Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Statement covers period from01/17/2021 through02/13/2021	Date of election if applicable: (Month, Day, Year)	Received FEB 18 2021 ADMN/CITYMGR	CALIFORNIA 460 FORM Page1 of27 For Official Use Only
 State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee 	rimarily Formed Ballot Measure ommittee) Controlled) Sponsored (so Complete Part 6) rimarily Formed Candidate/ fficeholder Committee (so Complete Part 7)	2. Type of Statement: X Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 To	Speci Supplermination)	erly Statement al Odd-Year Report lemental Preelection ment - Attach Form 495
3. Committee information	DE AREA CODE/PHONE	Treasurer(s) NAME OF TREASURER Evette Bakke MAILING ADDRESS CITY NAME OF ASSISTANT TREASUR MAILING ADDRESS	STATE ZIP CO RER, IF ANY STATE ZIP CO	
OPTIONAL: FAX / E-MAIL ADDRESS I. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California Executed on	this statement and to the best of my knot that the foregoing is true and correct. By	OPTIONAL: FAX / E-MAIL ADDR	rein and in the attached schedul Treasurer ponent or Responsible Officer of Sponsor	
Date		Signature of Controlling Officeholder, Candidate, S	tate Measure Proponent	FPPC Form 460 (Jan/2016)

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

Officeholder or Candidate Controlled Committee		6.	Primarily Formed Ballo	t Measure	Committee	•	
NAME OF OFFICEHOLDER OR CANDIDATE		Ī	NAME OF BALLOT MEASURE				***************************************
Vong Mouanoutoua							
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUM	IBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIO	N		SUPPORT
City Council Member Local-City of Clovis							OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY	STATE ZIP		Identify the controlling offic	ceholder, can	didate, or st	ate measure	e proponent, if any
			NAME OF OFFICEHOLDER, CAND	DIDATE, OR PR	OPONENT		
Related Committees Not Included in this Stateme	ent: List any committees						
not included in this statement that are controlled by you or are contributions or make expenditures on behalf of your candidac	primarily formed to receive		OFFICE SOUGHT OR HELD			DISTRICT NO). IF ANY
COMMITTEE NAME I.D. N	NUMBER	0					
NAME OF TREASURER CON	TROLLED COMMITTEE?		Primarily Formed Cand				
	YES NO		officeholder(s) or candidate(s)	for which this	committee is	s primarily tol	mea.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)		1	NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP CODE	AREA CODE/PHONE	İ	NAME OF OFFICEHOLDER OR CA	ANDIDATE .	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME I.D. N	NUMBER		NAME OF OFFICEHOLDER OR CA	MDIDATE	OFFICE SOLI	GHT OR HELD	
			VAINE OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE 300	GHT OK HELD	SUPPORT OPPOSE
	TROLLED COMMITTEE?	ī	NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	YES NO						OPPOSE
511121718511250 (11611.6. Boxy	*	1					
CITY STATE ZIP CODE	AREA CODE/PHONE		Attacl	n continuatio	n sheets if i	necessary	
						•	

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

		SUMMARY PAGE
Statem	ent covers period	CALIFORNIA 160
from	01/17/2021	FORM 400
through _	02/13/2021	Page3 of27
		I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Vong Mouanoutoua for Clovis City Council 2021 1392949

Contributions Received		Column A TOTALTHIS PERIOD (FROMATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions Schedule A, Line 3	\$	54,645.00	\$	71,545.00	
2. Loans Received Schedule B, Line 3		0.00		0.00	1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	54,645.00	\$	71,545.00	20. Contributions Received \$ \$
4. Nonmonetary Contributions Schedule C, Line 3		0.00		0.00	21. Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	54,645.00	\$	71,545.00	Made \$ \$
Expenditures Made					Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$	42,133.55	\$	44,043.95	Candidates
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	42,133.55	\$	44,043.95	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3		616.70		616.70	Date of Election Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3		0.00		0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$	42,750.25	\$	44,660.65	\$
Current Cash Statement					/ \$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	125,284.80	То	calculate Column B. add	
13. Cash Receipts Column A, Line 3 above		54,645.00	am	nounts in Column A to the	
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00		rresponding amounts m Column B of your last	*Amounts in this section may be different from amounts reported in Column B.
15. Cash Payments Column A, Line 8 above		42,133.55		oort. Some amounts in lumn A may be negative	Topolisa iii osianiii o.
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	137,796.25	fig	ures that should be	
If this is a termination statement, Line 16 must be zero.			pe	otracted from previous riod amounts. If this is e first report being filed	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for	this calendar year, only try over the amounts	
Cash Equivalents and Outstanding Debts	0		fro an	m Lines 2, 7, and 9 (if y).	
18. Cash Equivalents See instructions on reverse	\$	0.00			
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	616.70			
		j	ı		FPPC Form 460 (Jan/201

FPPC Form 460 (Jan/2016)

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

Schedule A Monetary Contributions Received

3. Total monetary contributions received this period.

Amounts may be rounded

SCF		

Monetary	Contributions Received		whole dollars.	Statement coverage from01/17/20	ers period	CALIFOR FOR	RNIA 460
	ONS ON REVERSE			through02/13/20	021	Page	4 of <u>27</u>
NAME OF FILER						I.D. NUMBE	≣R
Vong Mouanou	utoua for Clovis City Council 2021					1392949	
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 D CALENDAR YEA (JAN. 1 - DEC. S	AR	PER ELECTION TO DATE (IF REQUIRED)
01/18/2021	Jennifer Brietigam	□IND □COM ⊠OTH □PTY □SCC	Manager Fresno County Office of Education	150.00	15	50.00	
01/18/2021	Elizabeth Mouavangsou	IND COM OTH PTY SCC	Retired	300.00	3(00.00	
01/19/2021	Jay Virk	⊠IND □COM □OTH □PTY □SCC	Owner No Surrender	1,000.00	1,00	00.00	
01/20/2021	Fresno Precision Plastics, Inc	□IND □COM 図OTH □PTY □SCC		1,000.00	1,00	00.00	
01/20/2021	Steven G. Spencer	IND COM OTH PTY SCC	Owner Spencer Enterprises	2,500.00	2,50	00.00	
			SUBTOTAL\$	4,950.00		50,00	
Amount re (Include al	A Summary ceived this period – itemized monetary contributions. Schedule A subtotals.) ceived this period – unitemized monetary contributions			53,800.00 845.00	IND – I COM – OTH –		Committee n PTY or SCC) ., business entity)

FPPC Form 460 (Jan/2016)

54,645.00

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

NAME OF FILER	Page 5 of 27 I.D. NUMBER 1392949
Yong Mouanoutoua for Clovis City Council 2021	1392949
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CONTRIBUTOR CODE * CONTRIBUTOR CODE * IF AN INDIVIDUAL, ENTER AMOUNT RECEIVED THIS OF BUSINESS) PERIOD CUMULATIVE TO DO CALENDAR YEAR OF BUSINESS)	AR TO DATE
County of Fresho OTH PTY SCC	0.00
□ COM □ COM MJ Hall and Company □ PTY □ SCC	0.00
01/22/2021 AVG Inc The Medicine Shoppe #285	0.00
01/22/2021 JPB Group Inc DBA The Firing Line IND 1,000.00 1,000 COM TOTH PTY SCC	0.00
01/22/2021 Wilson Homes, Inc	0.00
SUBTOTAL\$ 4,700.00	

*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

Amounts may be rounded

SCHEDULE A (CONT.)

Monetary	Contributions Received	Amounts may to whole o		Statement cover from $\frac{01/17}{}$ through $\frac{02/13}{}$	2021	FO	ORNIA ORM	400
NAME OF FILER						I.D. NUM	IBER	
ong Mouanou	toua for Clovis City Council 2021					139294	19	
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 YE (JAN. 1 - DEC.	AR	TO	LECTION DATE QUIRED)
01/22/2021	Faico Xiong	XIND COM OTH PTY SCC	Retired	100.00	10	00.00		
01/25/2021	Bonadelle Homes, Inc	☐IND ☐COM ☑OTH ☐PTY ☐SCC		5,000.00	5,00	00.00		
01/25/2021	Ladonna Snow	XIND COM OTH PTY	President Snowflake Designs	100.00	10	00.00		
01/25/2021	Lee Thao	XIND COM OTH PTY	Pharmacist Costco	250.00		50.00		*
01/25/2021	Her Xiong	XIND COM OTH PTY SCC	Information Technology State of California	100.00	10	00.00		
			SUBTOTALS	5,550.00				

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SCHEDULE A (CONT.)

vionetary	Contributions Received	to whole o		from01/17/		CALII FO	orm 460
				through02/13/	2021	Page_	
IAME OF FILER						I.D. NUI	MBER
ong Mouanout	oua for Clovis City Council 2021					13929	49
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 . 31)	PER ELECTION TO DATE (IF REQUIRED)
01/26/2021	Sal Ceballos	XIND COM OTH PTY SCC	Retired None	100.00		00.00	
01/26/2021	Jonathan Holt	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Financial Planner Jonathan Holt	150.00	1	50.00	
01/26/2021	Innovative Intergrated Health Inc. FRESNO PACE	□IND □COM ☑OTH □PTY □SCC		1,000.00	1,0	00.00	
	K&M Casinos Inc	□IND □COM 図OTH □PTY □SCC		3,000.00		00.00	
01/26/2021	Chingfu Mouanoutoua	IND COM OTH PTY SCC	Manager Social Security Administration	500.00	5	00.00	-
			SUBTOTAL	\$ 4,750.00			

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SCHEDULE A (CONT.)

Monetary Contributions Received	Amounts may to whole o		Statement cove	ers period C	ALIFORNIA 460
			through 02/13/	2021 P	age8 of27
AME OF FILER				I.	D. NUMBER
ong Mouanoutoua for Clovis City Council 2021				1	392949
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTI	RIBUTOR CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEAI (JAN. 1 - DEC. 31	TO DATE) (IF REQUIRED)
01/26/2021 Fred Vanderhoof	⊠IND □COM □OTH □PTY □SCC	Retired None	100.00	100	
01/26/2021 Sheila Yingwangkay	⊠IND □COM □OTH □PTY □SCC	Graduate Assistant State of California	200.00	200	.00
01/27/2021 John R Lawson Rock & Oil, Inc	□IND □COM ☑OTH □PTY □SCC		300.00	300	.00
01/27/2021 Leng Moua	XIND COM OTH PTY SCC	Retired	250.00	250	,
01/27/2021 Richard Moua	XIND COM OTH PTY SCC	Retired None	100.00	100	.00
		SUBTOTALS	950.00		

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PTY - Political Party

SCHEDULE A (CONT.)

Monetary	Contributions Received	Amounts may to whole o		Statement cove	-	CALIF	ORNIA 460
				through 02/13/	2021	Page_	9 of <u>27</u>
NAME OF FILER						I.D. NUI	MBER
ong Mouanout	oua for Clovis City Council 2021					13929	49
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, 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)
01/27/2021	Ghia Xiong	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Psychologist The Fresno Center	300.00		00.00	
01/27/2021	Yang Mua Yang	⊠IND □COM □OTH □PTY □SCC	Poker Dealer 500 Club	200.00	2	00.00	
01/28/2021	Yong Chue Moua	XIND COM OTH PTY	Retired None	250.00	2	50.00	
01/28/2021	Changsue Mouanoutaoua	XIND COM OTH PTY	Manufactuing Production None	140.00	. 1	40.00	
01/29/2021	Clovis Herndon Center II, LLC Payner Realty & Investments Inc	□IND □COM ☑OTH □PTY □SCC		3,000.00	3,0	00.00	
			SUBTOTALS	3,890.00			

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PTY – Political Party SCC – Small Contributor Committee

SCHEDULE A (CON

Vionetary	Contributions Received	Amounts may to whole o		Statement covers period from01/17/2021 through02/13/2021		CALIFORNIA 46 FORM of 27	
				through	2021	I.D. NUN	
IAME OF FILER						I.D. NUN	IBER
ong Mouanout	coua for Clovis City Council 2021					13929	19
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 . 31)	PER ELECTION TO DATE (IF REQUIRED)
01/29/2021	Deborah Klein	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Foundation VP Communicty Medical Centers		250.00		
01/29/2021	Kaonou Lo	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Homemaker Self	500.00	5	00.00	
01/29/2021	Tularr Moua	XIND COM OTH PTY	Social Insurance Administrator Social Security Administration	250.00	2	50.00	
01/29/2021	Sante Health System, Inc	□IND □COM 図OTH □PTY □SCC		5,000.00	5,0	00.00	
01/29/2021	Chengkou Siong	XIND COM OTH PTY SCC	Business Siong Strawberry Farm	200.00	2	00.00	
			SUBTOTALS	6,200.00			

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PTY – Political Party SCC – Small Contributor Committee

Amounts may be rounded

SCHEDULE A (CONT.)

CALIFORNIA 4 00

Statement covers period

		to whole	dollars.	from01/17/	2021	FORM 460	
				through 02/13/	2021	Page _	11 of27
NAME OF FILER						I.D. NUN	MBER
Jong Mouanout	coua for Clovis City Council 2021					139294	19
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)
01/29/2021	Woodside 06N, LP	□IND □COM ⊠OTH □PTY □SCC		1,500.00	1,5	00.00	
01/29/2021	Neng Yang	⊠IND □COM □OTH □PTY □SCC	Retired	100.00	1	00.00	
01/30/2021	Matilda Soria	XIND COM OTH PTY	Director Fresno County Superintendent of Schools	250.00	2	50.00	,
01/31/2021	Ben Meine	IND COM OTH PTY SCC	Insurance Meine Group, Inc.	1,000.00	1,0	00.00	
01/31/2021	Jose Nunez	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Farmer NC AG INC	1,500.00	1,5	00.00	t.
			SUBTOTAL\$	4,350.00			

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PTY - Political Party

SCHEDULE A (CONT.)

Vlonetary	Contributions Received	Amounts may to whole o		Statement cove from01/17/ through02/13/	2021		ORNIA 460 12 of 27
AME OF FILER	<u> </u>		-			I.D. NUM	BER
ong Mouanout	toua for Clovis City Council 2021					139294	9
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 YE (JAN. 1 - DEC.	AR 31)	PER ELECTION TO DATE (IF REQUIRED)
02/01/2021	KIa Her	XIND COM OTH PTY SCC	Retired	100.00		00.00	
02/01/2021	Paul Hinkle		Realtor Kellner Properties	100.00	10	00.00	
02/01/2021	Wa Molia	IND COM OTH PTY SCC	Retired	100.00	1(00.00	
02/01/2021	Ka Moua		None None	100.00		00.00	•1
02/01/2021	Mee M. Vang		Retired None	100.00	1	00.00	
			SUBTOTAL	\$ 500.00			

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SCHEDULE A (CONT.)

Statement covers period CALIFORNIA 160

				from01/17/	2021	FURIVI		
				through 02/13/	2021 Pa	age13 of27		
NAME OF FILER					I.I	D. NUMBER		
Vong Mouanout	oua for Clovis City Council 2021				1	392949		
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 DA CALENDAR YEAR (JAN. 1 - DEC. 31	TO DATE		
02/01/2021	Mais Yang	⊠IND □COM □OTH □PTY □SCC	Retired	100.00	100	00		
02/02/2021	African American Leaders for Economic Development	□IND □COM ☑OTH □PTY □SCC		500.00	500	00		
02/02/2021	Howard Cha	IND COM OTH PTY SCC	Retired	100.00	100	00		
02/02/2021	Michael Cunningham	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired None	500.00	. 500			
02/02/2021	Kuljeet Gill	⊠IND □COM □OTH □PTY □SCC	Retired	160.00	160	00		
			SUBTOTALS	1,360.00				

Amounts may be rounded

to whole dollars.

*Contributor Codes

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(other than PTY or SCC)

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PTY - Political Party

Amounts may be rounded

SCHEDULE A (CONT.)

Statement covers period

-	to whole dollars.				2021	FORM 460		
				through 02/13/	2021	Page _	14 of27	
NAME OF FILER						I.D. NUI	MBER	
Vong Mouanout	oua for Clovis City Council 2021					13929	49	
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 YI (JAN. 1 - DEC.	EAR . 31)	PER ELECTION TO DATE (IF REQUIRED)	
02/02/2021	Chue Fue Herr	XIND COM OTH PTY	Retired	150.00	1.	50.00		
02/02/2021	June Lee	XIND COM OTH PTY	Teacher Fresno Unified	100.00	1	00.00		
02/02/2021	James Linenbach	IND COM OTH PTY SCC	Owner Linenbach Auto Parts Inc.	100.00	1	00.00		
02/02/2021	· ,	XIND COM OTH PTY	Retired .	200.00	2	00.00	is .	
02/02/2021	Bla Mouanoutoua		COO Greater Fresno Health Organization	500.00		00.00		
			SUBTOTAL	1,050.00				

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PTY - Political Party

Amounts may	be rounded	
An sudanda.		

SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may be rounded to whole dollars.		Statement covers period from		FORM 460		
				through02/13/	2021	Page _	<u>15</u> of	27
NAME OF FILER						I.D. NUN	MBER	
ong Mouanout	oua for Clovis City Council 2021					13929	19	
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 . 31)	PER ELE TO D (IF REQ	ATE
02/02/2021	Mouatou Mouanoutoua	XIND COM OTH PTY	CCFMG Physician	500.00		00.00		
02/02/2021	Torraine Overton	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	100.00	1	00.00		
02/02/2021	Maynao Overton	⊠IND □COM □OTH □PTY □SCC	Geologist Provost & Pritchard	250.00	2	50.00		
02/02/2021	Poochigian for Assessor-Recorder 2022 (ID# 1393358)	□IND ☑COM □OTH □PTY □SCC		500.00	5	00.00		
02/02/2021	Paul Soares	☑IND □COM □OTH □PTY □SCC	Executive Camarena Health	200.00	2	200.00		
			SUBTOTALS	1,550.00				

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COM - Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

Amounts may be rounded Statement covers period CALIFORNIA CONT.)

,		to whole o	dollars.	from01/17/			ORM 460
IAME OF FILER				unougn		I.D. NU	
	toua for Clovis City Council 2021					13929	49
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)
02/02/2021	Stan Oken Living Trust	XIND COM OTH PTY SCC	Retired	100.00	.1	00.00	
02/02/2021	The Patrick Vincent Ricchiuti Family Trust	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner PR Farms	500.00	5	00.00	
02/02/2021	Macy Xiong	XIND COM OTH PTY SCC	Owner Mx Produce	200.00	2	00.00	
02/02/2021	Pai Yang .	IND COM OTH PTY SCC	Homemaker None	. 100.00		00.00	
02/03/2021	Margaret Corasick	XIND COM OTH PTY	Retired	100.00	1	00.00	,
			SUBTOTALS	\$ 1,000.00			

*Contributor Codes

IND - Individual

COM - Recipient Committee

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

PTY - Political Party

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA 460

Statement covers period

				from01/17/	2021		JRIVI FOO
				through02/13/	2021	Page_	17 of27
NAME OF FILER						I.D. NUI	MBER
Vong Mouanout	oua for Clovis City Council 2021					13929	49
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 YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
02/03/2021	Harbour & Associates Engineers, Inc.	□IND □COM ⊠OTH □PTY □SCC		1,000.00	1,000.00		
02/03/2021	Harmit Juneja	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Principal Clovis Global Academy	200.00	200.00		
02/03/2021	Doug Larsen	XIND COM OTH PTY	Attorney Fishman, Larsen & Callister	100.00	1	00.00	
02/03/2021	Buddiga Praveen	XIND COM OTH PTY	Owner Family Allergy Asthma Clinic	2,000.00	2,0	00.00	
02/03/2021	Cher Vang	☑IND □COM □OTH □PTY □SCC	Retired None	200.00	2	00.00	
		3,500.00					

*Contributor Codes

IND - Individual

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(other than PTY or SCC)

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

PTY - Political Party

SCHEDULE A (CONT.)

Monetary Contributions Received		to whole dollars.		Statement covers period from01/17/2021		FORM 460		
				through 02/13/	2021	Page	18 of27	
NAME OF FILER			-			I.D. NUM	BER	
Vong Mouanou	toua for Clovis City Council 2021					139294	.9	
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 YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
02/03/2021	Ben Vue	XIND COM OTH PTY	Financial Services Self	100.00	10	00.00		
02/04/2021	Harlan Ranch Company	□IND □COM ☑OTH □PTY □SCC		200.00	21	00.00		
02/04/2021	Deborah Riordan	XIND COM OTH PTY	Business Manager Nutri Systems Inc	200.00	2	00.00		
02/06/2021	Alltime Financial Services Inc.	□IND □COM 図OTH □PTY □SCC		. 100.00		00.00		
02/06/2021	Bakeman Water Company	□IND □COM ☑OTH □PTY □SCC		3,000.00	3,0	00.00	,	
			SUBTOTAL\$	3,600.00				

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

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

PTY - Political Party

Schedule A (Continuation Sheet) SCHEDULE A (CONT.) **Monetary Contributions Received** Amounts may be rounded Statement covers period CALIFORNIA to whole dollars. FORM 01/17/2021 from_ 02/13/2021 through_ Page _____19 of ___27___ NAME OF FILER I.D. NUMBER Vong Mouanoutoua for Clouis City Coungil 2021 1202040

Volig Modalioutoda Tol Clovis City Codnell 2021									
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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)			
02/06/2021	Michael Der Manouel	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	President Der Manouel Insurance	1,000.00	1,000.00				
02/06/2021	Nao Tou Moua	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	100.00	100.00				
02/06/2021	Harpartap Singh	IND COM OTH PTY SCC	Retired	200.00	200.00				
02/06/2021	Sohinder Singh	⊠IND □COM □OTH □PTY □SCC	Retired .	500.00	500.00	ŀ			
02/07/2021	Melanie Vang	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Program Manager The Fresno Center	200.00	200.00				
	SUBTOTAL\$ 2,000.00								

*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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Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA 460

Statement covers period

		from01/17/	2021	FORM TOO			
				through 02/13/	2021	Page	of
NAME OF FILER						I.D. NUM	1BER
ong Mouanout	oua for Clovis City Council 2021				1392949		
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)
02/07/2021	Lincoln Yee	XIND COM OTH PTY	Owner Asian Food Solutions, Inc	500.00	.5	00.00	
02/09/2021	De Young Properties Team 5	□IND □COM ☑OTH □PTY □SCC		1,000.00	1,000.00		
02/09/2021	Mid Valley Disposal	□IND □COM ☑OTH □PTY □SCC		2,000.00	2,0	00.00	,
	Tu Mao Cha	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired None	100.00	1	00.00	·
02/12/2021	Cher Lee		Collector City of Fresno	100.00	1	00.00	
		3,700.00					

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

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

PTY - Political Party

Schedule A (Continuation Sheet) SCHEDULE A (CONT.) **Monetary Contributions Received** Amounts may be rounded Statement covers period CALIFORNIA to whole dollars. **FORM** 01/17/2021 from_ 02/13/2021 Page ____21 of ___27 through_ NAME OF FILER I.D. NUMBER Vong Mouanoutoua for Clovis City Council 2021 1392949

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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)			
02/12/2021	Pakao Lee	XIND COM OTH PTY	Courier On Track	100.00	100.00				
02/12/2021	Ying Lee	⊠IND □COM □OTH □PTY □SCC	Officer State of California	100.00	100.00				
		□IND □COM □OTH □PTY □SCC			i i				
	•	□IND □COM □OTH □PTY □SCC							
		□IND □COM □OTH □PTY □SCC		*					
SUBTOTAL\$ 200.00									

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

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

PTY - Political Party

Schedule E Payments Made SEE INSTRUCTIONS ON REVERSE	Ámounts may b to whole do		ed.	Statem from	ent covers period 01/17/2021 02/13/2021	CALIFORN FORM	4:00
NAME OF FILER						I.D. NUMBER	
Vong Mouanoutoua for Clovis City Council 2021						1392949	
CODES: If one of the following codes accurately describ 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 common meetings and office expensions petition circular phone banks polling and suppostage, deliverselves.	nunication appearan ses ating urvey rese very and r	s ices	RAD radio RFD return SAL camp TEL t.v. o TRC cand TRS staff/ TSF trans VOT voter	be the payment. airtime and production ned contributions reaign workers' salaries r cable airtime and prod date travel, lodging, and spouse travel, lodging, a fer between committees registration nation technology costs	uction costs I meals and meals s of the same ca	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DI	ESCRIPTION OF PA	AYMENT		AMOUNT PAID
Printasaurus		CMP					6,343.53
eFundraising		OFC	Credit card pro	cessing fee	······································		52.75
FM3 Research		POL					10,000.00
* Payments that are contributions or independent expenditures	must also be summa	rized on	Schedule D.		SU	BTOTAL\$	16,396.28

Schedule E Summary

Schedule E
(Continuation Sheet)
Payments Made

SCHEDULE E (CONT.)

Statement covers period

(Continuation Sheet) Payments Made	Amounts may be to whole do			Statement covers period from 01/17/2021	california 460 form
SEE INSTRUCTIONS ON REVERSE				through 02/13/2021	Page 23 of 27
					I.D. NUMBER
Vong Mouanoutoua for Clovis City Council 2021	worth the second second second	About the resolvering high as			1392949
codes: If one of the following codes accurately described campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense IT campaign literature and mailings	MBR member com MTG meetings and OFC office expen PET petition circul PHO phone banks POL polling and s POS postage, deli	munications d appearance ses lating survey resear very and me	s	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaried t.v. or cable airtime and production TRC candidate travel, lodging, a staff/spouse travel, lodging.	on costs roduction costs and meals g, and meals ees of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DE	SCRIPTION OF PAYMENT	AMOUNT PAID
ostmaster - Clovis		POS			2,760.89
he Scozzari Company	v	OFC			204.39
he Scozzari Company		CNS .			2,500.00
MJ		RAD			10,025.75
rofessional Print and Mail		LIT		8	2,760.89
Payments that are contributions or independent expenditures must als	so be summarized on \$	Schedule D.			UBTOTAL \$ 18.251.92

Schedule E

S	CH	1F	DU	LE	E	(C	NO	1T.)	

Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA 460
Payments Made	to whole dollars.	from01/17/2021	FORM 400
EE INSTRUCTIONS ON REVERSE	*	through 02/13/2021	Page24 of27
AME OF FILER			I.D. NUMBER
ong Mouanoutoua for Clovis City Council 2021			1392949
		en a la company de la comp La company de la company d	

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees phone banks TRC candidate travel, lodging, and meals FND fundraising events polling and survey research staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* transfer between committees of the same candidate/sponsor postage, delivery and messenger services IND TSF legal defense LEG professional services (legal, accounting) VOT voter registration campaign literature and mailings print ads WEB information technology costs (internet, e-mail) NAME AND ADDRESS OF PAYEE CODE OR **DESCRIPTION OF PAYMENT** AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) eFundraising Credit card processing fee OFC 241.00 eFundraising OFC Credit Card Processing Fee 18.88

eFundraising OFC Credit card processing fee 19.03 eFundraising OFC Credit card processing 68.00 eFundraising OFC Credit card processing fee 14.00

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

Schedule	E	
(Continua	tion	Sheet)
Payments	Mac	le

SCI							

Statement covers period

(Continuation Sheet) Payments Made	Amounts may b to whole do			Statement covers per from01/17/2021	CALIFO FOR	RNIA 460
SEE INSTRUCTIONS ON REVERSE				through 02/13/2021	raye	25 of 27
Vong Mouanoutoua for Clovis City Council 2021					I.D. NUMB	
CODES: If one of the following codes accurately descent campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member com MTG meetings and OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, deli	munications d appearance ses lating urvey resear very and me	es	RAD radio airtime and p RFD returned contributing SAL campaign workers TEL t.v. or cable airtime trace candidate travel, lo staff/spouse travel,	ayment. production costs ons ' salaries e and production costs odging, and meals , lodging, and meals committees of the san	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DES	CRIPTION OF PAYMENT		AMOUNT PAID
Phe Scozzari Company		OFC	Credit card proce	ssing		2,500.00
		ll .	,			
aizy & Associates .		PRO				622.24
Fundraising		OFC	Credit card proce	ssing fee		79.13
alk Radio 1550 KXEX		RAD				1,056.00
Payments that are contributions or independent expenditures must	t also be summarized on S	Schedule D.			SUBTOTAL \$	4,369.30

Schedule	E	
(Continua	tion	Sheet)
Payments	Mac	de

(Continuation Sheet) Payments Made	Amounts may be to whole do			Statement covers period from01/17/2021			california 460 form		
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				through 02/13/	2021	Page	26 of 27		
Vong Mouanoutoua for Clovis City Council 2021						1392949			
CODES: If one of the following codes accurately describ CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* civic donations FIL candidate filing/ballot fees fundraising events ND independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	you may enter the code. Otherwise, describe the payment. munications Indications Indicati								
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE (DR DE	SCRIPTION OF PAYMENT	,		AMOUNT PAID		
Professional Print & Mail		PRT					1,869.84		
Daizy & Associates		PRO		х.			790.65		
eFundraising		OFC	Credit card proc	essing			94.65		
				×					
Payments that are contributions or independent expenditures must al	so be summarized on	Schedule D.			SU	BTOTAL \$	2,755.14		

Schedule F							
Accrued	Expenses	(Unpaid	Bills)				

Amounts may be rounded to whole dollars.

Statement covers period **CALIFORNIA FORM** 01/17/2021 from through __02/13/2021 Page 27 of 27 I.D. NUMBER

1392949

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vong Mouanoutoua for Clovis City Council 2021

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

campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants meetings and appearances **RFD** returned contributions contribution (explain nonmonetary)* office expenses SAL campaign workers' salaries

CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees phone banks TRC candidate travel, lodging, and meals fundraising events POL polling and survey research

TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* IND postage, delivery and messenger services transfer between committees of the same candidate/sponsor

legal defense professional services (legal, accounting) VOT voter registration LIT campaign literature and mailings PRT

print ads 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
Capital One Credit Card	OFC	0.00	616.70	0.00	616.70
*					
* Payments that are contributions or independent expenditures must also be	SUBTOTAL S	8 0 00	616.709	2000	616.70

summarized on Schedule D.

SUBTOTALS \$

0.00\$

616.70\$

0.00\$

616.70

Schedule F Summary

- 1. Total accrued expenses incurred this period. (Include all Schedule F. Column (b) subtotals for
- 2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on
- 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 \$ 616.70