Recipient Committee Campaign Statement Cover Page			RECEIVED	CALIFOR FORM	
Over 1 age	Statement covers period from01/01/2024	Date of election if applicable: (Month, Day, Year)	JUL 3 0 2024	Page 1	of
	through06/30/2024	к	NGS COUNTY ELECTIC	1	Allekti Gas Oray
1. Type of Recipient Committee:All Committee State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee	es - Complete Parts 1, 2, 3, and 4 Primarily Formad Ballot Measure Committee Controlled Sponsored (Also Complete Part 8) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	2. Type of Statement: Presection Statement X Seral-annual Statement Termination Statement (Also file a Form 410 Termination) Amendment (Exptain Below)	Quarterly S Special Od		
3. Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COM Hacker for District Attorney 2028	I.D. NUMBER 1445473 AMITTEE)	Treasurer(s) NAME OF TREASURER Melissa Allen MAILING ADDRESS	•		
STREET ADDRESS (NO P.O. BOX) CITY Fresno, CA 93704	STATE ZIP CODE AREA CODE/PHON 559-408-8383	·	STATE	ZIP CODE	AREA CODE/PHONE 916-548-2825
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET C		MAILING ADDRESS			
CITY Fresno, CA 93704 OPTIONAL: FAX/E-MAIL ADDRESS hacker4kcda@gmail.com	STATE ZIP CODE AREA CODE/PHON	OPTIONAL: FAX / E-MAIL ADDRESS valleyvision559@gmail.com	STATE	ZIP CODE	AREA CODE/PHONE
4. Verification I have used all reasonable diligence in prepart certify under penalty of perjury under the laws Executed on Executed on Executed on DATE Executed on DATE	ing and reviewing this statement and to the best of the State of California that the foregoing is true. By B	gnature of Zoglivolling Officeholder, Cangidate, State	rer or Assistant Treasurer	e Olficer of Sponsor	s true and complete. I

Signature of Controlling Officeholder, Candidate, State Measure Proponent

COVER PAGE

Recipient Committee Campaign Statement Cover Page - Part 2

CITY

STATE

ZIP CODE

AREA



5. Officeholder or Candidate Controlled Com	mittee	6. Primarily Formed	Ballot Meas	sure Committee		
NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BALLOT MEASURE				
Sarah Hacker						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NU	MBER IF APPLICABLE)	BALLOT NO. OR LETTER	JURISDICTION	4		SUPPORT
District Attorney Kings Co	ounty					OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) Aspen Street Hanfor	Y STATE ZIP	Identify the controlli	ng officehold	der, candidate, or s	state measur	e proponent, if
Related Committees Not included in this Statement	Lisi any committees	NAME OF OFFICEHOLDER, CA	ANDIDATE, OR PRO	OPONENT		
make expenditures on behalf of your candidacy		OFFICE SOUGHT OF HELD			DISTRICT NO. IF A	NY
COMMITTEE NAME	I.D. NUMBER				***************************************	VA-VA-VA-VA-VA-VA-VA-VA-VA-VA-VA-VA-VA-V
NAME OF TREASURER	CONTROLLED COMMITTEE? YES NO	7. Primarily Formed officeholder(s) or cand	l Candidate/(lidate(s) for wh	Officeholder Comm hich this committee is	nittee <i>List nai</i> is primarily fori	mes of ned.
COMMITTEE ADDRESS STREET ADDRESS		NAME OF OFFICEHOLDER OF	CANDIDATE	OFFICE SOUGHT OF	R HELD	SUPPORT OPPOSE
CITY STATE		NAME OF OFFICEHOLDER OF	CANDIDATE	OFFICE SOUGHT OF	RHELD	SUPPORT OPPOSE
COMMITTEE NAME	I,D, NUMBER	NAME OF OFFICEHOLDER OF	CANDIDATE	OFFICE SOUGHT OF	RHELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?	NAME OF OFFICEHOLDER OF	CANDIDATE	OFFICE SOUGHT OF	R HELD	SUPPORT
COMMITTEE ADDRESS STREET ADDRESS	(NO P.O. BOX)			ı		☐ OPPOS€

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

Statement covers period **CALIFORNIA** 01/01/2024 from 06/30/2024 3 of 16 through I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Hacker for District Attorney 2028				1445473
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B Calendar year Yotal to date	Running in Both th	nmary for Candidates e State Primary and
1. Monetary Contributions Schedule A, Line 3	0.00	\$0.00	General Elections	-
2. Loans Received Schedule B, Line 3	3,000.00	5,800.00	1/1 thr	ough 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS	3,000.00	s5,800.00	20. Contributions	0.00 \$ 0.00
4. Nonmonetary Contributions	1,028.00	1,028.00	Received	
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 \$	4,028.00	\$6,828.00	21. Expenditures Made \$	0.00 \$ 0.00
Expenditures Made			Expenditures Limi Candidates	t Summary for State
6. Payments Made Schedule E, Line 4	s3,309.81	\$ 3,309.81	Candidates	
7. Loans Made Schedule H, Line 3	0.00	0.00	I .	tive Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6+7	\$ 3,309.81	\$3,309.81	(ii Subject to V	ошнагу ехреновие сипп)
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	-934.31	1,056.25		
10. Nonmonetary Adjustment Schedule C, Line 3	1,028.00	1,028.00	Date of Election (mm/dd/yy)	Total to Date
11. TOTAL EXPENDITURES MADE Add Lines 8+9+10	s3,403.50	\$5,394.06	. , , , , , ,	¢
Current Cash Statement		To calculate Column B.		Φ
12. Beginning Cash Balance Previous Summary Page, Line 16	s <u>842.45</u>	add amounts in Column A to the corresponding		_ Φ
13. Cash Receipts Column A, Line 3 above	3,000.00	amounts from Column B of your last report, Some	***************************************	
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00	amounts in Column A may be negative figures that should be subtracted from		_ \$
15. Cash Payments Column A, Line 8 above	3,309.81	previous period amounts. If this is the first report being		_
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	s 532.64	filed for this calendar year, only carry over the amounts		T
If this is a termination statement, Line 16 must be zero.		from Lines 2, 7, and 9 (if any).		

0.00

0.00

6,856.25

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

*Amounts in this section may be different from amounts

reported in Column B.

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

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

See instructions on reverse

Cash Equivalents and Outstanding Debts

18. Cash Equivalents

Schedule A Monetary Contributions Received		Ame	Statement covers period from01/01/2024			CALIFORNIA 460			
				through _	06/30/	2024	Page _	4 of <u>16</u>	
NAME OF FILER Hacker for	ns on neverse District Attorney 2028			L			I.D. NUMBER	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 R THIS PE		CALEND	VE TO DATE PAR YEAR DEC. 31)	PER ELECTION TO DATI	E
		OTH SCC							
Schedule	A Summary	•	danta da				* Contributor	Codes	ī
1. Amount rec (Include all S	eived this period - itemized monetary contributions. Schedule A subtotals.)		\$	0.	00	-	IND - Individu COM - Recip	ient Committee	
2. Amount rec	eived this period - unitemized monetary contributions of less t	han \$100	\$	0.	00	(other than PTY or SCC) OTH - Other (e.g., business entity) PTY - Political Party			
3. Total monel (add Lines 1	tary contributions received this period. and 2. Enter here and on the Summary Page, Column A, Line	e 1.)	TOTAL \$	0.	00	_ [Contributor Committee	

SUBTOTAL \$

Sched	ule	В	-	Part	1
Loans	Re	ce	Í٧	red	

SEE INSTRUCTIONS ON REVERSE

Sarah Hacker

Sarah Hacker

Hanford, CA 93230

Hanford, CA 93230

Hacker for District Attorney 2028

FULL NAME, STREET ADDRESS AND

ZIP CODE OF LENDER

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

*IND COM OTH PTY SCC

*☑IND ☐ COM ☐OTH ☐ PTY☐ SCC

2. Loans paid or forgiven this period

1. Loans received this period - - - - -

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

(Total Column (c) plus loans under \$100 paid or forgiven)

(Include loans paid by a third party that are also itemized on Schedule A.)

Schedule B Summary

Amounts may be rounded to whole dollars.

(b) AMOUNT

RÉCEIVED THIS

PERIOD

0.00

3,000.00

(a) OUTSTANDING

BALANCE

BEGINNING THIS

PERIOD

2,800.00

0.00

IF INDIVIDUAL, ENTER

OCCUPATION AND EMPLOYER

OF SELF- EMPLOYED, ENTER NAME

OF BUSINESS)

Dias Law Firm Inc.

Attorney

Dias Law Firm Inc.

Attorney

ď					SCH	EDULE B - PART
ſ	Statem	ent cove	ers_period		CALIFORNIA	4 /60
	from	01/0	01/2024		FORM	400
	through .	06/3	30/2024		Page 5	of16
					I.D. NUMBER 1445	473
(c) AMOUNT PAID FORGIVEN THE PERIOD **	S BALANCE	TANDING AT CLOSE PERIOD	(e) INTEREST PAID THIS PERIOD		(I) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS T DATE
PAID \$ 0.00 FORGIVEN	\$ 2,8	00.00	0 RATE	%	\$ <u>2,800.00</u>	CALENDAR YEAR \$ 4,028.00 PER ELECTION** 7,884.00 P-2026
\$0.00	12/31/		\$0.00	-	05/22/2023 DATE INCURRED	
PAID \$ 0,00 FORGIVEN	\$\$	00.00	0 RATE	%	\$3,000.00	CALENDAR YEAR \$ 4,028.00 PER ELECTION" 7,884.00 P-2020
\$0.00	12/31/ DATE		\$0.00	-	01/30/2024 DATE INCURPED	
	\$3,	00.00				
	\$	0.00			* Contributor Codes IND - Individual COM - Recipient Co (other than F OTH - Other (e.g., b PTY - Political Party	mmittee PTY or SCC) usiness entity)

3. Net change this period. (Subtract Line 2 from Line 1.)					\$	3,000.00 (May be a negative number)			SCC - Small Contributor Committee
244 (Mary 1997) - 1997	SUBTOTALS \$	3,000.00	\$	0.00	Ś	5,800.00	\$	0.00	

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

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

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

Schedule B - Part 2 Loan Guarantors			Amounts may be rounded to whole dollars.			ors period 01/2024	CALIFORNIA 46		
SEE INSTRUCTIONS ON REVERSE				through	06/	30/2024	Page6	of16	
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)	t.C	DAN		AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE	
	☐ IND		LE	NDER			\$PER ELECTION		
OTH PTY SCC			E	DATE			(IF REQUIRED)		
							1	ı	

SUBTOTAL \$

Enter on Summary Page, Line 17 only.

Schedule			Amounts may be rounded	i				SCHEDULE
Nonmone	etary Contributions Received		to whole dollars.		Statem	nent covers period	CALIFORN	
					from	01/01/2024	FORM	400
ore Morni (orig					through _	06/30/2024	Page 7	_ of16
NAME OF FILER	ONS ON REVERSE				L		I.D. NUMBER	***************************************
Hacker for	District Attorney 2028						1445	473
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	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. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Sarah Hacker	[X] IND	Attorney			528.00	3,528.00	7,384.00 P-202
06/19/2024	Hanford, CA 93230	COM OTH PTY SCC	Olas Law Firm Inc		enewal for 6 nths			
	Sarah Hacker	X IND	Attorney			500.00	4,028.00	7,884.00 P-202
06/24/2024	Hanford, GA 93230	COM OTH PTY SCC	Dias Law Firm Inc	County Dep	ion for Kings outy Sheriff's clation			
Schedule	C Summary	_					* Contributor Codes	
(Include all S	ceived this period - itemized nonmonetary contribution Schedule C subtotals.)		in \$100		b	28.00	IND - Individual COM - Recipient Com (other than PT' OTH - Other (e.g., bus PTY - Political Party	Y or SCC) siness entity)
	onetary contributions received this period. 1 and 2. Enter here and on the Summary Page, Colur	mn A, Lines 4 a	ind 10.)		. 100	28.00	SCC - Small Contribute	or Committee

_ _ _ _ _ _ _ TOTAL \$ _

SUBTOTAL \$

1,028.00

Schedule D Summary o Supporting Candidates	f Expenditures /Opposing Other , Measures, and Committees	Amounts ma to whole	y be rounded dollars.	Statement covers period from01/01/2024 through06/30/2024			CALIFO FOF	M	SCHEDU 46	0
NAME OF FILER Hacker for Dis	strict Attorney 2028			ı			f.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 ENDAR YEAR 1 - DEC. 31)		ECTION TO REQUIRED)	
	Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure								
SCHEDULE I	D SUMMARY tributions and independent expenditures made this p	eriod (Include all Sche	dute D subtotals.) _					\$	0.00	
	ontributions and independent expenditures made thi	·	·					\$	0.00	
3. Total contribu	utions and independent expenditures made this perio	od. (Add Lines 1 and 2.	Do not enter on the S	ummary	Page.)		TOTAL	\$	0,00	_
			SUBTOT	ΓAL \$						

Schedule	E
Payments	Made

Amounts may be rounded to whole dollars.

1		S	CHEDULE E
Stateme	ent covers period 01/01/2024	CALIFORNIA FORM	160
through _	06/30/2024	Page 9 of	16
		I.D. NUMBER 1445473	

Hacker for District Attorney 2028

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)*

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 airlime 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 C	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Valley Vision Treasury Fresno, CA 93704	PRO	Treasury services	650.20
Valley Vision Treasury Fresno, CA 93704	PRO	Treasury services	1,016.10
Valley Vision Treasury Fresno, CA 93704	ORS	Treasury services	324.26
Valley Vision Treasury Fresno, CA 93704	PRO	Treasury services	651,25
* Payments that are contributions or independent expenditures must also be summarized on Schedula	э D,	SUBTOTAL \$	2,641.81

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

Schedule	E
Payments	Made

Amounts may be rounded to whole dollars.

	DOMEDUCE E
t covers period	CALIFORNIA / CO
01/01/2024	FORM 400
06/30/2024	Page10 of16
	I.D. NUMBER 1445473

SCHEDIFFE

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 poiling 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	DESCRIPTION OF PAYMENT	AMOUNT PAID
Integrated Solutions: Political San Diego, CA 92116	OFC		85.00
Integrated Solutions: Political San Diego, CA 92116	OFC		85.00
Integrated Solutions: Political San Diego, CA 92116	OFC		85.00
Integrated Solutions: Political San Diego, CA 92116	OFC		85.00
* Payments that are contributions or independent expenditures must also be summarized on Scher	dule 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	Made

Amounts may be rounded to whole dollars.

Staten	nent covers period	CALIFORNIA / CO
from	01/01/2024	FORM 400
through	06/30/2024	Page11of16
		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 detense

LtT 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 airlime 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 DESCRIP	TION OF PAYMENT	AMOUNT PAID
Integrated Solutions: Political				
San Diego, CA 92116	OFC			85.00
Citizens Business Bank				
Fresno, CA 93720	OFC			18.00
Schedule E Summary	<u></u>			
1. Itemized payments made this period. (Include all Schedule E subtotals.)				3,084.81
2, Unitemized payments made this period of under \$100 $_$ $_$ $_$ $_$ $_$ $_$				225.00
3. Total interest paid this period on toans. (Enter amount from Schedule B, F	Part 1, Column (e).)		0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and	on the Summan		TOTAL 9	\$3,309.81
* Payments that are contributions or independent expenditures must also be summarized on Schedu	le D.		SUBTOTAL \$	103.00

SCREDILLS E

Schedule F Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

		SCHEDULE P
Stateme	nt covers period	CALIFORNIA / CO
from	01/01/2024	FORM 400
through	06/30/2024	Page12of16
 		I.D. NUMBER 1445473

Hacker for District Attorney 2028

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)*

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 I.v. or cable airlime 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	650.20	0.00	650,20	0.00
Valley Vision Treasury Fresno, CA 93704	PRO Treasury services	324,26	0.00	324.26	0.00
Valley Vision Treasury Fresno, CA 93704	PRO Treasury services	1,016.10	0.00	1,016,10	6.00
Valley Vision Treasury Fresno, CA 93704	PRO Treasury services	0.00	1,056.25	0.00	1,056.25
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$ 1,990.56	\$ 1,056.25	\$ 1,990.56	\$ 1,056.25

Schedule F	Amounts may	be rounded			SCHEDULE	
Accrued Expenses (Unpaid Bills)	to whole	dollars.	Statement covers	period CAL	CALIFORNIA 460	
		1	from01/01/2024		FORM 40	
OFF MOTOUOTIONS ON DESIGNOS		1	06/30	/2024 Pag	ge13 of16	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Hacker for District Attorney 2028				I.D. NU		
Tracket for bistrict Attorney 2020					1445473	
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 communi MTG meetings and app OFC office expenses PET petition circulating PHO phone banks POL polling and survey POS postage, delivery a PRO professional service PRT print ads	ications learances research and messenger services	RAD radio airti RFD returned o SAL campaign TEL t.v. or cab TRC candidate TRS staff/spou TSF transfer b VOT voter regi	workers' salaries le airtime and production travel, lodging, and mea se travel, lodging, and m etween committees of the	costs Is eals same candidate/sponsor	
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	
SCHEDULE F SUMMARY 1. Total accrued expenses incurred this period. (Include all Schedule F, accrued expenses of \$100 or more, plus total unitemized accrued ex	naneae undar \$100 \			NCURRED TOTAL	S \$1,056.25	

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 uniterized payments on accrued expenses under \$100.) _ PAID TOTALS \$ _ 1,990.56 3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) -934.31 _ NET \$ Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTALS \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00

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

Amounts may be rounded to whole dollars.

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

NAME OF AGENT OR INDEPENDENT CONTRACTOR

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 airlime 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 PAID

www.fppc.ca.gov

TOTAL * \$

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

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

Sched	ule H	
Loans	Made to	Others*

Amounts may be rounded to whole dollars. SCHEDULE H **CALIFORNIA** Statement covers period **FORM** 01/01/2024 from 06/30/2024 15 of 16 through SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER **Hacker for District Attorney 2028** 1445473 (a) OUTSTANDING BALANCE BEGINNING THIS PERIOD (c) REPAYMENT OR FORGIVENESS THIS (f) ORIGINAL AMOUNT OF (g) CUMULATIVE LOANS TO DATE IF INDIVIDUAL, ENTER (b) AMOUNT LOANED (d) OUTSTANDING (e) INTEREST FULL NAME, STREET ADDRESS AND OCCUPATION AND EMPLOYER THIS PERIOD BALANCE AT CLOSE RECEIVED ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) (IF SELF- EMPLOYED, ENTER NAME PERIOD * OF THIS PERIOD LOAN OF BUSINESS) CALENDAR YEAR PAID PER ELECTION" RATE FORGIVEN DATE INCURRED DATE DUE

SUBTOTALS	\$ \$	\$ \$	

Schedule I			
Miscellaneous	Increases	to	Cash

Amounts may be rounded

Miscellaneous Increases to Cash		to whole dollars.	SCHEDULET			
wiscenaneous increases to Cash	icreases to Casti	to whole dollars.	Statement covers	CALIFORNIA 4 FORM	CALIFORNIA 460	
BEE INSTRUCTIONS ON REVERSE			through06/30/20	Page 16 of 16	Page 16 of 16	
NAME OF FILER				I.D. NUMBER		
Hacker for District A	attorney 2028			1445473		
DATE FULL NAME AND ADDRESS OF SOURCE RECEIVED (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH		
Schedule I Summ	nary					
1. Itemized increases to	cash this period.		\$	0.00		
2. Unitemized increases	to cash of under \$100 this period.		\$	0.00		
3. Total of all interest rec	eived this period on loans made to others. (Schedule H, Colum	nn (e).)		0,00		
4. Total miscellaneous in Summary Page, Line	ncreases to cash this period. (Add Lines 1, 2, and 3. Enter here 14.)	and on the	TOTAL \$	0.00		