

**Recipient Committee  
Campaign Statement  
Cover Page**

11/31/220

COVER PAGE

*JS*

SEE INSTRUCTIONS ON REVERSE

Date Stamp

**CALIFORNIA FORM 460**

Page 1 of 7

RECEIVED LOS ANGELES COUNTY  
2022 FEB -2 PM 1:04  
CAMPAIGN FINANCE

For Official Use Only

Statement covers period  
from 07/01/2021  
through 12/31/2021

Date of election if applicable:  
(Month, Day, Year)  
11/03/2020

**1. Type of Recipient Committee:** All Committees – Complete Parts 1, 2, 3, and 4.

Officeholder, Candidate Controlled Committee  
 State Candidate Election Committee  
 Recall  
*(Also Complete Part 5)*

General Purpose Committee  
 Sponsored  
 Small Contributor Committee  
 Political Party/Central Committee

Primarily Formed Ballot Measure Committee  
 Controlled  
 Sponsored  
*(Also Complete Part 6)*

Primarily Formed Candidate/Officeholder Committee  
*(Also Complete Part 7)*

**2. Type of Statement:**

Preelection Statement  
 Semi-annual Statement  
 Termination Statement  
 (Also file a Form 410 Termination)  
 Amendment (Explain below)

Quarterly Statement  
 Special Odd-Year Report

**3. Committee Information**

I.D. NUMBER  
1340310

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
Committee to Elect Rob Hammond for School Board 2020

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Monrovia</u>	<u>CA</u>	<u>91016</u>	<u>626-358-2114</u>

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Monrovia</u>	<u>CA</u>	<u>91016</u>	<u>-626-358-6192</u>

OPTIONAL: FAX / E-MAIL ADDRESS

Monroviahistory@aol.com

**Treasurer(s)**

NAME OF TREASURER

Stephen R. Baker

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Monrovia</u>	<u>CA</u>	<u>91016</u>	<u>626-355-6192</u>

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

**4. Verification**

I have used all reasonable diligence in preparing and reviewing this statement and to certify under penalty of perjury under the laws of the State of California that the foregoing

in and in the attached schedules is true and complete. I

Executed on 01/28/2022  
Date

By \_\_\_\_\_  
Treasurer

Executed on 01/28/2022  
Date

By \_\_\_\_\_  
Chairman or Responsible Officer of Sponsor

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Recipient Committee  
Campaign Statement  
Cover Page — Part 2**

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE  
Rob Hammond

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)  
Member, School Board, Monrovia Unified School District

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP  
Monrovia CA 91016

**Related Committees Not Included in this Statement:** *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	
CITY STATE ZIP CODE AREA CODE/PHONE	

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	
CITY STATE ZIP CODE AREA CODE/PHONE	

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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**Identify the controlling officeholder, candidate, or state measure proponent, if any.**

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY
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**7. Primarily Formed Candidate/Officeholder Committee** *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

*Attach continuation sheets if necessary*

# Campaign Disclosure Statement Summary Page

Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>07/01/2021</u> through <u>12/31/2021</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>3</u> of <u>7</u>
	I.D. NUMBER 1340310

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Committee to Elect Rob Hammond to School Board 2020

## Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions..... <i>Schedule A, Line 3</i>	\$ <u>.00</u>	\$ <u>.00</u>
2. Loans Received..... <i>Schedule B, Line 3</i>	<u>.00</u>	<u>28,750.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS..... <i>Add Lines 1 + 2</i>	\$ <u>.00</u>	\$ <u>28,750.00</u>
4. Nonmonetary Contributions..... <i>Schedule C, Line 3</i>	<u>.00</u>	<u>.00</u>
5. TOTAL CONTRIBUTIONS RECEIVED..... <i>Add Lines 3 + 4</i>	\$ <u>.00</u>	\$ <u>28,750.00</u>

## Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

## Expenditures Made

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made..... <i>Schedule E, Line 4</i>	\$ <u>.00</u>	\$ <u>.00</u>
7. Loans Made..... <i>Schedule H, Line 3</i>	<u>.00</u>	<u>.00</u>
8. SUBTOTAL CASH PAYMENTS..... <i>Add Lines 6 + 7</i>	\$ <u>.00</u>	\$ <u>.00</u>
9. Accrued Expenses (Unpaid Bills)..... <i>Schedule F, Line 3</i>	<u>.00</u>	<u>.00</u>
10. Nonmonetary Adjustment..... <i>Schedule C, Line 3</i>	<u>.00</u>	<u>.00</u>
11. TOTAL EXPENDITURES MADE..... <i>Add Lines 8 + 9 + 10</i>	\$ <u>.00</u>	\$ <u>.00</u>

## Expenditure Limit Summary for State Candidates

**22. Cumulative Expenditures Made\***  
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____

## Current Cash Statement

12. Beginning Cash Balance..... <i>Previous Summary Page, Line 16</i>	\$ <u>2,250.53</u>
13. Cash Receipts..... <i>Column A, Line 3 above</i>	<u>.00</u>
14. Miscellaneous Increases to Cash..... <i>Schedule I, Line 4</i>	<u>532.79</u>
15. Cash Payments..... <i>Column A, Line 8 above</i>	<u>.00</u>
16. ENDING CASH BALANCE..... <i>Add Lines 12 + 13 + 14, then subtract Line 15</i>	\$ <u>2,783.32</u>

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

\*Amounts in this section may be different from amounts reported in Column B.

*If this is a termination statement, Line 16 must be zero.*

17. LOAN GUARANTEES RECEIVED..... <i>Schedule B, Part 2</i>	\$ <u>.00</u>
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## Cash Equivalents and Outstanding Debts

18. Cash Equivalents..... <i>See instructions on reverse</i>	\$ <u>.00</u>
19. Outstanding Debts..... <i>Add Line 2 + Line 9 in Column B above</i>	\$ <u>28,750.00</u>

**Schedule B – Part 1  
Loans Received**

Amounts may be rounded  
to whole dollars.

Statement covers period from <u>07/01/2021</u> through <u>12/31/2021</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>4</u> of <u>7</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Committee to Elect Rob Hammond for School Board 2020

I.D. NUMBER

1340310

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Robert H. Hammond Monrovia, CA 91016 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-employed Neighborhood Pawn	\$ 900.00	\$ .00	<input type="checkbox"/> PAID \$ .00 <input type="checkbox"/> FORGIVEN \$ .00	\$ 900.00 11/08/11 DATE DUE	.00 % RATE \$ .00	\$ 900.00 07/19/11 DATE INCURRED	CALENDAR YEAR \$ .00 PER ELECTION** \$
Robert H. Hammond Monrovia, CA 91016 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-employed Neighborhood Pawn	\$ 1,000.00	\$ .00	<input type="checkbox"/> PAID \$ .00 <input type="checkbox"/> FORGIVEN \$ .00	\$ 1,000.00 11/08/11 DATE DUE	.00 % RATE \$ .00	\$ 1,000.00 07/29/11 DATE INCURRED	CALENDAR YEAR \$ .00 PER ELECTION** \$
Robert H. Hammond Monrovia, CA 91016 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-employed Neighborhood Pawn	\$ 4,000.00	\$ .00	<input type="checkbox"/> PAID \$ .00 <input type="checkbox"/> FORGIVEN \$ .00	\$ 4,000.00 11/08/11 DATE DUE	.00 % RATE \$ .00	\$ 4,000.00 10/17/11 DATE INCURRED	CALENDAR YEAR \$ .00 PER ELECTION** \$
<b>SUBTOTALS</b>		\$ .00	\$ .00	\$ .00	\$ 5,900.00	\$ .00		

(Enter (e) on Schedule E, Line 3)

**Schedule B Summary**

- Loans received this period ..... \$ .00  
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period ..... \$ .00  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (**Subtract** Line 2 from Line 1.) ..... **NET \$ .00**  
Enter the net here and on the Summary Page, Column A, Line 2.

(May be a negative number)

†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 forgiven or paid by another party also must be reported on Schedule A.

\*\* If required.

# Schedule B – Part 1 Loans Received

Amounts may be rounded  
to whole dollars.

Statement covers period from <u>07/01/2021</u> through <u>12/31/2021</u>	<b>CALIFORNIA FORM 460</b>
Page <u>5</u> of <u>7</u>	I.D. NUMBER <u>1340310</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Committee to Elect Rob Hammond for School Board 2020

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g)			
								CUMULATIVE CONTRIBUTIONS TO DATE			
Robert H. Hammond Monrovia, CA 91016 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-employed Neighborhood Pawn	\$ 4,000.00	\$ .00	<input type="checkbox"/> PAID \$ .00 <input type="checkbox"/> FORGIVEN \$ .00	\$ 4,000.00 12/31/111 DATE DUE	.00 % RATE \$ .00	\$ 4,000.00 12/14/11 DATE INCURRED	CALENDAR YEAR \$ .00 PER ELECTION** \$			
Robert H. Hammond Monrovia, CA 91016 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-employed Neighborhood Pawn	\$ 1,550.00	\$ .00	<input type="checkbox"/> PAID \$ .00 <input type="checkbox"/> FORGIVEN \$ .00	\$ 1,550.00 12/31/161 DATE DUE	.00 % RATE \$ .00	\$ 1,550.00 11/23/16 DATE INCURRED	CALENDAR YEAR \$ .00 PER ELECTION** \$			
Robert H. Hammond Monrovia, CA 91016 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-employed Neighborhood Pawn	\$ 100.00	\$ .00	<input type="checkbox"/> PAID \$ .00 <input type="checkbox"/> FORGIVEN \$ .00	\$ 100.00 12/31/18 DATE DUE	.00 % RATE \$ .00	\$ 100.00 12/31/18 DATE INCURRED	CALENDAR YEAR \$ .00 PER ELECTION** \$			
<b>SUBTOTALS</b>							\$ .00	\$ .00	\$ 5,650.00	\$ .00	

(Enter (e) on Schedule E, Line 3)

## Schedule B Summary

- Loans received this period ..... \$ .00  
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period ..... \$ .00  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (**Subtract** Line 2 from Line 1.) ..... **NET** \$ .00  
Enter the net here and on the Summary Page, Column A, Line 2.

(May be a negative number)

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(other than PTY or SCC)  
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PTY – Political Party  
SCC – Small Contributor Committee

\*Amounts forgiven or paid by another party also must be reported on Schedule A.

\*\* If required.

**Schedule B – Part 1  
Loans Received**

Amounts may be rounded  
to whole dollars.

Statement covers period from <u>07/01/2021</u> through <u>12/31/2021</u>	<b>CALIFORNIA FORM 460</b>
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I.D. NUMBER 1340310	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Committee to Elect Rob Hammond for School Board 2020

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g)
								CUMULATIVE CONTRIBUTIONS TO DATE
Robert H. Hammond Monrovia, CA 91016 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-employed Neighborhood Pawn	\$ 100.00	\$ .00	<input type="checkbox"/> PAID \$ .00 <input type="checkbox"/> FORGIVEN \$ .00	\$ 100.00 12/31/20 DATE DUE	.00 % RATE \$ .00	\$ 100.00 02/17/20 DATE INCURRED	CALENDAR YEAR \$ .00 PER ELECTION** \$
Robert H. Hammond Monrovia, CA 91016 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-employed Neighborhood Pawn	\$ 17,100.00	\$ .00	<input type="checkbox"/> PAID \$ .00 <input type="checkbox"/> FORGIVEN \$ .00	\$ 17,100.00 12/31/20 DATE DUE	.00 % RATE \$ .00	\$ 17,100.00 10/01/2021 DATE INCURRED	CALENDAR YEAR \$ .00 PER ELECTION** \$
  † <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$	\$	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN \$	\$ DATE DUE	% RATE \$	\$ DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$
<b>SUBTOTALS</b>		\$ .00	\$ .00	\$ .00	\$ 17,200.00	\$ .00		

(Enter (e) on Schedule E, Line 3)

**Schedule B Summary**

1. Loans received this period ..... (Total Column (b) plus unitemized loans of less than \$100.)	\$ .00
2. Loans paid or forgiven this period ..... (Total Column (c) plus loans under \$100 paid or forgiven.) (Include loans paid by a third party that are also itemized on Schedule A.)	\$ .00
3. Net change this period. ( <b>Subtract</b> Line 2 from Line 1.) ..... <b>NET</b>	\$ .00

(May be a negative number)

†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 forgiven or paid by another party also must be reported on Schedule A.  
\*\* If required.

**Schedule I  
Miscellaneous Increases to Cash**

Amounts may be rounded  
to whole dollars.

SCHEDULE I

Statement covers period  
from 07/01/2021  
through 12/31/2021

**CALIFORNIA  
FORM 460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Committee to Elect Rob Hammond for School Board 2020

I.D. NUMBER

1340310

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
08/02/2021	Los Angeles County Registrar-Recorder/County Clerk, Campaign Finance  Norwalk, CA 90650	Candidate Statement Refund for 11/03/2020	\$532.79

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL \$ 532.79**

**Schedule I Summary**

1. Itemized increases to cash this period. ....	\$ 532.79
2. Unitemized increases to cash of under \$100 this period. ....	\$ .00
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) .....	\$ .00
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) .....	<b>TOTAL \$ 532.79</b>

**Schedule B – Part 1  
Loans Received**

Amounts may be rounded to whole dollars.

Statement covers period from <u>07/01/2021</u> through <u>12/31/2021</u>	<b>CALIFORNIA FORM 460</b>
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FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g)
								CUMULATIVE CONTRIBUTIONS TO DATE
Robert H. Hammond Monrovia, CA 91016 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-employed Neighborhood Pawn	\$ 100.00	\$ .00	<input type="checkbox"/> PAID \$ .00 <input type="checkbox"/> FORGIVEN \$ .00	\$ 100.00 12/31/20 DATE DUE	.00 % RATE \$ .00	\$ 100.00 02/17/20 DATE INCURRED	CALENDAR YEAR \$ .00 PER ELECTION** \$
Robert H. Hammond Monrovia, CA 91016 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-employed Neighborhood Pawn	\$ 17,100.00	\$ .00	<input type="checkbox"/> PAID \$ .00 <input type="checkbox"/> FORGIVEN \$ .00	\$ 17,100.00 12/31/20 DATE DUE	.00 % RATE \$ .00	\$ 17,100.00 10/01/20 DATE INCURRED	CALENDAR YEAR \$ .00 PER ELECTION** \$
  † <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$	\$	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN \$	\$ DATE DUE	% RATE \$	\$ DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$
<b>SUBTOTALS</b>		\$ .00	\$ .00	\$ .00	\$ 17,200.00	\$ .00		

(Enter (e) on Schedule E, Line 3)

**Schedule B Summary**

1. Loans received this period ..... (Total Column (b) plus unitemized loans of less than \$100.)	\$ .00
2. Loans paid or forgiven this period ..... (Total Column (c) plus loans under \$100 paid or forgiven.) (Include loans paid by a third party that are also itemized on Schedule A.)	\$ .00
3. Net change this period. ( <b>Subtract</b> Line 2 from Line 1.) ..... <b>NET</b>	\$ .00

(May be a negative number)

†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 forgiven or paid by another party also must be reported on Schedule A.  
\*\* If required.