

Recipient Committee
Campaign Statement
Cover Page

COVER PAGE

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City of Suisun City

CALIFORNIA FORM 460

Page 1 of 10

For Official Use Only

SEE INSTRUCTIONS ON REVERSE

Statement covers period

from 7/1/2026

through 9/19/2026

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

11/3/2026

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

- ☐ Primarily Formed Ballot Measure Committee
☐ Controlled
☐ Sponsored
(Also Complete Part 6)

- ☐ Primarily Formed Candidate/Officeholder Committee
(Also Complete Part 7)

2. Type of Statement:

- ☒ Preelection Statement
☐ Semi-annual Statement
☐ Termination Statement
(Also file a Form 410 Termination)
☐ Amendment (Explain below)

- ☐ Quarterly Statement
☐ Special Odd-Year Report

3. Committee Information

I.D. NUMBER
1496276

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Amit Pal for Mayor 2026

STREET ADDRESS (NO P.O. BOX)

[REDACTED]

CITY STATE ZIP CODE AREA CODE/PHONE

[REDACTED]

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

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

changedigitalcommunication@gmail.com

Treasurer(s)

NAME OF TREASURER

Angelo Velasco

MAILING ADDRESS

[REDACTED]

CITY STATE ZIP CODE AREA CODE/PHONE

[REDACTED]

Amit Pal

MAILING ADDRESS

[REDACTED]

CITY STATE ZIP CODE AREA CODE/PHONE

[REDACTED]

OPTIONAL: FAX / E-MAIL ADDRESS

[REDACTED]

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 _____
Date

Executed on _____
Date

Executed on _____
Date

Executed on _____
Date

By _____
Digitally signed by Angelo Velasco
Date: 2026.09.24 16:22:00Z

By _____
Signature of Treasurer or Assistant Treasurer
Digitally signed by Amit Pal
Date: 2026.09.24 16:22:00Z

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

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

FPPC Form 460 (Jan/2016)

FPPC Advice: advice@fppc.ca.gov (866/275-3772)

www.fppc.ca.gov

Recipient Committee Campaign Statement Cover Page — Part 2

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE			
Amit Pal			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)			
Mayor, Suisun City			
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Armit Pal for Mayor 2026

Statement covers period from 7/1/2026 through 9/19/2026	CALIFORNIA FORM 460
Page 3 of 10	I.D. NUMBER 1496276

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions.....	Schedule A, Line 3 \$ 29000	\$ 29000
2. Loans Received.....	Schedule B, Line 3 10000	10000
3. SUBTOTAL CASH CONTRIBUTIONS.....	Add Lines 1 + 2 \$ 39000	\$ 39000
4. Nonmonetary Contributions.....	Schedule C, Line 3 0	0
5. TOTAL CONTRIBUTIONS RECEIVED.....	Add Lines 3 + 4 \$ 39000	\$ 39000

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

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

Expenditures Made

6. Payments Made.....	Schedule E, Line 4 \$ 3589.50	\$ 3589.50
7. Loans Made.....	Schedule H, Line 3 0	0
8. SUBTOTAL CASH PAYMENTS.....	Add Lines 6 + 7 \$ 3589.50	\$ 3589.50
9. Accrued Expenses (Unpaid Bills).....	Schedule F, Line 3 0	0
10. Nonmonetary Adjustment.....	Schedule G, Line 3 0	0
11. TOTAL EXPENDITURES MADE.....	Add Lines 8 + 9 + 10 \$ 3589.50	\$ 3589.50

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

12. Beginning Cash Balance	Previous Summary Page, Line 16 \$ 0
13. Cash Receipts	Column A, Line 3 above 39000
14. Miscellaneous Increases to Cash	Schedule I, Line 4 0
15. Cash Payments	Column A, Line 8 above 3589.50
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15 \$ 35410.50

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED	Schedule B, Part 2 \$ 0
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse \$ 0
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above \$ 10000

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.

Schedule A Monetary Contributions Received

Amounts may be rounded
to whole dollars.

Statement covers period
from 7/1/2026
through 9/19/2026

CALIFORNIA
FORM
460

SCHEDULE A

Page 4 of 10

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Amit Pal for Mayor 2026

I.D. NUMBER
1496276

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)
9/17/2026	Deshdeep Takhar	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Engineer, PG&E	\$500.00	\$500.00	
9/17/2026	Harmeet Kaloty	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Store Manager, Pac Bev Inc	\$500.00	\$500.00	
9/17/2026	Rajesh Malhotra	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Manager, DeltaBv Inc	\$1,000.00	\$1,000.00	
9/17/2026	Shashi Paul	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	\$2,500.00	\$2,500.00	
9/18/2026	Karanjit Singh Aulakh	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Site Manager, Ports America	\$1,000.00	\$1,000.00	
SUBTOTAL \$ 5500						

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.)\$ 29000
- Amount received this period – unitemized monetary contributions of less than \$100\$ 0
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) TOTAL \$ 29000

*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.

Statement covers period
from 7/1/2026
through 9/19/2026

Page 5 of 10

SCHEDULE A (CONT.)
CALIFORNIA
FORM
460

NAME OF FILER
Amit Pal for Mayor 2026
I.D. NUMBER
1496276

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)
9/18/2026	Charandeep Uppal	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner, Darpan Foods Inc.	\$1,000.00	\$1,000.00	
9/18/2026	Kulwinder Bains	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner, Union Food and Liquor	\$1,000.00	\$1,000.00	
9/19/2026	Surinder Hayer	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	\$1,000.00	\$1,000.00	
9/19/2026	Rajan Pal	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Officer, US Air Force	\$1,000.00	\$1,000.00	
9/19/2026	Simarjit Jawanda	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Partner, BevBox Napa	\$1,000.00	\$1,000.00	
SUBTOTAL \$ 5000						

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IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
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PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

Statement covers period from <u>7/1/2026</u> through <u>9/19/2026</u>	CALIFORNIA FORM 460
Page <u>6</u> of <u>10</u>	

NAME OF FILER
Amit Pal for Mayor 2026
I.D. NUMBER
1496276

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)
9/19/2026	Surjit Singh aka Surjit Kooner	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner, K&B Logistic Inc.	\$500.00	\$500.00	
9/19/2026	Joginder Basra	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner, AM/PM Nelson, Fairfield CA	\$1,000.00	\$1,000.00	
9/19/2026	Harminder Grewal	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Manager, Bevbox	\$1,000.00	\$1,000.00	
9/19/2026	Paramdeep Kukreja	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Partner, BevBox Baypoint, CA	\$1,000.00	\$1,000.00	
9/19/2026	Surjeet Rattu	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner, Rattu Property Management	\$1,000.00	\$1,000.00	
SUBTOTAL \$				4500		

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(other than PTY or SCC)
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SCC – Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

Statement covers period from <u>7/1/2026</u> through <u>9/19/2026</u>		CALIFORNIA FORM 460
Page <u>7</u> of <u>10</u>		

NAME OF FILER: Amit Pal for Mayor 2026 I.D. NUMBER: 1496276

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)
9/19/2026	Tripta Pal	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Raley's, Bookkeeper	\$1,000.00	\$1,000.00	
9/19/2026	Karan Tewari	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Store Clerk, C&H Sugar Co.	\$5,000.00	\$5,000.00	
9/19/2026	Harjit Hayer	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self-employed, BevBox	\$2,500.00	\$2,500.00	
9/19/2026	Gurinder Saini	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Partner, Bevbox	\$500.00	\$500.00	
9/19/2026	Sumir Hayer	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Managing Partner, Bevbox	\$2,500.00	\$2,500.00	
SUBTOTAL \$ 11500						

*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.

Statement covers period from <u>7/1/2026</u> through <u>9/19/2026</u>	CALIFORNIA FORM 460
Page <u>8</u> of <u>10</u>	

NAME OF FILER
Amit Pal for Mayor 2026
I.D. NUMBER
1496276

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)
9/19/2026	Spices4Less Inc. [REDACTED]	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$500.00	\$500.00	
9/19/2026	Thakur, Inc dba Jolly King Liquor & Food [REDACTED]	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$1,000.00	\$1,000.00	
9/19/2026	Harjinder Singh Dhami [REDACTED]	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner, Boss Market (Mini Dr. Vallejo)	\$1,000.00	\$1,000.00	
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
SUBTOTAL \$ 2500						

*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

CALIFORNIA
FORM
460

Statement covers period
from 7/1/2026
through 9/19/2026

Page 9 of 10

SEE INSTRUCTIONS ON REVERSE

I.D. NUMBER

NAME OF FILER

1496276

FULL NAME, STREET ADDRESS AND ZIP CODE (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
Amit Pal [REDACTED]	Partner, Dumpling House	\$ 10000	\$ 10000	☐ PAID \$ 0 ☐ FORGIVEN	\$ 10000 n/a DATE DUE	0 % RATE	\$ 10000 9/14/2026 DATE INCURRED	\$ 0 PER ELECTION** CALENDAR YEAR
☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				☐ PAID \$ ☐ FORGIVEN	\$ DATE DUE	% RATE	\$ DATE INCURRED	\$ PER ELECTION** CALENDAR YEAR
☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				☐ PAID \$ ☐ FORGIVEN	\$ DATE DUE	% RATE	\$ DATE INCURRED	\$ PER ELECTION** CALENDAR YEAR
SUBTOTALS \$ 10000 \$ 0 \$ 10000 \$ 0								

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

Schedule B Summary

- Loans received this period.....\$ 10000
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period.....\$ 0
(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 \$ 0

(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 from <u>7/1/2026</u> through <u>9/19/2026</u>		CALIFORNIA FORM 460	
		Page <u>10</u> of <u>10</u>	

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Amit Pal for Mayor 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) | VOI 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
The Next Generation, LLC [REDACTED]	CNS		3000
Stripe, Inc. [REDACTED]		Payment processor fee	589.5
SUBTOTAL \$ 3589.5			

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

Schedule E Summary

- Itemized payments made this period. (Include all Schedule E subtotals.)..... \$ 3589.5
- Unitemized payments made this period of under \$100..... \$ 0
- Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)..... \$ 0
- Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)..... **TOTAL \$ 3589.5**