Recipient	Committee
Campaign	Statement
Cover Pag	

	LOS ANG	EIVED BY	FORM
Statement covers period from 01/01/2022	(Month, Day, Year) 2012 JUL	29 PM 4:09	Page 1 of 21 For Official Use Only
through <u>06/30/2022</u>	CAMPAIL	ON FINANCE	
mplete Parts 1, 2, 3, and 4.	2. Type of Statement:		
Committee Controlled Sponsored Nso Complete Part 6) Primarily Formed Candidate/ Officeholder Committee	☐ Preelection Statement ☐ Semi-annual Statement ☐ Termination Statement (Also file a Form 410 Termination ☐ Amendment (Explain below)	☐ Spec	terly Statement ial Odd-Year Report
	Treasurer(s)		
	NAME OF TREASURER Karriann Farrell Hinds MAILING ADDRESS		
	CITY Beverly Hills		
	NAME OF ASSISTANT TREASURER, IF ANY		
	MAILING ADDRESS		
DE AREA CODE/PHONE	CITY	STATE ZIP CO	DE AREA CODE/PHONE
	OPTIONAL: FAX / E-MAIL ADDRESS		
California that the foregoing	∋rein at	nd in the attached sch	edules is true and complete. I
Bv	easurer		
Sigi	nent or R	esponsible Officer of Spons	or .
Ву	ignature of Controlling Officeholder, Candidate, State Measur	a Dranapart	
	from06/30/2022 through06/30/2022 mplete Parts 1, 2, 3, and 4. Primarily Formed Ballot Measure Committee ① Controlled ② Sponsored Nso Complete Part 6) Primarily Formed Candidate/ Officeholder Committee Nso Complete Part 7) ② NUMBER 801942 ③ Westside DE AREA CODE/PHONE 2 213-709-3208	through	through

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www.fppc.ca.gov

7/27/22

CALIFORNIA 460

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2								
CALII FC	ORNIA ORM	460						
Page	2 0	f 21						

Officeholder or Candidate Contr	rolled Committee	6.	Primarily Formed Ball	ot Measure	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE				
N/A							
OFFICE SOUGHT OR HELD (INCLUDE LOCAT	ION AND DISTRICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTI	ON		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AN	D STREET) CITY STATE ZIP		Identify the controlling office	eholder, cand	idate, or state me	asure propo	onent, if any.
			NAME OF OFFICEHOLDER, CA	NDIDATE, OR PR	ROPONENT		
Related Committees Not Include not included in this statement that are con contributions or make expenditures on be	ed in this Statement: LIst any committees trolled by you or are primarily formed to receive half of your candidacy.		OFFICE SOUGHT OR HELD	 	DIS	STRICT NO. IF	ANY
COMMITTEE NAME	I.D. NUMBER						
		7	Primarily Formed Can	didate/Offic	eholder Com	mittee 11s	t names of
NAME OF TREASURER	CONTROLLED COMMITTEE?	••	officeholder(s) or candidate(s	s) for which thi	s committee is prin	narlly formed	i.
	YES NO		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT	T OR HELD	<u> </u>
COMMITTEE ADDRESS STREET ADD	RESS (NO P.O. BOX)						SUPPORT OPPOSE
CITY	STATE ZIP CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT	T OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	DATE OFFICE SOUGHT OR HELD		SUPPORT OPPOSE
NAME OF TREASURER COMMITTEE ADDRESS STREET ADD	CONTROLLED COMMITTEE? YES NO DRESS (NO P.O. BOX)		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT	T OR HELD	SUPPORT OPPOSE
	STATE ZIP CODE AREA CODE/PHONE		Att	ach continuat	ion sheets If nece	essarv	
			7				

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Campaign Disclosure Statement

Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period CALIFORNIA

Summary Fage	from	01/01/2022	FORM	460
SEE INSTRUCTIONS ON REVERSE	through _	06/30/2022	Page3	of
NAME OF FILER			I.D. NUMBER	
National Women's Political Caucus Los Angeles Westside			801942	

Contributions Received	COLUMN A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	COLUMN B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions Schedule A, Line 3 2. Loans Received Schedule B, Line 3 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 4. Nonmonetary Contributions Schedule C, Line 3 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 3500.00	\$ \$ \$	20. Contributions Received \$ \$ 21. Expenditures Made \$ \$
Expenditures Made 6. Payments Made	\$ 550.00 0 0	\$	Expenditure Limit Summary for State Candidates 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy) \$
Current Cash Statement 12. Beginning Cash Balance	\$ 3500.00 0 550.00 \$ 3284.79	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.
18. Cash Equivalents See instructions on reverse 19. Outstanding Debts Add Line 2 + Line 9 in Column B above			FPPC Form 460 (Jan/2016 FPPC Advice: advice@fppc.ca.gov (866/275-3772

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Schedule A Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A

Monetary Contributions Received			from01/01	/2022	CALI F	FORNIA 460 DRM
			through	30/2022	Page	4 of 21
EE INSTRUCTIONS ON REVERSE AME OF FILER					I.D. NU	MBER
National Women's Political Caucus Los Angeles Westside					80194	
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 CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
05/25/2022 NWPC LA Westside Beverly Hills, CA 90212	□IND □COM ØOTH □PTY □SCC	Business Entity	2500.00	2500.	00	
Jane Hasler Henick Agoura Hills, CA 91301-3421	☑IND □COM □OTH □PTY □SCC	Retired	1000.00	1000.	00	
	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
	☐IND ☐COM ☐OTH ☐PTY ☐SCC					
	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
		SUBTOTAL \$	3500.00			
Schedule A Summary					tributor C	
 Amount received this period – itemized monetary contributions (Include all Schedule A subtotals.) 	s. 	\$ <u></u>	3500.00			al ent Committee than PTY or SCC)
Amount received this period – uniternized monetary contribution	ons of less that	n \$100\$	0.00	OTH PTY		e.g., business entity)
Total monetary contributions received this period.(Add Lines 1 and 2. Enter here and on the Summary Page, Co	olumn A, Line 1	I.)TOTAL \$	3500.00		– Small (Contributor Committee

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Monetary NAME OF FILER	A (Continuation Sheet) Contributions Received	Amounts may to whole o		Statement coverage of through06/3	•	Page .	SCHEDULE A (CON IFORNIA 460 ORM 5 of 21
National Wo	omen's Political Caucus Los Angeles Westside					80194	12
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)
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		IND COM OTH PTY					
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					

SUBTOTAL \$

*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

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	Δm	nounts may be ro	unded				SCHE	DULE B - PART
Schedule B – Part 1	· ···	Statement co	ers period	CALIFORNIA 460				
Loans Received					from01/0	1/2022	FORM	** 40U
SEE INSTRUCTIONS ON REVERSE					through06/	30/2022	Page6	of 21
NAME OF FILER							I.D. NUMBER	
National Women's Political Caucus Los A	Angeles Westside						801942	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PA OR FORGIVE THIS PERIO	EN CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTION TO DATE
				☐ PAID				CALENDAR YEA
				s	_ s	%	\$	\$
				FORGIVEN		RATE		PER ELECTION
†=====================================		\$	\$	s	DATE DUE	\$	DATE INCURRED	s
IND COM OTH PTY SCC	<u> </u>	 				 	BAILINGGIALE	CALENDAR YEA
				PAID			1	CALENDAR TEA
		ł		S	_ s	RATE	s	PER ELECTION
				- PORGIVEN				PER ELECTION
† IND COM OTH PTY SCC		\$	\$	s	DATE DUE	\$	DATE INCURRED	s
				PAID				CALENDAR YEA
	}		1	5	s	%	s	\$
		1		FORGIVEN		RATE		PER ELECTION
		\$	\$	s		s		s
IND COM OTH PTY SCC					DATE DUE		DATE INCURRED	
		SUBTOTALS \$;	\$	\$	\$		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
Loans received this period				\$				
(Total Column (b) plus unitemized loar						(+/	Contributor Codes	
2. Loans paid or forgiven this period				œ			JD – Individual	
(Total Column (c) plus loans under \$10				Ф		C	OM - Recipient C	
(Include loans paid by a third party that		edule A.)					TH - Other (e.g., I	
3. Net change this period. (Subtract Lin	ue 2 from Line 1 \			MET ¢		P	TY - Political Part CC - Small Contri	y
Enter the net here and on the Summa	ry Page, Column A, Line 2.		••••••••		(May be a negative number)	ر ر	- Onian Contin	

*Amounts forgiven or paid by another party also must be reported on Schedule A. ** If required.

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		A					SCH	EDULE B - PART 2
Schedule B – Part 2		Amounts may be rounded to whole dollars.		State	ment covers period		CALIFOR	NIA 460
Loan Guarantors				from	01/01/2022		FORM	
•					06/30/2022		7	24
SEE INSTRUCTIONS ON REVERSE				through.	00/30/2022		Page7	of21
NAME OF FILER							I.D. NUMBER	
National Women's Political Caucus Los Ange	eles Westside						801942	
FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN		AMOUNT GUARANTEED THIS PERIOD		JMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	□IND		LENDER			CA	LENDAR YEAR	
	COM					s_		
	□отн		DATE			P	ER ELECTION	
	□PTY					(1	FREQUIRED)	
	□scc					\$_		
	5		LENDER			CA	LENDAR YEAR	
	□ IND		LENDER			s_		
	□сом □отн					Р	ER ELECTION	
	□ DTY		DATE			(1	FREQUIRED)	
	□scc							
						*-	LENDAR YEAR	
			LENDER			CA	LENDAR TEAR	
	□сом					\$_		
	□отн		DATE				REQUIRED)	
	□PTY							
	□scc					\$ _		
			LENDER			CA	LENDAR YEAR	
	□ IND				,	s		
	СОМ		200			P	R ELECTION	
	OTH		DATE			(1	REQUIRED)	
	□PTY							

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□scc

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Enter on Summary Page, Line 17 only.

SUBTOTAL \$

Schedule	e C		Amounts may be rounded						S	CHEDULE C
Nonmon	etary Contributions Received		to whole dollars.		5	Statement covers p	period	CALIF	ORNIA	
	•				fron	01/01/20	22	FO		460
EE INSTRUCTION	ONS ON REVERSE				thro	ugh06/30/2	022	Page	8 of.	21
AME OF FILER								I.D. NUME	BER	
National W	omen's Political Caucus Los Angeles Wes	stside						801942		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION GOODS OR SERV		AMOUNT/ FAIR MARKET VALUE	CUMULA DA CALENDA (JAN 1 -	TE AR YEAR	TO	LECTION DATE QUIRED)
		□IND □COM □OTH □PTY □SCC								
		□IND □COM □OTH □PTY □SCC								
		☐IND ☐COM ☐OTH ☐PTY ☐SCC								
		□IND □COM □OTH □PTY □SCC								
Attach addi	tional information on appropriately labeled	continuation s	sheets.	SUBTO	TAL \$					
I. Amount r	C Summary eceived this period – itemized nonmonetary				\$		IND-	tributor Cod - Individual I – Recipier	t Committ	
2. Amount re 3. Total none	eceived this period – unitemized nonmoner monetary contributions received this period is 1 and 2. Enter here and on the Summary	tary contributi I.	ons of less than \$100		\$ _		PTY	(other th – Other (e. – Political F – Small Co	arty	ss entity)

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Print Form

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

Amounts may be rounded to whole dollars.

| Statement covers period | FORM | CALIFORNIA | FORM | FOR

Candidates, weasures and Committees		
SEE INSTRUCTIONS ON REVERSE	through 06/30/2022	Page 9 of 21
NAME OF FILER		I.D. NUMBER
National Women's Political Caucus Los Angeles Westside		801942
		كالوالمنافذ كالمتعادل المتعادل

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)
05/24/2022	Lola Smallwood-Cuevas for Senate 2022 Z Support	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Campaign Contribution	250.00	250.00	
05/24/2022	Katy Young Yarosłavsky for City Council 2022	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Campaign Contribution	250.00	250.00	
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure				
			SUBTOTAL \$	500.00		

Schedule	D S	umm	ary
-----------------	-----	-----	-----

1.	Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)	\$ 500.00
2.	Uniternized contributions and independent expenditures made this period of under \$100	\$ 0

Clear Sch. D

Print Form

Summary Supporting Candidate	ation Sheet) y of Expenditures ng/Opposing Other tes, Measures and Committees	Amounts may to whole d		Statement covers from 01/01/2 through 06/30	/2022 F	ALIFOI FORI	10 of 21
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 CALENDAR YI (JAN. 1 - DEC.	D DATE EAR	PER ELECTION TO DATE (IF REQUIRED)
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
	Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure			-		
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
		Monetary Contribution					

Nonmonetary Contribution

Independent Expenditure

SUBTOTAL \$

Clear Sch. D-Con.

☐ Support

Print Form

Oppose

Schedule E	Amounts may be rounded to whole dollars.	Statem	CAL	
Payments Made		from	01/01/2022	
		through	06/30/2022	Page

MBR member communications

petition circulating

OFC office expenses

PHO phone banks

PRT print ads

2. Unitemized payments made this period of under \$100......

MTG meetings and appearances

POL, polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

I.D. NUMBER

801942

SCHEDULE E

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

CMP campaign paraphernalia/misc.

CTB contribution (explain nonmonetary)*

campaign literature and mailings

candidate filing/ballot fees

CNS campaign consultants

CVC civic donations

LEG legal defense

FND fundraising events

FIL

IND

LIT

National Women's Political Caucus Los Angeles Westside

independent expenditure supporting/opposing others (explain)*

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

RAD radio airtime and production costs RFD returned contributions

SAL campaign workers' salaries

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

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE (DESCRIPTION OF PAYMENT	AMOUNT PAID
Secretary of State	FIL	Filing fees	50.00
Sacramento, CA 95814	""		50.00
Lola Smallwood-Cuevas for Senate 2022	СТВ	Campaign Contribution	250.00
Inglewood, CA 90301	0.5		200.00
Katy Young Yaroslavsky for City Council 2022	СТВ	Campaign Contribution	250.00
Los Angeles, CA 90017			
* Payments that are contributions or independent expenditures must also be summarized on Sch	edule D.	SUBTOTAL	\$ 550.00
Schedule E Summary			
1. Itemized payments made this period. (Include all Schedule E subtotals.)		\$_	550.00

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550.00

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Schedule E (Continuation Sheet) Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER	Amounts may to whole d		Statement covers period from 01/01/2022 through 06/30/2022	CALIFORNIA 460 FORM Page 14 of 21
National Women's Political Caucus Los Angeles Westsid	e			801942
CODES: If one of the following codes accurately described accurately des	MBR member co MTG meetings al OFC office exper PET petition circ PHO phone bank POL polling and POS postage, de	mmunications nd appearances nses ulating	RAD radio airtime and production RFD returned contributions SAL campaign workers' salarie TEL: t.v. or cable airtime and production candidate travel, lodging, staff/spouse travel, lodging.	on costs s oduction costs and meals g, and meals ses of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID

SUBTOTAL \$

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

Schedule F Accrued Expenses (Unpaid Bills)	Amounts may be roun to whole dollars.	Statement cov	ers period /2022	CALIFORNIA 460		
			through06/3	30/2022	Page 17 of 21	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER						
					I.D. NUMBER	
National Women's Political Caucus Los Angeles Westside					801942	
CODES: If one of the following codes accurately described CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense	s the payment, you may MBR member communication MTG meetings and appeara OFC office expenses PET petition circulating PHO phone banks POL polling and survey rese POS postage, delivery and in PRO professional services (ons nces earch messenger services	RAD radio airtime a RFD returned contri SAL campaign worl TEL t.v. or cable air TRC candidate trav TRS staff/spouse tr	nd production con butions kers' salaries time and product el, lodging, and n avel, lodging, and en committees of	tion costs neals	
LEG legal defense LIT campaign literature and mailings	PRT print ads	iegai, accounting)	WEB information ted		nternet, e-mail)	
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PA THIS PERIO (ALSO REPORT	OD BALANCE AT CLOSE	
				·		
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$	\$	3	\$	
Schedule F Summary						
Total accrued expenses incurred this period. (Include all S accrued expenses of \$100 or more, plus total unitemized)	Schedule F, Column (b) su accrued expenses under S	btotals for \$100.)	INCL	JRRED TOTA	LS \$	
Total accrued expenses paid this period. (Include all Sche accrued expenses of \$100 or more, plus total unitemized				PAID TOTA	LS \$	
Net change this period. (Subtract Line 2 from Line 1. Enton the Summary Page, Column A, Line 9.)	er the difference here and	d 		N	IET \$	

Print Form

Clear Sch. F

Schedule F	Amounts may be rounded		
(Continuation Sheet)	to whole dollars.	Statement co	
Accrued Expenses (Unpaid Bills)		from	01/01/20
Accided Expenses (empara Eme)		through	06/30/2

SCHEDULE F (CONT.)

Statement covers period from 01/01/2022

through 06/30/2022

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I.D. NUMBER 801942

National Women's Political Caucus Los Angeles Westside

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 petition circulating TEL t.v. or cable airtime and production costs PET FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals POL polling and survey research TRS staff/spouse travel, lodging, and meals FND fundraising events independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor IND

LEG legal defense PRO professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT print ads VEB 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 LD. 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
	SUBTOTALS	\$	\$	\$	\$

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)	Amour to	nts may be whole doll		Sta	atement covers period 01/01/2022	CALIFO	
SEE INSTRUCTIONS ON REVERSE				throug	gh06/30/2022	Page1	
NAME OF FILER						I.D. NUMBI	ER
National Women's Political Caucus Los Angeles Westside						801942	
NAME OF AGENT OR INDEPENDENT CONTRACTOR							
CODES: If one of the following codes accurately describes CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings * Payments that are contributions or independent expenditures must also be	MBR member co MTG meetings a OFC office expe PET petition circ PHO phone bank POL polling and POS postage, de PRO professiona PRT print ads	immunication and appeara inses culating ks survey resealivery and ral services (I	ns nces earch nessenger services	RAD ra RFD re SAL ca TEL t. TRC ca TRS st TSF tra VOT vo	escribe the payment, adio airtime and production sturned contributions ampaign workers' salaries or cable airtime and production and date travel, lodging, and aff/spouse travel, lodging, and aff/spouse travel, lodging, and the sold of the salaries of the	costs uction costs i meals and meals of the same of	į
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE	OR	DESCRIPTION O	PE PAYMENT		AMOUNT PAID
	, , , , , , , , , , , , , , , , , , , ,						

(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE)R 	DESCRIPTION OF PAYMENT		AMOUNT PAID
			• •		
					
				,	
ttach additional information on appropriately labeled continuation sheets.				TOTAL* \$	

* 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.

Clear Sch. G

Print Form

•								SCHEDULE H
Schedule H Loans Made to Others*	Amounts may be rounded to whole dollars.			Statement covers period from 01/01/2022		CALIFORNIA 460 FORM		
SEE INSTRUCTIONS ON REVERSE					through06/3	30/2022	Page 20	of
NAME OF FILER							I.D. NUMBER	
National Women's Political Caucus Los	Angeles Westside						801942	
FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER LD. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OF FORGIVENES THIS PERIOD	S CLOSE OF THIS	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				☐ PAID				CALENDAR YEAR
				S	\$	RATE	s	\$PER ELECTION**
		\$	\$	s	DATE DUE	\$	DATE INCURRED	s
				☐ PAID				CALENDAR YEAR
				\$ FORGIVEN	\$	RATE	\$	\$PER ELECTION**
		\$	\$	\$	DATE DUE	\$	DATE INCURRED	s
*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.		SUBTOTALS	\$	\$	\$	\$		
						(Enter (e) on Schedule I, Line 3)		
Schedule H Summary								
Loans made this period (Total Column (b) plus unitemized loans			\$		-	**If Required		
Payments received on loans (Total Column (c) plus unitemized payments			•••••••••••		\$		-	
3. Net change this period. (Subtract Line 2 (Enter the net here and on the Summa	2 from Line 1.) ry Page, Column A, Line 7.))				y be a negative number)	-	

Clear Sch. H

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Schedule I Miscellaneous Increases to Cash SEE INSTRUCTIONS ON REVERSE NAME OF FILER		Amounts may be rounded to whole dollars.		Statement covers period 67 (17.01/2022) through 66/30/2022	FORM 46U Page 21 of 21 I.D. NUMBER
DATE	Political Caucus Los Angeles Westside FULL NAME AND ADDRESS OF SOURCE	CE	DES	CRIPTION OF RECEIPT	801942 AMOUNT OF
RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)		DES	CRIPTION OF RECEIPT	INCREASE TO CASH
			-		
Attach additional in	OTAL \$				
Schedule I Sum	mary				
1. Itemized increase	es to cash this period			\$	-
2. Unitemized increa	ases to cash of under \$100 this period			\$	
3. Total of all interes	st received this period on loans made to others	s. (Schedule H, Column (e).)	\$	
 Total miscellaneo Summary Page, I 	us increases to cash this period. (Add Lines 1 Line 14.)	, 2, and 3. Enter here and	on the	TOTAL \$	<u></u>

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