Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5) SEE INSTRUCTIONS ON REVERSE	Statement covers period from01/01/2023 through06/30/2023	Date of election if applicable: (Month, Day, Year) 2023 AUG - I PM 3: 25	CALIFORNIA 460 CALIFORNIA FORM Page of For Official Use Only
Type of Recipient Committee: All Committees - 0	Complete Parts 1, 2, 3, and 4.	2. Type of Statement:	/
 ∑ Officeholder, Candidate Controlled Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	☐ Preelection Statement ☐ Semi-annual Statement ☐ Termination Statement	Quarterly Statement Special Odd-Year Report Supplemental Preelection Statement - Attach Form 495
3. Committee Information	.D. NUMBER 1419208	Treasurer(s)	
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE Vera Robles DeWitt for Water Replenishment 5 2020	,	NAME OF TREASURER Gary Crummitt MAILING ADDRESS	
STREET ADDRESS (NO P.O. BOX)		CITY STATE 2 Long Beach CA	71P CODE AREA CODE/PHONE 90802 (562) 983~0815
CITY STATE ZIP (CODE AREA CODE/PHONE	NAME OF ASSISTANT TREASURER, IF ANY	(00)
Long Beach CA 908 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.		MAILING ADDRESS	
CITY STATE ZIP (CODE AREA CODE/PHONE	CITY STATE 2	ZIP CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS gary@crummittandassociates.com		OPTIONAL: FAX / E-MAIL ADDRESS	
4. Verification I have used all reasonable diligence in preparing and review under penalty of perjury under the laws of the State of Californ			plete. I certify
Date 07/10/2023			
Executed on			
Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, State Measure Proponent	
Executed on	Ву	Signature of Controlling Officeholder, Candidate, State Measure Proponent	FPPC Form 460 (Jan/2016

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2								
CALIF	ORNIA ORM	4	60	1				
Page	2	of _	11					

AME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
era Robles DeWitt FICE SOUGHT OR HELD (INCLUDE LOCATION AND DIST	PICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICT	ION	SUPPORT
rector Water Replenishment District 5	MOT NOWBER II AFFEIGABLE					OPPOSE
SIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP					
,			Identify the controlling of	fficeholder, ca	andidate, or state mea	sure proponent, if
	Long Beach CA 90802		NAME OF OFFICEHOLDER, CA	NDIDATE, OR P	ROPONENT	
elated Committees Not Included in this S of included in this statement that are controlled by you ontributions or make expenditures on behalf of your	ou or are primarily formed to receive		OFFICE SOUGHT OR HELD		DISTRICT	T NO. IF ANY
MMITTEE NAME	I.D. NUMBER					
era Robles DeWitt for Carson City Clerk 221	1440243					
ME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Car officeholder(s) or candidate(
ary Crummitt	YES NO					
OMMITTEE ADDRESS STREET ADDRESS (NO P.C.	D. BOX)		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR H	SUPPO
TY STATE ZI	P CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR H	IELD - CURRO
ong Beach CA 9	00802 (562) 983-0815					SUPPO OPPOS
DMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR H	HELD
						SUPPO
ME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR H	HELD SUPPO
	YES NO					SUPPO
DMMITTEE ADDRESS STREET ADDRESS (NO P.C). BOX)					

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

CALIFORNIA FORM Statement covers period 01/01/2023

SUMMARY PAGE

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vera Robles DeWitt for Water Replenishment District Board - Division 5 2020

from_ Page __3 __ of __11___ 06/30/2023 through I.D. NUMBER 1419208

Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTALTO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and
Monetary Contributions Schedule A, Line 3	\$ 632.82	\$	632.82	General Elections
2. Loans Received Schedule B, Line 3	1,700.00		56,700.00	1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 2,332.82	\$	57,332.82	20. Contributions Received \$ \$
4. Nonmonetary Contributions			0.00	21 Evpanditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4		\$	57,332.82	• Made \$ \$
Expenditures Made				Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$ 1,791.13	\$	1,791.13	Candidates
7. Loans Made Schedule H, Line 3	0.00		1,500.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 1,791.13	\$	3,291.13	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	0.00		12,560.99	Date of Election Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3	0.00		0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$ 1,791.13	\$	15,852.12	\$
Current Cash Statement				\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 109.22	To	calculate Column B, add	
13. Cash Receipts Column A, Line 3 above	2,332.82		mounts in Column A to the orresponding amounts	
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00	fr	om Column B of your last	*Amounts in this section may be different from amounts reported in Column B.
15. Cash Payments Column A, Line 8 above	1,791.13		eport. Some amounts in olumn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 650.91	fig	gures that should be	
If this is a termination statement, Line 16 must be zero.		р	ubtracted from previous eriod amounts. If this is the first report being filed	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ 0.00	fo	or this calendar year, only arry over the amounts	
Cash Equivalents and Outstanding Debts		fr	om Lines 2, 7, and 9 (if ny).	
18. Cash Equivalents See instructions on reverse				
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ 69,260.99			
		1		FPPC Form 460 (Ja FPPC Advice: advice@fppc.ca.gov (866/2)

www.fppc.ca.gov

Schedule.	A,	
Monetary	Contributions	Received

SC	CHEDU	JLE A
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Monetary Contributions Received			s may be rounded whole dollars.	Statement covers period from01/01/2023		CALIFORNIA 460	
SEE INSTRUCTION	ONS ON REVERSE			through06/30/2	023	Page _	4 of11
NAME OF FILER	ON NEVEROL					I.D. NUN	MBER
Vera Robles	DeWitt for Water Replenishment District Board -	Division 5 20	20			141920	08
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 1 CALENDAR (JAN. 1 - DE	YEAR	PER ELECTION TO DATE (IF REQUIRED)
04/19/2023	Vera Robles DeWitt for City Clerk 2021 (ID# 1440243) Long Beach, CA 90802	☐IND ☑COM ☐OTH ☐PTY ☐SCC		632.82		632.82	
		□IND □COM □OTH □PTY □SCC					
		OTH SCC					
		□IND □COM □OTH □PTY □SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
			SUBTOTAL	\$ 632.82			
1. Amount re	A Summary eceived this period – itemized monetary contributions. Il Schedule A subtotals.)		\$_	632.82	IND	(other th	nt Committee han PTY or SCC)
2. Amount re	eceived this period – unitemized monetary contributions	s of less than \$	100 \$	0.00		H – Other (6 Y – Political I	e.g., business entity) Party
	etary contributions received this period.	mn A Line 1)	TOTAL \$	632.82	sco	S – Small Co	ontributor Committee

Schedule B - Part 1

Amounts may be rounded

Stater	nent covers period	CALIFOR	NIA 460
from	01/01/2023	FORM	
	06/30/3033		-4 11

Loans Received		to whole dollar	rs.	,	from01/0	1/2023	FORM	* 46U
SEE INSTRUCTIONS ON REVERSE					through 06/3	0/2023	Page 5	of11
NAME OF FILER							I.D. NUMBER	
Vera Robles DeWitt for Water Replenis	hment District Board - Div	vision 5 2020					1419208	
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)	OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIO TO DATE
EV Consulting LLC				PAID				CALENDAR YEA
Carson, CA 90745				\$0.00	\$ 10,000.00	0_0_% RATE	\$ 10,000.00	\$
†□ IND □ COM ☑ OTH □ PTY □ SCC		\$ _10,000.00	\$0.00	\$0.00	12/31/2021 DATE DUE	\$0.00	07/20/2020 DATE INCURRED	\$
Vera Robles DeWitt Carson, CA 90745	Director Water Replenishment District of Southern California			PAID \$000 FORGIVEN	\$500,00	% RATE	\$500.00	\$
†∏ IND □ COM □ OTH □ PTY □ SCC		\$ 500.00	\$0.00	\$0_0	12/31/2020 DATE DUE	\$ 0.00	06/26/2019 DATE INCURRED	\$
Vera Robles DeWitt Carson, CA 90745	Director Water Replenishment District of Southern California			PAID \$0_0 FORGIVEN	\$1,500.00	% RATE	\$ 1,500.00	\$ 1,700.0
†☑ IND □ COM □ OTH □ PTY □ SCC		\$ 1,500.00	\$0.00	\$0.00	12/31/2021 DATE DUE	\$0_0	08/04/2020 DATE INCURRED	\$
		SUBTOTALS \$	0.00	\$ 0.00	\$ 12,000.00	\$ 0.00		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
Loans received this period (Total Column (b) plus unitemized loar			•••••	\$	1,700.00	(†C	Contributor Codes	3
Loans paid or forgiven this period (Total Column (c) plus loans under \$10 (Include loans paid by a third party that	00 paid or forgiven.)			\$	0.00	0	D – Individual OM – Recipient Co (other than TH – Other (e.g., TY – Political Part	PTY or SCC) business entity
3. Net change this period. (Subtract Lin Enter the net here and on the Summa				. NET \$	1,700.00 ay be a negative number)		CC - Small Contri	

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

FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov Schedule B - Part 1 (Continuation Sheet) Loans Received

SCHEDULE B - PART 1 (CONT.)

Statement covers period

Loans Received	tion Sneet) Amo	ounts may be ro to whole dollar			from01/0	ers period	CALIFORN FORM	460
SEE INSTRUCTIONS ON REVERSE					through06/3	0/2023	Page 6	of11
NAME OF FILER							I.D. NUMBER	
Vera Robles DeWitt for Water Replenis	hment District Board - Div	rision 5 2020					1419208	
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 PAIL OR FORGIVE THIS PERIOD	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Vera Robles DeWitt Carson, CA 90745	Director Water Replenishment District of Southern California	\$ 1,500.00	\$0.00	PAID \$	12/31/2021		\$ 1,500.00	\$ 1,700.00 PER ELECTION**
TIND COM OTH PTY SCC					DATE DUE		DATE INCURRED	
Vera Robles DeWitt Carson, CA 90745 LOAN	Director Water Replenishment District of Southern California			PAID \$O_O FORGIVEN	\$5,000.00	0_00 % RATE	\$_5,000.00	\$
†☑ IND □ COM □ OTH □ PTY □ SCC		\$ 5,000,00	\$ 0.00	\$0.01	0 12/31/2021 DATE DUE	\$0.00	10/12/2020 DATE INCURRED	\$
Vera Robles DeWitt Carson, CA 90745 LOAN	Director Water Replenishment District of Southern California	s_10,000.00	\$0.00	PAID \$0.00 FORGIVEN \$0.00	12/21/2021	% RATE	\$_10,000.00 10/26/2020	\$ 1.700.00 PER ELECTION **
† IND □ COM □ OTH □ PTY □ SCC		\$	3	5	DATE DUE	•	DATE INCURRED	3
Vera Robles DeWitt Carson, CA 90745 LOAN	Director Water Replenishment District of Southern California			PAID \$OOD FORGIVEN		0.00% RATE	\$_5,000.00 10/26/2020	\$ 1,700,00 PER ELECTION **
†☑ IND □ COM □ OTH □ PTY □ SCC		\$5,000.00	\$0.00	\$0.0	DATE DUE	\$0_00	DATE INCURRED	\$
		SUBTOTALS \$	0.00	0.	00\$ 21,500.00	\$ 0.00	*##	

†Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

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

FPPC Form 460 (Jan/2016)

SCC - Small Contributor Committee

			SCHEDULE B - PART 1 (CONT
chedule B – Part 1 (Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA A CO

Schedule B – Part 1	(Continuation	Sheet)
Loans Received		

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.
 Statement covers period from
 01/01/2023
 CALIFORNIA FORM
 460

 through
 06/30/2023
 Page
 7
 of
 11

NAME OF FILER

Vera Robles DeWitt for Water Replenishment District Board - Division 5 2020

1419208

I.D. NUMBER

IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS	(b) AMOUNT	(c)	(d) OUTSTANDING	(e)	(f)	(g)
	PERIOD	RECEIVED THIS PERIOD	AMOUNT PAID OR FORGIVEN THIS PERIOD*	BALANCE AT CLOSE OF THIS PERIOD	INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE
Director Water Replenishment			PAID				CALENDAR YEAR
District of Southern California			\$0_00	\$5,000.00	0_00% RATE	\$ 5.000.00	\$1,700.00 PER ELECTION***
	\$5,000.00	\$0.00	\$0.00	12/31/2021 DATE DUE	\$0.00	11/09/2020 DATE INCURRED	\$
Director Water Replenishment			PAID				CALENDAR YEAR
District of Southern California			\$0_0 FORGIVEN	\$1,500.00	0.00% RATE	\$ 1,500.00	\$1,700.00 PER ELECTION ***
	s 1.500.00	\$0.00	\$0_0	12/31/2021 DATE DUE	\$0.00	12/10/2020 DATE INCURRED	\$
Director Water Replenishment			PAID				CALENDAR YEAR
District of Southern California			\$0_0	\$3.000.00	0_00% RATE	\$ _3.000.00	\$1,700.00 PER ELECTION ***
	\$3,000.00	\$0.00	\$0.00	12/31/2021 DATE DUE	\$0.00	01/15/2021 DATE INCURRED	\$
Water Replenishment			PAID				CALENDAR YEAR
District of Southern California			\$0_00	\$ 10,000.00	0_00% RATE	\$ 10,000.00	\$1,700.00 PER ELECTION ***
	\$ 10.000.00	\$0.00	\$0.00	12/31/2021 DATE DUE	\$0_00	01/23/2021 DATE INCURRED	\$
	Water Replenishment District of Southern California Director Water Replenishment District of Southern California Director Water Replenishment District of Southern California	Director Water Replenishment District of Southern California S	Director Water Replenishment District of Southern California \$ 1.500.00 \$ 0.00 Director Water Replenishment District of Southern California \$ 3.000.00 \$ 0.00 Director Water Replenishment District of Southern California \$ 10.000.00 \$ 0.00	S 5.000.00 S 0.00 S 0.00	S 5,000.00 S 0.00 S 0.00 12/31/2021	FORGIVEN	FORGIVEN

†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

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

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

SCHEDULE B - PART 1 (CONT.) Schedule B - Part 1 (Continuation Sheet) Statement covers period Amounts may be rounded **CALIFORNIA** Loans Received to whole dollars. **FORM** 01/01/2023 from 06/30/2023 Page 8 of __11 through SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Vera Robles DeWitt for Water Replenishment District Board - Division 5 2020 1419208 (f) (g) (a) OUTSTANDING (d) OUTSTANDING (c) IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE **AMOUNT** INTEREST **ORIGINAL** CUMULATIVE **AMOUNT PAID** OCCUPATION AND EMPLOYER BALANCE BALANCEAT OF LENDER RECEIVED THIS OR FORGIVEN PAID THIS **AMOUNT OF** CONTRIBUTIONS (IF SELF-EMPLOYED, ENTER **BEGINNING THIS CLOSE OF THIS** (IF COMMITTEE, ALSO ENTER I.D. NUMBER) PERIOD PERIOD LOAN TO DATE THIS PERIOD NAME OF BUSINESS) PERIOD PERIOD Vera Robles DeWitt Director CALENDAR YEAR ☐ PAID Water Replenishment District of Southern Carson, CA 90745 0.00 \$ 1.700.00 0.00% \$ 1.700.00 \$ 1.700.00 California RATE FORGIVEN PER ELECTION** 0.00 \$ 1,700.00 12/31/2024 04/19/2023 0.00 0.00 DATE DUE DATE INCURRED TIND COM OTH PTY SCC Vanessa L. Robles Teacher PAID CALENDAR YEAR Carson City School Carson, CA 90745 District \$ 2,000.00 0.00% \$ 2,000.00 0.00 0.00 RATE FORGIVEN PER ELECTION *** 10/06/2020 12/31/2021 \$ 2,000.00 DATE DUE DATE INCURRED TE IND COM OTH PTY SCC CALENDAR YEAR PAID RATE PER ELECTION ** FORGIVEN

SUBTOTALS \$

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

COM OTH PTY SCC

□ COM □ OTH □ PTY □ SCC

†Contributor Codes

DATE INCURRED

DATE INCURRED

CALENDAR YEAR

PER ELECTION ***

IND - Individual

0.00

DATE DUE

DATE DUE

3,700.00\$

☐ PAID

1,700.00\$

FORGIVEN

0.00\$

COM – Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

Schedule E Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER	Amounts may to whole d		,	Statement covers period from01/01/2023 through06/30/2023		SCHEDULE ORNIA 460 of of
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 ND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and s POS postage, del	ou may enter the of the communications dispersances asses	R. R. S. TE	e, describe the paymer radio airtime and produce returned contributions AL campaign workers' sale L t.v. or cable airtime and candidate travel, lodging staff/spouse travel, lod transfer between common voter registration EB information technology	artion costs aries d production costs g, and meals ging, and meals nittees of the sam	e candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIP	TION OF PAYMENT		AMOUNT PAID
Leading Edge Lodi, CA 95242		File U	pdates			1,741.1
* Payments that are contributions or independent expenditures m	nust also be summ	arized on Schedule	D.		SUBTOTAL\$	1,741.

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

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

Schedule E Summary

1,741.13

1,791.13

50.00

0.00

Schedule	₽ F		
Accrued	Expenses	(Unpaid	Bills)

Amounts may be rounded to whole dollars.

CALIFORNIA Statement covers period **FORM** 01/01/2023 from through 06/30/2023 Page 10 of 11

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

I.D. NUMBER

1419208

Vera Robles DeWitt for Water Replenishment District Board - Division 5 2020

CO	DES: If one of the following codes accurately describe	s the	payment, you may	enter the code.	Otherwise	e, describe th	ne payment.	
CMP	campaign paraphernalia/misc.	MBR	member communication	ns	RAD	radio airtime ar	nd production costs	
CNS	campaign consultants	MTG	meetings and appeara	nces	RFD	returned contri	butions	
CTB	contribution (explain nonmonetary)*	OFC	office expenses		SAL	campaign work	cers' salaries	
CVC	civic donations	PET	petition circulating		TEL	t.v. or cable air	time and production cos	sts
FIL.	candidate filing/ballot fees	PHO	phone banks		TRC	candidate trave	i, lodging, and meals	
FND	fundraising events	POL	polling and survey rese	earch	TRS	staff/spouse tra	ivel, lodging, and meals	3
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and	messenger services	TSF	transfer between	en committees of the sa	ame candidate/sponsor
LEG	legal defense	PRO	professional services ((legal, accounting)	VOT	voter registration	on	
LIT	campaign literature and mailings	PRT	print ads		WEB	information tecl	hnology costs (internet,	e-mail)
	NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DES	CODE OR CRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING		(b) NT INCURRED IS PERIOD	(c) AMOUNT PAID THIS PERIOD	(d) OUTSTANDING BALANCE AT CLOSE

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
Voter Newsletter #1355767	LIT Slate Mailer	2,500.00	0.00	0.00	2,500.00
Sherman Oaks, CA 91403					
Xpress Graphics. Inc. Gardena, CA 90248	LIT	7,640.00	0.00	0.00	7,640.00
Xpress Graphics. Inc.	LIT	2,420.99	0.00	0.00	2,420.99
Gardena, CA 90248					
* Payments that are contributions or independent expenditures must all summarized on Schedule D.	so be SUBTOTALS	\$ 12,560.99\$	0.00\$	0.00	12,560.99

Schedule F Summary

- 1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for 0.00
- 2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on 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 \$ 0.00 May be a negative number 0.00