

**Recipient Committee
Campaign Statement
Cover Page**

1/31/22 FE

COVER PAGE

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CAMPAIGN FINANCE

CALIFORNIA 460
2001/02
FORM

Page 1 of 56
For Official Use Only

Statement covers period
from 07/01/21
through 12/31/21

Date of election if applicable:
(Month, Day, Year) 2022

SEE INSTRUCTIONS ON REVERSE

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:

- Freeelection 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
1404950

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
UNITE HERE Local 11 for Working Families

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Los Angeles	CA	90017	(213) 481-8530

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Los Angeles	CA	90017	(213) 452-6565

OPTIONAL: FAX/E-MAIL ADDRESS

(213) 452-6575 / sshin@kaufmanlegalgroup.com

Treasurer(s)

NAME OF TREASURER

Ada Briceno

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Los Angeles	CA	90017	(213) 481-8530

NAME OF ASSISTANT TREASURER, IF ANY

Susan Minato

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Los Angeles	CA	90017	(213) 481-8530

OPTIONAL: FAX/E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge and belief, the information contained herein is true and correct, and in the attached schedules is true and complete. I certify

Executed on 01/31/22
DATE

By _____
SIC

Executed on _____
DATE

By _____
SIGNATURE OF CONTROLLING OFFICERHOLDER, CANDIDATE, STATE MEASURE PROPONENT, OR RESPONSIBLE OFFICER OF PROPONENT

Executed on _____
DATE

By _____
SIGNATURE OF CONTROLLING OFFICERHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

Executed on _____
DATE

By _____
SIGNATURE OF CONTROLLING OFFICERHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

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

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

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE _____

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) _____

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP _____

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

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
-----------------------	---------------------

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		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 3 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

UNITE HERE Local 11 for Working Families

I.D. NUMBER

1404950

Contributions Received

	Column A Total This Period (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions..... Schedule A, Line 3	\$0.00	\$0.00
2. Loans Received..... Schedule B, Line 3	\$0.00	\$0.00
3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1+ 2	\$0.00	\$0.00
4. Nonmonetary Contributions..... Schedule C, Line 3	\$0.00	\$0.00
5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4	\$0.00	\$0.00

**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	Column B
6. Payments Made..... Schedule E, Line 4	\$199,752.08	\$273,856.19
7. Loans Made..... Schedule H, Line 3	\$0.00	\$0.00
8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7	\$199,752.08	\$273,856.19
9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3	-\$18,061.53	\$12,161.36
10. Nonmonetary Adjustment..... Schedule C, Line 3	\$0.00	\$0.00
11. TOTAL EXPENDITURES MADE..... Add Lines 8 +9 + 10	\$181,690.55	\$286,017.55

**Expenditure Limit Summary for State
Candidates**

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

Date of Election (mm/dd/yyyy)	Total to Date
_____	_____

Current Cash Statement

12. Beginning Cash Balance..... Previous Summary Page, Line 16	\$16,237.02
13. Cash Receipts..... Column A, Line 3 above	\$0.00
14. Miscellaneous Increases to Cash..... Schedule I, Line 4	\$186,905.05
15. Cash Payments..... Column A, Line 8 above	\$199,752.08
16. ENDING CASH BALANCE...Add Lines 12+13+14, then subtract Line 15	\$3,389.99

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

17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2	\$0.00
--	--------

Cash Equivalents and Outstanding Debts

18. Cash Equivalents..... See instructions on reverse	\$0.00
19. Outstanding Debts..... Add Line 2+Line 9 in Column B above	\$12,161.36

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 schedule B.

**Schedule C
Nonmonetary Contributions Received**

Amounts may be rounded to whole dollars.

SCHEDULE C

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 4 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/07/2021	UNITE HERE Local 11 (Nonprofit 501 (c) (5)) Los Angeles, CA 90017-2074 ID: 1405171	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Memo: \$484.00 Legal & Treasury Fees & Expenses Paid by	\$0.00	\$0.00	
09/07/2021	UNITE HERE Local 11 (Nonprofit 501 (c) (5)) Los Angeles, CA 90017-2074 ID: 1405171	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Memo: \$523.60 Legal & Treasury Fees & Expenses Paid by	\$0.00	\$0.00	
09/14/2021	UNITE HERE Local 11 (Nonprofit 501 (c) (5)) Los Angeles, CA 90017-2074 ID: 1405171	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Memo: \$1111.10 Legal & Treasury Fees & Expenses Paid by	\$0.00	\$0.00	

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$0.00

Schedule C Summary

1. Amount received this period -itemized nonmonetary contributions.

(Include all Schedule C subtotals.)..... \$0.00

2. Amount received this period -unitemized nonmonetary contributions of less than \$100.....

\$0.00

3. Total nonmonetary contributions received this period.

(Add Lines 1 and 2. Enter here on the Summary Page, Column A, Lines 4 and 10.)..... **TOTAL** \$0.00

*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

**Schedule C
Nonmonetary Contributions Received**

Amounts may be rounded to whole dollars.

SCHEDULE C

Statement covers period	CALIFORNIA FORM 460
from <u>7/1/2021</u>	
through <u>12/31/2021</u>	
Page <u>5</u> of <u>56</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/26/2021	UNITE HERE Local 11 (Nonprofit 501 (c) (5)) Los Angeles, CA 90017-2074 ID: 1405171	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Memo: \$1211.71 Legal & Treasury Fees & Expenses Paid by	\$0.00	\$0.00	
12/07/2021	UNITE HERE Local 11 (Nonprofit 501 (c) (5)) Los Angeles, CA 90017-2074 ID: 1405171	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Memo: \$426.50 Legal & Treasury Fees & Expenses Paid by	\$0.00	\$0.00	
12/27/2021	UNITE HERE Local 11 (Nonprofit 501 (c) (5)) Los Angeles, CA 90017-2074 ID: 1405171	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Memo: \$19239.53 Legal & Treasury Fees & Expenses Paid by	\$0.00	\$0.00	

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$0.00

Schedule C Summary

1. Amount received this period -itemized nonmonetary contributions.

(Include all Schedule C subtotals.)..... \$0.00

2. Amount received this period -unitemized nonmonetary contributions of less than \$100.....

\$0.00

3. Total nonmonetary contributions received this period.

(Add Lines 1 and 2. Enter here on the Summary Page, Column A, Lines 4 and 10.)..... **TOTAL** \$0.00

*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.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 6 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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 | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure | 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) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Abby Aaronson Los Angeles, CA 90017-2074	SAL		\$1,589.19
Daniel Aguilar Los Angeles, CA 90017-2074	SAL		\$243.64
Mark Alcalá Los Angeles, CA 90017-2074	SAL		\$2,524.73
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			SUBTOTAL \$4,357.56

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page <u>7</u> of <u>56</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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 |
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| 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) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Xiomara Alfaro Los Angeles, CA 90017-2074	SAL		\$1,833.90
Lucy Allen Los Angeles, CA 90017-2074	SAL		\$1,337.64
Michael Allen Los Angeles, CA 90017-2074	SAL		\$4,067.84

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

SUBTOTAL \$7,239.38

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 8 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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 |
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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Karen Almazan Los Angeles, CA 90017-2074	SAL		\$1,961.85
Andy Alvarado Galan Los Angeles, CA 90017-2074	SAL		\$2,777.65
Inbar Amitay Los Angeles, CA 90017-2074	SAL		\$222.55
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			SUBTOTAL \$4,962.05

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 9 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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 |
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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Olga Aquino Los Angeles, CA 90017-2074	SAL		\$423.10
Blanca Arguello Los Angeles, CA 90017-2074	SAL		\$3,836.48
Elliot Avila Los Angeles, CA 90017-2074	SAL		\$572.82

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

SUBTOTAL \$4,832.40

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 10 of 56

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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 |
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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Joshua Avila Los Angeles, CA 90017-2074	SAL		\$371.84
Sigrid Bantleon Los Angeles, CA 90017-2074	SAL		\$1,164.23
April Bautista Los Angeles, CA 90017-2074	SAL		\$668.58
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			SUBTOTAL \$2,204.65

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 11 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

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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 |
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| 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 | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Jennifer Beck Los Angeles, CA 90017-2074	SAL		\$4,212.73
Alice Blehart Los Angeles, CA 90017-2074	SAL		\$917.03
Eleanor Bray Los Angeles, CA 90017-2074	SAL		\$246.26

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

SUBTOTAL \$5,376.02

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period	CALIFORNIA FORM 460
from <u>7/1/2021</u> through <u>12/31/2021</u>	
Page <u>12</u> of <u>56</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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 | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure | 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) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Jonah Breslau Los Angeles, CA 90034-3150		Reissued Check	\$608.29
Maria Buenrostro Los Angeles, CA 90017-2074	SAL		\$681.98
Silvia Carreno Los Angeles, CA 90017-2074	SAL		\$4,516.99
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			SUBTOTAL \$5,807.26

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 13 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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

- | | | |
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| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
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| LIT 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
Estefany Castaneda Los Angeles, CA 90017-2074	SAL		\$2,324.96
Francisco Cervantes Los Angeles, CA 90017-2074	SAL		\$159.76
Alexandra Cheney Los Angeles, CA 90017-2074	SAL		\$2,769.45

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

SUBTOTAL \$5,254.17

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 14 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Mario Cook Los Angeles, CA 90017-2074	SAL		\$808.83
Ray Corpus Los Angeles, CA 90017-2074	SAL		\$698.62
Krisna Crawford-Velasco Los Angeles, CA 90017-2074	SAL		\$188.70

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

SUBTOTAL \$1,696.15

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 15 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
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| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
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| LIT 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
Robert Cristo Los Angeles, CA 90017-2074	SAL		\$443.10
Miguel Cubillos Molina Los Angeles, CA 90017-2074	SAL		\$1,326.19
Angel Cuevas Los Angeles, CA 90017-2074	SAL		\$146.95

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

SUBTOTAL \$1,916.24

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period	CALIFORNIA FORM 460
from <u>7/1/2021</u> through <u>12/31/2021</u>	
Page <u>16</u> of <u>56</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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

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|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
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| LIT 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
Miguel Curiel Los Angeles, CA 90017-2074	SAL		\$2,062.12
Augusto Dabos Los Angeles, CA 90017-2074	SAL		\$661.51
Maria Del Rosario Pacheco Los Angeles, CA 90017-2074	SAL		\$1,666.15

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

SUBTOTAL \$4,389.78

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 17 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER UNITE HERE Local 11 for Working Families	I.D. NUMBER 1404950
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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 |
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| 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) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Ana Diaz Los Angeles, CA 90017-2074	SAL		\$1,196.10
Cindi Duran Los Angeles, CA 90017-2074	SAL		\$159.76
Rima Elbast Los Angeles, CA 90017-2074	SAL		\$2,770.79

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL** \$4,126.65

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period	CALIFORNIA FORM 460
from <u>7/1/2021</u> through <u>12/31/2021</u>	
Page <u>18</u> of <u>56</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
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| 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 |
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| LIT 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
Employment Development Department Los Angeles, CA 90017-5328		Payroll Taxes	\$1,900.06
Sophie Escobar Los Angeles, CA 90017-2074	SAL		\$343.22
Dillon Foster Los Angeles, CA 90017-2074	SAL		\$1,527.96
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			SUBTOTAL \$3,771.24

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 19 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

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| LIT 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
Gerald Garcia Los Angeles, CA 90017-2074	SAL		\$1,751.16
Oscar Garcia Los Angeles, CA 90017-2074	SAL		\$578.84
Danilo Goldfarb Cartwright Los Angeles, CA 90017-2074	SAL		\$407.72
* Payments that are contributions or Independent expenditures must also be summarized on Schedule D.			SUBTOTAL \$2,737.72

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from <u>7/1/2021</u>	through <u>12/31/2021</u>	
		Page <u>20</u> of <u>56</u>

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NAME OF FILER
UNITE HERE Local 11 for Working Families

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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Axel Gonzalez Los Angeles, CA 90017-2074	SAL		\$374.02
Silviano Gonzalez Los Angeles, CA 90017-2074	SAL		\$1,357.94
Giacomo Green Los Angeles, CA 90017-2074	SAL		\$1,275.03
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			
SUBTOTAL			\$3,006.99

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 21 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER UNITE HERE Local 11 for Working Families	I.D. NUMBER 1404950
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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Rosin Hem Los Angeles, CA 90017-2074	SAL		\$1,382.60
Krissia Hernandez Canas Los Angeles, CA 90017-2074	SAL		\$2,008.29
Monica Hernandez Los Angeles, CA 90017-2074	SAL		\$368.46
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			
SUBTOTAL			\$3,759.35

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
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4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 22 of 56

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NAME OF FILER UNITE HERE Local 11 for Working Families	I.D. NUMBER 1404950
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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Mitchell Hutchinson Los Angeles, CA 90017-2074	SAL		\$2,825.02
Steven Hutchinson Los Angeles, CA 90017-2074	SAL		\$2,094.98
Internal Revenue Service Los Angeles, CA 90012-3469		Payroll Taxes	\$40,154.94

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

SUBTOTAL \$45,074.94

Schedule E Summary

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4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 23 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER UNITE HERE Local 11 for Working Families	I.D. NUMBER 1404950
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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Dominic Jasso Los Angeles, CA 90017-2074	SAL		\$3,232.04
Jens Jebson Los Angeles, CA 90017-2074	SAL		\$1,058.47
Eria Kien Los Angeles, CA 90017-2074	SAL		\$1,534.39

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

SUBTOTAL \$5,824.90

Schedule E Summary

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**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 24 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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 | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure | 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) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Robert Kole Los Angeles, CA 90017-2074	SAL		\$3,597.91
Fantine Langon Los Angeles, CA 90017-2074	SAL		\$246.30
Jose Leyva Los Angeles, CA 90017-2074	SAL		\$3,578.21
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			SUBTOTAL \$7,422.42

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 25 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER UNITE HERE Local 11 for Working Families	I.D. NUMBER 1404950
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CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

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| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
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| LIT 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
Charles Light Los Angeles, CA 90017-2074	SAL		\$393.87
Andrew Linares Los Angeles, CA 90017-2074	SAL		\$306.12
Irvin Luna Los Angeles, CA 90017-2074	SAL		\$159.76

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL** \$859.75

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460	
from	7/1/2021	Page	26 of 56
through	12/31/2021		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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

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|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Christopher Maiorino Los Angeles, CA 90017-2074	SAL		\$480.49
Kilmer Manzanares Los Angeles, CA 90017-2074		Reissued Check	\$591.04
Miles Margulies Los Angeles, CA 90017-2074	SAL		\$1,112.02

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

SUBTOTAL \$2,183.55

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 27 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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

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|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
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| LIT 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
Nancy Marroquin Los Angeles, CA 90017-2074	SAL		\$2,210.65
Bridget McConaughy Los Angeles, CA 90017-2074	SAL		\$5,029.41
Blair McManus Los Angeles, CA 90017-2074	SAL		\$667.51
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			SUBTOTAL \$7,907.57

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 28 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Carlos Melchor Los Angeles, CA 90017-2074	SAL		\$552.75
Jonathan Mendoza Los Angeles, CA 90017-2074	SAL		\$292.58
Genesis Merida Los Angeles, CA 90017-2074	SAL		\$1,117.74

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

SUBTOTAL \$1,963.07

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 29 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER UNITE HERE Local 11 for Working Families	I.D. NUMBER 1404950
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CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Velvet Merida Los Angeles, CA 90017-2074	SAL		\$1,452.16
Jonathan Meyer Los Angeles, CA 90017-2074	SAL		\$282.58
Thomas Meyer Los Angeles, CA 90017-2074	SAL		\$268.58

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL** \$2,003.32

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 30 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Maria Meza Los Angeles, CA 90017-2074		Reissued Check	\$139.95
Marion Moseley Los Angeles, CA 90017-2074	SAL		\$349.98
Daniel Orea Los Angeles, CA 90017-2074	SAL		\$1,526.13

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

SUBTOTAL \$2,016.06

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

SEE INSTRUCTIONS ON REVERSE

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 31 of 56

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Ximena Oritz Los Angeles, CA 90017-2074	SAL		\$308.28
Julissa Ortiz-Morales Los Angeles, CA 90017-2074	SAL		\$399.10
Camilo Otero Los Angeles, CA 90017-2074	SAL		\$534.69

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

SUBTOTAL \$1,242.07

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 32 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Lidia Paredes Atz Los Angeles, CA 90017-2074	SAL		\$2,871.64
Kevin Paredes Los Angeles, CA 90017-2074	SAL		\$408.34
Ryan Park Los Angeles, CA 90017-2074	SAL		\$1,790.49
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			SUBTOTAL \$5,070.47

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 33 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Aldo Perez Los Angeles, CA 90017-2074	SAL		\$1,961.18
Catalina Perez Los Angeles, CA 90017-2074	SAL		\$297.52
Silvia Perez Los Angeles, CA 90017-2074		Reissued Check	\$20.00

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

SUBTOTAL \$2,278.70

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

Amounts may be rounded to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 34 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Parnian Fourvahidi Los Angeles, CA 90017-2074	SAL		\$147.76
Marcus Preston Los Angeles, CA 90017-2074	SAL		\$3,599.72
Escarled Prieto-Hernandez Los Angeles, CA 90017-2074	SAL		\$395.87
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			SUBTOTAL \$4,143.35

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 35 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER UNITE HERE Local 11 for Working Families	I.D. NUMBER 1404950
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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Janelly Quintana Los Angeles, CA 90017-2074	SAL		\$149.76
River City Business Services Sacramento, CA 95841-3111	OFC		\$3,850.25
Hector Rodriguez Los Angeles, CA 90017-2074	SAL		\$1,520.48

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL** \$5,520.49

Schedule E Summary

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2. Unitemized payments made this period of under \$100.....	\$797.55
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4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 36 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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| 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 | 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) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Isabella Rubio Los Angeles, CA 90017-2074	SAL		\$1,372.93
Paula Salcedo Los Angeles, CA 90017-2074	SAL		\$249.34
Isaac Sanchez Los Angeles, CA 90017-2074	SAL		\$147.76
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			SUBTOTAL \$1,770.03

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 37 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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 |
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| LIT 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
Mya Sanchez Los Angeles, CA 90017-2074	SAL		\$1,038.35
Janib Saravia Los Angeles, CA 90017-2074	SAL		\$1,516.34
Colin Scholl Los Angeles, CA 90017-2074	SAL		\$780.98

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

SUBTOTAL \$3,337.67

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460	
from	7/1/2021	Page	38 of 56
through	12/31/2021		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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

- | | | |
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| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
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| LIT 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
Gabriel Schreiber Los Angeles, CA 90017-2074	SAL		\$1,407.39
Yajaira Sesmas Los Angeles, CA 90017-2074		Reissued Check	\$93.50
Yajaira Sesmas Los Angeles, CA 90017-2074	SAL		\$3,179.33

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

SUBTOTAL \$4,680.22

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460	
from	7/1/2021	Page	39 of 56
through	12/31/2021		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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

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|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
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| 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) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Christopher Smith Los Angeles, CA 90017-2074	SAL		\$1,062.28
Connor Smith Los Angeles, CA 90017-2074	SAL		\$1,308.73
Elena Smith Los Angeles, CA 90017-2074	SAL		\$2,241.04
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			SUBTOTAL \$4,612.05

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 40 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
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- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
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| LIT 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
Mason Smith Los Angeles, CA 90017-2074	SAL		\$4,042.42
Tahj Smith-Fletcher Los Angeles, CA 90017-2074	SAL		\$3,015.52
Jasmine Sozi Los Angeles, CA 90017-2074		Reissued Check	\$83.11

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

SUBTOTAL \$7,141.05

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 41 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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 |
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| LIT 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
State Compensation Insurance Fund San Francisco, CA 94104-2868	OFC		\$1,323.00
Duncan Stever Los Angeles, CA 90017-2074	SAL		\$282.58
Elissa Sung Los Angeles, CA 90017-2074	SAL		\$1,201.09
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			SUBTOTAL \$2,806.67

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 42 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER UNITE HERE Local 11 for Working Families	I.D. NUMBER 1404950
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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 |
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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Leah Sweeney Los Angeles, CA 90017-2074	SAL		\$784.48
Lean Sweeney Los Angeles, CA 90017-2074	SAL		\$157.76
Michael Tagle Los Angeles, CA 90017-2074	SAL		\$297.52
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			SUBTOTAL \$1,239.76

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 43 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER UNITE HERE Local 11 for Working Families	I.D. NUMBER 1404950
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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 |
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| 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 | 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) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Adam Tello Los Angeles, CA 90017-2074	SAL		\$232.40
Alexis Teodoro Los Angeles, CA 90017-2074	SAL		\$2,653.84
Isabela Tevanyan Los Angeles, CA 90017-2074	SAL		\$3,345.65

* Payments that are contributions or Independent expenditures must also be summarized on Schedule D. **SUBTOTAL** \$6,231.89

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 44 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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 |
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| 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 |
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| IND independent expenditure | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
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| LIT 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
Carmen Vanegas Los Angeles, CA 90017-2074	SAL		\$150.52
Andranik Vartanyan Los Angeles, CA 90017-2074	SAL		\$459.57
Carlos Vazquez Los Angeles, CA 90017-2074	SAL		\$705.14

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

SUBTOTAL \$1,315.23

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period	CALIFORNIA FORM 460
from <u>7/1/2021</u> through <u>12/31/2021</u>	
Page <u>45</u> of <u>56</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER UNITE HERE Local 11 for Working Families	I.D. NUMBER 1404950
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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 |
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| LIT 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
Yoselin Villalta Los Angeles, CA 90017-2074		Reissued Check	\$591.04
Stephanie Wade Los Angeles, CA 90017-2074	SAL		\$1,495.64
Edwin Williams Los Angeles, CA 90017-2074	SAL		\$562.88

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL** \$2,649.56

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

. Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 46 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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 |
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| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
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| LIT 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
Preston Williams Los Angeles, CA 90017-2074	SAL		\$502.02
Danielle Wilson Los Angeles, CA 90017-2074		Reissued Check	\$54.61
Michael Wineland Los Angeles, CA 90017-2074	SAL		\$749.56

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL** \$1,306.19

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	-\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 47 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Dontae Witt Los Angeles, CA 90017-2074	SAL		\$542.07
Miya Woo Los Angeles, CA 90017-2074	SAL		\$1,469.04
Kimia Yousefpour Ardestani Los Angeles, CA 90017-2074	SAL		\$802.48

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

SUBTOTAL \$2,813.59

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 48 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER UNITE HERE Local 11 for Working Families	I.D. NUMBER 1404950
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CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

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| 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) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Rebecca Zych Los Angeles, CA 90017-2074	SAL		\$102.35

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

SUBTOTAL \$102.35

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$198,954.53
2. Unitemized payments made this period of under \$100.....	\$797.55
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$199,752.08

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

Amounts may be rounded to whole dollars.

SCHEDULE F

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 49 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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 | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure | 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) |

NAME AND ADDRESS OF CRÉDITOR (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
Clergy and Laity United for Economic Justice Los Angeles, CA 90017-2074	SAL	\$7,809.38	\$0.00	\$0.00	\$7,809.38
Kaufman Legal Group Los Angeles, CA 90017-5864	PRO, Paid by Sponsor	\$9,311.50	(\$9,311.50)	\$0.00	\$0.00
Kaufman Legal Group Los Angeles, CA 90017-5864	OFC, Paid by Sponsor	\$0.79	(\$0.79)	\$0.00	\$0.00
SUBTOTALS		\$17,121.67	-\$9,312.29	\$0.00	\$7,809.38

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

Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)	INCURRED TOTALS	(\$18,061.53)
2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)	PAID TOTALS	\$0.00
3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)	NET	(\$18,061.53)

(May be a negative number)

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

Amounts may be rounded
to whole dollars.

SCHEDULE F

Statement covers period		CALIFORNIA FORM 460
from	7/1/2021	
through	12/31/2021	Page 50 of 56

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure	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)

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
Kaufman Legal Group Los Angeles, CA 90017-5864	OFC, Paid by Sponsor	\$451.05	(\$451.05)	\$0.00	\$0.00
Kaufman Legal Group Los Angeles, CA 90017-5864	PRO, Paid by Sponsor	\$2,075.50	(\$2,075.50)	\$0.00	\$0.00
Kaufman Legal Group Los Angeles, CA 90017-5864	OFC, Paid by Sponsor	\$442.87	(\$442.87)	\$0.00	\$0.00
SUBTOTALS		\$2,969.42	-\$2,969.42	\$0.00	\$0.00

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

Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)	INCURRED TOTALS	(\$18,061.53)
2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)	PAID TOTALS	\$0.00
3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)	NET	(\$18,061.53) (May be a negative number)

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

Amounts may be rounded to whole dollars.

SCHEDULE F

Statement covers period	CALIFORNIA FORM 460
from 7/1/2021	
through 12/31/2021	
Page 51 of 56	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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 | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure | 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) |

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
Kaufman Legal Group Los Angeles, CA 90017-5864	PRO, Paid by Sponsor	\$5,718.00	(\$5,718.00)	\$0.00	\$0.00
Kaufman Legal Group Los Angeles, CA 90017-5864	OFC, Paid by Sponsor	\$1,039.82	(\$1,039.82)	\$0.00	\$0.00
Kaufman Legal Group Los Angeles, CA 90017-5864	PRO	\$0.00	\$978.00	\$0.00	\$978.00
SUBTOTALS		\$6,757.82	-\$5,779.82	\$0.00	\$978.00

Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)	INCURRED TOTALS	(\$18,061.53)
2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)	PAID TOTALS	\$0.00
3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)	NET	(\$18,061.53)

(May be a negative number)

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

Amounts may be rounded
to whole dollars.

SCHEDULE F

Statement covers period	CALIFORNIA FORM 460
from 7/1/2021	
through 12/31/2021	
Page 52 of 56	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

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 | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure | 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) |

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
UNITE HERE Local 11 (Nonprofit 501 (c) (5)) Los Angeles, CA 90017-2074 ID: 1405171	IND, Voter Data, Referendum against Ordinance No. 19- 3,926, Support	\$1,800.00	\$0.00	\$0.00	\$1,800.00
UNITE HERE Local 11 PAC Los Angeles, CA 90017-2074 ID: 981585	IND, Field Program Expenses, Referendum against Ordinance No. 19- 3,926, Support	\$1,492.38	\$0.00	\$0.00	\$1,492.38

*Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$3,292.38	\$0.00	\$0.00	\$3,292.38
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Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)	INCURRED TOTALS	(\$18,061.53)
2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)	PAID TOTALS	\$0.00
3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)	NET	(\$18,061.53) <small>(May be a negative number)</small>

**Schedule I
Miscellaneous Increases to Cash**

Amounts may be rounded to whole dollars.

SCHEDULE I

Statement covers period	CALIFORNIA FORM 460
from <u>7/1/2021</u>	
through <u>12/31/2021</u>	
Page <u>53</u> of <u>56</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
08/16/2021	Jonah Breslau Los Angeles, CA 90034-3150	Voided Check	\$608.29
11/02/2021	Citizens for a Better Glendale, Sponsored by UNITE HERE Local 11 Los Angeles, CA 90017-5864 ID: 1441802	Reimbursement	\$6,564.90
11/16/2021	Citizens for a Better Glendale, Sponsored by UNITE HERE Local 11 Los Angeles, CA 90017-5864 ID: 1441802	Reimbursement	\$70,374.66
11/24/2021	Citizens for a Better Glendale, Sponsored by UNITE HERE Local 11 Los Angeles, CA 90017-5864 ID: 1441802	Reimbursement	\$52,596.62
12/07/2021	Citizens for a Better Glendale, Sponsored by UNITE HERE Local 11 Los Angeles, CA 90017-5864 ID: 1441802	Reimbursement	\$5,701.60

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$135,846.07

Schedule I Summary

1. Itemized increases to cash this period.....	\$186,421.90
2. Unitemized increases to cash of under \$100 this period.....	\$483.15
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e)).	\$0.00
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.).....	TOTAL \$186,905.05

**Schedule I
Miscellaneous Increases to Cash**

Amounts may be rounded to whole dollars.

SCHEDULE I

Statement covers period	CALIFORNIA FORM 460
from <u>7/1/2021</u>	
through <u>12/31/2021</u>	
Page <u>54</u> of <u>56</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
12/21/2021	Citizens for a Better Glendale, Sponsored by UNITE HERE Local 11 Los Angeles, CA 90017-5864 ID: 1441802	Reimbursement	\$33,919.81
11/02/2021	Citizens for a Sustainable Laguna Beach, Sponsored by Unite Here Local 11 Los Angeles, CA 90017-5864 ID: 1441800	Reimbursement	\$12,835.43
11/16/2021	Citizens for a Sustainable Laguna Beach, Sponsored by Unite Here Local 11 Los Angeles, CA 90017-5864 ID: 1441800	Reimbursement	\$5,754.46
12/07/2021	Citizens for a Sustainable Laguna Beach, Sponsored by Unite Here Local 11 Los Angeles, CA 90017-5864 ID: 1441800	Reimbursement	\$3,168.14
12/21/2021	Citizens for a Sustainable Laguna Beach, Sponsored by Unite Here Local 11 Los Angeles, CA 90017-5864 ID: 1441800	Reimbursement	\$5,080.42

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$60,758.26

Schedule I Summary

1. Itemized increases to cash this period.....	\$186,421.90
2. Unitemized increases to cash of under \$100 this period.....	\$483.15
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e)).....	\$0.00
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.).....	TOTAL \$186,905.05

**Schedule I
Miscellaneous Increases to Cash**

Amounts may be rounded
to whole dollars.

SCHEDULE I

Statement covers period from <u>7/1/2021</u> through <u>12/31/2021</u>	CALIFORNIA FORM 460 Page <u>55</u> of <u>56</u>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
08/11/2021	Internal Revenue Service Los Angeles, CA 90012-3469	Voided Check	\$385.68
08/16/2021	Kilmer Manzanares Los Angeles, CA 90017-2074	Voided Check	\$591.04
08/16/2021	Maria Meza Los Angeles, CA 90017-2074	Voided Check	\$139.95
08/16/2021	Silvia Perez Los Angeles, CA 90017-2074	Voided Check	\$20.00
08/11/2021	River City Business Services Sacramento, CA 95841-3111	Voided Check	\$151.00

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$1,287.67

Schedule I Summary

1. Itemized increases to cash this period.....	\$186,421.90
2. Unitemized increases to cash of under \$100 this period.....	\$483.15
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e)).....	\$0.00
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.).....	TOTAL \$186,905.05

**Schedule I
Miscellaneous Increases to Cash**

Amounts may be rounded to whole dollars.

SCHEDULE I

Statement covers period	CALIFORNIA FORM 460
from <u>7/1/2021</u>	
through <u>12/31/2021</u>	
Page <u>56</u> of <u>56</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
UNITE HERE Local 11 for Working Families

I.D. NUMBER
1404950

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
08/16/2021	Yoselin Villalta Los Angeles, CA 90017-2074	Voided Check	\$591.04
07/23/2021	Working Families to Support Foley for Supervisor in 2021, Sponsored by Labor Organizations Los Angeles, CA 90017-5864 ID: Pending	Refund of Excess Reimbursement	-\$12,061.14

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL -\$11,470.10

Schedule I Summary

1. Itemized increases to cash this period.....	\$186,421.90
2. Unitemized increases to cash of under \$100 this period.....	\$483.15
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e)).....	\$0.00
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.).....	TOTAL \$186,905.05