Date Stamp	
Campaign Statement Cover Page Statement covers period from 10/18/2020 through 12/31/2020 Date of election if applicable: (Month, Day, Year) By Campaign Statement Covers period (Month, Day, Year)	CALIFORNIA FORM 460 Page 1 of 16 For Official Use Only
1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4 2. Type of Statement:	
X Officeholder, Candidate Controlled Committee Primarily Formed Ballot Measure Preelection Statement Quarterly	y Statement Odd-Year Report
3. Committee Information 1.D. NUMBER 1430242 Treasurer(s)	
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Josh Rolph for Rocklin City Council 2020 STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE AREA CODE/PHONE NAME OF TREASURER Kelly Lawler MAILING ADDRESS CITY STATE NAME OF ASSISTANT TREASURER, IF ANY	ZIP CODE AREA CODE/PHONE
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX MAILING ADDRESS	
CITY STATE ZIP CODE AREA CODE/PHONE CITY STATE OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS	ZIP CODE AREA CODE/PHONE
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 complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.	e attached schedules is true and
Executed on DATE DATE DATE DATE DATE DATE DATE DATE DATE Signature of Treasurer or Assistant Treasurer By Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Controlling Officeholder, Candidate, State Measure Proponent Officeholder, Candidate,	Consort Sponsor
Executed on By	
Executed on By	HOH.

Recipient Committee Campaign Statement Cover Page - Part 2

CALIFORNIA 460

Page ____2 of ____16

5. Officeholder or Candidate Controlled Committee		6. Primarily Formed B	Ballot Measure	Committee	
NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BALLOT MEASURE			
Joshua D. Rolph					
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF A	PPLICABLE)	BALLOT NO. OR LETTER	JURISDICTION		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY	STATE ZIP	Identify the controlling	officeholder, ca	andidate, or state m	easure proponent, if any.
Related Committees Not Included in this Statement: List any con	mmittees	NAME OF OFFICEHOLDER, CA			, , , , , , , , , , , , , , , , , , , ,
not included in this statement that are controlled by you or are primarily form or make expenditures on behalf of your candidacy		OFFICE SOUGHT OR HELD		DIS	STRICT NO. IF ANY
COMMITTEE NAME	I.D. NUMBER	-			
NAME OF TREASURER	CONTROLLED COMMITTEE? YES NO	7. Primarily Formed (officeholder(s) or candid			List names of arily formed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. B		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR H	ELD SUPPORT
CITY STATE	ZIP CODE AREA CODE/PHONE	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HE	ELD SUPPORT
COMMITTEE NAME	I.D. NUMBER	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HE	OPPOSE SUPPORT
NAME OF TREASURER	CONTROLLED COMMITTEE?				OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. B		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HE	SUPPORT OPPOSE

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

Statement covers period

from

previous period amounts. If

this is the first report being

filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if

any).

10/18/2020

12/31/2020 through

CALIFORNIA

SUMMARY PAGE

of ___16

I.D. NUMBER

Josh Rolph for Rocklin City Council 2020				1430242		
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE		mmary for Candidates ne State Primary and		
1. Monetary Contributions	\$4,225.21	\$8	General Elections	-		
2. Loans ReceivedSchedule B, Line 3	-4,000.00	.00	1/1 thr	ough 6/30 7/1 to Date		
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 225.21	\$22,718.21	20. Contributions \$.00 \$.00		
4. Nonmonetary Contributions	.00	.00	Received *			
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$225.21	\$\$	21. Expenditures \$.00 \$.00		
Expenditures Made				it Summary for State		
6. Payments Made Schedule E, Line 4	\$2,966.53	\$22,718.21	Candidates			
7. Loans Made	.00	.00	22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)			
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$2,966.53	\$22,718.21	(ii Gubject ib	Voluntary Exponditure Linity		
9. Accrued Expenses (Unpaid Bills)	.00	.00				
10. Nonmonetary Adjustment	.00	.00	Date of Election (mm/dd/yy)	Total to Date		
11. TOTAL EXPENDITURES MADE	\$2,966.53	\$22,718.21		\$		
Current Cash Statement		To calculate Column B,		\$		
12. Beginning Cash Balance	\$	add amounts in Column A to the corresponding				
13. Cash Receipts	225.21	amounts from Column B of your last report. Some		\$		
14. Miscellaneous Increases to Cash	.00	amounts in Column A may		\$		
15. Cash Payments	2,966.53	be negative figures that should be subtracted from		\$		

.00

.00

.00 .00

Add Lines 12 + 13 + 14, then subtract Line 15 \$

*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

16. ENDING CASH BALANCE

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

18. Cash Equivalents See instructions on reverse

19. Outstanding Debts Add Line 2 + Line 9 in Column B above

Cash Equivalents and Outstanding Debts

17. LOAN GUARANTEES RECEIVED...... Schedule B, Line 2 \$

Schedule A Monetary Contributions Received . Amounts may be rounded to whole dollars.		Statement covers from10/18// through12/31//	2020	CALIFORNIA 460 FORM of 16							
NAME OF FILER	IONS ON REVERSE					I.D. NUMBE	ER .				
Josh Rolph f	for Rocklin City Council 2020						1430242				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		THIS PERIOD CALENDAR YEAR		CALENDAR YEAR		CALENDAR YEAR PER	
11/02/2020	Bruce Blodgett	IND □ COM □ OTH □ PTY □ SCC	Executive Director San Joaquin Farm Bureau	200.00 200.00			200.00 200.00		. 200.00 G-2020		
10/19/2020	Robert Columbro	IND □ COM □ OTH □ PTY □ SCC	Delivery Driver Amazon	200.00 200.00		. 200.00 G-2020					
10/23/2020	John Doolittle	IX IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Consultant John T. Doolittle, LLC	100.00 100.00		. 100.00 G-2020					
10/27/2020	Jared Thomas Chiropractic Corporation PAC	□ IND □ COM ☑ OTH □ PTY □ SCC		300.00		300.00 G-2020					
10/29/2020	Marla Livengood	IND COM OTH PTY SCC	Retired Retired	100.00 100.00		100.00 G-2020					
	SUBTOTAL \$ 900.00										

Schedule A Monetary Contributions Received SEE INSTRUCTIONS ON REVERSE		Am	ounts may be rounded to whole dollars.	Statement covers from10/18/ through12/31/	2020	CALIFORNIA 460 FORM Page 5 of 16		
NAME OF FILER	3					I.D. NUMBE		
Josn Kolpn t	for Rocklin City Council 2020						1430242	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALEND	VE TO DATE AR YEAR DEC. 31)	PER ELECTION (IF REQ	
10/27/2020	Norcal Water Jobs Liberty PAC	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		500.00	500	0.00	500.00	G-2020
11/19/2020	Laurel O'Leary	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	25.00	125	5.00	125.00	G-2020
10/19/2020	Emil Pitkin	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CEO GovPredict	180.00 180.00		180.00	G-2020	
10/22/2020	Donny Rollin	IND COM OTH PTY SCC	Farmer Self Employed - Ronny Rollin	100.00 100.00		100.00	G-2020	
12/31/2020	Joshua D. Rolph	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Marketing Yeah Yeah Agency	2,200.21).	00		
		•	SUBTOTAL \$	3,005.21				

Schedule	A	Am	ounts may be rounded						EDULE A
Monetary	Contributions Received		to whole dollars.	Statement covers period			ORNI	AA	20
*				from10/18/	2020	CALIF FO	RM	4	OU
				through12/31/	2020	Page _	6	of1	16
	IONS ON REVERSE								
NAME OF FILER						I.D. NUMBE	ER .		
Josh Rolph	for Rocklin City Council 2020						14302	42	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALEND	VE TO DATE PAR YEAR DEC. 31)	PER ELE	ECTION T REQUIRE	
	Paul Wenger	X IND	Farmer	150.00	150	0.00	150	.00 G-20	120
11/02/2020		OTH	Self Employed - Paul Wenger		•		130	.00 G-20	720

Schedule A Summary		* Contributor Codes
Amount received this period - itemized monetary contributions. (Include all Schedule A subtotals.) — — — — — — — — — — — — — — — — — — —	4,055.21	IND - Individual COM - Recipient Committee
2. Amount received this period - unitemized monetary contributions of less than \$100 \$	170.00	(other than PTY or SCC) OTH - Other (e.g., business entity)
3. Total monetary contributions received this period. (add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)	4,225.21	PTY - Political Party SCC - Small Contributor Committee
SUBTOTAL \$	150.00	

Schedule	B -	Part	1
Loans Re	ceiv	/ed	

*X IND ☐ COM ☐ OTH ☐ PTY ☐ SCC

Amounts may be munded

SCHEDIII E B - DART 1

DATE INCURRED

Schedule E, Line 3) FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772)

www.fppc.ca.gov

As whole dellars								LDULL B-FART I
Loans Received			to whole dollars.	Statement covers period			CALIFORNI	460
					from10/	18/2020	FORM	400
					through12/	31/2020	Page 7	of16
SEE INSTRUCTIONS ON REVERSE								
NAME OF FILER							I.D. NUMBER	
Josh Rolph for Rocklin City Council 20	20						1430	242
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF 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 FORGIVEN THIS PERIOD *	BALANCE AT	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Joshua D. Rolph	Yeah Yeah Agency			X PAID \$ 5,799.79	\$.00	0 %	\$ 8,000.00	\$ 4,000.00 PER ELECTION**
	Marketing			X FORGIVEN	-	RATE	Ψ_5,000.00	PEN ELECTION
		\$ 4,000.00	\$.00	\$ 2,200.21	12/31/2022	\$.00	08/18/2020	

DATE DUE

Schedule B Summary 1. Loans received this period		 	5 _	.00			
(Total Column (b) plus unitemized loans of less than \$100.)							* Contributor Codes
Loans paid or forgiven this period		 \$		4,000.00 -4,000.00			IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other (e.g., business entity) PTY - Political Party SCC - Small Contributor Committee
Enter the net here and on the Summary Page, Column A, Line 2			((May be a negative no	umber)		
SUBTOTA	ALS \$.00	\$ 8000.00	\$.00	\$.00	e versagi
*Amounts forgiven or paid by another party also must be reported on Schedule A						Enter (e) on edule E, Line 3)	FPPC Form 460 (Jan/2016)

** If required.

Schedule B - Part 2		Amounts may be round to whole dollars.	SCHEDULE B - PART 2				
Loan Guarantors		to whole dollars.	Statement co	overs period	CALIFORNIA 460		
				from1	0/18/2020	FORM	400
SEE INSTRUCTIONS ON REVERSE				through1	2/31/2020	Page8	of <u>16</u>
NAME OF FILER Josh Rolph for Rocklin City Council 2020						I.D. NUMBER 14302	242
FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	L	LOAN AM GUAR THIS		CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	□ IND □ COM		L	ENDER		\$PER ELECTION	
	OTH PTY SCC			DATE		(IF REQUIRED)	

SUBTOTAL \$

Enter on Summary Page. Line 17 only.

Schedule	С		Amounts may be rounded			SCHEDULE			
Nonmone	tary Contributions Received		to whole dollars.			nent covers period	CALIFORNIA 460		
•					from	10/18/2020	FORM	TUU	
A WATBUAT	010 01 DE 45D05				through _	12/31/2020	Page9	_ of16	
NAME OF FILER	ONS ON REVERSE						I.D. NUMBER		
Josh Rolph f	or Rocklin City Council 2020						1430	242	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIP GOODS OR		AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
		□ IND							
		COM OTH PTY							
		□ scc							
		□ IND							
		☐ COM ☐ OTH							
		D PTY SCC							
		☐ IND							
		☐ COM ☐ OTH						1	
		□ PTY □ SCC							
Schedule	C Summary						* Contributor Codes		
	eived this period - itemized nonmonetary contribut Schedule C subtotals.) — — — — — — — — —	ions. 		\$		00	IND - Individual COM - Recipient Co	mmittee	
2. Amount rec	eived this period - unitemized nonmonetary contrib	outions of less	than \$100	\$	·	00	(other than P	TY or SCC) usiness entity)	
	onetary contributions received this period. and 2. Enter here and on the Summary Page, Co	lumn A, Lines	4 and 10.)	TOTAL \$	s	00	PTY - Political Party SCC - Small Contrib		

SUBTOTAL \$

Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures, and Committees		Amounts may to whole		Statement covers period from10/18/2020 through12/31/2020			CALIFORNIA 46 FORM Page 10 of 16		
NAME OF FILER Josh Rolph 1	for Rocklin City Council 2020						I.D. NUMBER 1430242		
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	CALE	NTIVE TO DATE NDAR YEAR 1 - DEC. 31)	D/	CTION TO ATE QUIRED)
	Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure							

SUBTOTAL \$		
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	_ TOTAL \$.00
2. Unitemized contributions and independent expenditures made this period of under \$100	\$.00
1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)	\$.00
SCHEDULE D SUMMARY		

Schedule E **Payments Made**

Amounts may be rounded to whole dollars.

	OUNDOLL
Statement covers period	CALIFORNIA A CO

Staten	nent covers period	CALIFORNIA A CO
from	10/18/2020	FORM 40U
through .	12/31/2020	. Page11 of16
		I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Josh Rolph for Rocklin City Council 2020

1430242

SCHEDULE F

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)

Payments that are contributions or independent expenditures must also be summarize	ed on Schedule D.	SUBTOTAL \$	2,158.28
The KAL Group, Inc	PRO		357.60
& J Printing	LIT		730.69
ntegrated Solutions: Political	OFC		69.99
AM Communications	CNS		1,000.00
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT	AMOUNT PAID

www.fppc.ca.gov

Schedule E	
Payments Made	

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Josh Rolph for Rocklin City Council 2020

1430242

CODES: If one of the following codes accurately describes the payme	t, 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)

Payments that are contributions or independent expenditures must also be summarized	on Schedule D.	SUBTOTAL \$	695.40		
Total payments made this period. (Add Lines 1, 2, and 3. Enter here an	d on the Summ	ary Page, Column A, Line 6.)TOTAL \$	2,966.53		
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)					
Unitemized payments made this period of under \$100	- 		112.85		
chedule E Summary Itemized payments made this period. (Include all Schedule E subtotals.))		2,853.68		
ott Winn	WEB		545.40		
e KAL Group, Inc	PRO		150.00		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID		

from
yment, you may enter the code. Otherwise, describe the payment. RRAD 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 TRS staff/spouse travel, lodging, and meals TRS postage, delivery and messenger services TRS transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (internet, e-mail)
DE OR DESCRIPTION OUTSTANDING BALANCE BEGINNING OF THIS PERIOD THIS PERIOD THIS PERIOD (b) AMOUNT INCURRED PERIOD (ALSO REPORT ON E) (d) OUTSTANDING BALANCE A CLOSE OF THIS PERIOD
PRT print ads WEB information technology costs (interpretation of the print ads and the print ads with the

SCHEDULE F SUMMARY

 Total accrued expenses incurred this period. (Include all Schedule F, accrued expenses of \$100 or more, plus total unitemized accrued exp 		 INCURRED	TOTALS \$.00	_
2. Total accrued expenses paid this period. (Include all Schedule F, Coluaccrued expenses of \$100 or more, plus total unitemized payments of		 PAID	TOTALS \$.00	_
3. Net change this period. (Subtract Line 2 from Line 1. Enter the different on the Summary Page, Column A, Line 9.)		 	_ NET \$.00	
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS \$	\$ \$	\$		

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

Amounts may be rounded to whole dollars.

1430242

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Josh Rolph for Rocklin City Council 2020

NAME OF AGENT OR INDEPENDENT CONTRACTOR

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

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

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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PA
	1		

TOTAL * \$

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

^{**} 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 H	Amo	Amounts may be rounded					SCHEDULE I	
Loans Made to Others*		to whole dollars.			Statement covers period		CALIFORNIA ACO	
					from10/*	18/2020	FORM	[^] 460
					through12/3	31/2020	Page15	_ of16
SEE INSTRUCTIONS ON REVERSE								
NAME OF FILER							I.D. NUMBER	
Josh Rolph for Rocklin City Council 20	120						1430	0242
FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF 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 OR FORGIVENES THIS PERIOD *	S BALANCE AT	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				PAID \$ FORGIVEN	\$	RATE	\$	CALENDAR YEAR \$ PER ELECTION**

DATE DUE

SUBTOTALS	\$ \$	\$ \$	

DATE INCURRED

	ncreases to Cash	Amounts may be rounded to whole dollars.	Statement covers period from10/18/2020 through12/31/2020	CALIFORNIA 460 FORM 16 of 16
SEE INSTRUCTIONS ON R NAME OF FILER Josh Rolph for Rocki				I.D. NUMBER 1430242
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER	I DECCI	RIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

		SUBTOTAL \$	
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)	TOTAL \$.00	
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)	\$.00	
2. Unitemized increases to cash of under \$100 this period		.00	
1. Itemized increases to cash this period	\$.00	

Schedule I Summary

Recipient Committee Campaign Statement (Government Code Sections 84200-84216.5)	Type or print in in	k.	Date Stamp	200	FORNIA 460
SEE INSTRUCTIONS ON REVERSE	Statement covers period from 09/20/2020 through 10/17/2020	Date of election if applicable: (Month, Day, Year) 11/03/2020	OCT 2 2 2020		1/23 or Official Use Only
1. Type of Recipient Committee: All Committee Officeholder, Candidate Controlled Committee Officeholder, Candidate Election Committee Officeholder, Candidate Controlled Committee Officeholder, Candidate Controlled Committee Officeholder, Candidate Controlled Committee	Ballot Measure Committee O Primary Formed O Controlled O Sponsored (Also Complete Part 6.) Primary Formed Candidate/ Officeholder Committee (Also Complete Part 7.)	2. Type of Statemen Pre-election Statem Semi-annual Statem Termination Statem Amendment (Explain	ent nent ent	☐ Special O	Statement dd-Year Report ental Preelection t - Attach Form 495
3. Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE Josh Rolph for Rocklin City Council 2020 STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX		Treasurer(s) NAME OF TREASURER Kelly Lawler MAILING ADDRESS CITY NAME OF ASSISTANT TREASURE	STATE ER, IF ANY	ZIP CODE	AREA CODE/PHONE
CITY STATE ZIP CODE OPTIONAL: FAX/E-MAIL ADDRESS	E AREA CODE/PHONE	CITY OPTIONAL: FAX/E-MAIL ADDRES	STATE S	ZIP CODE	AREA CODE/PHONE
Executed on By		SISTANT TREASURER MEASURE PROPONENT OR RESPONSIBLE OF	nd correct.		nttached schedules

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

DATE

Recipient Committee Campaign Statement Cover Page - Part 2

CALIFORNIA 460

Page ____ of ___23

5. Officeholder or Candidate Controlled Committee			6. Pri	marily Formed B	allot Measure	Committee			
NAME OF OFFICEHOLDER OR CANDIDATE				NAME OF	BALLOT MEASURE				
Joshua D. Rolph									
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIS	TRICT NUMBER IF A	APPLICABLE)		BALLOT	NO. OR LETTER	JURISDICTION			SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP						
				Identif	y the controlling	officeholder, c	andidate, or state	measure propone	ent, if any.
				NAME OF	FOFFICEHOLDER, CA	NDIDATE, OR PROP	DNENT		
Related Committees Not included in this State not included in this statement that are controlled by you			contributions	7					
or make expenditures on behalf of your candidacy	or are primarily for	med to receive	Contributions	OFFICE S	SOUGHT OR HELD			DISTRICT NO. IF ANY	
COMMITTEE NAME		I.D. NUMBER		9					
NAME OF TREASURER		CONTROLLE	D COMMITTEE?	7. Pri	marily Formed C	Candidate/Offic	eholder Committe	90 List names	of
		YES	☐ NO				this committee is p		
COMMITTEE ADDRESS STREET	ADDRESS (NO P.O.	BOX)	-	NAME O	F OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT C	R HELD	SUPPORT
									OPPOSE
CITY	STATE	ZIP CODE	AREA CODE/PHONE	NAME OF	- 0551051101 050 00	CANDIDATE	OFFICE SOLICITES	D.U.C.I.D.	1
				NAME O	F OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT O	KHELD	SUPPORT
COMMITTEE NAME		I.D. NUMBER							OPPOSE
				NAME O	F OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT O	R HELD	SUPPORT
NAME OF TREASURER		CONTROLLE	D COMMITTEE?						OPPOSE
		YES	☐ NO	NAME O	F OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT O	R HELD	SUPPORT
COMMITTEE ADDRESS STREET	ADDRESS (NO P.O.	BOX)							OPPOSE
CITY	STATE	ZIP CODE	AREA CODE/PHONE						

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

Column A

TOTAL THIS PERIOD

(FROM ATTACHED SCHEDULES)

7,240.00

-4,000.00

3.240.00

.00

3.240.00

10.457.20

2.741.32

Statement covers period from 09/20/2020 CALIFORNIA FORM

General Elections

Date of Election

through	10/17/2020	Page	3	of	23
		9-			

I.D. NUMBER

1430242

Total to Date

SUMMARY PAGE

SEE INSTRUCTIONS ON REVERSE

Contributions Received

NAME OF FILER

Josh Rolph for Rocklin City Council 2020

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

20. Contributions Received \$.00 \$.00

21. Expenditures \$.00 \$.00

1. Monetary Contributions Schedule A, Line 3 \$

3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$

4. Nonmonetary Contributions Schedule C, Line 3

5. TOTAL CONTRIBUTIONS RECEIVED. Add Lines 3 + 4 \$

11. TOTAL EXPENDITURES MADE. Add Lines 8 + 9 + 10

2. Loans Received Schedule B, Line 3

- 7. Loans Made
 Schedule H, Line 3
 .00
 .00

 8. SUBTOTAL CASH PAYMENTS
 Add Lines 6 + 7
 \$ 14,098.46
 \$ 19,751.68

 9. Accrued Expenses (Unpaid Bills)
 Schedule F, Line 3
 -3,641.26
 .00

 10. Nonmonetary Adjustment
 Schedule C, Line 3
 .00
 .00
- Current Cash Statement

 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 13,599.78

 13. Cash Receipts Column A, Line 3 above 3,240.00

 14. Miscellaneous Increases to Cash Schedule I, Line 4 .00

 15. Cash Payments Column A, Line 8 above 14,098.46

Add Lines 12 + 13 + 14, then subtract Line 15

Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse \$.00

19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ 4,000.00

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

Column B

CALENDAR YEAR

TOTAL TO DATE

18,493.00

4,000.00

22,493.00

22,493,00

19.751.68

19,751.68

Expenditures Limit Summary for State Candidates

22. Cumulative Expenditures Made*
(If Subject to Voluntary Expenditure Limit)

(mm/dd/yy)	
	. \$
	\$
vi-	\$
	\$
	\$

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

16. ENDING CASH BALANCE

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

Schedule A Monetary Contributions Received		Amo	ounts may be rounded to whole dollars.	Statement covers period		CALIFORNIA 460 FORM of 23		60
NAME OF FILER						I.D. NUMBI	ER	
Josh Rolph f	for Rocklin City Council 2020						1430242	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALEND	VE TO DATE PAR YEAR DEC. 31)	PER ELECTION (IF REQUIR	
09/22/2020	Blake Alexandre	IND COM OTH PTY SCC	Dairyman Self Employed - Blake Alexandre	250.00	250	0.00	250.00 G-2	2020
09/24/2020	Jeff Allison	IND COM OTH PTY SCC	Owner Sierra Single Ply	150.00	150	0.00	150.00 G-2	2020
10/09/2020	Megan Byrne	IND COM OTH PTY SCC	Homemaker Homemaker	100.00	100	0.00	- 100.00 G-2	2020
09/24/2020	California Real Estate Political Action Committee (CREPAC) -	☐ IND ☐ COM ☐ OTH ☐ PTY ☒ SCC		1,000.00	1,00	00.00	1,000.00 G-	-2020
10/09/2020	Ken Campbell	IND COM OTH PTY SCC	Dentist Kenneth Campbell DDS	100.00	100	0.00	100.00 G-2	2020
			SUBTOTAL \$	\$ 1,600.00				

Schedule		Amo	ounts may be rounded				SCHEDULE A
Monetary	Contributions Received		to whole dollars.	Statement covers	period	CALIF	ORNIA 160
				from09/20/2	2020		_{RM} 400
SEE INSTRUCTI	IONS ON REVERSE			through10/17/2	2020	Page _	5 of 23
NAME OF FILER	l .					I.D. NUMBE	
Josh Rolph f	or Rocklin City Council 2020						1430242
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALEND	/E TO DATE AR YEAR DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Shaun Crook	⊠ IND	Logger	200.00	200	0.00	
09/24/2020		COM OTH PTY SCC	Crook Logging Inc.				200.00 G-2020
	Cullumber Engineering and Design			100.00	100	0.00	
09/24/2020		COM OTH PTY SCC					. 100.00 G-2020
	Ann B. Davis	X IND	Retired	100.00	100	0.00	
09/22/2020		COM OTH PTY SCC	Retired				. 100.00 G-2020
	Steven J. Ding	⊠ IND	Owner	500.00	500	0.00	
10/09/2020		☐ COM ☐ OTH ☐ PTY ☐ SCC	Woodbridge Crossing				. 500.00 G-2020
	Folsom Care Center			100.00	100	0.00	
09/24/2020		☐ COM ☑ OTH ☐ PTY ☐ SCC					. 100.00 G-2020
			SUBTOTAL S	1,000.00			

Schedule	A	Amo	ounts may be rounded				SCHEDULE A
Monetary	Contributions Received		to whole dollars.	Statement covers	period	CALIF	ORNIA 4 CO
				from09/20	/2020	FO	ORNIA 460
SEE INSTRUCTI	IONS ON REVERSE				/2020	Page _	
NAME OF FILER						I.D. NUMBI	ER .
Josh Rolph f	or Rocklin City Council 2020						1430242
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALEND	VE TO DATE PAR YEAR DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Thomas E. Hamilton, MD	X IND	Retired	200.00	200	0.00	
		СОМ	Retired			V-1-02-	200.00 G-2020
09/22/2020		□ OTH □ PTY □ SCC					
	Jonathan Harmer	X IND	Accounting	100.00	100	0.00	
		□ сом	USA Properties Fund Inc				100.00 G-2020
10/08/2020		OTH					
		□ PTY □ SCC					
	Lia Hoover		Support Staff	400.00	1		
		IND □ COM	RUSD	100.00	100	0.00	100.00 G-2020
09/25/2020		OTH	KOSD				
		PTY					
		□scc			_		
	Maury Litwack	⊠ IND	Nonprofit	100.00	100	0.00	100.00 G-2020
09/25/2020		□ сом □ отн	Orthodox Union				100.00 G-2020
00/20/2020		PTY					
		scc					
	Jason Long	⊠ IND	IT Asset Manager	200.00	200	0.00	
		□ сом	Computer company				. 200.00 G-2020
09/24/2020		☐ OTH ☐ PTY					
		Scc					
			Į.				
			SUBTOTAL	700.00			

Schedule A Monetary Contributions Received SEE INSTRUCTIONS ON REVERSE		Amounts may be rounded to whole dollars.		Statement covers period		CALIFORNIA 460 FORM 7 of 23	
NAME OF FILER						I.D. NUMBE	R 1430242
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE CALENDAI (JAN. 1 - D	R YEAR	PER ELECTION TO DATE (IF REQUIRED)
09/22/2020	Sarah Magelsen	IND COM OTH PTY SCC	Homemaker Homemaker	100.00	100.0	00	100.00 G-2020
09/22/2020	Richard Matteis	IND COM OTH PTY SCC	Retired Retired	250.00	250.0	00	250.00 G-2020
09/30/2020	Michael Mattos	IND COM OTH PTY SCC	Retired Retired	250.00	500.0	00	500.00 G-2020
10/13/2020	Michael Maxfield	IND COM OTH PTY SCC	Finance Manager Hpe	300.00	800.	00	. 800.00 G-2020
10/09/2020	Jennifer Meinzer	IND COM OTH PTY SCC	Homemaker Homemaker	100.00	100.	00	. 100.00 G-2020
			SUBTOTAL \$	1,000.00			

Schedule	A	Amo	ounts may be rounded				SCHEDULE A
Monetary	Contributions Received		to whole dollars.	Statement covers	period	CALIE	ORNIA 4 O O
				09/20/	2020	EO	ORNIA RM 460
				from		ГО	KIVI
				through10/17/2	2020	Page .	8 of <u>23</u>
NAME OF FILER	IONS ON REVERSE					I.D. NUMBI	FR
Josh Rolph f	for Rocklin City Council 2020						1430242
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALEND	VE TO DATE AR YEAR DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Terry Munz	⊠ IND	Farmer	100.00	100	0.00	100.00 G-2020
10/07/2020	La rrance de la comp	☐ COM ☐ OTH ☐ PTY ☐ SCC	Self Employed - Terry Munz				100.00 0-2020
	Paul Oscarson	⊠ IND	Retired	100.00	100	0.00	100.00 G-2020
09/24/2020		□ сом □ отн	Retired				. 100.00 G-2020
		□ PTY □ SCC					
	Stephanie Oscarson	⊠ IND	Homemaker	100.00	100	0.00	100.00 G-2020
09/22/2020		□ сом □ отн	Homemaker		•		100.00 3-2020
		□ PTY □ SCC					
	Pauli Ranch			250.00	250	0.00	250.00 G-2020
09/24/2020		□ сом ⊠ отн					255.55 5 2525
		□ PTY □ SCC					
	R. Jan Pinney	⊠ IND	CEO	500.00	500	0.00	500.00 G-2020
09/24/2020		□ COM □ OTH □ PTY □ SCC	Pinney Insurance				300.00 G-2020
			SUBTOTAL \$	1,050.00			

Schedule	A	Amo	ounts may be rounded				SCHEDULE A
Monetary	Contributions Received		to whole dollars.	Statement covers	period	CALIF	ORNIA A CO
				from09/20/2	2020	FO	ORNIA 460
SEE INSTRUCTI	IONS ON REVERSE			through10/17/2	2020		9 of <u>23</u>
NAME OF FILER						I.D. NUMBE	ER .
Josh Rolph fo	for Rocklin City Council 2020						1430242
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIV CALENDA (JAN. 1 -	AR YEAR	PER ELECTION TO DATE (IF REQUIRED)
	Annette Pombo	⊠ IND	Homemaker	100.00	100	.00	
09/22/2020		COM OTH PTY SCC	Homemaker				100.00 G-2020
	Joshua Price	⊠ IND	CPA	100.00	100	.00	400 00 0 0000
09/22/2020		☐ COM ☐ OTH ☐ PTY ☐ SCC	Self Employed - Joshua Price				100.00 G-2020
	Jessica Ring	X IND	Nurse	100.00	100	0.00	
09/26/2020		COM OTH PTY scc	Kaiser Permanente				100.00 G-2020
	Gil Schonour	⊠ IND	Retired	250.00	250	0.00	050.00.0.0000
09/28/2020		☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired		J		250.00 G-2020
	Greg Scott	⊠ IND	Accountant	100.00	100	0.00	400.00.0.000
10/06/2020		☐ COM ☐ OTH ☐ PTY ☐ SCC	BFBA, LLP				. 100.00 G-2020
			SUBTOTAL \$	650.00			

	netary Contributions Received to whole dollars. INSTRUCTIONS ON REVERSE		Statement covers period from		Page _	SCHEDULE A ORNIA 460 RM	
	for Rocklin City Council 2020					I.D. NUMBE	1430242
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD		/E TO DATE AR YEAR DEC. 31)	PER ÉLECTION TO DATE (IF REQUIRED)
10/04/2020	Alexandra Shadle	IND COM OTH SCC	Homemaker Homemaker	250.00	250	0.00	250.00 G-2020
09/24/2020	Amanda Stewart Morris	IND COM OTH PTY SCC	Teacher Placer County Office of Education	100.00	100	0.00	. 100.00 G-2020
09/24/2020	Trevor Vass	IND COM OTH PTY SCC	Systems Engineer Sacramento County Office of Education	100.00	100	0.00	. 100.00 G-2020
	•						

SUBTOTAL \$	450.00	
3. Total monetary contributions received this period. (add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)	7,240.00	PTY - Political Party SCC - Small Contributor Committee
2. Amount received this period - unitemized monetary contributions of less than \$100 \$ _	790.00	(other than PTY or SCC) OTH - Other (e.g., business entity)
Amount received this period - itemized monetary contributions. (Include all Schedule A subtotals.) — — — — — — — — — — — — — — — — — — —	6,450.00	IND - Individual COM - Recipient Committee
Conclude A Cuminary		" Contributor Codes

Schedule A Summen

Schedule B - Part 1 Amounts may be rounded SCHEDULE B - PART 1 to whole dollars. Loans Received Statement covers period **CALIFORNIA FORM** 09/20/2020 from 10/17/2020 11 23 through SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Josh Rolph for Rocklin City Council 2020 1430242 IF INDIVIDUAL, ENTER (a) OUTSTANDING (b) AMOUNT (c) AMOUNT PAID (d) OUTSTANDING (e) INTEREST (f) ORIGINAL (g) CUMULATIVE **FULL NAME, STREET ADDRESS AND** BALANCE RECEIVED THIS OR FORGIVEN AMOUNT OF CONTRIBUTIONS OCCUPATION AND EMPLOYER **BALANCE AT** PAID THIS ZIP CODE OF LENDER (IF SELF-EMPLOYED, ENTER THIS PERIOD ** **BEGINNING THIS PERIOD** CLOSE OF THIS PERIOD LOAN TO DATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) NAME OF BUSINESS) **PERIOD** PERIOD CALENDAR YEAR Joshua D. Rolph X PAID Yeah Yeah Agency \$ 4,000.00 0 8,000.00 \$ 4,000.00 4,000.00 PER ELECTION** Marketing

.00

8,000.00

FORGIVEN

.00

RATE

.00

(Enter (e) on Schedule E, Line 3)

12/31/2022

DATE DUE

4,000.00 G-2020

FPPC Form 460 (Jan/2016)

www.fppc.ca.gov

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

08/18/2020

DATE INCURRED

Schedule B Summary	
1. Loans received this period	* Contributor Codes
2. Loans paid or forgiven this period\$ 4,000.00 (Total Column (c) plus loans under \$100 paid or forgiven) (Include loans paid by a third party that are also itemized on Schedule A.)	IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other (e.g., business entity) PTY - Political Party
3. Net change this period. (Subtract Line 2 from Line 1.) NET \$4,000.00 (May be a negative number)	SCC - Small Contributor Committee
SUBTOTALS \$.00 \$ 4000.00 \$ 4,000.00 \$.00	

** If required.

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

*X IND ☐ COM ☐ OTH ☐ PTY ☐ SCC

Schedule B - Part 2		Amounts may be round	led				DULE B - PART 2
Loans Received		to whole dollars.		Statemen	t covers period	CALIFORNI	AAGO
				from	09/20/2020	FORM	400
				through	10/17/2020	Page 12	of <u>23</u>
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Josh Rolph for Rocklin City Council 2020						I.D. NUMBER 14302	242
FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	L	.OAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	□ IND □ COM		L	ENDER		\$PER ELECTION	
	OTH PTY			DATE		(IF REQUIRED)	
				SUBTO	TAL \$	Enter on Summary Page. Line 17 only.	

Schedule (Nonmonet	C ary Contributions Received		Amounts may be rounded to whole dollars.	Î	Staten	nent covers period	CALIFORN	SCHEDULE C
					from	09/20/2020	FORM	400
					through .	10/17/2020	Page13_	_ of23
SEE INSTRUCTION	ONS ON REVERSE						I.D. NUMBER	
Josh Rolph fo	r Rocklin City Council 2020						1430	242
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)		PTION OF SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
		□ IND □ COM □ OTH □ PTY □ SCC						
		IND COM OTH PTY SCC					×	
		IND COM OTH PTY SCC						
1. Amount rece	C Summary eived this period - itemized nonmonetary contribut chedule C subtotals.) — — — — — — — —			\$	š	00	* Contributor Codes IND - Individual COM - Recipient Co	mmittee
2. Amount rece	eived this period - unitemized nonmonetary contrib	outions of less t	than \$100		·	00	(other than P	TY or SCC)
3. Total nonmo	onetary contributions received this period. and 2. Enter here and on the Summary Page, Co					00	PTY - Political Party SCC - Small Contrib	
					SUBTOTAL S	3	Promote State	

Supportin Candidate	of Expenditures ng/Opposing Other es, Measures, and Committees		y be rounded e dollars.	from	10/17/201		CALIFO FOR Page —	RNIA M	460 23
Josh Rolph	R for Rocklin City Council 2020						i.d. NUMBER 1430242		
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	CALE	TIVE TO DATE NDAR YEAR 1 - DEC. 31)	D	ECTION TO ATE QUIRED)
	Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure							

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)	-\$.00
2. Unitemized contributions and independent expenditures made this period of under \$100	\$.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	- \$.00

SUBTOTAL \$

SCHEDULE D SUMMARY

Schedule E
Payments Made

Amounts may be rounded to whole dollars.

	S	СН	IED	UL	E.	Ε
--	---	----	-----	----	----	---

Stateme	ent covers period	CALIFORNIA A CO
from	09/20/2020	FORM 40U
through _	10/17/2020	Page15of23
•		I.D. NUMBER 1430242

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Josh Rolph for Rocklin 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

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)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.					
CalSal	LIT		375.00		
Budget Watchdogs Newsletter	LIT		876.00		
Aaron, Thomas & Associates, Inc.	LIT		4,902.45		
BAM Communications	CNS		1,300.00		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT	AMOUNT PAID		

Schedule E Payments Made

Amounts may be rounded to whole dollars.

Statement covers period from 09/20/2020 CALIFORNIA FORM FORM

through	10/17/2020	Page _	16	_ of _	23
		8			

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Josh Rolph for Rocklin City Council 2020

I.D. NUMBER

1430242

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)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			3,978.60
eFundraising Connections	OFC		5.00
eFundraising Connections	OFC		0.95
Cardmember Services	OFC		331.39
Cardmember Services	СМР		3,641.26
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT	AMOUNT PAID

Schedule E	Amounts may be rounded	SCHI			
Payments Made	to whole dollars.	Statement covers period	CALIFORNIA 1 CC		
		from09/20/2020	FORM 400		
SEE INSTRUCTIONS ON REVERSE		through10/17/2020	Page17 of23		
NAME OF FILER		L	I.D. NUMBER		
137 SITTE SCI 1 100 1 5			I I.D. NONDLIX		

Josh Rolph for Rocklin City Council 2020 1430242 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
eFundraising Connections	OFC		14.00
Election Digest	LIT		454.00
Placer County Elections	СМР		200.00
Joshua D. Rolph	FIL		550.00
* Payments that are contributions or independent expenditures must also be summarized	on Schedule D.	SUBTOTAL \$	1,218.00

Schedule E
Payments Made

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Josh Rolph for Rocklin City Council 2020

I.D. NUMBER 1430242

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)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			1,292.25
Voter Link	СМР		285.00
Voter Link	СМР		286.45
The KAL Group, Inc	PRO		473.30
Joanna Smith	СМР		247.50
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE (DR DESCRIPTION OF PAYMENT	AMOUNT PAID

Schedule E Payments Made	Amounts may be rounded to whole dollars.	Chatamant anyon payled	SCHEDULE		
Payments Made		Statement covers period from09/20/2020	CALIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE		through10/17/2020	Page19 of23		
NAME OF FILER			I.D. NUMBER		
Josh Rolph for Rocklin City Council 2020			1430242		
CODES: If one of the following codes accurately describe	es the payment, you may enter the code. Other	erwise, describe the payment.			
CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and produc	tion 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		tees 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 of	costs (internet, e-mail)		
NAME AND ADDRESS OF PAYEE	0005				
(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DES	SCRIPTION OF PAYMENT	AMOUNT PAID		

Schedule E Summary 1. Itemized payments made this period. (Include all Schedule E subtotals.)						
2. Unitemized payments made this period of under \$100 \$				156.16		
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)\$.00		
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)				14,098.46		
* Payments that are contributions or independent expenditures must also be summarized	on Schedule D.		SUBTOTAL \$.00		

Schedule F	Amounts may be rounded	SCHEDULE			
Accrued Expenses (Unpaid Bills)	to whole dollars.	Statement covers period	CALIFORNIA / CC		
		from09/20/2020	FORM 40U		
		through10/17/2020	Page of23		
SEE INSTRUCTIONS ON REVERSE					
NAME OF FILER			I.D. NUMBER		
Josh Rolph for Rocklin City Council 2020			1430242		

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. 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 PHO phone banks TRC candidate travel, lodging, and meals FIL candidate filing/ballot fees 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 PRO professional services (legal, accounting) VOT voter registration LEG legal defense LIT 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
Cardmember Services	СМР	3,641.26	.00	3,641.26	.00

SCHEDULE F SUMMARY

 Total accrued expenses incurred this period. (Include all Schedule F, C accrued expenses of \$100 or more, plus total unitemized accrued expenses.) 			INCURRED	TOTALS\$.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 uniternized payments on accrued expenses under \$100.)						
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 \$ _						
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS \$	\$	\$	\$		

Schedule G	Amounts may be rounded		SCHEDULE
Payments Made by an Agent or Independent	to whole dollars.	Statement covers period	CALIFORNIA A CC
Contractor (on Behalf of This Committee)		from09/20/2020	FORM 46U
		through10/17/2020	Page21 of23
SEE INSTRUCTIONS ON REVERSE			
NAME OF FILER			I.D. NUMBER
Josh Rolph for Rocklin City Council 2020			1430242
NAME OF AGENT OR INDEPENDENT CONTRACTOR			
Aaron, Thomas & Associates, Inc.			
CODES: If one of the following codes accurately describes t	he payment, you may enter the code. Othe	erwise, describe the payment.	
CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and produc	etion costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions	
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salar	ies
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and p	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, lodgi	ng, and meals
IND independent expenditure supporting/opposing others (explain)*	POS nostage delivery and messenger services	TSE transfer between commit	tees of the same candidate/sponsor

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
USPS	POS			1,727.45

PRO professional services (legal, accounting)

PRT print ads

TOTAL * \$

VOT voter registration

WEB information technology costs (internet, e-mail)

1,727.45

LEG legal defense

LIT campaign literature and mailings

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

^{**} 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 H Loans Made to Others*		Amounts may be rounded to whole dollars. Statement covers period CALIFORN				Statement covere nerted			
Loans Made to Others							CALIFORNIA	460	
					from	20/2020	FORM	100	
					through10/	17/2020	Page	of <u>23</u>	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER							I.D. NUMBER		
Josh Rolph for Rocklin City Council 20	20						1430	242	
FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF 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 OR FORGIVENES THIS PERIOD *	BALANCE AT	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE	
				PAID \$ FORGIVEN	. \$	RATE	5 \$	\$PER ELECTION**	
		\$	\$	\$	DATE DUE	\$	DATE INCURRED		

SUBTOTALS	\$ \$	\$ \$	

Schedule I Miscellaneous Increases to Cash		Amounts may be rounded to whole dollars.	to whole dollars. Statement covers period from09/20/2020		
			through	Page of23	
THE RESERVE AND ADDRESS OF THE PARTY OF THE	ONS ON REVERSE				
Josh Rolph f	or Rocklin City Council 2020			I.D. NUMBER 1430242	
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DES	CRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH	

		SUBTOTAL \$
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)	AL \$.00
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)	\$.00
2. Unitemized increases to cash of under \$100 this period	_ \$.00
1. Itemized increases to cash this period	\$.00

Schedule I Summary

State of California

Recipient Committee Campaign Statement Cover Page - Part 2

CALIFORNIA FORM 460

Page 2 of 25

5. Officeholder or Candidate Controlled Committee	6. Primarily Formed E	Ballot Measure	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BALLOT MEASURE			
Joshua D. Rolph					
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF	APPLICABLE)	BALLOT NO. OR LETTER	JURISDICTION		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY	STATE ZIP	Identify the controlling	officeholder (candidate, or state measur	e proponent if any
Related Committees Not Included in this Statement: List any c	ommittees	NAME OF OFFICEHOLDER, CA		•	proportority it unity.
not included in this statement that are controlled by you or are primarily fo or make expenditures on behalf of your candidacy		OFFICE SOUGHT OR HELD		DISTRICT	NO. IF ANY
COMMITTEE NAME	I.D. NUMBER	-			
NAME OF TREASURER	CONTROLLED COMMITTEE?	7. Primarily Formed (officeholder(s) or candid		ceholder Committee <i>I</i> this committee is primarily for	list names of ormed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT OPPOSE
CITY STATE	ZIP CODE AREA CODE/PHONE	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
COMMITTEE NAME	I.D. NUMBER	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HELD	OPPOSE SUPPORT
NAME OF TREASURER	CONTROLLED COMMITTEE?	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HELD	OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.		NAME OF OFFICEROLDER OR	ONHUMA	OF THE GOOGHT ON HELD	SUPPORT OPPOSE
CITY STATE	ZIP CODE AREA CODE/PHONE				

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

Column A

TOTAL THIS PERIOD

(FROM ATTACHED SCHEDULES)

11,253.00

8.000.00

19.253.00

.00

19,253.00

Column B

CALENDAR YEAR

TOTAL TO DATE

11,253.00

8,000.00

19.253.00

.00

19,253.00

.00

5,653.22

3,641.26

.00

9,294,48

To calculate Column B. add amounts in Column

A to the corresponding amounts from Column B

of your last report. Some

amounts in Column A may be negative figures that

should be subtracted from previous period amounts. If

this is the first report being

filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if

any).

SUMMARY PAGE Statement covers period **CALIFORNIA** 01/01/2020 from 09/19/2020 25 through I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

Contributions Received

Current Cash Statement

16. ENDING CASH BALANCE

NAME OF FILER

Josh Rolph for Rocklin City Council 2020

3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$

4. Nonmonetary Contributions Schedule C, Line 3

5. TOTAL CONTRIBUTIONS RECEIVED...... Add Lines 3 + 4 \$

8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7

9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3

11. TOTAL EXPENDITURES MADE...... Add Lines 8 + 9 + 10

14. Miscellaneous Increases to Cash Schedule I, Line 4

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

2. Loans Received _______ Schedule B, Line 3

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

1430242

	1/1	through 6/30	7/1	I to Date
20. Contributions Received	\$.00	\$.00
21. Expenditures Made	\$.00	_ \$.00

Expenditures Made Expenditures Limit Summary for State Candidates 6. Payments Made Schedule E, Line 4 5.653.22 5.653.22

.00

5,653.22

3,641.26

.00

9,294.48

.00

19,253.00

.00

5,653.22

13,599.78

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
	\$
	\$
	\$
	\$
	\$

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

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

17.	LOAN GUARANTEES RECEIVED Schedul	e B, Line 2	\$_	.00
Cas	sh Equivalents and Outstanding Debts			
18.	Cash Equivalents	ie \$_		.00
19.	Outstanding Debts Add Line 2 + Line 9 in Column B abo	ve \$_		11,641.26
Powe	red by ISPolitical.com			

Add Lines 12 + 13 + 14, then subtract Line 15 \$

٠									
	Schedule A Monetary Contributions Received		Am	Statement covers period			CALIFO FO	ORNIA 460 RM 4 of 25	
	NAME OF FILER	ONS ON REVERSE or Rocklin City Council 2020						I.D. NUMBE	R 1430242
	DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT REG		4	/E TO DATE AR YEAR DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	09/15/2020	Elaine E. Barnett	IND COM OTH PTY SCC	Homemaker Homemaker	500.00	0	500	0.00	500.00 G-2020
	09/15/2020	Peter Bradford	XI IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Farmer Bradford Ranch	500.00	0	500	0.00	500.00 G-2020

X IND

COM
OTH
PTY
SCC

X IND

СОМ

□ PTY □ SCC

IND ☐ COM ☐ OTH

Retired

Retired

Retired

Retired

Retired

Retired

100.00

100.00

100.00

100.00

100.00

100.00

100.00 G-2020

100.00 G-2020

100.00 G-2020

	□scc		
	 ☐ PTY		I .

09/15/2020

09/08/2020

09/15/2020

Deepak Chabra, MD

Georgiana Champion

Daniel Clift

Schedule A Monetary Contributions Received		Amo	ounts may be rounded to whole dollars.	Statement cover	s period	CALIFORNIA 460		
SEE INSTRUCT	IONS ON REVERSE			through09/19	9/2020	Page _	5 of 25	
Josh Rolph	for Rocklin City Council 2020						1430242	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALEND	VE TO DATE AR YEAR DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
09/15/2020	Charlene Doty	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Farmer Ellwood Ranch	100.00 100.00		0.00	. 100.00 G-2020	
09/12/2020	Debra DuVall	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	100.00 100.0		0.00	100.00 G-2020	
09/11/2020	Natalie Feller	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Accountant Brigham Young University	250.00	250	0.00	250.00 G-2020	
09/15/2020	Ferrari Brothers Properties, LLC Resp. Officer James Ferrari	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		500.00 500		0.00	. 500.00 G-2020	
09/15/2020	Joseph L. Ferrari	IND COM OTH PTY SCC	Farmer Self Employed- Joseph Ferrari	250.00	250	0.00	250.00 G-2020	

1,200.00

	Schedule A Monetary Contributions Received		Amounts may be rounded to whole dollars.		period	CALIFORNIA 460	
SEE INSTRUCT	IONS ON REVERSE			through09/19/2020		Page _	6 of <u>25</u>
Josh Rolph 1	or Rocklin City Council 2020					I.D. NUMBI	ER 1430242
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	THIS PERIOD CALEND		VE TO DATE AR YEAR DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/15/2020	Pamela Fronk	X IND COM OTH PTY SCC	Retired Retired	500.00	500	0.00	500.00 G-2020
09/15/2020	Deanna Geddes	IX IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Professor Temple University	150.00	150.00		. 150.00 G-2020
09/08/2020	Gayle Gertsch	IND COM OTH PTY SCC	Retired Retired	1,000.00	1,00	00.00	1,000.00 G-2020
09/15/2020	Linda Gibson	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	100.00	100	0.00	100.00 G-2020
08/24/2020	Brad Goehring	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Farmer Self Employed - Brad Goehring	500.00	500	0.00	500.00 G-2020

2,250.00

Schedule A Monetary Contributions Received		Am	ounts may be rounded to whole dollars.	Statement covers from01/01/		CALIFORNIA 460		
	IONS ON REVERSE			through09/19/	2020		7 of25	
Josh Rolph 1	for Rocklin City Council 2020					I.D. NUMBE	1430242	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIV CALENDA (JAN. 1 -	AR YEAR	PER ELECTION TO DATE (IF REQUIRED)	
09/12/2020	Guy Biggs Construction, Inc.	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		100.00	100	.00	100.00 G-2020	
09/09/2020	Kali Hetrick	IX IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Substitute Teacher & Bookkeeper RUSD & iprospectcheck.com	100.00	100	1.00	100.00 G-2020	
09/15/2020	Cynthia L. Kenney	IND COM OTH PTY SCC	Owner Golfland	100.00	100	0.00	. 100.00 G-2020	
09/10/2020	Michael Mattos	IND COM OTH PTY SCC	Retired Retired	250.00	250	0.00	. 250.00 G-2020	
08/31/2020	Michael Maxfield	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Finance HPE	500.00	500	0.00	. 500.00 G-2020	

1,050.00

Schedule A Monetary Contributions Received		Amo	ounts may be rounded to whole dollars.	Statement covers	period CA	CALIFORNIA / CO		
				from01/01/2		FORM 40U		
				through09/19/2	2020	Page8 of25		
NAME OF FILER					I.D.	NUMBER		
Josh Rolph 1	for Rocklin City Council 2020					1430242		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR PER ELECTION TO DATE		
	Mike Murray for Supervisor	□ IND		100.00	100.00	100.00 G-2020		
09/14/2020		COM OTH PTY SCC						
-	Matt Miller	⊠ IND	Salesman	500.00	500.00	500.00 G-2020		
09/17/2020		☐ COM ☐ OTH ☐ PTY ☐ SCC	Fujifilm			30000 0 2020		
	Laurel O'Leary	⊠ IND	Retired	100.00	100.00	100.00 G-2020		
09/11/2020		□ COM □ OTH □ PTY □ SCC	Retired					
	Oscar III, Inc.			500.00	500.00	500.00 G-2020		
09/15/2020		☐ COM ☑ OTH ☐ PTY ☐ SCC				,		
	G. Richard Oscarson	IND IND	Retired	600.00	600.00	600.00 G-2020		
09/15/2020		□ COM □ OTH □ PTY □ SCC	Retired					

1,800.00

Schedule A Monetary Contributions Received		Amo	ounts may be rounded to whole dollars.	Statement covers period from01/01/2020			CALIFORNIA 460		
	IONS ON REVERSE			through _	09/19/2	2020	Page _	9 of <u>25</u>	
Josh Rolph 1	ror Rocklin City Council 2020						I.D. NUMBE	R 1430242	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT F THIS PI		CALEND	/E TO DATE AR YEAR DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
	Brent H. Peterson	⊠ IND			.00	500	0.00	500.00 G-2020	
09/15/2020		☐ COM ☐ OTH ☐ PTY ☐ SCC	Bonneville Multifamily Capital					300.00 0 2020	
	Mark Peterson	IND IND	Attorney	500	0.00	500).00	500.00 G-2020	
09/11/2020		□ COM □ OTH □ PTY □ SCC	MEP Law Corp					333,33 0 2020	
-	John Pratt	⊠ IND	Retired	500.00 50		500	0.00	500.00 G-2020	
08/31/2020		□ COM □ OTH □ PTY □ SCC	Retired					300.00 0 2020	
14	R. Vineyards	□ IND		200	0.00	200	0.00	200.00 G-2020	
09/15/2020		☐ COM ☑ OTH ☐ PTY ☐ SCC						20000 0 2020	
	Daniel Rolph	IND IND	Historian	500	0.00	500	0.00	500.00 G-2020	
09/09/2020	9/2020 COM The Historical Society of Pennsylvania PTY SCC				llu-				

2,200.00

Schedule A Monetary Contributions Received		Ame	ounts may be rounded to whole dollars.	Statement covers	period	CALIFORNIA / CO			
·				from01/01/2			RM	^4	- 60
	IONS ON REVERSE			through09/19/2	2020	Page .		of _	25
Josh Rolph 1	for Rocklin City Council 2020					I.D. NUMBI	14302	242	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALENDA	/E TO DATE AR YEAR DEC. 31)		ECTION REQUI	N TO DATE (RED)
09/15/2020	P.M. Sanguinetti	IND COM OTH PTY SCC	Farmer Sanguinetti Farms	100.00	100.00 100.00		. 10	0.00 G	-2020
09/12/2020	Paul Stoermer	IND COM OTH PTY SCC	Retired Retired	100.00	100.00 100.		. 10	0.00 G	-2020
09/15/2020	Vantagerx Dispensing Services LLC	□ IND □ COM ☑ OTH □ PTY □ SCC		100.00	100	0.00	. 10	0.00 G	-2020
09/15/2020	Kenny Watkins	IND COM OTH PTY SCC	Farmer Watkins Farms	300.00 300.00		0.00	. 30	0.00 G	-2020
09/15/2020	Amy Young	IND COM OTH PTY SCC	Homemaker Homemaker	100.00	100	0.00	. 10	0.00 G	-2020

700.00

Schedule	A Contributions Received	Am	Statement covers	neriod	OAL IE	SCHEDULE A	
Worldary	Continuations (1600b) Feb.			from01/01/	2020	CALIF	ORNIA 460
CEE INCTUICE	IONS ON DEVEDOE			through09/19/	2020	Page _	11 of 25
NAME OF FILER	ions on reverse for Rocklin City Council 2020					I.D. NUMBE	1430242
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIN CALEND (JAN. 1 -	AR YEAR	PER ELECTION TO DATE (IF REQUIRED)
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
		□ IND □ COM □ OTH □ PTY □ SCC					

Schedule A Summary			* Contributor Codes
Amount received this period - itemized monetary contributions. (Include all Schedule A subtotals.) — — — — — — — — — — — — — — — — — — —	\$_	10,500.00	IND - Individual COM - Recipient Committee
2. Amount received this period - unitemized monetary contributions of less than \$100	\$_	753.00	(other than PTY or SCC) OTH - Other (e.g., business entity)
3. Total monetary contributions received this period. (add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)	TOTAL \$ _	11,253.00	PTY - Political Party SCC - Small Contributor Committee
	SUBTOTAL \$.00	

Schedule B - Part 1 Amounts may be rounded SCHEDULE B - PART 1 **Loans Received** to whole dollars. Statement covers period **CALIFORNIA** FORM 01/01/2020 from 09/19/2020 through SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Josh Rolph for Rocklin City Council 2020 1430242 (c) AMOUNT PAID (d) OUTSTANDING (e) INTEREST (f) ORIGINAL (g) CUMULATIVE (a) OUTSTANDING (b) AMOUNT IF INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND PAID THIS AMOUNT OF CONTRIBUTIONS OCCUPATION AND EMPLOYER BALANCE RECEIVED THIS OR FORGIVEN BALANCE AT ZIP CODE OF LENDER **BEGINNING THIS** PERIOD THIS PERIOD ** PERIOD LOAN TO DATE (IF SELF-EMPLOYED, ENTER CLOSE OF THIS (IF COMMITTEE, ALSO ENTER I.D. NUMBER) PERIOD NAME OF BUSINESS) PERIOD CALENDAR YEAR Joshua D. Rolph PAID Yeah Yeah Agency \$ 8,000.00 8,000.00 0 PER ELECTION** \$ 8,000.00 Marketing RATE 8,000.00 G-2020 FORGIVEN

\$

8,000.00

\$

.00

12/31/2022

DATE DUE

\$

.00

08/18/2020

DATE INCURRED

FPPC Form 460 (Jan/2016)

www.fppc.ca.gov

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

.00

Schedule E, Line 3)

1. Loans received this period		 	S	8,000.00			
(Total Column (b) plus unitemized loans of less than \$100.)							* Contributor Codes
Loans paid or forgiven this period	-	 	S	.00			IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other (e.g., business entity) PTY - Political Party
3. Net change this period. (Subtract Line 2 from Line 1.)		 NET \$		8,000.00 ay be a negative n	umber)		SCC - Small Contributor Committee
SUBTOTALS \$	8,000.00	\$ 0.00	\$	8,000.00	\$.00	
*Amounts forgiven or paid by another party also must be reported on Schedule A						(Enter (e) on	

** If required.

*X IND ☐ COM ☐ OTH ☐ PTY ☐ SCC

Schodula R Summani

Schedule B - Part 2 Loans Received SEE INSTRUCTIONS ON REVERSE NAME OF FILER Josh Rolph for Rocklin City Council 2020		Amounts may be roun to whole dollars.	ded	Statement from	01/01/2020 09/19/2020	CALIFORN FORM	of <u>25</u>
FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	l	-OAN	AMOUNT GUARANTEEI THIS PERIOD	CUMULATIVE	BALANCE OUTSTANDING TO DATE
	□ IND □ COM □ OTH □ PTY □ SCC		LENDER DATE			CALENDAR DATE \$ PER ELECTION (IF REQUIRED)	

Enter on Summary Page. Line 17 only.

SUBTOTAL \$

Schedule C		Amounts may be rounded		SCHEDULE C			
Nonmonetary Contributions Received		to whole dollars.		Staten	nent covers period	CALIFORN	IA A CO
				from	01/01/2020	FORM	400
				through .	09/19/2020	Page 14	of 25
SEE INSTRUCTIONS ON REVERSE				unough .			_ 01
NAME OF FILER Josh Rolph for Rocklin City Council 2020						I.D. NUMBER 1430	242
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)		PTION OF SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	☐ IND☐ COM☐ OTH☐ PTY☐ SCC						
	☐ IND☐ COM☐ OTH☐ PTY☐ SCC	7					
	IND COM OTH PTY SCC						
Schedule C Summary 1. Amount received this period - itemized nonmonetary contrib (Include all Schedule C subtotals.) — — — — — — — — — — — — — — — — — — —	00	* Contributor Codes IND - Individual COM - Recipient Co (other than P OTH - Other (e.g., b) PTY - Political Party SCC - Small Contrib	TY or SCC) usiness entity)				
(add Lines 1 and 2. Enter here and on the Summary Page, 0	Column A, Lines	4 and 10.)		SUBTOTAL S	00	230 3 301111	

Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures, and Committees			ny be rounded e dollars.	from	01/01/20 09/19/20	20	CALIFO FOR	
NAME OF FILER				throug	n			or
	or Rocklin City Council 2020						1.D. NUMBER 1430242	
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	CALE	ATIVE TO DATE INDAR YEAR 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure						
SCHEDULI	E D SUMMARY							
1. Itemized co	ntributions and independent expenditures made this per	iod. (Include all Sche	edule D subtotals.)					\$
2. Unitemized	contributions and independent expenditures made this	period of under \$100						\$
3. Total contril	butions and independent expenditures made this period.	(Add Lines 1 and 2.	Do not enter on the S	Summary	Page.)		TOTAL	.00
			SUBTO	TAL \$				

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

Schedule E	
Payments Made	

Amounts may be rounded to whole dollars.

SCHEDULE E

Statement covers period	CALIFORNIA A CO
from01/01/2020	FORM 40U
through09/19/2020	
	I.D. NUMBER 1430242

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Josh Rolph for Rocklin 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

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)

	OFC		16.75
eFundraising Connections eFundraising Connections	OFC		25.75
eFundraising Connections	OFC		2.75
eFundraising Connections	OFC		50.50
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE C	DR DESCRIPTION OF PAYMENT	AMOUNT PAID

Schedule E **Payments Made**

Amounts may be rounded to whole dollars.

SCHEDULE E

Statement covers	period	CALIFORNIA A CO
from01/01/	01/01/2020	FORM 40U
through09/19/	/2020	Page17 of25
		I.D. NUMBER
		1430242

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Josh Rolph for Rocklin 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

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)

* Payments that are contributions or independent expenditures must also be summarized	on Schedule D.		SUBTOTAL \$	55.67
eFundraising Connections	OFC			12.75
eFundraising Connections	OFC			5.00
eFundraising Connections	OFC			23.00
eFundraising Connections	OFC			14.92
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	R DESCRIPTION OF PAYMENT	AMOUNT PAID

www.fppc.ca.gov

Schedule E	Amounts may be rounded		SCHEDULE I
Payments Made	to whole dollars.	to whole dollars. Statement covers period CALIF	
		from01/01/2020	CALIFORNIA 460
		through09/19/2020	Page18of25
SEE INSTRUCTIONS ON REVERSE		•	_
NAME OF FILER			I.D. NUMBER
Josh Rolph for Rocklin City Council 2020			1430242

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

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 filling/ballot fees

PHO phone banks

TRC candidate travel, lodging, and meals

FND fundraising events

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)

* Payments that are contributions or independent expenditures must also be summarized	on Schedule D.	SUBTOTAL \$	2,683.82
Landslide Communications	LIT		2,556.50
Harland Clarke	OFC		116.82
eFundraising Connections	OFC		2.75
eFundraising Connections	OFC		7.75
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT	AMOUNT PAID

Schedule E	Amounts may be rounded		SCHEDULE			
Payments Made	to whole dollars.	Statement covers period	CALIFORNIA 160			
		from01/01/2020	FORM 46U			
OFF INCTRIBUTIONS ON DEVEROE		through09/19/2020	Page19 of25			
SEE INSTRUCTIONS ON REVERSE NAME OF FILER			I.D. NUMBER			
Josh Rolph for Rocklin City Council 2020			1430242			
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	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks	RAD radio airtime and productions RFD returned contributions SAL campaign workers' salated the contributions TEL t.v. or cable airtime and TRC candidate travel, lodging	ries production costs g, and meals			
FND fundraising events	POI polling and survey research	TRS etaff/engues travel lodg	ing and meals			

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

PRT print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT		AMOUNT PAID		
Landslide Communications	LIT			2,556.50		
The KAL Group, Inc	PRO			161.25		
Schedule E Summary 1. Itemized payments made this period. (Include all Schedule E subtotals.)	Schedule E Summary 1. Itemized payments made this period. (Include all Schedule E subtotals.)					
2. Unitemized payments made this period of under \$100	2. Unitemized payments made this period of under \$100					
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)				.00		
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here an	4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)					
* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 2,717.7				2,717.75		

TSF transfer between committees of the same candidate/sponsor

WEB information technology costs (internet, e-mail)

VOT voter registration

LEG legal defense

LIT campaign literature and mailings

IND independent expenditure supporting/opposing others (explain)*

Schedule F	Amounts may				SCHEDULE		
Accrued Expenses (Unpaid Bills)	to whole	to whole dollars.		t covers pe	riod CALIF	ORNIA 4 OC	
			from	01/01/20	20 FC	ORNIA 460	
SEE INSTRUCTIONS ON REVERSE			through	09/19/202	20 Page	of25	
NAME OF FILER					I.D. NUM	BER	
Josh Rolph for Rocklin City Council 2020						1430242	
CODES: If one of the following codes accurately describes the 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 commu MTG meetings and ap OFC office expenses PET petition circulatin PHO phone banks POL polling and surve POS postage, delivery	nications pearances g ny research y and messenger services vices (legal, accounting)	RAD RFD SAL TEL TRC TRS TSF VOT WEB	radio airtime returned con campaign wo t.v. or cable a candidate tra staff/spouse transfer betw voter registra	e and production costs ntributions orkers' salaries airtime and production avel, lodging, and mea travel, lodging, and me veen committees of the ation technology costs (inter	ls eals e same candidate/sponsor rnet, e-mail)	
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANC BEGINNING OF THIS PER		SOINILD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE A CLOSE OF THIS PERIOD	
Cardmember Services	СМР	.00	3,641.	.26	.00	3,641.26	
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 \$ 3,641.26							
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 \$.00	
3. Net change this period. (Subtract Line 2 from Line 1. Enter the different on the Summary Page, Column A, Line 9.)					NET (3,641.26	

\$

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

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

Amounts may be rounded to whole dollars.

			SCHEDULE G
Statement covers period			CALIFORNIA A CO
	from	01/01/2020	FORM 40U
	through _	09/19/2020	Page21 of25
			I.D. NUMBER
			1430242

SEE INSTRUCTIONS	ON	REVERS	E
NAME OF FILER			

Josh Rolph for Rocklin City Council 2020

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Landslide Communications

CODES: If one of the following codes	accurately describes the payment	you may enter the code. Other	rwise describe the navment

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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE (DR DESCRIPTION OF PAYMENT	AMOUNT PAID
California Public Safety Voter Guide	LIT		1,022.60
National Tax Limitation Committee Early Voter Guide	LIT		1,022.60
Save Prop 13	LIT		1,022.60

TOTAL * \$

3.067.80

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

^{**} 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
Payments Made by an Agent or Independent
Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

1430242

SCHEDULE G

Statem	ent covers period	CALIFORNI	AACO
from	01/01/2020	FORM	400
through	09/19/2020	Page 22	of 25

I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Josh Rolph for Rocklin City Council 2020

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Cardmember 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.

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

through

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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Signworx	СМР		3,641.26

TOTAL * \$

3.641.26

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

^{**} 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 (3				
Payments	Made	by ar	Agent	or Independ	lent
Contractor	(on B	ehalf	of This	Committee)	

Schedule G	Am	ounts may be rounded to whole dollars.	-	SCHEDULE G
Payments Made by an Agent or Independent		to wildle dollars.	Statement covers period	CALIFORNIA A CO
Contractor (on Behalf of This Committee)			from01/01/2020	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE			through09/19/2020	Page23 of25
NAME OF FILER				I.D. NUMBER
Josh Rolph for Rocklin City Council 2020				1430242
NAME OF AGENT OR INDEPENDENT CONTRACTOR				
Landslide Communications				
CODES: If one of the following codes accurately describes the	ne payment, yo	ou may enter the code. Other	erwise, describe the payment.	
CMP campaign paraphernalia/misc.	MBR member	communications	RAD radio airtime and produc	tion costs
CNS campaign consultants	MTG meetings	and appearances	RFD returned contributions	
CTB contribution (explain nonmonetary)*	OFC office exp	enses	SAL campaign workers' salar	es
CVC civic donations	PET petition cir	rculating	TEL t.v. or cable airtime and p	production costs
FIL candidate filing/ballot fees	PHO phone ba	nks	TRC candidate travel, lodging	, and meals
FND fundraising events	POL polling an	d survey research	TRS staff/spouse travel, lodgi	ng, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage,	delivery and messenger services	TSF transfer between commit	tees of the same candidate/sponsor
LEG legal defense	PRO profession	nal 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 DESC	CRIPTION OF PAYMENT	AMOUNT PAID
Taxifornia Tax Fighters' Newsletter				
				1
	LIT			1,022.60
Woman's Voice				
	L			
	LIT			1,022.60

TOTAL * \$

2,045.20

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

^{**} 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 H Loans Made to Others*		Ame	ounts may be round to whole dollars.	bed	Statement cove	ers period	CALIFORNIA FORM	\$CHEDULE 4 460
SEE INSTRUCTIONS ON REVERSE						19/2020	Page 24	of25
NAME OF FILER Josh Rolph for Rocklin City Council 20	20						I.D. NUMBER 1430	242
FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMEN OR FORGIVENE THIS PERIOD	SS BALANCE AT	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				PAID \$ FORGIVEN	\$	RATE	\$	CALENDAR YEAR \$ PER ELECTION**
		\$	\$	\$	DATE DUE	\$	DATE INCURRED	

SUBTOTALS	\$ \$	\$ \$	

Schedule Miscelland	I eous Increases to Cash	nay be rounded ble dollars.	State from	ment covers period 01/01/2020 09/19/2020	CALIFORNIA 460 FORM Page 25 of 25
NAME OF FILER	IONS ON REVERSE for Rocklin City Council 2020				I.D. NUMBER 1430242
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCR	RIPTION OF RE	ECEIPT	AMOUNT OF INCREASE TO CASH

Schedule I Summary 1. Itemized increases to cash this period. — — — — — — — — — — — — — — — — — — —	\$.00
2. Unitemized increases to cash of under \$100 this period		
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)	\$.	.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 \$.	.00
		CUDTOTAL 6