

# Recipient Committee Campaign Statement

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

Date Stamp

CALIFORNIA  
2001/02  
FORM **460**

Page 1 of 24

For Official Use Only

Statement covers period

from 01/01/2014

through 12/31/2014

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

06/07/2016

SEE INSTRUCTIONS ON REVERSE

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

- ☒ Officeholder, Candidate Controlled Committee  
☒ State Candidate Election Committee  
☐ Recall  
(Also Complete Part 5.)  
☐ General Purpose Committee  
☐ Sponsored  
☐ Small Contributor Committee  
☐ Political Party/Central Committee
- ☐ Ballot Measure Committee  
☐ Primary Formed  
☐ Controlled  
☐ Sponsored  
(Also Complete Part 6.)  
☐ Primary Formed Candidate/  
Officeholder Committee  
(Also Complete Part 7.)

## 2. Type of Statement:

- ☐ Pre-election Statement  
☒ Semi-annual Statement  
☐ Termination Statement  
☐ Amendment (Explain below)
- ☐ Quarterly Statement  
☐ Special Odd-Year Report  
☐ Supplemental Preelection  
Statement - Attach Form 495

## 3. Committee Information

I.D. NUMBER  
1373591

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
Ash Kalra for California - Assembly 2016

STREET ADDRESS (NO P.O. BOX)

| CITY            | STATE     | ZIP CODE     | AREA CODE/PHONE      |
|-----------------|-----------|--------------|----------------------|
| <u>San Jose</u> | <u>CA</u> | <u>95136</u> | <u>(415)884-5500</u> |

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

| CITY          | STATE     | ZIP CODE          | AREA CODE/PHONE |
|---------------|-----------|-------------------|-----------------|
| <u>Novato</u> | <u>CA</u> | <u>94949-5731</u> |                 |

OPTIONAL: FAX/E-MAIL ADDRESS  
415-884-5501 / nwarren@warrenandassoc.com

## Treasurer(s)

NAME OF TREASURER  
Ash Kalra

MAILING ADDRESS

| CITY            | STATE     | ZIP CODE     | AREA CODE/PHONE     |
|-----------------|-----------|--------------|---------------------|
| <u>San Jose</u> | <u>CA</u> | <u>95136</u> | <u>415-884-5500</u> |

NAME OF ASSISTANT TREASURER, IF ANY  
Nancy L. Warren

MAILING ADDRESS

| CITY          | STATE     | ZIP CODE          | AREA CODE/PHONE     |
|---------------|-----------|-------------------|---------------------|
| <u>Novato</u> | <u>CA</u> | <u>94949-5731</u> | <u>415-884-5500</u> |

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 <u>02/02/2015</u> | By <u>Nancy L. Warren</u> | SIGNATURE OF TREASURER OR ASSISTANT TREASURER   |
| DATE                          |                           |   |
| Executed on <u>02/02/2015</u> | By <u>Ash Kalra</u>       | SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR |
| DATE                          |                           |   |
| Executed on _____             | By _____                  | SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT                                   |
| DATE                          |                           |   |
| Executed on _____             | By _____                  | SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT                                   |
| DATE                          |                           |   |

FPPC Form 460 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC  
State of California

# Recipient Committee Campaign Statement Cover Page – Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA  
FORM **460**

Page 2 of 24

## 5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Ash Kalra

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

Sought: State Assembly Person

Assembly District

27

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

San Jose

CA

95136

**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

Re-elect Ash Kalra to City Council 2012

I.D. NUMBER

1343638

NAME OF TREASURER

Ash Kalra

CONTROLLED COMMITTEE?

☒ YES

☐ NO

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

CITY

San Jose

STATE

CA

ZIP CODE

95136

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

☐ SUPPORT

☐ 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

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

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

from 01/01/2014

through 12/31/2014

CALIFORNIA  
FORM **460**

Page 3 of 24

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ash Kalra for California - Assembly 2016

I.D. NUMBER

1373591

## Contributions Received

|                                       |                    | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|---------------------------------------|--------------------|--|--|
| 1. Monetary Contributions .....       | Schedule A, Line 3 | \$73,952.00  | \$73,952.00                                |
| 2. Loans Received .....               | Schedule B, Line 7 | \$0.00   | \$0.00                                     |
| 3. SUBTOTAL CASH CONTRIBUTIONS .....  | Add Lines 1 + 2    | \$73,952.00  | \$73,952.00                                |
| 4. Nonmonetary Contributions .....    | Schedule C, Line 3 | \$0.00   | \$0.00                                     |
| 5. TOTAL CONTRIBUTIONS RECEIVED ..... | Add Lines 3 + 4    | \$73,952.00  | \$73,952.00                                |

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

|                           | 1/1 through 6/30 | 7/1 to Date |
|---------------------------|------------------|-------------|
| 20. Contribution Received | \$0.00           | \$73,952.00 |
| 21. Expenditures Made     | \$0.00           | \$2,386.38  |

## Expenditures Made

|  |                      |            |            |
|--|----------------------|------------|------------|
| 6. Payments Made .....                   | Schedule E, Line 4   | \$871.96   | \$871.96   |
| 7. Loans Made .....                      | Schedule H, Line 7   | \$0.00     | \$0.00     |
| 8. SUBTOTAL CASH PAYMENTS .....          | Add Lines 6 + 7      | \$871.96   | \$871.96   |
| 9. Accrued Expenses (Unpaid Bills) ..... | Schedule F, Line 3   | \$1,514.42 | \$1,514.42 |
| 10. Nonmonetary Adjustment .....         | Schedule C, Line 3   | \$0.00     | \$0.00     |
| 11. TOTAL EXPENDITURES MADE .....        | Add Lines 8 + 9 + 10 | \$2,386.38 | \$2,386.38 |

## Expenditure Limit Summary for State Candidates

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

| Date of Election<br>(mm/dd/yy) | Total to Date |
|--------------------------------|---------------|
| 6/7/2016                       | \$871.96      |
| _____                          | _____         |
| _____                          | _____         |
| _____                          | _____         |
| _____                          | _____         |
| _____                          | _____         |

## Current Cash Statement

|   |   |             |  |
|---|---|-------------|--|
| 12. Beginning Cash Balance .....                          | Previous Summary Page, Line 16                | \$0.00      | To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any). |
| 13. Cash Receipts .....                                   | Column A, Line 3 above                        | \$73,952.00 |  |
| 14. Miscellaneous Increases to Cash .....                 | Schedule I, Line 4                            | \$0.00      |  |
| 15. Cash Payments .....                                   | Column A, Line 8 above                        | \$871.96    |  |
| 16. ENDING CASH BALANCE .....                             | Add Lines 12 + 13 + 14, then subtract Line 15 | \$73,080.04 |  |
| 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 | \$1,514.42 |

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

FPPC Form 460 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC

# Schedule A

## Monetary Contributions Received

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

SCHEDULE A

|   |            |                            |
|---|------------|----------------------------|
| Statement covers period                                   |            | <b>CALIFORNIA FORM 460</b> |
| from  | 01/01/2014 |                            |
| through   | 12/31/2014 | Page 4 of 24               |
| NAME OF FILER<br>Ash Kalra for California - Assembly 2016 |            | I.D. Number<br>1373591     |

SEE INSTRUCTIONS ON REVERSE

| 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) |
|---------------|---|---|--|-----------------------------|---|------------------------------------|
| 12/30/2014    | 6150 Hellyer, LLC<br>San Jose, CA 95138   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |  | \$4,100.00                  | \$4,100.00  | 2016P: \$4,100.00                  |
| 12/31/2014    | Jang Badhesha<br>San Jose, CA 95135   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | VM Ware<br>Planning Manager  | \$1,000.00                  | \$1,000.00  | 2016P: \$1,000.00                  |
| 12/24/2014    | Josh Becker<br>Menlo Park, CA 94025   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Lex Machina<br>Chief Executive Officer   | \$1,000.00                  | \$1,000.00  | 2016P: \$1,000.00                  |
| 12/28/2014    | Michael Cady<br>San Jose, CA 95120  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Self employed (same name)<br>Real Estate Broker  | \$500.00                    | \$500.00  | 2016P: \$500.00                    |
| 12/18/2014    | Indra Chatterjee<br>Los Altos, CA 94024   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Orrick, Herrington & Sutcliffe<br>Attorney   | \$500.00                    | \$500.00  | 2016P: \$500.00                    |

**SUBTOTAL**

### Schedule A Summary

|   |                          |
|---|--------------------------|
| 1. Amount received this period - contributions of \$100 or more.<br>(Include all Schedule A subtotals.) .....                             | \$73,802.00              |
| 2. Amount received this period - unitemized contributions of less than \$100 .....  | \$150.00                 |
| 3. Total monetary contributions received this period.<br>(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... | <b>TOTAL</b> \$73,952.00 |

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

FPPC Form 460 (JUNE/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC

# Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

|                         |            |                            |
|-------------------------|------------|----------------------------|
| Statement covers period |            | <b>CALIFORNIA FORM 460</b> |
| from                    | 01/01/2014 |                            |
| through                 | 12/31/2014 | Page 5 of 24               |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ash Kalra for California - Assembly 2016

I.D. Number

1373591

| 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) |
|-----------------|---|---|--|-----------------------------|---|------------------------------------|
| 12/31/2014      | Sandra Davis<br>Oakland, CA 94619   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | California Endowment<br>Program Manager  | \$200.00                    | \$200.00  | 2016P: \$200.00                    |
| 11/6/2014       | Shashi Dhingra<br>Ellicott City, MD 21043   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Self employed (same name)<br>Account Manager   | \$1,000.00                  | \$1,000.00  | 2016P: \$1,000.00                  |
| 12/23/2014      | Mary Ellen Fox<br>Saratoga, CA 95070  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | M.E. Fox & Co.<br>Vice Chairman  | \$2,000.00                  | \$2,000.00  | 2016P: \$2,000.00                  |
| 12/23/2014      | Michael Fox<br>Saratoga, CA 95070   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | M.E. Fox & Co.<br>Chairman   | \$2,000.00                  | \$2,000.00  | 2016P: \$2,000.00                  |
| 12/30/2014      | Gaurav Gauba<br>San Jose, CA 95138  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Cognilytics<br>President   | \$4,100.00                  | \$4,100.00  | 2016P: \$4,100.00                  |
| <b>SUBTOTAL</b> |   |   |  |                             |   |                                    |

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

# Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

|                         |  |                            |
|-------------------------|--|----------------------------|
| Statement covers period |  | <b>CALIFORNIA FORM 460</b> |
| from 01/01/2014         |  |                            |
| through 12/31/2014      |  | Page 6 of 24               |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ash Kalra for California - Assembly 2016

I.D. Number  
1373591

| 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) |
|-----------------|---|---|--|-----------------------------|---|------------------------------------|
| 12/29/2014      | Eric Geffon<br>San Jose, CA 95113   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Self employed (same name)<br>Attorney  | \$500.00                    | \$500.00  | 2016P: \$500.00                    |
| 12/28/2014      | Ram Gopal<br>Cupertino, CA 95014  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | PeopleTech<br>Business Development   | \$100.00                    | \$100.00  | 2016P: \$100.00                    |
| 12/31/2014      | Hala Hijazi<br>San Francisco, CA 94123  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Self employed (same name)<br>Business Development<br>Consultant                            | \$500.00                    | \$500.00  | 2016P: \$500.00                    |
| 12/31/2014      | Steve Huynh<br>San Jose, CA 95133   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Phan Law Firm Inc.<br>Attorney   | \$151.00                    | \$151.00  | 2016P: \$151.00                    |
| 12/31/2014      | Prakash Janakiraman<br>San Francisco, CA 94115  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Nextdoor.com, Inc.<br>Co-Founder & Chief Architect   | \$1,500.00                  | \$1,500.00  | 2016P: \$1,500.00                  |
| <b>SUBTOTAL</b> |   |   |  |                             |   |                                    |

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

# Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

|  |  |                            |
|--|--|----------------------------|
| Statement covers period<br>from 01/01/2014<br>through 12/31/2014 |  | <b>CALIFORNIA FORM 460</b> |
| Page 7 of 24   |  |                            |
| NAME OF FILER<br>Ash Kalra for California - Assembly 2016        |  | I.D. Number<br>1373591     |

SEE INSTRUCTIONS ON REVERSE

| 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) |
|-----------------|---|---|--|-----------------------------|---|------------------------------------|
| 12/31/2014      | Anirudh Joshi<br>San Francisco, CA 94105  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Intertrust Technologies Corp.<br>General Manager   | \$1,000.00                  | \$1,000.00  | 2016P: \$1,000.00                  |
| 12/16/2014      | Ankit Kalra<br>San Jose, CA 95123   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Bonfare Market 29<br>Owner   | \$100.00                    | \$100.00  | 2016P: \$100.00                    |
| 11/21/2014      | Atul Kalra<br>San Jose, CA 95123  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Bonfare Market<br>Owner  | \$2,100.00                  | \$2,100.00  | 2016P: \$2,100.00                  |
| 12/22/2014      | Pankaj Kalra<br>Fremont, CA 94539   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Stratitute Inc.<br>Information Technology  | \$250.00                    | \$250.00  | 2016P: \$250.00                    |
| 10/23/2014      | Satya Kalra<br>San Jose, CA 95136   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | None<br>Retired  | \$4,100.00                  | \$4,100.00  | 2016P: \$4,100.00                  |
| <b>SUBTOTAL</b> |   |   |  |                             |   |                                    |

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

# Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

|  |  |  |
|--|--|--|
| Statement covers period<br>from 01/01/2014<br>through 12/31/2014 |  | <b>CALIFORNIA FORM 460</b><br>Page 8 of 24 |
| I.D. Number<br>1373591   |  |  |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ash Kalra for California - Assembly 2016

| 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) |
|-----------------|---|---|--|-----------------------------|---|------------------------------------|
| 10/23/2014      | Vinay Kalra<br>Menlo Park, CA 94025   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Oracle<br>Software Engineer  | \$4,100.00                  | \$4,100.00  | 2016P: \$4,100.00                  |
| 12/31/2014      | Kapoor Enterprises<br>Milpitas, CA 95035  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |  | \$4,100.00                  | \$4,100.00  | 2016P: \$4,100.00                  |
| 12/16/2014      | Patricia Kapp<br>Los Altos, CA 94024  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Blach Junior High School<br>Tennis Coach   | \$250.00                    | \$250.00  | 2016P: \$250.00                    |
| 12/16/2014      | Rishi Kumar<br>Saratoga, CA 95070   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Imaginea Technologies<br>Engineer  | \$500.00                    | \$500.00  | 2016P: \$500.00                    |
| 12/28/2014      | Mark Lazzarini<br>San Jose, CA 95112  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | DAL Properties, LLC<br>Managing Principal  | \$500.00                    | \$500.00  | 2016P: \$500.00                    |
| <b>SUBTOTAL</b> |   |   |  |                             |   |                                    |

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



# Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

|                         |            |                            |
|-------------------------|------------|----------------------------|
| Statement covers period |            | <b>CALIFORNIA FORM 460</b> |
| from                    | 01/01/2014 |                            |
| through                 | 12/31/2014 | Page 9 of 24               |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ash Kalra for California - Assembly 2016

I.D. Number  
1373591

| 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) |
|-----------------|---|---|--|-----------------------------|---|------------------------------------|
| 12/28/2014      | Michael Lodoen<br>Cupertino, CA 95014   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | L&D Construction<br>President  | \$500.00                    | \$500.00  | 2016P: \$500.00                    |
| 12/31/2014      | Mihir Meghani<br>Fremont, CA 94536  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Tidewater Physicians<br>Multispecialty Group<br>Physician                                  | \$4,100.00                  | \$4,100.00  | 2016P: \$4,100.00                  |
| 12/31/2014      | Buffy Mims<br>Washington, DC 20010  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Hollingsworth LLP<br>Attorney  | \$500.00                    | \$500.00  | 2016P: \$500.00                    |
| 12/30/2014      | Nisha Nagdev<br>Pleasanton, CA 94566  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | None<br>Not employed   | \$1,001.00                  | \$1,001.00  | 2016P: \$1,001.00                  |
| 12/16/2014      | Tahir Naim<br>Santa Clara, CA 95050   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Self employed (same name)<br>Attorney  | \$100.00                    | \$100.00  | 2016P: \$100.00                    |
| <b>SUBTOTAL</b> |   |   |  |                             |   |                                    |

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

# Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

|                         |            |                            |
|-------------------------|------------|----------------------------|
| Statement covers period |            | <b>CALIFORNIA FORM 460</b> |
| from                    | 01/01/2014 |                            |
| through                 | 12/31/2014 | Page 10 of 24              |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ash Kalra for California - Assembly 2016

I.D. Number  
1373591

| 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) |
|-----------------|---|---|--|-----------------------------|---|------------------------------------|
| 12/19/2014      | Ajay Narain<br>Saratoga, CA 95070   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Maxonic, Inc.<br>Principal   | \$1,000.00                  | \$1,000.00  | 2016P: \$1,000.00                  |
| 12/31/2014      | Steve Ngo<br>San Francisco, CA 94121  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Lozano Smith LLP<br>Attorney   | \$100.00                    | \$100.00  | 2016P: \$100.00                    |
| 12/30/2014      | Jimmy Nguyen<br>San Jose, CA 95148  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Law Office of Jimmy Nguyen<br>Attorney   | \$500.00                    | \$500.00  | 2016P: \$500.00                    |
| 12/28/2014      | Mahesh Nihalani<br>Cupertino, CA 95014  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Self employed (same name)<br>Jewelry Professional  | \$250.00                    | \$250.00  | 2016P: \$250.00                    |
| 12/30/2014      | Joseph Okpaku<br>Oakland, CA 94610  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Lyft<br>Policy Director  | \$1,000.00                  | \$1,000.00  | 2016P: \$1,000.00                  |
| <b>SUBTOTAL</b> |   |   |  |                             |   |                                    |

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

# Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

|  |  |                            |
|--|--|----------------------------|
| Statement covers period<br>from <u>01/01/2014</u><br>through <u>12/31/2014</u> |  | <b>CALIFORNIA FORM 460</b> |
| Page <u>11</u> of <u>24</u>  |  |                            |
| NAME OF FILER<br>Ash Kalra for California - Assembly 2016                      |  | I.D. Number<br>1373591     |

SEE INSTRUCTIONS ON REVERSE

| 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) |
|-----------------|---|---|--|-----------------------------|---|------------------------------------|
| 12/19/2014      | Mahmood Panjwani<br>Burlingame, CA 94010  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Artiman Ventures<br>Entrepreneur in Residence  | \$4,100.00                  | \$4,100.00  | 2016P: \$4,100.00                  |
| 12/31/2014      | Christine Pham<br>San Jose, CA 95136  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Juarigue Law Group<br>Attorney   | \$150.00                    | \$150.00  | 2016P: \$150.00                    |
| 12/30/2014      | Mai Phan<br>San Jose, CA 95112  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Phan, Nguyen & Associates, LLP<br>Attorney   | \$500.00                    | \$500.00  | 2016P: \$500.00                    |
| 12/22/2014      | Nancy Pyle<br>San Jose, CA 95120  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | None<br>Retired  | \$100.00                    | \$100.00  | 2016P: \$100.00                    |
| 12/31/2014      | Stephen Quigley<br>San Jose, CA 95112   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | None<br>Not employed   | \$1,000.00                  | \$1,000.00  | 2016P: \$1,000.00                  |
| <b>SUBTOTAL</b> |   |   |  |                             |   |                                    |

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

# Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

|                         |            |                            |
|-------------------------|------------|----------------------------|
| Statement covers period |            | <b>CALIFORNIA FORM 460</b> |
| from                    | 01/01/2014 |                            |
| through                 | 12/31/2014 | Page 12 of 24              |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ash Kalra for California - Assembly 2016

I.D. Number  
1373591

| 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) |
|---------------|---|---|--|-----------------------------|---|------------------------------------|
| 10/28/2014    | M. Rafiquzzaman<br>Diamond Bar, CA 91765  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Cal State Pomona<br>Professor  | \$4,100.00                  | \$4,100.00  | 2016P: \$4,100.00                  |
| 12/29/2014    | Sharanjit Kali Rai<br>Los Gatos, CA 95030   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Self employed (same name)<br>Real Estate Broker  | \$4,100.00                  | \$4,100.00  | 2016P: \$4,100.00                  |
| 12/31/2014    | Castle Redmond<br>Oakland, CA 94606   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | The California Endowment<br>Program Manager  | \$250.00                    | \$250.00  | 2016P: \$250.00                    |
| 12/31/2014    | Lennora Redmond<br>Menlo Park, CA 94025   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | I.M. Plus<br>Director  | \$500.00                    | \$500.00  | 2016P: \$500.00                    |
| 12/20/2014    | Azar Silver<br>Los Altos, CA 94024  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Netscout<br>Attorney   | \$300.00                    | \$300.00  | 2016P: \$300.00                    |

**SUBTOTAL**

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

# Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

|  |  |   |
|--|--|---|
| Statement covers period<br>from <u>01/01/2014</u><br>through <u>12/31/2014</u> |  | <b>CALIFORNIA FORM 460</b><br>Page <u>13</u> of <u>24</u> |
| I.D. Number<br>1373591   |  |   |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ash Kalra for California - Assembly 2016

| 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) |
|-----------------|---|---|--|-----------------------------|---|------------------------------------|
| 12/20/2014      | Damon Silver<br>Los Altos, CA 94024   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Santa Clara County Public Defender's Office<br>Deputy Public Defender                      | \$300.00                    | \$300.00  | 2016P: \$300.00                    |
| 12/23/2014      | Anil Singhai<br>San Jose, CA 95136  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Attainia<br>Physician  | \$1,000.00                  | \$1,000.00  | 2016P: \$1,000.00                  |
| 12/20/2014      | Dave Singhal<br>Los Altos, CA 94024   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Self employed (same name)<br>Engineer  | \$400.00                    | \$400.00  | 2016P: \$400.00                    |
| 12/23/2014      | Edward Storm<br>Cupertino, CA 95014   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Storm Land<br>Owner  | \$4,100.00                  | \$4,100.00  | 2016P: \$4,100.00                  |
| 12/17/2014      | Bijal Vakil<br>Atherton, CA 94027   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | White & Case<br>Attorney   | \$500.00                    | \$500.00  | 2016P: \$500.00                    |
| <b>SUBTOTAL</b> |   |   |  |                             |   |                                    |

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

# Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

|                         |            |                            |
|-------------------------|------------|----------------------------|
| Statement covers period |            | <b>CALIFORNIA FORM 460</b> |
| from                    | 01/01/2014 |                            |
| through                 | 12/31/2014 | Page 14 of 24              |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ash Kalra for California - Assembly 2016

I.D. Number

1373591

| 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) |
|-----------------|---|---|--|-----------------------------|---|------------------------------------|
| 12/23/2014      | Michael Van Every<br>Greenwich, CT 06830  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Republic Family of Companies<br>Real Estate Developer                                      | \$4,100.00                  | \$4,100.00  | 2016P: \$4,100.00                  |
| 12/31/2014      | Varshyl Inc.<br>San Jose, CA 95148  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |  | \$1,000.00                  | \$1,000.00  | 2016P: \$1,000.00                  |
| 12/31/2014      | Balaji Venkatram<br>San Jose, CA 95148  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Hewlett Packard Co.<br>Marketing   | \$100.00                    | \$100.00  | 2016P: \$100.00                    |
| 12/27/2014      | Vishal Verma<br>Los Altos, CA 94022   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Edgewood<br>Partner  | \$1,000.00                  | \$1,000.00  | 2016P: \$1,000.00                  |
| 12/24/2014      | WMH Corporation<br>San Jose, CA 95113   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |  | \$1,000.00                  | \$1,000.00  | 2016P: \$1,000.00                  |
| <b>SUBTOTAL</b> |   |   |  | \$73,802.00                 |   |                                    |

\*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.

SCHEDULE B - PART 1

Statement covers period  
from 01/01/2014  
through 12/31/2014

**CALIFORNIA FORM 460**  
Page 15 of 24

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Ash Kalra for California - Assembly 2016

I.D. NUMBER  
1373591

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

## SUBTOTALS

## Schedule B Summary

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)

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

\* 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

FPPC Form 460 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC

# Schedule B - Part 2

## Loan Guarantors

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

SCHEDULE B - PART 2

|  |                            |
|--|----------------------------|
| Statement covers period<br>from 01/01/2014<br>through 12/31/2014 | <b>CALIFORNIA FORM 460</b> |
|  | Page 16 of 24              |
| I.D. Number 1373591  |                            |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Ash Kalra for California - Assembly 2016

| FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE   | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | LOAN               | AMOUNT GUARANTEED THIS PERIOD | CUMULATIVE TO DATE                              | BALANCE OUTSTANDING TO DATE |
|---|--|---|--------------------|-------------------------------|---|-----------------------------|
|   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | LENDER<br><br>DATE |                               | CALENDAR YEAR<br><br>PER ELECTION (IF REQUIRED) |                             |
|   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | LENDER<br><br>DATE |                               | CALENDAR YEAR<br><br>PER ELECTION (IF REQUIRED) |                             |
|   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | LENDER<br><br>DATE |                               | CALENDAR YEAR<br><br>PER ELECTION (IF REQUIRED) |                             |
|   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | LENDER<br><br>DATE |                               | CALENDAR YEAR<br><br>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<br>from <u>01/01/2014</u><br>through <u>12/31/2014</u> | <b>CALIFORNIA FORM 460</b>  |
|  | Page <u>17</u> of <u>24</u> |
| I.D. Number<br>1373591   |                             |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Ash Kalra for California - Assembly 2016

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE *   | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | DESCRIPTION OF GOODS OR SERVICES | AMOUNT/ FAIR MARKET VALUE | CUMULATIVE TO DATE<br>CALENDAR YEAR<br>(JAN 1 - DEC 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|---------------|---|--|---|----------------------------------|---------------------------|---|---------------------------------------|
|               |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   |                                  |                           |   |                                       |
|               |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   |                                  |                           |   |                                       |
|               |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   |                                  |                           |   |                                       |
|               |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   |                                  |                           |   |                                       |

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL**

## Schedule C Summary

- Amount received this period - nonmonetary contributions of \$100 or more.  
(Include all Schedule C subtotals.).....
- Amount received this period - unitemized nonmonetary contributions of less than \$100 .....
- 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.

|                         |            |                            |  |
|-------------------------|------------|----------------------------|--|
| Statement covers period |            | CALIFORNIA FORM <b>460</b> |  |
| from                    | 01/01/2014 |                            |  |
| through                 | 12/31/2014 | Page 18 of 24              |  |
|                         |            | I.D. NUMBER<br>1373591     |  |

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NAME OF FILER  
Ash Kalra for California - Assembly 2016

| DATE | NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR<br>MEASURE NUMBER OR LETTER AND JURISDICTION,<br>OR COMMITTEE | TYPE OF PAYMENT  | DESCRIPTION<br>(IF REQUIRED) | AMOUNT THIS<br>PERIOD | CUMULATIVE TO DATE<br>CALENDAR YEAR<br>(JAN.1 - DEC. 31) | PER ELECTION<br>TO DATE<br>(IF REQUIRED) |
|------|---|--|------------------------------|-----------------------|--|--|
|      |   | <input type="checkbox"/> Monetary<br>Contribution<br><input type="checkbox"/> Nonmonetary<br>Contribution<br><input type="checkbox"/> Independent<br>Expenditure |                              |                       |  |  |
|      | <input type="checkbox"/> Support <input type="checkbox"/> Oppose  |  |                              |                       |  |  |
|      |   | <input type="checkbox"/> Monetary<br>Contribution<br><input type="checkbox"/> Nonmonetary<br>Contribution<br><input type="checkbox"/> Independent<br>Expenditure |                              |                       |  |  |
|      | <input type="checkbox"/> Support <input type="checkbox"/> Oppose  |  |                              |                       |  |  |
|      |   | <input type="checkbox"/> Monetary<br>Contribution<br><input type="checkbox"/> Nonmonetary<br>Contribution<br><input type="checkbox"/> Independent<br>Expenditure |                              |                       |  |  |
|      | <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.) .....
- Unitemized contributions and independent expenditures made this period of under \$100 .....
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ..... **TOTAL** .....

# Schedule E Payments Made

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

SCHEDULE E

|  |                            |
|--|----------------------------|
| Statement covers period<br>from 01/01/2014<br>through 12/31/2014 | <b>CALIFORNIA FORM 460</b> |
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SEE INSTRUCTIONS ON REVERSE

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**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<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Democracy Engine<br>Washington, DC 20011                            | FND  |    |                        | \$121.60    |
| Democracy Engine<br>Washington, DC 20011                            | FND  |    |                        | \$300.30    |
| Democracy Engine<br>Washington, DC 20011                            | FND  |    |                        | \$380.98    |

\* 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.) .....                                 | \$821.96              |
| 2. Unitemized payments made this period of under \$100. ....   | \$50.00               |
| 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.) ..... | <b>TOTAL</b> \$871.96 |

# Schedule E (Continuation Sheet) Payments Made

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

SCHEDULE E (CONT.)

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers period                                   |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from  | 01/01/2014 |                                |
| through 12/31/2014  |            | Page 20 of 24                  |
| NAME OF FILER<br>Ash Kalra for California - Assembly 2016 |            | I.D. NUMBER<br>1373591         |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Ash Kalra for California - Assembly 2016

**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<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Democracy Engine<br>Washington, DC 20011  | FND  |    |                        | \$19.08     |
|   |      |    |                        |             |
|   |      |    |                        |             |
|   |      |    |                        |             |
|   |      |    |                        |             |
|   |      |    |                        |             |
|   |      |    |                        |             |

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

**SUBTOTAL** \$821.96

# Schedule F Accrued Expenses (Unpaid Bills)

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

SCHEDULE F

Statement covers period  
from 01/01/2014  
through 12/31/2014

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NAME OF FILER  
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**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<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR<br>DESCRIPTION OF PAYMENT | (a)<br>OUTSTANDING<br>BALANCE BEGINNING<br>OF THIS PERIOD | (b)<br>AMOUNT INCURRED<br>THIS PERIOD | (c)<br>AMOUNT PAID<br>THIS PERIOD<br>(ALSO REPORT ON E) | (d)<br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD |
|--|-----------------------------------|---|---------------------------------------|---|--|
| Warren & Associates, LLC<br>Novato, CA 94949                           | PRO/OFC                           | \$0.00  | \$681.50                              | \$0.00  | \$681.50   |
| Warren & Associates, LLC<br>Novato, CA 94949                           | PRO/OFC                           | \$0.00  | \$832.92                              | \$0.00  | \$832.92   |
|  |                                   |   |                                       |   |  |

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

**SUBTOTALS** \$0.00 \$1,514.42 \$0.00 \$1,514.42

## Schedule F Summary

- 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** \$1,514.42
- 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** \$0.00
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)..... **NET** \$1,514.42  
May be a negative number.

FPPC Form 460 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC

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.

Statement covers period
from 01/01/2014
through 12/31/2014

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

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

Table with 4 columns: NAME AND ADDRESS OF PAYEE OR CREDITOR, CODE, OR, DESCRIPTION OF PAYMENT, AMOUNT PAID. The table contains 5 empty rows for data entry.

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.

SCHEDULE H

|  |                            |
|--|----------------------------|
| Statement covers period<br>from 01/01/2014<br>through 12/31/2014 | <b>CALIFORNIA FORM 460</b> |
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| FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | (a)<br>OUTSTANDING<br>BALANCE<br>BEGINNING THIS<br>PERIOD | (b)<br>AMOUNT<br>LOANED THIS<br>PERIOD | (c)<br>REPAYMENT OR<br>FORGIVENESS<br>THIS PERIOD*                     | (d)<br>OUTSTANDING<br>BALANCE AT<br>CLOSE OF THIS<br>PERIOD | (e)<br>INTEREST<br>RECEIVED | (f)<br>ORIGINAL<br>AMOUNT OF<br>LOAN | (g)<br>CUMULATIVE<br>LOANS<br>TO DATE |
|--|---|---|--|--|---|-----------------------------|--------------------------------------|---------------------------------------|
|  |   |   |  | <input type="checkbox"/> PAID<br><br><input type="checkbox"/> FORGIVEN |   | _____ %<br>RATE             |                                      | CALENDAR YEAR<br><br>PER ELECTION**   |
|  |   |   |  |  | DATE DUE  |                             | DATE INCURRED                        |                                       |
|  |   |   |  | <input type="checkbox"/> PAID<br><br><input type="checkbox"/> FORGIVEN |   | _____ %<br>RATE             |                                      | CALENDAR YEAR<br><br>PER ELECTION**   |
|  |   |   |  |  | DATE DUE  |                             | DATE INCURRED                        |                                       |
| *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. |   | <b>SUBTOTALS</b>  |  |  |   |                             |                                      |                                       |

(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.) .....  
(Enter the net here and on the Summary Page, Column A, Line 7.)

**NET** (May be a negative number)

\*\* If Required

# Schedule I

## Miscellaneous Increases to Cash

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

SCHEDULE I

Statement covers period

from 01/01/2014

through 12/31/2014

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

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL** \$ .00

### Schedule I Summary

- Increases to cash of \$100 or more this period..... \$ .00
- Unitemized increases to cash under \$100 this period..... \$ .00
- Total of all interest received this period on loans made to others. (Schedule H, Column (e).)..... \$ .00
- Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)..... **TOTAL** \$ .00

FPPC Form 460 (June/01)  
FPPC Toll-Free Helpline: 866/ASK-FPPC