

Recipient Committee Campaign Statement

(Government Code Sections 84200-84216.5)

Type or print in ink.

Date Stamp

Page 1 of 73

For Official Use Only

Statement covers period
from 07/01/2020

through 09/19/2020

Date of election if applicable:
(Month, Day, Year)

11/03/2020

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1,2,3, and 4.

- | | |
|--|---|
| <input type="checkbox"/> Officeholder, Candidate Controlled Committee
<input type="radio"/> State Candidate Election Committee
<input type="radio"/> Recall
(Also Complete Part 5.) | <input type="checkbox"/> Ballot Measure Committee
<input type="radio"/> Primary Formed
<input type="radio"/> Controlled
<input type="radio"/> Sponsored
(Also Complete Part 6.) |
| <input checked="" type="checkbox"/> General Purpose Committee
<input checked="" type="radio"/> Sponsored
<input checked="" type="radio"/> Small Contributor Committee
<input type="radio"/> Political Party/Central Committee | <input type="checkbox"/> Primary Formed Candidate/
Officeholder Committee
(Also Complete Part 7.) |

2. Type of Statement:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Pre-election Statement | <input type="checkbox"/> Quarterly Statement |
| <input type="checkbox"/> Semi-annual Statement | <input type="checkbox"/> Special Odd-Year Report |
| <input type="checkbox"/> Termination Statement | <input type="checkbox"/> Supplemental Preelection
Statement - Attach Form 495 |
| <input type="checkbox"/> Amendment (Explain below) | |

3. Committee Information

I.D. NUMBER
991800

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Service Employees International Union United Healthcare Workers West Political Issues Committee

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Oakland</u>	<u>CA</u>	<u>94612</u>	

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX/E-MAIL ADDRESS
(213) 452-6575 / jguard@kaufmanlegalgroup.com

Treasurer(s)

NAME OF TREASURER
Suzanne Jimenez

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Los Angeles</u>	<u>CA</u>	<u>90022</u>	<u>(323) 888-8253</u>

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	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 _____ By _____
DATE SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

**Recipient Committee
Campaign Statement
Cover Page – Part 2**

Type or print in ink.

COVER PAGE - PART 2

**CALIFORNIA
FORM 460**

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

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 to make expenditures on behalf of your candidacy.

COMMITTEE NAME I.D. NUMBER

NAME OF TREASURER CONTROLLED COMMITTEE?
 YES NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME I.D. NUMBER

NAME OF TREASURER CONTROLLED COMMITTEE?
 YES NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT
		<input type="checkbox"/> OPPOSE

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

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD DISTRICT NO. IF ANY

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

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

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

SUMMARY PAGE

Statement covers period	CALIFORNIA FORM 460
from <u>07/01/2020</u>	
through <u>09/19/2020</u>	Page <u>3</u> of <u>73</u>
I.D. NUMBER 991800	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Service Employees International Union United Healthcare Workers West Political Issues Committee

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$1,736,944.71	\$5,244,258.21
2. Loans Received	Schedule B, Line 7	\$0.00	\$0.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$1,736,944.71	\$5,244,258.21
4. Nonmonetary Contributions	Schedule C, Line 3	\$0.00	\$0.00
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$1,736,944.71	\$5,244,258.21

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contribution Received	\$0.00	\$0.00
21. Expenditures Made	\$0.00	\$0.00

Expenditures Made

6. Payments Made	Schedule E, Line 4	\$2,397,091.38	\$12,707,943.43
7. Loans Made	Schedule H, Line 7	\$0.00	\$0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$2,397,091.38	\$12,707,943.43
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	(\$170,347.39)	\$2,784.99
10. Nonmonetary Adjustment	Schedule C, Line 3	\$0.00	\$0.00
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	\$2,226,743.99	\$12,710,728.42

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	\$3,586,760.52	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).
13. Cash Receipts	Column A, Line 3 above	\$1,736,944.71	
14. Miscellaneous Increases to Cash	Schedule I, Line 4	\$0.00	
15. Cash Payments	Column A, Line 8 above	\$2,397,091.38	
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$2,926,613.85	
If this is a termination statement, Line 16 must be zero.			

17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2 \$0.00

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	\$0.00
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	\$2,784.99

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

Schedule A Monetary Contributions Received

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

SCHEDULE A

Statement covers period
from 07/01/2020
through 09/19/2020

CALIFORNIA FORM 460

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Service Employees International Union United Healthcare Workers West Political Issues Committee

I.D. Number

991800

DATE RECEIVED	FULL NAME, MAILING 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)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				

SUBTOTAL \$0.00

Schedule A Summary

1. Amount received this period - contributions of \$100 or more. (Include all Schedule A subtotals.)	\$0.00
2. Amount received this period - unitemized contributions of less than \$100	\$1,736,944.71
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)	TOTAL \$1,736,944.71

*Contributor Codes
 IND - Individual
 COM - Recipient Committee
 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule B - Part 1 Loans Received

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

Statement covers period
from 07/01/2020
through 09/19/2020

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Service Employees International Union United Healthcare Workers West Political Issues Committee

I.D. NUMBER
991800

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	 DATE DUE	 RATE %	 DATE INCURRED	 CALENDAR YEAR PER ELECTION**
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	 DATE DUE	 RATE %	 DATE INCURRED	 CALENDAR YEAR PER ELECTION**
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	 DATE DUE	 RATE %	 DATE INCURRED	 CALENDAR YEAR PER ELECTION**

SUBTOTALS

Schedule B Summary

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

1. Loans received this period. _____
(Total Column (b) plus unitemized loans less than \$100.)

2. Loans paid or forgiven this period _____
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) _____ **Net** _____
Enter the net here and on the Summary Page, Column A, Line 2. (may be a negative number)

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

** If required.

*Contributor Codes
IND-Individual COM-Recipient Committee (other than PTY or SCC) OTH-Other PTY-Political Party SCC-Small Contributor Committee

**Schedule B - Part 2
Loan Guarantors**

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

Statement covers period from <u>07/01/2020</u> through <u>09/19/2020</u>	CALIFORNIA FORM 460
	Page <u>6</u> of <u>73</u>
	I.D. Number 991800

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Service Employees International Union United Healthcare Workers West Political Issues Committee

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)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____	

SUBTOTAL

Enter on
Summary Page,
Line 17 only.

Schedule C Nonmonetary Contributions Received

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

SCHEDULE C

Statement covers period from <u>07/01/2020</u> through <u>09/19/2020</u>	CALIFORNIA FORM 460
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	I.D. Number 991800

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Service Employees International Union United Healthcare Workers West Political Issues Committee

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 OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

1. Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.)..... _____
2. Amount received this period - unitemized nonmonetary contributions of less than \$100 _____
3. Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL** _____

*Contributor Codes
 IND - Individual
 COM- Recipient Committee
 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

**Schedule D
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

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

SCHEDULE D

Statement covers period
from 07/01/2020
through 09/19/2020

**CALIFORNIA
FORM 460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Service Employees International Union United Healthcare Workers West Political Issues Committee

I.D. NUMBER
991800

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/10/2020	Protect the Lives of Dialysis Patients Act Ballot Number or Letter: 23 Jurisdiction: Statewide	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$60,000.00	\$5,560,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
8/26/2020	California Democratic Party	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$100,000.00	\$100,000.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
7/27/2020	Healthcare Rising AZ (SEIU-UHW)	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		\$35,715.00	\$35,715.00	
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL

Schedule D Summary

- Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) \$1,195,715.00
- Unitemized contributions and independent expenditures made this period of under \$100 \$0.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL** \$1,195,715.00

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

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

SCHEDULE D (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 9 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/27/2020	App-Based Drivers as Contractors and Labor Policies Initiative Ballot Number or Letter: 22 Jurisdiction: Statewide	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		\$1,000,000.00	\$1,000,000.00	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					

SUBTOTAL \$1,195,715.00

**Schedule E
Payments Made**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 10 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Service Employees International Union United Healthcare Workers West Political Issues Committee

I.D. NUMBER
991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Yes on 23 - Californians for Kidney Dialysis Patient Protection, Sponsored by Service Employees International Union - United Healthcare Workers West Los Angeles, CA 90017-5864 Committee ID: 1398274	CTB		\$60,000.00
California Democratic Party Sacramento, CA 95814-4879 Committee ID: 741666	CTB		\$100,000.00
Arizonans Fed Up with Failing Healthcare (Healthcare Rising AZ) Tempe, AZ 85283-1039		Out of State Contribution	\$865,000.00

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

SUBTOTAL

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$2,397,091.38
2. Unitemized payments made this period of under \$100.	\$0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$0.00
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$2,397,091.38

**Schedule E
(Continuation Sheet)
Payments Made**

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

Statement covers period
from 07/01/2020
through 09/19/2020

**CALIFORNIA
FORM 460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Service Employees International Union United Healthcare Workers West Political Issues Committee

I.D. NUMBER
991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Healthcare Rising AZ (SEIU-UHW) Tempe, AZ 85283-1039	CTB			\$35,715.00
Hamburger Strategies, LLC Washington, DC 20016-1851	WEB			\$138,144.00
No on Prop 22 Sacramento, CA 95814-4606	CTB			\$1,000,000.00
Committee ID: 1424537 Breakthrough Campaigns Santa Monica, CA 90401-2431	CNS			\$25,100.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		FIL, SEIU United Healthcare Workers West, Support	\$2,000.00

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

SUBTOTAL

**Schedule E
(Continuation Sheet)
Payments Made**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 12 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Service Employees International Union United Healthcare Workers West Political Issues Committee

I.D. NUMBER
991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		OFC, SEIU United Healthcare Workers West, Support	\$826.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		LIT, SEIU United Healthcare Workers West, Support	\$1,678.63
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		FIL, SEIU United Healthcare Workers West, Support	\$200.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		FIL, SEIU United Healthcare Workers West, Support	\$200.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		CNS, SEIU United Healthcare Workers West, Support	\$6,000.00

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

SUBTOTAL

**Schedule E
(Continuation Sheet)
Payments Made**

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

Statement covers period
from 07/01/2020
through 09/19/2020

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Service Employees International Union United Healthcare Workers West Political Issues Committee

I.D. NUMBER
991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		OFC, SEIU United Healthcare Workers West, Support	\$80.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		FIL, SEIU United Healthcare Workers West, Support	\$353.70
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		PRT, SEIU United Healthcare Workers West, Support	\$736.10
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		WEB, SEIU United Healthcare Workers West, Support	\$3,475.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		CNS, SEIU United Healthcare Workers West, Support	\$100.00

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SUBTOTAL

**Schedule E
(Continuation Sheet)
Payments Made**

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to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from <u>07/01/2020</u>		
through <u>09/19/2020</u>		Page <u>14</u> of <u>73</u>
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Service Employees International Union United Healthcare Workers West Political Issues Committee

I.D. NUMBER
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|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
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| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		CNS, SEIU United Healthcare Workers West, Support	\$55.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		WEB, SEIU United Healthcare Workers West, Support	\$10,000.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		PRT, SEIU United Healthcare Workers West, Support	\$1,398.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		WEB, SEIU United Healthcare Workers West, Support	\$36.88
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		RAD, SEIU United Healthcare Workers West, Support	\$3,235.00

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SUBTOTAL

**Schedule E
(Continuation Sheet)
Payments Made**

Type or print in ink.
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Statement covers period
from 07/01/2020
through 09/19/2020

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
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I.D. NUMBER
991800

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|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
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| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		CNS, SEIU United Healthcare Workers West, Support	\$3,000.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		CNS, SEIU United Healthcare Workers West, Support	\$3,000.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		CNS, SEIU United Healthcare Workers West, Support	\$3,000.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		CNS, SEIU United Healthcare Workers West, Support	\$3,000.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		POL, SEIU United Healthcare Workers West, Support	\$6,400.00

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SUBTOTAL

**Schedule E
(Continuation Sheet)
Payments Made**

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to whole dollars.

Statement covers period
from 07/01/2020
through 09/19/2020

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Service Employees International Union United Healthcare Workers West Political Issues Committee

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|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		POL, SEIU United Healthcare Workers West, Support	\$6,400.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		POL, SEIU United Healthcare Workers West, Support	\$6,400.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		POL, SEIU United Healthcare Workers West, Support	\$6,400.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		LIT, SEIU United Healthcare Workers West, Support	\$425.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		PET, SEIU United Healthcare Workers West, Support	\$51.85

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SUBTOTAL

**Schedule E
(Continuation Sheet)
Payments Made**

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Statement covers period
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through 09/19/2020

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SEE INSTRUCTIONS ON REVERSE

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Service Employees International Union United Healthcare Workers West Political Issues Committee

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- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		PET, SEIU United Healthcare Workers West, Support	\$51.85
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		PET, SEIU United Healthcare Workers West, Support	\$51.85
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		PET, SEIU United Healthcare Workers West, Support	\$255.12
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$5,068.88
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		TRS, SEIU United Healthcare Workers West, Support	\$25.15

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SUBTOTAL

**Schedule E
(Continuation Sheet)
Payments Made**

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Statement covers period
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through 09/19/2020

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NAME OF FILER
Service Employees International Union United Healthcare Workers West Political Issues Committee

I.D. NUMBER
991800

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- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		PRT, SEIU United Healthcare Workers West, Support	\$1,437.60
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		TRS, SEIU United Healthcare Workers West, Support	\$105.73
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$14,250.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$9,625.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		Field Expenses, SEIU United Healthcare Workers West, Support	\$956.25

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

SUBTOTAL

**Schedule E
(Continuation Sheet)
Payments Made**

Type or print in ink.
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to whole dollars.

Statement covers period		CALIFORNIA FORM 460
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through	09/19/2020	Page 19 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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NAME OF FILER
Service Employees International Union United Healthcare Workers West Political Issues Committee

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| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
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| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		PHO, SEIU United Healthcare Workers West, Support	\$3,426.75
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		OFC, SEIU United Healthcare Workers West, Support	\$2,125.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$14,250.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$9,625.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		Field Expenses, SEIU United Healthcare Workers West, Support	\$956.25

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SUBTOTAL

**Schedule E
(Continuation Sheet)
Payments Made**

Type or print in ink.
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to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 20 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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NAME OF FILER
Service Employees International Union United Healthcare Workers West Political Issues Committee

I.D. NUMBER
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| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		PHO, SEIU United Healthcare Workers West, Support	\$3,426.75
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		OFC, SEIU United Healthcare Workers West, Support	\$2,125.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$42.50
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$42.50
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$425.00

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SUBTOTAL

**Schedule E
(Continuation Sheet)
Payments Made**

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Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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NAME OF FILER
Service Employees International Union United Healthcare Workers West Political Issues Committee

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- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$500.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$425.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$500.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$850.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		PHO, SEIU United Healthcare Workers West, Support	\$300.00

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SUBTOTAL

**Schedule E
(Continuation Sheet)
Payments Made**

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Statement covers period		CALIFORNIA FORM 460
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through	09/19/2020	Page 22 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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NAME OF FILER
Service Employees International Union United Healthcare Workers West Political Issues Committee

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| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
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| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		Field Expenses, SEIU United Healthcare Workers West, Support	\$37.50
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		OFC, SEIU United Healthcare Workers West, Support	\$63.38
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$850.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		PHO, SEIU United Healthcare Workers West, Support	\$300.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		Field Expenses, SEIU United Healthcare Workers West, Support	\$37.50

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SUBTOTAL

**Schedule E
(Continuation Sheet)
Payments Made**

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Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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NAME OF FILER
Service Employees International Union United Healthcare Workers West Political Issues Committee

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|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
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| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		OFC, SEIU United Healthcare Workers West, Support	\$63.38
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$850.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$1,000.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		PHO, SEIU United Healthcare Workers West, Support	\$300.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		Field Expenses, SEIU United Healthcare Workers West, Support	\$75.00

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SUBTOTAL

**Schedule E
(Continuation Sheet)
Payments Made**

Type or print in ink.
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Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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NAME OF FILER
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| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
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| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
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| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
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| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		OFC, SEIU United Healthcare Workers West, Support	\$126.76
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$850.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$1,000.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		PHO, SEIU United Healthcare Workers West, Support	\$300.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		Field Expenses, SEIU United Healthcare Workers West, Support	\$75.00

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

SUBTOTAL

**Schedule E
(Continuation Sheet)
Payments Made**

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

Statement covers period
from 07/01/2020
through 09/19/2020

**CALIFORNIA
FORM 460**

Page 25 of 73

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Service Employees International Union United Healthcare Workers West Political Issues Committee

I.D. NUMBER
991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
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SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		OFC, SEIU United Healthcare Workers West, Support	\$126.76
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$850.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		PHO, SEIU United Healthcare Workers West, Support	\$300.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		Field Expenses, SEIU United Healthcare Workers West, Support	\$75.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		OFC, SEIU United Healthcare Workers West, Support	\$126.76

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SUBTOTAL

**Schedule E
(Continuation Sheet)
Payments Made**

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Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 26 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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Service Employees International Union United Healthcare Workers West Political Issues Committee

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SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$850.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		PHO, SEIU United Healthcare Workers West, Support	\$300.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		Field Expenses, SEIU United Healthcare Workers West, Support	\$75.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		OFC, SEIU United Healthcare Workers West, Support	\$126.76
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$850.00

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SUBTOTAL

**Schedule E
(Continuation Sheet)
Payments Made**

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Statement covers period		CALIFORNIA FORM 460
from <u>07/01/2020</u>		
through <u>09/19/2020</u>		Page <u>27</u> of <u>73</u>
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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Service Employees International Union United Healthcare Workers West Political Issues Committee

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SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		PHO, SEIU United Healthcare Workers West, Support	\$300.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		Field Expenses, SEIU United Healthcare Workers West, Support	\$75.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		OFC, SEIU United Healthcare Workers West, Support	\$126.76
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$850.00

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SUBTOTAL

**Schedule E
(Continuation Sheet)
Payments Made**

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Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 28 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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Service Employees International Union United Healthcare Workers West Political Issues Committee

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SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		Field Expenses, SEIU United Healthcare Workers West, Support	\$75.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		OFC, SEIU United Healthcare Workers West, Support	\$126.76
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$850.00

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SUBTOTAL

**Schedule E
(Continuation Sheet)
Payments Made**

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Statement covers period		CALIFORNIA FORM 460
from <u>07/01/2020</u>		
through <u>09/19/2020</u>		Page <u>29</u> of <u>73</u>
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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NAME OF FILER
Service Employees International Union United Healthcare Workers West Political Issues Committee

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SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		Field Expenses, SEIU United Healthcare Workers West, Support	\$75.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		OFC, SEIU United Healthcare Workers West, Support	\$126.76
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$850.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		PHO, SEIU United Healthcare Workers West, Support	\$300.00

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**Schedule E
(Continuation Sheet)
Payments Made**

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I.D. NUMBER
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Service Employees International Union United Healthcare Workers West Political Issues Committee

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SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		OFC, SEIU United Healthcare Workers West, Support	\$126.76
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$850.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$1,000.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		PHO, SEIU United Healthcare Workers West, Support	\$300.00

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**Schedule E
(Continuation Sheet)
Payments Made**

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Statement covers period
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FORM 460**

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NAME OF FILER
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SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		OFC, SEIU United Healthcare Workers West, Support	\$126.76
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$850.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$1,000.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		PHO, SEIU United Healthcare Workers West, Support	\$300.00

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SUBTOTAL

**Schedule E
(Continuation Sheet)
Payments Made**

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Statement covers period
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FORM 460**

Page 32 of 73

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**Schedule E
(Continuation Sheet)
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FORM 460**

Page 33 of 73

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**CALIFORNIA
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SEIU United Healthcare Workers West Oakland, CA 94612-1602	PHO			\$300.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		Field Expenses, SEIU United Healthcare Workers West, Support	\$75.00
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Statement covers period		CALIFORNIA FORM 460
from <u>07/01/2020</u>		
through <u>09/19/2020</u>		Page <u>36</u> of <u>73</u>
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		PHO, SEIU United Healthcare Workers West, Support	\$300.00
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$1,344.88
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		OFC, SEIU United Healthcare Workers West, Support	\$299.12
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$607.73
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$1,397.78

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

SUBTOTAL

**Schedule E
(Continuation Sheet)
Payments Made**

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

Statement covers period
from 07/01/2020
through 09/19/2020

**CALIFORNIA
FORM 460**

Page 37 of 73

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Service Employees International Union United Healthcare Workers West Political Issues Committee

I.D. NUMBER
991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		SAL, SEIU United Healthcare Workers West, Support	\$1,458.57
SEIU United Healthcare Workers West Oakland, CA 94612-1602	IND		OFC, SEIU United Healthcare Workers West, Support	\$149.56

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

SUBTOTAL \$2,397,091.38

Schedule F Accrued Expenses (Unpaid Bills)

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 38 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

SEE INSTRUCTIONS ON REVERSE

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
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 production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND FIL, California Safety Net Initiative, Support	\$2,000.00	\$0.00	\$2,000.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND FIL, Emeryville Healthcare Initiative, Support	\$200.00	\$0.00	\$200.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND CNS, Palo Alto Healthcare Initiative, Support	\$100.00	\$0.00	\$100.00	\$0.00

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

SUBTOTALS

Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.).....	INCURRED TOTALS \$2,784.99
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 unitemized payments on accrued expenses under \$100.).....	PAID TOTALS \$173,132.38
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 (\$170,347.39) May be a negative number.

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 39 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND FIL, Pomona Healthcare Initiative, Support	\$200.00	\$0.00	\$200.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND OFC, Watsonville Healthcare Initiative, Support	\$826.00	\$0.00	\$826.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND LIT, Watsonville Healthcare Initiative, Support	\$1,678.63	\$0.00	\$1,678.63	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND CNS, Watsonville Healthcare Initiative, Support	\$6,000.00	\$0.00	\$6,000.00	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 40 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND OFC, Watsonville Healthcare Initiative, Support	\$80.00	\$0.00	\$80.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND FIL, Watsonville Healthcare Initiative, Support	\$353.70	\$0.00	\$353.70	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PRT, Watsonville Healthcare Initiative, Support	\$736.10	\$0.00	\$736.10	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND WEB, Watsonville Healthcare Initiative, Support	\$3,475.00	\$0.00	\$3,475.00	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 41 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND CNS, Watsonville Healthcare Initiative, Support	\$55.00	\$0.00	\$55.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND CNS, Livermore Healthcare Initiative, Support	\$3,000.00	\$0.00	\$3,000.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND CNS, Palo Alto Healthcare Initiative, Support	\$3,000.00	\$0.00	\$3,000.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND CNS, Pleasanton Healthcare Initiative, Support	\$3,000.00	\$0.00	\$3,000.00	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 42 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND CNS, Redwood City Healthcare Initiative, Support	\$3,000.00	\$0.00	\$3,000.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND POL, Redwood City Healthcare Initiative, Support	\$6,400.00	\$0.00	\$6,400.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND POL, Pleasanton Healthcare Initiative, Support	\$6,400.00	\$0.00	\$6,400.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND POL, Palo Alto Healthcare Initiative, Support	\$6,400.00	\$0.00	\$6,400.00	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 43 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND POL, Livermore Healthcare Initiative, Support	\$6,400.00	\$0.00	\$6,400.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND LIT, Palo Alto Healthcare Initiative, Support	\$425.00	\$0.00	\$425.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND WEB, Watsonville Healthcare Initiative, Support	\$10,000.00	\$0.00	\$10,000.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PRT, Watsonville Healthcare Initiative, Support	\$1,398.00	\$0.00	\$1,398.00	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 44 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND WEB, Watsonville Healthcare Initiative, Support	\$36.88	\$0.00	\$36.88	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND RAD, Watsonville Healthcare Initiative, Support	\$3,235.00	\$0.00	\$3,235.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PET, Livermore Healthcare Initiative, Support	\$51.85	\$0.00	\$51.85	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PET, Pleasanton Healthcare Initiative, Support	\$51.85	\$0.00	\$51.85	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 45 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PET, Redwood City Healthcare Initiative, Support	\$51.85	\$0.00	\$51.85	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Palo Alto Healthcare Initiative, Support	\$5,068.88	\$0.00	\$5,068.88	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PET, Palo Alto Healthcare Initiative, Support	\$255.12	\$0.00	\$255.12	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND TRS, Palo Alto Healthcare Initiative, Support	\$25.15	\$0.00	\$25.15	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 46 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND TRS, Palo Alto Healthcare Initiative, Support	\$105.73	\$0.00	\$105.73	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PRT, Palo Alto Healthcare Initiative, Support	\$1,437.60	\$0.00	\$1,437.60	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Livermore Healthcare Initiative, Support	\$14,250.00	\$0.00	\$14,250.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Livermore Healthcare Initiative, Support	\$9,625.00	\$0.00	\$9,625.00	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 47 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND Field Expenses, Livermore Healthcare Initiative, Support	\$956.25	\$0.00	\$956.25	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PHO, Livermore Healthcare Initiative, Support	\$3,426.75	\$0.00	\$3,426.75	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND OFC, Livermore Healthcare Initiative, Support	\$2,125.00	\$0.00	\$2,125.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Palo Alto Healthcare Initiative, Support	\$14,250.00	\$0.00	\$14,250.00	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 48 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Palo Alto Healthcare Initiative, Support	\$9,625.00	\$0.00	\$9,625.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND Field Expenses, Palo Alto Healthcare Initiative, Support	\$956.25	\$0.00	\$956.25	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PHO, Palo Alto Healthcare Initiative, Support	\$3,426.75	\$0.00	\$3,426.75	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND OFC, Palo Alto Healthcare Initiative, Support	\$2,125.00	\$0.00	\$2,125.00	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 49 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Livermore Healthcare Initiative, Support	\$42.50	\$0.00	\$42.50	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Livermore Healthcare Initiative, Support	\$425.00	\$0.00	\$425.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Livermore Healthcare Initiative, Support	\$500.00	\$0.00	\$500.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Palo Alto Healthcare Initiative, Support	\$42.50	\$0.00	\$42.50	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 50 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Palo Alto Healthcare Initiative, Support	\$425.00	\$0.00	\$425.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Palo Alto Healthcare Initiative, Support	\$500.00	\$0.00	\$500.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Livermore Healthcare Initiative, Support	\$850.00	\$0.00	\$850.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PHO, Livermore Healthcare Initiative, Support	\$300.00	\$0.00	\$300.00	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 51 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND Field Expenses, Livermore Healthcare Initiative, Support	\$37.50	\$0.00	\$37.50	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND OFC, Livermore Healthcare Initiative, Support	\$63.38	\$0.00	\$63.38	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Palo Alto Healthcare Initiative, Support	\$850.00	\$0.00	\$850.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PHO, Palo Alto Healthcare Initiative, Support	\$300.00	\$0.00	\$300.00	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 52 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND Field Expenses, Palo Alto Healthcare Initiative, Support	\$37.50	\$0.00	\$37.50	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND OFC, Palo Alto Healthcare Initiative, Support	\$63.38	\$0.00	\$63.38	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Livermore Healthcare Initiative, Support	\$850.00	\$0.00	\$850.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Livermore Healthcare Initiative, Support	\$1,000.00	\$0.00	\$1,000.00	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 53 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PHO, Livermore Healthcare Initiative, Support	\$300.00	\$0.00	\$300.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND Field Expenses, Livermore Healthcare Initiative, Support	\$75.00	\$0.00	\$75.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND OFC, Livermore Healthcare Initiative, Support	\$126.76	\$0.00	\$126.76	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Palo Alto Healthcare Initiative, Support	\$850.00	\$0.00	\$850.00	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 54 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Palo Alto Healthcare Initiative, Support	\$1,000.00	\$0.00	\$1,000.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PHO, Palo Alto Healthcare Initiative, Support	\$300.00	\$0.00	\$300.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND Field Expenses, Palo Alto Healthcare Initiative, Support	\$75.00	\$0.00	\$75.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND OFC, Palo Alto Healthcare Initiative, Support	\$126.76	\$0.00	\$126.76	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 55 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Livermore Healthcare Initiative, Support	\$850.00	\$0.00	\$850.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PHO, Livermore Healthcare Initiative, Support	\$300.00	\$0.00	\$300.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND Field Expenses, Livermore Healthcare Initiative, Support	\$75.00	\$0.00	\$75.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND OFC, Livermore Healthcare Initiative, Support	\$126.76	\$0.00	\$126.76	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 56 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Palo Alto Healthcare Initiative, Support	\$850.00	\$0.00	\$850.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PHO, Palo Alto Healthcare Initiative, Support	\$300.00	\$0.00	\$300.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND Field Expenses, Palo Alto Healthcare Initiative, Support	\$75.00	\$0.00	\$75.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND OFC, Palo Alto Healthcare Initiative, Support	\$126.76	\$0.00	\$126.76	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 57 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Livermore Healthcare Initiative, Support	\$850.00	\$0.00	\$850.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Livermore Healthcare Initiative, Support	\$1,000.00	\$0.00	\$1,000.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PHO, Livermore Healthcare Initiative, Support	\$300.00	\$0.00	\$300.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND Field Expenses, Livermore Healthcare Initiative, Support	\$75.00	\$0.00	\$75.00	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 58 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND OFC, Livermore Healthcare Initiative, Support	\$126.76	\$0.00	\$126.76	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Palo Alto Healthcare Initiative, Support	\$850.00	\$0.00	\$850.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Palo Alto Healthcare Initiative, Support	\$1,000.00	\$0.00	\$1,000.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PHO, Palo Alto Healthcare Initiative, Support	\$300.00	\$0.00	\$300.00	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 59 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND Field Expenses, Palo Alto Healthcare Initiative, Support	\$75.00	\$0.00	\$75.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND OFC, Palo Alto Healthcare Initiative, Support	\$126.76	\$0.00	\$126.76	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Livermore Healthcare Initiative, Support	\$850.00	\$0.00	\$850.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PHO, Livermore Healthcare Initiative, Support	\$300.00	\$0.00	\$300.00	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 60 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND Field Expenses, Livermore Healthcare Initiative, Support	\$75.00	\$0.00	\$75.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND OFC, Livermore Healthcare Initiative, Support	\$126.76	\$0.00	\$126.76	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Palo Alto Healthcare Initiative, Support	\$850.00	\$0.00	\$850.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PHO, Palo Alto Healthcare Initiative, Support	\$300.00	\$0.00	\$300.00	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 61 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND Field Expenses, Palo Alto Healthcare Initiative, Support	\$75.00	\$0.00	\$75.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND OFC, Palo Alto Healthcare Initiative, Support	\$126.76	\$0.00	\$126.76	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Livermore Healthcare Initiative, Support	\$850.00	\$0.00	\$850.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Livermore Healthcare Initiative, Support	\$1,000.00	\$0.00	\$1,000.00	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 62 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PHO, Livermore Healthcare Initiative, Support	\$300.00	\$0.00	\$300.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND Field Expenses, Livermore Healthcare Initiative, Support	\$75.00	\$0.00	\$75.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND OFC, Livermore Healthcare Initiative, Support	\$126.76	\$0.00	\$126.76	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Palo Alto Healthcare Initiative, Support	\$850.00	\$0.00	\$850.00	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 63 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Palo Alto Healthcare Initiative, Support	\$1,000.00	\$0.00	\$1,000.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PHO, Palo Alto Healthcare Initiative, Support	\$300.00	\$0.00	\$300.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND Field Expenses, Palo Alto Healthcare Initiative, Support	\$75.00	\$0.00	\$75.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND OFC, Palo Alto Healthcare Initiative, Support	\$126.76	\$0.00	\$126.76	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 64 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Livermore Healthcare Initiative, Support	\$850.00	\$0.00	\$850.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PHO, Livermore Healthcare Initiative, Support	\$300.00	\$0.00	\$300.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND Field Expenses, Livermore Healthcare Initiative, Support	\$75.00	\$0.00	\$75.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND OFC, Livermore Healthcare Initiative, Support	\$126.76	\$0.00	\$126.76	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 65 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Palo Alto Healthcare Initiative, Support	\$850.00	\$0.00	\$850.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PHO, Palo Alto Healthcare Initiative, Support	\$300.00	\$0.00	\$300.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND Field Expenses, Palo Alto Healthcare Initiative, Support	\$75.00	\$0.00	\$75.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND OFC, Palo Alto Healthcare Initiative, Support	\$126.76	\$0.00	\$126.76	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 66 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Livermore Healthcare Initiative, Support	\$850.00	\$0.00	\$850.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Livermore Healthcare Initiative, Support	\$1,000.00	\$0.00	\$1,000.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PHO, Livermore Healthcare Initiative, Support	\$300.00	\$0.00	\$300.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND Field Expenses, Livermore Healthcare Initiative, Support	\$75.00	\$0.00	\$75.00	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 67 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND OFC, Livermore Healthcare Initiative, Support	\$126.76	\$0.00	\$126.76	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Palo Alto Healthcare Initiative, Support	\$850.00	\$0.00	\$850.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Palo Alto Healthcare Initiative, Support	\$1,000.00	\$0.00	\$1,000.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	PHO	\$300.00	\$0.00	\$300.00	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 68 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND Field Expenses, Palo Alto Healthcare Initiative, Support	\$75.00	\$0.00	\$75.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND OFC, Palo Alto Healthcare Initiative, Support	\$126.76	\$0.00	\$126.76	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND PHO, Palo Alto Healthcare Initiative, Support	\$300.00	\$0.00	\$300.00	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Measure AV, Support	\$1,344.88	\$0.00	\$1,344.88	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 69 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND OFC, Measure AV, Support	\$299.12	\$0.00	\$299.12	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Measure AV, Support	\$1,397.78	\$0.00	\$1,397.78	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Measure AV, Support	\$1,458.57	\$0.00	\$1,458.57	\$0.00
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND OFC, Measure AV, Support	\$149.56	\$0.00	\$149.56	\$0.00

SUBTOTALS

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2020	
through	09/19/2020	Page 70 of 73
NAME OF FILER Service Employees International Union United Healthcare Workers West Political Issues Committee		I.D. NUMBER 991800

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

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
Service Employees International Union - United Healthcare Workers West Oakland, CA 94612-1602	IND SAL, Measure AV, Support	\$607.73	\$0.00	\$607.73	\$0.00
Kaufman Legal Group, APC Los Angeles, CA 90017-5864	PRO	\$0.00	\$2,679.50	\$0.00	\$2,679.50
Kaufman Legal Group, APC Los Angeles, CA 90017-5864	OFC	\$0.00	\$105.49	\$0.00	\$105.49
SUBTOTALS		\$173,132.38	\$2,784.99	\$173,132.38	\$2,784.99

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

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

SCHEDULE G

Statement covers period
from 07/01/2020
through 09/19/2020

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Service Employees International Union United Healthcare Workers West Political Issues Committee

I.D. NUMBER
991800

NAME OF AGENT OR INDEPENDENT CONTRACTOR

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 |
| 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 production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID

Attach additional information on appropriately labeled continuation sheets.

TOTAL*

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

**Schedule H –
Loans Made to Others***

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

Statement covers period from <u>07/01/2020</u> through <u>09/19/2020</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Service Employees International Union United Healthcare Workers West Political Issues Committee

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____% RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
				<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN		_____% RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
		SUBTOTALS						

*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.

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

Schedule H Summary

- Loans made this period
(Total Column (b) plus unitemized loans less than \$100.)
- Payments received on loans
(Total Column (c) plus unitemized payments less than \$100.)
- Net change this period. (Subtract Line 2 from Line 1.) **NET**
(Enter the net here and on the Summary Page, Column A, Line 7.)

**** If Required**

(May be a negative number)

**Schedule I
Miscellaneous Increases to Cash**

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

SCHEDULE I

Statement covers period
from 07/01/2020
through 09/19/2020

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Service Employees International Union United Healthcare Workers West Political Issues Committee

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$0.00

Schedule I Summary

- 1. Increases to cash of \$100 or more this period..... \$0.00
- 2. Unitemized increases to cash under \$100 this period..... \$0.00
- 3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)..... \$0.00
- 4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)..... **TOTAL** \$0.00