

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

COVER PAGE

Statement covers period from 09/25/2022 through 10/22/2022	Date of election if applicable: (Month, Day, Year) 11/03/2020	Date Stamp <div style="border: 2px solid red; padding: 5px; color: red; text-align: center;">E-Filed 11/16/2022 15:54:19 Filing ID: 205598750</div>	CALIFORNIA FORM 460 Page <u>1</u> of <u>18</u> 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
<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
☐ 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
1426869

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

Good Government San Bernardino, Yes on D, Major Funding by San Bernardino County Sheriffs Employees Benefit Assoc and California Teamster Public Affairs Council, CA Assoc of Realtors Issues Mobilizati

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Chino Hills	CA	91709	(714)540-2295

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Santa Ana	CA	92704	

OPTIONAL: FAX / E-MAIL ADDRESS

lysaray.campaignservices@gmail.com

Treasurer(s)

NAME OF TREASURER

Lysa Ray

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Santa Ana	CA	92704	(714)540-2295

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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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 11/16/2022
Date

By Lysa Ray
Signature of Treasurer or Assistant Treasurer

Executed on _____
Date

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

Executed on _____
Date

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

Executed on _____
Date

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

FPPC Form 460 (Jan/2016)

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

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Recipient Committee
Campaign Statement
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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
AMENDMENTS TO THE SAN BERNARDINO COUNTY CHARTER FOR TAXPAYER
PROTECTION AND GOVERNMENT REFORM

BALLOT NO. OR LETTER	JURISDICTION	☒ SUPPORT ☐ OPPOSE
D	San Bernardino County	

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 09/25/2022 through 10/22/2022	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Good Government San Bernardino, Yes on D, Major Funding by San Bernardino County Sheriffs Employees Benefit Assoc and California Teamster Public Affairs Council, CA Assoc of Realtors Issues Mobilizati

I.D. NUMBER
1426869

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$ 552,300.00	\$ 699,000.00
2. Loans Received	Schedule B, Line 3	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$ 552,300.00	\$ 699,000.00
4. Nonmonetary Contributions	Schedule C, Line 3	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$ 552,300.00	\$ 699,000.00

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	\$ 126,895.01	\$ 163,695.01
7. Loans Made	Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$ 126,895.01	\$ 163,695.01
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	0.00	10,000.00
10. Nonmonetary Adjustment	Schedule C, Line 3	0.00	0.00
11. TOTALEXPENDITURES MADE	Add Lines 8 + 9 + 10	\$ 126,895.01	\$ 173,695.01

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	\$ 114,726.16
13. Cash Receipts	Column A, Line 3 above	552,300.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4	0.00
15. Cash Payments	Column A, Line 8 above	126,895.01
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$ 540,131.15
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).

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	\$ 10,000.00

*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 09/25/2022
through 10/22/2022

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Good Government San Bernardino, Yes on D, Major Funding by San Bernardino County Sheriffs Employees Benefit Assoc and California Teamster Public Affairs Council, CA Assoc of Realtors Issues Mobilizati

I.D. NUMBER

1426869

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)
10/10/2022	Burrtec Waste and Recycling LLC(Cole Burr) San Marcos, CA 92078	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		5,000.00	5,000.00	
10/10/2022	Burrtec Waste Industries Inc Fontana, CA 92335	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		5,000.00	10,000.00	
10/17/2022	Thomas Buttgenbach Los Angeles, 90036	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CEO Avantus	10,000.00	10,000.00	
10/11/2022	Cadiz Inc Los Angeles, CA 90071	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		10,000.00	10,000.00	
10/11/2022	Cadiz Inc Los Angeles, CA 90071	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		10,000.00	10,000.00	
SUBTOTAL \$				40,000.00		

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 552,300.00
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 0.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 552,300.00

*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)

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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)
10/12/2022	Cadiz Inc Los Angeles, CA 90071	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		-10,000.00	10,000.00	
10/17/2022	California Assoc of Realtors Issues Mobilization (ID# 782560) Los Angeles, CA 90071	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		20,000.00	30,000.00	
10/17/2022	California Assoc of Realtors Issues Mobilization (ID# 782560) Los Angeles, CA 90071	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		10,000.00	30,000.00	
10/22/2022	California Teamsters Public Affairs Council Sacramento, CA 95814	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		50,000.00	50,000.00	
10/22/2022	Equinox Gold Corp Castle Mountain Venture Henderson, NV 89014	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		25,000.00	25,000.00	
SUBTOTAL \$				95,000.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
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SCHEDULE A (CONT.)

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I.D. NUMBER

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10/22/2022	Chandi Enterprises LLC(Nachetter Chandi) Indio, CA 92203	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		5,000.00	15,000.00	
10/13/2022	Dawn Rowe for Supervisor 2024 (ID# 1415222) West Sacramento, CA 95799	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		4,900.00	4,900.00	
09/29/2022	Gregory Devereaux Ontario, CA 91762	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Consultant Self	2,500.00	2,500.00	
09/29/2022	FH II Homebuilders Inc Ontario, 91764	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		49,900.00	49,900.00	
10/22/2022	HDC Construction Inc Ontario, CA 91762	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		1,500.00	1,500.00	
SUBTOTAL \$				63,800.00		

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SCHEDULE A (CONT.)

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09/29/2022	Paul Herrera Riverside, CA 92506	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Consultant Self	45,000.00	15,000.00	
10/18/2022	Paul Herrera Riverside, CA 92506	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Consultant Self	-30,000.00	15,000.00	
10/04/2022	Ryan Hutchison Rancho Cucamonga, CA 91739	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Councilman Rancho Cucamonga	1,000.00	1,000.00	
10/22/2022	International Brotherhood of Teamsters (ID# 484411) Los Angeles, CA 90001	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		25,000.00	25,000.00	
10/22/2022	Laboreres Pacific SW Regional Organizing Coalition Issues PAC (ID# 1358725) Sacramento, CA 95814	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		15,000.00	15,000.00	
SUBTOTAL \$				56,000.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

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Good Government San Bernardino, Yes on D, Major Funding by San Bernardino County Sheriffs Employees Benefit Assoc and California Teamster Public Affairs Council, CA Assoc of Realtors Issues Mobilizati

I.D. NUMBER

1426869

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)
10/22/2022	Majestic Realty Co. La Puente, CA 91746	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		49,000.00	49,000.00	
10/13/2022	MGR Property Management Inc Ontario, CA 91764	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		2,500.00	2,500.00	
10/04/2022	Morongo Band of Mission Indians Banning, CA 92220	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		5,000.00	5,000.00	
10/20/2022	MP Materials Las Vegas, NV 89119	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		25,000.00	25,000.00	
10/17/2022	Prime Healthcare Services Ontario, CA 91761	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		10,000.00	20,000.00	
SUBTOTAL \$				91,500.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
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10/22/2022	San Bernardino County Sheriffs Employees Benefit Assoc (ID# 1343640) San Bernardino, CA 92408	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		15,000.00	150,000.00	
10/22/2022	San Bernardino County Sheriffs Employees Benefit Assoc (ID# 1343640) San Bernardino, CA 92408	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		135,000.00	150,000.00	
10/07/2022	Southern Ca District Council of Laborers Issues PAC (ID# 1358148) Long Beach, CA 90802	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		15,000.00	15,000.00	
10/13/2022	Symbiosis Symons Emergency Specialties Inc Redlands, CA 92374	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		5,000.00	5,000.00	
10/18/2022	SPBEA PAC Teamsters Local 1932 (ID# 1377820) San Bernardino, CA 92402	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		25,000.00	25,000.00	
SUBTOTAL \$				195,000.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

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NAME OF FILER

Good Government San Bernardino, Yes on D, Major Funding by San Bernardino County Sheriffs Employees Benefit Assoc and California Teamster Public Affairs Council, CA Assoc of Realtors Issues Mobilizati

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10/17/2022	The Crossings at Redlands LLC(Jim Mauge) Los Angeles, 90024	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		2,500.00	6,000.00	
10/17/2022	The Crossings at Redlands LLC(Jim Mauge) Los Angeles, 90024	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		3,500.00	6,000.00	
10/17/2022	David Wiener Beverly Hills, 90210	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner DW Development	5,000.00	5,000.00	
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
SUBTOTAL \$				11,000.00		

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FPPC Form 460 (Jan/2016)

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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

Good Government San Bernardino, Yes on D, Major Funding by San Bernardino County Sheriffs Employees Benefit Assoc and California Teamster Public Affairs Council, CA Assoc of Realtors Issues Mobilizati

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
Arena LLC Salt Lake City, UT 84106	LIT			32,918.00
Budget Watchdogs (ID# 1345115) Torrance, CA 90505	LIT			4,000.00
California Voter Guide (ID# 595004) Torrance, CA 90505	LIT			2,500.00

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

SUBTOTAL \$ 39,418.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 126,821.75
2. Unitemized payments made this period of under \$100	\$ 73.26
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 \$ 126,895.01

Schedule E (Continuation Sheet) Payments Made

SCHEDULE E (CONT.)

Amounts may be rounded
to whole dollars.

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Good Government San Bernardino, Yes on D, Major Funding by San Bernardino County Sheriffs Employees Benefit Assoc and California Teamster Public Affairs Council, CA Assoc of Realtors Issues Mobilizati

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
Educate Your Vote (ID# 1345655) Encino, CA 91436	LIT			2,500.00
Eye On Color Burbank, CA 91505	LIT			41,470.57
Lysa Ray Campaign Services Santa Ana, CA 92704	PRO			400.00
PDI Political Data Norwalk, CA 90650	CMP			500.00
PDI Political Data Norwalk, CA 90650	CMP			1,098.00

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

SUBTOTAL \$ 45,968.57

Schedule E (Continuation Sheet) Payments Made

SCHEDULE E (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period from <u>09/25/2022</u> through <u>10/22/2022</u>	CALIFORNIA FORM 460
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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
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CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
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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
PDI Political Data Norwalk, CA 90650	CMP			1,413.44
PDI Political Data Norwalk, CA 90650	CMP			2,361.80
PDI Political Data Norwalk, CA 90650	CMP			1,451.05
Rincon Strategies Santa Barbara, CA 93101	CMP			8,820.00
Senior Advocate Torrance, CA 90505	LIT			1,500.00

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

SUBTOTAL \$ 15,546.29

Schedule E (Continuation Sheet) Payments Made

SCHEDULE E (CONT.)

Amounts may be rounded
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NAME OF FILER

Good Government San Bernardino, Yes on D, Major Funding by San Bernardino County Sheriffs Employees Benefit Assoc and California Teamster Public Affairs Council, CA Assoc of Realtors Issues Mobilizati

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
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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
John Sobel Washington, 20003	CMP			1,009.97
Georgine Trujillo Trujillo Communications, LLC South Pasadena, CA 91031	FND			878.92
Georgine Trujillo Trujillo Communications, LLC South Pasadena, CA 91031	CNS			24,000.00

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

SUBTOTAL \$ 25,888.89

Schedule F

Accrued Expenses (Unpaid Bills)

Amounts may be rounded
to whole dollars.

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I.D. NUMBER
1426869

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 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 PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
DSPolitical Washington, DC 20005	TEL	10,000.00	0.00	0.00	10,000.00

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

SUBTOTALS \$ 10,000.00\$ 0.00\$ 0.00\$ 10,000.00

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) **INCURRED TOTALS \$** 0.00
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) **PAID TOTALS \$** 0.00
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** 0.00
May be a negative number

Schedule G

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

Amounts may be rounded
to whole dollars.

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I.D. NUMBER
1426869

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Arena LLC

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

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
USPS Santa Ana, CA 92705	POS			17,422.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 17,422.00

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
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I.D. NUMBER
1426869

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Eye On Color

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
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FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
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LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
USPS Santa Ana, CA 92705	POS			25,893.40

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 25,893.40

* 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.

Schedule G

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

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to whole dollars.

Statement covers period		CALIFORNIA FORM 460
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I.D. NUMBER
1426869

NAME OF AGENT OR INDEPENDENT CONTRACTOR

John Sobel

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
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
PDI Political Data Norwalk, CA 90650	CMP			1,009.97

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 1,009.97

* 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.