		`,		
, , , , , , , , , , , , , , , , , , ,		•	FE 7/27/2	2 0/64-3
Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)			Date Stamp RECEIVED B LOS ANGELES CO	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE	Statement covers period	Date of election if applicable: (Month, Day, Year)	2022 JUL 28 PM 3 CAMPAIGN FINAL	Page 1 of 14 For Official Use Only
1. Type of Recipient Committee: All Committees - C	Complete Parts 1, 2, 3, and 4.	2. Type of Statement:		<u> </u>
☐ Officeholder, Candidate Controlled Committee ☐ State Candidate Election Committee ☐ Recall (Also Complete Part 5) ☑ General Purpose Committee ② Sponsored ☐	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te	Spector Support State	rterly Statement cial Odd-Year Report plemental Preelection ement - Attach Form 495
3. Committee Information	.D. NUMBER 1305594	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE		NAME OF TREASURER		
BizFed PAC, A Project of Los Angeles County	Business Federation	Thomas W. Hiltachk		•
. · · · · · · · · · · · · · · · · · · ·	>	MAILING ADDRESS	· · · · · · · · · · · · · · · · · · ·	
	<u> </u>			· · · · · · · · · · · · · · · · · · ·
STREET ADDRESS (NO P.O. BOX)		CITY	STATE ZIP C	
CITY STATE ZIP C	CODE AREA CODE/PHONE	Sacramento NAME OF ASSISTANT TREASUR	CA 958	14 (916)442-7757
		Ashlee N. Titus	NEN, IF ANI	·
CA 900 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.		MAILING ADDRESS		
	, ,	MAILING ADDITION		
CITY STATE ZIP C	ODE AREA CODE/PHONE	CITY	STATE ZIP C	ODE AREA CODE/PHONE
Sacramento CA 958	114	Sacramento	CA 958	14 (916) 442-7757
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDR	RESS	
(213)652-1802 / fppc@bmhlaw.com				
4. Verification	,			
I have used all reasonable diligence in preparing and reviewing		wledge the info	nd in the attached schedu	iles is true and complete. I certify
under penalty of perjury under the laws of the State of Californ	ila that the loregoing is true and correct.		7	
Executed on	Ву	S		<u> </u>
		Signature or Treasurer or Assistant	reasuler .	
Executed on Date	BySignature of Con	trolling Officeholder, Candidate, State Measure Pro	ponent or Responsible Officer of Sponsor	
Executed on	Ву			
Date		Signature of Controlling Officeholder, Candidate, St	late Measure Proponent	
Executed on	Ву	Signature of Controlling Officeholder, Candidate, St	late Messure Proponent	
. Date		agrature of Corrugning Officeholder, Candidate, St	iale measure Proporient	FPPC Form 460 (Jan/2016)

Recipient Committee Campaign Statement Cover Page — Part 2

	COVERF	AGE - PART	2
	ORNIA ORM	460	
Page _	2	of <u>14</u>	.

Officeholder or Candidate Controlled Committee	•	i. Primaril	y Formed Ballo	t Measure C	ommittee	,
NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BA	ALLOT MEASURE	•	- ,	,
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF A	PPLICABLE)	BALLOT NO	OR LETTER	JURISDICTION		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY	STATE ZIP	Identify t	he controlling offi	ceholder, cand	lidate, or state me	easure proponent, if any.
		NAME OF C	OFFICEHOLDER, CAN	DIDATE, OR PRO	PONENT	
Related Committees Not Included in this Statement: List not included in this statement that are controlled by you or are primarily contributions or make expenditures on behalf of your candidacy.	•	OFFICE SO	UGHT OR HELD		DISTRI	CT NO. IF ANY
COMMITTEE NAME I.D. NUMBER	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·	,	*****
NAME OF TREASURER CONTROLLED YES	COMMITTEE?		y Formed Canc er(s) or candidate(s)			tee List names of rily formed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	·	NAME OF C	OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT OF	SUPPORT OPPOSE
CITY STATE ZIP CODE A	REA CODE/PHONE	NAME OF C	OFFICEHOLDER OR C	ANDIDATE	OFFICE SÖUGHT OF	R HELD SUPPORT OPPOSE
COMMITTEE NAME I.D. NUMBER	,	NAME OF C	OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHŢ OR	R HELD SUPPORT OPPOSE
NAME OF TREASURER CONTROLLED YES	COMMITTEE?	NAME OF C	OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT OF	R HELD SUPPORT OPPOSE
CITY STATE ZIP CODE A	REA CODE/PHONE		Attac	h continuation	n sheets if necess	ary

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SUMMARY PAGE

-	Stateme	ent covers period	CALIFORNIA	460
	from	05/22/2022	FORM	700
	through _	06/30/2022	Page3 o	f14
			I.D. NUMBER	-
	4	<u> </u>	1305594	

BizFed PAC, A Project of Los Angeles County Business Federation Calendar Year Summary for Candidates Column A Column B Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROMATTACHED SCHEDULES) TOTAL TO DATE General Elections 106,000.00 9,500.00 1. Monetary Contributions Schedule A, Line 3 \$ ___ 1/1 through 6/30 7/1 to Date 0.00 2. Loans Received Schedule B. Line 3 r. 0.00 20. Contributions 106,000.00 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ _____ 9,500.00 Received Nonmonetary Contributions Schedule C. Line 3 0.00 21. Expenditures Made 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 \$ 9,500.00 106,000.00 **Expenditures Made** Expenditure Limit Summary for State Candidates 0.00 22. Cumulative Expenditures Made* 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ 26,382.42 \$ 173,720.56 (If Subject to Voluntary Expenditure Limit) 2,851.88 5,503.88 Total to Date Date of Election (mm/dd/yy) 0.00 0.00 179,224.44 **Current Cash Statement** 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 146,563.49 To calculate Column B, add amounts in Column A to the 9,500.00 corresponding amounts *Amounts in this section may be different from amounts 0.00 14. Miscellaneous Increases to Cash Schedule I, Line 4 from Column B of your last reported in Column B. report. Some amounts in 26,382.42 Column A may be negative 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ 129,681.07 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 for this calendar year, only 17. LOAN GUARANTEES RECEIVED Schedule B. Part 2 \$ _____ 0.00 carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts

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

Schedule A Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCH		11 =	Λ
SUF	ᄪᇝ	ᅩ	м

CALIFORNIA

Statement covers period

,	· · · · · ·)	from05/22/2	022	FORM	-100
SEE INSTRUCTIO	NS ON REVERSE		,	through <u>06/30/2</u>	022	Page <u>4</u> o	f14
NAME OF FILER			•,			I.D. NUMBER	
BizFed PAC,	A Project of Los Angeles County Business Federat	ion				1305594	
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 (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YE. (JAN. 1 - DEC. S	AR TOI	ECTION DATE QUIRED)
05/31/2022	Charter Communications Operating, LLC(Keri Askew Bailey) St. Louis, MO 63131	□IND □COM 図OTH □PTY □SCC	e e e e e e e e e e e e e e e e e e e	7,500.00	7,50	.,	
06/01/2022	Building Owners & Managers Association of Greater Los Angeles Political Action Committee (ID# 922454) Los Angeles, CA 90017	□IND □COM □OTH □PTY □SCC		2,000.00	7,00	00.00	
<u>΄</u>		□IND □COM □OTH □PTY □SCC	,				
,		□IND □COM □OTH □PTY □SCC					
-		□IND □COM □OTH □PTY □SCC					
			SUBTOTAL	9,500.00		1	,
 Amount red (Include all Amount red Total mone 	A Summary ceived this period – itemized monetary contributions. Schedule A subtotals.) ceived this period – unitemized monetary contributions stary contributions received this period.	s of less than \$	\$100 \$	0.00	OTH -	butor Codes ndividual Recipient Committe (other than PTY or Other (e.g., busine Political Party Small Contributor C	r SCC) ess entity)
(Add Lines	1 and 2. Enter here and on the Summary Page, Colu	mn A, Line 1.)	TOTAL \$	9,500.00		,	

Schedul	e C			_					SCHEDULE (
Nonmor	netary Contributions Received		Amounts may be rounded to whole dollars.		s	statement covers p	eriod	CALIFO	DRNIA 160
					from	05/22/202	22	FOR	RM TOO
SEE INISTRI IO	TIONS ON REVERSE				thro	ugh06/30/202	22	Page	5_ ~of <u>14</u>
NAME OF FILE			,	L				I.D. NUMB	ER .
BizFed PAC	., A Project of Los Angeles County Busine	ess Federatio	on					1305594	
DATE REÇEIVED	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)	DESCRIPTION O GOODS OR SERVICE		AMOUNT/ FAIR MARKET VALUE	CALENI	ATIVE TO DATE DAR YEAR - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
05/31/2022	BizFed: Los Angeles County Business Federation Commerce, CA 90040 Reported pursuant to Regulation 18215(c)(16) - paymen	□IND □COM □OTH □PTY □ by sponsoring □SCC	organization for the administra	Bill Paid By Th Party		2,652.00 Memo		9,700.61	
06/30/2022	BizFed: Los Angeles County Business Federation Commerce, CA 90040 Reported pursuant to Regulation 18215(c)(16) - paymen	□IND □COM 図OTH	prganization for the administra	tion of sponsored con	nmittee	2,444.99 Memo	ŧ	9,700.61	
		□IND □COM □OTH □PTY □SCC				,			
		□IND □COM □OTH □PTY □SCC							-
Attach ad	ditional information on appropriately label	ed continuati	ion sheets.	SUBTO	TAL \$	0.00		,	
									
1. Amount	e C Summary received this period – itemized nonmonetary all Schedule C subtotals.)				\$_	0.0	INC	ontributor Coo D – Individual DM – Recipien	
2. Amount	received this period – unitemized nonmoneta	ary contributio	ns of less than \$100		\$	0.0			g., business entity)
	nmonetary contributions received this period.	Page Colum	n A Lines 4 and 10 \	TOTAL	•	. 0.0	sc		ntributor Committee

Schedule D Summary of Expenditures Supporting/Opposing Other	
Candidates, Measures and C	ommittees
SEE INSTRUCTIONS ON REVERSE	}
NAME OF FILER	

Amounts may be rounded to whole dollars.

BizFed PAC, A Project of Los Angeles County Business Federation

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/23/2022	Rick Caruso Mayor City of Los Angeles X Support Oppose		Check Returned from Committee	-1,500.00	0.00	P2022 \$0.00
05/24/2022	Mark Guillen City Council Member City of Long Beach District 3 X Support Oppose			400.00	400.00	P2022 \$400.00
05/31/2022	Anita Quinonez-Gabielian City Council Member City of Glendale X Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	LIT, POS	2,038.76	4,080.99	P2022 \$4,080.99
		(SUBTOTAL \$	938.76		A STATE OF THE STA

Schedule D Summary

1.	Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)	\$	7,333.35
2.	Unitemized contributions and independent expenditures made this period of under \$100	ß	0.00
		_	

Schedule D (Continuation Sheet) Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE D (CONT.)
ment covers period

 Statement covers period
 CALIFORNIA FORM
 460

 from
 05/22/2022
 Page
 7
 of
 14

 I.D. NUMBER
 OF
 14
 OF
 14
 OF
 OF
 14
 OF
 OF

BizFed PAC, A Project of Los Angeles County Business Federation

1305594

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/31/2022	Ara Najarian City Council Member City of Glendale	Monetary Contribution Nonmonetary Contribution X Independent	LIT, POS	_ 2,038.76	4,080.99	P2022 \$4,080.9
05/31/2022	X Support Oppose Ivan Altamirano City Council Member City of Commerce	Expenditure Monetary Contribution Nonmonetary Contribution	LIT, POS	772.36	772.36	P2022 \$772.3
05/31/2022	X Support Oppose Kevin Lainez City Council Member City of Commerce		LIT, POS	772.35	772.35	P2022 \$772.3
05/31/2022	X Support Oppose Leonard Mendoza City Council Member	Contribution Independent Expenditure Monetary	LIT, POS	772.36	772.36	P2022 \$772.3
	City of Commerce X Support Oppose	Contribution Nonmonetary Contribution Image: Contribution of the	. `		-	
	<u>L</u>		SUBTOTAL \$	4,355.83		L

Schedule D (Continuation Sheet) SCHEDULE D (CONT.) **Summary of Expenditures** Amounts may be rounded Statement covers period **CALIFORNIA** to whole dollars. **Supporting/Opposing Other FORM** 05/22/2022 **Candidates, Measures and Committees** 06/30/2022 through. _ of___<u>14</u>__ NAME OF FILER I.D. NUMBER BizFed PAC, A Project of Los Angeles County Business Federation 1305594 CUMULATIVE TO DATE PER ELECTION NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR DESCRIPTION TYPE OF PAYMENT AMOUNT THIS DATE CALENDAR YEAR TO DATE MEASURE NUMBER OR LETTER AND JURISDICTION, (IF REQUIRED) PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OR COMMITTEE 2,038.76 4,081.00 P2022 05/31/2022 Vrej Agajanian LIT, POS ☐ Monetary City Council Member Contribution City of Glendale ■ Nonmonetary Contribution Independent Expenditure X Support Oppose ☐ Monetary Contribution □ Nonmonetary Contribution ☐ Independent Expenditure □ Oppose ☐ Support ☐ Monetary Contribution □ Nonmonetary Contribution Independent Expenditure Support □ Oppose ☐ Monetary Contribution □ Nonmonetary

> Contribution Independent Expenditure

> > SUBTOTAL \$

2,038.76

☐ Support

Oppose

\$4,081.00

Schedule E	Amounts may be rounded	Stateme	ent covers period	CALIFORNIA	460
Payments Made	to whole dollars.	from	05/22/2022	FORM	700
EE INSTRUCTIONS ON REVERSE		through _	06/30/2022	Page9	of14
AME OF FILER				I.D. NUMBER	
rizFed PAC, A Project of Los Angeles County Business Fe	ederation			1305594	

COI	DES: If one of the following codes accurately describes	the p	ayment, you	may e	nter the code. O	therwise, d	escribe the payment.	-
ENS CTB CVC FIL FID FID EG	campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	PET PHO POL		ippearan s ng vey rese ry and n	ces	RFD SAL TEL TRC TRS TSF VOT	radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production cos candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the sa voter registration information technology costs (internet,	me candidate/sponsor
	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		,	CODE	OR	DESCRIPTION	N OF PAYMENT	AMOUNT PAID

CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
СТВ	Check Returned from Committee	-1,500.00
CTB		400.00
CNS		5,000.00
	CTB	CTB Check Returned from Committee CTB

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTAL'\$	3,900.00
Schedule E Summary		
Itemized payments made this period. (Include all Schedule E subtotals.)	\$	26,382.42
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, Column (e).)	\$	0.00

FPPC Form 460 (Jan/2016)

Schedule E

SCHEDU	JLE E	(CONT.)

(Continuation Sheet)	Amounts may be rounded	` \	Statement covers period	CALIFORNIA 460
Payments Made	to whole dollars.		from05/22/2022	FORM 400
SEE INSTRUCTIONS ON REVERSE			through06/30/2022	Page 10 of 14
NAME OF FILER				I.D. NUMBER
BizFed PAC, A Project of Los Angeles County	Business Federation			1305594
000F0	-1-1	0.11		

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 PET" petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals FND fundraising events polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services transfer between committees of the same candidate/sponsor legal defense PRO professional services (legal, accounting) VOT voter registration LEG WEB information technology costs (internet, e-mail) LIT campaign literature and mailings PRI print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
GrassrootsLab	IND	LIT, POS; Support; Ara Najarian, Anita Quinonez and Vrej Agajanian; Glendale City Council	6,116.28
Long Beach, CA 90803		yiej agajanian, siendale city council	
**	_		
GrassrootsLab	IND	LIT, POS; Support; Ivan Altamirano, Leonard Mendoza,	2,317.07
Long Beach, CA 90803		and Kevin Lainez ; Commerce City Council	
		\	
GrassrootsLab	CNS	,	5,000.00
Long Beach, CA 90803		~	
John Waddell & Co., CPAs	PRO		1,200.00
Sacramento, CA 95864	-		
		•	
Daley Strategies	CNS		5,000.00
Los Angeles, CA 90005			
	٠,	1	

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

SUBTOTAL \$

19,633.35

Schedule E	_
(Continuation	Sheet)
Payments Mad	de

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

		001120022 2 (001111)
State	ement covers period	CALIFORNIA 460
from	05/22/2022	FORM TOO
through	06/30/2022	Page11 of14
		I.D. NUMBER

1305594

BizFed PAC, A Project of Los Angeles County Business Federation

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)* office expenses SAL campaign workers' salaries OFC CVC civic donations petition circulating t.v. or cable airtime and production costs PET TEL 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 transfer between committees of the same candidate/sponsor TSF IND LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings WEB information technology costs (internet, e-mail) PRT print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	. CODE	OR .	DESCRIPTION OF PAYMENT	AMOUNT PAID
Daley Strategies	MTG			2,849.07
Los Angeles, CA 90005				
		*		
· ·				
			•	
			`	
·				
•			<i>∴</i>	

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

SUBTOTAL \$

2,849.07

5,000.00

503.88

Schedule F Accrued Expe	nses (Unpaid	Bills
	,	

Amounts may be rounded to whole dollars.

Statement covers period	CALIFORNIA 460
from05/22/2022	FORM 400
through06/30/2022	Page 12 of 14
	I.D. NUMBER
	1305594

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

BizFed PAC, A Project of Los Angeles County Business Federation

CODES: If one of the following codes accurately describe	s the payment, you may	enter the code. Of	therwise, describe t	he payment.	
CMP campaign paraphernalia/misc.	MBR member communication	ns	RAD radio airtime a	nd production costs	
CNS campaign consultants	MTG meetings and appearar	nces	RFD returned contri	butions	
CTB contribution (explain nonmonetary)*	OFC office expenses		SAL campaign work	kers' salaries	
CVC civic donations	PET petition circulating			time and production cost	S
FIL candidate filing/ballot fees	PHO phone banks			el, lodging, and meals	
FND fundraising events	POL polling and survey rese			avel, lodging, and meals	
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and i	•		en committees of the sa	me candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registrati		
LIT campaign literature and mailings	PRT print ads		WEB information tec	thnology costs (internet, e	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
		OT THIS LINES		,,	01 111101 211100
	PRO	2,652.00	-2,652.00		0.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS \$	2,652.00	\$ 2,851.88	.0.00	\$ 5,503.88
2.					
				,	,

0.00

0.00

5,000.00

503.88

Schedule F Summary

Bell, McAndrews, & Hiltachk, LLP

GrassrootsLab

Long Beach, CA 90803

Sacramento, CA 95814

١.	. Total accrude expenses incurred this period. (include all Schedule F, Column (b) subtotals for	
	accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) INCURRED TOTALS \$	2,851.88
	, , , , , , , , , , , , , , , , , , ,	
2	Total accrued expenses paid this period. (Include all Schedule F. Column (c) subtotals for payments on	

0.00

0.00

Schedul	e G
Paymen	ts Made by an Agent or Independent
Contrac	tor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

	001120022
Statement covers period	CALIFORNIA 160
from05/22/2022	FORM 400
through	Page 13 of 14
	I.D. NUMBER

1305594

SCHEDI II E G

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

BizFed PAC, A Project of Los Angeles County Business Federation

NAME OF AGENT OR INDEPENDENT CONTRACTOR

GrassrootsLab

CODES:	If one of the	following	codes accurate	y describes th	ne payment,	you may enter	the code.	Otherwise,	describe the payme	nt.
			*							

	was a second of the secon		paymond, you may onto the occor ou		o, addange in 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	PET	petition circulating	TEL	t.v. or cable airtime and production costs
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 meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	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 PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Political Data Inc.		LIT	247.01
Norwalk, CA 90650			
1			
Tr.			
Political Data Inc.	\	LIT	117.42
Norwalk, CA 90650			
		'	•
The Halftone Shop	`	LIT, POS	5,103.72
Santa Ana, CA 92705			
er en			
			*
Xpress Graphics, Inc.		LIT, POS	1,912.74
Gardena, CA 90248	~?		
2.		· ·	
Attach additional information on appropriately lebeled acceleration of the second			TOTAL # 0
Attach additional information on appropriately labeled continuation sheets.			TOTAL* \$ 7,380.89

^{*} 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.

Schedule G	
Payments Made by an Agent or Independent	
Contractor (on Behalf of This Committee)	

Amounts may be rounded to whole dollars.

		SCHEDOLE G
	Statement covers period	CALIFORNIA 160
l	from 05/22/2022	FORM 400.
ı		
	through 06/30/2022	Page14 of14
_	`	I.D. NUMBER
		1305594

BizFed PAC, A Project of Los Angeles County Business Federation

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Halftone Shop

NAME OF FILER

SEE INSTRUCTIONS ON REVERSE

COI	DES: If one of the following codes accurately describ	bes the	payment, you may enter the code.	Otherwise	e, 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	PET	petition circulating	. TEL	t.v. or cable airtime and production costs
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 meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration .
LΠ	campaign literature and mailings	PRT	print ads	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 PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT		AMOUNT PAID
United States Postal Service	POS			2,088.85
Washington, DC 20260			1	
		, .		
		1		
	1			
		. *		-
			-	,
##		,		şer.
	,			
		,		-
		·		

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

2,088.85

SCHEDI II'E G

^{*} 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.