C	ecipient Committee ampaign Statement over Page			RECEIVED APR 2 8 2022	CALIFORNIA 460 FORM  Page 1 of 18
		Statement covers period from $\frac{1/1/2022}{}$	Date of election if applicable: (Month, Day, Year)	ADOR COUNTY ELECTIONS	For Official Use Only
SE	E INSTRUCTIONS ON REVERSE	through 4/23/2022	6/7/22 Primary		. 5
1.	Type of Recipient Committee: All Committees - Co	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:		
	O State Candidate Election Committee O Recall (Also Complete Part 5)  General Purpose Committee O Sponsored O Small Contributor Committee	Primarily Formed Ballot Measure Committee Controlled Controlled Sponsored Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee Also Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statemen (Also file a Form 410	nt S t Termination)	Quarterly Statement Special Odd-Year Report
3.		D. NUMBER 437821	Treasurer(s)		
	COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Community First Ryan Gillaspie For Sheriff 2022		NAME OF TREASURER Greg Bixby		
			MAILING ADDRESS		
	STREET ADDRESS (NO P.O. BOX)	-	CITY Plymouth		P CODE AREA CODE/PHONE 95669
	CITY STATE ZIP CO Plymouth CA 9566		NAME OF ASSISTANT TREASU		
	MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX		MAILING ADDRESS		1
	CITY STATE ZIP CO	DE AREA CODE/PHONE	CITY	STATE Z	ZIP CODE AREA CODE/PHONE
	OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDR	RESS	
	Verification  I have used all reasonable diligence in preparing and reviewing certify under penalty of perjury under the laws of the State of Executed on 4/28/2022  Date  Executed on Date  Executed on Date  Executed on Date	California that the foregoing is true and  By	Signature of Treasurer or Assistant rolling Officeholder, Candidate, State Measure F	nt Treasurer Proponent or Responsible Officer of S , State Measure Proponent	
	Date	-,	Signature of Controlling Officeholder, Candidate	, State Measure Proponent	

FPPC Form 460 (Jan/2016))

COVER PAGE

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

#### Recipient Committee Campaign Statement Cover Page — Part 2

Officeholder or Candidate Controlled Con	nmittee			6.	Primarily Formed Ballo	t Measure (	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE					NAME OF BALLOT MEASURE			6.	
Ryan M Gillaspie									
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND D	ISTRICT NUMB	ER IF APPLI	CABLE)		BALLOT NO. OR LETTER	JURISDICTIO	NC		SUPPORT
Sheriff - Amador County									OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATI	ZIP						
	Jackson	CA	95642		Identify the controlling office	eholder, candi	date, or state	measure propo	nent, if any.
					NAME OF OFFICEHOLDER, CA	NDIDATE, OR F	ROPONENT		
Related Committees Not Included in this	Statement:	List any co	mmittees						
not included in this statement that are controlled by yo contributions or make expenditures on behalf of your c	u or are prima				OFFICE SOUGHT OR HELD			DISTRICT NO. I	FANY
COMMITTEE NAME	I.D. NUM	BER							
				7.	Primarily Formed Cand	didate/Offic	eholder Co	mmittee Lis	t names of
NAME OF TREASURER		LLED COM			officeholder(s) or candidate(s)	for which this	committee is p	orimarily formed	i.
COMMITTEE ADDRESS STREET ADDRESS (NO P	YE:	s 🗌 N	0		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	IGHT OR HELD	
COMMITTEE ADDRESS (NO P	.о. вох)								☐ SUPPORT ☐ OPPOSE
CITY STATE Z	IP CODE	AREA CO	ODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	- OURDORT
									☐ SUPPORT ☐ OPPOSE
COMMITTEE NAME	I.D. NUM	BER	<del></del>		NAME OF OFFICE IOLDED OD	CANDIDATE	OFFICE COL	GHT OR HELD	LI OFFOSE
					NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT
					10.1				OPPOSE
NAME OF TREASURER		DLLED COM			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	JGHT OR HELD	SUPPORT
COMMITTEE ADDRESS STREET ADDRESS AND D	YE:	S 🔲 N	0						☐ OPPOSÉ
COMMITTEE ADDRESS STREET ADDRESS (NO P	.U. BUX)								-
CITY STATE Z	IP CODE	ARFA CO	ODE/PHONE		8.44	nah aandin:4i	on chaota if -		
SINIE Z	ii OODL	AILAG	JULII TIONE		Atta	ach continuati	on sneets If h	ecessary	

# Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statement covers period from $\frac{1/1/22}{}$	CALIFORNIA 460
through 4/23/22	Page 3 of 18
	I.D. NUMBER
	1437821

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Greg Bixby

Greg Bixby			1107021
Contributions Received  1. Monetary Contributions	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)  \$ 25842.00 0.00 \$ 25842.00 3412.00 \$ 29254.00	**Example 1.00	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections  1/1 through 6/30 7/1 to Date  20. Contributions Received \$\$  21. Expenditures Made \$ \$
Expenditures Made  6. Payments Made Schedule E, Line 4  7. Loans Made Schedule H, Line 3  8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7  9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3  10. Nonmonetary Adjustment Schedule C, Line 3  11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$\frac{22693.59}{0.00}\$ \$\frac{22693.59}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{22693.59}{0.00}\$	\$\frac{22693.59}{0.00} \$\frac{22693.59}{0.00} 0.00 \$\frac{22693.59}{0.00}	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 Previous Summary Page, Line 16  13. Cash Receipts Column A, Line 3 above  14. Miscellaneous Increases to Cash Schedule I, Line 4  15. Cash Payments Column A, Line 8 above  16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15  If this is a termination statement, Line 16 must be zero.	\$\frac{28587.00}{25842.00}\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	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	*Amounts in this section may be different from amounts reported in Column B.
Cash Equivalents and Outstanding Debts  18. Cash Equivalents See instructions on reverse	\$ <u>0.00</u> \$ <u>0.00</u>	from Lines 2, 7, and 9 (if any).	FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772 www.fppc.ca.go

Schedule A Monetary Contributions Received		Amounts may be rounded to whole dollars.		Statement covers period from 1/1/22		CAL F	CALIFORNIA 460		
SEE INSTRUCTION	ONS ON REVERSE			through 4/23/22		Pag	e 4 of 18		
NAME OF FILER Greg Bixby						I.D. N 14378	NUMBER 321		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALEND	VE TO DATE DAR YEAR - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)		
1/7/22	Doug Petersen Enterprises  Ione, CA 95840	☐IND ☐COM ØOTH ☐PTY ☐SCC		200.00	200.00				
2/4/22	Darrell Rice Pioneer, CA 95666	☑IND □COM □OTH □PTY □SCC	Self Employed	100.00	100.00				
2/5/22	Dana Calhoun Ione, CA 95840	☑IND □COM □OTH □PTY □SCC	Student	100.00	100.00				
2/8/22	Amador Fine Tune  Martell, CA 95642	□IND □COM ØOTH □PTY □SCC		100.00	100.00				
2/12/22	Richard Butler Fremont, CA 94536	☑IND □COM □OTH □PTY □SCC	Retired	1000.00	1000.00				
			SUBTOTAL S	\$ 1500.00					
Schedule /	A Summary					*Contributor			

1. Amount received this period – itemized monetary contributions. 

2. Amount received this period – unitemized monetary contributions of less than \$100 .......\$

3. Total monetary contributions received this period. 

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

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

www.fppc.ca.gov

#### Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received		to whole d		Statement covers period CAI from 1/1/22			california 460		
				through <u>4/23/22</u>		Page _	5	of	
NAME OF FILER						T.D. NU			
Community 1	First - Ryan Gillaspie For Sheriff 2022					143782	<u></u>		
DATE	FULL NAME, STREET ADDRESS AND ZIP CODE OF	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE TO	DATE	PER	RELECTION	

3	· · · · · · · · · · · · · · · · · · ·					
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN 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)	PER ELECTION TO DATE (IF REQUIRED)
2/18/22	Nancy Gladden Pioneer, CA 95666	IND COM OTH PTY	Hams Station - Owner	450.00	450.00	
2/18/22	Rico Oller  Dayton, NV 89403	IND COM OTH PTY	Sequoai Insulation - Owner	500.00	500.00	
2/18/22	Jeremiah Gladden Pine Grove, CA 95665	IND COM OTH PTY	Woodland Expansion Inc Owner	100.00	100.00	
2/18/22	Jackson, CA 95642	ØIND □COM □OTH □PTY □SCC	Jackson PD - Officer	300.00	300.00	
2/18/22	Roaring Camp Pine Grove, CA 95665	□IND □COM ☑OTH □PTY □SCC		450.00	450.00	

\*Contributor Codes

IND - Individual

COM -- Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

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### Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)
--------------------

CALIFORNIA FORM

Statement covers period

from 1/1/22

NAME OF FILER				through <u>4/23/22</u>		Page _	6 of
Community	First - Ryan Gillaspie For Sheriff 2022					14378	21
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME) OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
2/19/22	Rich Martin Property Mgt Plymouth, CA 95669	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		260.00	260.00		
2/25/22	Sierra Yard Supply Pioneer, CA 95666	☐IND ☐COM ØOTH ☐PTY ☐SCC		1500.00	1500.00		
3/2/22	Creach Construction  Jackson, CA 95642	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		300.00	300.00		
3/4/22	Donald Hanson Pioneer, CA 95666	☑IND □COM □OTH □PTY □SCC	Hanson Truck Service - Owner	500.00	500.00	-	
3/9/22	Jim Giuffra Sutter Creek, CA 95685	☑IND □COM □OTH □PTY □SCC	Amador FIne Tune - Owner	700.00	700.00		
SUBTOTAL \$ 3260.00							

\*Contributor Codes

IND - Individual

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OTH – Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

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#### **Schedule A (Continuation Sheet)**

Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received	to whole o	tollars.	Statement cove	CAL	IFORNIA 46	60
			through_4/23/22	Page	7 of18	
NAME OF FILER				I.D. 1	NUMBER	
Community First - Ryan Gillaspie For Sheriff 2022				1437	821	

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN 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)	PER ELECTION TO DATE (IF REQUIRED)
3/17/22	Austin Reilly Jackson, CA 95642	☑IND □COM □OTH □PTY □SCC	RCD Contracting - Owner	1000.00	1000.00	
3/24/22	Martell Mini Storage  Martell, CA 95642	□IND □COM ØOTH □PTY □SCC		300.00	300.00	
4/8/22	Stanley Lukowicz Jackson, CA 95642	DIND COM OTH PTY SCC	Property Mgt - Owner	2000.00	2000.00	
4/12/22	Danielle Arrighi Temple City, CA 91780	☑IND □COM □OTH □PTY □SCC	San Gabriel Valley Water Water Resource Mgr	100.00	100.00	
2/18/22	Velma Hall Ione, CA 95840	ØIND □COM □OTH □PTY □SCC	Retired	100.00	100.00	

\*Contributor Codes

IND ~ Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity) PTY - Political Party

SCC - Small Contributor Committee

## Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCF	IFDUI	FA	(CONT.)	

CALIFORNIA ACO

Statement covers period

,				from <u>1/1/22</u>			RM 460
				through <u>4/23/22</u>		Page _8	
NAME OF FILER Community	First - Ryan Gillaspie For Sheriff 2022					1.D. NUN 143782	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME) OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)
2/18/22	Julianne Venhuizen Jacksopn, CA 95642	☑IND □COM □OTH □PTY □SCC	Retired	370.00 370.00		370.00	
2/18/22	Pioneer CA, 95666	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	200.00	200.00		
3/26/22	Curtis Family Trust Pioneer, CA 95666	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		175.00	175.00		
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					
			SUBTOTAL	\$ 745.00			

\*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Schedu Nonmoi	le C netary Contributions Received		Amounts may be rounded to whole dollars.	Statement covers period from 1/1/22			CALIFORNIA 460		
SEE INSTRUC NAME OF FILE Greg Bixby	CTIONS ON REVERSE ER			,	thro	ough <u>4/23/22</u>		Page 9 I.D. NUMI 1437823	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE*	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION GOODS OR SERV		AMOUNT/ FAIR MARKET VALUE	CUMULA DA CALENDA (JAN 1 - I	TE AR YEAR	PER ELECTION TO DATE (IF REQUIRED)
2/18/22	Roaring Camp Pine Grove, CA 95665	□IND □COM ØOTH □PTY □SCC		Dinner Tickets and Gold Nugg		530.00			
2/18/22	Eddie & Nikki Oneto  Jackson, CA 95642	☑IND □COM □OTH □PTY □SCC	Ranching & Lumber Owner	Australian Shepherd		900.00			
2/18/22	Vino Noceto Winery Plymouth, CA 95669	□IND □COM ☑OTH □PTY □SCC		Wine		130.00			

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL \$ 2160.00** 

600.00

Sac Kings Tickets

Mather Aviation

Mather, CA 95655

2/18/22

1. Amount received this period - itemized nonmonetary contributions. 2. Amount received this period – unitemized nonmonetary contributions of less than \$100 ......\$ 632.00

□IND

СОМ **▼** OTH

□ PTY □scc

> \*Contributor Codes IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

3. Total nonmonetary contributions received this period. 

FPPC Form 460 (Jan/2016))

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Schedule C Nonmonetary Contributions Received			Amounts may be rounded to whole dollars.	fron	Statement covers p	period	CALIFORNIA 460		
	CTIONS ON REVERSE				thr	ough <u>4/23/22</u>		Page 10	of
Greg Bixby								1.D. NUMB 1437821	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE*	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION GOODS OR SERV		AMOUNT/ FAIR MARKET VALUE	CALEND	ATIVE TO DATE DAR YEAR - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
2/18/22	Buckhorn Liquors Pioneer, CA 95666	□IND □ COM ☑ OTH □ PTY □ SCC		Liquor		500.00			
2/18/22	Rammco Sutter Creek, CA 95685	☐IND ☐COM ØOTH ☐PTY ☐SCC		Linens		120.00			
		□IND □COM □OTH □PTY □SCC							
		☐IND ☐COM ☐OTH ☐PTY ☐SCC							
Attach add	ditional information on appropriately labeled	continuation	sheets.	SUBT	OTAL	\$ 620.00			
	e C Summary received this period – itemized nonmonetar	ry contribution	ns.					ontributor Cod D – Individual	

(Include all Schedule C subtotals.).....\$

2. Amount received this period – unitemized nonmonetary contributions of less than \$100 ......\$

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Schedule	E
<b>Payments</b>	Made

Amounts may be rounded to whole dollars.

	SCHEDULE E
Statement covers period from $\frac{1/1/22}{}$	CALIFORNIA 460
through_4/23/22	Page of18
(	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Greg Bixby 143/821

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. RFD returned contributions campaign consultants MTG meetings and appearances CNS SAL campaign workers' salaries contribution (explain nonmonetary)\* OFC office expenses TEL t.v. or cable airtime and production costs petition circulating civic donations CVC TRC candidate travel, lodging, and meals candidate filing/ballot fees PHO phone banks polling and survey research TRS staff/spouse travel, lodging, and meals fundraising events POL transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)\* postage, delivery and messenger services TSF IND legal defense PRO professional services (legal, accounting) VOT voter registration WEB information technology costs (internet, e-mail) campaign literature and mailings PRT print ads LIT

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
A&A Shooting Club  Jackson, CA 95642	CVC			300.00
ABC Sacramento, CA 95834	FND			75.00
ACRA Sutter Creek, CA 95685	FND			150.00

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

**SUBTOTAL \$** 525.00

#### Schedule E Summary

22063.30 2. Unitemized payments made this period of under \$100......\$ 0.003. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)......\$ 22693.59 

FPPC Form 460 (Jan/2016))

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Schedule E (Continuation Sheet) Payments Made  SEE INSTRUCTIONS ON REVERSE NAME OF FILER	Amounts may be rounded to whole dollars.			from	atement covers period 1/1/22  gh 4/23/22	SCHEDULE E (CONTINUE OF LESS CONTINUE OF	
Greg Bixby						1437821	
CODES: If one of the following codes accurately describes  CMP campaign paraphernalia/misc.  CNS campaign consultants  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 co MTG meetings a OFC office expe PET petition circ PHO phone bank POL polling and POS postage, do	mmunications nd appearance nses culating ts survey researc	s h senger services	RAD RFD SAL TEL TRC TRS TSF VOT	describe the payment. radio airtime and production returned contributions campaign workers' salaries t.v. or cable airtime and prod candidate travel, lodging, an staff/spouse travel, lodging, transfer between committee voter registration information technology costs	luction costs d meals and meals s of the sam	e candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DES	CRIPTIC	ON OF PAYMENT		AMOUNT PAID
Aimee Gillaspie Pioneer, CA 95666		FND					604.55
Amador County Elections Jackson, CA 95642		FIL LIT					1002.43

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

**SUBTOTAL \$ 2990.18** 

Schedule E			SCHEDULE E (CON						
(Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.	Statement covers period from	california 460						
SEE INSTRUCTIONS ON REVERSE		through <u>4/23/22</u>	Page of						
NAME OF FILER			I.D. NUMBER						
Greg Bixby			1437821						
CODES: If one of the following codes accurately	describes the payment, you may enter the code	e. Otherwise, describe the payment.	•						
CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production	n 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 pro							
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, a	nd meals						

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

POL polling and survey research

LIT campaign literature and mailings	print ads	services (ie	gai, accounting	WEB information technology costs (internet, e-mai			
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID		
City of Ione PO Box 398		FND			781.45		
Claypools  Jackson, CA 95642		FND			150.41		
Clipper El Dorado, CA 95623		LIT			1331.94		
Costco Folsom, CA 95630		FND OFC			450.64		
Dan Dellinger Lotus. CA 95651		CNS			2500.00		

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

fundraising events

legal defense

IND

independent expenditure supporting/opposing others (explain)\*

**SUBTOTAL \$** 5214.44

staff/spouse travel, lodging, and meals

VOT voter registration

transfer between committees of the same candidate/sponsor

Schedule E (Continuation Sheet) Payments Made  SEE INSTRUCTIONS ON REVERSE  Amounts may be to whole do				Statement covers period $\frac{1/1/22}{\text{from}}$ through $\frac{4/23/22}{}$			CHEDULE E (CONT CRNIA 460 4 of 18
Greg Bixby						1.D. NUM 1437821	BER
CODES: If one of the following codes accurately described ampaign 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 MTG meeting OFC office ex PET petition PHO phone b POL polling a POS postage	communications is and appearance penses circulating anks and survey researed delivery and mesonal services (leg-	s ch ssenger services	Otherwise, RAD RFD SAL TEL TRC TRS TSF VOT WEB	radio airtime and production returned contributions campaign workers' salaries t.v. or cable airtime and procandidate travel, lodging, ar staff/spouse travel, lodging, transfer between committee voter registration	duction costs and meals and meals s of the sam	e candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE	OR	DESCRIPTI	ON OF PAYMENT		AMOUNT PAID
Jackson Lyons Club Sutter Creek, CA 95685		CVC					150.00
Kreationz Ink Jackson, CA 95642		СМР					2782.65

Kreationz Ink	CMP	2782.65
Jackson, CA 95642		
Ledger Dispatch	PRT	267.75
Jackson, CA 95642		
Lowes	LIT	112.17
Jackson, CA 95642		
Mace Meadow GC	FND	750.00
Pioneer, CA 95666		

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 4062.57

Schedule E			SCHEDULE E (CONT
	Amounts may be rounded to whole dollars.	Statement covers period	CALIFORNIA 460
(Continuation Sheet)	to more abilities	1/1/22	FORM 400
Payments Made		from	
		through 4/23/22	Poge 15 of 18
SEE INSTRUCTIONS ON REVERSE			Page of
NAME OF FILER			I.D. NUMBER
Greg Bixby			1437821
CODES: If one of the following codes accurately des	cribes the payment, you may enter the co	de. Otherwise, describe the payment	
CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and productio	n 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 pro	
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, a	
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging	, and meals

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

independent expenditure supporting/opposing others (explain)\*

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

LEG legal defense

LIT campaign literature and mailings	PRT print ads			WEB information technology costs (inte	rnet, e-mail)
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Mountain Grille Pioneer, CA 95666	`	TRC TRS			135.85
Pacific Coast Pasta El Dorado Hills, CA 95762		FND			1537.77
Raffles For Less Rafflesforless.COM		FND			188.00
Rich Martin Plymouth, CA 95669		LIT			168.07
Richard Gorremans Jenks OK., 74037		WEB			1500.00

**SUBTOTAL \$** 3529.69

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Greg Bixby

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.

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	C	OR .	DESCRIPTION OF PAYMENT	AMOUNT PAID
Safeway  Jackson, CA 95642	FND TRS				278.40
Sams Club Folsom, CA 95630	OFC FND				843.18
Shell Plymouth, CA 95669	TRS				172.12
Shenendoah Inn Plymouth, CA 95669	TRS				286.00
Jackson, CA 95642	OFC LIT				114.03

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$ 1693.73** 

Schedule E (Continuation Sheet) Payments Made  SEE INSTRUCTIONS ON REVERSE NAME OF FILER Greg Bixby	Amounts may be to whole do			Statement covers period  1/1/22 from  through	CALIFO FOR Page 1 I.D. NUMB	7 of18	
CODES: If one of the following codes accurately designed compaign 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 com MTG meetings and OFC office expens PET petition circul PHO phone banks POL polling and so POS postage, delii	munications d appearances es lating urvey research	n senger services	erwise, describe the payment.  RAD radio airtime and production costs returned contributions .  SAL campaign workers' salaries  TEL t.v. or cable airtime and production costs candidate travel, lodging, and meals  TRS staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor voter registration  WEB information technology costs (internet, e-mail)			
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE (	DR DE	ESCRIPTION OF PAYMENT		AMOUNT PAID	
Steve Geitz Pioneer, CA 95666		FND				650.00	
Trinell Knechtly		FND				350.00	

(IF COMMITTEE, ALSO ENTER I.D. NUMBER)			
Steve Geitz Pioneer, CA 95666	FND	650.00	
Trinell Knechtly Pioneer, CA 95666	FND	350.00	
Upcountry Rotary Pioneer, CA 95666	CVC	200.00	
Vistaprint Vistaprint.COM	LIT	246.94	
Walmart  Jackson, CA 95642	OFC FND	145.25	

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 1592.19

Schedule E (Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.		Statement covers period from		CALIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE				through 4/2	23/22	Page _	8 of <u>18</u>
Greg Bixby						1.D. NUM 1437821	BER
CODES: If one of the following codes accurately descended by the compaign 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 com MTG meetings and OFC office expens PET petition circul PHO phone banks POL polling and si	munications I appearance es ating urvey researd very and mes	s h senger services	RAD radio a RFD return SAL campa TEL t.v. or TRC candid TRS staff/s TSF transfe VOT voter i	ibe the payment. airtime and production ed contributions aign workers' salaries cable airtime and prod date travel, lodging, an pouse travel, lodging, er between committee registration ation technology costs	duction costs and meals and meals s of the sam	e candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DES	SCRIPTION OF P	AYMENT		AMOUNT PAID
Willow Creek Schoolhouse Restoration Plymouth, CA 95669		CVC					480.00
WPY Inc. Houston, TX 77055		LIT					1975.50

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

**SUBTOTAL \$ 2455.50**