

Major Donor and Independent Expenditure Committee Campaign Statement

(Government Code Sections 84200-84216.5)

Type or print in ink.

Amendment

Statement covers period	Date of election if applicable: (Month, Day, Year)
from <u>01/01/2019</u>	
through <u>06/30/2019</u>	

Date Stamp	CALIFORNIA FORM 461
	1/4
	For Official Use Only

SEE INSTRUCTIONS ON REVERSE

1. Name and Address Of Filer

NAME OF FILER
(Include name(s) of all affiliated entities whose contributions are included in this statement.)
Susan Pritzker

MAILING ADDRESS (NO. AND STREET)

CITY STATE ZIP CODE

San Francisco CA 94129

RESPONSIBLE OFFICER (If filer is other than an individual)
Susan Pritzker

AREA CODE/DAYTIME PHONE

2. Nature and Interests of Filer (Complete each applicable section.)

A FILER THAT IS AN INDIVIDUAL MUST LIST THE NAME, ADDRESS, AND BUSINESS INTERESTS OF EMPLOYER OR, IF SELF-EMPLOYED, THE NAME, ADDRESS, AND NATURE OF THE BUSINESS

NAME OF EMPLOYER/BUSINESS BUSINESS INTERESTS

Tao Capital Partners LLC Investments

ADDRESS OF EMPLOYER/BUSINESS

San Francisco CA 94129

A FILER THAT IS A BUSINESS ENTITY MUST DESCRIBE THE BUSINESS ACTIVITY IN WHICH IT IS ENGAGED

A FILER THAT IS AN ASSOCIATION MUST PROVIDE A SPECIFIC DESCRIPTION OF ITS INTERESTS

A FILER THAT IS NOT AN INDIVIDUAL, BUSINESS ENTITY, OR ASSOCIATION MUST DESCRIBE THE COMMON ECONOMIC INTEREST OF THE GROUP OR ENTITY

3. Summary

(Amounts may be rounded to whole dollars.)

- Expenditures and contributions (including loans) of \$100 or more made this period. (Part 5.) \$ 70700.00
- Unitemized expenditures and contributions (including loans) under \$100 made this period..... \$ 0.00
- Total expenditures and contributions made this period. (Add Lines 1 + 2.) **SUBTOTAL** \$ 70700.00
- Total expenditures and contributions made from prior statement. (Enter amount from Line 5 of last statement filed. If this is the first statement for the calendar year, enter zero.) \$ 0.00
- Total expenditures and contributions (including loans) made since January 1 of the current calendar year. (Add Lines 3 + 4.).....**TOTAL** \$ 70700.00

4. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information contained herein 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 07/19/2019 By Susan Pritzker

DATE SIGNATURE OF INDIVIDUAL DONOR OR RESPONSIBLE OFFICER IF OTHER THAN AN INDIVIDUAL

Major Donor and Independent Expenditure Committee Campaign Statement

INDEPENDENT EXPENDITURE COMMITTEE AND MAJOR DONOR COMMITTEE STATEMENT

Type or print in ink. Amounts may be rounded to whole dollars.

Statement covers period from <u>01/01/2019</u>	CALIFORNIA FORM 461
through <u>06/30/2019</u>	
2/4	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Susan Pritzker

5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made

(If more space is needed, use additional copies of this page for continuation sheets.)

DATE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATIVE TO THIS CANDIDATE, MEASURE, OR COMMITTEE
01/30/2019	Boudin for District Attorney 2019 Novato CA 94949 ID: 1415226 Reference No:	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Chesa Boudin District Attorney Other -- City & County of San Francisco City & County of San Francisco NO: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	500.00	Calendar Year \$ <u>500.00</u> Other \$ _____
03/15/2019	Govern For California Courage Committee San Rafael CA 94901 ID: Reference No: S	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Made through int - ermediary Govern for California Network Committe - e	Govern For California Courage Committee NO: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	7800.00	Calendar Year \$ <u>7800.00</u> Other \$ _____
03/15/2019	Govern for California Courage Committee - East Bay Chapter San Rafael CA 94901 ID: Reference No: S	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Made through int - ermediary Govern for California Network Committe - e	Govern for California Courage Committee - East Bay Chapter NO: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	7800.00	Calendar Year \$ <u>7800.00</u> Other \$ _____
03/15/2019	Govern for California Courage Committee - Future Generations Chapter San Rafael CA 94901 ID: Reference No: S	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Made through int - ermediary Govern for California Network Committe - e	Govern for California Courage Committee - Future Generations Chapter NO: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	7800.00	Calendar Year \$ <u>7800.00</u> Other \$ _____
SUBTOTAL \$						

Major Donor and Independent Expenditure Committee Campaign Statement

INDEPENDENT EXPENDITURE COMMITTEE AND MAJOR DONOR COMMITTEE STATEMENT

Type or print in ink. Amounts may be rounded to whole dollars.

Statement covers period from <u>01/01/2019</u>	CALIFORNIA FORM 461
through <u>06/30/2019</u>	
3/4	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Susan Pritzker

5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made

(If more space is needed, use additional copies of this page for continuation sheets.)

DATE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATIVE TO THIS CANDIDATE, MEASURE, OR COMMITTEE
03/15/2019	Govern for California Courage Committee - Hollywood San Rafael CA 94901 ID: Reference No: S	<input checked="" type="checkbox"/> Chapter Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Made through intermediary Govern for California Network Committee - e	Govern for California Courage Committee NO: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	7800.00	Calendar Year \$ <u>7800.00</u> Other \$ _____
03/15/2019	Govern for California Courage Committee - Los Angeles San Rafael CA 94901 ID: Reference No: S	<input checked="" type="checkbox"/> Chapter Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Made through intermediary Govern for California Network Committee - e	Govern for California Courage Committee NO: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	7800.00	Calendar Year \$ <u>7800.00</u> Other \$ _____
03/15/2019	Govern for California Courage Committee - Palo Alto San Rafael CA 94901 ID: Reference No: S	<input checked="" type="checkbox"/> Chapter Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Made through intermediary Govern for California Network Committee - e	Govern for California Courage Committee NO: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	7800.00	Calendar Year \$ <u>7800.00</u> Other \$ _____
03/15/2019	Govern for California Courage Committee - San Francisco San Rafael CA 94901 ID: Reference No: S	<input checked="" type="checkbox"/> Chapter Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Made through intermediary Govern for California Network Committee - e	Govern for California Courage Committee NO: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	7800.00	Calendar Year \$ <u>7800.00</u> Other \$ _____
SUBTOTAL \$						

Major Donor and Independent Expenditure Committee Campaign Statement

INDEPENDENT EXPENDITURE COMMITTEE AND MAJOR DONOR COMMITTEE STATEMENT

Type or print in ink. Amounts may be rounded to whole dollars.

Statement covers period from <u>01/01/2019</u>	CALIFORNIA FORM 461
through <u>06/30/2019</u>	
4/4	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Susan Pritzker

5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made

(If more space is needed, use additional copies of this page for continuation sheets.)

DATE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATIVE TO THIS CANDIDATE, MEASURE, OR COMMITTEE
03/15/2019	Govern for California Courage Committee - San Jose San Rafael CA 94901 ID: Reference No: S	<input checked="" type="checkbox"/> Chapter Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Made through intermediary Govern for California Network Committee	Govern for California Courage Committee NO: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	7800.00	Calendar Year \$ <u>7800.00</u> Other \$ _____
03/15/2019	Govern for California Courage Committee - Santa Clara San Rafael CA 94901 ID: Reference No: S	<input checked="" type="checkbox"/> Chapter Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure	Made through intermediary Govern for California Network Committee	Govern for California Courage Committee NO: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	7800.00	Calendar Year \$ <u>7800.00</u> Other \$ _____



SUBTOTAL \$ 70700.00

FPPC Form 461 (8/99)
For Technical Assistance: 916/322-5660