

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

COVER PAGE

Statement covers period from 01/01/2026 through 06/30/2026	Date of election if applicable: (Month, Day, Year) 11/03/2026	Date Stamp E-Filed 07/16/2026 16:47:15 Filing ID: 217004543	CALIFORNIA FORM 460 Page 1 of 20 For Official Use Only
---	--	--	---

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
<small>(Also Complete Part 5)</small> | ☐ Primarily Formed Ballot Measure Committee
☐ Controlled
☐ Sponsored
<small>(Also Complete Part 6)</small> |
| ☐ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☐ Political Party/Central Committee | ☐ Primarily Formed Candidate/Officeholder Committee
<small>(Also Complete Part 7)</small> |

2. Type of Statement:

- | | |
|--|---|
| ☐ Preelection Statement | ☐ Quarterly Statement |
| ☒ Semi-annual Statement | ☐ Special Odd-Year Report |
| ☐ Termination Statement
(Also file a Form 410 Termination) | ☐ Supplemental Preelection Statement - Attach Form 495 |
| ☐ Amendment (Explain below) | |
- _____

3. Committee Information

I.D. NUMBER
1450178

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Anna Rohrbough for Council 2026

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Folsom	CA	95630	(425) 501-5415

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE
------	-------	----------	-----------------

OPTIONAL: FAX / E-MAIL ADDRESS
ANNA@ANNAROHRBOUGH.COM

Treasurer(s)

NAME OF TREASURER

Anna Rohrbough

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Folsom	CA	95639	

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
------	-------	----------	-----------------

OPTIONAL: FAX / E-MAIL ADDRESS
anna@annarohrbough.com

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 07/16/2026
Date

Executed on 07/16/2026
Date

Executed on _____
Date

Executed on _____
Date

By Anna Rohrbough
Signature of Treasurer or Assistant Treasurer

By Anna Rohrbough
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Recipient Committee
Campaign Statement
Cover Page — Part 2

COVER PAGE - PART 2

CALIFORNIA
FORM 460

Page 2 of 20

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Anna Rohrbough

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

City Council Member: City of Folsom District 5

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP
	Folsom	CA	95630

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 make expenditures on behalf of your candidacy.*

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? ☐ YES ☐ NO

COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? ☐ YES ☐ NO

COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed 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 Candidate/Officeholder 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

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from 01/01/2026 through 06/30/2026	CALIFORNIA FORM 460 Page 3 of 20 I.D. NUMBER 1450178
--	--

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Anna Rohrbough for Council 2026

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions Schedule A, Line 3	\$ 9,190.00	\$ 9,190.00
2. Loans Received Schedule B, Line 3	1,000.00	1,000.00
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 10,190.00	\$ 10,190.00
4. Nonmonetary Contributions Schedule C, Line 3	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 10,190.00	\$ 10,190.00

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

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

Expenditures Made

6. Payments Made Schedule E, Line 4	\$ 2,151.62	\$ 2,151.62
7. Loans Made Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 2,151.62	\$ 2,151.62
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. TOTALEXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 2,151.62	\$ 2,151.62

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)	
Date of Election (mm/dd/yy)	Total to Date
/ /	\$
/ /	\$

Current Cash Statement

Current Cash Statement		
12. Beginning Cash Balance	Previous Summary Page, Line 16	\$ 0.00
13. Cash Receipts	Column A, Line 3 above	10,190.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4	0.00
15. Cash Payments	Column A, Line 8 above	2,151.62
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$ 8,038.38
If this is a termination statement, Line 16 must be zero.		
17. LOAN GUARANTEES RECEIVED	Schedule B, Part 2	\$ 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

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	\$ 1,000.00

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

Schedule A Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period
from 01/01/2026
through 06/30/2026

CALIFORNIA
FORM **460**

Page 4 of 20

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Anna Rohrbough for Council 2026

I.D. NUMBER

1450178

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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/11/2026	James Ortega Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	150.00	150.00	G2026 \$150.00
02/11/2026	Gary Qualset Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Program Advisor State of California	150.00	150.00	G2026 \$150.00
02/25/2026	Lynne Bailey Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Teacher United Auburn Indian Community Tribal School	150.00	150.00	G2026 \$150.00
02/25/2026	Michelle Brattmiller Sacramento, CA 95814	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Government Affairs MMS Strategies	150.00	150.00	G2026 \$150.00
02/25/2026	Susan Frost Berryville, AR 72616	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	100.00	100.00	G2026 \$100.00
SUBTOTAL \$				700.00		

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 7,274.00
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 1,916.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 9,190.00

*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

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from 01/01/2026 through 06/30/2026		CALIFORNIA FORM 460
Page 5 of 20		
NAME OF FILER Anna Rohrbough for Council 2026		I.D. NUMBER 1450178

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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/25/2026	James Graham Gold River, CA 95670	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	150.00	150.00	G2026 \$150.00
02/25/2026	Mona Graham Gold River, CA 95670	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	150.00	150.00	G2026 \$150.00
02/25/2026	Lisa Ladd Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	150.00	150.00	G2026 \$150.00
02/25/2026	David Reid Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Attorney Receivables Management Assoc International	150.00	150.00	G2026 \$150.00
02/27/2026	Helen Bahry Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	150.00	150.00	G2026 \$150.00
SUBTOTAL \$				750.00		

***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

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from 01/01/2026 through 06/30/2026		CALIFORNIA FORM 460 Page 6 of 20
NAME OF FILER Anna Rohrbough for Council 2026		
		I.D. NUMBER 1450178

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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/27/2026	Rose Bai Elk Grove, CA 95757	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	150.00	150.00	G2026 \$150.00
02/27/2026	Frank Buckley Okatie, SC 29909	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	150.00	150.00	G2026 \$150.00
02/27/2026	David Doherty Folsom, CA 95639	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Technology Stanfield Systems inc	150.00	150.00	G2026 \$150.00
02/27/2026	Jeanne Shuman Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Caseworker Jakes Journey Home	150.00	150.00	G2026 \$150.00
02/28/2026	Lynne Baker Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	150.00	150.00	G2026 \$150.00
SUBTOTAL \$				750.00		

***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

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2026	
through	06/30/2026	Page <u>7</u> of <u>20</u>

NAME OF FILER Anna Rohrbough for Council 2026	I.D. NUMBER 1450178
--	------------------------

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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/28/2026	Dreama Pacheco Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Marketing WJ Pacheco Wealth Management	150.00	150.00	G2026 \$150.00
03/01/2026	Marko Mikotin Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self Employed River City Communications	150.00	150.00	G2026 \$150.00
03/02/2026	Sharon Kindel Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	150.00	150.00	G2026 \$150.00
03/02/2026	Rachel Williams Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	150.00	150.00	G2026 \$150.00
03/03/2026	Ethan McGuire Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Clerk Target	150.00	150.00	G2026 \$150.00
SUBTOTAL \$				750.00		

***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

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

from 01/01/2026

through 06/30/2026

CALIFORNIA
FORM 460

Page 8 of 20

NAME OF FILER

Anna Rohrbough for Council 2026

I.D. NUMBER

1450178

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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
03/03/2026	Ryan McGuire Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Financial and Accounting Services Bridged Financial Solutions	150.00	150.00	G2026 \$150.00
03/04/2026	John Young Auburn, CA 95602	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Founder 530 Capital Partners	150.00	150.00	G2026 \$150.00
03/06/2026	Devra Selenis Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Marketing SacRT	150.00	150.00	G2026 \$150.00
03/08/2026	Dina Wills El Dorado Hills, CA 95762	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	150.00	150.00	G2026 \$150.00
03/09/2026	Richard Copeland Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	150.00	150.00	G2026 \$150.00
SUBTOTAL \$				750.00		

***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

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 01/01/2026	through 06/30/2026	
		Page 9 of 20
NAME OF FILER		I.D. NUMBER
Anna Rohrbough for Council 2026		1450178

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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
03/09/2026	Matthew Harmon Granite Bay, CA 95746	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Real Estate Self	150.00	150.00	G2026 \$150.00
03/10/2026	Sandra DeKreek Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Business Owner DeKreek Construction	150.00	150.00	G2026 \$150.00
03/12/2026	Adrian Blanco Folsom, CA 95682	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Business Owner Adrian Blanco Jewelry	150.00	150.00	G2026 \$150.00
03/12/2026	Gillum Consulting Inc. Gold River, CA 95670	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		150.00	150.00	G2026 \$150.00
03/13/2026	Think Smart Inc Rancho Cordova, CA 95670	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		150.00	150.00	G2026 \$150.00
SUBTOTAL \$				750.00		

*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

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

from 01/01/2026

through 06/30/2026

CALIFORNIA
FORM 460

Page 10 of 20

NAME OF FILER

Anna Rohrbough for Council 2026

I.D. NUMBER

1450178

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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
03/14/2026	Kathleen Cole Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	150.00	150.00	G2026 \$150.00
03/16/2026	Kathy Hoover Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	150.00	150.00	G2026 \$150.00
03/16/2026	Bill Hutto Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	150.00	150.00	G2026 \$150.00
03/16/2026	Brian Martell Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Real Estate The MORE Real Estate Group	150.00	150.00	G2026 \$150.00
03/17/2026	Susan Blake Sacramento, CA 95864	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	retired retired	150.00	150.00	G2026 \$150.00
SUBTOTAL \$				750.00		

***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

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

from 01/01/2026

through 06/30/2026

CALIFORNIA
FORM 460

Page 11 of 20

NAME OF FILER

Anna Rohrbough for Council 2026

I.D. NUMBER

1450178

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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
03/17/2026	Steve Clark Gold River, CA 95670	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	retired retired	150.00	150.00	G2026 \$150.00
03/17/2026	Committee of Home Ownership Granite Bay, CA 95746	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		125.00	125.00	G2026 \$125.00
03/17/2026	Moe Hirani Granite Bay, CA 95746	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Real Estate Self Employed	150.00	150.00	G2026 \$150.00
03/17/2026	Robert Hoffman El Dorado Hills, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Optometrist OD Medical Group	100.00	100.00	G2026 \$100.00
03/17/2026	Hoffman and Hoffman Folsom, CA 95630	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		100.00	100.00	G2026 \$100.00
SUBTOTAL \$				625.00		

***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

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 01/01/2026	through 06/30/2026	
		Page 12 of 20

NAME OF FILER Anna Rohrbough for Council 2026	I.D. NUMBER 1450178
--	------------------------

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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
03/17/2026	Lynard Khan Fair Oaks, CA 95628	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	retired retired	150.00	150.00	G2026 \$150.00
03/17/2026	Dana Mlikotin Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Real Estate Real Broker	150.00	150.00	G2026 \$150.00
03/17/2026	OSE Properties Sacramento, CA 95821	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		149.00	149.00	G2026 \$149.00
03/17/2026	Dustin Silva Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Law Enforcement Sacramento County	150.00	150.00	G2026 \$150.00
03/17/2026	Snooks Candies Folsom, CA 95630	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		150.00	150.00	G2026 \$150.00
SUBTOTAL \$				749.00		

***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

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/2026	
through	06/30/2026	Page 13 of 20

NAME OF FILER Anna Rohrbough for Council 2026	I.D. NUMBER 1450178
--	------------------------

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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
03/17/2026	Michael Wills El Dorado Hills, CA 95762	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	retired Retired	150.00	150.00	G2026 \$150.00
03/18/2026	Elliott Homes Inc Folsom, CA 95630	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		150.00	150.00	G2026 \$150.00
03/19/2026	Sandra Econome Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	retired retired	100.00	100.00	G2026 \$100.00
04/10/2026	Martha Lofgren Folsom, CA 95630	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Attorney Brewer Lofgren LLP	150.00	150.00	G2026 \$150.00
06/02/2026	LE03-Awin Management Inc Phoenix, AZ 85054	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		150.00	150.00	G2026 \$150.00
SUBTOTAL \$				700.00		

*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

Schedule B – Part 1 Loans Received

Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 1

Statement covers period from 01/01/2026 through 06/30/2026	CALIFORNIA FORM 460
	Page 14 of 20
I.D. NUMBER 1450178	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Anna Rohrbough for Council 2026

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD *	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Anna Rohrbough Folsom, CA 95630	City Council City of Folsom	\$ 0.00	\$ 1,000.00	☐ PAID \$ 0.00 ☐ FORGIVEN \$ 0.00	\$ 1,000.00 12/16/2026 DATE DUE	1% RATE \$ 0.00	\$ 1,000.00 02/03/2026 DATE INCURRED	CALENDAR YEAR \$ 1,000.00 PER ELECTION** \$ 62026 1,000.00
☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$	\$	☐ PAID \$ ☐ FORGIVEN \$	\$ DATE DUE	% RATE \$	\$ DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$
☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$	\$	☐ PAID \$ ☐ FORGIVEN \$	\$ DATE DUE	% RATE \$	\$ DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$
☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$	\$	☐ PAID \$ ☐ FORGIVEN \$	\$ DATE DUE	% RATE \$	\$ DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$
SUBTOTALS \$		1,000.00	\$	0.00	\$	1,000.00	\$	0.00

Schedule B Summary

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

- Loans received this period \$ 1,000.00
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period \$ 0.00
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (Subtract Line 2 from Line 1.) NET \$ 1,000.00
Enter the net here and on the Summary Page, Column A, Line 2.
(May be a negative number)

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

** If required.

Schedule E Payments Made

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	01/01/2026	
through	06/30/2026	Page 15 of 20
NAME OF FILER		I.D. NUMBER
Anna Rohrbough for Council 2026		1450178

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Anna Rohrbough for Council 2026

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
eFundraising Connections Sacramento, CA 95816	WEB			10.25
eFundraising Connections Sacramento, CA 95816	WEB			20.50
eFundraising Connections Sacramento, CA 95816	WEB			20.50

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

SUBTOTAL \$ 51.25

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	2,139.62
2. Unitemized payments made this period of under \$100	\$	12.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$	2,151.62

FPPC Form 460 (Jan/2016)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

www.fppc.ca.gov

Schedule E (Continuation Sheet) Payments Made

SCHEDULE E (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period from <u>01/01/2026</u> through <u>06/30/2026</u>	CALIFORNIA FORM 460
Page <u>16</u> of <u>20</u>	I.D. NUMBER <u>1450178</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Anna Rohrbough for Council 2026

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
eFundraising Connections Sacramento, CA 95816	WEB			98.14
eFundraising Connections Sacramento, CA 95816	WEB			46.38
eFundraising Connections Sacramento, CA 95816	WEB			20.50
eFundraising Connections Sacramento, CA 95816	WEB			10.25
eFundraising Connections Sacramento, CA 95816	WEB			5.38

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

SUBTOTAL \$ 180.65

Schedule E (Continuation Sheet) Payments Made

SCHEDULE E (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period from <u>01/01/2026</u> through <u>06/30/2026</u>	CALIFORNIA FORM 460
Page <u>17</u> of <u>20</u>	I.D. NUMBER 1450178

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Anna Rohrbough for Council 2026

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
eFundraising Connections Sacramento, CA 95816	WEB			25.88
eFundraising Connections Sacramento, CA 95816	WEB			19.38
eFundraising Connections Sacramento, CA 95816	WEB			10.25
eFundraising Connections Sacramento, CA 95816	WEB			15.63
eFundraising Connections Sacramento, CA 95816	WEB			36.64

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

SUBTOTAL \$ 107.78

Schedule E (Continuation Sheet) Payments Made

SCHEDULE E (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2026	
through	06/30/2026	Page 18 of 20
NAME OF FILER		I.D. NUMBER
Anna Rohrbough for Council 2026		1450178

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Anna Rohrbough for Council 2026

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
Go Daddy Tempe, AZ 85281	WEB		Domain	92.76
eFundraising Connections Sacramento, CA 95816	WEB			21.01
eFundraising Connections Sacramento, CA 95816	WEB			80.76
FLB Entertainment Center Folsom, CA 95630	FND			756.95
eFundraising Connections Sacramento, CA 95816	WEB			27.44

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

SUBTOTAL \$ 978.92

Schedule E (Continuation Sheet) Payments Made

SCHEDULE E (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period from 01/01/2026 through 06/30/2026	CALIFORNIA FORM 460
Page 19 of 20	I.D. NUMBER 1450178

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Anna Rohrbough for Council 2026

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
eFundraising Connections Sacramento, CA 95816	WEB			22.63
eFundraising Connections Sacramento, CA 95816	WEB			10.25
eFundraising Connections Sacramento, CA 95816	WEB			10.25
eFundraising Connections Sacramento, CA 95816	WEB			14.00
eFundraising Connections Sacramento, CA 95816	WEB			10.25

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

SUBTOTAL \$ 67.38

Schedule E (Continuation Sheet) Payments Made

SCHEDULE E (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2026	
through	06/30/2026	Page 20 of 20
NAME OF FILER		I.D. NUMBER
Anna Rohrbough for Council 2026		1450178

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Anna Rohrbough for Council 2026

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
Shoops Photography Folsom, CA 95630	PRO		Headshots/marketing	250.00
Go Daddy Tempe, AZ 85281	WEB			107.88
Go Daddy Tempe, AZ 85281	WEB			47.76
WIX San Francisco, CA 94158	WEB			348.00

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

SUBTOTAL \$ 753.64