Recipieent Committee
Campaign Statement
Cover Page

Statement covers period
from 9/25/22
through 10/22/22

Date of election if applicable:
(Month, Day, Year)
11/8/22

Woodsie Tawn Hall

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

2. Type of Statement:
   - □ Pre-election Statement
   - □ Semi-annual Statement
   - □ Termination Statement
     (Also file a Form 410 Termination)
   - □ Amendment (Explain below)

3. Committee Information
   I.D. NUMBER 1452688
   COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
   Brian Donkorosi For Town Council 2022
   STREET ADDRESS (NO P.O. BOX): [Redacted]
   CITY Woodsie STATE CA ZIP CODE 94062 AREA CODE/PHONE
   MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
   CITY [Redacted] STATE AREA CODE/PHONE
   OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification
   I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
   Executed on 10/27/22
   By [Signature]
   Signature of Treasurer or Assistant Treasurer
   Executed on 10/27/22
   By [Signature]
   Signature of Controlling Officerholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor
5. Officeholder or Candidate Controlled Committee

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>BRIAN DOMSKOWSKI</td>
<td></td>
</tr>
<tr>
<td>OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)</td>
<td>WOODSIDE TOWN COUNCIL DISTRICT 2</td>
</tr>
<tr>
<td>RESIDENTIAL/BUSINESS ADDRESS (NO AND STREET)</td>
<td></td>
</tr>
<tr>
<td>CITY</td>
<td>WOODSIDE CA 94062</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
<th></th>
</tr>
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</table>

6. Primarily Formed Ballot Measure Committee

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

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

| NAME OF OFFICEHOLDER, CANDIDATE, OR PROONENT |  |
| OFFICE SOUGHT OR HELD |  |
| DISTRICT NO. IF ANY |  |

7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

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<th>SUPPORT □ OPPOSE □</th>
</tr>
</thead>
</table>

Attach continuation sheets if necessary
### Contributions Received

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A (Total for This Period)</th>
<th>Column B (Calendar Year Total to Date)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monetary Contributions</td>
<td>$3000.00</td>
<td>$7900.00</td>
</tr>
<tr>
<td>Loans Received</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td><strong>SUBTOTAL CASH CONTRIBUTIONS</strong></td>
<td>$3000.00</td>
<td>$7900.00</td>
</tr>
<tr>
<td>Nonmonetary Contributions</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td><strong>TOTAL CONTRIBUTIONS RECEIVED</strong></td>
<td>$3000.00</td>
<td>$7900.00</td>
</tr>
</tbody>
</table>

### Expenditures Made

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payments Made</td>
<td>$1697.72</td>
<td>$5,341.99</td>
</tr>
<tr>
<td>Loans Made</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td><strong>SUBTOTAL CASH PAYMENTS</strong></td>
<td>$1697.72</td>
<td>$5,341.99</td>
</tr>
<tr>
<td>Accrued Expenses (Unpaid Bills)</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Nonmonetary Adjustment</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td><strong>TOTAL EXPENDITURES MADE</strong></td>
<td>$1697.72</td>
<td>$5,341.99</td>
</tr>
</tbody>
</table>

### Current Cash Statement

- Beginning Cash Balance: $12,555.73
- Cash Receipts: $3,000.00
- Miscellaneous Increases to Cash: $1,697.72
- Cash Payments: $2,558.01
- **ENDING CASH BALANCE**: $12,555.73

### Cash Equivalents and Outstanding Debts

- Cash Equivalents: $0
- Outstanding Debts: $0

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To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).
### Schedule A
Monetary Contributions Received

**NAME OF FILER**
Brian Dombkoski

**DATE RECEIVED**
9/27/22

**FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR**

**AMOUNT RECEIVED THIS PERIOD**

**CUMULATIVE TO DATE CALENDAR YEAR**
(JAN. 1 - DEC. 31)

**PER ELECTION TO DATE (IF REQUIRED)**

<table>
<thead>
<tr>
<th>IND</th>
<th>COM</th>
<th>OTH</th>
<th>PTY</th>
<th>SCC</th>
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</thead>
<tbody>
<tr>
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</table>

**SUBTOTAL $**

3,000.

**Schedule A Summary**

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) ................................................................. $ 3,000.

2. Amount received this period – unitemized monetary contributions of less than $100 ......................... $ 0

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ...................... TOTAL $ 3,000.
# Schedule E
## Payments Made

**NAME OF FILER:** Brian Domkowski for Town Council 2022

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

- CMP: campaign paraphernalia/misc.
- CNS: campaign consultants
- CTB: contribution (explain nonmonetary)*
- CVC: civic donations
- FIL: candidate filing/ballot fees
- FND: fundraising events
- IND: independent expenditure supporting/opposing others (explain)*
- LEG: legal defense
- LIT: campaign literature and mailings
- MBR: member communications
- MTG: meetings and appearances
- OFC: office expenses
- PET: petition circulating
- PHO: phone banks
- POL: polling and survey research
- POS: postage, delivery and messenger services
- PRO: professional services (legal, accounting)
- PRT: print ads
- RAD: radio airtime and production costs
- RDF: 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)

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Embarcadero Media</td>
<td>PRT</td>
<td>Advertisement Thinking - Sponsors Endorsers</td>
<td>$965.92</td>
</tr>
<tr>
<td>Minuteman Press</td>
<td>LIT</td>
<td>Direct Mail Piece to District 2 Voters</td>
<td>$518.99</td>
</tr>
<tr>
<td>USPS.com</td>
<td>POS</td>
<td>Postage for Direct Mail Piece</td>
<td>$212.81</td>
</tr>
</tbody>
</table>

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

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.) .......................................................... $1,697.72
2. Unitemized payments made this period of under $100 ......................................................................................... $0
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)................................. $0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ........... TOTAL $1,697.72

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2016/12/16

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