**Recipient Committee** COVER PAGE Campaign Statement 460 Cover Page 2001/02 FORM Statement covers period Date of election if applicable: (Month, Day, Year) 9 Page 1 PROPOSITION B UNI from 1/1/2020 For Official Use Only through 6/30/2020 SEE INSTRUCTIONS ON REVERSE 1. Type of Recipient Committee: All Committees- Complete Parts 1, 2, 3, and 4. 2. Type of Statement: Preelection Statement Officeholder, Candidate Controlled Committee Primarily Formed Ballot Measure Quarterly Statement Committee Semi-annual Statement Special Odd-Year Report State Candidate Election Committee Recall Controlled Termination Statement (Also Complete Part 5) (Also file a Form 410 Termination) Sponsored Amendment (Explain below) (Also Complete Part 6) General Purpose Committee Sponsored Primarily Formed Candidate/ Officeholder Committee Small Contributor Committee (Also Complete Part 7) Political Party/Central Committee I.D. NUMBER Treasurer(s) 3. Committee Information 1392723 NAME OF TREASURER COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Yes on H - Communities United to End Homelessness, Major funding by Mark Vincent Harris Ridley-Thomas Committee for a Better L.A. with support from a coalition MAILING ADDRESS of Nonprofit Organizations, Businesses and Labor Orgs CITY ZIP CODE AREA CODE/PHONE STATE STREET ADDRESS (NO P.O. BOX) Elk Grove CA 95758 (916) 798-6696 NAME OF ASSISTANT TREASURER, IF ANY CITY STATE ZIP CODE AREA CODE/PHONE Los Angeles CA 90017 (213) 452-6565 MAILING ADDRESS MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX CITY STATE ZIP CODE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE OPTIONAL: FAX/E-MAIL ADDRESS OPTIONAL: FAX/E-MAIL ADDRESS

4. Verification	I have used all reasonable diligence in pre- under penalty of perjucy under the laws of		this statement and to the best of my knowledge the information contained herein and in the attached schedules is to a that the foregoners are and covers.	rue and complete. I certify
Executed on	7/31/2020	Ву		
(.*	DATE		SIGNATURE OF TREASURER OR ASSISTANT TREASURER	
Executed on		Ву		
	DATE		SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT, OR RESPONSIBLE OFFICER OF PROPONENT	FPPC Form 460 (Jan/2016
Executed on		Ву		FPPC Advice
	DATE		SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT	advlce@fppc.ca.go
Executed on		Ву		(866/275-3772
70	DATE		SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT	www.fppc.ca.go

(213) 452-6575 / sshin@kaufmanlegalgroup.com

Recipient Committee Campaign Statement Cover Page

Cover Page			Date Starri	2	2001/02 460 FORM		
	Statement covers period from 1/1/2020	Date of election if applicable: (Month, Day, Year)		Pag			
SEE INSTRUCTIONS ON REVERSE	through 6/30/2020						
State Candidate Election Committee  Recall (Also Complete Part 5)  General Purpose Committee	Complete Parts 1, 2, 3, and 4.  Primarily Formed Ballot Measure Committee  Controlled Sponsored (Also Complete Part 6)  Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	2. Type of Staten  ☐ Preelection Statem ☐ Semi-annual Stater ☐ Termination Statem (Also file a Form 410 T ☐ Amendment (Expla	ent ment nent Termination)	☐ Quarterly S ☐ Special Od			
2 2 24 1 5 2 2 2	support from a coalition	Treasurer(s)  NAME OF TREASURER  Vincent Harris  MAILING ADDRESS					
STREET ADDRESS (NO P.O. BOX)		CITY Elk Grove	STATE CA	ZIP CODE 95758	AREA CODE/PHONE (916) 798-6696		
CITY STATE ZIP CODE Los Angeles CA 90017 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX	AREA CODE/PHONE (213) 452-6565	NAME OF ASSISTANT TREAS	SURER, IF ANY				
CITY STATE ZIP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE		
OPTIONAL: FAXIE-MAIL ADDRESS (213) 452-6575 / sshin@kaufmanlegalgrou		OPTIONAL: FAX/E-MAIL ADDI					
4. Verification  Executed on  Executed on  Executed on  DATE	e of California that the foregoing ல எய்ப அர By	t of my knowledge the information of conecity  SIGNATURE OF TREASURER OR ASSIS		the attached schedule	s is true and complete. I certify		
Executed on DATE  Executed on	Ву	FICEHOLDER, CANDIDATE, STATE MEASURE	2010 W.O. Bertoline Michigan Sellin Mac (400 CC)		FPPC Form 460 (Jan/2016 FPPC Advice advice@fppc.ca.go		
Executed onDATE	Ву	RE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT  (866/2 RE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT  WWW.fpp					

CALIF FO	ORN RM	IA 4	60
Page	2	of	9

. Officeholder or Candidate Controlled Co	mmittee	6.Primarily Formed Ba	llot Measure Commi	ttee
NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BALLOT MEASURE	Combat Homelessness	
OFFICE SOUGHT OR HELD(INCLUDE LOCATION AND DISTRICT NUMBER	R IF APPLICABLE)	BALLOT NO. OR LETTER H	JURISDICTION Los Angeles County	✓ SUPPORT  □ OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY	STATE ZIP	Identify the controlling office	holder, candidate, or state me	easure proponent, if any
		NAME OF OFFICEHLOLDER, CANDI	DATE, OR PROPONENT	
Related Committees Not Included in this Statement: Li not included in this statement that are controlled by you or are primarily contributions or make expenditures on behalf of your candidacy.		OFFICE SOUGHT OR HELD	DISTRIC	T NO. IF ANY
COMMITTEE NAME I.D.	NUMBER	7. Primarily Formed Cand officeholder(s) or candidate(s) for which		ommittee List names of
	NTROLLED COMMITTEE?	NAME OF OFFICEHOLDER OR CAND	IDATE OFFICE SOUGHT OR	HELD SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)		-		OPPOSE
CITY STATE ZIP CODE	AREA CODE/PHONE	NAME OF OFFICEHOLDER OR CAND	IDATE OFFICE SOUGHT OR	SUPPORT OPPOSE
	NUMBER	NAME OF OFFICEHOLDER OR CAND	IDATE OFFICE SOUGHT OR	SUPPORT
. NAME OF TREASURER CO	NTROLLED COMMITTEE?	NAME OF OFFICEHOLDER OR CAND	IDATE OFFICE SOUGHT OR	HELD DOUBBORT
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)				SUPPORT
CITY STATE ZIP CODE	AREA CODE/PHONE	Attach co	ontinuation sheets if necessar	ту

FPPC Form 460 (Jan/2016)

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

# Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

CALIF	ORN RM	IA _	160
Page	3	of	9
-			

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on H - Communities United to End Homelessness, Major funding by Mark Ridley-Thomas Committee for a Better L.A. with support from a coalition of Nonprofit Organizations, Businesses and Labor Orgs

I.D. NUMBER 1392723

Contributions Received	Column A  Total This Period (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections		
1. Monetary Contributions Schedule A, Line 3	\$0.00	\$0.00	1/1 through 6/30 7/1 to Date		
2. Loans Received Schedule B, Line 3	\$0.00	\$0.00	20. Contributions		
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1+ 2	\$0.00	\$0.00	Received		
4. Nonmonetary Contributions \$chedule C, Line 3	\$0.00	\$0.00	21. Expenditures		
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$0.00	\$0.00	Made		
Expenditures Made			Expenditure Limit Summary for State		
6. Payments Made Schedule E, Line 4	\$3,471.74	\$3,471.74	Candidates		
7. Loans Made Schedule H, Line 3	\$0.00	\$0.00	22. Cumulative Expenditures Made *		
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$3,471.74	\$3,471.74	(If Subject to Voluntary Expenditure Limit)		
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	\$88.70	\$301.20	Date of Election Total to Date		
10. Nonmonetary Adjustment Schedule C, Line 3	\$0.00	\$0.00	(mm/dd/yyyy)		
11. TOTAL EXPENDITURES MADE Add Lines 8 +9 + 10	\$3,560.44	\$3,772.94			
Current Cash Statement					
12. Beginning Cash Balance Previous Summary Page, Line 16	\$316,732.16	To calculate Column B, add			
13. Cash Receipts Column A, Line 3 above	\$0.00	amounts in Column A to the corresponding amounts from			
14. Miscellaneous Increases to Cash Schedule I, Line 4	\$0.00	Column B of your last report. Some amounts in Column A			
15. Cash Payments Column A, Line 8 above	\$3,471.74	may be negative figures that	*Amounts in this section may be different from an arrange		
16. ENDING CASH BALANCEAdd Lines 12+13+14, then subtract Line 15	\$313,260.42	should be subtracted from previous period amounts. If	*Amounts in this section may be different from amount reported in schedule B.		
If this is a termination statement, Line 16 must be zero.		this is the first report being filed for this calendar year, only carry over the amounts			
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$0.00	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	\$301.20		FPPC Form 460 (Jan/201 FPPC Advice: advice@fppc.ca.gov (866/275-377 www.fppc.ca.g		

#### . Amounts may be rounded to whole dollars.

Schedule E

**Payments Made** 

Statement covers period

SCHEDULE E

**CALIFORNIA** 

**FORM** 1/1/2020 Page 4 of 6/30/2020 SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Yes on H - Communities United to End Homelessness, Major funding by Mark Ridley-Thomas Committee for a Better L.A. with support from a 1392723 coalition of Nonprofit Organizations, Businesses and Labor Orgs 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 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 CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Kaufman Legal Group, APC PRO \$500.00 Los Angeles, CA 90017-5864 Kaufman Legal Group, APC PRO \$500.00 Los Angeles, CA 90017-5864 Kaufman Legal Group, APC OFC \$100.60 Los Angeles, CA 90017-5864 \* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$1,100.60 Schedule E Summary 1. Itemized payments made this period. (Include all Schedule E subtotals.)..... \$3,421.74 2. Unitemized payments made this period of under \$100..... \$50.00

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....

\$0.00

\$3,471.74

# Schedule E Payments Made

. Amounts may be rounded to whole dollars.

Statement covers period

SCHEDULE E

CALIEOPHIA 40

Payments Made				1/1/2020	FOR		46	OU	
SEE INSTRUCTIONS ON REVERSE				from	6 10 0 10 0 0 0	Page	5 <b>o</b>	f	9
NAME OF FILER Yes on H - Communities United to End Homelessness, & coalition of Nonprofit Organizations, Businesses and		idley-Thomas Co	mmittee for a Better L.A.	with support	from a	I.D. NUMBE 139272:			
CODES: If one of the following codes accurate	ely describes the pay	ment, you ma	ay enter the code. Other	wise, desci	ribe the paymer	nt.			
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 LEG legal defense LIT campaign literature and mailings		nd appearances nses ulating ks		RFD SAL TEL TRC TRS TSF VOT	radio airtime and proc returned contributions campaign workers' sa t.v. or cable airtime an candidate travel, lodg staff/spouse travel, lo transfer between com voter registration information technologi	s laries nd production co ling, and meals dging, and mea mittees of the s	ls ame candid	date/spoi	nsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION	OF PAYMENT		Al	TAUON	PAID
Kaufman Legal Group, APC Los Angeles, CA 90017-5864		OFC						\$10	8.64
Kaufman Legal Group, APC	· · · · · · · · · · · · · · · · · · ·	OFC				16		\$10	0.80
Los Angeles, CA 90017-5864									
Kaufman Legal Group, APC		OFC						\$11	1.70
Los Angeles, CA 90017-5864		1							
* Payments that are contributions or independent expendit	tures must also be summa	rized on Schedu	le D.			SUBTOTAL		\$32	21.14
Schedule E Summary									COOR ADDRESS
1. Itemized payments made this period. (Include all Sche	dule E subtotals.)						\$	3,42	
2. Unitemized payments made this period of under \$100.								\$5	0.00
3. Total interest paid this period on loans. (Enter amount	from Schedule B, Part 1,	Column (e).)						\$	0.00

\$3,471.74

### Schedule E Payments Made

. Amounts may be rounded to whole dollars.

SCHEDULE E

Payments Made				1	/1/2020	FORM		460	
SEE INSTRUCTIONS ON REVERSE				OIII	30/2020	The second second second	6 of	9	
NAME OF FILER Yes on H - Communities United to End Homelessness, M coalition of Nonprofit Organizations, Businesses and	idley-Thomas Committee for a Better L.A. wi			support fro	om a	I.D. NUMBER 1392723			
CODES: If one of the following codes accurate	ely describes the pay	ment, you ma	ay enter the code	e. Otherwise,	describe	the paymer	nt.		
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 LEG legal defense LIT campaign literature and mailings		nd appearances nses ulating (s			RFD return SAL camp TEL t.v. or TRC cand TRS staff/ TSF transi	date travel, lodg spouse travel, lo er between com registration	s laries ad production costs	e candidat	e/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCR	RIPTION OF F	AYMENT		AMC	OUNT PAID
Kaufman Legal Group, APC Los Angeles, CA 90017-5864		PRO						1000	\$500.00
Kaufman Legal Group, APC Los Angeles, CA 90017-5864		PRO							\$500.00
Kaufman Legal Group, APC Los Angeles, CA 90017-5864		PRO						26.00	\$500.00
* Payments that are contributions or independent expendit	ures must also be summa	rized on Schedu	le D.			VI.	SUBTOTAL	\$	1,500.00
Schedule E Summary	;								
1. Itemized payments made this period. (Include all Sched	lule E subtotals.)				•••••			\$3	,421.74
2. Unitemized payments made this period of under \$100									\$50.00

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).

\$0.00

\$3,471.74

# Schedule E **Payments Made**

. Amounts may be rounded to whole dollars.

SCHEDULE E

Statement covers period		CALIF		IA	460
from	1/1/2020	FO Page	RM 7	of	9
through	6/30/2020	-	-		1551
th support from a		1.D. NUMB			

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on H - Communities United to End Homelessness, Major funding by Mark Ridley-Thomas Committee for a Better L.A. with support from a

coalition of Nonprofit Organizations, Businesses and Labor Orgs

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

LEG legal defense

MBR member communications MTG meetings and appearances

OFC office expenses

PET petition circulating PHO phone banks

POL polling and survey research

POS postage, delivery and messenger services PRO professional services (legal, accounting)

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

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	
Kaufman Legal Group, APC	PRO		\$500.00	
Los Angeles, CA 90017-5864			1000.00	

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTAL	\$500.00
Schedule E Summary		
1. Itemized payments made this period. (Include all Schedule E subtotals.)		\$3,421.74
2. Unitemized payments made this period of under \$100		\$50.00
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	\$3,471.74

# Schedule F Accrued Expenses (Unpaid Bills)

Statement covers period CALIFORNIA **FORM** 1/1/2020 from Page 8 of 9 6/30/2020 through I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on H - Communities United to End Homelessness, Major funding by Mark Ridley-Thomas Committee for a Better L.A. with support from a

1392723

coalition of Nonprofit Organizations, Businesses and Labor Orgs

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. RAD radio airtime and production costs MBR member communications RFD returned contributions CNS campaign consultants MTG meetings and appearances SAL campaign workers' salaries CTB contribution (explain nonmonetary)\* OFC office expenses TEL t.v. or cable airtime and production costs CVC civic donations PET petition circulating TRC candidate travel, lodging, and meals FIL candidate filing/ballot fees PHO phone banks FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor IND independent expenditure PRO professional services (legal, accounting) LEG legal defense VOT voter registration LIT campaign literature and mailings PRT print ads WEB information technology costs (Internet, e-mail) (d) NAME AND ADDRESS OF CREDITOR CODE OR DESCRIPTION OF **OUTSTANDING BALANCE** AMOUNT INCURRED AMOUNT PAID THIS OUTSTANDING **BEGINNING OF THIS** THIS PERIOD BALANCE AT CLOSE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) PAYMENT PERIOD OF THIS PERIOD PERIOD

		FERIOD		(ALSO REPORT ON E)	OF THIS PERIOD
Kaufman Legal Group, APC	OFC	\$111.70	\$0.00	\$111.70	\$0.00
Los Angeles, CA 90017-5864	100.2000	* (************************************	(A 1909 CO)	Time and the Color (1990)	
Kaufman Legal Group, APC	OFC	\$100.80	\$0.00	\$100.80	\$0.00
Los Angeles, CA 90017-5864	OFC	\$100.80	\$0.00	7100.00	70.00
Kaufman Legal Group, APC	OFC	\$0.00	\$100.10	\$0.00	\$100.10
Los Angeles, CA 90017-5864	OFC.	\$0.00	\$100.10	Ç0.00	\$100.10
*Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$212.50	\$100.10	\$212.50	\$100.10
Schedule F Summary  1. Total accrued expenses incurred this period. (Include a accrued expenses of \$100 or more, plus total unitemized			IN.	CURRED TOTALS	\$301.20
2. Total accrued expenses paid this period. (Include all Saccrued expenses of \$100 or more, plus total unitemized	chedule F, Column (c) subtotals for p	payments on ler \$100.)		PAID TOTALS	\$212.50
3. Net change this period. (Subtract Line 2 from Line 1. E				NET	\$88.70
and on the Summary Lage, Column A, Line 3.) minimum				(1	May be a negative number)

FPPC Form 460 (Jan/2016) FPPC Advice; advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

# Schedule F Accrued Expenses (Unpaid Bills)

. Amounts may be rounded to whole dollars.

SCHEDULE F

Statement covers period		CALIFORNIA 460						
from	1/1/2020	And the second second	RM					
through	6/30/2020	Page -	9	of —	9			
		I.D. NUMB						

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on H - Communities United to End Homelessness, Major funding by Mark Ridley-Thomas Committee for a Better L.A. with support from a coalition of Nonprofit Organizations, Businesses and Labor Orgs

1392723

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

LEG legal defense

LIT campaign literature and mailings

MBR member communications

MTG meetings and appearances

OFC office expenses PET petition circulating

PHO phone banks

POL polling and survey research

POS postage, delivery and messenger services PRO professional services (legal, accounting)

PRT print ads

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

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
Kaufman Legal Group, APC			PINNER CONT		montones (sees)
Los Angeles, CA 90017-5864	OFC	\$0.00	\$100.80	\$0.00	\$100.80
Kaufman Legal Group, APC	o Fig	40.00			AUCSTONOS KONSE
Los Angeles, CA 90017-5864	OFC	\$0.00	\$100.30	\$0.00	\$100.30

*Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$0.00	\$201.10	\$0.00	\$201.10
Schedule F Summary					
<ol> <li>Total accrued expenses incurred this period. (Include all Schedule accrued expenses of \$100 or more, plus total unitemized payments</li> </ol>	e F, Column (b) subtotals for on accrued expenses under \$100.)		INCURRE	D TOTALS	\$301.20
2. Total accrued expenses paid this period. (Include all Schedule F, accrued expenses of \$100 or more, plus total unitemized payments	Column (c) subtotals for payments on accrued expenses under \$100.)	on	PAI	D TOTALS	\$212.50
3. Net change this period. (Subtract Line 2 from Line 1. Enter the diff and on the Summary Page, Column A, Line 9.)	act Line 2 from Line 1. Enter the difference here mn A, Line 9.)			NET	\$88.70
5 823				-	(May be a negative number)