Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification 20190280 Number :					Repo Filed			CANDI	DATE		СОМ	MITTEE	✓	LOB	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:	•	FOOD	& W <i>A</i>	١TE	R ACTIO	ON IE I	PAC							
Street Address:	1616 P STREE	T NW #	±300														
City:	WASHINGTON	l					-	State:	DC			Zip Code: 20036					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	/ PRE-	- 2.	30 I PRI			POST-	3.		AMENDM REPORT?		Yes	No)	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	/ PRE	- 5. X			Y F ION	POST-	6.		TERMINA REPORT?		Yes	No)	√
report type)	ANNUAL REPORT	7.	Year 2020					G METHO				PAPER		V	DISKI	TTE	
Name of Office S	Sought by Candida	te:	•					DATE O	F ELE	CTIC)N	District Number	Office Code	Pai	rty Code	Cour	
	- ,							мо	DAY	Υ	EAR		10000			10000	
								11		3	2020		(SEE IN	STRUCTI	ONS FOR	CODES)
	Receipts and	МО	DAY	YEAR				мо	DAY	Y	EAR	FO	R OFFI	E USE	ONLY		
Expenditures	s trom:		9 15	20	020	ГО		10		19	2020						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			6,	504.78						
B. Total Monetary Contributions And Receipts (From Schedule I)							\$			12,	000.00						
C. Total Funds Available (Sum Of Lines A and B)							\$			18,	504.78						
D. Total Expenditures (From Schedule III)						\$			11,	378.39							
E. Ending Cash Balance (Subtract Line D From Line C)						\$			7,:	126.39							
F. Value Of In-	Kind Contributions	Receiv	ed (From Sc	hedu	le II)		\$				0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)			\$				0.00			•			
				AFF	IDAV	IT S	EC	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign h	nere. I	[f this i	s a C	and	didate re	eport, o	andi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, inc ete.	uding the	attached sch	edules	filed o	1 раре	er o	r by elect	ronic m	ediun	ı, are to t	he best o	f my knov	vledge	and bel	ief , tr	ue
Sworn to and subs	cribed before me this day of	i	20							:	Signature	of Perso	n Submit	ing Re	port		_
	Signatu	ro				_						Prin	ted Name	1			_
My Commission Ex	_											Ema	il				-
	мо	D	AY	YR					Arc	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Comn	nittee,	Candi	ida	te shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of r	ny knowle	edge and belie	ef this	politica	l com	mit	ttee has n	ot viola	ted a	ny provis	ions of the	e act of J	ıne 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before me this										s	ignature o	of Candida	ate			-
	day of					_						Printe	d Name				_
	Signature					_											_
My Commission Exp	-											Ema	il				
	МО	D	AY	YR		_			Area	Code		Daytime Telephone Number					

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FOOD & WATER ACTION IE PAC	From:	9/15/202	<u>0</u> To:	10/19/2020
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	12,000.00
TOTAL for the Reporting	Period	(3)	\$	12,000.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page 1, Page 1, Report Cover Page 2, Page			\$	12,000.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate valu	-			-				
Name of Filing Comm	nittee or Candidate		Reporting Period						
			From:			То	:		
		L			DATE			AMOUNT	
Full Name of Contribut	ing Committee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4))						
	•	•				-		DAGE TOTAL	

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

0.00

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee	e or Candidate		Reporting Period					
F			From: T			Го:		
					DATE		A	AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL \$0.00

PART C

Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

ame of Filing Committee or Candidate Report		Reporting	eporting Period					
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate	me of Filing Committee or Candidate				riod					
FOOD & WATER ACTION IE PAC			Fr	om:	9/15/2	<u>2020</u> To):	10/19/2020		
				D/	ATE		AMOUNT			
Full Name of Contributor GREEN ADVOCACY PROJECT				мо	DAY	YEAR				
Mailing Address 400 Hamilton Avenue				10	0	2020	\$	12,000.00		
City Palo Alto	State	Zip Code (I	lus 4)	10	8	2020				
	CA	94301								
Employer Name Green Advocacy Proj	ect			Occupat	Occupation NA					
Employer Mailing Address/Principal Pla Business	ce of	City		•	State		Zip Code	e (Plus 4)		
400 Hamilton Avenue		Palo A	lto		CA		94301			
Enter Grand Total of Part C on Scho	tion 3.			PA	GE TOTAL					
		,	, -,				\$	12,000.00		
						_				

OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or	Candidate		Report	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•	•	•	_	
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	GE TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	0.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period	I						
FOOD & WATER ACTION IE PAC	From:	<u>9/15/2020</u> To:	10/19/2020					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR								
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)								
TOTAL for the Reporting Pe	eriod (2)	\$	0.00					
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)								
TOTAL for the Reporting Pe	eriod (3)	\$	0.00					
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 1		\$	0.00					

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidat	:e		Reporting				
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	me of Filing Committee or Candidate			Re	porting l	Period					
					Fro	om:		To:	То:		
					•		DATE			AMOUNT	
Full Name of Contributor						МО	DAY	YEAR			
Mailing Address							\$	0.00			
City	State		Zip Code(I	Plus 4)							
Employer of Contributor						Occupa	ition		•		
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.							PAGE TOTAL 0.00				

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Cand	idate		Reporti	ng Period			
FOOD & WATER ACTION IE PAC			From	9/1	<u>5/2020</u>	То:	10/19/2020
				DATE			AMOUNT
To Whom Paid Convergence Targeted Communication	ations		мо	DAY	YEAR		
Mailing Address 1221 Connection	cut Ave NW, Suite 30	00	10	17	2020	\$	11,012.28
City Washington	State DC	Zip Code (Plus 4) 20036	Descrip Mail se	otion of Exp			
To Whom Paid Food & Water Action			МО	DAY	YEAR		
Mailing Address 1616 P Street	NW, Suite 300		9 30 2020			\$	4.70
City Washington	State DC	Zip Code (Plus 4) 20036		otion of Exp supplies pu			
To Whom Paid Food & Water Action			МО	DAY	YEAR		
Mailing Address 1616 P Street	NW, Suite 300		9	29	2020	\$	37.95
City Washington	State DC	Zip Code (Plus 4) 20036		otion of Exp services: Ta			
To Whom Paid Food & Water Action			МО	DAY	YEAR		
Mailing Address 1616 P Street	NW, Suite 300		10	9	2020	\$	116.92
City Washington	State DC	Zip Code (Plus 4) 20036	1	otion of Exp me: Tara 2			
To Whom Paid Food & Water Action			МО	DAY	YEAR		
Mailing Address 1616 P Street NW, Suite 300			10	10	2020	\$	19.32
City Washington	State DC	Zip Code (Plus 4) 20036	Description of Expenditure Staff time: Dianne Herron IE				

To Whom Paid			МО	DAY	YEAR			
Food & Water Action								
Mailing Address 1616 P Stree	t NW, Suite 300		10	10	2020	\$	5.81	
City Washington	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
DC 20036			Staff time: Nicole Miller IE					
To Whom Paid Food & Water Action			МО	DAY	YEAR			
Mailing Address								
Mailing Address 1616 P Street NW, Suite 300			10	10	2020	\$	19.32	
City Washington State Zip Code (Plus 4)			Descrip	otion of Exp	enditure			
	DC	20036	Staff ti	me: Shana	Danielso	n IE		
To Whom Paid			МО	DAY	YEAR			
Food & Water Action								
Mailing Address 1616 P Stree	t NW, Suite 300		10	17	2020	\$	162.09	
City Washington	State	Zip Code (Plus 4)	Descrip	otion of Exp	enditure			
	DC	20036	Staff ti	me: Tara Z	Zrinski IE			
							PAGE TOTAL	
Enter Grand Total of Expendi	tures on Page 1, Re	port Cover Page, Item D	•			\$	11,378.39	