Recipient Committee
Campaign Statement
Cover Page

SEE INSTRUCTIONS ON REVERSE

<table>
<thead>
<tr>
<th>Statement covers period</th>
<th>Date of election if applicable:</th>
</tr>
</thead>
<tbody>
<tr>
<td>from 7/1/2022 through 12/31/2022</td>
<td>(Month, Day, Year) 11/5/2024</td>
</tr>
</tbody>
</table>

1. **Type of Recipient Committee:** All Committees – Complete Parts 1, 2, 3, and 4.
   - [x] Officeholder, Candidate Controlled Committee
     - (Also Complete Part 5)
   - [ ] State Candidate Election Committee
   - [ ] Recall
   - [ ] Primarily Formed Ballot Measure Committee
     - (Also Complete Part 5)
   - [ ] Controlled
   - [ ] Sponsored
   - [ ] General Purpose Committee
     - Sponsored
     - Small Contributor Committee
   - [x] Primarily Formed Candidate/Officeholder Committee
     - (Also Complete Part 7)
   - [ ] Political Party/Central Committee
     - Sponsored

2. **Type of Statement:**
   - [ ] Preelection Statement
   - [x] Semi-annual Statement
   - [ ] Special Odd-Year Report
   - [ ] Quarterly Statement
   - [ ] Termination Statement
     - (Also file a Form 410 Termination)
   - [x] Amendment (Explain below)

3. **Committee Information**
   - I.D. NUMBER: 1432347
   - COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE): Lisa Motoyama for City Council 2024
   - STREET ADDRESS (NO P.O. BOX):
     - CITY: El Cerrito
     - STATE: CA
     - ZIP CODE: 94530
   - MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX:
     - CITY: El Cerrito
     - STATE: CA
     - ZIP CODE: 94530
     - AREA CODE/PHONE: 510-303-8833
   - OPTIONAL: FAX / E-MAIL ADDRESS

4. **Verification**
   - I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing statements are true.
   - Executed on 1/24/2023
   - Executed on 1/23/23
   - Executed on
   - Executed on
   - Executed on
   - Executed on

By signature of controlling officeholder, candidate, state measure proponent or responsible officer of sponsor

By signature of controlling officeholder, candidate, state measure proponent

By signature of controlling officeholder, candidate, state measure proponent

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## 5. Officeholder or Candidate Controlled Committee

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>Lisa Motoyama</th>
</tr>
</thead>
<tbody>
<tr>
<td>OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)</td>
<td>City of El Cerrito City Council Member</td>
</tr>
<tr>
<td>RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP</td>
<td>El Cerrito CA 94530</td>
</tr>
</tbody>
</table>

**Related Committees Not Included in this Statement:** List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.

<table>
<thead>
<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF TREASURER</td>
<td>CONTROLLED COMMITTEE?</td>
</tr>
<tr>
<td>YES</td>
<td>NO</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)</th>
<th>CITY STATE ZIP CODE AREA CODE/PHONE</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF TREASURER</td>
<td>CONTROLLED COMMITTEE?</td>
</tr>
<tr>
<td>YES</td>
<td>NO</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
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<th>CITY STATE ZIP CODE AREA CODE/PHONE</th>
</tr>
</thead>
</table>

## 6. Primarily Formed Ballot Measure Committee

<table>
<thead>
<tr>
<th>NAME OF BALLOT MEASURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>BALLOT NO. OR LETTER</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>OFFICE SOUGHT OR HELD</td>
</tr>
</tbody>
</table>

## 7. Primarily Formed Candidate/Officeholder Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
<th>SUPPORT</th>
<th>OPPOSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
<td>SUPPORT</td>
<td>OPPOSE</td>
</tr>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
<td>SUPPORT</td>
<td>OPPOSE</td>
</tr>
</tbody>
</table>

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

**Summary Page**

**Name of Filer:** Lisa Motoyama for City Council 2024

#### Contributions Received

1. **Monetary Contributions**
   - Schedule A, Line 3
   - **Column A:** $0
   - **Column B:** $0

2. **Loans Received**
   - Schedule B, Line 3
   - **Column A:** $0
   - **Column B:** $0

3. **SUBTOTAL CASH CONTRIBUTIONS**
   - Add Lines 1 + 2
   - **Column A:** $0
   - **Column B:** $0

4. **Nonmonetary Contributions**
   - Schedule C, Line 3
   - **Column A:** $0
   - **Column B:** $0

5. **TOTAL CONTRIBUTIONS RECEIVED**
   - Add Lines 3 + 4
   - **Column A:** $0
   - **Column B:** $0

#### Expenditures Made

6. **Payments Made**
   - Schedule E, Line 4
   - **Column A:** $160.00
   - **Column B:** $439.00

7. **Loans Made**
   - Schedule H, Line 3
   - **Column A:** $0
   - **Column B:** $0

8. **SUBTOTAL CASH PAYMENTS**
   - Add Lines 6 + 7
   - **Column A:** $160.00
   - **Column B:** $439.00

9. **Accrued Expenses (Unpaid Bills)**
   - Schedule F, Line 3
   - **Column A:** $0
   - **Column B:** $0

10. **Nonmonetary Adjustment**
    - Schedule C, Line 3
    - **Column A:** $0
    - **Column B:** $0

11. **TOTAL EXPENDITURES MADE**
    - Add Lines 8 + 9 + 10
    - **Column A:** $160.00
    - **Column B:** $439.00

#### Current Cash Statement

12. **Beginning Cash Balance**
    - Previous Summary Page, Line 16
    - **Column A:** $2394.51

13. **Cash Receipts**
    - Column A, Line 3 above
    - **Column A:** $0
    - **Column B:** $0

14. **Miscellaneous Increases to Cash**
    - Schedule I, Line 4
    - **Column A:** $0
    - **Column B:** $0

15. **Cash Payments**
    - Column A, Line 8 above
    - **Column A:** $160.00
    - **Column B:** $439.00

16. **ENDING CASH BALANCE**
    - Add Lines 12 + 13 + 14, then subtract Line 15
    - **Column A:** $2234.51
    - **Column B:** $2234.51

- 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).

17. **LOAN GUARANTEES RECEIVED**
    - Schedule B, Part 2
    - **Column A:** $0

#### Cash Equivalents and Outstanding Debts

18. **Cash Equivalents**
    - See instructions on reverse
    - **Column A:** $0

19. **Outstanding Debts**
    - Add Line 2 + Line 9 in Column B above
    - **Column A:** $0

---

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

- **Contributions Received**
  - 1/1 through 6/30
  - 7/1 to Date

- **Expenditures Made**

**Expenditure Limit Summary for State Candidates**

- **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.*

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Schedule E
Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 1/1/2022
through 6/30/2022

NAME OF FILER
Lisa Motoyama for City Council 2024

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

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

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>League of California Cities</td>
<td></td>
<td>Membership in the API Caucus</td>
<td>100.00</td>
</tr>
<tr>
<td>Sacramento, CA 95814</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**SUBTOTAL** $100.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ......................................................... $ 100.00
2. Unitemized payments made this period of under $100 ................................................................. $ 60.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ................. $ 0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ......................................................... TOTAL $ 160.00

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