

Recipient Committee Campaign Statement Cover Page

RECEIVED BY LOS ANGELES COUNTY

2020 OCT 22 PM 11: 21

COVER PAGE

PROPOSITION B UNIT

CALIFORNIA 460 2001/02 FORM Page 1 of 6 For Official Use Only

Statement covers period from 9/20/2020 through 10/17/2020 Date of election if applicable: 11/3/2020

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, General Purpose Committee, Sponsored, Small Contributor Committee, Political Party/Central Committee, Primarily Formed Ballot Measure Committee, Controlled, Sponsored, Primarily Formed Candidate/ Officeholder Committee

2. Type of Statement: Preelection Statement, Semi-annual Statement, Termination Statement, Amendment, Quarterly Statement, Special Odd-Year Report

3. Committee Information I.D. NUMBER 1425.078 COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Women for Wesson for Supervisor 2020 STREET ADDRESS (NO P.O. BOX) CITY Los Angeles STATE CA ZIP CODE 90017 AREA CODE/PHONE (213) 452-6565 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX CITY STATE ZIP CODE AREA CODE/PHONE OPTIONAL: FAX/E-MAIL ADDRESS jguard@kaufmanlegalgroup.com

Treasurer(s) NAME OF TREASURER Cheryl Branch MAILING ADDRESS CITY Los Angeles STATE CA ZIP CODE 90017 AREA CODE/PHONE (213) 452-6565 NAME OF ASSISTANT TREASURER, IF ANY MAILING ADDRESS CITY STATE ZIP CODE AREA CODE/PHONE OPTIONAL: FAX/E-MAIL ADDRESS

4. Verification I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify: under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Executed on 10-22-2020 By SIGNATURE OF TREASURER OR ASSISTANT TREASURER SIGNATURE OF CONTROLLING OFFICER, CANDIDATE, STATE MEASURE PROPONENT, OR RESPONSIBLE OFFICER OF PROPONENT SIGNATURE OF CONTROLLING OFFICER, CANDIDATE, OR STATE MEASURE PROPONENT SIGNATURE OF CONTROLLING OFFICER, CANDIDATE, OR STATE MEASURE PROPONENT

FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866)276-3772 www.fppc.ca.gov

Recipient Committee Campaign Statement Cover Page-Part 2

COVER PAGE-PART 2

CALIFORNIA FORM 460

Page 2 of 6

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? YES 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? YES 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 SUPPORT 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 SUPPORT OPPOSE Herb Wesson Board of Supervisors

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD SUPPORT OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD SUPPORT OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD SUPPORT OPPOSE

Attach continuation sheets if necessary

FPFC Form 460 (Jan/2016) FPFC Advice: advica@fpfc.ca.gov (866)276-3772 www.fpfc.ca.gov



**Campaign Disclosure Statement  
Summary Page**

Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>9/20/2020</u> through <u>10/17/2020</u>	<b>CALIFORNIA FORM 460</b> Page <u>3</u> of <u>6</u>
---	---

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Women for Wesson for Supervisor 2020

I.D. NUMBER

1425078

**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	\$10,000.00
2. Loans Received..... Schedule B, Line 3	\$0.00	\$0.00
3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1+2	\$0.00	\$10,000.00
4. Nonmonetary Contributions..... Schedule C, Line 3	\$0.00	\$4,544.66
5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4	\$0.00	\$14,544.66

**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	\$0.00	\$9,153.40
7. Loans Made..... Schedule H, Line 3	\$0.00	\$0.00
8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7	\$0.00	\$9,153.40
9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3	\$138.97	\$1,085.81
10. Nonmonetary Adjustment..... Schedule C, Line 3	\$0.00	\$4,544.66
11. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10	\$138.97	\$14,783.87

**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	\$846.60
13. Cash Receipts..... Column A, Line 3 above	\$0.00
14. Miscellaneous Increases to Cash..... Schedule I, Line 4	\$0.00
15. Cash Payments..... Column A, Line 8 above	\$0.00
16. ENDING CASH BALANCE...Add Lines 12+13+14, then subtract Line 15	\$846.60

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	\$1,085.81

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 F  
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded to whole dollars.

SCHEDULE F

Statement covers period from <u>9/20/2020</u> through <u>10/17/2020</u>	<b>CALIFORNIA FORM 460</b> Page <u>4</u> of <u>6</u>
---	---

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Women for Wesson for Supervisor 2020

I.D. NUMBER  
1425078

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  
IND independent expenditure  
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  
RFD returned contributions  
SAL campaign workers' salaries  
TEL tv, 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)

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	\$132.50	\$0.00	\$0.00	\$132.50
Kaufman Legal Group Los Angeles, CA 90017-5864	OFC	\$100.00	\$0.00	\$0.00	\$100.00
Kaufman Legal Group Los Angeles, CA 90017-5864	PRO	\$596.00	\$0.00	\$0.00	\$596.00
<b>SUBTOTALS</b>		<b>\$828.50</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$828.50</b>

\*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.)	<b>INCURRED TOTALS</b>	<b>\$138.97</b>
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.)	<b>PAID TOTALS</b>	<b>\$0.00</b>
3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)	<b>NET</b>	<b>\$138.97</b>

(May be a negative number)

FPPC Form 460 (Jan/2018)  
FPPC Advice: advice@fppc.ca.gov (888)275-3772  
www.fppc.ca.gov



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

Amounts may be rounded to whole dollars.

SCHEDULE F

Statement covers period from <u>9/20/2020</u> through <u>10/17/2020</u>	<b>CALIFORNIA FORM 460</b> Page <u>5</u> of <u>6</u>
---	---

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Women for Wesson for Supervisor 2020

I.D. NUMBER  
1425078

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 tv, 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                                 | VVES 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	\$116.17	\$0.00	\$0.00	\$116.17
Kaufman Legal Group Los Angeles, CA 90017-5864	OFC	\$2.17	\$0.00	\$0.00	\$2.17
Kaufman Legal Group Los Angeles, CA 90017-5864	PRO	\$0.00	\$37.50	\$0.00	\$37.50
<b>SUBTOTALS</b>		<b>\$118.34</b>	<b>\$37.50</b>	<b>\$0.00</b>	<b>\$155.84</b>

\*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.)	<b>INCURRED TOTALS</b>	<u>\$138.97</u>
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.)	<b>PAID TOTALS</b>	<u>\$0.00</u>
3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)	<b>NET</b>	<u>\$138.97</u>

(May be a negative number)

FPPC Form 460 (Jan/2016)  
FPPC Advice: advice@fppc.ca.gov (888/276-3772)  
www.fppc.ca.gov

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

Amounts may be rounded to whole dollars.

SCHEDULE F

Statement covers period	<b>CALIFORNIA FORM 460</b>
from 9/20/2020	
through 10/17/2020	
Page 6 of 6	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Women for Wasson for Supervisor 2020

I.D. NUMBER  
1425078

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

CMF campaign paraphernalia/misc.  
CNS campaign consultants  
CTB contribution (explain nonmonetary)\*  
CVC civic donations  
FIL candidate filing/ballot fees  
FND fundraising events  
IND independent expenditure  
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  
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)

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	\$0.00	\$100.00	\$0.00	\$100.00
Kaufman Legal Group Los Angeles, CA 90017-5864	OFC	\$0.00	\$1.47	\$0.00	\$1.47
<b>SUBTOTALS</b>		\$0.00	\$101.47	\$0.00	\$101.47

\*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** \$138.97

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** \$138.97  
(May be a negative number)

FPPC Form 460 (Jan/2016)  
FPPC Advice: advice@fppc.ca.gov (888)275-3772  
www.fppc.ca.gov