Pasiniant Committee		_		COVER PAGE
Recipient Committee Campaign Statement Cover Page			Date Stamp	CALIFORNIA 460
Government Code Sections 84200-84216.5) SEE INSTRUCTIONS ON REVERSE	Statement covers period from07/01/2016 through09/24/2016	Date of election if applicable: (Month, Day, Year)	E-Filed 09/30/2016 09:09:54 Filing ID: 161776616	Page 1 of 15 For Official Use Only
I. Type of Recipient Committee: All Committees – (Solution State Candidate Controlled Committee State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	2. Type of Statement:	Special Suppler ermination) Stateme	ly Statement Odd-Year Report mental Preelection ent - Attach Form 495
Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE Pattie Cortese for ESUHSD Board of Trustees	•	Treasurer(s) NAME OF TREASURER Pattie Cortese MAILING ADDRESS		
STREET ADDRESS (NO P.O. BOX)		CITY San Jose	STATE ZIP CODI	E AREA CODE/PHONE
	CODE AREA CODE/PHONE 127 BOX	NAME OF ASSISTANT TREASUR	RER, IF ANY	
CITY STATE ZIP (CODE AREA CODE/PHONE	СІТҮ	STATE ZIP COD	E AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDR	ESS	
I have used all reasonable diligence in preparing and review under penalty of perjury under the laws of the State of Califor Executed on	nia that the foregoing is true and correct. By Pattie Cor		Freasurer ponent or Responsible Officer of Sponsor	is true and complete. I certify
Executed on	Ву	Signature of Controlling Officeholder, Candidate, Sta	ate Measure Proponent	— FPPC Form 460 (Jan/2016)

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2									
	ORNIA ORM	_	16 0	0					
Page _	2	of _	15						

Officeholder or Candidate Controlled Com	nmittee			6.	Primarily Formed Ball	ot Measure	Committee)	
NAME OF OFFICEHOLDER OR CANDIDATE					NAME OF BALLOT MEASURE				
Pattie Cortese									
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIST	RICT NUMBER IF	APPLICABL	_E)		BALLOT NO. OR LETTER	JURISDICTI	ON		
Board of Education									OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP		Identify the controlling of	ficabaldar ca	ndidato or s	tata maasura	proponent if any
	San Jose	CA	95127				<u> </u>	late illeasure	proponent, it an
					NAME OF OFFICEHOLDER, CA	NDIDATE, OR PI	ROPONENT		
Related Committees Not Included in this S	Statement: L	ist any cor	mmittees						
not included in this statement that are controlled by yo contributions or make expenditures on behalf of your	ou or are primarii	•			OFFICE SOUGHT OR HELD			DISTRICT NO.	IF ANY
COMMITTEE NAME	I.D. NUMBER	₹							
				7	Primarily Formed Can	didate/Offi	ceholder Co	ommittee /	ist names of
NAME OF TREASURER	CONTROLLE	D COMMITT	TEE?	٠.	officeholder(s) or candidate(
	☐ YES	□ NO)		NAME OF OFFICE IOLDED OD	CANDIDATE	Torrior cou	IGHT OR HELD	
COMMITTEE ADDRESS STREET ADDRESS (NO P.C	D. BOX)				NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	IGHT OR HELD	SUPPORT OPPOSE
CITY STATE ZII	P CODE	AREA COL	DE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	IGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER	?							
	i.s. Nomber	•			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	IGHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLE	D COMMITT	TEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	IGHT OR HELD	
	☐ YES	□ NO)						SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.C	D. BOX)								
OLT V	D 0005	1051.005	DE /DLIONE						
CITY STATE ZII	P CODE	AREA COL	JE/PHONE		Atta	ch continuati	ion sheets if	necessarv	

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

Column A

TOTAL THIS PERIOD

(FROMATTACHED SCHEDULES)

25,637.00

25,637.00

0.00

0.00

Staten	nent covers period	CALIFORNIA 46			460
from	07/01/2016	FORM TO			
through _	09/24/2016	Page _	3	_ of _	15

SUMMARY PAGE

SEE INSTRUCTIONS ON REVERSE

Contributions Received

Current Cash Statement

NAME OF FILER

Pattie Cortese for ESUHSD Board of Trustees 2016

3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1+2 \$ _____

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

1/1 through 6/30 7/1 to Date

20. Contributions
Received \$

I.D. NUMBER

1381088

 Expenditures Made

 6. Payments Made
 Schedule E, Line 4
 7,270.84
 7,276.84

 7. Loans Made
 Schedule H, Line 3
 0.00
 0.00

 8. SUBTOTAL CASH PAYMENTS
 Add Lines 6+7
 7,270.84
 7,270.84

 9. Accrued Expenses (Unpaid Bills)
 Schedule F, Line 3
 0.00
 0.00

 10. Nonmonetary Adjustment
 Schedule C, Line 3
 0.00
 0.00

 11. TOTAL EXPENDITURES MADE
 Add Lines 8+9+10
 \$ 7,270.84
 \$ 7,276.84

Expenditure Limit Summary for State Candidates

21. Expenditures Made

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

Date of Election (mm/dd/yy)	Total to Date
	_ \$

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

Cash Equivalents and Outstanding Debts

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).

To calculate Column B, add

Column B

CALENDAR YEAR

TOTAL TO DATE

\$ 25,637.00

25,637.00

25,637.00

0.00

*Amounts in this section may be different from amounts reported in Column B.

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

-	A Contributions Received		ts may be rounded whole dollars.	Statement cover	016	FO	SCHEDULE 50RNIA 460
NAME OF FILER						I.D. NUN	MBER
Pattie Cort	ese for ESUHSD Board of Trustees 2016					138108	38
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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO I CALENDAR YE. (JAN. 1 - DEC. :	AR	PER ELECTION TO DATE (IF REQUIRED)
09/06/2016	Edward Alvarez Shell Beach, CA 93449		President The Foundation for Hispanic Education	200.00	20	00.00	
09/10/2016	Ruth Ashford San Jose, CA 95121		Volunteer Rotary International	100.00	1(00.00	
08/30/2016	Biehl for School Board 2014 (ID# 1289099) San Jose, CA 95148	☐IND IND IND IND IND IND IND IND		100.00	1(00.00	
09/12/2016	Kenneth Borelli San Jose, CA 95127		President Italian American Heritage Foundation	100.00	1(00.00	
09/07/2016	Nina Boyd San Jose, CA 95125		Owner Boyd Properties	100.00	1(00.00	
			SUBTOTAL	\$ 600.00			

Schedule A Summary

Amount received this period – itemized monetary contributions.
 (Include all Schedule A subtotals.) \$ 25,050.00

 Amount received this period – unitemized monetary contributions of less than \$100 \$ 587.00

 *Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

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

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

from

07/01/2016

AME OF FILER	se for ESUHSD Board of Trustees 2016		through09/24/2016		Page5 of15 I.D. NUMBER 1381088		
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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
09/24/2016	Michael Bui san Jose, CA 95110		Real Estate Self Employed	500.00		00.00	
09/17/2016	Pedro Carrillo San Jose, CA 95128	IND COM OTH PTY SCC	Principal and Founder Silicon Valley Advisors	250.00	2	50.00	
09/05/2016	Rabia Chaudhry San Jose, CA 95136		Principal Macrha Consulting	100.00	1	00.00	
09/06/2016	Lawrence Clark San Jose, CA 95126		President Technology Credit Corp	100.00	1	00.00	
09/06/2016	Tony Coelho Rehoboth Beach, DE 19971	☑IND □COM □OTH □PTY □SCC	Real Estate Investments Self-Employed	500.00	5	00.00	
			SUBTOTAL	1,450.00			

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Monetary	Contributions Received	Amounts may to whole		from07/01/	•	CALIF FO	ORM 460
				through 09/24/	2016	Page _	6 of15
NAME OF FILER			<u>_</u>			I.D. NU	MBER
Pattie Corte	se for ESUHSD Board of Trustees 2016					13810	88
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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR . 31)	PER ELECTION TO DATE (IF REQUIRED)
09/08/2016	Dominic Cortese Pebble Beach, CA 93953	⊠IND □COM □OTH □PTY □SCC	Retired Retired	1,000.00	1,0	00.00	
09/07/2016	Mary Liz Cortese Santa Cruz, CA 95060		Owner Cortese Group	100.00	1	00.00	
09/08/2016	Suzanne Cortese Pebble Beach, CA 93953		Retired Retired	1,000.00	1,0	00.00	
09/09/2016	Morteza Danesh San Jose, CA 95123	IND COM OTH PTY SCC	Retired Retired	200.00	2	00.00	
09/09/2016	Rodney Diridon Sr. Santa Clara, CA 95050		Retired Retired	200.00	2	00.00	
			SUBTOTAL	2,500.00			

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA 460

Statement covers period

				from07/01/	2016	FORM TOO
				through09/24/	^{'2016} Pa	ge 7 of 15
NAME OF FILER			-		I.D	NUMBER
Pattie Cortes	se for ESUHSD Board of Trustees 2016				13	81088
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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DAT CALENDAR YEAR (JAN. 1 - DEC. 31)	TO DATE (IF REQUIRED)
08/20/2016	East Side Teachers PAC (ID# 1249672) San Jose, CA 95127	□IND IND OM OTH PTY SCC		5,000.00	15,000.	00
09/12/2016	East Side Teachers PAC (ID# 1249672) San Jose, CA 95127	□IND IND OH OTH PTY SCC		10,000.00	15,000.	00
09/09/2016	Enlighten Enterprise, Inc Union City, CA 94587	□IND □COM ☑OTH □PTY □SCC		100.00	100.	00
09/13/2016	Michael Fox Saratoga, CA 95070	IND COM OTH PTY SCC	Retired Retired	500.00	500.1	
09/07/2016	Amanda Hawes San Jose, CA 95112	IND COM OTH PTY SCC	Lawyer Self-Employed	100.00	100.	00
			SUBTOTAL	\$ 15,700.00		

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

from

07/01/2016

NAME OF FILER	se for ESUHSD Board of Trustees 2016			through 09/24/	2016	Page I.D. NUM 13810	
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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
09/07/2016	Kimsanh Ho San Jose, CA 95136		Administrator Evergreen Valley College	100.00	1	00.00	
09/21/2016	Katherine Hudson Carmel, CA 93923	IND COM OTH PTY SCC	Realtor Alin Pinel	200.00	2	00.00	
09/06/2016	Ray Keener Boulder, CO 80303		Executive Director Bicycle Product Suppliers Association	100.00	1	00.00	
09/24/2016	Rosalie Ledesma San Jose, CA 95120		Executive Director SJ Evergreen College District	100.00	1	00.00	
09/14/2016	John Lee San Jose, CA 95129		Construction Self-Employed	100.00	1	00.00	
			SUBTOTAL	\$ 600.00			

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.) CALIFORNIA 460

Statement covers period

07/01/2016

				from07/01/	2016	FORM TO	
				through ^{09/24/}	2016	Page9 of15	
NAME OF FILER			-			I.D. NUMBER	
Pattie Cortes	se for ESUHSD Board of Trustees 2016					1381088	
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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DEC. (JAN. 1 - DEC. 3	AR TO DATE 31) (IF REQUIRED)	
09/14/2016	Ming Lee Fremont, CA 94539		Solar Self-Employed	100.00		0.00	
08/30/2016	John Longwell Aptos, CA 95003	⊠IND □COM □OTH □PTY □SCC	Professor Corning Community College	1,000.00	1,00	0.00	
09/06/2016	Meri Maben San Jose, CA 95113		Consultant Silicon Valley Education Foundation	100.00	10	0.00	
09/06/2016	John Machado San Jose, CA 95113		Real Estate Broker Self-Employed	200.00		0.00	
09/12/2016	Joseph McCarthy Cupertino, CA 95014		Retired Retired	200.00	20	0.00	
			SUBTOTAL	1,600.00			
							=

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.) CALIFORNIA 460

Statement covers period

07/01/2016

				from07/01/	2016	FORM	700
				through09/24/	2016	Page10	of15
NAME OF FILER			_			I.D. NUMBER	
Pattie Cortese for ESUHSD Boa	rd of Trustees 2016					1381088	
	ADDRESS AND ZIP CODE OF CONTRIBUTOR (MITTEE, 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 DEC. (JAN. 1 - DEC. (AR	R ELECTION TO DATE REQUIRED)
09/08/2016 Julia Miller Sunnyvale, CA 9	4087		Retired Retired	100.00	10	0.00	
09/06/2016 Russ Miyoshi San Jose, CA 95	5112	⊠IND □COM □OTH □PTY □SCC	Space Planner Cushman & Wakefield	300.00	30	0.00	
09/12/2016 Mila Quibilan San Jose, CA 95	5136		Office Manager Ron E Quibilan, DDS	250.00	25	0.00	
09/24/2016 Nasreen Rahim San Jose, CA 95	3135		Professor EVC	100.00	10	0.00	
08/18/2016 Steve Rathmann Ben Lomond, CA	95005		Software Developer Smith Micro	250.00	25	0.00	
			SUBTOTAL	1,000.00			

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

PTY - Political Party

SCC – Small Contributor Committee

Amounts may be rounded to whole dollars.

SCHEDULE A	(CONT.)

CALIFORNIA 460 **FORM** 07/01/2016 from

09/24/2016 Page _____11__ of ____15___ through_

I.D. NUMBER

Statement covers period

Pattie Cortes	se for ESUHSD Board of Trustees 2016					1381088
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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO I CALENDAR YE (JAN. 1 - DEC.	AR TO DATE
09/05/2016	David Roberson San Jose, CA 95129		Manages & Operates SV Property Management Group	250.00	25	0.00
09/07/2016	Tony Santos Alviso, CA 95002	IND COM OTH PTY SCC	Owner Santos General Contracting	200.00	20	0.00
09/06/2016	Athar Siddigee Sunnyvale, CA 94087		HR SanDisk	100.00	10	0.00
09/23/2016	Sprinkler Fitters & Apprentices Local 483 PAC (ID# 1298012) Sacramento, CA 95814	□IND IND COM OTH PTY SCC		250.00	25	50.00
09/05/2016	Karen Sweetland Campbell, CA 95008	☑IND □COM □OTH □PTY □SCC	Retired Retired	100.00	10	0.00
	SUBTOTAL \$ 900.00					

*Contributor Codes

IND - Individual

NAME OF FILER

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may to whole	le dollars.		07/01/2016		CALIFORNIA 460	
				through09/24/	2016	Page _	of15	
NAME OF FILER			<u> </u>			I.D. NUN	MBER	
Pattie Corte	se for ESUHSD Board of Trustees 2016					138108	88	
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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
09/19/2016	Catherine Tompkinson San Jose, CA 95127		Public Affairs The Tompkinson Group	100.00	1	00.00		
09/17/2016	Thomas Wheatley San Jose, CA 95125		Retired Retired	300.00	31	00.00		
09/14/2016	Cherngi Wu Cupertino, CA 95014		President Meritronics	100.00	1	00.00		
09/14/2016	Sherry Yeung Santa Clara, CA 95051	IND COM OTH PTY SCC	Retired Retired	200.00	2	00.00		
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						
			SUBTOTALS	700.00				

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Schedule E
Payments Made

Amounts may be rounded to whole dollars.

		SCHEDULE E
Staten	nent covers period	CALIFORNIA 460
from	07/01/2016	FORM TOO
through	09/24/2016	Page13 of15
		I.D. NUMBER
		1381088

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Pattie Cortese for ESUHSD Board of Trustees 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, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Community Partners, Inc Santa Cruz, CA 95062	CMP	Lawn Signs	1,908.56
Pattie Cortese San Jose, CA 95127	VOT	Voter File/Data	92.00
Pattie Cortese San Jose, CA 95127	FIL	Candidate filling Fees/Ballot Statement	4,760.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL\$ 6,760.56

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)\$_	7,164.61
2. Unitemized payments made this period of under \$100\$_	106.23
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.)	7,270.84

Schedule E	
(Continuatio	n Sheet)
Payments M	ade

Amounts may be rounded to whole dollars.

State	ment covers period	CALIFORNIA 160
from	07/01/2016	FORM 400
through	09/24/2016	Page 14 of 15
		I.D. NUMBER

1381088

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Pattie Cortese for ESUHSD Board of Trustees 2016

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

campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs meetings and appearances campaign consultants RFD returned contributions CNS 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 polling and survey research staff/spouse travel, lodging, and meals fundraising events POL independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor POS

LEG legal defense PRO professional services (legal, accounting) VOT voter registration

T campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Paypal San Jose, CA 95131	WEB	Fees for accepting contributions	8.23
Paypal San Jose, CA 95131	WEB	Fees for on-line Contributions	81.89
Paypal San Jose, CA 95131	WEB	Fees for on-line Contributions	13.95
Votercircle Los Altos, CA 94022	WEB	Voter Campaign Software	300.00

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

SUBTOTAL \$

404.05

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

Amounts may be rounded to whole dollars.

	SCHEDULE G
Statement covers period	CALIFORNIA 460
from07/01/2016	FORM 40U
through09/24/2016	Page 15 of 15
	I.D. NUMBER
	1381088

Pattie Cortese for ESUHSD Board of Trustees 2016 NAME OF AGENT OR INDEPENDENT CONTRACTOR

Pattie Cortese

NAME OF FILER

SEE INSTRUCTIONS ON REVERSE

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

campaign paraphernalia/misc. member communications radio airtime and production costs campaign consultants meetings and appearances returned contributions contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals fundraising events POL polling and survey research transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF LEG legal defense professional services (legal, accounting) VOT voter registration

LIT campaign literature and mailings

PRT print ads WEB information technology costs (internet, e-mail)

^{*} 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
SCC Registrar of Voters San Jose, CA 95122	VOT	Voter Registration Data	92.00
SCC Registrar of Voters San Jose, CA 95122	FIL	Candidate Filing Fees/Ballot Statement	4,760.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

4,852.00

^{*} 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.