Recipient Committee Campaign Statement Cover Page Government Code Sections 84200-84216.5) SEE INSTRUCTIONS ON REVERSE	Statement covers period from01/01/2020 through01/18/2020	Date of election if applicable: (Month, Day, Year)	C/23/ZOZO Date Stamp RECEIVE LOS ANGELE 2020 JAN 24 PROPOSITION	CASTON OF THE STATE OF THE STAT	COVER PAGE ALIFORNIA 460 FORM 6 ge 1 of 6 For Official Use Only
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	rimarily Formed Ballot Measure committee Controlled Sponsored Uso Complete Part 6) rimarily Formed Candidate/ officeholder Committee Uso Complete Part 7)	2. Type of Statement: X Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 T Amendment (Explain b	t [ermination)	Quarterly S Special Od Supplemen	Statement d-Year Report ntal Preelection - Attach Form 495
3 Committee Information	DE AREA CODE/PHONE 1 (213) 624-6200	Treasurer(s) NAME OF TREASURER CARY DAVIDSON MAILING ADDRESS CITY LOS ANGELES NAME OF ASSISTANT TREASURER NATHAN HARDY MAILING ADDRESS	STATE CA RER, IF ANY	ZIP CODE 90071	AREA CODE/PHONE (213) 624-6200
OPTIONAL: FAX / E-MAIL ADDRESS (213)623-1692 / cary@politicallaw.com	DE AREA CODE/PHONE	CITY LOS ANGELES OPTIONAL: FAX / E-MAIL ADDR	STATE CA	ZIP CODE 90071	AREA CODE/PHONE (213) 624-6200
1. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California Executed on	a that the foregoing is true and correct. By	Signature of Controlling Officeholder, Candidate, Signature of Controlling Officeholder, Candidate, State Measure Pro	Treasurer oponent or Responsible Officero State Measure Proponent		true and complete. I certify 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

	COVER	PAGE	E-PART 2
	ORNIA ORM	4	160
Page _	2	of _	6

Officeholder or Candidate Controlled Com	mittee .	6.	Primarily Formed Ball	ot Measure	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE	_			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	RICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIO	ON		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP		Identify the controlling of	ficeholder, car	ndidate, or stat	te measure pr	roponent, if any
			NAME OF OFFICEHOLDER, CA	NDIDATE, OR PR	OPONENT		
Related Committees Not Included in this S not included in this statement that are controlled by you contributions or make expenditures on behalf of your contributions.	u or are primarily formed to receive		OFFICE SOUGHT OR HELD		D	DISTRICT NO. IF	ANY
COMMITTEE NAME	I.D. NUMBER					11.7.11.	
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Can officeholder(s) or candidate(didate/Offic s) for which thi	eholder Con s committee is p	nmittee List primarily forme	t names of d.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.			NAME OF OFFICEHOLDER OR GEORGE GASCON	CANDIDATE	OFFICE SOUGH District At		SUPPORT ○ OPPOSE
CITY STATE ZIP	CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	HT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	HT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE? YES NO		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	HT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	BOX)				_L		I

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

		SUIVINARY PAGE
Stateme	ent covers period	CALIFORNIA 160
from	01/01/2020	FORM 400
through	01/18/2020	Page 3 of 6
-	~ .	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1422237 YOUTH AND FAMILIES TAKING POWER SUPPORTING GEORGE GASCON FOR DISTRICT ATTORNEY 2020, SPONSORED BY LA VOICE ACTION Calendar Year Summary for Candidates Column A Column B Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTALTO DATE General Elections 0.00 1/1 through 6/30 7/1 to Date 0.00 0.00 20. Contributions 0.00 SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ 0.00 Received 0.00 0.00 Nonmonetary Contributions Schedule C, Line 3 21. Expenditures Made 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 \$ _____ 0.00 0.00 **Expenditures Made Expenditure Limit Summary for State** Candidates 7. Loans Made Schedule H. Line 3 0.00 22. Cumulative Expenditures Made* 28,931.41 (If Subject to Voluntary Expenditure Limit) -16,371.70 0.00 Date of Election Total to Date (mm/dd/yy) 10. Nonmonetary Adjustment Schedule C, Line 3 0.00 \$ 28,931.41 **Current Cash Statement** To calculate Column B, add amounts in Column A to the 13. Cash Receipts Column A, Line 3 above corresponding amounts *Amounts in this section may be different from amounts 14. Miscellaneous Increases to Cash Schedule I, Line 4 0.00 from Column B of your last reported in Column B. report. Some amounts in 28,931.41 Column A may be negative 46,114.29 figures that should be 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ ______ subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 0.00 17. LOAN GUARANTEES RECEIVED Schedule B. Part 2 \$ _____ carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). 18. Cash Equivalents See instructions on reverse \$ _____ 0.00 0.00 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$

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www.fppc.ca.gov

Schedule E
Payments Made

Amounts may be rounded to whole dollars.

Statem	ent covers period	CALIFORNIA 460
from	01/01/2020	FORM TOO
through _	01/18/2020	Page _4 of6
		I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

YOUTH AND FAMILIES TAKING POWER SUPPORTING GEORGE GASCON FOR DISTRICT ATTORNEY 2020, SPONSORED BY LA VOICE ACTION

1422237

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

				and the state of t	enving Parities dans un •rodi•correction
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
BT STRATEGIES	CNS	1		15,000.00
SOUTH PASADENA, CA 91031				
MICROAGE	OFC	+	2	12,118.51
TEMPE, AZ 85284	×			
REED & DAVIDSON, LLP	PRO	-		441.20
LOS ANGELES, CA 90071				

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL\$ 27,559.71

Schedule E Summary

Itemized payments made this period. (Include all Schedule E subtotals.)	28,931.41
2. Unitemized payments made this period of under \$100	0.00
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.)	28,931.41

Schedule E
(Continuation Sheet)
Payments Made

Amounts may be rounded to whole dollars.

		SCHEDL	JLE E (CONT.)	
Stater	ment covers period	CALIFORNIA	160	
	01/01/2020	FORM	400	

Payments Made	to whole dollars.	from01/01/2020	FURIVI
SEE INSTRUCTIONS ON REVERSE		through01/18/2020	Page5 of6
NAME OF FILER			I.D. NUMBER
YOUTH AND FAMILIES TAKING POWER SUPPORTING GEORGE GASCON FOR I	DISTRICT ATTORNEY 2020, SPONSORED BY I	A VOICE ACTION	1422237

CMP CNS CTB CVC FIL	campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events	MBR MTG OFC PET PHO POL POS	member commeetings and office expen- petition circul phone banks polling and s postage, deli professional	munications d appearance ses ating urvey reseavery and m	ces	RAD RFD SAL TEL TRC TRS TSF VOT	radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production co-candidate travel, lodging, and meals staff/spouse travel, lodging, and meals	s ame candidate/sponsor
	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CODE	OR	DESCRIPTIO	ON OF PAYMENT	AMOUNTPAID
REED	& DAVIDSON, LLP			PRO				1,371.70
LOS	ANGELES, CA 90071							
	1							

SUBTOTAL \$

1,371.70

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

Schedule F Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

Statement covers period CALIFORNIA FORM

SEE INSTRUCTIONS ON REVERSE	through 01/18/2020	Page6 of6
NAME OF FILER		I.D. NUMBER
YOUTH AND FAMILIES TAKING POWER SUPPORTING GEORGE GASCON FOR DISTRICT ATTORNEY 2020, SPONSORED BY I	A VOICE ACTION	1422237
CODES: If one of the following codes accurately describes the payment, you may enter the code. Other	erwise, describe the payment.	

CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member communication MTG meetings and appeara OFC office expenses PET petition circulating PHO phone banks POL polling and survey res POS postage, delivery and PRO professional services PRT print ads	earch messenger services	RFD returned contri SAL campaign worl TEL t.v. or cable air TRC candidate trave TRS staff/spouse tra TSF transfer betwee VOT voter registrati	n workers' salaries ble airtime and production costs e travel, lodging, and meals use travel, lodging, and meals between committees of the same candidate/sponsor		
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	
BT STRATEGIES SOUTH PASADENA, CA 91031	CNS	15,000.00	0.00	15,000.00	0.00	
REED & DAVIDSON, LLP LOS ANGELES, CA 90071	PRO	1,371.70	0.00	1,371.70	0.00	
				1	1	

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS \$	16,371.70\$	0.00\$	16,371.70\$.0.00

Schedule F Summary

	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 \$	16,371.70
3.	Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)		

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for

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