Recipient Committee Campaign Statement Cover Page Government Code Sections 84206-84216.5) Statement covers period				Date Stamp	/27/2	COVER PAG	
2022 J. SEE INSTRUCTIONS ON REVERSE CAM	AN 31 PH 3	from	07/01/2021 gh12/31/2021	Date of election if applicable (Month, Day, Year)	2022 JAN 31 F	INANU Page	of For Official Use Only
1. Type of Recipient Committee  Officeholder, Candidate Controlled State Candidate Election Common Recall (Also Complete Part 5)  General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee	e: All Committees I Committee [ nittee	Primarily Complete Committe Contro Spon: (Also Complete Primarily	Formed Ballot Measure  pelolled sored  phe Part 6)  Formed Candidate/ der Committee	2. Type of Statement:  Preelection Statemen  Semi-annual Statemen  Termination Statemen  (Also file a Form 410  Amendment (Explain	nt nt Termination)	Quarterty Stat Special Odd- Supplemental Statement - A	Year Report
3. Committee Information		I.D. NUMBI 810614	ER	Treasurer(s)			
Los Angeles County Professi Independent Expenditure Com		icers' As	sociation	Andreas C. Rockas MAILING ADDRESS CITY	STATE	ZIP CODE	AREA CODE/PHONE
				Sacramento	CA	95814	(916)556-177
CITY	(A)	P CODE	AREA CODE/PHONE	NAME OF ASSISTANT TREAS	URER, IF ANY		
Sacramento MAILING ADDRESS (IF DIFFERENT) NO.		95814 O. BOX	(916) 556-1776	MAILING ADDRESS	10	over 111 nonnovern	
CITY	STATE ZI	P CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS fppc@rockaslaw.com				OPTIONAL: FAX / E-MAIL AD	DRESS		
4. Verification I have used all reasonable diligence in under penalty of perjury under the laws  Executed on	of the State of Cali		By	Signature of Treasurer or Assistation Controlling Officeholder, Candidate, State Measure Signature of Controlling Officeholder, Candidates	int Treasurer Proponent or Responsible Officer	_	and complete. I certify
Executed on			Ву	Signature of Controlling Officeholder, Candidate	State Measure Proceed		
Dete				orgination of original discarding ( ) and date			PPC Form 460 (Jan/20

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Recipient Committee Campaign Statement Cover Page — Part 2

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		200	old San Line	
Page _	2	of_	11	_

		Primarily Formed Bal	iot weasure	Committee	•		
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE				
OFFICE SOUGHT OR HELD (INCLUDE LOCATION A	AND DISTRICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICT	ION		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND ST	REET) CITY STATE ZIP		Identify the controlling of	fficeholder, ca	andidate, or st	ate measure	proponent, if a
			NAME OF OFFICEHOLDER, CA	ANDIDATE, OR P	ROPONENT		
Related Committees Not Included in not included in this statement that are control contributions or make expenditures on behalf	led by you or are primarily formed to receive		OFFICE SOUGHT OR HELD			DISTRICT NO. I	F ANY
COMMITTEE NAME	I.D. NUMBER					17.00	
NAME OF TREASURER		7.	Primarily Formed Car	ndidate/Offi	ceholder Co	mmittee Li	st names of
	CONTROLLED COMMITTEE?		officeholder(s) or candidate		is committee is		
COMMITTEE ADDRESS STREET ADDRESS	YES NO		officeholder(s) or candidate	(s) for which th			ed.
	YES NO			(s) for which th	OFFICE SOU	primarily form	SUPPOR
CITY STATE	YES NO		NAME OF OFFICEHOLDER OR	(s) for which the CANDIDATE	OFFICE SOU	GHT OR HELD	
CITY STATE  COMMITTEE NAME	YES NO S (NO P.O. BOX)  ZIP CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE  CANDIDATE  CANDIDATE  CANDIDATE	OFFICE SOU	GHT OR HELD GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
	I.D. NUMBER  CONTROLLED COMMITTEE?  YES NO  NO  NO  NO  NO  NO  NO  NO  NO  NO		NAME OF OFFICEHOLDER OR  NAME OF OFFICEHOLDER OR	CANDIDATE  CANDIDATE  CANDIDATE  CANDIDATE	OFFICE SOU	GHT OR HELD  GHT OR HELD  GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE

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Contributions Received	(FRO	Column A TOTAL THIS PERIOD MATTACHED 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	\$ _	163,066.69	\$	334,559.48	1/1 through 6/30 7/1 to Date
2. Loans Received Schedule B. Line 3			24	0.00	A STATE OF THE STA
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2			334,559.48	20. Contributions Received \$\$	
4. Nonmonetary Contributions Schedule C, Line 3	_	0.00	39	0.00	21 Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	s _	163,066.69	s	334,559.48	Made \$ \$
Expenditures Made					Expenditure Limit Summary for State
6. Payments Made Schedule E. Line 4	s	8,500.00	S	30,015.00	Candidates
7. Loans Made Schedule H, Line 3	-	0.00		0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	s _	8,500.00	S	30,015.00	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills) Schedule F. Line 3		0.00		1,000.00	Date of Election Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3	_	6.00		0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	s _	8,500.00	\$	31,015.00	\$
Current Cash Statement					\$
12. Beginning Cash Balance Previous Summary Page. Line 16	s	463,720.79	To	calculate Column B. add	1
13. Cash Receipts Column A Line 3 above	_	163,066.69		ounts in Column A to the responding amounts	
14. Miscellaneous Increases to Cash Schedule I. Line 4	_	0.00	fron	n 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	_	8,500.00		ort. Some amounts in umn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	s	618,287,48	figu	res that should be	
If this is a termination statement, Line 16 must be zero.			per	tracted from previous od amounts. If this is	
17. LOAN GUARANTEES RECEIVED Schedule B. Part 2	\$_	0.00	for	first report being filed this calendar year, only y over the amounts	
Cash Equivalents and Outstanding Debts			from any	n Lines 2, 7, and 9 (if	
18. Cash Equivalents See instructions on reverse	\$	0.00			
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	1,000.00			
			L		FPPC Form 460 (Jan/2

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

Schedule A Monetary Contributions Received			s may be rounded whole dollars.	Statement cover	SCHEDUL	
SEE INSTRUCTIO	INS ON REVERSE			through _12/31/2	021	Page of11
NAME OF FILER					I.	D. NUMBER
Los Angeles	County Professional Peace Officers' Association	Independent 1	Expenditure Committee		8	310614
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 DA CALENDAR YEAR (JAN. 1 - DEC. 31)	R TO DATE
07/06/2021 12/29/2021	MARK ALMONTE San Dimas, CA 91773	□IND □COM □OTH □PTY □SCC	LIEUTENANT County of Los Angeles	Received through inter Los Angeles County Pro Officers Association San Dimas, CA 91773	240 mediary: fossional Peace	0.00
07/19/2021 12/13/2021	RAYMOND ARRINGTON San Dimas, CA 91773	⊠IND □COM □OTH □PTY □SCC	Retiree County of Los Angeles	120.00 Received through inter Los Angeles County Pro Officers Association San Dimae, CA 91773		.00
07/19/2021 12/13/2021	NICHOLAS BERKUTA III San Dimas, CA 91773	MIND COM OTH PTY	Retiree County of Los Angeles	90.00 Received through inter Los Angeles County Pro Officers Association San Dimas, CA 91773		0.00
07/19/2021 12/13/2021	JENNY BETHUNE San Dimas, CA 91773	☑IND □COM □OTH □PTY □SCC	Retiree County of Los Angeles	90.00 Received through inter Los Angeles County Pro Officers Association San Dimas, CA 91773		0.00
07/19/2021 12/13/2021	ROBERT BRAMAN San Dimas, CA 91773	⊠IND □COM □OTH □PTY □SCC	Retiree County of Los Angeles	120.00 Received through inter Los Angeles County Pro Officers Association San Dimas, CA 91773	100.00	.00
			SUBTOTAL	\$ 550.00		
1. Amount re (Include al 2. Amount re	A Summary seeived this period – itemized monetary contributions. Il Schedule A subtotals.)				IND – Ind COM – R ( OTH – C PTY – Pc	utor Codes dividual Recipient Committee other than PTY or SCC) Other (e.g., business entity) olitical Party mall Contributor Committee

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www.fppc.ca.gov

Amounts may be rounded

SCHEDULE A (CONT.)

violiciary	Contributions Received	to whole	dollars.	from07/01/	/2021	Page 5 _ of 11		
IAME OF FILER					1	.D. NUMBE	R	
os Angeles (	County Professional Peace Officers' Association I	ndependent E	xpenditure Committee			310614		
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 DO CALENDAR YEA (JAN, 1 - DEC. 3)	R	PER ELECTION TO DATE (IF REQUIRED)	
07/06/2021 12/29/2021	RONALD CABALLERO San Dimas, CA 91773	IND  COM  OTH  PTY  SCC	SECURITY OFFICER, SHERIFF 13 County of Los Angeles		240 mediary: pressional Peace	0.00		
07/19/2021 12/13/2021	GILBERT CARRILLO San Dimas, CA 91773	□ IND □ COM □ OTH □ PTY □ SCC	Retiree County of Los Angeles	Received through intermediary: Los Angeles County Professional Peace Officers Association San Dimas, CA 91773				
07/19/2021 12/13/2021	DOUGLAS DOWNS San Dimas, CA 91773			120.00 Received through inte Los Angeles County Pro Officers Association San Dimas, CA 91773	e mediary:			
07/06/2021 12/29/2021	HAROLD FRAYER San Dimas, CA 91773	☑IND □COM □OTH □PTY □SCC	SERGEANT County of Los Angeles	325.00 Received through inte Los Angeles County Profficers Association San Dimas, CA 91773	mediaty:	.00		
07/06/2021 Michael Jones 12/29/2021 San Dimas, CA 91773		IND COM OTH PTY	CUSTODY ASSISTANT County of Los Angeles	52.50 Feceived through inte Los Angeles County Pro Officers Association San Dimas, CA 91773	n intermediary: unty Professional Peace ation			

\*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 may be rounded to whole dollars.

	SCHEDL	JLE A	(CONT.)
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Statement covers period

		to willow		from 07/01,	/2021	
				through		
NAME OF FILER					I.D. N	IUMBER
Los Angeles (	County Professional Peace Officers' Association I	ndependent E	xpenditure Committee		810	514
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)
07/06/2021 12/29/2021	PATRICK JORDAN San Dimas, CA 91773	⊠IND □COM □OTH □PTY □SCC	COMMANDER County of Los Angeles	Received through intermediary: Los Angeles County Prefessional Peace Officers Association San Dimas, CA 91773  120.00  Received through intermediary: Los Angeles County Prefessional Peace Officers Association San Dimas, CA 91773		
07/19/2021 12/13/2021	CLYDE KING San Dimas, CA 91773	⊠IND □COM □OTH □PTY □SCC	Retiree County of Los Angeles			
07/06/2021 12/29/2021	EDWARD MACIAS San Dimas, CA 91773	⊠IND □COM □OTH □PTY □SCC	LAW ENFORCEMENT TECHNICIAN County of Los Angeles	65.00 Received through inte Los Angeles County Pr Officers Association San Dimas, CA 91773	mediary:	
07/19/2021 12/13/2021	LAWRENCE MARTINDALE San Dimas, CA 91773	⊠IND □COM □OTH □PTY □SCC	Retiree County of Los Angeles	120.00 24		
07/19/2021 12/13/2021	BRIAN MORIGUCHI San Dímas, CA 91773	⊠IND □COM □OTH □PTY □SCC	Retiree County of Los Angeles	120.00 Received through inte Los Angeles County Pr Officers Association San Dimas, CA 91773	mediary:	
			SUBTOTALS	575.00		

\*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

Amounts may be rounded

SCHEDULE A (CONT.)

nonetal y	Contributions Received	to whole dollars.			/2021 Pa	age7 of11_
IAME OF FILER			TION IN THE RESIDENCE AND ADDRESS OF THE ADDRESS OF THE RESIDENCE AND ADDRESS OF THE ADDRESS OF THE ADD		1.0	D. NUMBER
os Angeles (	County Professional Peace Officers' Association I	ndependent E	xpenditure Committee		8:	10614
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 DA CALENDAR YEAR (JAN. 1 - DEC. 31)	TO DATE
07/19/2021 12/13/2021	PAUL MYRON San Dimas, CA 91773	☑IND □COM □OTH □PTY □SCC	Retiree County of Los Angeles	240.00 Received through inte Los Angeles County Pro Officers Association	480. mediary: plessional Peace	00
07/19/2021 12/13/2021	RICHARD PENA San Dimas, CA 91773	⊠IND □COM □OTH □PTY □SCC	Retiree County of Los Angeles	Received through inte Los Angeles County Pro Officers Association San Dimas, CA 91773	240. Tmediary: Dessional Peace	00
07/19/2021 12/13/2021	ROBERT PRYOR San Dimas, CA 91773	□ IND □ COM □ OTH □ PTY □ SCC	Retiree County of Los Angeles	Received through inte Los Angeles County Proficers Association San Dimas, CA 91773	240. mediary: fessional Peace	00
07/19/2021 12/13/2021	PETER RAUGH San Dimas, CA 91773	IND COM OTH PTY	Retiree County of Los Angeles	120.00 Received through inte Los Angeles County Pro Officers Association San Dimas, CA 91773	240. mediary: sfessional Peace	00
07/06/2021	TAB RHODES San Dimas, CA 91773	⊠IND □COM	LIEUTENANT County of Los Angeles	97.50	180.	00

□отн PTY □scc

*Contribut	or Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

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

San Dimas, CA 91773

PTY - Political Party

SCC - Small Contributor Committee

Received through intermediary: Los Angeles County Professional Peace Officers Association

San Dimas, CA 91773

SUBTOTAL\$

Statement covers period

Amounts may be rounded

SCHEDULE A (CONT.)

Statement covers period

		to whole o	oonars.	from07/01,	/2021		
				through 12/31	/2021 P	age8	of11
NAME OF FILER					1	.D. NUMBER	3
Los Angeles (	County Professional Peace Officers' Association I	ndependent E	xpenditure Committee		8	310614	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR ()FCOMMITTEE, 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 DE CALENDAR YEA (JAN. 1 - DEC. 3	R	PER ELECTION TO DATE (IF REQUIRED)
07/19/2021 12/13/2021	GLEN TERRY San Dimas, CA 91773	⊠IND □COM □OTH □PTY □SCC	Retiree County of Los Angeles	Received through into Los Angeles County Pr Officers Association San Dimas, CA 91773		0.00	
07/19/2021 12/13/2021	HARRY TOLUCHANIAN San Dimas, CA 91773	⊠IND □COM □OTH □PTY □SCC	Retiree County of Los Angeles	Received through inte Los Angeles County Pr Officers Association San Dimas, CA 91773		0.00	
07/19/2021 12/13/2021	OCEAL VICTORY San Dimas, CA 91773	XIND COM OTH PTY	Retiree County of Los Angeles	Received through inte Los Angeles County Pr Officers Association San Dimas, CA 91773		0.00	
		DIND COM OTH PTY SCC					
		OTH SCC					
			SUBTOTAL	\$ 300.00	10 M . 1	1 - 1	the the water

\*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	
Schedule E Payments Made	1. 이 이번 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	to whole dollars.  Statement covers period from 07/01/2021				2				
SEE INSTRUCTIONS ON REVERSE				th	rough .	12/31/2	021	Page	9 of <u>11</u>	
VAME OF FILER			walling with the control of the cont					I.D. NUM	MBER	•
Los Angeles County Professional Peace Officers' Associat	ion Independent	Expenditu	re Committee					810614	1	
CODES: If one of the following codes accurately describes	the payment, yo	u may en	ter the code. C	Otherwise,	descri	be the pa	yment.			
campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events ND independent expenditure supporting/opposing others (explain)* LEG legal defense LT campaign literature and mailings	MTG meetings and appearances RFI OFC office expenses SA PET petition circulating TEI PHO phone banks TR0 POL polling and survey research TR: POS postage, delivery and messenger services TSI PRO professional services (legal, accounting) VO				camp t.v. o cand staff/ trans	ned contribu- paign worke or cable airtinidate travel, spouse travel fer between registration	rs' salaries ne and prod lodging, and el. lodging, a committees	uction costs meals and meals of the sar	me candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTI	ON OF P	AYMENT			AMOUNT PAID	
BFBA, LLP		PRO							2,200.3	
Sacramento, CA 95825										
Law Office of Andreas C. Rockas		PRO	+						2,000.3	
Sacramento, CA 95814										
Law Office of Andreas C. Rockas		OFC	1 3337						300.9	
Sacramento, CA 95614										
Payments that are contributions or independent expenditures m	iust also be summ	arized on S	Schedule D.				SUI	BTOTAL\$	3,500.0	
Schedule E Summary										
1. Itemized payments made this period. (Include all Schedule B	E subtotals.)							\$	8,500.00	
2. Unitemized payments made this period of under \$100								\$	0.00	

#### Schedule E (Continuation Sheet) **Payments Made**

Amounts may be rounded to whole dollars.

SCHEDUL	EE(	(CONT.)
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Statement covers period	
from07/01/2021	
through 12/31/2021	Page 10 of 11
	I.D. NUMBER
	810614

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Los Angeles County Professional Peace Officers' Association Independent Expenditure Committee

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 t.v. or cable airtime and production costs PET TEL. FIL candidate filing/ballot fees PHO phone banks candidate travel, lodging, and meals TRC

FND fundraising events polling and survey research TRS staff/spouse travel, lodging, and meals IND independent expenditure supporting/opposing others (explain)\* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor

PRO professional services (legal, accounting) VOT voter registration LEG legal defense

PRT WEB information technology costs (internet, e-mail) LIT campaign literature and mailings print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Law Office of Andreas C. Rockas	PRO		1,000.00
Sacramento, CA 95814			
Law Office of Andreas C. Rockas	PRO		1,000.00
Sacramento, CA 95814			
Law Office of Andreas C. Rockas	PRO		1,000.00
Sacramento, CA 95814			
Law Office of Andreas C. Rockas	PRO		1,000.00
Sacramento, CA 95814			
Law Office of Andreas C. Rockas	PRO		1,000.00
Sacramento, CA 95814			
* Payments that are contributions or independent expenditures must also be s	Juneanizad on Schodule D	el	BTOTAL \$ 5,000.00

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

Schedule F Accrued Expenses (Unpaid Bills)	Amounts may be rounded to whole dollars.		Statement cove	2021	ge <u>11</u> of <u>11</u>
SEEINSTRUCTIONS ON REVERSE NAME OF FILER				10,	IUMBER
				1.5.1	TOMBER
Los Angeles County Professional Peace Officers' Associat	ion Independent Expendi	ture Committee		810	614
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 LIT campaign literature and mailings	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads		erwise, 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 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
Law Office of Andreas C. Rockas	PRO	1,000.00	0.00	1,000.	0.0
Sacramento, CA 95614					
Law Office of Andreas C. Rockas	PRO	0.00	1,000.00	0.	00 1,000.0
Sacramento, CA 95814					
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$ 1,000.00\$	1,000.00	1,000.	2,000.00
Schedule F Summary					
Total accrued expenses incurred this period. (Include all Saccrued expenses of \$100 or more, plus total unitemized 2. Total accrued expenses paid this period. (Include all School)	accrued expenses under	\$100.)		RRED TOTALS	1,000.00
accrued expenses of \$100 or more, plus total unitemized				PAID TOTALS	1,000.00
Net change this period. (Subtract Line 2 from Line 1. En on the Summary Page, Column A, Line 9.)				NET S	0.00 May be a negative number