			
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR I	DESCRIPTION OF PAYMENT	AMOUNT PAID			
Stripe San Francisco CA 94103		OFC		6.37			

(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Stripe San Francisco CA 04403	OFC		6.37
San Francisco CA 94103			
Stripe	OFC		4.95
San Francisco CA 94103			
The Next Generation			
Alameda CA 94502	CNS		3,000.00
Susan Reyes			
ALAMEDA CA 94501	PRO		600.00
Stripe			
San Francisco CA 94103	OFC		1.75

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 3,613.07

							SCHEDUL	E E (CONT	
Schedule E		may be rounded hole dollars.		S	Statement covers period			CALIFORNIA	
(Continuation Sheet)				from		07/01/2020		RM	460
Payments Made									
SEE INSTRUCTIONS ON REVERSE				throu	ıgh	09/19/2020	Page _	of	= 25
Jim Oddie for Alameda City Council 2020							1.D. NUI 136746		
CODES: If one of the following codes accurately describes	the paymen	t, you may ente	r the code. Othen	wise, descr	ibe the	e 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	MTG mee OFC offic PET peti PHO pho POL polli POS pos PRO prof	meetings and appearances office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting)			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 car VOT voter registration WEB information technology costs (internet, e-mail			ne candidat	e/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION	ON OF PA	AYMENT		AMOL	JNT PAID
Stripe San Francisco CA 94103		OFC							8.1
Susan Reyes ALAMEDA CA 94501		PRO							411.53
Stripe San Francisco CA 94103		OFC							7.5
Nationbuilder Los Angeles CA 90071		WEB							59.00

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

SUBTOTAL\$

	Ато	ounts may be rour	nded					SCHEDULE H
Schedule H Loans Made to Others*	Allio	Statement co	vers period 7/01/2020	CALIFORNI FORM	^A 460			
SEE INSTRUCTIONS ON REVERSE NAME OF FILER					through	9/19/2020	Page 25	of <u>25</u>
Jim Oddie for Alameda City Council 2020							1367465	
FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT FORGIVENE THIS PERIO	ss close of this	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
Councilmember Oddie Legal Defense Funds ID#1402812 Alameda CA 94501		\$3,000.00	\$0.00	PAID \$ 0.00 FORGIVE \$ 0.00	EN \$	0.00 % RATE \$0.00	\$3,000.00 \$03/04/2020 DATE INCURRED	\$ 3,000.00 PER ELECTION** 0.00 G-18 \$ 3,000.00 G-20
		\$	s	PAID \$FORGIVE	\$		\$	CALENDAR YEAR \$ PER ELECTION**
*Loans that are contributions to another candidate or must also be summarized on Schedule D. Loans forg also be reported on Schedule E.		SUBTOTALS	\$ 0.00	\$ 0	DATE DUE 0.00 \$ 3,000.0	0.00	DATE INCURRED	
Sahadula H Summani						(Enter (e) on Schedule I, Line 3)		
Schedule H Summary								

1. Loans made this period

2. Payments received on loans

(Total Column (b) plus unitemized loans of less than \$100.)

(Total Column (c) plus unitemized payments of less than \$100.)

(Enter the net here and on the Summary Page, Column A, Line 7.)

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

0.00

0.00

**If Required