Recipient Committee Date Stamp CALIFORNIA 1 **Campaign Statement** Cover Page Date of election if applicable: Statement covers period (Month, Day, Year) from September 25, 2022 November 8, 2022 through October 22, 2022 SEE INSTRUCTIONS ON REVERSE 2. Type of Statement: 1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. ▼ Officeholder, Candidate Controlled Committee Preelection Statement Primarily Formed Ballot Measure ☐ Quarterly Statement
☐ Special Odd-Year Report Semi-annual Statement State Candidate Election Committee Committee Termination Statement O Recall Controlled Sponsored (Also file a Form 410 Termination) (Also Complete Part 5) Amendment (Explain below) (Also Complete Part 6) General Purpose Committee Primarily Formed Candidate/ Sponsored Officeholder Committee Small Contributor Committee Political Party/Central Committee (Also Complete Part 7) I.D. NUMBER 3. Committee Information Treasurer(s) 1402360 COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) NAME OF TREASURER Tony Wu for City Council 2022 Stephany Barbosa MAILING ADDRESS STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE NAME OF ASSISTANT TREASURER, IF ANY MAILING ADDRESS MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX CITY STATE ZIP CODE AREA CODE/PHONE CITY ZIP CODE AREA CODE/PHONE OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS 4. Verification I have used all reasonable diligence in preparing and reviewing this statement and to the best 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 tru Executed on October 24, 2022 October 24, 2022 Executed on _ ponsible Officer of Sponsor Executed on _ Signature of Controlling Officeholder, Candidate, State Measure Proponent

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on _

FPPC Form 460 (Jan/2016))

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Recipient Committee Campaign Statement Cover Page — Part 2

COVE	R PAGE - PART Z
CALIFOR FORM	NIA 460
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Officeholder or Candidate Controlled	Committee	6.	Primarily Formed Ballo	t Measure	Committee	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
Tony Wu						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION A	AND DISTRICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTI	ON	SUPPORT
West Covina City Council, District 5						OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STI	REET) CITY STATE ZIP		Identify the controlling office	holder, candi	date, or state measure pr	oponent, if any.
			NAME OF OFFICEHOLDER, CA	NDIDATE, OR 8	PROPONENT	
Related Committees Not Included in the not included in this statement that are controlled contributions or make expenditures on behalf of the notation of the	by you or are primarily formed to receive		OFFICE SOUGHT OR HELD		DISTRICTA	O. IF ANY
COMMITTEE NAME	I.D. NUMBER					
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Cano officeholder(s) or candidate(s)	for which this	committee is primarily for	ned.
OMMITTEE ADDRESS STREET ADDRESS	(NO P.O. BOX)		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEI	SUPPOR
CITY STATE	ZIP CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEI	D SUPPOR
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEI	.D SUPPOR
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEI	SUPPOR
OMMITTEE ADDRESS STREET ADDRESS	(NO P.O. BOX)				<u> </u>	☐ OPPOSE
CITY STATE	ZIP CODE AREA CODE/PHONE		Atta	ch continuati	on sheets if necessary	

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE CALIFORNIA FORM Statement covers period

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from September 25, 2022

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Tony Wu for City Council 2022 Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	October 22, 2022 Page 3 of 8 I.D. NUMBER 1402360 Calendar Year Summary for Candidates Running in Both the State Primary and
1. Monetary Contributions	\$\ \frac{2,000.00}{0}\$ \$\frac{2,000.00}{0}\$ \$\frac{2,000.00}{0}\$	\$\frac{2,500.00}{10,000.00}\$ \$\frac{12,500.00}{0}\$ \$\frac{12,500.00}{12,500.00}\$	General Elections 1/1 through 6/30 7/1 to Date 20. Contributions Received \$ \$ 21. Expenditures Made \$ \$ **Expenditures** **Made \$ \$ **Made \$ **Made \$
Expenditures Made 6. Payments Made	\$\ \begin{array}{c} 8,067.98 \\ 0 \\ 8,067.98 \\ \ -5,370.66 \\ 0 \\ \$\$ 2,697.32 \end{array}	\$\frac{14,800.38}{0}\$ \$\frac{14,800.38}{11.99}\$ \$\frac{0}{0}\$ \$\frac{14,812.37}{0}\$	Expenditure Limit Summary for State Candidates 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy)
Current Cash Statement 12. Beginning Cash Balance	\$\frac{7,148.17}{2,000.00} \frac{0}{8067.98} \\$\frac{1,080.19}{\text{.19}} \$\frac{0}{10,011.99}	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).	*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)

Schedule Monetary	e A y Contributions Received		Amounts may be rounded to whole dollars. Statement covers from September 25, 2 through October 22,			FORM FORM				
	IONS ON REVERSE			through October	22, 2022					
Tony Wu for	r City Council 2022					1.D. N 14023	UMBER 60			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. 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)			
9/30/2022	Huy Trieu	☑IND □ COM □ OTH □ PTY □ SCC	Manager San Pablo Supermarket	\$500.00	\$500.00					
10/3/2022	Dat Huynh	☑IND □COM □OTH □PTY □SCC	I.T. San Pablo Supermarket	\$500.00	\$500.00					
10/3/2022	Tai Tuan Huynh	☑IND □COM □OTH □PTY □SCC	LT. El Monte Superstore	\$500.00	\$500.00					
10/3/2022	Kent Huynh	☑IND □COM □OTH □PTY □SCC	Retired	\$500.00	\$500.00					
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC								
			SUBTOTAL \$	\$ 2,000.00						
1. Amount re (Include al	A Summary eceived this period – itemized monetary contributions. Il Schedule A subtotals.)		5		IND COM OTH -	(other	ual ient Committee than PTY or SCC) (e.g., business entity)			

3. Total monetary contributions received this period.

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SCC - Small Contributor Committee

Cahadula D. David	nounts may be ro		_	Statement covers period CALIFORNIA 4 CA					
Schedule B – Part 1		to whole dollar	S.			-	CALIFORN	11A 460	
Loans Received					from September	25, 2022	FORM	700	
SEE INSTRUCTIONS ON REVERSE					through October	r 22, 2022	Page 5	of_8	
NAME OF FILER							I.D. NUMBER		
Tony Wu for City Council 2022							1402360		
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	RECEIVED THIS	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD	BALANCE AT	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE	
Tony T. Wu	Supreme Funding			☐ PAID	s 10000		s_10000	CALÉNDAR YEAR	
Tony 1. Wu	Corporation		•	\$	\$ 10000	RATE	\$_10000	\$	
				☐ FORGIVEN]		PER ELECTION**	
		\$ 10000	\$	\$		s	8/2/2022	\$	
DIND □ COM □ OTH □ PTY □ SCC					DATE DUE		DATE INCURRED		
				☐ PAID				CALENDAR YEAR	
				\$	s	*	\$	s	
				☐ FORGIVEN		RATE		PER ELECTION**	
				s		s			
[†] □ IND □ COM □ OTH □ PTY □ SCC			s	,	DATE DUE		DATE INCURRED	*	
				PAID				CALENDAR YEAR	
•			:	\$	\$	%	s	\$	
				FORGIVEN		RATE		PER ELECTION**	
				•					
IND COM OTH PTY SCC		*	*	V	DATE DUE	3	DATE INCURRED	•	
	s	SUBTOTALS \$	0 \$	0	\$ 10000	\$ 0	3113 35 1830 3 1830 3 1830		
Schedule B Summary						(Enter (e) on Schedu		Constitution and and an installation and	
Loans received this period				e 0					
(Total Column (b) plus unitemized loan	s of less than \$100 \								
2. Loans paid or forgiven this period				\$			ontributor Codes	·	
(Total Column (c) plus loans under \$10	0 paid or forgiven.)						D – Individual DM – Recipient C	ommittee	
(Include loans paid by a third party that				. 0			(other than I	PTY or SCC)	
B. Net change this period. (Subtract Line		***************************************	***************************************	NET \$		OT	H – Other (e.g., l Y – Political Part	business entity)	
Enter the net here and on the Summar	y Page, Column A, Line 2.							y butor Committee	
•				(Ma	ay be a negative number)	_			

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

** If required.

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Schedule E Payments Made	Amounts may l to whole d			Statement covers period from September 25, 2022	CALIF FC	SCHEDULE FORNIA 460 DRM
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				through October 22, 2022	Page _	6 of 8
Tony Wu for City Council 2022					14023	60
CODES: If one of the following codes accurately descri CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member commeetings and OFC office expension circumphone banks POL polling and s POS postage, deli	munications d appearances ses lating urvey researc very and mes	s h	RAD radio airtime and production of returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production of the candidate travel, lodging, and staff/spouse travel, lodging, and staff/spouse travel, lodging, and transfer between committees voter registration WEB information technology costs of	ection cost meals nd meals of the san	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE (DR DESC	CRIPTION OF PAYMENT		AMOUNT PAID
Citi Card				previous statement (September nd this Schedule G for rest of item	ıs	\$8,067.98
			2			
* Payments that are contributions or independent expenditures must also	be summarized on Sche	dule D.		SUE	STOTAL	\$ \$8,067.98
Schedule E Summary						
1. Itemized payments made this period. (Include all Schedu					\$	88,067.98
2. Unitemized payments made this period of under \$100	***************************************	••••••			\$	·
3. Total interest paid this period on loans. (Enter amount from	om Schedule B, Par	t 1, Columr	ı (e).)		\$ <u></u>)
4. Total payments made this period. (Add Lines 1, 2, and 3	. Enter here and on	the Summa	ary Page, Column A	, Line 6.) TOT	AL \$_	88,067.98

Schedule F Accrued Expenses (Unpaid Bills)	Amounts may be round to whole dollars.	Statement cov from September through October	25, 2022	CALIFOR FORM	400	
SEE INSTRUCTIONS ON REVERSE			through October	DE, DUDA	Page 7	of_8
NAME OF FILER			(I.D. NUMBER	₹
Tony Wu for City Council 2022					1402360	
					11011	
CODES: If one of the following codes accurately describe						
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 communication MTG meetings and appearan OFC office expenses PET petition circulating PHO phone banks POL polling and survey rese POS postage, delivery and r PRO professional services (I PRT print ads	nces earch nessenger services	RAD radio airtime a RFD returned contri SAL campaign worl TEL t.v. or cable air TRC candidate trave TRS staff/spouse tra TSF transfer betwee VOT voter registrati WEB information tec	butions kers' salaries time and product el, lodging, and n avel, lodging, and en committees of on	tion costs neals d meals f the same car	•
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT P THIS PERI (ALSO REPORT	OD BA	(d) OUTSTANDING LANCE AT CLOSE OF THIS PERIOD
Citi Card	Credit Card: See Schedule G	\$5,382.65	\$2,697.32	\$8,067.98	\$1	1.99
					7	
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS \$	5,382.65	\$ 2,697.32	8,067.98	\$ 11	.99
Schedule F Summary						
Total accrued expenses incurred this period. (Include all Seaccrued expenses of \$100 or more, plus total uniternized as	chedule F, Column (b) sub accrued expenses under \$	ototals for 3100.)	INCU	RRED TOTA	LS \$	7.32
Total accrued expenses paid this period. (Include all Sche accrued expenses of \$100 or more, plus total uniternized p	edule F, Column (c) subtote payments on accrued expe	als for payments on enses under \$100.).		.PAID TOTA	LS \$.98
Net change this period. (Subtract Line 2 from Line 1. Enter on the Summary Page, Column A, Line 9.)						

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

RAD radio airtime and production costs CMP campaign paraphernalia/misc. MBR member communications RFD returned contributions MTG meetings and appearances CNS campaign consultants SAL campaign workers' salaries CTB contribution (explain nonmonetary)* OFC office expenses CVC civic donations PET petition circulating t.v. or cable airtime and production costs candidate travel, lodging, and meals PHO phone banks candidate filing/ballot fees POL polling and survey research staff/spouse travel, lodging, and meals FND fundraising events transfer between committees of the same candidate/sponsor IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services voter registration PRO professional services (legal, accounting) LEG legal defense 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 LD. NUMBER)	CODE	CODE OR DESCRIPTION OF PAYMENT	
GoDaddy		Website Monthly Fee (October Statement)	\$11.99
Press Print	LIT		\$2,685.33
• .			

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 2,697.32

^{*} 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.