- 6-	Recipient Committee Campaign Statement Cover Page		RECE	ate Stanip CA	COVER PAGE ALIFORNIA 460 FORM
	(Government Code Sections 84200-84216.5)  SEE INSTRUCTIONS ON REVERSE	Statement covers period from04/22/2018 through05/19/2018		IVED BY LES COUNTY Page 15 AMII: 24 N FINANCE	ge1 of14 For Official Use Only
<b>)</b>	State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	mplete Parts 1, 2, 3, and 4.  Primarily Formed Ballot Measure Controlled Controlled Soponsored Uso Complete Part 6)  Primarily Formed Candidate/ Officeholder Committee Uso Complete Part 7)	2. Type of Statement:	☐ Quarterly S ☐ Special Od ☐ Supplemen	
	3. Committee information	2 (310)248-6299	Treasurer(s)  NAME OF TREASURER  Gary Crummitt  MAILING ADDRESS  525 E. Seaside Way, #101-C  CITY  Long Beach  NAME OF ASSISTANT TREASURER, IF ANY  MAILING ADDRESS	STATE ZIP CODE CA 90802	AREA CODE/PHONE (562) 983-0815
•	525 E. Seaside Way, #101-C  CITY  STATE ZIP COI  Long Beach  OPTIONAL: FAX / E-MAIL ADDRESS  (310) 248-6288 / gary@crummittandassociates.co	2	CITY  OPTIONAL: FAX / E-MAIL ADDRESS	STATE ZIP CODE	AREA CODE/PHONE
2	I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California  Executed on	this statement and to the best of my knot that the foregoing is true and correct.  By	Signature of Controlling Officeholder, Candidate, State Measure Propositional Signature Officeholder, Candidate, State Measure Propositional Signature Officeholder, Candidate, State Measure Propositional Signature Officeholder, Candidate Signature Officeholder, Candidate Signature Officeholder, Candidate Signature Officeholder,	sible Officer of Sponsor	rue and complete. I certify
					EPPC Form 460 (Jan/2016)

	Controlled Commit	iee	0.	Primarily Formed Bal	iot weasure	Committee	į.	
NAME OF OFFICEHOLDER OR CANDID	DATE			NAME OF BALLOT MEASURE Measure C				
OFFICE SOUGHT OR HELD (INCLUDE	LOCATION AND DISTRICT	NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTI	ION	le i	SUPPORT
		,		вн	Beverly H	Kills Unifie		OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (1	NO. AND STREET) CITY	y state 2	IP .	Identify the controlling o	fficeholder, ca	ındidate, or st	ate measure p	roponent, if a
<del></del>				NAME OF OFFICEHOLDER, CA	NDIDATE, OR PI	ROPONENT		
Related Committees Not Inc not included in this statement that a contributions or make expenditures	are controlled by you or	are primarily formed to rec		OFFICE SOUGHT OR HELD			DISTRICT NO. IF	ANY
COMMITTEE NAME		.D. NUMBER						
NAME OF TREASURER		CONTROLLED COMMITTEE?	<del></del> 7.	Primarily Formed Car officeholder(s) or candidate(	ndidate/Offic	ceholder Co	mmittee Lis	t names of
		YES NO				is committee is	primarily forme	ea. 
COMMITTEE ADDRESS STREE	TADDRESS (NO P.O. BOX)	)		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	☐ SUPPORT
CITY						i .		☐ OPPOSE
	STATE ZIP COD	DE AREA CODE/PHO	ONE	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	SHT OR HELD	SUPPORT
		DE AREA CODE/PHO	ONE			OFFICE SOUG	GHT OR HELD	
			ONE	NAME OF OFFICEHOLDER OR			GHT OR HELD	SUPPORT
COMMITTEE NAME	Į.	D. NUMBER CONTROLLED COMMITTEE?	ONE		CANDIDATE		GHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME NAME OF TREASURER	[1.	D. NUMBER  CONTROLLED COMMITTEE?  YES NO	ONE	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUC	GHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME NAME OF TREASURER	Į.	D. NUMBER  CONTROLLED COMMITTEE?  YES NO	ONE	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUC	GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT
COMMITTEE NAME NAME OF TREASURER	[1.	D. NUMBER  CONTROLLED COMMITTEE?  YES NO		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUC	GHT OR HELD	SUPPORT OPPOSE OPPOSE

## Recipient Committee Campaign Statement 6. Primarily Formed Ballot Measure Committee (Continued)

CALIFORNIA 460

NAME OF BALLOT MEASURE

Measure BH

BALLOT NO. OR LETTER BH JURISDICTION

Beverly Hills Unified School Distrct

SUPPORT/OPPOSE Support

## Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

Statement covers period from 04/22/2018 CALIFORNIA FORM 460

through 05/19/2018 Page 4 of 14

SUMMARY PAGE

Yes on BH 1404150 Column A Column B Calendar Year Summary for Candidates Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE **General Elections** 1. Monetary Contributions ...... Schedule A, Line 3 \$ 71,257.00 1/1 through 6/30 7/1 to Date 0.00 20. Contributions 71,257.00 Received \$ \_\_\_\_\_ \$ \_\_\_\_ 4. Nonmonetary Contributions ...... Schedule C, Line 3 0.00 0.00 21. Expenditures 71,257.00 **Expenditures Made Expenditure Limit Summary for State Candidates** 7. Loans Made ...... Schedule H, Line 3 0.00 22. Cumulative Expenditures Made\* 31,099.14 (If Subject to Voluntary Expenditure Limit) 969.55 5,969.55 Date of Election Total to Date 10. Nonmonetary Adjustment ...... Schedule C, Line 3 (mm/dd/yy) 0.00 **Current Cash Statement** To calculate Column B, add 13. Cash Receipts ...... Column A, Line 3 above 57,835.00 amounts in Column A to the corresponding amounts 14. Miscellaneous Increases to Cash ...... Schedule I, Line 4 \*Amounts in this section may be different from amounts 0.00 from Column B of your last reported in Column B. report. Some amounts in 15. Cash Payments ...... Column A, Line 8 above 30,936.14 Column A may be negative 16. ENDING CASH BALANCE ........ Add Lines 12 + 13 + 14, then subtract Line 15 \$ 40,157.86 figures that should be subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed 17. LOAN GUARANTEES RECEIVED ...... Schedule B, Part 2 \$ for this calendar year, only 0.00 carry over the amounts Cash Equivalents and Outstanding Debts from Lines 2, 7, and 9 (if any). 0.00 19. Outstanding Debts ...... Add Line 2 + Line 9 in Column B above \$ 5,969.55

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

Monetary Contributions Received			nts may be rounded whole dollars.	Statement covers period from04/22/2018		CALIFORNIA 46		
SEE INSTRUCTION	ONS ON REVERSE			through05/19/2	018	Page5 of	14	
IAME OF FILER						I.D. NUMBER		
Yes on BH						1404150		
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	PATE PER ELECTI		
04/27/2018	Atkinson, Andelson, Loya, Ruud & Romo 12800 Center Court Dr. Cerritos, CA 90703	□IND □COM ☑OTH □PTY □SCC	C. Seames)	20,000.00	20,00	0.00		
04/26/2018	Michael Bregy 2800 Neilson Way #1605 Santa Monica, CA 90405	☑IND □COM □OTH □PTY □SCC	Superintendent BHUSD	500.00	50	0.00		
05/07/2018	DLR Group 6457 Frances Street Ste. 200 Omaha, NE 68106	□IND □COM ☑OTH □PTY □SCC		15,000.00	15,000	0.00		
5/08/2018	Adrian Gluck 1820 Holmby Ave. #10 Los Angeles, CA 90025	IND  COM  OTH  PTY  SCC	President Patent Equities	500.00	500	0.00		
14/25/2018	Jon Gluck 9465 Wilshire Blvd. Ste. 300 Beverly Hills, CA 90212	⊠IND □COM □OTH □PTY □SCC	Entrepreneur Gluck Marketing Group	250.00	250	0.00		
			SUBTOTAL\$	36,250.00				
Amount red (Include all	A Summary ceived this period – itemized monetary contributions. Schedule A subtotals.) ceived this period – unitemized monetary contributions				IND – Inc COM – R (OTH – C	Recipient Committee other than PTY or SCC Other (e.g., business er	>) ntity)	
Total mone	tary contributions received this period. 1 and 2. Enter here and on the Summary Page, Colum			57,835.00	PTY-Po	olitical Party mall Contributor Commi		

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

## Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may be rounded to whole dollars.			/2018	CALIFORNIA 460  FORM of 14		
NAME OF FILER				through 05/19		I.D. NUMBER		
Yes on BH						1404150		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID 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	ATE PER ELEC	TE	
05/08/2018	Gluck Marketing Group 9465 Wilshire Blvd., #300 Beverly Hills, CA 90212	□IND □COM 図OTH □PTY □SCC		500.00	500	0.00		
05/07/2018	Kasowitz Benson Torres LLP 1633 Broadway New York, NY 10019	□IND □COM 図OTH □PTY □SCC		10,000.00	10,000	.00		
05/15/2018	LaTanya Kirkcarter 8813 S. Halldale Los Angeles, CA 90047	☑IND □COM □OTH □PTY □SCC	Education Administration Beverly Hills Unified School District	100.00	100	.00	diversity of the second	
05/03/2018	Michael Libow 516 N. Walden Dr. Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Real Estate Coldwell Banker	380.00	380	.00		
04/25/2018	ProWest Constructors 22710 Palomar Street Wildomar, CA 92595	□IND □COM ☑OTH □PTY □SCC		10,000.00	10,000	.00		
			SUBTOTAL\$	20,980.00			, V.	

\*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

	A (Continuation Sheet) Contributions Received	Amounts may to whole		Statement cov. from04/22, through05/19/	/2018	F	SCHEDULE A (CO IFORNIA 46 ORM 46
Yes on BH						1.D. NU	JMBER
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 CALENDAR Y (JAN. 1 - DEC.	DATE EAR	PER ELECTION TO DATE (IF REQUIRED)
05/11/2018	Lisa Sandel 7886 Dunvagen Ct. Boca Raton, Fl 33496	☑IND □COM □OTH □PTY □SCC	Homemaker N/A	500.00	5	00.00	
05/08/2018	Shelby Weiser 215 S. McCarthy Dr. Beverly Hills, CA 90212	⊠IND □COM □OTH □PTY □SCC	Attorney SOWD	100.00	1	00.00	
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					

SUBTOTAL\$

600.00

\*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

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

Schedule E Payments Made	Amounts may be rounded to whole dollars.			State	ement covers period 04/22/2018	CALIFO	
SEE INSTRUCTIONS ON REVERSE  NAME OF FILER  Yes on BH				throug		Page	MBER
CODES: If one of the following codes accurately describe  CMP campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  FND fundraising events  IND LEG legal defense  LIT campaign literature and mailings	MBR member con MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and POS postage, de	nmunication  Indication  Indic	s aces	RAD ra RFD re SAL ca TEL t.v TRC ca TRS st TSF tra VOT vo	cribe the payment. dio airtime and production turned contributions ampaign workers' salaries and proundidate travel, lodging, araff/spouse travel, lodging, ansfer between committee other registration formation technology cost	duction costs and meals and meals softhe san	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION O	F PAYMENT		AMOUNT PAID
AMAC LLC 3555 Lomita Blvd., #J Torrance, CA 90505		CMP					2,003.39
AMAC LLC 3555 Lomita Blvd., #J Torrance, CA 90505		CMP					7,851.58
E- Fundraising Conections 2831 G Street Sacramento, CA 95814			Credit Card I	Processing Fe	25		450.50
* Payments that are contributions or independent expenditures in	nust also be summ	arized on	Schedule D.		SL	JBTOTAL\$	10,305.47
Schedule E Summary							
1. Itemized payments made this period. (Include all Schedule	E subtotals.)	• • • • • • • • • • • • • • • • • • • •				\$	30,936.14
2. Unitemized payments made this period of under \$100		• • • • • • • • • • • • • • • • • • • •		******		\$	0.00
3. Total interest paid this period on loans. (Enter amount from	Schedule B, Part	1, Colum	n (e).)			\$	0.00

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

Amounts may be rounded to whole dollars.

		SCHEDULE E (CONT.)
Staten	nent covers period	CALIFORNIA 460
from	04/22/2018	FORM 40U
through_	05/19/2018	Page9 of14
		I.D. NUMBER

NAME OF FILER

SEE INSTRUCTIONS ON REVERSE

E- Fundraising Conections

2831 G Street Sacramento, CA 95814

Yes on BH

1404150

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  IND independent expenditure supporting/opposing others (explain)*  LEG legal defense  LIT campaign literature and mailings	MBR member commeetings an office experiment petition circulus phone banks POL polling and seposal postage, del	munications d appearance ses lating survey researe very and mes	s	RAD RFD SAL TEL TRC TRS TSF VOT	describe the payment. radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and productio candidate travel, lodging, and mes staff/spouse travel, lodging, and it transfer between committees of t voter registration information technology costs (inter	on costs als meals the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE (	DR .	DESCRIPTIO	N OF PAYMENT	AMOUNT PAID
E- Fundraising Conections 2831 G Street Sacramento, CA 95814			Credit Card	Processing	Fees	11.75
E- Fundraising Conections 2831 G Street Sacramento, CA 95814	A CANADA A MARIA A MAR		Credit Card	Processing	Fees	23.00

E- Fundraising Conections
2831 G Street
Sacramento, CA 95814

Credit Card Processing Fees 46.00

Credit Card Processing Fees

E- Fundraising Conections
2831 G Street
Sacramento, CA 95814

Credit Card Processing Fees
5.00

SUBTOTAL \$

103.35

17.60

<sup>\*</sup> Payments that are contributions or Independent expenditures must also be summarized on Schedule D.

Schedule E	
(Continuation Sheet)	
Payments Made	

(Continuation Sheet)	Amounts may be rounded to whole dollars.	Statement covers period	CALIFORNIA 460
Payments Made	to whole donars.	from04/22/2018	FORM TOU
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		through 05/19/2018	Page10 of14
Yes on BH			I.D. NUMBER 1404150
CODES: If one of the following codes accura  CMP campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations	MBR member communications MTG metition separations OFC office expenses OFT netition circulations	Otherwise, describe the payment  RAD radio airtime and production  RFD returned contributions  SAL campaign workers' salaries	n costs

petition circulating TEL t.v. or cable airtime and production costs 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 meals independent expenditure supporting/opposing others (explain)\* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor legal defense professional services (legal, accounting) 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 E- Fundraising Conections Credit Card Processing Fees 2831 G Street 23.73 Sacramento, CA 95814 E- Fundraising Conections Credit Card Processing Fees 2831 G Street 5.00 Sacramento, CA 95814 Election Digest #1345303 LIT Slate Mailer 22410 Hawthorne Blvd, #5 400.00 Torrance, CA 90505 Gluck Marketing Group 9465 Wilshire Blvd., #300 5,000.00 Beverly Hills, CA 90212 Gluck Marketing Group OFC 9465 Wilshire Blvd., #300 323.59 Beverly Hills, CA 90212

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

SUBTOTAL \$

5,752.32

Schedule E (Continuation Sheet) Payments Made	Amounts may b to whole do			S from throu	04/22/2018 05/19/2018	CALIFO	
NAME OF FILER Yes on BH				<b>L</b>		I.D. NUME	
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 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 circu PHO phone banks POL polling and s POS postage, deli	imunications d appearance ises lating s survey resean ivery and me	s	RAD RFD SAL TEL TRC TRS TSF VOT	describe the payme radio airtime and produc returned contributions campaign workers' salar t.v. or cable airtime and candidate travel, lodging staff/spouse travel, lodgi transfer between commit voter registration information technology c	ries production cost , and meals ng, and meals ttees of the sar	me candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE (	)R	DESCRIPTIO	N OF PAYMENT		AMOUNT PAID
Gluck Marketing Group 9465 Wilshire Blvd., #300 Beverly Hills, CA 90212		CNS		A SAN THE SECTION AND ASSESSMENT OF THE SECTION ASSESSMENT OF THE SECT			5,000.00
Gluck Marketing Group 9465 Wilshire Blvd., #300 Beverly Hills, CA 90212		CNS					5,000.00

Hang-M-Hi
10822 Woodward Ave.
Sunland, CA 91042

Patch Media
134 W. 29th St., Floor 11
New York, NY 10001

The Walking Man
801 E. 5th St.
Los Angeles, CA 90021

CMP

1,150.00

1,000.00

Flyer Distribution

2,160.00

SUBTOTAL \$

14,310.00

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

Schedule E (Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.		Statement covers period  from04/22/2018  through05/19/2018	SCHEDULE E (CON FORM 460
NAME OF FILER				Page12of14
Yes on BH				1.D. NUMBER
				1404150
CODES: If one of the following codes accurately descriced 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 com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and s POS postage, del	nmunications d appearances ases allating s	RAD radio airtime and production returned contributions SAL campaign workers' salaries t.v. or cable airtime and production returned condidate travel, lodging, a staff/spouse travel, lodging.	on costs es roduction costs and meals g, and meals ees of the same candidate/spons
NAME AND ADDRESS OF PAYEE. (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
The Walking Man 801 E. 6th St. Los Angeles, CA 90021		Flyer Distribu	tion	465.

SUBTOTAL \$

465.00

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule F					SCHEDULE F			
Accrued Expenses (Unpaid Bills)  Amounts may be rounded to whole dollars.			Statement cove		ORNIA 460			
			from04/22/	2018				
SEE INSTRUCTIONS ON REVERSE			through 05/19/	2018 Page	13 of14			
NAME OF FILER	, i							
Maria Cara Cara Cara Cara Cara Cara Cara				I.D. NUI	MBER			
Yes on BH				14041	.50			
CODES: If one of the following codes accurately described	bes the payment, you may	y enter the code. Ot	herwise, describe th	ne payment				
Compaign paraphernalia/misc.	MBR member communicatio	ns	RAD radio airtime ar	nd production costs				
CNS campaign consultants CTB contribution (explain normonetary)*	MTG meetings and appeara	inces	RFD returned contributions					
CTB contribution (explain nonmonetary)* CVC civic donations	OFC office expenses		SAL campaign workers' salaries					
FIL candidate filing/ballot fees	PET petition circulating PHO phone banks		TEL t.v. or cable air	TEL t.v. or cable airtime and production costs				
FND fundraising events		11/0						
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and		TSF transfer between	en committees of the sai	me candidate/spensor			
LEG legal defense	PRO professional services	(legal, accounting)	VOT voter registration	on				
LIT campaign literature and mailings	PRT print ads		WEB information tech	nnology costs (internet, e	e-mail)			
NAME AND ADDRESS OF CREDITOR	CODE OR	(a)	(b)	(c)	(d)			
(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF PAYMENT	OUTSTANDING BALANCE BEGINNING	AMOUNT INCURRED	AMOUNT PAID	OUTSTANDING			
		OF THIS PERIOD	THIS PERIOD	THIS PERIOD (ALSO REPORT ON E)	BALANCE AT CLOSE			
Gluck Marketing Group	CNS	5,000.00	0.00	,	OF THIS PERIOD			
9465 Wilshire Blvd., #300		3,000.00	0.00	5,000.00	0.00			
Beverly Hills, CA 90212								
The Walking Man	Flyer Distribution	0.00	3 635 00					
801 E. 6th St.		0.00	2,625.00	0.00	2,625.00			
Los Angeles, CA 90021								
Beverly Hills Weekly	Email Blasts	0.00	1 105 00					
140 South Beverly Dr., #201		0.00	1,125.00	0.00	1,125.00			
Beverly Hills, CA 90212								
,								
* Daymonto that are contribution								
<ul> <li>Payments that are contributions or independent expenditures must also be summarized on Schedule D.</li> </ul>	SUBTOTALS	5,000.00\$	3,750.00\$	5,000.00\$	3,750.00			
Schedule F Summary								
	Catandula E Oct							
1. Total accrued expenses incurred this period. (Include all	Scriedule F, Column (b) su	btotals for						
accrued expenses of \$100 or more, plus total unitemized	accrued expenses under	\$100.)	INCUF	RRED TOTALS $\$$ $\_$	5,969.55			
<ol><li>Total accrued expenses paid this period. (Include all Sch</li></ol>	iedule F, Column (c) subtot	tals for payments on						
accrued expenses of \$100 or more, plus total unitemized	payments on accrued expe	enses under \$100.).		PAID TOTALS \$	5,000.00			
3 Net change this period (Subtract Line 9 Security 4 F	1 11 1:00							
on the Summary Page, Column A, Line 9.)	nor the difference field aff	i		KICT A	0.00 ce			
, J ,		***************************************	******************************	NEI D	969.55 y be a negative number			

Schedule F (Continuation Sheet) **Accrued Expenses (Unpaid Bills)** 

Amounts may be rounded to whole dollars.

SCHEDULE F (CONT.)

Statement covers period		CALIFORNIA AGO
from	04/22/2018	FORM 400
through	05/19/2018	Page14 of14
		I.D. NUMBER
		1404150

Yes on BH

NAME OF FILER

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

print ads

PRT

CMP campaign paraphernalia/misc. MBR member communications CNS campaign consultants MTG meetings and appearances CTB contribution (explain nonmonetary)\* OFC office expenses CVC civic donations

PET petition circulating candidate filing/ballot fees PHO phone banks FND fundraising events

independent expenditure supporting/opposing others (explain)\* LEG legal defense

UT campaign literature and mailings 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 POL polling and survey research TRS staff/spouse travel, lodging, and meals

POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor professional services (legal, accounting)

VOT voter registration WEB information technology costs (internet, e-mail)

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

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
Melodee Ice Cream Company 5276 Adams Blvd. Los Angeles, CA 90016	Ice Cream Outreach Week	0.00	2,219.55	0.00	
	SUBTOTALS S	0.00	2,219.55	0.00	2,219.55

