

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

RECEIVED BY LOS ANGELES CO 2023 FEB -1 PM 3:29 PROPOSITION 5 UNIT 1/31/23 PM	CALIFORNIA FORM 460 Page <u>1</u> of <u>17</u> For Official Use Only
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Statement covers period from <u>10/23/2022</u> through <u>12/31/2022</u>	Date of election if applicable: (Month, Day, Year)
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SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- | | |
|---|--|
| <input type="checkbox"/> Officeholder, Candidate Controlled Committee | <input type="checkbox"/> Primarily Formed Ballot Measure Committee |
| <input type="radio"/> State Candidate Election Committee | <input type="radio"/> Controlled |
| <input type="radio"/> Recall
<i>(Also Complete Part 5)</i> | <input type="radio"/> Sponsored
<i>(Also Complete Part 6)</i> |
| <input type="checkbox"/> General Purpose Committee | <input checked="" type="checkbox"/> Primarily Formed Candidate/Officeholder Committee
<i>(Also Complete Part 7)</i> |
| <input type="radio"/> Sponsored | |
| <input type="radio"/> Small Contributor Committee | |
| <input type="radio"/> Political Party/Central Committee | |

2. Type of Statement:

- | | |
|---|---|
| <input type="checkbox"/> Preelection Statement | <input type="checkbox"/> Quarterly Statement |
| <input checked="" type="checkbox"/> Semi-annual Statement | <input type="checkbox"/> Special Odd-Year Report |
| <input type="checkbox"/> Termination Statement
<i>(Also file a Form 410 Termination)</i> | <input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
| <input type="checkbox"/> Amendment (Explain below) | |

3. Committee Information

I.D. NUMBER
1445830

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
ALLIANCE TO END HOMELESSNESS IN SUPPORT OF BOB HERTZBERG FOR LA COUNTY SUPERVISOR 2022

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>LOS ANGELES</u>	<u>CA</u>	<u>90071</u>	<u>(213) 624-6200</u>

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS
sosfilings@politicallaw.com

Treasurer(s)

NAME OF TREASURER
CARY DAVIDSON

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>LOS ANGELES</u>	<u>CA</u>	<u>90071</u>	<u>(213) 624-6200</u>

NAME OF ASSISTANT TREASURER, IF ANY

MICHAEL FARR

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>LOS ANGELES</u>	<u>CA</u>	<u>90071</u>	<u>(213) 624-6200</u>

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 01/25/2023
Date

By _____
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

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

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
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NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
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COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME	I.D. NUMBER
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NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
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COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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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
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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 BOB HERTZBERG	OFFICE SOUGHT OR HELD County Supervisor LA COUNTY, #3	<input checked="" type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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Attach continuation sheets if necessary

**Campaign Disclosure Statement
Summary Page**

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>10/23/2022</u> through <u>12/31/2022</u>	CALIFORNIA FORM 460
	Page <u>3</u> of <u>17</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ALLIANCE TO END HOMELESSNESS IN SUPPORT OF BOB HERTZBERG FOR LA COUNTY SUPERVISOR 2022

I.D. NUMBER

1445830

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$ 165,849.40	\$ 1,495,349.40
2. Loans Received	Schedule B, Line 3	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$ 165,849.40	\$ 1,495,349.40
4. Nonmonetary Contributions	Schedule C, Line 3	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$ 165,849.40	\$ 1,495,349.40

**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

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made	Schedule E, Line 4	\$ 487,927.46	\$ 1,483,118.56
7. Loans Made	Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$ 487,927.46	\$ 1,483,118.56
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	-48,943.00	2,052.00
10. Nonmonetary Adjustment	Schedule C, Line 3	0.00	0.00
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	\$ 438,984.46	\$ 1,485,170.56

**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	\$ 334,308.90
13. Cash Receipts	Column A, Line 3 above	165,849.40
14. Miscellaneous Increases to Cash	Schedule I, Line 4	0.00
15. Cash Payments	Column A, Line 8 above	487,927.46
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$ 12,230.84

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

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

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED	Schedule B, Part 2	\$ 0.00
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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	\$ 2,052.00

**Schedule A
Monetary Contributions Received**

Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from	10/23/2022	
through	12/31/2022	Page <u>4</u> of <u>17</u>
NAME OF FILER		I.D. NUMBER
ALLIANCE TO END HOMELESSNESS IN SUPPORT OF BOB HERTZBERG FOR LA COUNTY SUPERVISOR 2022		1445830

SEE INSTRUCTIONS ON REVERSE

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)
11/14/2022	ANGELENOS FOR OUTSTANDING STATE LEADERSHIP (ID# 1399379) SACRAMENTO, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,099.40	2,099.40	
10/28/2022	BIZFED PAC, A PROJECT OF LOS ANGELES COUNTY BUSINESS FEDERATION (ID# 1305594) SACRAMENTO, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		15,000.00	90,000.00	
11/02/2022	J CLARK BOOTH NEWPORT BEACH, CA 92660	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	REAL ESTATE BROKER J CLARK BOOTH	25,000.00	25,000.00	
11/01/2022	BUILDING INDUSTRY ASSOCIATION OF SOUTHERN CALIFORNIA PAC (ID# 741733) IRVINE, CA 92623	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		25,000.00	25,000.00	
10/31/2022	DOUGLAS EMMETT PROPERTIES, LP AND AFFILIATED ENTITIES SANTA MONICA, CA 90401 CONTRIBUTION RECEIVED FROM DOUGLAS EMMETT PROPERTIES, LP	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		50,000.00	100,000.00	

SUBTOTAL \$ 117,099.40

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 165,849.40
- 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 \$** 165,849.40

***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

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/23/2022	
through	12/31/2022	Page 5 of 17
NAME OF FILER		I.D. NUMBER
ALLIANCE TO END HOMELESSNESS IN SUPPORT OF BOB HERTZBERG FOR LA COUNTY SUPERVISOR 2022		1445830

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)
11/09/2022	LEWIS PACIFIC PARTNERS, INCLUDING CONTRIBUTIONS FROM LEWIS INVESTMENT COMPANY, LLC UPLAND, CA 91786 CONTRIBUTION RECEIVED FROM LEWIS INVESTMENT COMPANY, LLC	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00	250.00	
10/31/2022	GERALD MARCIL PALOS VERDES PENINSULA, CA 90274	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PRESIDENT PALOS VERDES INVESTMENTS, INC.	25,000.00	25,000.00	
11/06/2022	ALLAN MUTCHNIK BEVERLY HILLS, CA 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	EXECUTIVE CP, LLC	10,000.00	10,000.00	
11/06/2022	NICOLE MUTCHNIK BEVERLY HILLS, CA 90210	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PUBLIC POLICY NICOLE MUTCHNIK	10,000.00	10,000.00	
10/24/2022	VICA PAC, SPONSORED BY VALLEY INDUSTRY AND COMMERCE ASSOCIATION (ID# 1343221) SAN FRANCISCO, CA 94108	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		3,500.00	3,500.00	
SUBTOTAL \$				48,750.00		

*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

**Schedule D
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/23/2022	
through	12/31/2022	Page <u>6</u> of <u>17</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER ALLIANCE TO END HOMELESSNESS IN SUPPORT OF BOB HERTZBERG FOR LA COUNTY SUPERVISOR 2022	I.D. NUMBER 1445830
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/24/2022	BOB HERTZBERG County Supervisor LOS ANGELES COUNTY, #3	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	SLATE MAILERS	25,019.00	1,192,104.59	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2022	BOB HERTZBERG County Supervisor LOS ANGELES COUNTY, #3	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	MAILERS	140,790.36	1,192,104.59	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/26/2022	BOB HERTZBERG County Supervisor LOS ANGELES COUNTY, #3	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	POLLING	6,750.00	1,192,104.59	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$				172,559.36		

Schedule D Summary

- Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) \$ 408,795.36
- Unitemized contributions and independent expenditures made this period of under \$100 \$ 0.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL \$** 408,795.36

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period from <u>10/23/2022</u> through <u>12/31/2022</u>	CALIFORNIA FORM 460
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/01/2022	BOB HERTZBERG County Supervisor LOS ANGELES COUNTY, #3 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	MAILERS	20,173.18	1,192,104.59	
11/03/2022	BOB HERTZBERG County Supervisor LOS ANGELES COUNTY, #3 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	DIGITAL ADS	195,000.00	1,192,104.59	
11/07/2022	BOB HERTZBERG County Supervisor LOS ANGELES COUNTY, #3 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	TEXT MESSAGES	8,000.00	1,192,104.59	
11/07/2022	BOB HERTZBERG County Supervisor LOS ANGELES COUNTY, #3 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	TEXT MESSAGES	13,062.82	1,192,104.59	
SUBTOTAL \$				236,236.00		

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/23/2022	
through	12/31/2022	Page 8 of 17
NAME OF FILER		I.D. NUMBER
ALLIANCE TO END HOMELESSNESS IN SUPPORT OF BOB HERTZBERG FOR LA COUNTY SUPERVISOR 2022		1445830

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ALLIANCE TO END HOMELESSNESS IN SUPPORT OF BOB HERTZBERG FOR LA COUNTY SUPERVISOR 2022

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
ANEDOT NEW ORLEANS, LA 70112	OFC			800.60
BUDGET WATCHDOGS NEWSLETTER (#1345115) TORRANCE, CA 90505	IND		SLATE MAILERS SUPPORTING BOB HERTZBERG	14,639.00
CAPSTONE STRATEGIES PACOIMA, CA 91331	IND		PHONE BANKS & CANVASSING SUPPORTING BOB HERTZBERG	19,000.00

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

SUBTOTAL \$ 34,439.60

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	487,927.46
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.)	TOTAL \$	487,927.46

**Schedule E
(Continuation Sheet)
Payments Made**

SCHEDULE E (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period from <u>10/23/2022</u> through <u>12/31/2022</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ALLIANCE TO END HOMELESSNESS IN SUPPORT OF BOB HERTZBERG FOR LA COUNTY SUPERVISOR 2022

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
CARRICK CONSULTING LOS ANGELES, CA 90068	IND		DIGITAL ADS SUPPORTING BOB HERTZBERG	195,000.00
COPS VOTER GUIDE, INC. (#599014) SACRAMENTO, CA 95815	IND		SLATE MAILERS SUPPORTING BOB HERTZBERG	10,833.50
DOBLER INC LAKE ELSINORE, CA 92530	IND		TEXT MESSAGES SUPPORTING BOB HERTZBERG	8,000.00
DOBLER INC LAKE ELSINORE, CA 92530			GOTV TEXT MESSAGES	2,150.40
EDUCATE YOUR VOTE (#1345655) ENCINO, CA 91436	IND		SLATE MAILERS SUPPORTING BOB HERTZBERG	9,269.00

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

SUBTOTAL \$ 225,252.90

**Schedule E
(Continuation Sheet)
Payments Made**

SCHEDULE E (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period from <u>10/23/2022</u> through <u>12/31/2022</u>	CALIFORNIA FORM 460
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NAME OF FILER ALLIANCE TO END HOMELESSNESS IN SUPPORT OF BOB HERTZBERG FOR LA COUNTY SUPERVISOR 2022	I.D. NUMBER 1445830

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

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
LJT 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
ELECTION DIGEST (#1345303) TORRANCE, CA 90505	IND		SLATE MAILERS SUPPORTING BOB HERTZBERG	12,509.50
OUR CALIFORNIA LATINO VOTERS GUIDE (#596004) LOS ANGELES, CA 90041	IND		SLATE MAILERS SUPPORTING BOB HERTZBERG	3,744.00
REED & DAVIDSON, LLP LOS ANGELES, CA 90071	PRO			6,914.64
REED & DAVIDSON, LLP LOS ANGELES, CA 90071	PRO			3,290.46
RG STRATEGIES LLC DEWEY BEACH, DE 19971	IND		POLLING SUPPORTING BOB HERTZBERG	6,750.00

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

SUBTOTAL \$ 33,208.00

**Schedule E
(Continuation Sheet)
Payments Made**

SCHEDULE E (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period from <u>10/23/2022</u> through <u>12/31/2022</u>	CALIFORNIA FORM 460
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NAME OF FILER

ALLIANCE TO END HOMELESSNESS IN SUPPORT OF BOB HERTZBERG FOR LA COUNTY SUPERVISOR 2022

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
SAVVY COMMUNICATIONS RANCHO MIRAGE, CA 92270	IND		TEXT MESSAGES SUPPORTING BOB HERTZBERG	13,062.82
THE JUSTUS GROUP LOS ANGELES, CA 90094	CNS			19,000.00
THE JUSTUS GROUP LOS ANGELES, CA 90094	CNS			2,000.00
WEST COAST PUBLIC AFFIARS WOODLAND HILLS, CA 91364	IND		MAILERS SUPPORTING BOB HERTZBERG	140,790.36
WEST COAST PUBLIC AFFIARS WOODLAND HILLS, CA 91364	IND		MAILERS SUPPORTING BOB HERTZBERG	20,173.18

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

SUBTOTAL \$ 195,026.36

**Schedule F
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded
to whole dollars.

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NAME OF FILER

ALLIANCE TO END HOMELESSNESS IN SUPPORT OF BOB HERTZBERG FOR LA COUNTY SUPERVISOR 2022

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	
BUDGET WATCHDOGS NEWSLETTER (#1345115) TORRANCE, CA 90505	IND SLATE MAILERS SUPPORTING BOB HERTZBERG	14,639.00	0.00	14,639.00	0.00	
COPS VOTER GUIDE, INC. (#599014) SACRAMENTO, CA 95815	IND SLATE MAILERS SUPPORTING BOB HERTZBERG	10,833.50	0.00	10,833.50	0.00	
EDUCATE YOUR VOTE (#1345655) ENCINO, CA 91436	IND SLATE MAILERS SUPPORTING BOB HERTZBERG	9,269.00	0.00	9,269.00	0.00	
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.		SUBTOTALS \$	34,741.50\$	0.00\$	34,741.50\$	0.00

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 \$** 2,052.00
- 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 \$** 50,995.00
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** -48,943.00
May be a negative number

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

SCHEDULE F (CONT.)

Amounts may be rounded
to whole dollars.

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, e-mail) |

* 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
ELECTION DIGEST (#1345303) TORRANCE, CA 90505	IND SLATE MAILERS SUPPORTING BOB HERTZBERG	12,509.50	0.00	12,509.50	0.00
LOEB & LOEB LLP LOS ANGELES, CA 90067	PRO	0.00	2,052.00	0.00	2,052.00
OUR CALIFORNIA LATINO VOTERS GUIDE (#596004) LOS ANGELES, CA 90041	IND SLATE MAILERS SUPPORTING BOB HERTZBERG	3,744.00	0.00	3,744.00	0.00
SUBTOTALS \$		16,253.50\$	2,052.00\$	16,253.50 \$	2,052.00

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 from <u>10/23/2022</u> through <u>12/31/2022</u>	CALIFORNIA FORM 460
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ALLIANCE TO END HOMELESSNESS IN SUPPORT OF BOB HERTZBERG FOR LA COUNTY SUPERVISOR 2022

I.D. NUMBER

1445830

NAME OF AGENT OR INDEPENDENT CONTRACTOR

CAPSTONE STRATEGIES

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) |

* 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
HUB DIALER DENVER, CO 80237	PHO		2,500.00
POLITICAL DATA, INC. NORWALK, CA 90650	PHO		3,300.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 5,800.00

* 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.

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NAME OF AGENT OR INDEPENDENT CONTRACTOR		
CARRICK CONSULTING		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ALLIANCE TO END HOMELESSNESS IN SUPPORT OF BOB HERTZBERG FOR LA COUNTY SUPERVISOR 2022

NAME OF AGENT OR INDEPENDENT CONTRACTOR

CARRICK CONSULTING

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) |

* 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
AIDA INTERNET ADS NETWORK NEW ROCHELLE, NY 10801	WEB		72,290.00
ASELLUS GROUP LARCHMONT, NY 10538	TEL		93,540.00
KAUPANGER SWACKER INC. BURBANK, CA 91505	TEL		3,600.00
PAYDAY SERVICES BURBANK, CA 91506	TEL		1,887.98

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 171,317.98

* 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		SCHEDULE G	
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ALLIANCE TO END HOMELESSNESS IN SUPPORT OF BOB HERTZBERG FOR LA COUNTY SUPERVISOR 2022

NAME OF AGENT OR INDEPENDENT CONTRACTOR

WEST COAST PUBLIC AFFIARS

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 | PEI 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) |

* 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
POLITICAL DATA, INC. NORWALK, CA 90650	LIT			4,953.00
POLITICAL DATA, INC. NORWALK, CA 90650	LIT			889.00
RED PRINTING & MAIL SIMI VALLEY, CA 93063	LIT			58,900.00
RED PRINTING & MAIL SIMI VALLEY, CA 93063	LIT			8,560.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 73,302.00

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

SCHEDULE G (CONT.)

Amounts may be rounded to whole dollars.

Statement covers period		CALIFORNIA FORM 460
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ALLIANCE TO END HOMELESSNESS IN SUPPORT OF BOB HERTZBERG FOR LA COUNTY SUPERVISOR 2022

I.D. NUMBER

1445830

NAME OF AGENT OR INDEPENDENT CONTRACTOR

WEST COAST PUBLIC AFFIARS

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)

* 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
U.S. POSTMASTER WOODLAND HILLS, CA 91367	POS		74,937.36
U.S. POSTMASTER WOODLAND HILLS, CA 91367	POS		10,724.18

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 85,661.54

* 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.