Re	ecipient Committee				F	COVER PA	
Ca	ampaign Statement				Date Stamp	CALIFORNIA 460	
Co	over Page	Statement covers p	ariod		RECEIVED	FORW 100	4
		1		Date of election if applicable: (Month, Day, Year)	:	1 . 15	П
		from01/01/2	023	(, 2,	JUL 3 1 2023	Page of	\dashv
		06/30/2	n23		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	For Official Use Only	
		through		KIN	GS COUNTY ELECTION		
1_	Type of Recipient Committee All Committee	s Complete Parts 1, 2, 3, and 4		2. Type of Statement:	T TOOM LEECTION	P	_
		Primarily Formed Ballot Measure		Preelection Statement	Quarterly S	statement	
	State Candidate Election Committee	Committee		=	Special Ode		
	Recall	Controlled		X Semi-annual Statement			
	(Also Complete Part 5)	Sponsored		Termination Statement (Also file a Form 410 Termination))		
		(Also Complete Part 6)					
	General Purpose Committee	Primarily Formed Candidate/		Amendment (Explain Selow)			
	☐ Spansored	Officeholder Committee					_
	Small Contributor Committee	(Also Complete Part 7)					
	Political Party/Central Committee						
3.	Committee Information	I.D. NUMBER 1445473		Treasurer(s)			
	COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COM	MITTEE)		NAME OF TREASURER			
	Hacker for District Attorney 2028			Melissa Allen	100		
	Tracker for District Atterney 2020			MAILING ADDRESS	_		
					WV-URW		
	STREET ADDRESS (NO P.O. BOX)			CITY	STATE	ZIP CODE AREA CODE/PHO	
				Fresno, CA 93704	T-14	916-548-28	25
	CITY	STATE ZIP CODE	AREA CODE/PHONE	NAME OF ASSISTANT TREASURER, IF	ANY		
	Fresno, CA 93704		559-408-8383				
	MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OF	P.O. BOX		MAILING ADDRESS			
	5132 North Palm Avenue NUM 227						
	CITY	STATE ZIP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE AREA CODE/PHO	ONE
	Fresno, CA 93704						
	OPTIONAL: FAX / E-MAIL ADDRESS		***************************************	OPTIONAL: FAX / E-MAIL ADDRESS		12.0+ (1). 411.	_
	hacker4kcda@gmail.com			valleyvision559@gmail.com			
4.	Verification						
4.	I have used all reasonable diligence in preparin			multipopuladae the information popu	ained barain and in the atten	had calculate is true and complete	
	certify under penalty of perjury under the laws of	of the State of California that	the foregoing is true :	and correct.	arried herein and in the attac		• '
	7/20/000	· ¬	5 0				
	Executed on	<u>. </u>	Ву	1 leken	all Colle	·········	
	7.30 DATE 202	2		Signature of Treasu	rer of Assistant Treasurer		
	Executed on		Ву	//V //	1 1/11/2	CHILDRAY OF CHANGE	
	DATE		Signa	ture of Controlling Officeholder, Candidate, Sta	ne ivieasure Proponent or Responsible	Ollicer of abousor	
	Executed onDATE		Ву	Classifier of Consulting Officer and	or Condidate State Manager Donner		
				Signature of Controlling Officeholds	er, Candidate, State Measure Propone	N I L	
	Executed on		Ву				

DATE

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Recipient Committee Campaign Statement Cover Page - Part 2

ÇOVER PAGE - PART 2							
CALIF FO	ORNIA RM	4	-6	0			
Page	2	of	15				

5. Officeholder or Candidate Controlled Comm	ittee	6. Primarily Formed Ballot Measure Committee					
NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BALLOT MEASURE					
Sarah Hacker							
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUM	BER IF APPLICABLE)	BALLOT NO. OR LETTER JURISDICTION	N	SUPPORT			
District Attorney Kings County				☐ OPPOSE			
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) C:TY	STATE ZIP . CA 93230	Identify the controlling officehol any.	der, candidate, or state meas	ure proponent, if			
Related Committees Not Included in this Statement: not included in this statement that are controlled by you or are primar make expenditures on behalf of your candidacy	List any committees	NAME OF OFFICEHOLDER, CANDIDATE, OR PROOFFICE SOUGHT OR HELD	OPONENT DISTRICT NO. I	FANY			
COMMITTEE NAME NAME OF TREASURER	LD. NUMBER CONTROLLED COMMITTEE? YES NO	7. Primarily Formed Candidate/ officeholder(s) or candidate(s) for w.	Officeholder Committee List hich this committee is primarily to	names of formed.			
COMMITTEE ADDRESS STREET ADDRESS (N	IO P.O. BOX)	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 OPPOSE			
COMMITTEE NAME	I.D. NUMBER	NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT			
NAME OF TREASURER	CONTROLLED COMMITTEE? YES NO	NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	OPPOSE SUPPORT			
COMMITTEE ADDRESS STREET ADDRESS (N	IO P.O. BOX)			OPPOSE			
CITY STATE	ZIP CODE AREA						

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period **CALIFORNIA** 01/01/2023 from 06/30/2023 of 15 through I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Contributions Received

Current Cach Statement

Cash Equivalents and Outstanding Debts

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

18. Cash Equivalents

Hacker for District Attorney 2028

1. Monetary Contributions

Loans Received

3. SUBTOTAL CASH CONTRIBUTIONS......

4. Nonmonetary Contributions

5. TOTAL CONTRIBUTIONS RECEIVED. Add Lines 3 + 4 s

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

1445473

	1/1 through 6/30			7/1 to Date	
20. Contributions Received	\$_	0.00	\$		0.00
21. Expenditures Made	\$	0.00	\$		0.00

Expenditures Limit Summary for State Expenditures Made Candidates 6. Payments Made

Column A

TOTAL THIS PERIOD

(FROM ATTACHED SCHEDULES)

2.800,00

2,800.00

1,053.53

3,853,53

2.859.77

0.00

3.450.20

7. Loans Made Schedule H. Line 3 0.00 0.00 2,859.77 2,859.77 9. Accrued Expenses (Unpaid Bills) Schedule F. Line 3 -284.55 650.20 1.053.53 1,053.53 3,628.75

Schedule A. Line 3 \$

Schedule B, Line 3

Add Lines 1 + 2 \$

Schedule C, Line 3

Schedule E, Line 4 \$

4.563.50

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

22. Cumulative Expenditures Made*

(If Subject to Voluntary Expenditure Limit)

Vullein Vasii Statement		
12. Beginning Cash Balance	ary Page, Line 16 \$	380.97
13. Cash Receipts	n A, Line 3 above	2,800.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4	0.00
15. Cash Payments Column	n A. Line 8 above	2,859.77
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then	subtract Line 15 \$	321.20
If this is a termination statement, Line 16 must be zero.		
17. LOAN GUARANTEES RECEIVEDs	Schedule B. Line 2 \$	0.00

See instructions on reverse

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

0.00

2,800.00

2,800.00

1,053.53

3,853.53

2.859.77

*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

Schedule A Monetary Contributions Received		Amo	ounts may be rounded to whole dollars.			CALIFORNIA 460			
				Statement covers from01/01	1/2023				
				through06/30	0/2023	Page _	4 of _	15	
NAME OF FILER	NS ON REVERSE	- 80				I.D. NUMBER			
Hacker for D	District Attorney 2028						1445473		
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	CALEN	TIVE TO DATE DAR YEAR - DEC. 31)	PER ELECTIC (IF REQU		
		□IND							
		COM OTH PTY SCC							
Schedule	A Summary				!	* Contributor	Codes		
Amount reciple (Include all S	eived this period - itemized monetary contributions. Schedule A subtotals.)		\$	0.00	_	IND - Individual COM - Recipient Committee (other than PTY or SCC)			
2. Amount rece	eived this period - unitemized monetary contributions of less the	han \$100	\$	0.00					
3. Total monet	ary contributions received this period.	- \		SCC - Small Contribut				mittee	
(add Lines 1	and 2. Enter here and on the Summary Page, Column A, Line	e 1.) 	TOTAL \$	0.00					

SUBTOTAL \$

Schedule B - Part 1 Loans Received

SEE INSTRUCTIONS ON REVERSE

Hacker for District Attorney 2028

FULL NAME, STREET ADDRESS AND

ZIP CODE OF LENDER

(IF COMMITTEE, ALSO ENTER I.D. NUMBER)

*IND COM COTH PTY SCC

Cabadula D Cummoni

NAME OF FILER

Sarah Hacker

Hanford, CA 93230

Amounts may be rounded to whole dollars.

(b) AMOUNT

RECEIVED THIS

PER(OD

2,800.00

\$

SCHEDULE B - PART 1 Statement covers period **CALIFORNIA FORM** 01/01/2023 from 06/30/2023 through LD. NUMBER 1445473 (c) AMOUNT PAID OR (g) CUMULATIVE (d) OUTSTANDING (e) INTEREST (f) ORIGINAL FORGIVEN THIS BALANCE AT CLOSE PAID THIS AMOUNT OF CONTRIBUTIONS TO LOAN DATE PERIOD ** OF THIS PERIOD PERIOD CALENDAR YEAR PAID \$ 3,325.53 0 2,800.00 0.00 2,800.00 PER ELECTION** 2,800.00 P-2028 RATE FORGIVEN 05/22/2023 12/31/2024 \$ 0.00 0.00 DATE DUE DATE INCURRED * Contributor Codes IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other (e.g., business entity) PTY - Political Party

Schedule & Summary		
1. Loans received this period	_ \$.	2,800.00
(Total Column (b) plus unitemized loans of less than \$100.)		
2. Loans paid or forgiven this period	\$	0.00
(Total Column (c) plus loans under \$100 paid or forgiven)		
(Include loans paid by a third party that are also itemized on Schedule A.)		
3. Net change this period. (Subtract Line 2 from Line 1.)	ET\$.	2,800.00
Enter the net here and on the Summary Page, Column A, Line 2		(May be a negative number)

\$

(a) OUTSTANDING

BALANCE

BEGINNING THIS

PERIOD

0.00

IF INDIVIDUAL, ENTER

OCCUPATION AND EMPLOYER

(IF SELF- EMPLOYED, ENTER NAME

OF BUSINESS)

Dias Law Firm Inc.

Attorney

SUBTOTALS \$ 2,800.00 \$ 0.00 \$ 2.800.00 \$ 0.00

SCC - Small Contributor Committee

Schedule B - Part 2		Amounts may be roun to whole dollars.			SCHEDULE B - PART 2				
Loan Guarantors	Loan Guarantors to whole dollars.			Statement cov	ers period 01/2023	CALIFORNIA 46			
				trom					
SEE INSTRUCTIONS ON REVERSE				through06/	30/2023	Page 6	of15		
NAME OF FILER Hacker for District Attorney 2028						I.D. NUMBER 1445	473		
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)		LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE		
4. 14. 14. 14. 14. 14. 14. 14. 14. 14. 1	☐ IND			LENDER		CALENDAR DATE			
	COM OTH	COM OTH	COM OTH			DATE		PER ELECTION (IF REQUIRED)	
]				

				•					
				SUBTOTAL	\$	Enter on Summary Page. Line 17 only.			

						•		
Schedule			Amounts may be rounded	ď				SCHEDULE
Nonmone	etary Contributions Received		to whole dollars.		Statem	ent covers period	CALIFORN	^{IA} 460
					from	01/01/2023	FORM	701
APP 01070/10710	AND ON SELECT				through _	06/30/2023	_ Page7	_ of <u>15</u>
NAME OF FILER	INS ON REVERSE				1		LD. NUMBER	
Hacker for	District Attorney 2028						1445	5473
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)		PTION OF R SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 91)	PER ELECTION TO DATE (IF REQUIRED)
	Sarah Hacker	⊠ IND	Attorney			525.53	525.53	7,502.67 P-202
01/03/2023	Hanford, CA 93230	COM OTH PTY SCC	Dias Law Firm Inc	Thank you g	ifts for donors	**		
	Sarah Hacker	[X] IND	Attorney			528.00	3,853.53	3,328.00 P-202
06/01/2023	Hanford, CA 93230	COM OTH PTY SCC	Dias Law Firm inc	Website renewal for 6 months		4		
Schedule	C Summary						* Contributor Codes	
	peived this period - itemized nonmonetary contribution Schedule C subtotals.)			:	\$1,05	53.53	IND - Individual COM - Recipient Com (other than PT	
2. Amount received this period - unitemized nonmonetary contributions of less than \$100 OTH - Other (e.g., but PTY - Political Party								
	onetary contributions received this period. I and 2. Enter here and on the Summary Page, Colu	ımn A, Lines 4 a	and 10.)	_TOTAL :	\$1,05	53.53	SCC - Small Contribu	tor Committee

SUBTOTAL \$

Schedule	D of Expenditures	Amounts may to whole			SCHEDULE D					
Supportin	g/Opposing Other es, Measures, and Committees	G 111100		Sta from	o1/01/20		CALIFC FOF		46	
				throug	gh06/30/20	23	Page	8 0	of15	_
NAME OF FILER Hacker for E	District Attorney 2028			1			I.D. NUMBER 1445473			
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 NDAR YEAR 1 - DEC. 31)		CTION TO D REQUIRED)	ATE
	Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure								
SCHEDULE	E D SUMMARY									_
1. Itemized co	ontributions and independent expenditures made this p	period. (Include all Sche	dule D subtotais.) -					\$	0.00	
2. Uniternized	contributions and independent expenditures made th	is period of under \$100						\$	0.00	
3. Total contril	butions and independent expenditures made this perio	od. (Add Lines 1 and 2.	Do not enter on the S	ummary	Page.)		TOTAL	s	0.00	

SUBTOTAL \$

Schedule I	E
Payments	Made

Amounts may be rounded

SCHEDU		

Payments Made	to whole dollars.	Statement covers period		CALIFORNIA / CO			60
		from01/01/2023		FOF		4	UU
SEE INSTRUCTIONS ON REVERSE	through	through _	06/30/2023	Page	9	of	15
NAME OF FILER Hacker for District Attorney 2028				I.D. NUMBER	14454	73	٠.

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

CMP campaign paraphemalia/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 LD. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
ntegrated Solutions: Political	OFC	_	85.00
ntegrated Solutions: Political can Diego, CA 92116	OFC		85.00
ntegrated Solutions; Political San Diego, CA 92116	OFC		85.00
ntegrated Solutions: Political San Diego, CA 92116	OFC		85.00
Payments that are contributions or independent expenditures must also be summarized on Scheo	tue D	SUBTOTAL \$	340.00

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

Schedule E	
Payments Mad	е

Amounts may be rounded to whole dollars.

			SCHEDULE E
ı	Statem	ent covers period	CALIFORNIA / CO
l	from	01/01/2023	FORM 400
	through	06/30/2023	Page 10 of 15
_			I.D. NUMBER

1445473

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

SEE INSTRUCTIONS ON REVERSE

CTB contribution (explain nonmonetary)*

Hacker for District Attorney 2028

CVC civic donations

NAME OF FILER

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 Sched	iule D.	SUBTOTAL \$	2,299.55
Integrated Solutions: Political San Diego, CA 92116	OFC		85.00
Valley Vision Treasury Fresno, CA 93704	PRO	Treasury services	684.60
Valley Vision Treasury Fresno, CA 93704	PRO	Treasury services	595.20
Valley Vision Treasury Fresno, CA 93704	PRO	Treasury services	934.75
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DESCRIPTION OF PAYMENT	AMOUNT PAID

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

Schedule I	=
Payments	Made

Amounts may be rounded to whole dollars.

SCHEDULE E Statement covers period **CALIFORNIA FORM** 01/01/2023 from 06/30/2023 11 15 of . through Page I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Hacker for District Attorney 2028 1445473 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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF	PAYMENT	AMOUNT P	PAID
Citizens Business Bank Fresno, CA 93720	OFC			18.0	0
Schedule E Summary 1. Itemized payments made this period. (Include all Schedule E subtotals.)				§2,657.	55
2. Unitermized payments made this period of under \$100 \$			202.2	22	
3. Total interest paid this period on loans. (Enter amount from Schedule B, P	art 1, Column	(e).)		0.00)
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and o	on the Summa	ry Page, Column A, Line 6.)	TOTAL	\$ <u>2,859.</u>	77
* Payments that are contributions or independent expenditures must also be summarized on Schedule	e D.		SUBTOTAL \$	18.00	0

Schedule	F		
Accrued	Expenses	(Unpaid	Bills)

Amounts may be rounded to whole dollars.

		SCHEDULE F
Stateme	nt covers period	CALIFORNIA / CO
from	01/01/2023	FORM 400
through _	06/30/2023	Page 12 of 15
		I.D. NUMBER 1445473

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

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

CTB contribution (explain nonmonetary)*

Hacker for District Attorney 2028

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 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	
Valley Vision Treasury Fresno, CA 93704	PRO Treasury services	934.75	0.00	934.75	0.00	
Valley Vision Treasury Fresno, CA 93704	PRO Treasury services	0.00	650.20	0.00	650.20	
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.) 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.) 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 \$ -284.55						
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$ 934.75	\$ 650.20	\$ 934.75	\$ 650.20	

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)	Amounts may be rounded to whole dollars.	Stateme	ent covers period 01/01/2023	CALIFORNIA 46
		through _	06/30/2023	Page 13 of 15
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				I.D. NUMBER
Hacker for District Attorney 2028				1445473
NAME OF AGENT OR INDEPENDENT CONTRACTOR				
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	e payment, you may enter the code. Otherwise, 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 RFD SAL TEL TRC TRS TSF VOT	radio airtime and product returned contributions campaign workers' salari t.v. or cable airtime and p candidate travel, lodging staff/spouse travel, lodging	ies rroduction costs I, and meals ng, and meals 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

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

TOTAL * \$

Schedule H Loans Made to Others*		Ame	ounts may be rounde to whole dollars.	ed	Statement cove	ers period	CALIFORNIA	SCHEDULE
		from01/01/2023						460
					through06/3	30/2023	Page 14	of 15
SEE INSTRUCTIONS ON REVERSE NAME OF FILER							I.D. NUMBER	
Hacker for District Attorney 2028							1445	473
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 O FORGIVENESS TH PERIOD *		(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				PAID \$ FORGIVEN	_ \$	% RATE	\$	CALENDAR YEAR S PER ELECTION**
		\$	S	S		\$		

SUBTOTALS \$ \$ \$

DATE INCURRED

DATE DUÉ

Schedule I		
Miscellaneous	Increases to Ca	sh

DATE

RECEIVED

Amounts may be rounded to whole dollars.

SCHEDULE I **CALIFORNIA** Statement covers period 01/01/2023 from of 15 06/30/2023

Page

AMOUNT OF

INCREASE TO CASH

SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER

1445473 **Hacker for District Attorney 2028**

Schedule I Summary

FULL NAME AND ADDRESS OF SOURCE

(IF COMMITTEE, ALSO ENTER I.D. NUMBER)

2. Unitemized increases to cash of under \$100 this period.	 \$_	0.00
·	.~ —	

3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)								•	0.00	
	_	_	 	 	-	 	 -	- ⊅	 	

4. Total miscellaneous increases to cash this period	. (Add Lines 1, 2, and 3. Enter here and on the
Summary Page, Line 14.)	

 _TOTAL	\$ 0.00

0.00

through

DESCRIPTION OF RECEIPT