Recipient Committee Campaign Statement Cover Page — Part 2

	COVER	PAGE	-PART 2
CALIF	ORNIA	A	20
FO	RM		
Bass	2	of	45
Page		O1	-73

Off	iceholder or Candidate Controlled Comr	mittee	6.	Primarily Formed Ballo	t Measure	Committee	•	
NAM	E OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE				
Jos	eph A. Guardarrama							
OFF	ICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	ICT NUMBER IF APPLICABLE	E)	BALLOT NO. OR LETTER	JURISDICTIC	N		SUPPORT
Cit	y Council Member: West Hollywood							OPPOSE
		CITY STATE	ZIP 90017	Identify the controlling offi	ceholder, can	ididate, or st	ate measure	proponent, if any
				NAME OF OFFICEHOLDER, CAN	DIDATE, OR PR	OPONENT		
not	lated Committees Not Included in this St included in this statement that are controlled by you tributions or make expenditures on behalf of your ca	or are primarily formed to		OFFICE SOUGHT OR HELD			DISTRICT NO). IF ANY
COM	IMITTEE NAME	1.D. NUMBER					<u> </u>	
			7	Primarily Formed Cand	lidate/Offic	eholder Co	nmittee	List names of
NAM	E OF TREASURER	CONTROLLED COMMITTE	EE?	officeholder(s) or candidate(s)				
COV	MITTEE ADDRESS STREET ADDRESS (NO P.O.	BOX)		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
CIT	STATE ZIP	CODE AREA COD	E/PHONE	NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
CON	MITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
NAM	IE OF TREASURER	CONTROLLED COMMITTE	EE?	NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT
	MITTEE ADDRESS STREET ADDRESS (NO P.O.	YES NO						OPPOSE
CON	MMITTEE ADDRESS STREET ADDRESS (NO P.O.	BUA)				1		
CIT	STATE ZIP	CODE AREA COD	E/PHONE	Attac	h continuatio	on sheets if i	necessary	

Campaign Disclosure Statement **Summary Page**

Type or print in ink, Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period **CALIFORNIA** FORM 01/18/2015 from _ Page ___3 __ of ___45 02/14/2015 through _ I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1373463

Joe Guardarrama for Council 2015					1373463
Contributions Received	(Column A TOTAL THIS PERIOD (FROMATTACHED SCHEDULES)		COLUMN B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions Schedule A, Line 3	\$	41,325.00	\$	56,025.00	1/1 through 6/30 7/1 to Date
2. Loans Received		0.00		0,00	
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	41,325.00	\$	56,025.00	20. Contributions Received \$ \$
4. Nonmonetary Contributions		200.00		700.00	21. Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	41,525.00	\$	56,725.00	Made \$\$
Expenditures Made					Expenditure Limit Summary for State
6. Payments Made				44,516.81	Candidates
7. Loans Made				0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7			\$	44,516.81	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)				750,00	Date of Election Total to Date (mm/dd/yy)
10. Nonmonetary Adjustment				700.00	
11. TOTAL EXPENDITURES MADE	\$	43,037.17	\$	45,966.81	 \$
Current Cash Statement					\$
12. Beginning Cash Balance Previous Summary Page, Line 16				calculate Column B, add	
13. Cash Receipts Column A, Line 3 above		41,325.00		nounts in Column A to the rresponding amounts	*Amounts in this section may be different from amounts
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	m Column B of your last	reported in Column B.
15. Cash Payments Column A, Line 8 above		42,712.17	Co	oort. Some amounts in slumn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	21,677.83		ures that should be btracted from previous	
If this is a termination statement, Line 16 must be zero.			pe	riod amounts. If this is	
17. LOAN GUARANTEES RECEIVED Schedule 8, Part 2	\$	0.00	for ca	this calendar year, only rry over the amounts	
Cash Equivalents and Outstanding Debts				m Lines 2, 7, and 9 (if y).	
18. Cash Equivalents See instructions on reverse					
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	750.00			FPPC Form 460 (January/05 FPPC Toil-Free Helpline: 866/ASK-FPPC (866/275-3772

Schedule Monetary		ributions Received	Amount	e or print in Ink. is may be rounded whole dollars.	Statement covers period from01/18/2015			SORNIA 460	_ 725
SEE INSTRUCTIO	NS ON E	REVERSE			through _02/14/20	015	Page _	4 of45	_
NAME OF FILER	7110 011)						I.D. NUI	MBER	
- ~ 1		2 12 2225					13734	< > -	
Joe Guardari	rama i	or Council 2015					13/34	0.3	
DATE RECEIVED	FULL I	NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
01/26/2015	11684	Associates Ventura Blvd., #807 o City, CA 91604	□IND □COM 図OTH □PTY □SCC		500.00	5	500.00		
01/28/2015	655 N	Adler Robertson Blvd. Hollywood, CA 90069	IND ☐COM ☐OTH ☐PTY ☐SCC	President Phyllis Morris	250.00	2	250.00		
02/13/2015	11060	lt Lumber Co. West Pico Blvd. Ingeles, CA 90064	□IND □COM 図OTH □PTY □SCC		500.00	, ,	500.00		
01/28/2015	2740	Management W. Magnolia Blvd. Suite, 204 nk, CA 91505	□IND □COM ☑OTH □PTY □SCC		250.00		250.00		
01/18/2015	3539	n Ashkenazy Beverly Ridge Drive an Oaks, CA 91423	⊠IND □COM □OTH □PTY □SCC	Lawyer Hotel Petit Ermitage	500.00		500.00		
				SUBTOTAL\$	2,000.00				
(Include a	eceived Il Sche	this period – itemized monetary contributions. dule A subtotals.)				IND- COM	(other		
2. Amount re	eceived	I this period – unitemized monetary contribution	s of less than	\$100 \$	0.00	PTY-	– Politica	Party	
		ontributions received this period.	mn A line 1) ΤΩΤΔΙ ¢	41,325.00	scc	Small C	ontributor Committee	ر:

Schedule A (Continuation Sheet) Monetary Contributions Received		Type or pri Amounts may to whole	be rounded	Statement cover from01/18/ through02/14/	SCHEDULE A (CONCALIFORNIA FORM 460 Page 5 of 45 I.D. NUMBER		
Joe Guardarra	ama for Council 2015	1				13734	63
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)
01/18/2015	Magdalena Ashkenazy 3539 Beverly Ridge Drive Sherman Oaks, CA 91423	⊠IND □COM □OTH □PTY □SCC	Actress Mielcarz Inc.	500.00	E	500.00	
02/10/2015	Athens Services 1301 W. 228th Street Torrance, CA 90501	□IND □COM 図OTH □PTY □SCC		500.00	c	500.00	
01/27/2015	Saralee M. Baldwin 9024 Cynthia St. #201 West Hollywood, CA 90069	⊠IND □COM □OTH □PTY □SCC	Investor/Broker Saralee M. Baldwin	100.00	1	100.00	
01/28/2015	Kathleen Bartolo 8990 Lloyd Place West Hollywood, CA 90069	⊠IND □COM □OTH □PTY □SCC	Owner Bartolo & Associates	200.00	2	200.00	
02/13/2015	Arda Berberian 11620 Wilshire Blvd Los Angeles, CA 90025	⊠IND □COM □OTH □PTY □SCC	Director Empire Property Group LLC	250.00	2	250.00	

SUBTOTAL\$

1,550.00

*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

	A (Continuation Sheet) Contributions Received	Type or pri Amounts may to whole (be rounded	Statement cove	2015	schedule a (CONTALIFORNIA 460 FORM
				through 02/14/		age 6 of 45 D. NUMBER
NAME OF FILER Joe Guardarra	uma for Council 2015					3.73463
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEAF (JAN, 1 - DEC. 31	R TO DATE
01/18/2015	Alan Bernstein 301 S. Rimpau Blvd. Los Angeles, CA 90020	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Property Manager Harper Management	200.00	200	00
02/10/2015	BizFed PAC (ID# 1305594) 455 Capitol Mall, Suite 600 Sacramento, CA 95814	☐IND INCOM ☐OTH ☐PTY ☐SCC		500.00	500	.00
01/28/2015	Black Equities 433 N Camden Drive, #1070 Beverly Hills, CA 90210	□IND □COM ②OTH □PTY □SCC		500.00	500	.00
01/28/2015	Kawanna Brown 1330 Roscomare Road Los Angeles, CA 90077	⊠IND □COM □OTH □PTY □SCC	Executive Magic Johnson Enterprises			
02/12/2015	Nicki Carlsen 6401 W. 80th Street Los Angeles, CA 90045	⊠IND □COM □OTH □PTY □SCC	Attorney Alston & Bird LLP	500.00	500	.00

SUBTOTAL\$

1,800.00

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Schedule A (Continuation Sheet) Monetary Contributions Received NAME OF FILER Joe Guardarrama for Council 2015		Type or pri Amounts may to whole o	be rounded	Statement cove	CALIF	SCHEDULE A (CON' ALIFORNIA 460 FORM	
				from01/18/ through02/14/	2013	Page 7 of 45 I.D. NUMBER 1373463	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE T CALENDAR \ (JAN. 1 - DE(YEAR	PER ELECTION TO DATE (IF REQUIRED)
02/13/2015	William Carrick 2866 Belden Drive Los Angeles, CA 90068	XIND □COM □OTH	Political Consultant William Carrick	500.00		500.00	

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD	CALENDAR YEAR (JAN. 1 - DEC. 31)	TO DATE (IF REQUIRED)
02/13/2015	William Carrick 2866 Belden Drive Los Angeles, CA 90068	⊠IND □COM □OTH □PTY □SCC	Political Consultant William Carrick	500.00	500.00	
01/22/2015	Michael Catalano 3401 Coy Drive Sherman Oaks, CA 91423	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Marketing Celebrities Plus, Inc.	500.00		
02/03/2015	Daniel Chang 15203 Weddington Street Sherman Oaks, CA 91411	☑IND □COM □OTH □PTY □SCC	Director Great Public Schools Los Angeles	50.00	50.00	
01/30/2015	Clear Channel Worldwide 19320 Harborgate Way Torrance, CA 90501	⊠IND □COM □OTH □PTY □SCC		500.00		
01/28/2015	Dana Cohn 714 N Alfred Street Los Angeles, CA 90069	XIND ☐COM ☐OTH ☐PTY ☐SCC	Owner DMC Design	250.00	250.00	
			SUBTOTAL	\$ 1,800.00		

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SCC – Small Contributor Committee

Type or print in ink. Amounts may be rounded to whole dollars.

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CALIFORNIA ACO

Statement covers period

				from01/18/	2015	FORM TOU
				through02/14/	1 45	ge <u>8</u> of <u>45</u>
NAME OF FILER					I.D.	NUMBER
Joe Guardarra	ama for Council 2015				13	73463
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DAT CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
01/18/2015	Marco Colantonio 1138 Hacienda Place, Apt 208 West Hollywood, CA 90069	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Realtor DW Properties, LLC	100.00	100.	00
02/12/2015	Demetri Darmos 999 N. Doheny Drive, #1109 West Hollywood, CA 90069	⊠IND □COM □OTH □PTY □SCC	Developer Kings 826 LP	500.00	500.0	00
02/06/2015	Richard Davidoff 433 N Camden Drive, Ste.888 Beverly Hills, CA 90210	⊠IND □COM □OTH □PTY □SCC	Partner Davidoff and Davidoff Attorneys at Law	500.00 Received through inter Davidoff and Davidoff 433 N Camden Drive, St Beverly Hills, CA 90	mediary: Attorneys at Law te.888	00
01/27/2015	Kathryn Dunn 912 N Cindy Clovis, CA 93611	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Education Clovis Unified School District	100.00	100.1	00
01/29/2015	John Duran 9000 Sunset Blvd., #710 West Hollywood, CA 90069	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Duran Law Group	250.00	250.1	00
			SUBTOTAL	\$ 1,450.00		

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Type or print in ink. Amounts may be rounded to whole dollars.

SCF	(EDI)	IFA	(CONT.)

Statement covers period

Monetary Contributions Received		Amounts may to whole o		\$tatement cove from01/18/ through02/14/	2015	CALIFORNIA 460 Page 9 of 45	
NAME OF FILER				Y	I.D. I	NUMBER	
Joe Guardarra	ama for Council 2015				137	3463	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
01/28/2015	E.T. Legg & Associates 11684 Ventura Blvd., #807 Studio City, CA 91604	□IND □COM 図OTH □PTY □SCC		500.00	500.00		
02/03/2015	Todd Eberstein 3100 Monticello Dallas, TX 75205	⊠IND □COM □OTH □PTY □SCC	Trader MESA	500.00	500.0		
02/12/2015	Electric Supply Connection, Inc. 12220 W. Pico Blvd. Los Angeles, CA 90064	□IND □COM ☑OTH □PTY □SCC		500.00	500.0		
02/11/2015	David Emrani 1526 S. Broadway Los Angeles, CA 90015	IND COM OTH PTY	Owner Sunset Place Holdings, LLC	375.00	500.0	0	
02/11/2015	Ebrahim Emrani 1526 S. Broadway Los Angeles, CA 90015	⊠IND □COM □OTH □PTY □SCC	Owner Sunset Place Holdings, LLC	375.00	500.0	0	
			SUBTOTALS	2,250.00			

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FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

	A (Continuation Sheet) Contributions Received	Type or pri Amounts may to whole a	be rounded	Statement cover from01/18/	/2015	Fage .	SCHEDULE A (CON FORNIA ORM 460
NAME OF FILER	1					I.D. NU	MBER
Joe Guardarra	ama for Council 2015					13734	63
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
02/11/2015	Yahouda Emrani 1526 S. Broadway Los Angeles, CA 90015	XIND ☐COM ☐OTH ☐PTY ☐SCC	Owner Sunset Place Holdings, LLC	375.00	5	00.00	
02/11/2015	Yousef Emrani 1526 S. Broadway Los Angeles, CA 90015	⊠IND □COM □OTH □PTY □SCC	Owner Sunset Place Holdings, LLC	375.00	S	00.00	
02/12/2015	Equality PAC 611 Pennsylvania Ave., Ste.143 Washington, DC 20003	□IND □COM ☑OTH □PTY □SCC		500.00	5	00.00	

Real Estate Broker

Homemaker

N/A

Cushman & Wakefield

SUBTOTAL\$

⊠IND □COM

□OTH □PTY □SCC

⊠IND □COM

OTH PTY SCC

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Matthew Fainchtein 500 North Rossmore Apt.308 Los Angeles, CA 90004

Beverly Hills, CA 90210

Elenor Gabay 1468 Donhill Drive

> FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

250.00

500.00

250.00

500.00

2,000.00

02/06/2015

02/13/2015

Schedule	Α	(Continuatio	n	Sheet)
Monetary	C	ontributions	Re	eceivec

Type or print in ink.

SCHEDU	FA.	CONT

Wonetary	Contributions Received	to whole		from01/18/		CALIFO FOR	
				through02/14/	2015	Page	_11 of45
NAME OF FILER						LD. NUMB	ER
Joe Guardarr	ama for Council 2015					1373463	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO E CALENDAR YEA (JAN. 1 - DEC. 3	AR	PER ELECTION TO DATE (IF REQUIRED)
02/13/2015	Mahboubeh Gabay 9112 Alanda Place Beverly Hills, CA 90210	⊠IND □COM □OTH □PTY □SCC	Homemaker N/A	500.00	500	0.00	
02/13/2015	Shirin Gabay 1474 Donhill Drive Beverly Hills, CA 90210	⊠IND □COM □OTH □PTY □SCC	Homemaker N/A	500.00	500	0.00	
02/06/2015	Stephanie Graves 818 W. 7th Street Los Angeles, CA 90017	XIND COM OTH PTY	CEO Lee Andrews Group	250.00	25(0.00	
01/28/2015	Ronald Haft 1025 Thomas Jefferson Street, NW, Ste.700 East Washington, DC 20007	XIND COM OTH PTY SCC	CEO Combined Properties	500.00	500	0.00	
01/30/2015	Hendrix Allardyce 8721 Beverly Blvd. West Hollywood, CA 90048	□IND □COM 図OTH □PTY □SCC		500.00	504	0.00	
			SUBTOTAL	\$ 2,250.00			

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Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDI	II E A	CONTY
SCHED	ノレビハ・	CONT

CALIFORNIA

Statement covers period

			**	from01/18/	2015	FORM - LCC
				through 02/14/		ge <u>12</u> of <u>45</u>
NAME OF FILER					I.D.	NUMBER
Joe Guardarra	ama for Council 2015				13	73463
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DAT CALENDAR YEAR (JAN. 1 - DEC. 31)	E PER ELECTION TO DATE (IF REQUIRED)
02/10/2015	Jason Herthel 1218 Peregrine Way Weston, FL 33327	XIND COM OTH PTY SCC	Executive Montage Hotels And Resorts	500.00	500.0	0
02/06/2015	Kevin Holiday 8455 Fountain Ave., #611 West Hollywood, CA 90069	⊠IND □COM □OTH □PTY □SCC	Urban Planner LACMA	50.00	50.0	00
01/28/2015	Roy Huebner 8535 West Knoll Drive, Apt.210 West Hollywood, CA 90069	⊠IND □COM □OTH □PTY □SCC	Executive Wolcott Architecture	100.00	100.0	00
02/08/2015	Derek Humphrey 15105 Sherman Way, #206 Van Nuys, CA 91405	⊠IND □COM □OTH □PTY □SCC	Consultant Overland Strategies	100.00	100.0	00
01/28/2015	IBEW Local 18 Water and Power Defense League (ID# 744817) 4189 W. 2nd Street Los Angeles, CA 90004	☐IND ☐COM ☐OTH ☐PTY ☑SCC		500.00	500.1	00
			SUBTOTALS	1,250.00		

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	A (Continuation Sheet) Contributions Received	Type or pri Amounts may to whole o	be rounded	Statement cover from01/18/	/2015	SCHEDULE A (CON- ALIFORNIA 460 FORM 45
NAME OF FILER					J	D. NUMBER
Joe Guardarr	ama for Council 2015				1	373463
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-EMPLOYEO, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEA (JAN. 1 - DEC. 3	R TO DATE
01/23/2015	Jason Illoulian 8687 Melrose Ave., Suite B538 Los Angeles, CA 90069	⊠IND □COM □OTH □PTY □SCC	Management Faring Capital	500.00	500	.00
01/23/2015	Jerry Illoulian 8687 Melrose Ave., Suite B538 Los Angeles, CA 90069	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Management Aga John Inc.	500.00	500	.00
01/27/2015	John Illoulian 8687 Melrose Ave., Suite B538 Los Angeles, CA 90069	⊠IND □COM □OTH □PTY □SCC	Manager Aga John Inc.	500.00	500	.00

Management

Noble House Antiques

Purchasing Manager

B&B Pipe and Tool Company

SUBTOTAL\$

⊠IND

COM OTH PTY SCC

ZIND

COM OTH PTY scc

*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

Parviz Illoulian

Jason Inclan

419 North Larchmont Blvd., #37 Los Angeles, CA 90004

900 S. Figueroa Street, #1112 Los Angeles, CA 90015

> FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

500.00

150.00

500.00

150.00

2,150.00

01/27/2015

01/29/2015

Type or print in ink.
Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

				from01/18/ through02/14/		FORM 45
NAME OF FILER					I,D.	NUMBER
Joe Guardarr	ama for Council 2015				137	73463
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
01/29/2015	Yvette Inclan 1006 N Doheny Drive, #13 West Hollywood, CA 90069	☑IND □COM □OTH □PTY □SCC	Marketing Manager Fox Networks	100.00	100.0	0
02/13/2015	Aleks Istanbullu 1659 11th Street, Ste.200 Santa Monica, CA 90404	⊠IND □COM □OTH □PTY □SCC	Architect AI Architects	500.00	500.0	0
02/12/2015	Kevin James 8323 Kirkwood Dr. Los Angeles, CA 90046	⊠IND □COM □OTH □PTY □SCC	Public Works Official City of Los Angeles	150.00	150.0	0
02/02/2015	Kian Kaeni 987 El Mirador Upland, CA 91784	⊠IND □COM □OTH □PTY □SCC	Public Relations EKA	50.00	50.0	0
01/22/2015	Keith Kaplan 1221 N. Kings Road, #401 West Hollywood, CA 90069	⊠IND □COM □OTH □PTY □SCC	PR Marketing The Kaplan Group	500.00	500.0	0
			SUBTOTAL	\$ 1,300.00		

*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 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A (Continuation Sheet) Monetary Contributions Received		Type or pri Amounts may to whole	be rounded	Statement cove	/2015	california 460	
				through 02/14/		ge 15 of 45	
NAME OF FILER					1.0	. NUMBER	
Joe Guardarr	ama for Council 2015	7			13	73463	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DAT CALENDAR YEAR (JAN. 1 - DEC. 31)	TODATE	
01/29/2015	Rose Kapolczynski 5322 Live Oak View Ave. Los Angeles, CA 90041	⊠IND □COM □OTH □PTY □SCC	President Rose Kapolczynski Consulting	100.00	100.	00	
01/28/2015	Sholeh Kashefi 1057 Wallace Ridge Beverly Hills, CA 90210	⊠IND □COM □OTH □PTY □SCC	Homemaker N/A	500.00	500.	00	
01/24/2015	Dennis Kean 906 N Doheny Drive, #216 West Hollywood, CA 90069	IND COM OTH PTY SCC	Realtor Coldwell Banker Residential Brokerage	100,00	100.	00	
01/28/2015	Deane Kenworthy 8535 West Knoll Drive, #315 West Hollywood, CA 90069	⊠IND □COM □OTH □PTY □SCC	Owner Kenworthy Salon	250.00	250.	00	
01/29/2015	Laborers' Local 300 (ID# 950674) 2005 W. Pico Blvd. Los Angeles, CA 90037	□IND □COM □OTH □PTY ⊠SCC		500.00	500.		

SUBTOTAL\$

1,450.00

*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

	A (Continuation Sheet) Contributions Received	Type or pri Amounts may to whole (be rounded [Statement cov from01/18, through02/14,	/2015	Marketon Pro	SCHEDULE A (CON FORNIA ORM 460
NAME OF FILER						I.D. NU	MBER
Joe Guardarr	ama for Council 2015					13734	163
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE T CALENDAR \ (JAN. 1 - DEC	YEAR	PER ELECTION TO DATE (IF REQUIRED)
02/03/2015	Brett Latteri 269 South Beverly Drive, #286 Beverly Hills. CA 90212	⊠IND □COM	Owner The Den On Sunset	100.00		100.00	

			SUBTOTAL \$	1,300,00		
02/06/2015	Carine Mamann 8214 Hollywood Blvd. Los Angeles, CA 90069	⊠IND □COM □OTH □PTY □SCC	Real Estate Carine Mamann	500.00	500.00	
02/06/2015	Carter Magnin 441 N. Beverly Drive, #203 Beverly Hills, CA 90210	⊠IND □COM □OTH □PTY □SCC	Real Estate Broker Cushman & Wakefield	100.00	100.00	
02/06/2015	Jay Luchs 1218 N. Wetherly Drive Los Angeles, CA 90069	⊠IND □COM □OTH □PTY □SCC	Broker Newmark Grubb Knight Frank		500.00	
02/03/2015	Ryan Leaderman 8703 West Knoll Drive, #103 West Hollywood, CA 90069	⊠IND □COM □OTH □PTY □SCC	Lawyer DLA Piper	100.00	100.00	
02/03/2015	Brett Latteri 269 South Beverly Drive, #286 Beverly Hills, CA 90212	⊠IND □COM □OTH □PTY □SCC	Owner The Den On Sunset	100,00	100.00	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)

*Contributor Codes
IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

	A (Continuation Sheet) Contributions Received	Type or print in ink. Amounts may be rounded to whole dollars. from 01/18/2015		2015		SCHEDULE A (CONFORMIA 460	
				through 02/14/	2015		17 of 45
NAME OF FILER Joe Guardarr	ama for Council 2015					I.D. NU 13734	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN, 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
01/27/2015	Aimee Micu 5 Laurel Square Manhattan Beach, CA 90266	IND □ COM □ OTH □ PTY □ SCC	Coach Aimee Micu	50.00		50.00	
01/28/2015	David Miller 820 N. Roxbury Drive Beverly Hills, CA 90210	IND □COM □OTH □PTY □SCC	Photographer David Miller	100.00	1	.00.00	
02/06/2015	Ramin Mobayen 9663 Santa Monica Blvd., Ste.126 Beverly Hills, CA 90210	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	President Mobayen	500.00	Ē	600.00	
02/12/2015	Montgomery Management Co. 8623 Sunset Blvd. West Hollywood, CA 90069	□IND □COM 図OTH □PTY □SCC		500.00	<u> </u>	00.00	
02/06/2015	Kazuko Morgan 124 3rd Ave. San Francisco, CA 94118	⊠IND □COM □OTH □PTY □SCC	Real Estate Cushman & Wakefield	500.00	Ė	00.00	

SUBTOTAL\$

1,650.00

*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

Type or print in ink. Amounts may be rounded SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

		to whole a	oonars.	from01/18/	2015	FORM 40U
				through 02/14/	2015 Pa	ge18 of45
NAME OF FILER					1.0). NUMBER
Joe Guardarr	ama for Council 2015				13	173463
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-EMPLOYEO, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DAT CALENDAR YEAR (JAN. 1 - DEC. 31)	TO DATE
01/28/2015	Andrew Nagel 1025 Thomas Jefferson Street, NW, Ste.700 East Washington, DC 20007	⊠IND □COM □OTH □PTY □SCC	Producer Usonian Productions	500.00	500.	00
02/13/2015	Jaunty Navi 595 Evelyn Place. Beverly Hills, CA 90210	⊠IND □COM □OTH □PTY □SCC	Therapist Jaunty Navi	500.00	500.	00
02/13/2015	Jonathan Navi 2345 E. 52nd Street Vernon, CA 90058	⊠IND □COM □OTH □PTY □SCC	Businessman P&M Distributors	500.00	500.	00
02/13/2015	Robert Navi 2345 E. 52nd Street Vernon, CA 90058	⊠IND □COM □OTH □PTY □SCC	Businessman P&M Distributors	500.00	500.	00
02/13/2015	Jeffrey Neu 222 N. Poinsettia Ave. Manhattan Beach, CA 90266	⊠IND □COM □OTH □PTY □SCC	Real Estate TLE Properties	500.00	500.	00
	:		SUBTOTAL	\$ 2,500.00		

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SCC - Small Contributor Committee

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)
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Statement covers period

Monetary	Contributions Received	Amounts may to whole		from 01/18/	•	CALIFORNIA 460
	;			through 02/14/	2015	Page19 of45
NAME OF FILER	!		t t t t t t t t t t t t t t t t t t t			I.D. NUMBER
Joe Guardarr	ama for Council 2015					1373463
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN. 1 - DEC. S	AR TO DATE
02/05/2015	Lance Olson 200 Delta Oaks Way Sacramento, CA 95831	⊠IND □COM □OTH □PTY □SCC	Attorney Olson, Hagel & Pishburn	100.00	10	0.00
01/28/2015	Pacific Design Center 1, LLC 750 Lexington Ave. New York, NY 10022	□IND □COM 図OTH □PTY □SCC		500.00	50	0.00
02/12/2015	Amir Pakravan 18379 Lake Encino Drive Encino, CA 91316	⊠IND □COM □OTH □PTY □SCC	Retired N/A	500.00	50	0.00
02/12/2015	Ester Pakravan 18379 Lake Encino Drive Encino, CA 91316	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	500.00	50	0.00
01/21/2015	Elisa Paster 425 Marine Street, #5 Santa Monica, CA 90405	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Glaser Weil	250.00	25	0.00
			SUBTOTAL	\$ 1,850.00		

*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	A (Continuation	Sheet)
Monetary	Contributions R	eceived

Type or print in ink. Amounts may be rounded to whole dollars.

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CALIFORNIA ACO

Statement covers period

		to whole t	uonuto.	from01/18/		FORM 400
				through02/14/	2015 Pa	ge20 of45
NAME OF FILER					1.0). NUMBER
Joe Guardarra	ama for Council 2015				13	73463
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA' CALENDAR YEAR (JAN. 1 - DEC. 31)	TO DATE
01/28/2015	Harriet Posner 9212 Hazen Drive Beverly Hills, CA 90210	⊠IND □COM □OTH □PTY □SCC	Attorney Harriet S. Posner	100.00	100.	00
02/06/2015	Ester Pourshalimi 1592 Linda Crest Drive Beverly Hills, CA 90210	⊠IND □COM □OTH □PTY □SCC	Real Estate Ester Pourshalimi	500.00	500.	00
02/05/2015	Don Quan 777 S. Figueroa Street, Suite 2150 Los Angeles, CA 90017	⊠IND □COM □OTH □PTY □SCC	Consultant Quan Consulting Services	100.00	100.	00
01/26/2015	Lillian Raffel 601 N. Roxbury Drive Beverly Hills, CA 90210	SIND COM OTH PTY	Not Employed N/A	100.00	100.	00
01/29/2015	Robert Rubano 1521 N Doheny Drive Los Angeles, CA 90069	XIND COM OTH PTY SCC	Finance Eastdil Secured	500.00	500.	00
			SUBTOTAL	.\$ 1,300.00		

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SCC - Small Contributor Committee

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A	(CONT.)
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CALIFORNIA

Statement covers period

				from01/18/	2015	FORM TOU
				through02/14/	2015 Pag	e 21 of 45
NAME OF FILER		 	<u></u>		1.D. I	NUMBER
Joe Guardarra	ma for Council 2015				137	3463
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
01/28/2015	Jack Simantob 1961 S. La Cienega Los Angeles, CA 90034	XIND COM OTH PTY SCC	Wholesaler Jack Simantob	500.00	500.0	0
02/06/2015	Gary Smith 6732 Hillpark Drive Los Angeles, CA 90068	⊠IND □COM □OTH □PTY □SCC	Principal Analyst LA County CEO	75.00	75.0	0
02/06/2015	Benhour Soleimani 8600 Melrose Ave. West Hollywood, CA 90069	XIND COM OTH PTY SCC	Owner Mansour	500.00	500.0	0
01/28/2015	Behnam Soroudi 661 N. Harper Ave., #200 Los Angeles, CA 90048	⊠IND □COM □OTH □PTY □SCC	Real Estate Ruby Group Inc.	500.00	500.0	0
01/28/2015	Jacklin Soroudi 661 N. Harper Ave., #200 Los Angeles, CA 90048	⊠IND □COM □OTH □PTY □SCC	Real Estate Ruby Group Inc.	500.00	500.0	0
			SUBTOTAL	\$ 2,075.00		

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OTH - Other (e.g., business entity) PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A	(CONT.)
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Statement covers period

				from01/18/	2015 F	ORM TOU
				through 02/14/	2015 Page.	of45
NAME OF FILER					I.D. NL	IMBER
Joe Guardarra	ama for Council 2015				13734	163
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
01/28/2015	Michael Soroudi 10636 Wilshire Blvd., #406 Los Angeles, CA 90024	⊠IND □COM □OTH □PTY □SCC	Real Estate Holloway Partners	500.00	500.00	
01/28/2015	Michelle Soroudi 10636 Wilshire Blvd., #406 Los Angeles, CA 90024	⊠IND □COM □OTH □PTY □SCC	Real Estate Holloway Partners	500.00	500.00	
01/28/2015	Rachel Soroudi 10636 Wilshire Blvd., #406 Los Angeles, CA 90024	IND COM OTH PTY SCC	Not Employed N/A	500.00	500.00	
02/11/2015	Lars Stensland Jr. 5862 Whitworth Drive Los Angeles, CA 90019	☑IND □COM □OTH □PTY □SCC	Sales Keith H. McCoy & Associates	500.00	500.00	
01/30/2015	Steven Bradford for Senate 2016 (ID# 1354953) 777 S. Figueroa Street, Suite 4050 Los Angeles, CA 90017	□IND IND OTH PTY SCC		500.00	500.00	
			SUBTOTAL	\$ 2,500.00		

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SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

				from01/18/3	2015	UKW
				through 02/14/		23 of45
NAME OF FILER					I.D. N	UMBER
Joe Guardarra	nma for Council 2015				1373	463
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
01/27/2015	Sunset Sierra Properties Inc. 9255 W. Sunset Blvd. West Hollywood, CA 90069	□INÐ □COM 図OTH □PTY □SCC		500.00	500.00	
01/23/2015	David Talla 1803 Pontius Ave. Los Angeles, CA 90025	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Owner Cochise Capital	500.00	500.00	
01/28/2015	Eric Thompson 6600 Sunset Blvd., #500 Los Angeles, CA 90028	⊠IND □COM □OTH □PTY □SCC	Lawyer Eric Thompson	500.00	500.00	
01/20/2015	Troika Boys LLC 8733 W. Sunset Blvd., Suite 205 West Hollywood, CA 90069	□IND □COM ☑OTH □PTY □SCC		500.00		
02/13/2015	Beegie Truesdale 2866 Belden Drive Los Angeles, CA 90068	⊠IND □COM □OTH □PTY □SCC	Consultant Beegie Truesdale	500.00		
			SUBTOTAL	\$ 2,500.00		

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OTH – Other (e.g., business entity)
PTY – Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded to whole dollars.

SCHEDULE A (C	ON	וד.)
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CALIFORNIA

Statement covers period

				from01/18/	2015	I O NIII
				through 02/14/	2015	Page24 of45
NAME OF FILER	· · · · · · · · · · · · · · · · · · ·					I.D. NUMBER
Joe Guardarra	ama for Council 2015			1373463		
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 SEIF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR TO DATE
01/28/2015	Truman & Elliott LLP 626 Wilshire Blvd., Ste.550 Los Angeles, CA 90017	□IND □COM 図OTH □PTY □SCC		500.00		00.00
02/06/2015	West Hollywood Chamber of Commerce WEHO PAC (ID# 1248664) 1525 S Sepulveda Blvd., Suite 101 Los Angeles, CA 90025	□IND □COM □OTH □PTY □SCC		500.00	54	00.00
02/13/2015	West Hollywood Properties LLC 8820 W. Sunset Blvd., 2nd Floor West Hollywood, CA 90069	□IND □COM 図OTH □PTY □SCC		500.00	5	00.00
02/06/2015	Western Built Construction, Inc. 8033 W. Sunset Blvd., Ste.5500 Los Angeles, CA 90046	□IND □COM 図OTH □PTY □SCC		500.00	5	00.00
02/04/2015	Flora Yin 1544 Stanford Street, #7 Santa Monica, CA 90404	⊠IND □COM □OTH □PTY □SCC	Attorney Reed & Davidson, LLP	150.00	1	50.00
	:		SUBTOTAL	\$ 2,150.00		

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(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

	A (Continuation Sheet) Contributions Received	Type or pri Amounts may to whole o	be rounded	SCHEDULE A Statement covers period from 01/18/2015 CALIFORNIA FORM				
				through02/14/	2015	Page_	25 of45	
NAME OF FILER Joe Guardarr	ama for Council 2015					1.D. NUM		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR \ (JAN. 1 - DEC	/EAR	PER ELECTION TO DATE (IF REQUIRED)	
01/28/2015	George Yin 5025 Coringa Drive Los Angeles, CA 90042	⊠IND □COM □OTH □PTY □SCC	Lawyer Kaufman Legal Group	250.00		250.00		
			Administrator	500.00		500.00 L		

			SUBTOTAL\$	2,250.00		
02/13/2015	Zoomkube, LLC 4370 La Jolla Village Drive, Ste. 400 San Diego, CA 92122	□IND □COM ⊠OTH □PTY □SCC		500.00	500.00	
02/12/2015	Richard Zbur 8743 Ashcroft Ave. West Hollywood, CA 90048	⊠IND □COM □OTH □PTY □SCC	Executive Director Equality California	500.00	500.00	
01/28/2015	James Zarian 2707 Blue Water Drive Corona Del Mar, CA 92625	⊠IND □COM □OTH □PTY □SCC	Consultant C2M Consultant	500.00	500.00	
02/12/2015	Brandon Zarian 2707 Blue Water Drive Corona Del Mar, CA 92625	⊠IND □COM □OTH □PTY □SCC	Administrator Blue Water Vista, LLC	500.00	500.00	
		☐SCC				

*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	l .	
Nonmonetary	Contributions	Received

Type or print in ink. Amounts may be rounded to whole dollars.

		SCHEDULE C
Staten	nent covers period	CALIFORNIA 160
from	01/18/2015	FORM 400
through	02/14/2015	Page 26 of 45
		I.D. NUMBER
		1373463

COLLEGE

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Joe Guarda	errama for Council 2015					1373463	
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)
2/14/2015	Ed's Coffee Shop 460 N. Robertson Blvd. West Hollywood, CA 90048	☐IND ☐COM 図OTH ☐PTY ☐SCC		MTG	200.00	200.00	
		□IND □COM □OTH □PTY □SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		□IND □COM □OTH □PTY □SCC					
Attach ad	ditional information on appropriately lat	eled continuat	ion sheets.	SUBTOTAL	\$ 200.00		

Sched	dule	C	Sum	mary

Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.)	\$	200.00
2. Amount received this period – unitemized nonmonetary contributions of less than \$100		
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)	L \$	200.00

*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

200.00

Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees

Type or print in ink. Amounts may be rounded to whole dollars.

		SCHEDULE D
Statement covers period		CALIFORNIA 460
from	01/18/2015	FORM 100
through_	02/14/2015	Page 27 of 45
		I.D. NUMBER
		1272462

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Joe Guardar	rama for Council 2015				13/346	3
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/08/2015	Los Angeles County Democratic Party - State Candidate Committee	Monetary Contribution Nonmonetary Contribution Independent Expenditure		50.00	50.00	
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure				
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure				
			SUBTOTAL \$	50.00		

Schedule D Summary

1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)\$	50.00
2. Unitemized contributions and independent expenditures made this period of under \$100	0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	50.00

FPPC Form 460 (Jan/05) FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule E Payments Made

Type or print in ink. Amounts may be rounded to whole dollars.

	SCHEDULE I
Statement covers period	CALIFORNIA 460
from01/18/2015	FORM TO C
through 02/14/2015	Page 28 of 45
	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Joe Guardarrama for Council 2015				1373463	
CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* MTG meetir OFC office OFC office PET petitio Pho phone Pho polling Pos postar	per communications ngs and appearance expenses in circulating banks g and survey resear ge, delivery and me essional services (leg	RAD S RFD SAL TEL TRC TRS ssenger services TSF al, accounting) VOT	escribe the payment. radio airtime and production cost returned contributions campaign workers' salaries t.v. or cable airtime and production candidate travel, lodging, and me staff/spouse travel, lodging, and transfer between committees of voter registration information technology costs (information)	on costs eals meals the same	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION	OF PAYMENT		AMOUNT PAID
Automated Mailers 26499 Rancho Parkway South Lake Forest, CA 92630	PRT				972.00
Card Member Service P.O. Box 94014 Palatine, IL 60094		Credit Card Payment	-		259.85
Continental Colorcraft 1166 Garvey Ave. Monterey Park, CA 91754	CMP				485.55
* Payments that are contributions or independent expenditures must also be	summarized on S	chedule D.	SUBT	OTAL\$	1,717.40
Schedule E Summary					
1. Itemized payments made this period. (Include all Schedule E subtotals.					
2. Unitemized payments made this period of under \$100					
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 an					

Schedule	E
(Continuat	ion Sheet)
Payments	Made

Type or print in ink.

Amounts may be rounded to whole dollars.

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	Statement cove	ers period	CALIF	ORNI	A 🖊	R	7
	from01/18	/2015	FO	RM	A star	A	4
	through <u>02/14</u>	/2015	Page _	29	_ of _	45	-
_			I.D. NUM	BER			
			13734	63			

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

4

Joe Guardarrama for Council 2015

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs MBR member communications CMP campaign paraphernalia/misc. RFD returned contributions CNS campaign consultants MTG meetings and appearances SAL campaign workers' salaries CTB contribution (explain nonmonetary)* OFC office expenses petition circulating TEL t.v. or cable airtime and production costs CVC civic donations 먇 TRC candidate travel, lodging, and meals FIL candidate filing/ballot fees PHO phone banks staff/spouse travel, lodging, and meals polling and survey research TRS FND fundraising events POL transfer between committees of the same candidate/sponsor postage, delivery and messenger services TSF independent expenditure supporting/opposing others (explain)* POS MD voter registration PRO professional services (legal, accounting) VOT LEG legal defense PRT WEB information technology costs (internet, e-mail) campaign literature and mailings print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OF	R DESCRIPTION OF PAYMENT	AMOUNT PAID
Independent Printers 12834 Victory Blvd. North Hollywood, CA 91606	LIT		218.00
Los Angeles County Democratic Party - State Candidate Committee (ID# 1237135) 3550 Wilshire Blvd., Ste. 1203 Los Angeles, CA 90010	СТВ		50.00
Merchant Services 12202 Airport Way; Ste. 100 Broomfield, CO 80021	OFC		1,048.77
Momentous Insurance Brokerage 5990 Sepulveda Blvd., Suite 550 Van Nuys, CA 91411	OFC		1,182.00
Renee Nahum & Assoc. 2530 Hidalgo Ave. Los Angeles, CA 90039	SAL		3,191.00

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

SUBTOTAL \$

5,689.77

Schedule E (Continuation Sheet) Payments Made

Type or print in ink. Amounts may be rounded to whole dollars.

		SCHEDULE E (CON	T.)
Statement covers period		CALIFORNIA 460	
from	01/18/2015	FORM TOO	
through	02/14/2015	Page 30 of 45	ļ
		1.D. M. 11.05.D.	

SEE INSTRUCTIONS ON REVERSE	through 02/14/2015	Page 30 of 45
NAME OF FILER		I.D. NUMBER
Joe Guardarrama for Council 2015		1373463

CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events FND independent expenditure supporting/opposing others (explain)* FOS post FRO prof	ment, you may a strings and appearant the expenses the circulating the banks and aurvey resetage, delivery and ressional services (I ads	s ces arch nessenger services	RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL. t.v. or cable airtime and production TRC candidate travel, lodging, and meals staff/spouse travel, lodging, and means	s eals e same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Renee Nahum & Assoc. 2530 Hidalgo Ave. Los Angeles, CA 90039	CNS			5,000.00
Renee Nahum & Assoc. 2530 Hidalgo Ave.: Los Angeles, CA 90039	SAL			2,806.00
Renee Nahum & Assoc. 2530 Hidalgo Ave. Los Angeles, CA 90039	SAL			3,023.00
Renee Nahum & Assoc. 2530 Hidalgo Ave. Los Angeles, CA 90039	SAL			3,124.00
Ross G Bates Consulting 980 9th Street 16th Floor Sacramento, CA 95814	CNS			7,500.00
* Payments that are contributions or independent expenditures must also be summa	arized on Schedule	D,	SUBTO	TAL\$ 21,453.00

EDDO F. 400 (January (05)

Schedule E

Type or print in ink.

SCHEDU	LE E	(COV	!T.)

Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA 460
ayments Made	to whole dollars.	from 01/18/2015	FORM TO
EE INSTRUCTIONS ON REVERSE		through 02/14/2015	Page 31 of 45
AME OF FILER			I.D. NUMBER
oe Guardarrama for Council 2015			1373463
	to the contract of the contrac	la Othanuica describe the narmen	+

Joe Guardarrama for Council 2015		23 3 10 3
CNS campaign consultants	er communications gs and appearances expenses ex	ion costs eals i meals i the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Ross G Bates Consulting 980 9th Street 16th Floor Sacramento, CA 95814	LIT	5,331.32
Ross G Bates Consulting 980 9th Street 16th Floor Sacramento, CA 95814	POS	1,153.68
Ross G Bates Consulting 980 9th Street 16th Floor Sacramento, CA 95814	LIT	4,905.02
Ross G Bates Consulting 980 9th Street 16th Floor Sacramento, CA 95814	POS	1,336.98

SUBTOTAL \$ 13,227.00 * Payments that are contributions or independent expenditures must also be summarized on Schedule D.

OFC

500.00

Sunset Place Holdings, LLC 1526 South Broadway Los Angeles, CA 90015

Schedule	E	2	
(Continua	tion	S	heet)
Payments	Ma	de	

Type or print in ink. Amounts may be rounded to whole dollars.

		SCHEDULE E (CONT.)
State	ement covers period	CALIFORNIA 460
from	01/18/2015	FORM I CO

 SEE INSTRUCTIONS ON REVERSE
 through 02/14/2015
 Page 32 of 45

 NAME OF FILER
 I.D. NUMBER

 Joe Guardarrama for Council 2015
 1373463

Joe Guardarrama for Council 2015							13/3100	
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense campaign literature and mailings	MBR MTG OFC PET PHO POL POS PRO PRT	member come meetings and office expen- petition circul phone banks polling and s postage, deli	munications if appearance ses ating urvey reseavery and m	ces	RAD RFO SAL TEL TRC TRS	radio airtime and production returned contributions campaign workers' salaries t.v. or cable airtime and prod candidate travel, lodging, and staff/spouse travel, lodging, transfer between committees voter registration	costs duction costs d meals and meals s of the same	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER 1.D. NUMBER) Take My Picture Inc. 1539 Curran Street Los Angeles, CA 90026			CNS	OR	DESCRIPTIO	ON OF PAYMENT		AMOUNT PAID 625.00

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

SUBTOTAL \$

Schedule	F			
Accrued	Expe	enses	(Unpaid	Bills)

Type or print in lnk. Amounts may be rounded to whole dollars.

CALIFORNIA Statement covers period **FORM** 01/18/2015 from through 02/14/2015 Page 33 of 45 I.D. NUMBER

1373463

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Joe Guardarrama for Council 2015

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs MBR member communications CMP campaign paraphernalia/misc. RFD returned contributions MTG meetings and appearances campaign consultants CNS SAL campaign workers' salaries OFC office expenses CTB contribution (explain nonmonetary)* TEL t.v. or cable airtime and production costs PET petition circulating CVC civic donations candidate travel, lodging, and meals phone banks PHO FIL candidate filing/ballot fees staff/spouse travel, lodging, and meals POL polling and survey research FND fundraising events transfer between committees of the same candidate/sponsor POS postage, delivery and messenger services independent expenditure supporting/opposing others (explain)* IND VOT voter registration professional services (legal, accounting) LEG legal defense WEB information technology costs (internet, e-mail) PRT print ads campaign literature and mailings LIT

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
Take My Picture Inc. 1539 Curran Street Los Angeles, CA 90026	CNS	625.00	0.00	625.00	0.00
Independent Voters League 3700 Wilshire Blvd., #1050B Los Angeles, CA 90010	Slate Mailer	0.00	150.00	0.00	150.00
John F. Kennedy Alliance 3700 Wilshire Blvd., #10508 Los Angeles, CA 90010	Slate Mailer	0.00	600.00	0.00	600.00
* Payments that are contributions or independent expenditures must also be	SUBTOTALS	\$ 625,00	\$ 750.00	\$ 625.00	\$ 750.00

Schedule F Summary

summarized on Schedule D.

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)	INCURRED TOTALS \$	750.00
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.)		625.00

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)

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

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE G
Statement covers period	CALIFORNIA /60
from01/18/2015	FORM 400
through 02/14/2015	Page 34 of 45
	I.D. NUMBER

1373463

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Joe Guardarrama for Council 2015

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Card Member Service

co	DES: If one of the following codes accurately describe	s the	payment, you may enter the code.	Otherwise	e, describe the payment.
CMP	campaign paraphernalia/misc.		member communications	RAD	radio airtime and production costs
CNS		MTG	meetings and appearances		returned contributions
	contribution (explain nonmonetary)*	OFC	office expenses		campaign workers' salaries
	civic donations	PET	petition circulating		t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks		candidate travel, lodging, and meals
FND		POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS		TSF	transfer between committees of the same candidate/sponsor
			professional services (legal, accounting)	VOT	voter registration
LEG	legal defense	PRT	print ads	WEB	information technology costs (internet, e-mail)
LIT	campaign literature and mailings	1 (4)	print add		•

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

	NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
City of West Hol 8300 Santa Monic West Hollywood,	lywood a Boulevard CA 90069	OFC		5.50
City of West Hol 8300 Santa Monic West Hollywood,	lywood a Boulevard CA 90069	OFC		1.75
Facebook 1 Hacker Way Menlo Park, CA	94025	WEB		27.24
Facebook 1 Hacker Way Menlo Park, CA	94025	WEB		61.14
nonio rathy or				

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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

Type or print in ink.

Amounts may be rounded to whole dollars.

			SCH	EDULE	G (CC	ONT.)
Stater	nent covers period	CALI	FORN	IA .	16	Λ
from	01/18/2015	F			40	Ч
through_	02/14/2015	Page	35	of	45	

SEE INSTRUCTIONS ON REVERSE	through 02/14/2015	Page35 of45
NAME OF FILER		I.D. NUMBER
Joe Guardarrama for Council 2015		1373463
NAME OF AGENT OR INDEPENDENT CONTRACTOR		

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Card Member Service

CODES: If one of the following codes accurately descr	ribes the payment, you may enter the coo	ie. 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 supporting/opposing others (explain)*	POS postage, delivery and messenger service	
LEG legal defense	PRO professional services (legal, accounting	
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

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

	NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	R DESCRIPTION OF PAYMENT	AMOUNT PAID
Gelson's Markets 2725 Hyperion Ave Los Angeles, CA	nue 90027	OFC			22.0
		WEB			19.0
NationBuilder 520 S. Grand Ave. Los Angeles, CA	2nd floor 90071	WEB			
Ralphs 645 West 9th Stre Los Angeles, CA		OFC		Action 1	90.5
Rite Aid Pharmacy		OFC			21.0
Los Angeles, CA					

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE G (CON).
CALIFORNIA 460
FORM 400
Page 36 of 45
I.D. NUMBER

Contractor (on Benan of This Committee)		
	through02/14/2015	Page 36 of 45
SEE INSTRUCTIONS ON REVERSE	The state of the s	I.D. NUMBER
NAME OF FILER		LD. HOMOLIN
		1373463
Joe Guardarrama for Council 2015		A
NAME OF AGENT OR INDEPENDENT CONTRACTOR		

Card Member Service

CODES: If one of the following codes accurately describe:	es the payment, you may enter the code.	Otherwise, describe the payment.
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FiL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads	RAD radio airtime and production costs returned contributions SAL campaign workers' salaries t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Rite Aid Pharmacy 1534 East Florence Avenue Los Angeles, CA 90001	OFC		11.6
		orn two two	
			ļ
		N. S. Carrier St.	
•			

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE G
Statement covers period	CALIFORNIA 160
from 01/18/2015	FORM 400
through 02/14/2015	Page 37 of 45
	I,D. NUMBER
	1373463

SEE INSTRUCTIO	NS ON REVERSE

NAME OF FILER

Joe Guardarrama for Council 2015

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Renee Nahum & Assoc.

CODE	S: If one of the following codes accurately describ	es the	payment, you may enter the code.	Otherwise	, describe the payment.
CMP c CNS c CTB c CVC c FIL c FND fi IND in	ES: If one of the following codes accurately described ampaign paraphernalia/misc. ampaign consultants ontribution (explain nonmonetary)* ivic donations: andidate filing/ballot fees undraising events dependent expenditure supporting/opposing others (explain)* egal defense: ampaign literature and mailings	MBR MTG OFC PET PHO POL POS	member communications meetings and appearances	RFD SAL TEL TRC TRS TSF VOT	radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor voter registration information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE OR DESCRIPTION		
Damian Caceres 5131 Clinton Street #11 Los Angeles, CA 90004	SAL		140.00
Damian Caceres 5131 Clinton Street #11 Los Angeles, CA 90004	SAL		140.00
Damian Caceres 5131 Clinton Street #11 Los Angeles, CA 90004	SAL		280.0
Damian Caceres 5131 Clinton Street #11 Los Angeles, CA 90004	SAL		140.0
Attach additional information on appropriately labeled continuation	on sheets.	TOTAL* \$	700.0

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G (Continuation Sheet) Payments Made by an Agent or Independent

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE G (CONT.) Statement covers period CALIFORNIA 01/18/2015

Contractor (on Behalf of This Committee)	to whole delicie.	from	
		through 02/14/2015	Page 38 of 45
SEE INSTRUCTIONS ON REVERSE NAME OF FILER	I.D. NUMBER		
			1373463
Joe Guardarrama for Council 2015 NAME OF AGENT OR INDEPENDENT CONTRACTOR			
Renee Nahim & Assoc.			

CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent explain(type supporting/opposing others (explain)*	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks PCL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads	RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals
--	--	---

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

NAME AND ADDRESS OF PAYEE OR CREDITOR	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
(IF COMMITTEE, ALSO ENTER I.D. NUMBER) Tarcy Garcia	SAL		210.0
.628 E. 85th Street Los Angeles, CA 90001			
			280.0
Marcy Garcia 1628 E. 85th Street Los Angeles, CA 90001	SAL		
			196.0
Joshua David Gray 917 1/2 North Beaudry Ave. Los Angeles, CA 90012	SAL		196.
Joshua David Gray 917 1/2 North Beaudry Ave. Los Angeles, CA 90012	SAL		357.

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 1,043.00

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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

Type or print in ink.

Amounts may be rounded to whole dollars.

		SCHEDULE G (CONT.
State	ement covers period	CALIFORNIA 460
from	01/18/2015	FORM 400
through	02/14/2015	Page 39 of 45
		I.D. NUMBER

1373463

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Joe Guardarrama for Council 2015

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Renee Nahum & Assoc.

CODES: If one of the following codes accurately describe	es the pay	yment, you may enter the code.	Otherwise	e, describe the payment.
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR men MTG mee OFC offic PET petit PHO phor POL polli POS post PRO prof	mber communications etings and appearances ce expenses ition circulating	RAD RFD SAL TEL TRC TRS TSF VOT	radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor voter registration information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Joshua David Gray 917 1/2 North Beaudry Ave. Los Angeles, CA 90012	SAL		273.0
Joshua David Gray 917 1/2 North Beaudry Ave.	SAL		224.0
Los Angeles, CA 90012	SAL		420.0
Temisha Jones 434 San Pedro Street, Apt. #611 Los Angeles, CA 90013			
Temisha Jones 434 San Pedro Street, Apt. #611 Los Angeles, CA 90013	SAL		343.0

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

^{1,260.00}

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEE	ULE	:G(CO	NT.)

Statement covers period	CALIFORNIA 160		
from 01/18/2015	FORM 400		
through <u>02/14/2015</u>	- Page <u>40</u> of <u>45</u>		
	I.D. NUMBER		
	1373463		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Joe Guardarrama for Council 2015

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Renee Nahum & Assoc.

CODES:	If one of the foll	lowing codes accurately	y describes the paym	ent, you may enter th	ne code. Otherwise,	describe the payment.
	•					

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
	campaign consultants	MTG	meetings and appearances		returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses		campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
F)L	candidate filing/ballot fees	PHQ	phone banks		candidate travel, lodging, and meals
	fundraising events	POL	polling and survey research		staff/spouse travel, lodging, and meals
	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
ŁEG	legal defense	PRO	professional services (legal, accounting)		voter registration
	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF	F PAYMENT AMOUNT PAID
Temisha Jones 434 San Pedro Street, Apt. #611 Los Angeles, CA 90013	SAL	427.00
Temisha Jones 434 San Pedro Street, Apt. #611 Los Angeles, CA 90013	SAL	420.00
Marco Meneghin 3010 Glenhurst Ave. Los Angeles, CA 90039	SAL	1,000.00
Marco Meneghin 3010 Glenhurst Ave. Los Angeles, CA 90039	SAL	1,000.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

2,847.00

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE G (CON).
Statement covers period	CALIFORNIA A GO
from 01/18/2015	FORM 400
through 02/14/2015	Page 41 of 45
ALEMAN, ALEMAN,	I.D. NUMBER

Renee Nahum & Assoc

NAME OF AGENT OR INDEPENDENT CONTRACTOR

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airlime and production costs MBR member communications CMP campaign paraphernalia/misc. RFD returned contributions meetings and appearances CNS campaign consultants SAL campaign workers' salaries OFC office expenses CTB contribution (explain nonmonetary)* TEL t.v. or cable airtime and production costs petition circulating CVC civic donations TRC candidate travel, lodging, and meals PHO phone banks FIL candidate filing/ballot fees TRS staff/spouse travel, lodging, and meals polling and survey research POL FND fundraising events transfer between committees of the same candidate/sponsor POS postage, delivery and messenger services independent expenditure supporting/opposing others (explain)* IND VOT voter registration PRO professional services (legal, accounting) legal defense WEB information technology costs (internet, e-mail) PRT print ads campaign literature and mailings LIT

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Marco Meneghin 3010 Glenhurst Ave. Los Angeles, CA 90039	SAL		1,000.00
Marco Meneghin 3010 Glenhurst Ave. Los Angeles, CA 90039	SAL		1,000.00
Ruth Meyers 8719 Wakefield Ave. Panorama City, CA 91402	SAL		420.00
Ruth Meyers 8719 Wakefield Ave. Panorama City, CA 91402	SAL		413.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

2,833.00

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G (Continuation Sheet) Payments Made by an Agent or Inde Contractor (on Behalf of This Comm

	SCHEDULE G (CONT.)	
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pendent Amounts may be rounded to whole dollars.		Statement covers period from 01/18/2015	CALIFORNIA 460
		through 02/14/2015	Page 42 of 45
· · · · · · · · · · · · · · · · · · ·			I,D. NUMBER
			1373463

Renee Nahum & Assoc.

NAME OF FILER

SEE INSTRUCTIONS ON REVERSE

Joe Guardarrama for Council 2015 NAME OF AGENT OR INDEPENDENT CONTRACTOR

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

RAD radio airtime and production costs CMP campaign paraphernalia/misc. MBR member communications RFD returned contributions CNS campaign consultants meetings and appearances SAL campaign workers' salaries CTB contribution (explain nonmonetary)* office expenses TEL t.v. or cable airtime and production costs PET petition circulating CVC civic donations TRC candidate travel, lodging, and meals FIL candidate filing/ballot fees PHO phone banks POL polling and survey research TRS staff/spouse travel, lodging, and meals FND fundraising events TSF transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services VOT voter registration LEG legal defense professional services (legal, accounting)

WEB information technology costs (internet, e-mail) campaign literature and mailings print ads

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Ruth Meyers 8719 Wakefield Ave. Panorama City, CA 91402	SAL		497.00
Ruth Meyers 8719 Wakefield Ave. Panorama City, CA 91402	SAL		500.0
A.J. Sharma 630 Magnolia Ave., Apt #122 Long Beach, CA 90802	SAL	A CONTRACTOR OF THE PROPERTY O	350.0
A.J. Sharma 630 Magnolia Ave., Apt #122 Long Beach, CA 90802	SAL		434.0

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

1,781.00

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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

Type or print in ink.

Amounts may be rounded to whole dollars.

		SCHEDULE G (CONT.)
Stat	ement covers period	CALIFORNIA 460
rom	01/18/2015	FORM 400

Contractor (on Benait of This Committee)	 from	FURIM
SEE INSTRUCTIONS ON REVERSE	through <u>02/14/2015</u>	Page 43 of 45
NAME OF FILER		I.D. NUMBER
Joe Guardarrama for Council 2015		1373463
NAME OF AGENT OR INDEPENDENT CONTRACTOR		

Renee Nahum & Assoc.

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

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

	NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
A.J. Sharma 630 Magnolia Ave. Long Beach, CA 9	Apt #122	SAL			420.00
A.J. Shrma 630 Magnolia Ave. Long Beach, CA 9	, Apt #122 0802	SAL			420.00
Johnese Zeigler 6530 2nd Ave. Los Angeles, CA	90043	SAL			420.00
Johnese Zeigler 6530 2nd Ave. Los Angeles, CA	90043	SAL			420.0

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

1,680.00

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period	CALIFORNIA 160
from01/18/2015	FORM 400
through <u>02/14/2015</u>	Page 44 of 45
	I,D, NUMBER

1373463

SCHEDULEG

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Joe Guardarrama for Council 2015

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Ross G Bates Consulting

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

CMP campaign paraphernalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

MBR member communications

meetings and appearances

OFC office expenses

SAL

PET petition circulating

phone banks

TRC

TRS

ND fundraising events POL polling and survey research
D independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services

LEG legal defense PRO professional services (legal, accounting)
LIT campaign literature and mailings PRT print ads

RAD radio airtime and production costs

RFD returned contributions
SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor VOT voter registration

WEB information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Big Picture Image 19602 19th Ave., NE Shoreline, WA 98155	LIT		458.25
Big Picture Image 19602 19th Ave., NE Shoreline, WA 98155	LIT	THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS O	439.42
Dan Siwulec Communications Marketing 15135 Sunset Blvd., Suite 240 Pacific Palisades, CA 90272	POS		1,153.68
Dan Siwulec Communications Marketing 15135 Sunset Blvd., Suite 240 Pacific Palisades, CA 90272	LIT		3,676.87
Attach additional information on conventional labeled continuation about			

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

5,728.22

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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

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lod	CA	LIFORN	Α	16	$\mathbf{\Lambda}$

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Statement covers period	CALIFORNIA 160
from01/18/2015	FORM 4.00
through 02/14/2015	- Page <u>45</u> of <u>45</u>
	I.D. NUMBER
	1373463

WEB information technology costs (internet, e-mail)

Joe Guardarrama for Council 2015

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Ross G Bates Consulting

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

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

CMP campaign paraphernalia/misc. member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals FIL candidate filing/ballot fees PHO phone banks TRS staff/spouse travel, lodging, and meals FND fundraising events polling and survey research independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) VOT voter registration

campaign literature and mailings print ads

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

CODE OR DESC	RIPTION OF PAYMENT AMOUNT PA	AID
POS	1,	336.98
LIT	2,	773.79
		ATTOMATION
_	POS	POS 1,

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

4,110.77

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.