| | | • | · (| મે | 0164-Z coverpage |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------|
| Recipient Committee Campaign Statement Cover Page Government Code Sections 84200-84216.5) | | | RECEIVED OS ANGELES | cou | FORM 460 |
| SEE INSTRUCTIONS ON REVERSE | Statement covers period from04/24/2022 through05/21/2022 | Date of election if applicable: (Month, Day, Year) | 2022 HAY 26 A | H IO: 27 _{ag} | For Official Use Only 019826 C10585 |
| State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee | mplete Parts 1, 2, 3, and 4. nmanly Formed Ballot Measure ommittee) Controlled) Sponsored lso Complete Part 6) rimarily Formed Candidate/ officeholder Committee | 2. Type of Statement: X Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 To Amendment (Explain b | ermination) | Quarterly St Special Odd Supplement Statement | atement I-Year Report al Preelection Attach Form 495 |
| 2 Committee Intermation | D. NUMBER 1382829 2022 | Treasurer(s) NAME OF TREASURER Alma Pleasant MAILING ADDRESS 1 CITY | STATE | ZIP CODE | AREA CODE/PHONE |
| Norwalk CA 9065 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. B CITY STATE ZIP CO OPTIONAL: FAX / E-MAIL ADDRESS | 0 (213)489-4792 OX | Norwalk NAME OF ASSISTANT TREASU David L. Gould MAILING ADDRESS CITY Norwalk OPTIONAL: FAX / E-MAIL ADD | CA RER, IF ANY STATE CA | 90650 ZIP CODE 90650 | AREA CODE/PHONE (213) 489-4792 |
| 4. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of Californi Executed on The state of Californi Executed on Date Executed on Date | | ntained he ir or Assistan e Measure Pr | erein and in the attached t Treasurer oponent or Responsible Officer of | | rue and complete. I certify |
| Executed on | Ву | Signature of Controlling Officeholder, Candidate, Signature of Controlling Officeholder, Candidate, | | | FPPC Form 460 (Jan/2016) |

Recipient Committee Campaign Statement Cover Page — Part 2

| COVER PAGE - PART 2 | | | | | |
|---------------------|---------------|------|----|--|--|
| CALIF | FORNIA DRM | 4 | 60 | | |
| Page _ | 2 | of _ | 11 | | |

| | , , | | · | | | | | | |
|------------------------------------------------------------------------------------------------------------------|----------------|---------------|------------|----|------------------------------------------------------|------------------|-----------------|------------------|---------------------------------------|
| NAME OF OFFICEHOLDER OR CANDIDATE | | | | | NAME OF BALLOT MEASURE | | | | |
| Alma Taylor Pleasant | | | | | | | | | |
| OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND | DISTRICT NUMBE | R IF APPLICAB | LE) | | BALLOT NO. OR LETTER | JURISDICTIO | ON | | SUPPORT |
| Board of Education Compton School Board | d Area E | | | | | | | 10 | OPPOSE ' |
| RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREE | T) CITY | STATE | ZIP | | | | | | |
| | Compton | CA | 00770 | | Identify the controlling of | fficeholder, car | ndidate, or sta | ate measure p | roponent, if any |
| | Compton | CA | 90220 | | NAME OF OFFICEHOLDER, CA | NDIDATE, OR PR | OPONENT | | |
| D-1-4-4 O | 5- 04-4 | | | | | | | | |
| Related Committees Not Included in the not included in the not included in this statement that are controlled in | | | | | OFFICE SOUGHT OR HELD | | | DISTRICT NO. IF | ANY |
| contributions or make expenditures on behalf of y | | marny tormed | to receive | | | | | 5,611,161,116,11 | 7447 |
| COMMITTEE NAME | I.D. NUM | MDED | | | | | | | |
| SOMMITTEL TO WILL | I.D. No. | WIDER | | | , | | | | |
| | 1 | | | _ | | | , | | |
| NAME OF TREASURER | CONTR | OLLED COMMIT | TEE? | 7. | Primarily Formed Car officeholder(s) or candidate | | | | |
| *** | □ Y | ES NO | | | | s) for which an | s commutee is | pinnarny ronne | · |
| COMMITTEE ADDRESS STREET ADDRESS (N | O P.O. BOX) | , | | | NAME OF OFFICEHOLDER OR | CANDIDATE | OFFICE SOU | SHT OR HELD | SUPPORT |
| | | | | | | | 1 | | OPPOSE |
| CITY STATE | ZIP CODE | AREA CO | DE/PHONE | | | <u>`</u> | | | |
| | | | DET HOUSE | | NAME OF OFFICEHOLDER OR | CANDIDATE | OFFICE SOU | JH I OR HELD | , |
| | | | SET TIONE | | NAME OF OFFICEHOLDER OR | CANDIDATE | OFFICE SOU | GHT OR HELD | SUPPORT |
| | lan NIII | MRED | | | NAME OF OFFICEHOLDER OR | CANDIDATE | OFFICE SOU | SHI OR HELD | SUPPORT OPPOSE |
| COMMITTEE NAME | i.D. NU | MBER | | | NAME OF OFFICEHOLDER OR | | | GHT OR HELD | OPPOSE |
| | I.D. NUI | MBER | | | | | | | |
| | | MBER | | | NAME OF OFFICEHOLDER OR | CANDIDATE | OFFICE SOU | GHT OR HELD | OPPOSE SUPPORT OPPOSE |
| COMMITTEE NAME | | OLLED COMMIT | TEE? | | | CANDIDATE | OFFICE SOU | | ☐ OPPOSE ☐ SUPPORT ☐ OPPOSE ☐ SUPPORT |
| COMMITTEE NAME | CONTRI | OLLED COMMIT | TEE? | | NAME OF OFFICEHOLDER OR | CANDIDATE | OFFICE SOU | GHT OR HELD | OPPOSE SUPPORT OPPOSE |
| COMMITTEE NAME NAME OF TREASURER | CONTRI | OLLED COMMIT | TEE? | | NAME OF OFFICEHOLDER OR | CANDIDATE | OFFICE SOU | GHT OR HELD | ☐ OPPOSE ☐ SUPPORT ☐ OPPOSE ☐ SUPPORT |
| COMMITTEE NAME NAME OF TREASURER | CONTRI | OLLED COMMIT | TEE? | | NAME OF OFFICEHOLDER OR | CANDIDATE | OFFICE SOUR | GHT OR HELD | ☐ OPPOSE ☐ SUPPORT ☐ OPPOSE ☐ SUPPORT |

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

| | | ODIVIND UTTATION |
|-----------|-------------------|------------------|
| Statem | ent covers period | CALIFORNIA 460 |
| from | 04/24/2022 | FORM TOO |
| through _ | 05/21/2022 | Page 3 of 11 |
| | | I.D. NUMBER |

1382829

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Elect Alma Pleasant to Compton School Board 2022

| Contributions Received | COlumn A TOTALTHIS PERIOD (FROMATTACHED SCHEDULES) | COLUMN B CALENDAR YEAR TOTAL TODATE | 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 | \$ 4,900.00 | \$ 12,152.00 1,100.00 \$ 13,252.00 0.00 \$ 13,252.00 | 1/1 through 6/30 7/1 to Date 20. Contributions Received \$\$ 21. Expenditures Made \$\$ |
| Expenditures Made 6. Payments Made | \$ 8,438.23 -800.00 0.00 | \$ 9,307.93 0.00 \$ 9,307.93 0.00 0.00 \$ 9,307.93 | 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 | 4,900.00 | To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last | *Amounts in this section may be different from amounts |

8,438.23

3,007.42

If this is a termination statement, Line 16 must be zero. 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ **Cash Equivalents and Outstanding Debts** 18. Cash Equivalents See instructions on reverse

15: Cash Payments Column A, Line 8 above

16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15

19. Outstanding Debts Add Line 2 + Line 9 in Column B above

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).

mounts reported in Column B.

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

| Schedule A Monetary Contributions Received | | | ts may be rounded whole dollars. | Statement cove | | CALIFORNIA 460 | |
|-----------------------------------------------|--------------------------------------------------------------------------------------------------|--------------------------------------|--------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|----------------|-----------------------------------------------------|
| SEE INSTRUCTIO | vs on reverse | | | through _05/21/2 | - | | 4 of11 |
| NAME OF FILER | TO ON NEVEROL | | | | | I.D. NUMBI | ER |
| Elect Alma P | leasant to Compton School Board 2022 | | | | 1 | 1382829 | |
| 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 D CALENDAR YEA (JAN. 1 - DEC. 3 | IR | PER ELECTION TO DATE (IF REQUIRED) |
| 04/27/2022 | Alejandro Alvarez Colton, CA 92508 | ⊠IND □COM □OTH □PTY □SCC | Administrator Compton Unified School District | Received through inter Efundraising Connection 2831 G. St. Suite 200 Sacramento, CA 95816 | mediary: | 0.00 | |
| 04/27/2022 | Orbach Huff & Henderson Llp Los Angeles, CA 90067 | □IND □COM ☑OTH □PTY □SCC | | 2,500.00 Received through inter Efundraising Connectio 2831 G. St. Suite 200 Sacramento, CA 95816 | mediary: | 0.00 | |
| 05/02/2022 | Devalle James Los Angeles, CA 90248 | ⊠IND □COM □OTH □PTY □SCC | Owner Elite Package Solutions | 250.00 Received through inter Efundraising Connectio 2831 G. St. Suite 200 Sacramento, CA 95816 | mediary: ns | 0.00 | |
| 05/03/2022 | Everett's Klean Car Detail Downey, CA 90241 | □IND □COM ☑OTH □PTY □SCC | | 100.00 | 10 | 0.00 | |
| 05/03/2022 | Jeanette Parker Beverly Hills, CA 90210 | IND □COM □OTH □PTY □SCC | Retired None | 1,000.00 | 1,00 | 00.00 | |
| | | | SUBTOTAL | \$ 3,950.00 | | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| Amount re (Include a | A Summary eceived this period – itemized monetary contributions. Il Schedule A subtotals.) | | | | IND-I COM- | (other tha | Committee an PTY or SCC) g., business entity) |
| | etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colu | ımn A, Line 1. | .) TOTAL \$ | 4,900.00 | | | tributor Committee |

Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

| Monetary Contributions Received | | Amounts may to whole d | | Statement cove | 2022 | FORM 460 | | |
|---------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------|------------|------------------------------------------|--|
| | • | | | through 05/21/ | 2022 | Page | 5 of 11 | |
| NAME OF FILER | | | | | | I.D. NUMBI | ₽ | |
| Elect Alma P | leasant to Compton School Board 2022 | | | | | 1382829 | | |
| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, ALSO ENTER LD. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC. | 31) | PER ELECTION TO DATE (IF REQUIRED) | |
| 05/12/2022 | Christopher Calvin Menifee, CA 92585 | IND COM OTH PTY SCC | Home Bdi | Received through inte Efundraising Connecti 2031 G. St. Suite 200 Sacramento, CA 95816 | mediary: | 25.00 | | |
| 05/13/2022 | Backyard Street Rods Compton, CA 90220 | □IND □COM 図OTH □PTY □SCC | | 500.00 Received through inte Efundraising Connecti 2831 G. St. Suite 200 Sacramento, CA 95816 | 1 | 00.00 | | |
| 05/19/2022 | Cliffs Texas Style Burritos Compton, CA 90220 | □IND □COM 図OTH □PTY □SCC | | 150.00 | 1. | 50.00 | | |
| 05/19/2022 | LM5 Group LLC(Carl A. Lee) Sierra Madre, CA 91024 | ☐IND ☐COM 図OTH ☐PTY ☐SCC | | 150.00 | 1 | 50.00 | | |
| | | IND COM OTH PTY SCC | | | | | | |
| | | | SUBTOTAL | \$ 925.00 | | | | |

Amounts may be rounded

*Contributor Codes

IND – Índividual

COM-Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party

SCC - Small Contributor Committee

SCHEDULE B - PART 1 Schedule B – Part 1 Statement covers period Amounts may be rounded CALIFORNIA Loans Received to whole dollars. **FORM** 04/24/2022 05/21/2022 through _ SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Elect Alma Pleasant to Compton School Board 2022 1382829 (a) OUTSTANDING (d) OUTSTANDING IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE AMOUNT CUMULATIVE INTEREST ORIGINAL AMOUNT PAID OCCUPATION AND EMPLOYER BALANCE BAL'ANCE AT OF LENDER RECEIVED THIS PAID THIS AMOUNT OF CONTRIBUTIONS OR FORGIVEN (IF SELF-EMPLOYED, ENTER BEGINNING THIS CLOSE OF THIS (IF COMMITTEE, ALSO ENTER I.D. NUMBER) PERIOD PERIOD LOAN TODATE NAME OF BUSINESS) THIS_PERIOD ' PERIOD PERIOD Satra Zurita for Compton School Board 2017 (ID# CALENDAR YEAR ☐ PAID Long Beach, CA 90802 \$.1.000.00 0.00 \$____0.00 \$ _1,000,00 . 0 00% FORGIVEN PER ELECTION** 02/09/2016 \$P2017 1,500.00 \$_1,000.00 DATE DUE DATE INCURRED T IND IX COM COTH PTY SCC Tana McCoy for Compton City Council 2017 (ID# **CALENDAR YEAR** PAID Long Beach, CA 90802 \$____0.00 \$ ____100_00 0_00% \$ 100.00 \$____0_0 RATE FORGIVEN PER ELECTION ** 08/11/2017 .100.00 \$ _____0.00 DATE INCURRED T□ IND IN COM □ OTH □ PTY □ SCC DATE DUE CALENDAR YEAR ☐ PAID ☐ FORGIVEN PER ELECTION** DATE DUE DATE INCURRED T□ IND □ COM □ OTH □ PTY □ SCC SUBTOTALS \$ 0.00\$ 0.00\$ 1,100.00\$ 0.00 (Enter (e) on Schedule B Summary Schedule E, Line 3) 0.00 Loans received this period...... (Total Column (b) plus unitemized loans of less than \$100.) †Contributor Codes IND-Individual 2. Loans paid or forgiven this period\$ 0.00 COM - Recipient Committee (Total Column (c) plus loans under \$100 paid or forgiven.) (other than PTY or SCC) OTH - Other (e.g., business entity) (Include loans paid by a third party that are also itemized on Schedule A.) PTY - Political Party

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

Enter the net here and on the Summary Page, Column A, Line 2.

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

SCC - Small Contributor Committee

The state of the state of the state of

| Schedule E Payments Made | Amounts may be to whole do | | ı | St | tatement covers period | CALIFOI FORI | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|-------------|------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-------------|
| SEE INSTRUCTIONS ON REVERSE | | | | thro | ough05/21/2022 | Page7 | of11 |
| NAME OF FILER Elect Alma Pleasant to Compton School Board 2022 | | | | | | I.D. NUMB 1382829 | · |
| CODES: If one of the following codes accurately describe campaign paraphemalia/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 | MBR member com MTG meetings and OFC office expen PET petition circul PHO phone banks POL polling and s POS postage, deli | munications d appearance ses ating urvey reseavery and m | ces | RAD RFD SAL TEL TRC TRS TSF VOT | radio airtime and product returned contributions campaign workers' salar t.v. or cable airtime and candidate travel, lodging, staff/spouse travel, lodgi transfer between commit | tion costs nes production costs , and meals ing, and meals ttees of the same | , |
| NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | , | CODE | OR | DESCRIPTIO | N OF PAYMENT | | AMOUNT PAID |
| Efundraising Connections Sacramento, CA 95816 | | CMP | Credit Card | Processing | Fee | | 185.88 |
| Efundraising Connections Sacramento, CA 95816 | | CMP | Credit Card | Processing | Fee | | 8.88 |
| Efundraising Connections Sacramento, CA 95816 | | CMP | Credit Card | Processing | Fee | | 120.00 |
| * Payments that are contributions or independent expenditures | must also be summ | arized on | Schedule D. | | | SUBTOTAL\$ | 314.76 |
| Schedule E Summary | | | | | | | ı |

1. Itemized payments made this period. (Include all Schedule E subtotals.)

FPPC Form 460 (Jan/2016) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772) www.fppc.ca.gov

| Schedule E |
|----------------------|
| (Continuation Sheet) |
| Payments Made |

Amounts may be rounded to whole dollars.

| | SCHEDULE E (CONT.) |
|-------------------------|--------------------|
| Statement covers period | CALIFORNIA 460 |
| from04/24/2022 | FORM TOO |
| through 05/21/2022 | Page 8 of 11 |
| | I.D. NUMBER |

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 MTG meetings and appearances CNS campaign consultants RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries petition circulating CVC civic donations PET TEL t.v. or cable airtime and production costs candidate filing/ballot fees phone banks candidate travel, lodging, and meals FIL PHO FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services transfer between committees of the same candidate/sponsor **IND** TSF professional services (legal, accounting) LEG legal defense VOT voter registration 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 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|----------------------------|-------------|
| Gould & Orellana, LLC | PRO | | 300.00 |
| Norwalk, CA 90650 | | | |
| ~ | | | |
| Tana McCoy | FIL | | 800.00 |
| Compton, CA 90220 | | | |
| Efundraising Connections | СМР | Credit Card Processing Fee | 1.63 |
| Sacramento, CA 95816 | | | |
| Efundraising Connections | CMP | Credit Card Processing Fee | 11.79 |
| Sacramento, CA 95816 | | | |
| Efundraising Connections | CMP | Credit Card Processing Fee | 6.13 |
| Sacramento, CA 95816 | | | |
| | | | |
| * manual at the state of the st | | _ | CUDTOTAL C |

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

SUBTOTAL \$

| Schedule E | |
|---------------|-----------|
| (Continuation | on Sheet) |
| Payments N | lade |

Amounts may be rounded to whole dollars.

| ` . | | SCHEDULE E (CON). |
|---------|--------------------|-------------------|
| State | ment covers period | CALIFORNIA 160 |
| from | 04/24/2022 | FORM 400 |
| through | 05/21/2022 | Page 9 of 11 |
| | | I.D. NUMBER |

1382829

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Elect Alma Pleasant to Compton School Board 2022

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

CMP campaign paraphemalia/misc. member communications RAD radio airtime and production costs CNS campaign consultants meetings and appearances RFD returned contributions contribution (explain nonmonetary)* office expenses OFC СТВ SAL campaign workers' salaries petition circulating CVC civic donations PET t.v. or cable airtime and production costs ΉEL

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 me

FND fundraising events

IND independent expenditure supporting/opposing others (explain)*

LEG legal defense

POL polling and survey research

POS polling and survey research

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

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 Efundraising Connections CMP Credit Card Processing Fee 23.00 Sacramento, CA 95816 Digital Impact CNS 1,500.00 San Diego, CA 92163 LIT Campaign Mailer Futura Color, Inc. 5,414.91 Poway, CA 92064 Tana McCoy OFC 66.05 Compton, CA 90220

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

SUBTOTAL \$

7,003.96

| | | | | | SCHEDULE | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|-----------------------------------------------|-----------------------------------------------------------------------------------------------------------|-----------------------------------|--------------------------|--|--|--|
| Schedule F Accrued Expenses (Unpaid Bills) | Amounts may be round to whole dollars. | led | Statement cove | F0 | ORNIA 460 | | | |
| , to of all a | to whole donard. | | from04/24/ | 2022 | | | | |
| SEE INSTRUCTIONS ON REVERSE | | | through 05/21/ | 2022 Page_ | 10 of 11 | | | |
| NAME OF FILER | | • | | I.D. NUM | BER | | | |
| Elect Alma Pleasant to Compton School Board 2022 | | | | 13828 | 29 | | | |
| CODES: If one of the following codes accurately describe | es the payment, you may | enter the code. Ot | herwise, describe t | he payment. | | | | |
| CMP campaign paraphernalia/misc. | MBR member communication | | RAD radio airtime a | | | | | |
| CNS campaign consultants | MTG meetings and appeara | nces | RFD returned contri | | | | | |
| CTB contribution (explain nonmonetary)* | OFC office expenses | | SAL campaign wor | | | | | |
| CVC civic donations | PET petition circulating | | | time and production costs | 3 | | | |
| FIL candidate filing/ballot fees FND fundraising events | PHO phone banks POL polling and survey res | earch . | | el, lodging, and meals | | | | |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and | | TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor | | | | | |
| LEG legal defense | PRO professional services | | VOT voter registration | | | | | |
| LIT campaign literature and mailings | PRT print ads | | WEB information technology costs (internet, e-mail) | | | | | |
| | 1 . | (a) | (b) | (c) | (d) | | | |
| NAME AND ADDRESS OF CREDITOR | CODE OR - | OUTSTANDING | AMOUNT INCURRED | AMOUNT PAID | OUTSTANDING | | | |
| (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | DESCRIPTION OF PAYMENT | BALANCE BEGINNING OF THIS PERIOD | THIS PERIOD | THIS PERIOD (ALSO REPORT ON E) | OF THIS PERIOD | | | |
| Tana McCoy | FIL | 800.00 | 0.00 | 800.00 | 0.0 | | | |
| Compton, CA 90220 | | | | | | | | |
| Compcon, CA 90220 | | | | , | | | | |
| | - | | | | | | | |
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| | 1 | | |] | , | | | |
| | | | | [` | | | | |
| * Payments that are contributions or independent expenditures must also be | SUBTOTALS | \$ 800.00 | 0.00 | \$ 800.00\$ | 0.0 | | | |
| summarized on Schedule D. | | | | | | | | |
| 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 | ubtotals for \$100.) | incl | JRRED TOTALS \$ _ | 0.00 | | | |
| Total accrued expenses paid this period. (Include all Sch accrued expenses of \$100 or more, plus total unitemized | edule F, Column (c) subto payments on accrued exp | otals for payments or benses under \$100.) | ı | PAID TOTALS \$ _ | 800.00 | | | |
| 3. Net change this period. (Subtract Line 2 from Line 1. En | ter the difference here an | d | | NET A | -900.00 | | | |
| on the Summary Page, Column A, Line 9.) | | | | NET \$ _ | May be a negative number | | | |
| | | | | | | | | |

| Schedule G | |
|-----------------------------------|-----------|
| Payments Made by an Agent or In | dependent |
| Contractor (on Behalf of This Con | |

Amounts may be rounded to whole dollars.

| | | | OI ILDULL O |
|-------------|---------------|------------|-------------|
| | covers period | CALIFORNIA | 160 |
| from 04/ | 24/2022 | FORM | 400 |
| | · ~ | 10 10 10 | |
| through 05/ | 21/2022 | Page11 of | 11 _ |
| | | | |

I.D. NUMBER

1382829

SCHEDULEG

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Elect Alma Pleasant to Compton School Board 2022

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Futura Color, Inc.

| _ | | | | | | | | | | | | | | | |
|------|--------|----------|-----------------|------------------|----------|---------------|-------------|-------|--------------------------|--------------------|--------|--------|---------------------------------------------|-------------|--------|
| 7 | OD | ES: | If one of | the following | codes | accurately | describes 1 | the p | payment, you may | enter the code | e. Oth | erwise | e, describe the payment. | | |
| a | WP (| campa | ign paraphei | nalia/misc. | | | M | IBR r | member communication | S | : | RAD | radio airtime and production costs | | |
| C | NS d | campa | ign consulta | nts | | | M | TTG 1 | meetings and appearan | nces | | RFD | returned contributions | | |
| Ć | TB d | contrib | oution (explai | n nonmonetary) | • | | 0 | FC (| office expenses | | | SAL | campaign workers' salaries | | |
| C | VC d | civic d | lonations | | , ; | | . Р | ET p | petition circulating | | | TEL | t.v. or cable airtime and production costs | | |
| FI | L | candid | late filing/bal | ot fees | * | | · P | HO I | phone banks | | | TRC | candidate travel, lodging, and meals | и | _ |
| F | ND f | fundra | ising events | | | - 14 J | , P | OL I | polling and survey rese | earch | · · · | TRS | staff/spouse travel, lodging, and meals | | |
| ··IN | D - i | indepe | endent exper | diture supportin | g/opposi | ng others (ex | plain)* P | os i | postage, delivery and r | messenger service | s | TSF | transfer between committees of the same | candidate/s | ponsor |
| ·Ú | EG . I | legal of | defense | | , | 4'* | · · · P | RO I | professional services (I | legal, accounting) | | VOT | voter registration | | |
| LI | т (| campa | aian literature | and mailings · | | | P | RT i | print ads | | | WEB | information technology costs (internet, e-m | ail) | |

^{*} 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 |
|------------------------------------------------------------------------------|-----------------------------------------|-------------|
| US Postal Service | POS Mailer Postage Costs | 983.0 |
| Los Angeles, CA 90052 | | |
| | | |
| ÚS Postal Service | POS Mailer Postage Costs | 983.0 |
| Los Angeles, CA 90052 | | |
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* 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.

Attach additional information on appropriately labeled continuation sheets.

1,966.06

TOTAL* \$