

**Recipient Committee
Campaign Statement
Cover Page**

COVER PAGE

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PROPOSITION B UNIT

CALIFORNIA 460
2001/02
FORM

Page 1 of 27
For Official Use Only

Statement covers period
from 1/1/2020
through 2/15/2020

Date of election if applicable:
(Month, Day, Year)
3/3/2020

SEE INSTRUCTIONS ON REVERSE

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

- Officeholder, Candidate Controlled Committee
 - State Candidate Election Committee
 - Recall
(Also Complete Part 5)
- General Purpose Committee
 - Sponsored
 - Small Contributor Committee
 - Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
 - Controlled
 - Sponsored
(Also Complete Part 6)
- Primarily Formed Candidate/ Officeholder Committee
(Also Complete Part 7)

2. Type of Statement:

- Preelection Statement
- Semi-annual Statement
- Termination Statement
(Also file a Form 410 Termination)
- Amendment (Explain below, _____)
- Quarterly Statement
- Special Odd-Year Report

3. Committee Information

I.D. NUMBER
1424793

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Workers for a Better LA to Support Herb Wesson for Supervisor
2020, Sponsored by Labor Organizations

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Los Angeles	CA	90006	(213) 452-6565

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Los Angeles	CA	90017	(213) 452-6565

OPTIONAL: FAX/E-MAIL ADDRESS

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

Treasurer(s)

NAME OF TREASURER

Ron Herrera

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Los Angeles	CA	90006	(213) 452-6565

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX/E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on	2/20/2020	By	_____
	DATE		SIGNATURE OF TREASURER OR ASSISTANT TREASURER
Executed on	_____	By	_____
	DATE		SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT, OR RESPONSIBLE OFFICER OF PROPONENT
Executed on	_____	By	_____
	DATE		SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT
Executed on	_____	By	_____
	DATE		SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

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

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

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.

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

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

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER

JURISDICTION

SUPPORT

OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE Herb Wesson	OFFICE SOUGHT OR HELD County Supervisor	<input checked="" type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

Attach continuation sheets if necessary

**Campaign Disclosure Statement
Summary Page**

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations

Statement covers period
from 1/1/2020
through 2/15/2020

CALIFORNIA FORM 460
Page 3 of 27

I.D. NUMBER

1424793

Contributions Received

	Column A Total This Period (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions..... Schedule A, Line 3	\$1,100,000.00	\$1,100,000.00
2. Loans Received..... Schedule B, Line 3	\$0.00	\$0.00
3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1+ 2	\$1,100,000.00	\$1,100,000.00
4. Nonmonetary Contributions..... Schedule C, Line 3	\$0.00	\$0.00
5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4	\$1,100,000.00	\$1,100,000.00

**Calendar Year Summary for Candidates
Running in Both the State Primary and
General Elections**

	1/1 through 6/30	7/1 to Date
20. Contributions Received		
21. Expenditures Made		

Expenditures Made

	Column A	Column B
6. Payments Made..... Schedule E, Line 4	\$652,601.34	\$652,601.34
7. Loans Made..... Schedule H, Line 3	\$0.00	\$0.00
8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7	\$652,601.34	\$652,601.34
9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3	\$169,727.13	\$169,727.13
10. Nonmonetary Adjustment..... Schedule C, Line 3	\$0.00	\$0.00
11. TOTAL EXPENDITURES MADE..... Add Lines 8 +9 + 10	\$822,328.47	\$822,328.47

**Expenditure Limit Summary for State
Candidates**

22. Cumulative Expenditures Made *
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yyyy)	Total to Date

Current Cash Statement

12. Beginning Cash Balance..... Previous Summary Page, Line 16	\$0.00
13. Cash Receipts..... Column A, Line 3 above	\$1,100,000.00
14. Miscellaneous Increases to Cash..... Schedule I, Line 4	\$0.00
15. Cash Payments..... Column A, Line 8 above	\$652,601.34
16. ENDING CASH BALANCE...Add Lines 12+13+14, then subtract Line 15	\$447,398.66
If this is a termination statement, Line 16 must be zero.	
17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2	\$0.00

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

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

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	\$169,727.13

**Schedule A
Monetary Contributions Received**

Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period	CALIFORNIA FORM 460
from <u>1/1/2020</u> through <u>2/15/2020</u>	
Page <u>4</u> of <u>27</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations

I.D. NUMBER
1424793

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)
02/08/2020	Association for Los Angeles Deputy Sheriffs State PAC Monterey Park, CA 91755-7406 ID: 1359227	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500,000.00	\$500,000.00	
02/06/2020	Los Angeles County Labor AFL-CIO Council on Political Education Los Angeles, CA 90006-2202 ID: 742204	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$150,000.00	\$150,000.00	
02/08/2020	Service Employees International Union Local 721 CTW, CLC Los Angeles, CA 90017-4510 ID: 1296889	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$400,000.00	\$400,000.00	
02/14/2020	Southern California Pipe Trades District Council No. 16 Political Action Committee Los Angeles, CA 90020-1748 ID: 760715	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$50,000.00	\$50,000.00	
SUBTOTAL				\$1,100,000.00		

Schedule A Summary

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	\$1,100,000.00
2. Amount received this period -unitemized monetary contributions of less than \$100.....	\$0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	TOTAL \$1,100,000.00

*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.

SCHEDULE D

Statement covers period	CALIFORNIA FORM 460
from 1/1/2020	
through 2/15/2020	
Page 5 of 27	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations	I.D. NUMBER 1424793
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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/FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/14/2020	Herb Wesson County Supervisor County: County of Los Angeles District No: 2 <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	LIT	\$23,117.85	\$822,278.47	
02/14/2020	Herb Wesson County Supervisor County: County of Los Angeles District No: 2 <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	LIT	\$77,464.19	\$822,278.47	
02/14/2020	Herb Wesson County Supervisor County: County of Los Angeles District No: 2 <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	POS	\$14,811.90	\$822,278.47	

SUBTOTAL	\$115,393.94
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Schedule D Summary

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.).....	\$822,278.47
2. Unitemized contributions and independent expenditures made this period of under \$100.....	\$0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.).....	TOTAL \$822,278.47

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

Amounts may be rounded
to whole dollars.

SCHEDULE D

Statement covers period	CALIFORNIA FORM 460
from <u>1/1/2020</u> through <u>2/15/2020</u>	
Page <u>6</u> of <u>27</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations

I.D. NUMBER

1424793

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT/FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/14/2020	Herb Wesson County Supervisor County: County of Los Angeles District No: 2 <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	POS	\$54,333.19	\$822,278.47	
02/14/2020	Herb Wesson County Supervisor County: County of Los Angeles District No: 2 <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	TV & Web Ad Production	\$6,600.00	\$822,278.47	
02/14/2020	Herb Wesson County Supervisor County: County of Los Angeles District No: 2 <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	TV & Web Ads	\$115,000.00	\$822,278.47	

SUBTOTAL \$175,933.19

Schedule D Summary

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.).....	\$822,278.47
2. Unitemized contributions and independent expenditures made this period of under \$100.....	\$0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.).....	TOTAL \$822,278.47

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

Amounts may be rounded
to whole dollars.

SCHEDULE D

Statement covers period		CALIFORNIA FORM 460
from	1/1/2020	
through	2/15/2020	
Page 7 of 27		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations

I.D. NUMBER

1424793

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT/FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/04/2020	Herb Wesson County Supervisor County: County of Los Angeles District No: 2 <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	LIT	\$82,806.58	\$822,278.47	
02/04/2020	Herb Wesson County Supervisor County: County of Los Angeles District No: 2 <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	POS	\$54,333.19	\$822,278.47	
02/05/2020	Herb Wesson County Supervisor County: County of Los Angeles District No: 2 <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	LIT	\$25,075.45	\$822,278.47	

SUBTOTAL \$162,215.22

Schedule D Summary

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.).....	\$822,278.47
2. Unitemized contributions and independent expenditures made this period of under \$100.....	\$0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.).....	TOTAL \$822,278.47

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

. Amounts may be rounded
to whole dollars.

SCHEDULE D

SEE INSTRUCTIONS ON REVERSE

Statement covers period		CALIFORNIA FORM 460
from	1/1/2020	
through	2/15/2020	
Page 8 of 27		

NAME OF FILER
Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations

I.D. NUMBER
1424793

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT/FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/05/2020	Herb Wesson County Supervisor County: County of Los Angeles District No: 2 <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	POS	\$14,811.90	\$822,278.47	
02/06/2020	Herb Wesson County Supervisor County: County of Los Angeles District No: 2 <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	LIT	\$82,806.55	\$822,278.47	
02/06/2020	Herb Wesson County Supervisor County: County of Los Angeles District No: 2 <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	POS	\$54,333.19	\$822,278.47	

SUBTOTAL \$151,951.64

Schedule D Summary

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.).....	\$822,278.47
2. Unitemized contributions and independent expenditures made this period of under \$100.....	\$0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.).....	TOTAL \$822,278.47

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

Amounts may be rounded
to whole dollars.

SCHEDULE D

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations

I.D. NUMBER

1424793

Statement covers period		CALIFORNIA FORM 460
from	1/1/2020	
through	2/15/2020	
Page 9 of 27		

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT/FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/07/2020	Herb Wesson County Supervisor County: County of Los Angeles District No: 2 <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	LIT	\$25,075.45	\$822,278.47	
02/07/2020	Herb Wesson County Supervisor County: County of Los Angeles District No: 2 <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	POS	\$14,811.90	\$822,278.47	
02/11/2020	Herb Wesson County Supervisor County: County of Los Angeles District No: 2 <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	LIT	\$77,549.19	\$822,278.47	

SUBTOTAL \$117,436.54

Schedule D Summary

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.).....	\$822,278.47
2. Unitemized contributions and independent expenditures made this period of under \$100.....	\$0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.).....	TOTAL \$822,278.47

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

. Amounts may be rounded
to whole dollars.

SCHEDULE D

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations

I.D. NUMBER

1424793

Statement covers period
from 1/1/2020
through 2/15/2020

CALIFORNIA FORM 460
Page 10 of 27

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT/FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/11/2020	Herb Wesson County Supervisor County: County of Los Angeles District No: 2 <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	POS	\$54,333.19	\$822,278.47	
02/11/2020	Herb Wesson County Supervisor County: County of Los Angeles District No: 2 <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	LIT	\$23,202.85	\$822,278.47	
02/11/2020	Herb Wesson County Supervisor County: County of Los Angeles District No: 2 <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	POS	\$14,811.90	\$822,278.47	

SUBTOTAL \$92,347.94

Schedule D Summary

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.).....	\$822,278.47
2. Unitemized contributions and independent expenditures made this period of under \$100.....	\$0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.).....	TOTAL \$822,278.47

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

Amounts may be rounded
to whole dollars.

SCHEDULE D

Statement covers period	CALIFORNIA FORM 460
from <u>1/1/2020</u>	
through <u>2/15/2020</u>	
Page <u>11</u> of <u>27</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations

I.D. NUMBER

1424793

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT/FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/11/2020	Herb Wesson County Supervisor County: County of Los Angeles District No: 2 <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	CNS	\$7,000.00	\$822,278.47	

SUBTOTAL	\$7,000.00
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Schedule D Summary

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.).....	\$822,278.47
2. Unitemized contributions and independent expenditures made this period of under \$100.....	\$0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.).....	TOTAL \$822,278.47

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period from <u>1/1/2020</u> through <u>2/15/2020</u>	CALIFORNIA FORM 460
	Page <u>12</u> of <u>27</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations

I.D. NUMBER
1424793

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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
AKPD Message and Media Chicago, IL 60654-7205	IND	TV & Web Ad Production, Herb Wesson, Support	\$6,600.00
AKPD Message and Media Chicago, IL 60654-7205	IND	TV & Web Ads, Herb Wesson, Support	\$115,000.00
The Strategy Group, LLC Chicago, IL 60654-3563	IND	LIT, Herb Wesson, Support	\$82,806.58

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

SUBTOTAL \$204,406.58

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$652,551.34
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 \$652,601.34

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	1/1/2020	
through	2/15/2020	Page 13 of 27

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations	I.D. NUMBER 1424793
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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 | 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
The Strategy Group, LLC Chicago, IL 60654-3563	IND	POS, Herb Wesson, Support	\$54,333.19
The Strategy Group, LLC Chicago, IL 60654-3563	IND	LIT, Herb Wesson, Support	\$25,075.45
The Strategy Group, LLC Chicago, IL 60654-3563	IND	POS, Herb Wesson, Support	\$14,811.90
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			SUBTOTAL \$94,220.54

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$652,551.34
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 \$652,601.34

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period	CALIFORNIA FORM 460
from <u>1/1/2020</u> through <u>2/15/2020</u>	
Page <u>14</u> of <u>27</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations	I.D. NUMBER 1424793
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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 | 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
The Strategy Group, LLC Chicago, IL 60654-3563	IND	LIT, Herb Wesson, Support	\$82,806.55
The Strategy Group, LLC Chicago, IL 60654-3563	IND	POS, Herb Wesson, Support	\$54,333.19
The Strategy Group, LLC Chicago, IL 60654-3563	IND	LIT, Herb Wesson, Support	\$25,075.45

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

SUBTOTAL \$162,215.19

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$652,551.34
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	\$652,601.34

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period	CALIFORNIA FORM 460
from 1/1/2020	
through 2/15/2020	
Page 15 of 27	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations	I.D. NUMBER 1424793
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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 | 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
The Strategy Group, LLC Chicago, IL 60654-3563	IND	POS, Herb Wesson, Support	\$14,811.90
The Strategy Group, LLC Chicago, IL 60654-3563	IND	LIT, Herb Wesson, Support	\$77,549.19
The Strategy Group, LLC Chicago, IL 60654-3563	IND	POS, Herb Wesson, Support	\$54,333.19

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

SUBTOTAL \$146,694.28

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$652,551.34
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 \$652,601.34

**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period from <u>1/1/2020</u> through <u>2/15/2020</u>	CALIFORNIA FORM 460
	Page <u>16</u> of <u>27</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations

I.D. NUMBER
1424793

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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
The Strategy Group, LLC Chicago, IL 60654-3563	IND		LIT, Herb Wesson, Support	\$23,202.85
The Strategy Group, LLC Chicago, IL 60654-3563	IND		POS, Herb Wesson, Support	\$14,811.90
VR Research Oakland, CA 94612-1520	IND		CNS, Herb Wesson, Support	\$7,000.00

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

SUBTOTAL \$45,014.75

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$652,551.34
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 \$652,601.34

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

. Amounts may be rounded
to whole dollars.

SCHEDULE F

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations

Statement covers period
from 1/1/2020
through 2/15/2020

CALIFORNIA FORM 460
Page 17 of 27

I.D. NUMBER
1424793

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 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
The Strategy Group, LLC Chicago, IL 60654-3563	IND, LIT, Herb Wesson, Support	\$0.00	\$77,464.19	\$0.00	\$77,464.19
The Strategy Group, LLC Chicago, IL 60654-3563	IND, POS, Herb Wesson, Support	\$0.00	\$14,811.90	\$0.00	\$14,811.90
The Strategy Group, LLC Chicago, IL 60654-3563	IND, LIT, Herb Wesson, Support	\$0.00	\$23,117.85	\$0.00	\$23,117.85
SUBTOTALS		\$0.00	\$115,393.94	\$0.00	\$115,393.94

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

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 payments on accrued expenses under \$100.)	INCURRED TOTALS	\$169,727.13
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.)	NET	\$169,727.13 (May be a negative number)

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

Amounts may be rounded
to whole dollars.

SCHEDULE F

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations

Statement covers period	CALIFORNIA FORM 460
from 1/1/2020	
through 2/15/2020	
Page 18 of 27	

I.D. NUMBER
1424793

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 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
The Strategy Group, LLC Chicago, IL 60654-3563	IND, POS, Herb Wesson, Support	\$0.00	\$54,333.19	\$0.00	\$54,333.19

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

SUBTOTALS \$0.00 \$54,333.19 \$0.00 \$54,333.19

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 payments on accrued expenses under \$100.)	INCURRED TOTALS	\$169,727.13
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.)	NET	\$169,727.13 <small>(May be a negative number)</small>

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

. Amounts may be rounded to whole dollars.

SCHEDULE G

SEE INSTRUCTIONS ON REVERSE

Statement covers period		CALIFORNIA FORM 460
from	1/1/2020	
through	2/15/2020	Page 19 of 27

NAME OF FILER
 Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations

I.D. NUMBER
 1424793

NAME OF AGENT OR INDEPENDENT CONTRACTOR
 The Strategy Group, LLC

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| 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) |

*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
Admail West Sacramento, CA 95811-0311	LIT		\$15,676.49
Admail West Sacramento, CA 95811-0311	LIT		\$3,942.33
Admail West Sacramento, CA 95811-0311	LIT		\$15,676.49
Admail West Sacramento, CA 95811-0311	LIT		\$3,942.33

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

Amounts may be rounded to whole dollars.

SCHEDULE G

Statement covers period	CALIFORNIA FORM 460
from <u>1/1/2020</u> through <u>2/15/2020</u>	
Page <u>20</u> of <u>27</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
 Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations

I.D. NUMBER
 1424793

NAME OF AGENT OR INDEPENDENT CONTRACTOR
 The Strategy Group, LLC

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| 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) |

*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
Admail West Sacramento, CA 95811-0311	LIT		\$15,676. 49
Admail West Sacramento, CA 95811-0311	LIT		\$3,942.33
Admail West Sacramento, CA 95811-0311	LIT		\$3,942.33
Admail West Sacramento, CA 95811-0311	LIT		\$15,676. 49

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

. Amounts may be rounded to whole dollars.

SCHEDULE G

SEE INSTRUCTIONS ON REVERSE

Statement covers period		CALIFORNIA FORM 460
from	1/1/2020	
through	2/15/2020	Page 21 of 27

NAME OF FILER
 Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations

I.D. NUMBER
 1424793

NAME OF AGENT OR INDEPENDENT CONTRACTOR
 The Strategy Group, LLC

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| 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) |

*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
Continental Colorcraft Monterey Park, CA 91754-2511	LIT		\$35,078. 75
Continental Colorcraft Monterey Park, CA 91754-2511	LIT		\$10,726. 05
Continental Colorcraft Monterey Park, CA 91754-2511	LIT		\$32,565. 05
Continental Colorcraft Monterey Park, CA 91754-2511	LIT		\$10,207. 88

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

Amounts may be rounded to whole dollars.

SCHEDULE G

SEE INSTRUCTIONS ON REVERSE

Statement covers period		CALIFORNIA FORM 460
from	1/1/2020	
through	2/15/2020	Page 22 of 27

NAME OF FILER
 Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations

I.D. NUMBER
 1424793

NAME OF AGENT OR INDEPENDENT CONTRACTOR
 The Strategy Group, LLC

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| 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) |

*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
Continental Colorcraft Monterey Park, CA 91754-2511	LIT		\$35,078. 75
Continental Colorcraft Monterey Park, CA 91754-2511	LIT		\$10,207. 88
Continental Colorcraft Monterey Park, CA 91754-2511	LIT		\$10,712. 82
Continental Colorcraft Monterey Park, CA 91754-2511	LIT		\$35,078. 78

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

Amounts may be rounded to whole dollars.

SCHEDULE G

Statement covers period	CALIFORNIA FORM 460
from 1/1/2020 through 2/15/2020	
Page 23 of 27	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
 Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations

I.D. NUMBER
 1424793

NAME OF AGENT OR INDEPENDENT CONTRACTOR
 The Strategy Group, LLC

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| 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) |

*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
HP Photography Lake Isabella, CA 93240	LIT		\$1,200.00
HP Photography Lake Isabella, CA 93240	LIT		\$1,200.00
HP Photography Lake Isabella, CA 93240	LIT		\$1,200.00
HP Photography Lake Isabella, CA 93240	LIT		\$1,200.00

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

Amounts may be rounded to whole dollars.

SCHEDULE G

Statement covers period	CALIFORNIA FORM 460
from <u>1/1/2020</u> through <u>2/15/2020</u>	
Page <u>24</u> of <u>27</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
 Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations

I.D. NUMBER
 1424793

NAME OF AGENT OR INDEPENDENT CONTRACTOR
 The Strategy Group, LLC

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| 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) |

*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
HP Photography Lake Isabella, CA 93240	LIT		\$1,200.00
HP Photography Lake Isabella, CA 93240	LIT		\$1,200.00
HP Photography Lake Isabella, CA 93240	LIT		\$1,200.00
HP Photography Lake Isabella, CA 93240	LIT		\$1,200.00

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

. Amounts may be rounded to whole dollars.

SCHEDULE G

SEE INSTRUCTIONS ON REVERSE

Statement covers period		CALIFORNIA FORM 460	
from	1/1/2020	Page	25 of 27
through	2/15/2020		

NAME OF FILER
 Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations

I.D. NUMBER
 1424793

NAME OF AGENT OR INDEPENDENT CONTRACTOR
 The Strategy Group, LLC

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| 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) |

*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
United States Postal Service Washington, DC 20260-0001	POS		\$54,333. 19
United States Postal Service Washington, DC 20260-0001	POS		\$14,811. 90
United States Postal Service Washington, DC 20260-0001	POS		\$54,333. 19
United States Postal Service Washington, DC 20260-0001	POS		\$14,811. 90

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

Amounts may be rounded to whole dollars.

SCHEDULE G

Statement covers period	CALIFORNIA FORM 460
from <u>1/1/2020</u> through <u>2/15/2020</u>	
Page <u>26</u> of <u>27</u>	I.D. NUMBER 1424793

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
 Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations

NAME OF AGENT OR INDEPENDENT CONTRACTOR
 The Strategy Group, LLC

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| 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) |

*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
United States Postal Service Washington, DC 20260-0001	POS		\$14,811. 90
United States Postal Service Washington, DC 20260-0001	POS		\$54,333. 19
United States Postal Service Washington, DC 20260-0001	POS		\$14,811. 90
United States Postal Service Washington, DC 20260-0001	POS		\$54,333. 19

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$544,311.60

* 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.

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

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

Amounts may be rounded to whole dollars.

SCHEDULE G

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
 Workers for a Better LA to Support Herb Wesson for Supervisor 2020, Sponsored by Labor Organizations

NAME OF AGENT OR INDEPENDENT CONTRACTOR
 AKPD Message and Media

Statement covers period
 from 1/1/2020
 through 2/15/2020

CALIFORNIA FORM 460
 Page 27 of 27

I.D. NUMBER
 1424793

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) |

*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
Amobee Baltimore, MD 21230-4769		TV & Web Ads	\$97,751.75
Earhole Studios, LLC Chicago, IL 60654-8173		TV & Web Ad Production	\$760.00
Extreme Reach Talent, Inc. Chicago, IL 60673-1285		TV & Web Ad Production	\$1,814.25

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$100,326.00

* 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.

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 www.fppc.ca.gov