

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

COVER PAGE

Date Stamp  
**RECEIVED BY**  
**LOS ANGELES COUNTY**  
**2018 JUL 25 AM 10:17**  
**CAMPAIGN FINANCE**

**CALIFORNIA FORM 460**  
 Page 1 of 29  
 For Official Use Only

**Statement covers period**  
 from 05/20/2018  
 through 06/30/2018

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

SEE INSTRUCTIONS ON REVERSE

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

- |   |   |
|---|---|
| <input type="checkbox"/> Officeholder, Candidate Controlled Committee | <input type="checkbox"/> Primarily Formed Ballot Measure Committee  |
| <input type="radio"/> State Candidate Election Committee              | <input type="radio"/> Controlled  |
| <input type="radio"/> Recall<br><i>(Also Complete Part 5)</i>         | <input type="radio"/> Sponsored<br><i>(Also Complete Part 6)</i>  |
| <input checked="" type="checkbox"/> General Purpose Committee         | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee<br><i>(Also Complete Part 7)</i> |
| <input type="radio"/> Sponsored                                       |   |
| <input type="radio"/> Small Contributor Committee                     |   |
| <input type="radio"/> Political Party/Central Committee               |   |

**2. Type of Statement:**

- |   |   |
|---|---|
| <input type="checkbox"/> Preelection Statement  | <input type="checkbox"/> Quarterly Statement                                  |
| <input checked="" type="checkbox"/> Semi-annual Statement                                   | <input type="checkbox"/> Special Odd-Year Report                              |
| <input type="checkbox"/> Termination Statement<br><i>(Also file a Form 410 Termination)</i> | <input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
| <input type="checkbox"/> Amendment (Explain below)  |   |

**3. Committee Information**

I.D. NUMBER  
1400771

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE  
LONG BEACH CA 90802 (213) 489-4792

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

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS  
(213) 489-4818 / DLGOULD@GOULDORELLANA.COM

**Treasurer(s)**

NAME OF TREASURER  
DAVID MARTINEZ

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE  
LONG BEACH CA 90802 (213) 489-4818

NAME OF ASSISTANT TREASURER, IF ANY  
DAVID GOULD

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE  
LONG BEACH CA 90802 (213) 489-4792

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 07/23/2018  
Date

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

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

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

By \_\_\_\_\_  
Signature of Treasurer or Assistant Treasurer

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

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

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

Recipient Committee  
Campaign Statement

3. Committee Information - Additional Assistant Treasurers

CALIFORNIA  
FORM **460**

Page 2 of 29

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018

I.D. Number  
1400771

INGRID ORELLANA

LONG BEACH, CA 90802  
(213)489-4792

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

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE

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

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

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

COMMITTEE NAME	I.D. NUMBER
----------------	-------------

NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
-------------------	---

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME	I.D. NUMBER
----------------	-------------

NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
-------------------	---

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
----------------------	--------------	---

**Identify the controlling officeholder, candidate, or state measure proponent, if any.**

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY
-----------------------	---------------------

**7. Primarily Formed Candidate/Officeholder Committee** *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

NAME OF OFFICEHOLDER OR CANDIDATE Bob Lindsey	OFFICE SOUGHT OR HELD Sheriff	<input checked="" type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
--	----------------------------------	--

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

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

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

*Attach continuation sheets if necessary*

**Campaign Disclosure Statement  
Summary Page**

Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	05/20/2018	
through		Page 4 of 29
		I.D. NUMBER
		1400771

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions ..... <i>Schedule A, Line 3</i>	\$ 77,550.00	\$ 428,637.00
2. Loans Received ..... <i>Schedule B, Line 3</i>	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS ..... <i>Add Lines 1 + 2</i>	\$ 77,550.00	\$ 428,637.00
4. Nonmonetary Contributions ..... <i>Schedule C, Line 3</i>	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED ..... <i>Add Lines 3 + 4</i>	\$ 77,550.00	\$ 428,637.00

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

1/1 through 6/30      7/1 to Date

20. Contributions Received \$ \_\_\_\_\_ \$ \_\_\_\_\_

21. Expenditures Made \$ \_\_\_\_\_ \$ \_\_\_\_\_

	Column A	Column B
6. Payments Made ..... <i>Schedule E, Line 4</i>	\$ 89,197.80	\$ 433,401.23
7. Loans Made ..... <i>Schedule H, Line 3</i>	0.00	0.00
8. SUBTOTAL CASH PAYMENTS ..... <i>Add Lines 6 + 7</i>	\$ 89,197.80	\$ 433,401.23
9. Accrued Expenses (Unpaid Bills) ..... <i>Schedule F, Line 3</i>	132,615.80	140,115.80
10. Nonmonetary Adjustment ..... <i>Schedule C, Line 3</i>	0.00	0.00
11. TOTAL EXPENDITURES MADE ..... <i>Add Lines 8 + 9 + 10</i>	\$ 221,813.60	\$ 573,517.03

**Expenditure Limit Summary for State  
Candidates**

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

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

**Current Cash Statement**

12. Beginning Cash Balance ..... <i>Previous Summary Page, Line 16</i>	\$ 6,883.57
13. Cash Receipts ..... <i>Column A, Line 3 above</i>	77,550.00
14. Miscellaneous Increases to Cash ..... <i>Schedule I, Line 4</i>	5,000.00
15. Cash Payments ..... <i>Column A, Line 8 above</i>	89,197.80
16. ENDING CASH BALANCE ..... <i>Add Lines 12 + 13 + 14, then subtract Line 15</i>	\$ 235.77

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

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

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

17. LOAN GUARANTEES RECEIVED ..... <i>Schedule B, Part 2</i>	\$ 0.00
--	---------

**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents ..... <i>See instructions on reverse</i>	\$ 0.00
19. Outstanding Debts ..... <i>Add Line 2 + Line 9 in Column B above</i>	\$ 140,115.80

**Schedule A  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	05/20/2018	
through	06/30/2018	Page 5 of 29
NAME OF FILER		I.D. NUMBER
MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018		1400771

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018

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)
05/22/2018	First Pacific Financial Fullerton, CA 92832	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		25,000.00	25,000.00	
05/23/2018	John To Monterey Park, CA 91754	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Marketing Director Cosmopolitan of Las Vegas	5,000.00	15,000.00	
05/29/2018	Al Harrington Woodland Hills, CA 91364	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO Viola Extracts	2,500.00	2,500.00	
05/29/2018	Proxima Media, LLC Los Angeles, CA 90067	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		20,000.00	235,000.00	
05/30/2018	Ben Jewelry, Inc. Beverly Hills, CA 90212	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,800.00	3,800.00	
<b>SUBTOTAL \$</b>				54,300.00		

**Schedule A Summary**

- Amount received this period – itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 77,550.00
- Amount received this period – unitemized monetary contributions of less than \$100 ..... \$ 0.00
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$ 77,550.00**

\*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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	05/20/2018	
through	06/30/2018	Page 6 of 29

NAME OF FILER	I.D. NUMBER
MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018	1400771

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)
05/30/2018	Ben Jewelry, Inc. Beverly Hills, CA 90212	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,000.00	3,800.00	
05/30/2018	Joseph Lam Bel Air, CA 90077	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Founder Zen West Design	2,500.00	2,500.00	
06/01/2018	Green Knight Security Torrance, CA 90503	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,500.00	1,500.00	
06/01/2018	Marvin Engineering Co., Inc. Inglewood, CA 90302	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,000.00	2,000.00	
06/01/2018	Chris Sahliyah Dallas, TX 75201	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO Renaissance Global	10,000.00	10,000.00	
<b>SUBTOTAL \$</b>				18,000.00		

\*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 Received**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	05/20/2018	
through	06/30/2018	Page 7 of 29

NAME OF FILER	I.D. NUMBER
MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018	1400771

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)
06/04/2018	Gregory Haroutunian Encino, CA 91436	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Mortgage Banker Go Direct Lenders Inc.	2,000.00	2,000.00	
06/04/2018	Edgar Rodriguez Pomona, CA 91768	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Warehouse Manager Westcentral Produce	250.00	250.00	
06/04/2018	Berj Wartanian Northridge, CA 91326	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	General Manager Go Direct Lenders Inc.	2,000.00	2,000.00	
06/05/2018	Elliott Kahn Los Angeles, CA 90067	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate CH Employment Services	1,000.00	1,000.00	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				5,250.00		

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

SCHEDULE D

Amounts may be rounded  
to whole dollars.

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	05/20/2018	
through	06/30/2018	Page <u>8</u> of <u>29</u>
I.D. NUMBER		1400771

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
05/21/2018	Bob Lindsey Sheriff Los Angeles County	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Slate Mailer	5,000.00	405,307.29	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
05/22/2018	Bob Lindsey Sheriff Los Angeles County	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Slate Mailer	2,500.00	405,307.29	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
05/22/2018	Bob Lindsey Sheriff Los Angeles County	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Slate Mailer	2,500.00	405,307.29	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
<b>SUBTOTAL \$</b>				10,000.00		

**Schedule D Summary**

- Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) ..... \$ 80,900.00
- Unitemized contributions and independent expenditures made this period of under \$100 ..... \$ 0.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ..... **TOTAL \$** 80,900.00



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

SCHEDULE D (CONT.)

Amounts may be rounded  
to whole dollars.

Statement covers period from <u>05/20/2018</u> through <u>06/30/2018</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>9</u> of <u>29</u>

NAME OF FILER MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018	I.D. NUMBER 1400771
---	------------------------

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/22/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Slate Mailer	2,500.00	405,307.29	
05/22/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Slate Mailer	2,500.00	405,307.29	
05/23/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	RADIO ADS	2,400.00	405,307.29	
05/23/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	RADIO ADS	3,000.00	405,307.29	
<b>SUBTOTAL \$</b>				10,400.00		

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

SCHEDULE D (CONT.)

Amounts may be rounded  
to whole dollars.

Statement covers period from <u>05/20/2018</u> through <u>06/30/2018</u>	<b>CALIFORNIA FORM 460</b>
Page <u>10</u> of <u>29</u>	

NAME OF FILER MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018	I D NUMBER 1400771
---	-----------------------

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1- DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
05/23/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Slate Mailer	3,000.00	405,307.29	
05/24/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Social Media Ads/Consulting	10,000.00	405,307.29	
05/30/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Slate Mailer Postage Payment	3,000.00	405,307.29	
05/30/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Literature	1,000.00	405,307.29	
<b>SUBTOTAL \$</b>				17,000.00		

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

Amounts may be rounded  
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period from <u>05/20/2018</u> through <u>06/30/2018</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>11</u> of <u>29</u>

NAME OF FILER MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018	I.D. NUMBER 1400771
---	------------------------

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1-DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
05/30/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	RADIO ADS	5,000.00	405,307.29	
05/30/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Slate Mailer	2,500.00	405,307.29	
05/30/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Slate Mailer	4,000.00	405,307.29	
05/30/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Slate Mailer	7,500.00	405,307.29	
<b>SUBTOTAL \$</b>				19,000.00		

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

SCHEDULE D (CONT.)

Amounts may be rounded  
to whole dollars.

Statement covers period from <u>05/20/2018</u> through <u>06/30/2018</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>12</u> of <u>29</u>

NAME OF FILER MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018	I.D. NUMBER 1400771
---	------------------------

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/31/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Slate Mailer	1,000.00	405,307.29	
05/31/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	RADIO ADS	2,500.00	405,307.29	
05/31/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	RADIO ADS	2,500.00	405,307.29	
06/01/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Slate Mailer	1,000.00	405,307.29	
<b>SUBTOTAL \$</b>				7,000.00		

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

SCHEDULE D (CONT.)

Amounts may be rounded  
to whole dollars.

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	05/20/2018	
through	06/30/2018	Page <u>13</u> of <u>29</u>
NAME OF FILER		I.D. NUMBER
MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018		1400771

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)
06/01/2018	Bob Lindsey Sheriff Los Angeles County	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Slate Mailer	5,000.00	405,307.29	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
06/01/2018	Bob Lindsey Sheriff Los Angeles County	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Slate Mailer	2,500.00	405,307.29	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
06/01/2018	Bob Lindsey Sheriff Los Angeles County	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	RADIO ADS	3,200.00	405,307.29	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
06/01/2018	Bob Lindsey Sheriff Los Angeles County	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Newspaper AD	900.00	405,307.29	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
<b>SUBTOTAL \$</b>				11,600.00		

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

SCHEDULE D (CONT.)

Amounts may be rounded to whole dollars.

Statement covers period from <u>05/20/2018</u> through <u>06/30/2018</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>14</u> of <u>29</u>

NAME OF FILER MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018	I.D. NUMBER 1400771
---	------------------------

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)
06/01/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent expenditure	Newspaper AD	900.00	405,307.29	
06/04/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Slate Mailer	1,000.00	405,307.29	
06/04/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Slate Mailer	1,000.00	405,307.29	
06/04/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Slate Mailer	500.00	405,307.29	
<b>SUBTOTAL \$</b>				3,400.00		

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

Amounts may be rounded to whole dollars.

SCHEDULE D (CONT.)

Statement covers period from <u>05/20/2018</u> through <u>06/30/2018</u>	<b>CALIFORNIA FORM 460</b> Page <u>15</u> of <u>29</u>
I.D. NUMBER 1400771	

NAME OF FILER

MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018

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)
06/04/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Slate Mailer	500.00	405,307.29	
06/04/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Slate Mailer	1,000.00	405,307.29	
06/11/2018	Bob Lindsey Sheriff Los Angeles County  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Slate Mailer	1,000.00	405,307.29	
	  <input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
<b>SUBTOTAL \$</b>				2,500.00		

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	05/20/2018	
through	06/30/2018	Page 16 of 29
NAME OF FILER		I.D. NUMBER
MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018		1400771

SEE INSTRUCTIONS ON REVERSE

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

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure 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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
LEADERS FOR EQUAL RIGHTS (ID# 1364273) Sherman Oaks, CA 91424	IND		Slate Mailer	5,000.00
CALIFORNIANS VOTE GREEN (ID# 1323171) Long Beach, CA 90802	IND		Slate Mailer	2,500.00
Families First Education Voter Guide (ID# 1398433) Long Beach, CA 90802	IND		Slate Mailer	2,500.00

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

**SUBTOTAL \$** 10,000.00

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	89,059.90
2. Unitemized payments made this period of under \$100	\$	137.90
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	<b>TOTAL \$</b>	<b>89,197.80</b>



**Schedule E  
(Continuation Sheet)  
Payments Made**

SCHEDULE E (CONT.)

Amounts may be rounded  
to whole dollars.

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	05/20/2018	
through	06/30/2018	Page 17 of 29
NAME OF FILER		I.D. NUMBER
MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018		1400771

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018

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

CMP campaign paraphernalia/misc	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure 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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
LATINO FAMILY VOTER GUIDE (ID# 1386464) Long Beach, CA 90802	IND		Slate Mailer	2,500.00
Millennials for Effective Government (ID# 1383025) Long Beach, CA 90802	IND		Slate Mailer	2,500.00
COPS VOTER GUIDE (ID# 599014) Folsom, CA 95630	IND		Slate Mailer	5,000.00
KJLH Radio/Taxi Productions Inglewood, CA 90301	IND		RADIO ADS	3,000.00
New Inspiration Co., Inc. Glendale, CA 91203	IND		RADIO ADS	2,400.00

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

**SUBTOTAL \$** 15,400.00

**Schedule E  
(Continuation Sheet)  
Payments Made**

SCHEDULE E (CONT.)

Amounts may be rounded  
to whole dollars.

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	05/20/2018	
through	06/30/2018	Page 18 of 29
NAME OF FILER		I.D. NUMBER
MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018		1400771

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018

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

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure 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)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Freeman Public Affairs, Inc. Torrance, CA 90501	IND		Social Media Ads	10,000.00
DAVID L. GOULD COMPANY MERCHANT ACCOUNT Long Beach, CA 90802	MTG		Credit Card Merchant Fee & Expenses	261.35
COALITION FOR SENIOR CITIZEN SECURITY (ID# 592015) Long Beach, CA 90802	IND		Slate Mailer	4,000.00
KBC Mailing Sun Valley, CA 91352	IND		Campaign Literature	1,000.00
LEADERS FOR EQUAL RIGHTS (ID# 1364273) Sherman Oaks, CA 91424	IND		Slate Mailer	7,500.00

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

**SUBTOTAL \$** 22,761.35

**Schedule E  
(Continuation Sheet)  
Payments Made**

SCHEDULE E (CONT.)

Amounts may be rounded  
to whole dollars.

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	05/20/2018	
through	06/30/2018	Page 19 of 29
NAME OF FILER		I.D. NUMBER
MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018		1400771

SEE INSTRUCTIONS ON REVERSE

MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018

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

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure 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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Millennials for Effective Government (ID# 1383025) Long Beach, CA 90802	IND		Slate Mailer	2,500.00
New Inspiration Co., Inc. Glendale, CA 91203	IND		RADIO ADS	5,000.00
US Postal Service Los Angeles, CA 90052	IND		Postage for Campaign Literature	3,000.00
Blakewell Media Company of LA Los Angeles, CA 90008			Newspaper AD	2,500.00
CALIFORNIANS REPRESENTED Long Beach, CA 90802	IND		Slate Mailer	1,000.00

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

**SUBTOTAL \$** 14,000.00

**Schedule E  
(Continuation Sheet)  
Payments Made**

SCHEDULE E (CONT.)

Amounts may be rounded  
to whole dollars.

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	05/20/2018	
through	06/30/2018	Page 20 of 29
NAME OF FILER		I.D. NUMBER
MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018		1400771

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018

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

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure 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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Los Angeles Sentinel, Inc. Los Angeles, CA 90008	IND		Newspaper AD	2,500.00
Blakewell Media Company of LA Los Angeles, CA 90008	IND		Newspaper AD	900.00
CALIFORNIANS REPRESENTED Long Beach, CA 90802	IND		Slate Mailer	1,000.00
COUNCIL OF CONCERNED WOMAN VOTERS (ID# 1226327) Long Beach, CA 90802	IND		Slate Mailer	5,000.00
Gould & Orellana, LLC Long Beach, CA 90802	PRO			500.00

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

**SUBTOTAL \$** 9,900.00

**Schedule E  
(Continuation Sheet)  
Payments Made**

SCHEDULE E (CONT.)

Amounts may be rounded  
to whole dollars.

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	05/20/2018	
through	06/30/2018	Page 21 of 29
NAME OF FILER		I.D. NUMBER
MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018		1400771

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Los Angeles Sentinel, Inc. Los Angeles, CA 90008	IND		Newspaper AD	900.00
Millennials for Effective Government (ID# 1383025) Long Beach, CA 90802	IND		Slate Mailer	2,500.00
New Inspiration Co., Inc. Glendale, CA 91203	IND		RADIO ADS	3,200.00
COPS VOTER GUIDE (ID# 599014) Folsom, CA 95630	IND		Slate Mailer	1,000.00
Families First Education Voter Guide (ID# 1398433) Long Beach, CA 90802	IND		Slate Mailer	500.00

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

**SUBTOTAL \$** 8,100.00

**Schedule E  
(Continuation Sheet)  
Payments Made**

SCHEDULE E (CONT.)

Amounts may be rounded  
to whole dollars.

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	05/20/2018	
through	06/30/2018	Page 22 of 29
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		I.D. NUMBER 1400771

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018

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

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure 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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
LATINO FAMILY VOTER GUIDE (ID# 1386464) Long Beach, CA 90802	IND		Slate Mailer	500.00
Millennials for Effective Government (ID# 1383025) Long Beach, CA 90802	IND		Slate Mailer	1,000.00
OUR VOICE LATINO VOTER GUIDE (ID# 599015) Long Beach, CA 90802	IND		Slate Mailer	1,000.00
DAVID L. GOULD COMPANY MERCHANT ACCOUNT Long Beach, CA 90802	OFC		Credit Card Merchant Fee & Expenses	218.50
Millennials for Effective Government (ID# 1383025) Long Beach, CA 90802	IND		Slate Mailer	1,000.00

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

**SUBTOTAL \$** 3,718.50

**Schedule E  
(Continuation Sheet)  
Payments Made**

SCHEDULE E (CONT.)

Amounts may be rounded  
to whole dollars.

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	05/20/2018	
through	06/30/2018	Page 23 of 29
NAME OF FILER		I.D. NUMBER
MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018		1400771

SEE INSTRUCTIONS ON REVERSE

MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018

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

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure 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)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Gould & Orellana, LLC Long Beach, CA 90802	OFC			180.05
CALIFORNIA REPUBLICAN TAXPAYERS ASSOCIATION (ID# 1286135) Seaside, CA 93955	IND		Slate Mailer Payment	5,000.00

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

**SUBTOTAL \$** 5,180.05

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

Amounts may be rounded  
to whole dollars.

Statement covers period  
from 05/20/2018  
through 06/30/2018

**CALIFORNIA FORM 460**  
Page 24 of 29  
I.D. NUMBER  
1400771

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018

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

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure 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)

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
David L. Gould Company Long Beach, CA 90802	CNS	2,500.00	0.00	0.00	2,500.00
David L. Gould Company Long Beach, CA 90802	CNS	2,500.00	0.00	0.00	2,500.00
David L. Gould Company Long Beach, CA 90802	CNS	2,500.00	0.00	0.00	2,500.00
<b>SUBTOTALS \$</b>		<b>7,500.00\$</b>	<b>0.00\$</b>	<b>0.00\$</b>	<b>7,500.00</b>

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

**Schedule F Summary**

- 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 \$** 132,615.80
- 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
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... **NET \$** 132,615.80  
May be a negative number



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

Amounts may be rounded  
to whole dollars.

SCHEDULE F (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	05/20/2018	
through	06/30/2018	Page 25 of 29
NAME OF FILER		I.D. NUMBER
MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018		1400771

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

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure 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 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
CALIFORNIANS VOTE GREEN (ID# 1323171) Long Beach, CA 90802	LIT Slate Mailer	0.00	7,500.00	0.00	7,500.00
CALIFORNIANS REPRESENTED Long Beach, CA 90802	LIT Slate Mailer	0.00	3,000.00	0.00	3,000.00
Families First Education Voter Guide (ID# 1398433) Long Beach, CA 90802	LIT Slate Mailer	0.00	4,500.00	0.00	4,500.00
LATINO FAMILY VOTER GUIDE (ID# 1386464) Long Beach, CA 90802	LIT Slate Mailer	0.00	9,500.00	0.00	9,500.00
<b>SUBTOTALS \$</b>		<b>0.00 \$</b>	<b>24,500.00 \$</b>	<b>0.00 \$</b>	<b>24,500.00</b>

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

Amounts may be rounded  
to whole dollars.

SCHEDULE F (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	05/20/2018	
through	06/30/2018	Page 26 of 29
NAME OF FILER		I.D. NUMBER
MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018		1400771

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

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure 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 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
COPS VOTER GUIDE (ID# 599014) Folsom, CA 95630	LIT Slate Mailer	0.00	19,000.00	0.00	19,000.00
Millennials for Effective Government (ID# 1383025) Long Beach, CA 90802	LIT Slate Mailer	0.00	15,500.00	0.00	15,500.00
COUNCIL OF CONCERNED WOMAN VOTERS (ID# 1226327) Long Beach, CA 90802	LIT Slate Mailer	0.00	15,000.00	0.00	15,000.00
COALITION FOR SENIOR CITIZEN SECURITY (ID# 592015) Long Beach, CA 90802	LIT Slate Mailer	0.00	16,000.00	0.00	16,000.00
<b>SUBTOTALS \$</b>		0.00	65,500.00	0.00	65,500.00

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

Amounts may be rounded  
to whole dollars.

SCHEDULE F (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	05/20/2018	
through	06/30/2018	Page 27 of 29
NAME OF FILER		I.D. NUMBER
MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018		1400771

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

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure 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 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
OUR VOICE LATINO VOTER GUIDE (ID# 599015) Long Beach, CA 90802	LIT Slate Mailer	0.00	14,000.00	0.00	14,000.00
FEEL THE BERN PROGRESSIVE SLATE (ID# 1385678) Long Beach, CA 90802	LIT Slate Mailer	0.00	15,000.00	0.00	15,000.00
Bakewell Media Company of LA Los Angeles, CA 90008	LIT	0.00	3,540.00	0.00	3,540.00
Los Angeles Sentinel, Inc. Los Angeles, CA 90008	LIT	0.00	4,435.80	0.00	4,435.80
<b>SUBTOTALS \$</b>		<b>0.00 \$</b>	<b>36,975.80 \$</b>	<b>0.00 \$</b>	<b>36,975.80</b>

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

Amounts may be rounded  
to whole dollars.

SCHEDULE F (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	05/20/2018	
through	06/30/2018	Page 28 of 29
NAME OF FILER		I.D. NUMBER
MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018		1400771

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

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| FIL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| IND independent expenditure 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 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
KJLH Radio/Taxi Productions Inglewood, CA 90301	IND RADIO ADS	0.00	3,000.00	0.00	3,000.00
New Inspiration Co., Inc. Glendale, CA 91203	RAD RADIO ADS	0.00	1,320.00	0.00	1,320.00
New Inspiration Co., Inc. Glendale, CA 91203	RAD RADIO ADS	0.00	1,320.00	0.00	1,320.00
<b>SUBTOTALS \$</b>		<b>0.00 \$</b>	<b>5,640.00 \$</b>	<b>0.00 \$</b>	<b>5,640.00</b>

**Schedule I  
Miscellaneous Increases to Cash**

Amounts may be rounded  
to whole dollars.

Statement covers period  
from 05/20/2018  
through 06/30/2018

SCHEDULE I

**CALIFORNIA  
FORM 460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

MOTHERS FOR A SAFE LA COUNTY; A COMMITTEE IN SUPPORT OF BOB LINDSEY FOR LA COUNTY SHERIFF 2018

Page 29 of 29

I.D. NUMBER

1400771

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
06/26/2018	CALIFORNIA REPUBLICAN TAXPAYERS ASSOCIATION (ID# 1286135) Seaside, CA 93955	check not negotiated	5,000.00

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL \$** 5,000.00

**Schedule I Summary**

1. Itemized increases to cash this period. ....	\$	5,000.00
2. Unitemized increases to cash of under \$100 this period. ....	\$	0.00
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) .....	\$	0.00
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) .....	<b>TOTAL \$</b>	5,000.00