

Major Donor and Independent Expenditure Committee

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Independent Expenditure Com Campaign Statement	nmittee	Date Stamp CALIFORNIA 461
	Statement covers period	Date of election if applicable: ZIZI JAN 29 PH 3: 3 Page 1 of 2
	from 1/1/2023	(month, bay, rear)
SEE INSTRUCTIONS ON REVERSE	through 12/31/2023	For Official Use Only MINOR MINOR MINOR
1. Name and Address of Filer		3. Summary
NAME OF FILER		(Amounts may be rounded to whole dollars.)
The People Conccern		Expenditures and contributions (including loans) of \$100 or more 15,000
RESIDENTIAL OR MAILING ADDRESS	(NO. AND STREET)	made this period. (Part 5.)
CITY	STATE ZIP CODE	Unitemized expenditures and contributions (including loans) under
Los Angeles	CA 90018	\$100 made this period\$
RESPONSIBLE OFFICER (If filer is other than an individual)	AREA CODE/DAYTIME PHONE	3. Total expenditures and contributions made this period. (Add Lines 1 + 2.)SUBTOTAL \$
John Maceri	323-334-9000	Total expenditures and contributions
2. Nature and Interests of Filer (C A FILER WHO IS AN INDIVIDUAL MUST LIST THOSE EMPLOYER OR, IF SELF-EMPLOYED, THE NAME OF EMPLOYER/BUSINESS	Complete each applicable section.) HE NAME, ADDRESS, AND BUSINESS INTERESTS NAME, ADDRESS, AND NATURE OF THE BUSINES BUSINESS INTERESTS	the calendar year, enter zero.)\$
ADDRESS OF EMPLOYER/BUSINESS		5. Total expenditures and contributions (including loans) made since January 1 of the current calendar year. (Add Lines 3 + 4.)
A FILER THAT IS A BUSINESS ENTITY MUST DI	ESCRIBE THE BUSINESS ACTIVITY IN WHICH IT I	4. Verification
A FILER THAT IS AN ASSOCIATION MUST PROV	VIDE A SPECIFIC DESCRIPTION OF ITS INTEREST	the laws of the State of California ti
A FILER THAT IS NOT AN INDIVIDUAL, BUSINES COMMON ECONOMIC INTEREST OF THE GRO Nonprofit, Homeless Services	S ENTITY, OR ASSOCIATION MUST DESCRIBE THI UP OR ENTITY	Executed on 1-24-24 By. DATE DATE DR INDIVIDUAL
Amendment (Explain):		FPPC Form 461 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

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Major Donor and Independent Expenditure Committee Campaign Statement

Amounts may be rounded to whole dollars.

Statement covers period from 1/1/2023	CALIFORNIA 461
through 12/31/2023	Page of

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SEE INSTRUCTIONS ON REVERSE	through 12/31/2023	Page of
NAME OF FILER		
The People Concern		

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 OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATED TO THIS CANDIDATE, MEASURE OR COMMITTEE
	12/14/2023	Experts United for Homelessness & Housing Solutions Los Angeles, CA 90017	Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure	Rental income from leases in Headquarters Office.	Experts United for Homelessness & Housing Solutions Support Oppose	\$15,000	\$15,000
			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		
SUBTOTAL \$ 15,000							

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