

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

COVER PAGE

Statement covers period from 07/01/2020 through 09/19/2020	Date of election if applicable: (Month, Day, Year) 11/03/2020	Date Stamp E-Filed 10/15/2020 10:41:15 Filing ID: 193551171	CALIFORNIA FORM 460 Page 1 of 17 For Official Use Only
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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
<i>(Also Complete Part 5)</i> | ☐ Primarily Formed Ballot Measure Committee
☐ Controlled
☐ Sponsored
<i>(Also Complete Part 6)</i> |
| ☒ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☐ Political Party/Central Committee | ☐ Primarily Formed Candidate/Officeholder Committee
<i>(Also Complete Part 7)</i> |

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
☐ Supplemental Preelection Statement - Attach Form 495 |
|---|---|

3. Committee Information

I.D. NUMBER
1419783

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Protect Culver City

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Los Angeles	CA	90066	(310)879-1579

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Los Angeles	CA	90066	

OPTIONAL: FAX / E-MAIL ADDRESS
info@protectculvercity.org

Treasurer(s)

NAME OF TREASURER

Richard Glaser - Treasurer

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Culver City	CA	90230	(310)689-8812

NAME OF ASSISTANT TREASURER, IF ANY

Ron Bassilian

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Los Angeles	CA	90066	(310)347-8255

OPTIONAL: FAX / E-MAIL ADDRESS

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 10/15/2020
Date

Executed on 10/15/2020
Date

Executed on _____
Date

Executed on _____
Date

By Richard Glaser
Signature of Treasurer or Assistant Treasurer

By Ron Bassilian
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

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

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

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

Statement covers period from 07/01/2020 through 09/19/2020	CALIFORNIA FORM 460 Page 3 of 17 I.D. NUMBER 1419783
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Protect Culver City

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions Schedule A, Line 3	\$ 9,285.00	\$ 49,580.00
2. Loans Received Schedule B, Line 3	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 9,285.00	\$ 49,580.00
4. Nonmonetary Contributions Schedule C, Line 3	0.00	5,462.00
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 9,285.00	\$ 55,042.00

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	\$ 8,092.47	\$ 52,722.00
7. Loans Made Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 8,092.47	\$ 52,722.00
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	0.00	0.00
10. Nonmonetary Adjustment Schedule C, Line 3	0.00	5,462.00
11. TOTALEXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 8,092.47	\$ 58,184.00

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	\$ 2,823.47
13. Cash Receipts Column A, Line 3 above	9,285.00
14. Miscellaneous Increases to Cash Schedule I, Line 4	100.00
15. Cash Payments Column A, Line 8 above	8,092.47
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 4,116.00
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 from Lines 2, 7, and 9 (if any).

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

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	\$ 0.00

Schedule A Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period from <u>07/01/2020</u> through <u>09/19/2020</u>	CALIFORNIA FORM 460
	Page <u>4</u> of <u>17</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Protect Culver City

I.D. NUMBER

1419783

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)
07/01/2020	Ron Bassilian - Donor Los Angeles, CA 90066	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Systems Engineer Unemployed	10.00	320.00	G2020 \$20.00
07/03/2020	Rowene Fabian Culver City, CA 90230	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Registered Nurse Los Angeles County	100.00	100.00	G2020 \$100.00
07/06/2020	Joe Chavez Culver City, CA 90230	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Service Manager/Owner Villa Marina Auto	100.00	100.00	G2020 \$100.00
07/11/2020	Culver Vista Apartments Culver City, CA 90230	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		150.00	300.00	G2020 \$150.00
07/11/2020	Ted Thompson Culver City, CA 90232	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired none	100.00	100.00	G2020 \$100.00

SUBTOTAL \$

460.00

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 8,520.00
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 765.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 9,285.00

*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
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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)
07/12/2020	Bonnie Wacker Culver City, CA 90230	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Teacher preschool owner Self	100.00	200.00	G2020 \$200.00
07/15/2020	Georgia Malsich Culver City, CA 90230	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Accountant Self	100.00	100.00	G2020 \$100.00
07/20/2020	The Wolkowitz Living Trust Los Angeles, CA 90017	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		100.00	100.00	G2020 \$100.00
07/21/2020	Gary Brown Culver City, CA 90232	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Healthcare Self	100.00	100.00	G2020 \$100.00
07/23/2020	Judith Clay Culver City, CA 90230	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	unemployed unemployed	100.00	100.00	G2020 \$100.00
SUBTOTAL \$				500.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
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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)
07/24/2020	Southern California Aquatics Master Swim Club Los Angeles, CA 90066	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		200.00	200.00	G2020 \$200.00
07/26/2020	Alina Lee Culver City, CA 90230	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	unemployed unemployed	100.00	100.00	G2020 \$100.00
07/27/2020	Jonathan Lehrer-Graier Los Angeles, CA 90027	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Investor/developer Self	500.00	500.00	G2020 \$500.00
07/27/2020	Rod Rummelsburg Culver City, CA 90232	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Attorney Airespring, Inc.	100.00	100.00	G2020 \$100.00
07/28/2020	Lucas Freeborn Sherman Oaks, CA 91403	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Designer Disney	100.00	200.00	G2020 \$100.00
SUBTOTAL \$				1,000.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
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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)
07/29/2020	Sagold Property Management Culver City, CA 90230	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		500.00	500.00	G2020 \$500.00
07/31/2020	Ron Bassilian - Donor Los Angeles, CA 90066	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Systems Engineer Unemployed	10.00	320.00	G2020 \$20.00
08/02/2020	Zach Bevington Culver City, CA 90230	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Self	700.00	3,400.00	G2020 \$1,400.00
08/03/2020	Walter Shubin Culver City, CA 90230	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	retired none	100.00	100.00	G2020 \$100.00
08/05/2020	Pam Magnuson Culver City, CA 90232	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	retired none	100.00	100.00	G2020 \$100.00
SUBTOTAL \$				1,410.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

from 07/01/2020

through 09/19/2020

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NAME OF FILER

Protect Culver City

I.D. NUMBER

1419783

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)
08/07/2020	Richard Marcus Culver City, CA 90230	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Accountant Self	500.00	1,040.00	G2020 \$500.00
08/11/2020	Nancie Brown Culver City, CA 90230	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	retired none	200.00	200.00	G2020 \$200.00
08/15/2020	Robert Anderberg Culver City, CA 90230	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Unemployed Unemployed	50.00	100.00	G2020 \$50.00
08/15/2020	Richard Kissel Culver City, CA 90230	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	real estate sales self	100.00	100.00	G2020 \$100.00
08/18/2020	John Horn Culver City, CA 90232	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	100.00	300.00	G2020 \$100.00
SUBTOTAL \$				950.00		

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FPPC Form 460 (Jan/2016)

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Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from 07/01/2020		
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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)
08/18/2020	Johnnie Richie Los Angeles, CA 90066	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Unknown Unknown	100.00	100.00	G2020 \$100.00
08/21/2020	Michael Gerez Culver City, CA 90230	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Electrical General Superintendent Rosendin Electric	1,000.00	1,500.00	G2020 \$1,000.00
09/08/2020	Zeve Akerling Culver City, CA 90230	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Electronics Engineer The Aerospace Corporation	500.00	1,750.00	G2020 \$500.00
09/08/2020	Zach Bevington Culver City, CA 90230	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Self	700.00	3,400.00	G2020 \$1,400.00
09/12/2020	Douglas West Culver City, CA 90232	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Consultant RGP	100.00	100.00	G2020 \$100.00
SUBTOTAL \$				2,400.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

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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)
09/14/2020	Stephen Davis Los Angeles, CA 90025	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Real Estate Investor Self	1,000.00	15,712.00	G2020 \$1,000.00
09/14/2020	Michael Winn San Diego, CA 92129	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Teacher Retired	500.00	4,450.00	G2020 \$500.00
09/15/2020	Judy Scott Los Angeles, CA 90066	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Self	100.00	200.00	G2020 \$100.00
09/16/2020	Alexander Atencio Culver City, CA 90232	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Crew Trader Joes	100.00	200.00	G2020 \$100.00
09/16/2020	Bonnie Wacker Culver City, CA 90230	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Teacher preschool owner Self	100.00	200.00	G2020 \$200.00
SUBTOTAL \$				1,800.00		

***Contributor Codes**

IND – Individual
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Schedule E Payments Made

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Protect Culver City

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
Printex Los Angeles, CA 90034	LIT			383.25
AGE Graphics Little Hocking, OH 45742	CMP		Yard Signs	375.00
Nationbuilder Los Angeles, CA 90081	WEB		Contact Management	35.00

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

SUBTOTAL \$ 793.25

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 7,868.35
2. Unitemized payments made this period of under \$100	\$ 224.12
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 \$ 8,092.47

Schedule E (Continuation Sheet) Payments Made

SCHEDULE E (CONT.)

Amounts may be rounded
to whole dollars.

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

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

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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
AGE Graphics Little Hocking, OH 45742	CMP		Yard Signs	375.00
Stripe San Francisco, CA 94103	PRO		Cumulative credit card processing fees Jan-Jun 2020	156.81
AGE Graphics Little Hocking, OH 45742	CMP		Yard Signs	570.00
Nationbuilder Los Angeles, CA 90081	WEB		Contact Management	47.00
Jaylen Moulton Chicago, IL 60637	PRO		Data entry	150.00

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

SUBTOTAL \$ 1,298.81

Schedule E (Continuation Sheet) Payments Made

SCHEDULE E (CONT.)

Amounts may be rounded
to whole dollars.

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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
AGE Graphics Little Hocking, OH 45742	CMP		Yard Signs	655.00
Jaylen Moulton Chicago, IL 60637	PRO		Data entry	300.00
Jaylen Moulton Chicago, IL 60637	PRO		Data entry	300.00
No party Preference Voter Guide Sacramento, CA 95841	LIT		NPP voter guide	451.00
Printex Los Angeles, CA 90034	LIT			323.03

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

SUBTOTAL \$ 2,029.03

Schedule E (Continuation Sheet) Payments Made

SCHEDULE E (CONT.)

Amounts may be rounded
to whole dollars.

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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
US Post Office Culver City, CA 90230	LIT		Stamps	220.00
Usher Digital Media Consulting El Segundo, CA 90245	PRO		Graphic design	100.00
Nationbuilder Los Angeles, CA 90081	WEB		Contact Management	47.00
US Post Office Culver City, CA 90230	LIT		Stamps	1,100.00
US Post Office Culver City, CA 90230	LIT		Stamps	550.00

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

SUBTOTAL \$ 2,017.00

Schedule E (Continuation Sheet) Payments Made

SCHEDULE E (CONT.)

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

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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
Printex Los Angeles, CA 90034	LIT			330.91
Printex Los Angeles, CA 90034	LIT			1,280.06
Nationbuilder Los Angeles, CA 90081	WEB		Card processing fees cumulative 0701-0919	50.02
Stripe San Francisco, CA 94103	WEB		Cumulative processing fees 0701-091920	69.27

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

SUBTOTAL \$ 1,730.26

Schedule I

Miscellaneous Increases to Cash

Amounts may be rounded
to whole dollars.

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SCHEDULE I
CALIFORNIA FORM 460

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DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$

Schedule I Summary

- Itemized increases to cash this period. \$ 0.00
- Unitemized increases to cash of under \$100 this period. \$ 100.00
- Total of all interest received this period on loans made to others. (Schedule H, Column (e).) \$ 0.00
- Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) **TOTAL \$** 100.00

Additional Comments
For Form 460

ADDITIONAL COMMENTS	
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Final draft