| Recipient (| Committee |
|-------------|-----------|
| Campaign | Statement |
| Cover Page | e |

CALIFORNIA 2001/02 460
23 FEB -3 AM II: 17 FORM

Statement covers period Date of election if applicable: (Month, Day, Year) Page 1 of 16 from 1/1/2022 TROCOSITION & UNI For Official Use Only SEE INSTRUCTIONS ON REVERSE through 12/31/2022 1. Type of Recipient Committee: All Committees- Complete Parts 1, 2, 3, and 4. 2. Type of Statement: Officeholder, Candidate Controlled Committee Primarily Formed Ballot Measure Preelection Statement Quarterly Statement State Candidate Election Committee Committee Semi-annual Statement Special Odd-Year Report Recall Controlled Termination Statement (Also Complete Part 5) (Also file a Form 410 Termination) Sponsored Amendment (Explain below) (Also Complete Part 6) General Purpose Committee Sponsored Primarily Formed Candidate/ Small Contributor Committee Officeholder Committee (Also Complete Part 7) Political Party/Central Committee I.D. NUMBER Treasurer(s) 3. Committee Information 1437443 COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) NAME OF TREASURER District Attorney George Gascon Ballot Measure Committee Jamarah Hayner MAILING ADDRESS CITY STATE ZIP CODE AREA CODE/PHONE STREET ADDRESS (NO P.O. BOX) Los Angeles CA 90017 (213) 452-6565 NAME OF ASSISTANT TREASURER, IF ANY CITY STATE ZIP CODE AREA CODE/PHONE 90017 (213) 452-6565 Los Angeles CA MAILING ADDRESS MAILING ADDRESS (IF DIFFERENT) NO, AND STREET OR P.O. BOX CITY ZIP CODE STATE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE

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.

| | under penalty or perjury under the laws of the Sta | ıE |
|-------------|--|----|
| Executed on | | |
| | DATE | |
| Executed on | | |
| | DATE | |
| Executed on | | |
| | DATE | |
| Executed on | | |
| | DATE | |

OPTIONAL: FAX/E-MAIL ADDRESS

sshin@kaufmanlegalgroup.com

| SIGNATURE OF TREASURER OR ASSISTANT TREASURER |
|--|
| |
| SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT, OR RESPONSIBLE OFFICER OF PROPONENT |
| |
| SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT |
| |
| CICNATURE OF CONTROLLING OFFICENCI DED CAMPIDATE OF CTATE ACADINE PROPOSITION |

OPTIONAL: FAX/E-MAIL ADDRESS

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

www.fppc.ca.gov

COVER PAGE

CALIFORNIA FORM 460 Page 2 of 16

| Officeholder or Candidate Controlled Committee | | | 6.Primarily Formed Ba | llot Measure (| Committee | | | |
|---|------------------------|----------------------------|--------------------------------------|----------------|--|----------------------|------------------|---------------------|
| NAME OF OFFICEHOLDER OR CAI | NDIDATE | | | | NAME OF BALLOT MEASURE | | | |
| OFFICE SOUGHT OR HELD(INCLU | DE LOCATION AND | DISTRICT NUI | MBER IF APPLICABLE) | | BALLOT NO. OR LETTER | JURISDICTION | | SUPPORT |
| RESIDENTIAL/BUSINESS ADDRES | S (NO. AND STREE | T) CITY | STATE | ZIP | Identify the controlling office | holder, candidate, o | or state measure | proponent, if any |
| | | | | | NAME OF OFFICEHLOLDER, CANDI | DATE, OR PROPONENT | = | |
| Related Committees Not In not included in this statement that contributions or make expenditure | are controlled by y | ou or are prim | • | | OFFICE SOUGHT OR HELD | | DISTRICT NO. | F ANY |
| COMMITTEE NAME George Gascon for D | | torney | I.D. NUMBER 1426300 | | 7. Primarily Formed Cand officeholder(s) or candidate(s) for which | | | ittee List names of |
| AAA2OFATREASURERY'S Fee Jamarah Hayner COMMITTEE ADDRESS | es Fund STREET ADDRESS | (NO D O BOY) | CONTROLLED COMMI | TTEE? | NAME OF OFFICEHOLDER OR CAND | IDATE OFFICE S | SOUGHT OR HELD | SUPPORT |
| COMMITTEE ADDRESS S | SIREEI ADDRESS | (NO P.O. BOX) | | | NAME OF OFFICEHOLDER OR CAND | IDATE OFFICE S | SOUGHT OR HELD | OPPOSE |
| CITY | STATE | ZIP CODI | | | | | | SUPPORT |
| Los Angeles | CA | 90017- 5864 | - 2134520 | 6565 | | | | OPPOSE |
| COMMITTEE NAME District Attorney G | _ | | I.D. NUMBER 1436344 CONTROLLED COMMI | TTFF? | NAME OF OFFICEHOLDER OR CAND | IDATE OFFICE S | SOUGHT OR HELD | SUPPORT |
| Jamarah Hayner | | | I | NO | NAME OF OFFICEHOLDER OR CAND | IDATE OFFICE S | SOUGHT OR HELD | SUPPORT |
| COMMITTEE ADDRESS S | STREET ADDRESS | (NO P.O. BOX) | | | | | | OPPOSE |
| CITY Los Angeles | STATE CA | ZIP CODI 90017- 5864 | | | Attach co | ontinuation sheets i | f necessary | , |

| CALIF FO | | IA Z | 460 |
|-------------|---|------|-----|
| Page | 3 | of | 16 |

| 5. Officeholder or Candidate Controlled | 6.Primarily Formed Ba | llot Measure Comm | ittee | |
|--|-------------------------------|--|-------------------------------|---------------------------|
| NAME OF OFFICEHOLDER OR CANDIDATE George Gascon | | NAME OF BALLOT MEASURE | | |
| OFFICE SOUGHT OR HELD(INCLUDE LOCATION AND DISTRICT Held: District Attorney | NUMBER IF APPLICABLE) | BALLOT NO. OR LETTER | JURISDICTION | SUPPORT |
| County Los A | ngeles | | | OPPOSE |
| RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY | STATE ZIP | Identify the controlling office | holder, candidate, or state m | neasure proponent, if any |
| Los | Angeles CA 90017 | NAME OF OFFICEHLOLDER, CANDI | DATE, OR PROPONENT | |
| Related Committees Not Included in this Statem not included in this statement that are controlled by you or are p contributions or make expenditures on behalf of your candidacy | rimarily formed to receive | OFFICE SOUGHT OR HELD | DISTRI | ICT NO. IF ANY |
| COMMITTEE NAME | I.D. NUMBER | 7. Primarily Formed Cand officeholder(s) or candidate(s) for which | | Committee List names of |
| NAME OF TREASURER | CONTROLLED COMMITTEE? YES NO | NAME OF OFFICEHOLDER OR CAND | IDATE OFFICE SOUGHT O | OR HELD SUPPORT |
| COMMITTEE ADDRESS STREET ADDRESS (NO P.O. B | OX) | | | OPPOSE |
| CITY STATE ZIP C | ODE AREA CODE/PHONE | NAME OF OFFICEHOLDER OR CAND | IDATE OFFICE SOUGHT O | SUPPORT OPPOSE |
| COMMITTEE NAME | I.D. NUMBER | NAME OF OFFICEHOLDER OR CAND | IDATE OFFICE SOUGHT O | SUPPORT |
| NAME OF TREASURER | CONTROLLED COMMITTEE? | NAME OF OFFICEHOLDER OR CAND | IDATE OFFICE SOUGHT O | OR HELD SUPPORT |
| COMMITTEE ADDRESS STREET ADDRESS (NO P.O. B | OX) | | | OPPOSE |
| CITY STATE ZIP C | ODE AREA CODE/PHONE | Attach co | ontinuation sheets if necess | ary |

| 5. Officeholder or Candidate Control | led Committee | 6.Primarily Formed Bal | lot Measure Committe | e |
|--|---|--|----------------------------------|----------------------|
| NAME OF OFFICEHOLDER OR CANDIDATE | | NAME OF BALLOT MEASURE | | |
| OFFICE SOUGHT OR HELD(INCLUDE LOCATION AND DISTR | ICT NUMBER IF APPLICABLE) | BALLOT NO. OR LETTER | JURISDICTION | SUPPORT |
| RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CIT | TY STATE ZIP | Identify the controlling officeh | older, candidate, or state measu | re proponent, if any |
| Related Committees Not Included in this State not included in this statement that are controlled by you or a contributions or make expenditures on behalf of your candid | are primarily formed to receive | OFFICE SOUGHT OR HELD | DISTRICT NO | D. IF ANY |
| COMMITTEE NAME George Gascon for LA District | I.D. NUMBER 1422183 | 7. Primarily Formed Cand officeholder(s) or candidate(s) for which t | | mittee List names of |
| AAMEOOFTRYASIRER Jamarah Hayner COMMITTEE ADDRESS STREET ADDRESS (NO P.0 | CONTROLLED COMMITTEE? YES NO D. BOX) | NAME OF OFFICEHOLDER OR CANDID | DATE OFFICE SOUGHT OR HEL | SUPPORT |
| Los Angeles CA 9 | IP CODE AREA CODE/PHONE 0017- (213) 452-6565 5864 | NAME OF OFFICEHOLDER OR CANDID | OATE OFFICE SOUGHT OR HEL | D SUPPORT OPPOSE |
| COMMITTEE NAME | I.D. NUMBER | NAME OF OFFICEHOLDER OR CANDID | DATE OFFICE SOUGHT OR HEL | D SUPPORT |
| NAME OF TREASURER | CONTROLLED COMMITTEE? YES NO | NAME OF OFFICEHOLDER OR CANDID | DATE OFFICE SOUGHT OR HEL | |
| COMMITTEE ADDRESS STREET ADDRESS (NO P.0 | J. BOX) | | | OPPOSE |
| CITY STATE Z | IP CODE AREA CODE/PHONE | Attach co | ntinuation sheets if necessary | |

| . Officeholder or Candidate Controlled C | ommittee | 6.Primarily Formed B | allot Measure C | Committee | |
|--|-----------------------------------|---|------------------------|----------------------|-----------------|
| NAME OF OFFICEHOLDER OR CANDIDATE | | NAME OF BALLOT MEASURE | | | |
| OFFICE SOUGHT OR HELD(INCLUDE LOCATION AND DISTRICT NUM | BER IF APPLICABLE) | BALLOT NO. OR LETTER | JURISDICTION | | UPPORT PPOSE |
| RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY | STATE ZIP | Identify the controlling office | ceholder, candidate, o | r state measure prop | ponent, if any |
| | | NAME OF OFFICEHLOLDER, CAN | NDIDATE, OR PROPONENT | | |
| Related Committees Not Included in this Statement: not included in this statement that are controlled by you or are primar contributions or make expenditures on behalf of your candidacy. | 3 | OFFICE SOUGHT OR HELD | | DISTRICT NO. IF ANY | , |
| Crime Survivors, Law Enforcement and | D. NUMBER .438145 | 7. Primarily Formed Car officeholder(s) or candidate(s) for whi | | | B List names of |
| Commontreasumeraders Against the Republic Hayhed Recall of George Commontre Address Street Address (NO P.O. BOX) | CONTROLLED COMMITTEE? | NAME OF OFFICEHOLDER OR CAN | NDIDATE OFFICE S | SOUGHT OR HELD | SUPPORT |
| CITY STATE ZIP CODE Los Angeles CA 90017- 5864 | AREA CODE/PHONE (213) 452-6565 | NAME OF OFFICEHOLDER OR CAN | NDIDATE OFFICE S | SOUGHT OR HELD | SUPPORT |
| COMMITTEE NAME | D. NUMBER | NAME OF OFFICEHOLDER OR CAN | NDIDATE OFFICE S | SOUGHT OR HELD | SUPPORT |
| NAME OF TREASURER | CONTROLLED COMMITTEE? | NAME OF OFFICEHOLDER OR CAN | NDIDATE OFFICE S | SOUGHT OR HELD | OPPOSE |
| COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX) | | | | | OPPOSE |
| CITY STATE ZIP CODE | AREA CODE/PHONE | Attach | continuation sheets if | necessary | |

Amounts may be rounded to whole dollars.

Campaign Disclosure Statement Summary Page

Statement covers period CALIFORNIA **FORM** 1/1/2022 from through 12/31/2022 Page 6 of 16 I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

District Attorney George Gascon Ballot Measure Committee

1437443

| Contributions Received | Column A | Column B | Calendar Year Summary for Candidates Running in Both the State Primary and General Elections | | |
|--|--|--|--|------------------------------|----------------|
| | Total This Period (FROM ATTACHED SCHEDULES) | CALENDAR YEAR TOTAL TO DATE | | | |
| 1. Monetary Contributions Schedule A, Line 3 | \$25,000.00 | \$25,000.00 | | 1/1 through 6/30 | 7/1 to Date |
| 2. Loans Received Schedule B, Line 3 | \$0.00 | \$0.00 | 20. Contributions | _ | |
| 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1+ 2 | \$25,000.00 | \$25,000.00 | Received | | |
| 4. Nonmonetary Contributions Schedule C, Line 3 | \$0.00 | \$0.00 | 21. Expenditures | | |
| 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 | \$25,000.00 | \$25,000.00 | Made | | |
| Expenditures Made | | | • | Summary for State | |
| 6. Payments Made Schedule E, Line 4 | \$24,486.53 | \$24,486.53 | Candidates | | |
| 7. Loans Made Schedule H, Line 3 | \$0.00 | \$0.00 | | ve Expenditures Made * | |
| 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 | \$24,486.53 | \$24,486.53 | (If Subject to | Voluntary Expenditure Limit) | |
| 9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 | \$3,432.97 | \$3,432.97 | Date of Election | Total to I | Date |
| 10. Nonmonetary Adjustment Schedule C, Line 3 | \$0.00 | \$0.00 | (mm/dd/yyyy) | | |
| 11. TOTAL EXPENDITURES MADE Add Lines 8 +9 + 10 | \$27,919.50 | \$27,919.50 | | | |
| Current Cash Statement | | | | | |
| 12. Beginning Cash Balance Previous Summary Page, Line 16 | \$0.00 | To calculate Column B, add | | | |
| 13. Cash Receipts Column A, Line 3 above | \$25,000.00 | amounts in Column A to the corresponding amounts from | | | |
| 14. Miscellaneous Increases to Cash Schedule I, Line 4 | \$0.00 | Column B of your last report. Some amounts in Column A | | | |
| 15. Cash Payments Column A, Line 8 above | \$24,486.53 | may be negative figures that should be subtracted from | *Amounts in this se | ction may be different t | rom amounts |
| 16. ENDING CASH BALANCEAdd Lines 12+13+14, then subtract Line 15 | \$513.47 | previous period amounts. If | reported in schedul | | rom amount |
| If this is a termination statement, Line 16 must be zero. | | this is the first report being filed for this calendar year, only carry over the amounts | | | |
| 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 | \$0.00 | from Lines 2, 7, and 9 (if any). | | | |
| 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 | \$3,432.97 | | | | n 460 (Jan/201 |
| - | | | FPPC A | dvice: advice@fppc.ca.go | v (866/275-377 |

. Amounts may be rounded to whole dollars.

Schedule A Monetary Contributions Received

Statement covers period from 1/1/2022 through 12/31/2022

CALIFORNIA FORM

Page 7 of 16

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

District Attorney George Gascon Ballot Measure Committee

I.D. NUMBER 1437443

| | | | | | 1437443 | |
|------------------|--|------------------------------|---|-----------------------------------|---|--|
| 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) |
| 09/26/2022 | Michael Alfred Gardena, CA 90249-4530 | VIND □ COM □ OTH □ PTY □ SCC | Film Maker Illegal Civilization Company | \$25,000.00 | \$25,000.00 | |
| | *** TYPE: Intermediary *** ActBlue Somerville, MA 02144-3132 | ☐IND ☐COM ☐OTH ☐PTY ☐SCC | | | | |

| SUBTOTAL | L \$25,000.00 | |
|--|---------------|---|
| Schedule A Summary | | *Contributor Codes |
| Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.) | \$25,000.00 | IND- Individual COM- Recipient Committee (other than PTY or SCC) OTH- O her (e.g., business entity) PTY- Political Party SCC- Small Contributor Committee |
| (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.) | \$25,000.00 | FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) |

. Amounts may be rounded to whole dollars.

SCHEDULE D

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

Statement covers period **CALIFORNIA FORM** 1/1/2022 Page 8 of 16 $_{through}\ 12\overline{/31/2022}$

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

District Attorney George Gascon Ballot Measure Committee

I.D. NUMBER 1437443

| DATE | NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE | TYPE OF PAYMENT | DESCRIPTION (IF REQUIRED) | AMOUNT/FAIR MARKET VALUE | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------|--|--|------------------------------|-----------------------------|---|--|
| 11/23/2022 | Black Los Angeles Young Democrats Support Oppose | Monetary Contribution Nonmonetary Contribution Independent Expenditure | Event Sponsorship | \$500.00 | \$500.00 | |
| 11/22/2022 | Democratic Party of the San Fernando Valley Support Oppose | Monetary Contribution Nonmonetary Contribution Independent Expenditure | Event Sponsorship | \$1,000.00 | \$1,000.00 | |
| 12/01/2022 | Los Angeles County Democratic Party - State Candidate Committee Support Oppose | Monetary Contribution Nonmonetary Contribution Independent Expenditure | Event Sponsorship | \$500.00 | \$500.00 | |

SUBTOTAL \$2,000.00

Schedule D Summary

\$2,250.00 1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)...... \$0.00 2. Unitemized contributions and independent expenditures made this period of under \$100...... \$2,250.00

. Amounts may be rounded

SCHEDULE D to whole dollars.

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

| | ement covers period 1/1/2022 | CALII F(| FORN DRM | IIA | 460 |
|-------------------|------------------------------|-------------|-------------|-----|-----|
| from _ through | 10/21/2022 | Page | 9 | of | 16 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

District Attorney George Gascon Ballot Measure Committee

I.D. NUMBER 1437443

| DATE | NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE | TYPE OF PAYMENT | DESCRIPTION (IF REQUIRED) | AMOUNT/FAIR MARKET VALUE | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------|--|--|------------------------------|-----------------------------|---|--|
| 12/02/2022 | Westside Young Democrats ✓ Support □ Oppose | Monetary Contribution Nonmonetary Contribution Independent Expenditure | Event Sponsorship | \$250.00 | \$250.00 | |

| SUI | BTOTAL | \$250.00 | | |
|---|--------------|----------|----------|------------|
| Schedule D Summary | | | | |
| 1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) | | | <u> </u> | \$2,250.00 |
| 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 | .) | TOTAL | \$2,250.00 |

Statement covers period **CALIFORNIA FORM** 1/1/2022 from Page 10 of 16 through 12/31/2022 I.D. NUMBER 1437443

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

District Attorney George Gascon Ballot Measure Committee

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 mee ings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs

FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals IND independent expenditure POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor

LEG legal defense PRO professional services (legal, accounting) VOT voter registration

| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (Inter | | |
|---|---------------------------------------|---|---------------|-----------------------------------|
| NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I D. NUMBER) | CODE | OR DESCRIPT | ON OF PAYMENT | AMOUNT PAID |
| ActBlue Somerville, MA 02144-3132 | OFC | | | \$375.00 |
| Alexandra Leard Consulting LLC West Hollywood, CA 90038-2365 | CNS | | | \$5,000.00 |
| Alexandra Leard Consulting LLC West Hollywood, CA 90038-2365 | CNS | | | \$5,000.00 |
| * Payments that are contributions or independent expenditur | res must also be summarized on Schedu | ule D. | SUBTOTAL | \$10,375.00 |
| Schedule E Summary 1. Itemized payments made this period. (Include all Schedu 2. Unitemized payments made this period of under \$100 3. Total interest paid this period on loans. (Enter amount from the content of the content | om Schedule B, Part 1, Column (e).) | | | \$24,375.00 \$111.53 \$0.00 |
| 4. Total payments made this period. (Add Lines 1, 2, and 3. | . Enter here and on the Summary Page | e, Column A, Line 6.) | TOTAL | \$24,486.53 |

Statement covers period **CALIFORNIA** 1/1/2022 from 11 Page of 16 through 12/31/2022 I.D. NUMBER

1437443

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

District Attorney George Gascon Ballot Measure Committee

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

CMP campaign paraphernalia/misc. RAD radio airtime and production costs MBR member communications CNS campaign consultants MTG mee ings 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

POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor IND independent expenditure LEG legal defense PRO professional services (legal, accounting) VOT voter registration

LIT campaign literature and mailings PRT print ads WFB information technology costs (Internet e-mail)

| campaign literature and mailings PRT print ads WEB information technology costs (Intern | | | | ly costs (Internet, e | it, e-maii) | |
|---|---------------------------|------------------|---------------------------|-----------------------|-------------|--|
| NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I D. NUMBER) | | CODE | OR DESCRIPTION OF PAYMENT | | AMOUNT PAID | |
| Black Los Angeles Young Democrats | | | | | | |
| Los Angeles, CA 90045-2242 ID: 1346634 | | CTB | Event Sponsorship | | \$500.00 | |
| Creative Visions | | | | | | |
| Nipomo, CA 93444-6661 | | MTG | | | \$250.00 | |
| Democratic Party of the San Fernando Valley | | | | | | |
| Sherman Oaks, CA 91413-2259 ID: 791828 | | CTB | Event Sponsorship | | \$1,000.00 | |
| Payments that are contributions or independent expenditu | res must also be summar | ized on Schedule | e D. | SUBTOTAL | \$1,750.00 | |
| Schedule E Summary | | | | | | |
| 1. Itemized payments made this period. (Include all Schedu | ule E subtotals.) | | | | \$24,375.00 | |
| 2. Unitemized payments made this period of under \$100 | | | | | \$111.53 | |
| | | | | | \$0.00 | |
| 1. Total payments made this period. (Add Lines 1, 2, and 3 | . Enter here and on the S | Summary Page, | Column A, Line 6.)T | TOTAL | \$24,486.53 | |

Statement covers period from $\frac{1/1/2022}{\text{through}}$ $\frac{12/31/2022}{\text{D.D. NUMBER}}$ CALIFORNIA FORM FORM Page $\frac{12}{12}$ of $\frac{16}{16}$

1437443

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

District Attorney George Gascon Ballot Measure Committee

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 mee ings and appearances

CFB contribution (explain nonmonetary)*

OFC office expenses

SAL campaign workers' salaries

CVC civic donations
PET petition circulating
PHO phone banks
FND fundraising events
POL polling and survey research
TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals

IND independent expenditure POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense PRO professional services (legal, accounting) VOT voter registration

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

| Z. Campaign moratare and maninge | Titt pinit ado | | TTEE INTO THE CONTROL OF | coole (iiiteiiiet, c | , | |
|---|------------------------------------|-----------|--------------------------|----------------------|-------------|--|
| NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | | AMOUNT PAID | |
| Digital Strategy Group Chicago, IL 60626-4735 | CNS | | | | \$4,000.00 | |
| Los Angeles County Democratic Party - State Candidat Los Angeles, CA 90017-5864 ID: 1237135 | ce Committee | Event Spo | onsorship | | \$500.00 | |
| Elise Angell Moore Sherman Oaks, CA 91411-4333 | CNS | | | | \$3,250.00 | |
| Payments that are contributions or independent expenditures | s must also be summarized on Sched | ule D. | S | SUBTOTAL | \$7,750.00 | |

Schedule E Summary

| 1. Itemized payments made this period. (Include all Schedule E subtotals.) | \$24,375.00 |
|--|-------------|
| 2. Unitemized payments made this period of under \$100 | \$111.53 |
| 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.) | \$24,486.53 |

1437443

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

District Attorney George Gascon Ballot Measure Committee

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 mee ings and appearances

CFD contribution (explain nonmonetary)*

OFC office expenses

SAL campaign workers' salaries

CN/C give departings

TEL by or cable pirtime and production costs

TEL by or cable pirtime and production costs

CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals
FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals

IND independent expenditure POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense PRO professional services (legal, accounting) VOT voter registration

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

| NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I D. NUMBER) | CODE | OR DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|---------------------------|-------------|
| Elise Angell Moore Sherman Oaks, CA 91411-4333 | CNS | | \$3,250.00 |
| Elise Angell Moore Sherman Oaks, CA 91411-4333 | CNS | | \$1,000.00 |
| Westside Young Democrats Los Angeles, CA 90042-4705 ID: 1421327 | СТВ | Event Sponsorship | \$250.00 |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$4,500.00

Schedule E Summary

| 1. Itemized payments made this period. (Include all Schedule E subtotals.) | \$24,375.00 |
|--|-------------|
| 2. Unitemized payments made this period of under \$100 | \$111.53 |
| 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.) | \$24,486.53 |

SCHEDULE F

Schedule F Accrued Expenses (Unpaid Bills)

1/1/2022 from through 12/31/2022

Statement covers period

CALIFORNIA FORM 14 of Page 16

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

District Attorney George Gascon Ballot Measure Committee

I.D. NUMBER 1437443

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 mee ings 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

WFB information technology costs (Internet e-mail)

| LIT campaign literature and mailings PRT print ads WEB information technology costs (Interpretation technology costs) | | | | tion 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, APC | | 40.00 | *1.44 00 | 40.00 | +1.44.00 |
| Los Angeles, CA 90017-5864 | PRO | \$0.00 | \$144.00 | \$0.00 | \$144.00 |
| Kaufman Legal Group, APC | | | | | |
| Los Angeles, CA 90017-5864 | PRO | \$0.00 | \$176.60 | \$0.00 | \$176.60 |
| Kaufman Legal Group, APC | | | | | |
| Los Angeles, CA 90017-5864 | PRO | \$0.00 | \$100.00 | \$0.00 | \$100.00 |
| *Payments that are contributions or independent expenditures must also be | SUBTOTALS | \$0.00 | \$420.60 | \$0.00 | \$420.60 |
| summarized on Schedule D. Schedule F Summary | | | <u> </u> | <u> </u> | <u>·</u> |
| Total accrued expenses incurred this period. (Include a accrued expenses of \$100 or more, plus total unitemized) | | | IN | CURRED TOTALS | \$3,432.97 |
| 2. Total accrued expenses paid this period. (Include all So accrued expenses of \$100 or more, plus total unitemized | chedule F, Column (c) subtotals for p payments on accrued expenses und | payments on der \$100.) | | PAID TOTALS | \$0.00 |
| 3. Net change this period. (Subtract Line 2 from Line 1. En and on the Summary Page, Column A, Line 9.) | nter the difference here | | | NET | \$3,432.97 |
| and on the dammary rage, default 71, Ellio 6.7 | | | | (M | ay be a negative number) |
| | | | | EF | DC Form 460 (lon/2016) |

SCHEDULE F

Schedule F Accrued Expenses (Unpaid Bills)

1/1/2022 from through 12/31/2022

Statement covers period

CALIFORNIA FORM Page 15 of 16

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

District Attorney George Gascon Ballot Measure Committee

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

MBR member communications

MTG mee ings 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)

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

I.D. NUMBER

1437443

VOT voter registration

| LIT campaign literature and mailings PRT print ads WEB information technology costs (I | | | | | ernet, 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, APC | PRO | \$0.00 | \$278.00 | \$0.00 | \$278.00 | |
| Los Angeles, CA 90017-5864 | | | | | | |
| Kaufman Legal Group, APC | OFC | \$0.00 | \$100.00 | \$0.00 | \$100.00 | |
| Los Angeles, CA 90017-5864 | | Ç0.00 | Ψ100.00 | Ş0.00 | Q100.00 | |
| Kaufman Legal Group, APC | 770 | 40.00 | #1 F46 00 | 40.00 | #1 F46 00 | |
| Los Angeles, CA 90017-5864 | PRO | \$0.00 | \$1,746.00 | \$0.00 | \$1,746.00 | |
| *Payments that are contributions or independent expenditures must also be summarized on Schedule D. | SUBTOTALS | \$0.00 | \$2,124.00 | \$0.00 | \$2,124.00 | |
| Schedule F Summarv 1. Total accrued expenses incurred this period. (Include a accrued expenses of \$100 or more, plus total unitemized | | | IN | CURRED TOTALS | \$3,432.97 | |
| 2. Total accrued expenses paid this period. (Include all So accrued expenses of \$100 or more, plus total unitemized | , , , | lor ¢100 \ | | PAID TOTALS | \$0.00 | |
| 3. Net change this period. (Subtract Line 2 from Line 1. Er and on the Summary Page, Column A, Line 9.) | | | | NET | \$3,432.97 | |
| , , , , , , | | | | (Ma | ay be a negative number) | |

SCHEDULE F

Schedule F Accrued Expenses (Unpaid Bills)

from 1/1/2022 FO Page

Statement covers period

CALIFORNIA FORM

Page 16 of 16

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

District Attorney George Gascon Ballot Measure Committee

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

SUL condidate files/hallet fees

*Payments that are contributions or independent expanditures must also be

FIL candidate filing/ballot fees FND fundraising events IND independent expenditure LEG legal defense

LIT campaign literature and mailings

MBR member communications
MTG mee ings 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)

CLIDTOTALO

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

I.D. NUMBER

1437443

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, APC | PRO | \$0.00 | \$888.37 | \$0.00 | \$888.37 |
| Los Angeles, CA 90017-5864 | | | | | |

| summarized on Schedule D. | SUBTOTALS | \$0.00 | \$888.37 | \$0.00 | \$888.37 |
|--|-----------|--------|-----------|----------|-------------------------------------|
| 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 | | | | D TOTALS | \$3,432.97 |
| 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.) | | | ID TOTALS | \$0.00 | |
| 3. Net change this period. (Subtract Line 2 from Line 1. Enter the di and on the Summary Page, Column A, Line 9.) | | | | NET (M | \$3,432.97 ay be a negative number) |