NKM O218

## Major Donor and Independent Expenditure Committee

| ndependent Expenditure Commit<br>Campaign Statement   | tee  | RECEIVED BY CALIFORNIA 461  |  |  |  |
|---|--|---|--|--|--|
|   | Statement covers period  | Date of election if applicable: 2023 FEB - I PM 4: 14 Page of of For Official Use Only  |  |  |  |
| EE INSTRUCTIONS ON REVERSE  | through December 31st 2022   | CAMPAIGN FINANCE M 19655  |  |  |  |
| Alatadena RESPONSIBLE OFFICER (If filer is other than an individual) Mark-Anthony Johnson  2. Nature and Interests of Filer (Complete OF EMPLOYER OR, IF SELF-EMPLOYED, THE NAME, NAME OF EMPLOYER/BUSINESS  ADDRESS OF EMPLOYER/BUSINESS | IE, ADDRESS, AND BUSINESS INTERESTS ADDRESS, AND NATURE OF THE BUSINESS BUSINESS INTERESTS | the calendar year, enter zero.)   |  |  |  |
| A FILER THAT IS A BUSINESS ENTITY MUST DESCRIBE ENGAGED  A FILER THAT IS AN ASSOCIATION MUST PROVIDE A STATE OF THE GROUP OR Grassroots lobbying and voter education  | SPECIFIC DESCRIPTION OF ITS INTERESTS  | I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information |  |  |  |
| Amendment (Explain):  |  | FPPC Advice: advice@fnpc.ca.gov (866/275-3772)  |  |  |  |

## **Major Donor and** Independent Expenditure Committee

Amounts may be rounded to whole dollars.

Statement covers period CALIFORNIA Z January 1st, 2022

| Campaign Statement          | from                       | FORW    |
|-----------------------------|----------------------------|---------|
| SEE INSTRUCTIONS ON REVERSE | through December 31st, 202 | Page of |
| NAME OF FILER               |                            |         |
| Mark-Anthony Johnson        |                            |         |

## 5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made (If more space is needed, use additional copies of this page for continuation sheets.)

| DATE    | NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE<br>OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)             | TYPE OF PAYMENT  | DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN) | CANDIDATE AND OFFICE,<br>MEASURE AND JURISDICTION,<br>OR COMMITTEE                            | AMOUNT THIS PERIOD | CUMULATIVE AMOUNT<br>RELATED TO THIS<br>CANDIDATE, MEASURE,<br>OR COMMITTEE |
|---------|--|--|--|---|--------------------|---|
| 11/4/22 | Yes on Measure A for Sheriff Accountability, sponsored by Civil and Human Rights Organizations Oakland, CA 94607 | Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure |  | Los Angeles County Measure A Removal of Sheriff for Cause, Los Angeles County  Support Oppose | 15,000.00          | 15,000.00   |
|         |  | Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure |  | ☐ Support ☐ Oppose  |                    |   |
|         |  | Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure |  | ☐ Support ☐ Oppose  |                    |   |
|         |  | Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure |  | ☐ Support ☐ Oppose  |                    |   |
|         |  | Experiordie  |  | SUBTOTAL \$   | 15,000.00          |   |