Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)		Los RECI	Date Stamp IVED BY LES COUNT	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE	Statement covers period from01/01/2020 through09/19/2020	Date of election if applicate 20 OCT (Month, Day, Year)  PROPOS  11/03/2020  10/2	26 AMII:21 ITION BUNII 2/2020 (F)	For Official Use Only
O State Candidate Election Committee O Recall (Also Complete Part 5)  ☐ General Purpose Committee O Sponsored O Small Contributor Committee	imarily Formed Ballot Measure immittee Controlled Sponsored to Complete Part 6) marily Formed Candidate/ ficeholder Committee to Complete Part 7)	2. Type of Statement:    X   Preelection Statement     Semi-annual Statement     Termination Statement     (Also file a Form 410 Terminatio     X   Amendment (Explain below)     Update Summary Page, Schedu	☐ Qu ☐ Spr ☐ Su Sta	arterly Statement ecial Odd-Year Report pplemental Preelection ttement - Attach Form 495
3. Committee Information	NUMBER 432447 of Nonprofit	Treasurer(s)  NAME OF TREASURER  Thomas Newman  MAILING ADDRESS		CODE AREA CODE/PHONE
CITY STATE ZIP COD  Los Angeles CA 90015  MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO  CITY STATE ZIP COD  Los Angeles CA 90036  OPTIONAL: FAX / E-MAIL ADDRESS  ReimagineLA@deaneandcompany.com	(213) 808-6271 X E AREA CODE/PHONE	Los Angeles NAME OF ASSISTANT TREASURER, IF AL Shawnda Deane MAILING ADDRESS  CITY Sacramento OPTIONAL: FAX / E-MAIL ADDRESS	STATE ZIP	CODE AREA CODE/PHONE (916) 285-5733
4. Verification  I have used all reasonable diligence in preparing and reviewing to under penalty of perjury under the laws of the State of California  Executed on	ByByByBy	wiledge the information contained herein and in  Amedical of Treasurer or Assistant Treasurer  teeling Officeholder, Candidate, State Measure Proponent or Re  Signature of Controlling Officeholder, Candidate, State Measure  Signature of Controlling Officeholder, Candidate, State Measure	sponsible Officer of Sponso Proponent	

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

COVER PAGE

### Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2										
	ORNIA ORM	4	<b>160</b>							
Page _	2	of_	25							

Officeholder or Candidate Controlled Commi	ttee	6.	. Primarily Formed Ballo	t Measure Committe	ee ·	
NAME OF OFFICEHOLDER OR CANDIDATE	ž.		NAME OF BALLOT MEASURE Budget Allocation for	Alternatives to Inca	rceration Charter Amen	ıdment
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRIC	NUMBER IF APPLICABLE)	٠	BALLOT NO. OR LETTER	JURISDICTION  Los Angeles County	X SUPPORT  ☐ OPPOSE	
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CIT	TY STATE ZIP		J Identify the controlling off	4	state measure proponent,	if any
			NAME OF OFFICEHOLDER, CAN	DIDATE, OR PROPONENT		
Related Committees Not Included in this Statement included in this statement that are controlled by you of contributions or make expenditures on behalf of your canditures.	r are primarily formed to receive		OFFICE SOUGHT OR HELD		DISTRICT NO. IF ANY	
COMMITTEE NAME	I.D. NUMBER		<del></del>			
NAME OF TREASURER	CONTROLLED COMMITTEE?	7	. Primarily Formed Cand officeholder(s) or candidate(s			ř
COMMITTEE ADDRESS (NO P.O. BO	×)		NAME OF OFFICEHOLDER OR C	ANDIDATE OFFICE SO	UGHT OR HELD SUPPO	
CITY STATE ZIP CO	DDE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR O	CANDIDATE OFFICE SO	UGHT OR HELD SUPP	
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR O	ANDIDATE OFFICE SO	UGHT OR HELD SUPP	PORT OSE
NAME OF TREASURER	CONTROLLED COMMITTEE?	s.*	NAME OF OFFICEHOLDER OR C	CANDIDATE OFFICE SO	UGHT OR HELD SUPP	PORT OSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BO	X)					
CITY STATE ZIP CO	DDE AREA CODE/PHONE		Attac	th continuation sheets if	necessary	

#### Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

SUMMARY PAGE

| Statement covers period | FORM | 4-60 | FO

NAME OF FILER Yes on J: Re-Imagine L.A. County, A Coalition of Nonprofit Organizations and Justice Advocates Column A Column B Calendar Year Summary for Candidates Contributions Received TOTALTHIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROMATTACHED SCHEDULES) TOTALTODATE **General Elections** 1/1 through 6/30 7/1 to Date 2. Loans Received ...... Schedule B, Line 3 0.00 0.00 20. Contributions 327,257.21 \$ 327,257.21 3. SUBTOTAL CASH CONTRIBUTIONS ...... Add Lines 1 + 2 \$ \_\_\_\_\_ Received 4. Nonmonetary Contributions ...... Schedule C, Line 3 13,986.00 13,986.00 21. Expenditures Made \$ 341,243.21 **Expenditures Made Expenditure Limit Summary for State** Candidates 0.00 22. Cumulative Expenditures Made\* 29,784.33 (If Subject to Voluntary Expenditure Limit) 9. Accrued Expenses (Unpaid Bills) .......Schedule F, Line 3 401,499.00 401,499.00 Date of Election Total to Date (mm/dd/yy) 10. Nonmonetary Adjustment ...... Schedule C, Line 3 13,986.00 13,986.00 445,269.33 Current Cash Statement 0.00 12. Beginning Cash Balance ...... Previous Summary Page, Line 16 \$ \_\_\_\_\_\_ To calculate Column B, add 327,257.21 amounts in Column A to the corresponding amounts \*Amounts in this section may be different from amounts 0.00 14. Miscellaneous Increases to Cash ...... Schedule I, Line 4 from Column B of your last reported in Column B. report. Some amounts in 15. Cash Payments ...... Column A, Line 8 above 29,784.33 Column A may be negative 297,472.88 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 17, LOAN GUARANTEES RECEIVED ...... Schedule B. Part 2 \$ \_\_\_\_\_ 0.00 carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). - 18. Cash Equivalents ...... See instructions on reverse \$ \_\_\_\_\_ 

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

Schedule Monetary	A Contributions Received		ts may be rounded whole dollars.	Statement cover from01/01/20 through09/19/20	020	FO	ORNIA 460
	ONS ON REVERSE			through	020	Page _	
NAME OF FILER Yes on J: Re	e-Imagine L.A. County, A Coalition of Nonprofit O	rganizations	and Justice Advocates			I.D. NUN	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, 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 CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
09/15/2020	Susan Anderson Los Angeles, CA 90039	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	1	00.00	
09/04/2020	Maia Armaleo Los Angeles, CA 90028	⊠IND □COM □OTH □PTY □SCC	Faculty Coordinator University of Southern California	100.00	1	00.00	
09/17/2020	Brilliant Corners San Francisco, CA 94103	□IND □COM 図OTH □PTY □SCC		10,000.00	10,0	00.00	a
09/18/2020	Donna Brim Pigsah Forest, NC 28768	☑IND □COM □OTH □PTY □SCC	Retired n/a	100.00	1	00.00	
09/16/2020	Margaret Brodkin San Francisco, CA 94114	⊠IND □COM □OTH □PTY □SCC	Principal Investigator San Francisco State University	100.00	1	00.00	
			SUBTOTALS	\$ 10,400.00			
	A Summary ceived this period – itemized monetary contributions.				Name with the same of	ibutor Co Individual	

(Include all Schedule A subtotals.) .....\$ \_ 319,599.73

2. Amount received this period - unitemized monetary contributions of less than \$100 ......\$ 7,657.48

3. Total monetary contributions received this period.  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

Amounts may be rounded to whole dollars.

SCHEDULE A	(CONT.)
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ded	Statement covers period	CALIFORNIA 460				
	from01/01/2020					
	through 09/19/2020	Page5 of25				
		I.D. NUMBER				

Yes on J: Re-Imagine L.A. County, A Coalition of Nonprofit Organizations and Justice Advocates

		_				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. 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)
09/18/2020	Elise Buik Los Angeles, CA 90039	IND COM OTH PTY SCC	Non-Profit United Way of Greater LA	100.00	100.00	
09/15/2020	Angelina Burnett Venice, CA 90291	⊠IND □COM □OTH □PTY □SCC	Writer Angelina Burnett	526.08	526.08	
09/09/2020	Emily Caesar Los Angeles, CA 90027	⊠IND □COM □OTH □PTY □SCC	Public Health Professional Los Angeles County	180.00	180.00	
09/10/2020	Jess Camacho Brooklyn, NY 11217	⊠IND □COM □OTH □PTY □SCC	Writer Jess Camacho	500.00	500.00	
09/09/2020	Rachel Cantu Los Angeles, CA 90067	⊠IND □COM □OTH □PTY □SCC	Musician Rachel Cantu	210.62	473.82	
			SUBTOTAL \$	1,516.70		

\*Contributor Codes

IND - Individual

NAME OF FILER

COM - Recipient Committee

(other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY-Political Party

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

monotary continuations reserved		to whole dollars.			2020	FORM 460		
				through09/19/	2020	Page	6 of <u>25</u>	
NAME OF FILER						I.D. NUM	BER	
Yes on J: Re-	-Imagine L.A. County, A Coalition of Nonprofit Or	ganizations	and Justice Advocates			143244	.7	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
09/18/2020	Rachel Cantu Los Angeles, CA 90067	⊠IND □COM □OTH □PTY □SCC	Musician Rachel Cantu	263.20	4	73.82		
09/13/2020	Charles Casler Los Angeles, CA 90014	⊠IND □COM □OTH □PTY □SCC	Not Employed n/a	100.00	1.	25.00		
09/15/2020	Charles Casler Los Angeles, CA 90014	IND COM OTH PTY	Not Employed n/a	25.00	1	25.00		
09/15/2020	David Dobkin Beverly Hills, CA 90212	⊠IND □COM □OTH □PTY □SCC	Producer Big Kid Productions	500.00	5	00.00		
09/14/2020	Joshua Decell Los Angeles, CA 90039	⊠IND □COM □OTH □PTY □SCC	Director Brilliant Corners	500.00	5	00.00		
			SUBTOTAL	\$ 1,388.20				

Amounts may be rounded

\*Contributor Codes IND-Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY-Political Party

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

		(1715/27070070150)		from01/01/	2020	FORM 400
				through 09/19/	- lug	e7 of25
NAME OF FILER					I.D.1	NUMBER
Yes on J: Re	-Imagine L.A. County, A Coalition of Nonprofit Or	ganizations	and Justice Advocates		143	2447
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. 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 TODATE (IF REQUIRED)
09/10/2020	Deborah DePuy Los Angeles, CA 90026	⊠IND □COM □OTH □PTY □SCC	Retired n/a	500.00	500.0	0
09/15/2020	Megan Dobkin Beverly Hills, CA 90212	⊠IND □COM □OTH □PTY □SCC	Producer Big Kid Pictures	500.00	500.0	0
09/06/2020	Clara Eberle Los Angeles, CA 90013	IND COM OTH PTY	Transportation Planner City of Los Angeles	100.00	100.0	0
09/18/2020	Ann English Los Angeles, CA 90006	IND COM OTH PTY	Senior Program Manager The Corporation for Supportive Housing	105.47	105.4	7
09/18/2020	Xochitl Flores Los Angeles, CA 90015	IND COM OTH PTY	Human Resources United Way of Greater LA	105.47	105.4	7
			SUBTOTALS	1,310.94	The Free	建建设备标。M

Amounts may be rounded

to whole dollars.

\*Contributor Codes

IND-Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

Amounts may be rounded to whole dollars. SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

				from01/01/	2020	ORM TOO
				through 09/19/	rage	8 of25
NAME OF FILER	M a				I.D.N	UMBER
Yes on J: Re	-Imagine L.A. County, A Coalition of Monprofit Or	ganizations	and Justice Advocates		1432	447
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/05/2020	Seth Goldman Los Angeles, CA 90024	IND  COM  OTH  PTY  SCC	Not Employed n/a	105.47	105.47	
09/17/2020	Amy Gorton Los Angeles, CA 90026	XIND □COM □OTH □PTY □SCC	Communications Director Teamsters Local 399	100.00	100.00	
09/02/2020	Elisa Gozarkhah Los Angeles, CA 90064	IND COM OTH PTY SCC	Attorney The Law Man Group	105.47	157.07	6
09/15/2020	Elisa Gozarkhah Los Angeles, CA 90064	☑IND □COM □OTH □PTY □SCC	Attorney The Law Man Group	26.60	157.07	
09/18/2020	Elisa Gozarkhah Los Angeles, CA 90064	☑IND □COM □OTH □PTY □SCC	Attorney The Law Man Group	25.00	157.07	
			SUBTOTALS	362.54		

\*Contributor Codes

IND-Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY-Political Party

SCHEDULE A (CONT.)

Statement covers period CALIFORNIA 4 CO

Monotary Contributions Received		to whole o	dollars.	from01/01/	2020	FORM 460		
				through 09/19/	2020	Page_	9 of <u>25</u>	
NAME OF FILER						I.D. NUI	MBER	
Yes on J: Re-	Imagine L.A. County, A Coalition of Nonprofit Or	ganizations	and Justice Advocates			14324	47	
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, ENTERNAME OFBUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)	
09/05/2020	Michael Graff-Weisner Los Angeles, CA 90064	⊠IND □COM □OTH □PTY □SCC	Nonprofit Manager Chrysalis	105.47		05.47		
09/16/2020	Carter Gunn Los Angeles, CA 90027	⊠IND □COM □OTH □PTY □SCC	Video Editor Carter Gunn	500.00	50	00.00		
09/15/2020	Kirsten Hansen Sierra Madre, CA 91024	IND  COM  OTH  PTY  SCC	Librarian The Claremont Colleges Services	100.00	10	00.00		
09/04/2020	Susan Harper Porter Ranch, CA 91326		Not Employed n/a	105.47		05.47		
08/28/2020	Phillip Holmes Los Angeles, CA 90027	⊠IND □COM □OTH □PTY □SCC	Chief Executive Officer Swell Creative Group	10.00		20.00		
			SUBTOTAL	\$ 820.94		W.		

Amounts may be rounded

\*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY-Political Party

SCHEDULE A (CONT.)

Statement covers period

Monetary Contributions Received		to whole dollars.		from 01/01/		FORM 460		
				through 09/19/	2020	Page _		
NAME OF FILER				· · · · · ·		I.D. NUN	MBER	
Yes on J: Re	-Imagine L.A. County, A Coalition of Nonprofit Or	ganizations	and Justice Advocates			143244	17	
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 I CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)	
08/29/2020	Phillip Holmes Los Angeles, CA 90027	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Chief Executive Officer Swell Creative Group	10.00	12	0.00		
09/02/2020	Phillip Holmes Los Angeles, CA 90027	⊠IND □COM □OTH □PTY □SCC	Chief Executive Officer Swell Creative Group	100.00	12	0.00	8	
09/15/2020	Ade Jackson Los Angeles, CA 90067	IND COM OTH PTY	Attorney Ade Jackson	105.47	10	5.47	÷	
09/18/2020	Chris Ko Los Angeles, CA 90034	⊠IND □COM □OTH □PTY □SCC	Nonprofit Director United way of Greater Los Angeles	105.47	10	5.47		
09/02/2020	Arjun Kolachalam West Hollywood, CA 90048	XIND COM OTH PTY SCC	Investor Arjun Kolachalam	105.47	21	0.94		
			SUBTOTALS	426.41				

Amounts may be rounded

\*Contributor Codes

IND-Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY-Political Party

### Schedule A (Continuation Sheet)

SCHEDULE A (CONT.)

Monetar	y Contributions Received	10 시에 10 m 3 10 m 1 10 10 10 10 10 10 10 10 10 10 10 10 1	Amounts may be rounded to whole dollars.		overs period	CALIF	CALIFORNIA 46	
		to whole do			from01/01/2020		FORM 4	
			through 09/19/2020			Page11 of25		
NAME OF FILER	1					I.D. NUM	IBER	
Yes on J: R	Re-Imagine L.A. County, A Coalition of Non	profit Organizations an	d Justice Advocates			143244	7	
	FULL NAME, STREET ADDRESS AND ZIP CODE OF COM	ITRIBUTOR CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE	TO DATE	PER EL	ECTION

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)
09/18/2020	Arjun Kolachalam West Hollywood, CA 90048	⊠IND □COM □OTH □PTY □SCC	Investor Arjun Kolachalam	105.47	210.94	
09/16/2020	Mark Lim Cincinnati, OH 45248	⊠IND □COM □OTH □PTY □SCC	Instructional Designer California State University, Long Beach	100.00	100.00	
09/07/2020	Marie Mazzone Los Angeles, CA 90035	⊠IND □COM □OTH □PTY □SCC	Retired n/a	100.00	100.00	
09/08/2020	Emma Nace Los Angeles, CA 90018	⊠IND □COM □OTH □PTY □SCC	Nurse Practitioner Wilmington Community Clinic and Family Care Specialists	50.00	100.00	
09/11/2020	Emma Nace Los Angeles, CA 90018	⊠IND □COM □OTH □PTY □SCC	Nurse Practitioner Wilmington Community Clinic and Family Care Specialists	50.00	100.00	
			SUBTOTALS	405.47		

\*Contributor Codes IND-Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other (e.g., business entity) PTY-Political Party

SCHEDULE A (CONT.
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Monetary Contributions Received	Amounts may be rounded to whole dollars.	Statement covers period from01/01/2020	CALIFORNIA 460
		through09/19/2020	Page12 of25
NAME OF FILER			I.D. NUMBER
Yes on J: Re-Imagine L.A. County, A Coalition of Non	profit Organizations and Justice Advocates		1432447

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 (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TODATE (IF REQUIRED)
09/08/2020	Mary Newman  Los Angeles, CA 90026	⊠IND □COM □OTH □PTY □SCC	Healthcare Consultant Health Management Associates	250.00	250.00	
09/02/2020	Edward O'Conner  Los Angeles, CA 90041	⊠IND □COM □OTH □PTY □SCC	Not Employed n/a	105.47	105.47	
09/04/2020	Lucas O'Connor Los Angeles, CA 90048	⊠IND □COM □OTH □PTY □SCC	Retired n/a	105.47	105.47	14)
09/05/2020	Johann Pauwen Los Angeles, CA 90042	⊠IND □COM □OTH □PTY □SCC	Lead Design/Founder Kalon Studios	100.00	200.00	
09/15/2020	Johann Pauwen Los Angeles, CA 90042	⊠IND □COM □OTH □PTY □SCC	Lead Design/Founder Kalon Studios	100.00	200.00	
			SUBTOTALS	660.94		

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity) PTY - Political Party

SCHEDULE A (CONT.)

Statement covers period

Monetary Contributions Received		Amounts may to whole		01/2020 CA		FORM 460	
				through09/19/	2020	Page_	13 of25
NAME OF FILER		AV SAVEN	10 122 No. 20 10100 12	32-11-1-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		I.D. NUI	MBER
Yes on J: Re	-Imagine L.A. County, A Coalition of Nonprofit Or	ganizations	and Justice Advocates		-	14324	47
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. 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)
09/10/2020	Gina Viola Peake Los Angeles, CA 90068	⊠IND □COM □OTH □PTY □SCC	Chief Executive Officer Trade Show Temps	500.00	500.00		
09/02/2020	Elise Piatkowski Santa Monica, CA 90405	⊠IND □COM □OTH □PTY □SCC	Not Employed n/a	105.47	10	5.47	
09/16/2020	Zakary Pritchard Santa Monica, CA 90401	□IND □COM □OTH □PTY □SCC	Entertainer Zakary Pritchard	100.00	10	00.00	12
09/08/2020	Michael Reynolds Los Angeles, CA 90039	IND COM OTH PTY	Author Michael Reynolds	105.47	10	05.47	
09/18/2020	Randy Ross Rancho Palos Verdes, CA 90275	⊠IND □COM □OTH □PTY □SCC	Chief Executive Officer Bruce L. Ross & Company	100.00	10	00.00	19
			SUBTOTAL	\$ 910.94		W/15.5	

Amounts may be rounded

\*Contributor Codes IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other (e.g., business entity) PTY-Political Party

Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received		ontributions Received  Amounts may be rounded to whole dollars.		Statement covers period from01/01/2020		CALIFORNIA 460			
NAME OF FILER  Yes on J: Re-Imagine L.A. County, A Coalition of Nonprofit Organizations and Justice Advocates  through09/19/2020									
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)		
09/07/2020	Christopher Roth Los Angeles, CA 90014	⊠IND □COM □OTH □PTY □SCC	Not Employed n/a	100.00	1	00.00			
09/15/2020	Michael Russo Pasadena, CA 91106	⊠IND □COM □OTH □PTY □SCC	Advocacy Advancement Project California	105.47	1	05.47			
09/08/2020	Camille Sacristan Los Angeles, CA 90019	☑IND □COM □OTH □PTY □SCC	Not Employed n/a	105.47	1	05.47			
09/14/2020	Sarah Samual Los Angeles, CA 90025	☑IND □COM □OTH □PTY □SCC	Copywriter ImpaQ	105.47	1	05.47			

Art Director

Tic Toc Games

SUBTOTAL\$

XIND □ COM

□отн PTY ☐SCC

\*Contributor Codes

IND - Individual

09/04/2020

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

Zoe Serbin

Burbank, CA 91502

PTY-Political Party

SCC - Small Contributor Committee

105.47

105.47

521.88

### Schedule A (Continuation Sheet)

SCHEDULE A (CONT.)

Monetar	ry Contributions Received	Amounts may be rounded to whole dollars.	Sta from	01/01/20	CAL	CALIFORNIA 46		
			through	h09/19/20:	20 Page	15 of	f25	
NAME OF FILE	R				I.D. N	IUMBER		
Yes on J: 1	Re-Imagine L.A. County, A Coalition of Non	profit Organizations and Justice Advocat	es		1432	2447		
NAME OF TAXABLE PARTY.	FULL NAME STREET ADDRESS AND ZID CODE OF COL	IF AN INDIVIDUAL E	NTER AM	MOUNT C	CUMULATIVE TO DATE	PERE	LECTION	

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	Nicole Shanahan Portola Valley, CA 94028	⊠IND □COM □OTH □PTY □SCC	Founder/Chief Executive Officer ClearAccessIP	300,000.00	300,000.00	12
09/04/2020	Dana Simmons Los Angeles, CA 90027	IND COM OTH PTY	Professor University of California, Riverside	105.47	158.36	
09/15/2020	Dana Simmons Los Angeles, CA 90027	⊠IND □COM □OTH □PTY □SCC	Professor University of California, Riverside	52.89	158.36	
09/06/2020	Michael Soares Hawthrone, CA 90250	IND  COM  OTH  PTY  SCC	Not Employed n/a	105.47	105.47	
09/10/2020	Grace Song Los Angeles, CA 90004	⊠IND □COM □OTH □PTY □SCC	Public Health Advocate Grace Song	105.47	105.47	
			SUBTOTAL S	300,369.30	<b>在大学</b> 发展的企业	<b>对数据数据</b>

\*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

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

		to whole donals.		from01/01/2020		FORM 400	
		dr en		through09/19/	2020 Page	25 of 25	
NAME OF FILER	17				I.D. N	IUMBER	
Yes on J: Re-	Imagine L.A. County, A Coalition of Nonprofit Or	ganizations	and Justice Advocates		1432	2447	
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)	
09/15/2020	Lindsey Trinh Fremont, CA 94539		Not Employed n/a	100.00	100.00		
09/04/2020	Mallory Westfall Pasadena, CA 91107	⊠IND □COM □OTH □PTY □SCC	Writer/Producer UTV	100.00	200.00		
09/09/2020	Mallory Westfall Pasadena, CA 91107	⊠IND □COM □OTH □PTY □SCC	Writer/Producer UTV	100.00	200.00		
09/03/2020	Gillian Wynn Santa Monica, CA 90402	⊠IND □COM □OTH □PTY □SCC	Partner/Chief Creative Officer Mind Your Music	100.00	100.00		
09/18/2020	John Zappas Los Angeles, CA 90018	⊠IND □COM □OTH □PTY □SCC	Fine Art Installer John Zappas	105.47	105.47		
			SUBTOTAL\$	505.47			

\*Contributor Codes

IND-Individual

COM -- Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY-Political Party

Schedule C Nonmonetary Contributions Received			Amounts may be rounded to whole dollars.	**   ***	Statement covers period CALIFOR from 01/01/2020 FORM			
SEE INSTRUC	TIONS ON REVERSE				through 09/19/2	020	_ Page	17_ of25
NAME OF FILE							I.D. NUMBI	ER
Yes on J:	Re-Imagine L.A. County, A Coalition of N	onprofit Org	anizations and Justice	Advocates			1432447	
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)	DESCRIPTION OF GOODS OR SERVICE	AMOUNT/ FAIR MARKET VALUE	CAL	DATE ENDAR YEAR N 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
09/08/2020	United Way of Greater Los Angeles - Yes on Measure J (ID# 1432910) Los Angeles, CA 90015	□IND ☑COM □OTH □PTY □SCC		Staff Time	1,971.0	0	13,986.00	
09/19/2020	United Way of Greater Los Angeles - Yes on Measure J (ID# 1432910) Los Angeles, CA 90015	□IND  IND  IND  IND  IND  IND  IND  IND		Digital Communications	12,015.0	0	13,986.00	
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
Attach ad	ditional information on appropriately label	ed continuati	on sheets.	SUBTOTA	L\$ 13,986.0	0		
1. Amount	e C Summary received this period – itemized nonmonetary all Schedule C subtotals.)				\$13,986		*Contributor Cod IND – Individual COM – Recipient	
2. Amount	received this period – unitemized nonmoneta	ry contributio	ns of less than \$100		\$0			g., business entity)
	nmonetary contributions received this period. les 1 and 2. Enter here and on the Summary	Page, Columi	n A, Lines 4 and 10.)	TOTAL	\$13,986			ntributor Committee

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

Schedule E Payments Made  Amounts may to whole			(*)	Si	tatement covers perion01/01/2020	od CALIFO	
SEE INSTRUCTIONS ON REVERSE				thro	ough09/19/2020	Page1	18 of <u>25</u>
NAME OF FILER	4					I.D. NUM	BER
Yes on J: Re-Imagine L.A. County, A Coalition of	Nonprofit Organizations	and Just	ice Advocates		*	143244	7
CODES: If one of the following codes accurately decomposition of the following codes accurately decompositions campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filling/ballot fees  FND fundraising events  IND independent expenditure supporting/opposing others (explain legal defense)  LEG legal defense  LIT campaign literature and mailings	MBR member com MTG meetings and OFC office expen PET petition circu PHO phone banks POL polling and s ain)* POS postage, deli	munications d appearance ses ating survey resea very and me	es	RAD RFD SAL TEL TRC TRS TSF VOT	radio airtime and produ returned contributions	uction costs laries d production costs g, and meals lging, and meals mittees of the sam	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	387	CODE	OR I	DESCRIPTIO	N OF PAYMENT		AMOUNT PAID
Donately Corporation		OFC					124.74
San Diego, CA 92101			i.				
Method Campaign Services			Field Services				25,000.00
Burbank, CA 91505						ļ	
PayPal		OFC			8		224.92
San Jose, CA 95131							
* Payments that are contributions or independent expend	litures must also be summ	arized on \$	Schedule D.		*	SUBTOTAL\$	25,349.66
Schedule E Summary				-			
1. Itemized payments made this period. (Include all Sc	hedule E subtotals.)					\$	29,734.33
2. Unitemized payments made this period of under \$10	0					\$	50.00

FPPC Form 460 (Jan/2016)

29,784.33

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772) www.fppc.ca.gov

Schedule E	
(Continuation	Sheet)
Payments Mad	de

SCHEDULE E (CONT.)

Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.	Statement covers period from01/01/2020	CALIFORNIA 460
EE INSTRUCTIONS ON REVERSE	v .	through 09/19/2020	Page19 of25
IAME OF FILER			I.D. NUMBER
Yes on J: Re-Imagine L.A. County, A Coaliti	on of Nonprofit Organizations and Justice Advocates		1432447

Yes on J: Re-Imagine L.A. County, A Coalition of Nonprofit Organizations	and Jus	tice Advocates			1432447	
	munication d appearan ses lating survey reservery and n	s ces	RAD RFD SAL TEL TRC TRS TSF VOT	describe the payment. radio airtime and production of returned contributions campaign workers' salaries t.v. or cable airtime and produ- candidate travel, lodging, and staff/spouse travel, lodging, a transfer between committees voter registration information technology costs	uction costs meals and meals of the sam	e candidate/sponso
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTIO	N OF PAYMENT		AMOUNT PAID
Sadler Strategic Media, Inc. Studio City, CA 91604	PRT					3,686.0
Stripe, Inc. San Francisco, CA 94110	OFC		2.5	28		76.7
Stripe, Inc. San Francisco, CA 94110	OFC					25.7
Stripe, Inc. San Francisco, CA 94110	OFC					49.9
Stripe, Inc. San Francisco, CA 94110	OFC					93.5

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

SUBTOTAL \$

3,931.97

# Schedule E

SCHEDULE E (CONT.)

(Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA 460
Payments Made	to whole dollars.	from01/01/2020	FORM TOO
SEE INSTRUCTIONS ON REVERSE		through09/19/2020	Page 20 of 25
NAME OF FILER		-	I.D. NUMBER
Yes on J: Re-Imagine L.A. County, A Coali	tion of Nonprofit Organizations and Justice Advocates		1432447
CODES: If one of the following codes acc	urately describes the payment, you may enter the code	Otherwise describe the payment	

CMP campaign paraphernalia/misc. CNS campaign consultants contribution (explain nonmonetary)* cvc civic donations FIL candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* lEG legal defense campaign literature and mailings		member com meetings and office expen petition circul phone banks polling and s postage, deli	nmunications nd appearances nses ulating		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 costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the sar voter registration information technology costs (internet, e	on costs als meals the same candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CODE	OR	DESCRIPTIO	ON OF PAYMENT	AMOUNT PAID	
Stripe, Inc.			OFC				51.31	
San Francisco, CA 94110							ia.	
			¥)					
Stripe, Inc.			OFC				87.05	
San Francisco, CA 94110								
Stripe, Inc.			OFC				14.49	
San Francisco, CA 94110								
Stripe, Inc.			OFC			. E	52.96	
San Francisco, CA 94110						a .		
Stripe, Inc.			OFC		0		91.60	
San Francisco, CA 94110							•	
* Payments that are contributions or independent expenditures must also	o be su	mmarized on	Schedule D	).		SUBTOTAL \$	297.41	

Schedule I	E	
(Continuat	ion	Sheet)
Payments	Mac	le

SCHEDULE E	(CONT.)
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(Continuation Sheet) Payments Made	Amounts may b to whole do			from _	01/01/2020	CALIFO FOR	460 KM
SEE INSTRUCTIONS ON REVERSE				throug	h09/19/2020	Page	21 of 25
NAME OF FILER						I,D. NUMB	ER
Yes on J: Re-Imagine L.A. County, A Coalition of	Nonprofit Organizations	and Justi	ce Advocates			143244	7
CODES: If one of the following codes accurately	, ,	-	iter the code. Of	_			
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 campaign literature and mailings	OFC office exper PET petition circu PHO phone banks POL polling and solain)* POS postage, del	d appearance uses lating s survey resear ivery and me		RFD I SAL 6 TEL 1 TRC 0 TRS 1 TSF 1	radio airtime and production returned contributions campaign workers' salaries it. or cable airtime and proceandidate travel, lodging, anstaff/spouse travel, lodging, transfer between committee voter registration information technology costs	duction costs d meals and meals s of the san	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER	)	CODE	OR D	DESCRIPTION	OF PAYMENT		AMOUNT PAID
Stripe, Inc.		OFC					30.76
San Francisco, CA 94110		5					
Stripe, Inc.		OFC					21.05
San Francisco, CA 94110							
Stripe, Inc.		OFC					103.48
San Francisco, CA 94110							

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

SUBTOTAL \$ 155.29

Schedule F		
Accrued Exp	enses (U	npaid Bills)

Amounts may be rounded to whole dollars.

1432447

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on J: Re-Imagine L.A. County, A Coalition of Nonprofit Organizations and Justice Advocates

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. member communications RAD radio airtime and production costs CNS campaign consultants meetings and appearances returned contributions CTB contribution (explain nonmonetary)\* OFC office expenses campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees FIL phone banks candidate travel, lodging, and meals fundraising events polling and survey research staff/spouse travel, lodging, and meals TRS independent expenditure supporting/opposing others (explain)\* transfer between committees of the same candidate/sponsor IND postage, delivery and messenger services TSF LEG legal defense professional services (legal, accounting) VOT voter registration WEB information technology costs (internet, e-mail) LIT campaign literature and mailings PRT print ads

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
Political Data, Inc. Norwalk, CA 90650	OFC	0.00	1,500.00	0.00	1,500.00
Mercury Public Affairs, LLC New York, NY 10019	CNS	0.00	190,000.00	0.00	190,000.00
Swell Creative Group Los Angeles, CA 90013	Digital Communications & Advertising	0.00	200,000.00	0.00	200,000.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS \$	0.00\$	391,500.00\$	0.00\$	391,500.00

#### Schedule F Summary

1. 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 \$ 401,499.00

2. 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

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

#### Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

			JEE 1 (00111
Stater	ment covers period	CALIFORNIA	460
from	01/01/2020	FORM	
through_	09/19/2020	Page23	of25
	10	I.D. NUMBER	

WEB information technology costs (internet, e-mail)

1432447

NAME OF FILER

Yes on J: Re-Imagine L.A. County, A Coalition of Nonprofit Organizations and Justice Advocates

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

PRT

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 petition circulating t.v. or cable airtime and production costs PET candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals

FND fundraising events POL polling and survey research staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)\* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor

print ads

LEG legal defense VOT voter registration professional services (legal, accounting) campaign literature and mailings

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

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
Charlotte Milner-Barry	FND	0.00	3,333.00	0.00	3,333.00
Los Angeles, CA 90027					
Kendra Burns-Edel	FND	0.00	3,333.00	0.00	3,333.00
Los Angeles, CA 90016					
Marie Lloyd	FND	0.00	3,333.00	0.00	3,333.00
Los Angeles, CA 90038					
	SUBTOTALS	\$ 0.00\$	9,999.00\$	0.00	9,999.00

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

Amounts may be rounded to whole dollars.

	SCHEDULE
Statement covers period	CALIFORNIA 160
from01/01/2020	FORM 400
through 09/19/2020	Page 24 of 25
	I.D. NUMBER

1432447

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on J: Re-Imagine L.A. County, A Coalition of Nonprofit Organizations and Justice Advocates

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Sadler Strategic Media, Inc.

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 supporting/opposing others (explain)\*

legal defense

LIT campaign literature and mailings

RAD radio airtime and production costs MBR member communications MTG meetings and appearances RFD returned contributions

OFC office expenses petition circulating PET PHO phone banks

POL polling and survey research postage, delivery and messenger services professional services (legal, accounting)

PRT print ads

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)

\* 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	AM	MOUNT PAID
Los Angeles Standard	PRT				700.00
Los Angeles, CA 90008					
Los Feliz Ledger	PRT				1,250.00
Los Angeles, CA 90027					
					,
e e				1	
	ľ		-		
	ļ	l <sub>e</sub>	4		
		1			
Attach additional information on appropriately labeled continuation sheets.		0.40	11	TOTAL* \$	1,950.00

<sup>\*</sup> 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.

State	ment covers period	CALIFORNIA ACO	460	
from	01/01/2020	FORM 400		
through	09/19/2020	Page25 of25		

I.D. NUMBER

1432447

SCHEDULE G

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on J: Re-Imagine L.A. County, A Coalition of Nonprofit Organizations and Justice Advocates

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Swell Creative Group

DES: If one of the following codes accurately describe	s the	payment, you may enter the code.	Otherwise	e, describe the payment.
campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
campaign consultants	MTG	meetings and appearances	RFD	returned contributions
contribution (explain nonmonetary)*	<b>OFC</b>	office expenses	SAL	campaign workers' salaries
civic donations	PET	petition circulating	TEL.	t.v. or cable airtime and production costs
candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
fundraising events	POL.	polling and survey research	TRS	staff/spouse travel, lodging, and meals
Independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)
	campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense	campaign paraphernalia/misc.  magnaign consultants  contribution (explain nonmonetary)*  civic donations  candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)*  legal defense  MBR  MTG  OFC  OFC  OFC  OFC  INTERPORT OFF  POL  INTERPORT OFF  POS  PRO  PRO	campaign paraphernalia/misc.  campaign consultants  contribution (explain nonmonetary)*  civic donations  candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)*  MBR  member communications meetings and appearances office expenses petition circulating phone banks POL polling and survey research postage, delivery and messenger services professional services (legal, accounting)	campaign consultants  contribution (explain nonmonetary)*  contribution (explain nonmonetary)*  civic donations  candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)*  legal defense  MTG meetings and appearances  FET petition circulating phone banks TRC polling and survey research TRS postage, delivery and messenger services TSF professional services (legal, accounting) VOT

<sup>\*</sup> 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		
Eido, LLC		Digital Communications & Advertising			
Huntington Beach, CA 92648	1				
ä					
Zach Christy Design		Digital Communications & Advertising	7,500.0		
Playa Vista, CA 90094					
5*7					
		N .	11		
20		W #			
,					
Attach additional information on appropriately labeled continuation sheets.		Tr	OTAL* \$ 23,150.00		

<sup>\*</sup> 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.