Recipient Committee Campaign Statement Cover Page

					COVER PAGE
Recipient Committee Campaign Statement Cover Page			CITY CL	ERK F	ORNIA 460
	Statement covers period from March 24, 2024	Date of election if applicable: (Month, Day, Year)	JU	Page _ L 1 8 2024F	or Official Use Only
SEE INSTRUCTIONS ON REVERSE	through June 30, 2024	Nov. 5, 2024	CITY O	FLOSA	LTOS
1. Type of Recipient Committee: All Committees - Cor	nplete Parts 1, 2, 3, and 4.	2. Type of Statement:			
Officeholder, Candidate Controlled Committee State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored	rimarily Formed Ballot Measure Committee Controlled Sponsored Uso Complete Part 6) Primarily Formed Candidate/	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 To Amendment (Explain b	ermination)	Quarterly State Special Odd-Ye	
Political Party/Central Committee	Also Complete Part 7)				
4 Committee Information	0. NUMBER 469570	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)	-	NAME OF TREASURER			
Re-Elect Jonathan Weinberg to the Los Altos City Co	ouncil 2024	Jonathan D. Weinberg MAILING ADDRESS			
		270 Stratford Place	STATE	ZIP CODE	AREA CODE/PHONE
STREET ADDRESS (NO P.O. BOX)		Los Altos	CA	94022	510-512-0929
270 Stratford Place CITY STATE ZIP CO	DDE AREA CODE/PHONE	NAME OF ASSISTANT TREASU	RER, IF ANY		
Los Altos CA 9402	UCC TENERAL PARKETER				
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO		MAILING ADDRESS			
CITY STATE ZIP CO	DDE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDR	RESS		
		jonathan.votejonathan@	gmail.com		
jonathan.votejonathan@gmail.com					
4. Verification I have used all reasonable diligence in preparing and review certify under penalty of perjury under the laws of the State of Executed on July 18, 2024 Executed on July 18, 2024 Executed on Date Executed on Date	f California that the foregoing is true and By By Signature of Clark By	Signature of Tribasurer or Assistate trolling Officeholder, Candidate, Space Measure of Signature of Controlling Officeholder, Candidate	Proponent or Responsible Offices, State Measure Proponent		s true and complete. I
Executed on	Ву	Signature of Controlling Officeholder, Candidate	e, State Measure Proponent	FP	PC Form 460 (Jan/2016)

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Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2						
CALIFORNIA FORM	460					
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Officeholder or Candidate Controlled Comm	nittee			6.	Primarily Formed Ballo	ot Measure	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE				NAME OF BALLOT MEASURE					
Jonathan D. Weinberg									
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIST	RICT NUMBER	IF APPLIC	ABLE)		BALLOT NO. OR LETTER	JURISDICTI	ON	Te	Louppoor
Member, Los Altos City Council						_] SUPPORT] OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP						
270 Stratford Place	Los Altos	CA	94022		Identify the controlling office	eholder, candi	date, or state	measure prop	onent, if any.
					NAME OF OFFICEHOLDER, CA	NDIDATE, OR F	PROPONENT		
Related Committees Not Included in this Stanot included in this statement that are controlled by you of contributions or make expenditures on behalf of your can	r are primarily :	st any con formed to	nmittees receive		OFFICE SOUGHT OR HELD			DISTRICT NO.	IF ANY
COMMITTEE NAME	I.D. NUMBER								
NAME OF TREASURER	CONTROLLE	ED COMMI		7.	Primarily Formed Candificeholder(s) or candidate(s)	for which this	committee is p	orimarily forme	st names of d.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	e-e-mon•				NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	II.D. NUMBER		DE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER					NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	CONTROLLE TYES BOX)	NO GOWWI	FERENCE.		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP (CODE	AREA COD	DE/PHONE		Atta	ch continuatio	on sheets if ne	ecessary	72

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

Statement covers period from March 24, 2024 CALIFORNIA FORM 460

through June 30, 2024 Page 3 of 6 ...

NAME OF FILER Re-Elect Jonathan Weinberg to the Los Altos City Council 2024		W.	1469570
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 2. Loans Received Schedule B, 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	\$ 10,000.00 \$ 10,000.00	\$	1/1 through 6/30 7/1 to Date 20. Contributions Received \$ 10,000.00 \$ 21. Expenditures Made \$ 1,013.85 \$ \$
Expenditures Made 6. Payments Made	\$	-	Expenditure Limit Summary for State Candidates 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy)
Current Cash Statement 12. Beginning Cash Balance	17.49 1,013.85 9,003.64	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).	*Amounts In this section may be different from amounts reported in Column B.
19. Outstanding Debts Add Line 2 + Line 9 in Column B above			FPPC Form 460 (Jan/2010 FPPC Advice: advice@fppc.ca.gov (866/275-377 www.fppc.ca.g

Schedule B – Part 1 Loans Received	Ап	Amounts may be rounded to whole dollars.			Statement covers period from March 24, 2024		CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		n n			through June 30	, 2024	Page 4	of <u>6</u>
Re-Elect Jonathan Weinberg to the Los Altos	City Council 2024						1469570	
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)	OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD	BALANCE AT	(e) INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	(9) CUMULATIVE CONTRIBUTION TO DATE
Jonathan D. Weinberg 270 Stratford Place Los Altos, California 94022 ↑ ☑ IND □ COM □ OTH □ PTY □ SCC	Attorney Finkelstein & Fujii, LLP	ş0-	\$_10,000.00	\$ PAID \$ FORGIVEN	\$ 10,000.06 04/30/25 DATE DUE	0.00 % RATE 9.000	\$_10,000.@1	\$ 10,000.00 PER ELECTION* \$ 10,000.00
† IND COM OTH PTY SCC		s	\$	\$ FORGIVEN	\$DATE DUE	% RATE	\$ DATE INCURRED	\$ PER ELECTION*
† IND COM OTH PTY SCC	:•:	\$	\$	PAID FORGIVEN \$	DATE DUE	RATE	\$ DATE INCURRED	\$ PER ELECTION*
Sahadula D Summer	S	UBTOTALS \$	\$			(Enter (e) on Sched		

Schedule B Summary

1.	Loans received this period	\$:	10,000.00
	(Total Column (b) plus unitemized loans of less than \$100.)		
2.	Loans paid or forgiven this period	\$	- 0 -
	(Total Column (c) plus loans under \$100 paid or forgiven.)	•	
	(Include loans paid by a third party that are also itemized on Schedule A.)		10.000.00
3.	Net change this period. (Subtract Line 2 from Line 1.)	\$	10,000.00
	Enter the net here and on the Summary Page, Column A, Line 2.		

†Contributor Codes

IND - Individual

(May be a negative number)

COM - Recipient Committee

(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party

SCC - Small Contributor Committee

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

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Schedule E	
Payments M	ade

Amounts may be rounded to whole dollars.

	SCHEDULE
Statement covers period	CALIFORNIA 160
fromMarch 24, 2024	FORM TOO
through June 30, 2024	Page 5 of 6
	I.D. NUMBER
	1469570

	through June 30, 2024	Page of
SEE INSTRUCTIONS ON REVERSE		I.D. NUMBER
NAME OF FILER	1	
Re-Elect Jonathan Weinberg to the Los Altos City Council 2024		1469570

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE C	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Daley Professional Web Solutions 211 Cardinal Dr., Montgomery, NY 12549	WEB	Website development	\$948.00
FPPC 1102 Q Street, Suite 3050, Sacramento, CA 95811	FIL	Campaign filing fee	\$50.00
Harland Clarke Checks 15955 La Cantera Pkwy San Antonio, TX, 78256	OFC	Checks	\$15.85

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

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

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SUBTOTAL \$ 1,013.85

Schedule I Miscellaneous Increases to Cash SEE INSTRUCTIONS ON REVERSE		Amounts may be to whole do			CALIFORNIA 460 FORM Page 6 of 6	
NAME OF FILER Re-Elect Jona	than Weinberg to the Los Altos City Council 2024				I.D. NUMBER 1469570	
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		DES	SCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH	
05/31/2024	Star One Credit Union		Dividend (interes	st)	\$4.37	
06/30/2024	Star One Credit Union		Dividend (interes	st)	\$13.12	
	п•			5.P.		
		3				
	tional information on appropriately labeled continuation sheets.			SUBTOTAL	- \$ 17.49	
1. Itemized in	Creases to cash this period.				_	
	I increases to cash of under \$100 this periodinterest received this period on loans made to others. (School					
4. Total misce	ellaneous increases to cash this period. (Add Lines 1, 2, and page, Line 14.)	d 3. Enter here a	nd on the	17.40	FPPC Form 460 (Jan/2016))	

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