

Recipient Committee Campaign Statement Cover Page

COVER PAGE

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PROPOSITION B UNIT

CALIFORNIA 2001/02 FORM 460 Page 1 of 31 For Official Use Only

Statement covers period from 7/1/2024 through 9/21/2024

Date of election if applicable: (Month, Day, Year) 11/5/2024

SEE INSTRUCTIONS ON REVERSE

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

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

2. Type of Statement:

- Preelection Statement
Semi-annual Statement
Termination Statement
Amendment (Explain below)
Quarterly Statement
Special Odd-Year Report

3. Committee Information

I.D. NUMBER 1463510

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates

STREET ADDRESS (NO P.O. BOX)

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

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

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX/E-MAIL ADDRESS pcdfilings@kaufmanlegalgroup.com

Treasurer(s)

NAME OF TREASURER Tommy Newman

MAILING ADDRESS

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

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX/E-MAIL ADDRESS pcdfilings@kaufmanlegalgroup.com

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement under penalty of perjury for the laws of the State of California that the fore

information contained herein and in the attached schedules is true and complete. I certify

Executed on DATE By SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

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

Recipient Committee  
Campaign Statement  
Cover Page-Part 2

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE

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

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

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

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE

Los Angeles County Homelessness Prevention, Reduction and Accountability Initiative

BALLOT NO. OR LETTER A	JURISDICTION County of Los Angeles	<input checked="" type="checkbox"/> SUPPORT  <input type="checkbox"/> OPPOSE
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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
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**7. Primarily Formed Candidate/Officeholder Committee** List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

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

Attach continuation sheets if necessary

# Campaign Disclosure Statement Summary Page

Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	7/1/2024	
through	9/21/2024	Page <u>3</u> of <u>31</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates

I.D. NUMBER

1463510

## Contributions Received

	Column A Total This Period (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions..... Schedule A, Line 3	\$1,310,200.00	\$4,009,955.97
2. Loans Received..... Schedule B, Line 3	\$0.00	\$380,000.00
3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1+ 2	\$1,310,200.00	\$4,389,955.97
4. Nonmonetary Contributions..... Schedule C, Line 3	\$13,570.00	\$918,570.00
5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4	\$1,323,770.00	\$5,308,525.97

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

	1/1 through 6/30	7/1 to Date
20. Contributions Received	_____	_____
21. Expenditures Made	_____	_____

## Expenditures Made

	Column A	Column B
6. Payments Made..... Schedule E, Line 4	\$553,915.50	\$3,003,044.57
7. Loans Made..... Schedule H, Line 3	\$0.00	\$0.00
8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7	\$553,915.50	\$3,003,044.57
9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3	-\$20,447.41	\$0.00
10. Nonmonetary Adjustment..... Schedule C, Line 3	\$13,570.00	\$918,570.00
11. TOTAL EXPENDITURES MADE..... Add Lines 8 +9 + 10	\$547,038.09	\$3,921,614.57

## Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made *	
(If Subject to Voluntary Expenditure Limit)	
Date of Election	Total to Date
(mm/dd/yyyy)	
_____	_____

## Current Cash Statement

12. Beginning Cash Balance..... Previous Summary Page, Line 16	\$61,817.00
13. Cash Receipts..... Column A, Line 3 above	\$1,310,200.00
14. Miscellaneous Increases to Cash..... Schedule I, Line 4	\$0.00
15. Cash Payments..... Column A, Line 8 above	\$553,915.50
16. ENDING CASH BALANCE..Add Lines 12+13+14, then subtract Line 15	\$818,101.50

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

17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2	\$0.00
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To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

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

## 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	\$380,000.00

# Schedule A Monetary Contributions Received

. Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period  
from 7/1/2024  
through 9/21/2024

**CALIFORNIA FORM 460**  
Page 4 of 31

SEE INSTRUCTIONS ON REVERSE

**NAME OF FILER**

Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates

I.D. NUMBER  
**1463510**

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)
09/17/2024	Abbey Road Inc.  North Hills, CA 91343-5117	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00	\$5,000.00	
09/17/2024	American Federation of State, County & Municipal Employees Local No. 685 Political Action Committee  Vernon, CA 90058-3914 ID: 744558	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$15,000.00	\$15,000.00	
09/09/2024	ASM Global  Long Beach, CA 90802-4825	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$50,000.00	\$50,000.00	
09/19/2024	Centene Management Company LLC (Allison Barnett)  Sacramento, CA 95814-3765	<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	

**SUBTOTAL** \$95,000.00

## Schedule A Summary

1. Amount received this period -itemized monetary contributions.

(Include all Schedule A subtotals.)..... \$1,310,100.00

2. Amount received this period -unitemized monetary contributions of less than \$100..... \$100.00

3. Total monetary contributions received this period.

(Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.)..... **TOTAL** \$1,310,200.00

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

# Schedule A Monetary Contributions Received

. Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period from <u>7/1/2024</u> through <u>9/21/2024</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>5</u> of <u>31</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates

I.D. NUMBER  
1463510

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)
07/31/2024	Corp For Supportive Housing Los Angeles, CA 90017-2641	<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	
09/17/2024	Craig Lawson & Co. LLC (Craig Lawson) Los Angeles, CA 90034-3298	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,000.00	\$1,000.00	
09/13/2024	CRC Services LLC (Francisco J. Leon) Long Beach, CA 90831-1500	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$50,000.00	\$50,000.00	
09/10/2024	Downtown Women's Center Los Angeles Los Angeles, CA 90013-2132	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00	\$10,000.00	

**SUBTOTAL** \$81,000.00

## Schedule A Summary

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	\$1,310,100.00
2. Amount received this period -unitemized monetary contributions of less than \$100.....	\$100.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL</b> \$1,310,200.00

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(other than PTY or SCC)  
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PTY- Political Party  
SCC- Small Contributor Committee

. Amounts may be rounded to whole dollars.

# Schedule A Monetary Contributions Received

Statement covers period  
from 7/1/2024  
through 9/21/2024

**CALIFORNIA FORM 460**  
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SEE INSTRUCTIONS ON REVERSE

**NAME OF FILER**

Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates

I.D. NUMBER  
1463510

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)
09/09/2024	Dora Gallo Torrance, CA 90503-1313	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Nonprofit Executive A Community of Friends	\$3,000.00	\$3,000.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
07/01/2024	Liberty Hill Foundation Los Angeles, CA 90017-2415	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$50,000.00	\$175,000.01	
09/17/2024	Liberty Hill Foundation Los Angeles, CA 90017-2415	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100,000.00	\$175,000.01	

**SUBTOTAL** \$153,000.00

## Schedule A Summary

1. Amount received this period -itemized monetary contributions.

(Include all Schedule A subtotals.)..... \$1,310,100.00

2. Amount received this period -unitemized monetary contributions of less than \$100..... \$100.00

3. Total monetary contributions received this period.

(Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.)..... **TOTAL** \$1,310,200.00

**\*Contributor Codes**  
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(other than PTY or SCC)  
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SCC- Small Contributor Committee

# Schedule A Monetary Contributions Received

. Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period from <u>7/1/2024</u> through <u>9/21/2024</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates	I.D. NUMBER 1463510
--	------------------------

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)
08/02/2024	Linc Housing Long Beach, CA 90807-3903	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$15,000.00	\$20,000.00	
09/20/2024	Linc Housing Long Beach, CA 90807-3903	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00	\$20,000.00	
07/01/2024	Dora Martinez Ontario, CA 91764-6559	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Accountant Webb Family Enterprises	\$5,000.00	\$5,000.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				

<b>SUBTOTAL</b>	<b>\$25,000.00</b>
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## Schedule A Summary

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	\$1,310,100.00
2. Amount received this period -unitemized monetary contributions of less than \$100.....	\$100.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL \$1,310,200.00</b>

\*Contributor Codes  
 IND- Individual  
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 OTH- Other (e.g., business entity)  
 PTY- Political Party  
 SCC- Small Contributor Committee

# Schedule A Monetary Contributions Received

. Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period from <u>7/1/2024</u> through <u>9/21/2024</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates	I.D. NUMBER 1463510
--	------------------------

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)
09/12/2024	Brian McCullom  Los Angeles, CA 90029-2970	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Analyst LA County Department of Health Services	\$500.00	\$500.00	
	*** TYPE: Intermediary *** Actblue  Somerville, MA 02144-3132	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
09/11/2024	Mercy Housing Inc.  Denver, CO 80202-4929	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$50,000.00	\$50,000.00	
09/20/2024	Merritt Community Capital Corporation  Oakland, CA 94612-3664	<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	

<b>SUBTOTAL</b>	<b>\$75,500.00</b>
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## Schedule A Summary

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	<u>\$1,310,100.00</u>
2. Amount received this period -unitemized monetary contributions of less than \$100.....	<u>\$100.00</u>
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL</b> <u>\$1,310,200.00</u>

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



# Schedule A Monetary Contributions Received

. Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period	<b>CALIFORNIA FORM 460</b>
from <u>7/1/2024</u>	
through <u>9/21/2024</u>	
Page <u>9</u> of <u>31</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates	I.D. NUMBER 1463510
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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)
07/29/2024	Opportunity Beach Fund - Mayor Rex Richardson Ballot Measure Committee  Los Angeles, CA 90017-5864 ID: 1417295	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100,000.00	\$100,000.00	
08/30/2024	PATH Ventures  Los Angeles, CA 90004-3504	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$10,000.00	\$10,000.00	
07/01/2024	Jeffrey Ring  Glendale, CA 91202-2045	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Psychologist Jeffrey Ring	\$500.00	\$500.00	
	*** TYPE: Intermediary *** Actblue  Somerville, MA 02144-3132	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				

	<b>SUBTOTAL</b>	\$110,500.00
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## Schedule A Summary

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....		\$1,310,100.00
2. Amount received this period -unitemized monetary contributions of less than \$100.....		\$100.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL</b>	\$1,310,200.00

**\*Contributor Codes**

IND- Individual  
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 OTH- Other (e.g., business entity)  
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 SCC- Small Contributor Committee

# Schedule A Monetary Contributions Received

. Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period from <u>7/1/2024</u> through <u>9/21/2024</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>10</u> of <u>31</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates	I.D. NUMBER 1463510
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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)
09/05/2024	Sasha Rosen San Pedro, CA 90732-4616	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant The Outreach Team	\$100.00	\$100.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
09/06/2024	SEIU Local 2015 Issues PAC, Sponsored by Service Employee International Unions Los Angeles, CA 90057-1012 ID: 1378400	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$300,000.00	\$350,000.00	
09/20/2024	Sempra Energy San Diego, CA 92101-7123	<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	

<b>SUBTOTAL</b>	<b>\$325,100.00</b>
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## Schedule A Summary

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	<u>\$1,310,100.00</u>
2. Amount received this period -unitemized monetary contributions of less than \$100.....	<u>\$100.00</u>
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL</b> <u>\$1,310,200.00</u>

\*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

. Amounts may be rounded to whole dollars.

# Schedule A Monetary Contributions Received

Statement covers period  
from 7/1/2024  
through 9/21/2024

**CALIFORNIA FORM 460**  
Page 11 of 31

SEE INSTRUCTIONS ON REVERSE

**NAME OF FILER**

Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates

I.D. NUMBER  
1463510

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)
09/17/2024	Service Employees International Union Local 721 Washington, DC 20036-1806 ID: 891044	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$300,000.00	\$355,000.00	
09/20/2024	The Chrysalis Center Los Angeles, CA 90013-1422	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00	\$5,000.00	
08/15/2024	Union Station Homeless Services Pasadena, CA 91104-4554	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$25,000.00	\$50,000.00	
09/18/2024	United Way Greater Los Angeles Los Angeles, CA 90015-2211	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$100,000.00	\$848,570.00	

**SUBTOTAL** \$430,000.00

## Schedule A Summary

1. Amount received this period -itemized monetary contributions.

(Include all Schedule A subtotals.)..... \$1,310,100.00

2. Amount received this period -unitemized monetary contributions of less than \$100..... \$100.00

3. Total monetary contributions received this period.

(Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.)..... **TOTAL** \$1,310,200.00

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

. Amounts may be rounded to whole dollars.

# Schedule A Monetary Contributions Received

Statement covers period  
from 7/1/2024  
through 9/21/2024

**CALIFORNIA FORM 460**  
Page 12 of 31

SEE INSTRUCTIONS ON REVERSE

**NAME OF FILER**

Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates

I.D. NUMBER  
1463510

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)
09/05/2024	Venice Community Housing Venice, CA 90291-2810	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00	\$15,000.00	
08/29/2024	Renee Wilson Los Angeles, CA 90068-2501	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Architect Dake Wilson Architects	\$10,000.00	\$10,000.00	

**SUBTOTAL** \$15,000.00

## Schedule A Summary

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.).....	\$1,310,100.00
2. Amount received this period -unitemized monetary contributions of less than \$100.....	\$100.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.).....	<b>TOTAL</b> \$1,310,200.00

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

Schedule B - Part 1  
Loans Received

. Amounts may be rounded to whole dollars.

Statement covers period  
from 7/1/2024  
through 9/21/2024

**CALIFORNIA FORM 460**  
Page 13 of 31

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates

I.D. NUMBER  
1463510

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
United Way Greater Los Angeles Los Angeles, CA 90015-2211  <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$380,000. 00	\$0.00	<input type="checkbox"/> PAID  <input type="checkbox"/> FORGIVEN	\$380,000. 00  DATE DUE	0  RATE \$0.00	\$380,000. 00  02/16/2024 DATE INCURRED	CALENDAR YEAR \$848,570.00 PER ELECTION

SUBTOTALS \$0.00 \$0.00 \$380,000.00 \$0.00

Schedule B Summary

1. Loans received this period..... \$0.00  
(Total Column(b) plus unitemized loans of less than \$100.)

2. Loans paid or forgiven this period..... \$0.00  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.)..... NET \$0.00  
Enter the net here and on the Summary Page, Column A, Line 2. (May be a negative number)

(Enter (e) on Schedule E, Line 3)

\*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

\*Amounts forgiven or paid by another party also must be reported on Schedule A.

\*\*If required.

. Amounts may be rounded to whole dollars.

# Schedule C Nonmonetary Contributions Received

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	7/1/2024	
through	9/21/2024	Page 14 of 31

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates

I.D. NUMBER  
1463510

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/20/2024	United Way Greater Los Angeles Los Angeles, CA 90015-2211	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Staff Time	\$13,570.00	\$848,570.00	

Attach additional information on appropriately labeled continuation sheets.	<b>SUBTOTAL</b>	\$13,570.00
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## Schedule C Summary

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

\$13,570.00  
\$0.00  
\$13,570.00

\*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

. Amounts may be rounded to whole dollars.

# Schedule E Payments Made

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	7/1/2024	
through	9/21/2024	Page 15 of 31

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates	I.D. NUMBER 1463510
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**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.        | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants                | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)* | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations                     | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| 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
Actblue Somerville, MA 02144-3132	OFC		\$185.23
Actblue Somerville, MA 02144-3132	OFC		\$18.73
Actblue Somerville, MA 02144-3132	OFC		\$370.23

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL** \$574.19

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$553,915.50
2. Unitemized payments made this period of under \$100.....	\$0.00
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> \$553,915.50

. Amounts may be rounded to whole dollars.

# Schedule E Payments Made

Statement covers period	<b>CALIFORNIA FORM 460</b>
from <u>7/1/2024</u> through <u>9/21/2024</u>	
Page <u>16</u> of <u>31</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates	I.D. NUMBER 1463510
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**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.        | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants                | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)* | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations                     | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| 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
Actblue Somerville, MA 02144-3132	OFC		\$2.08
Actblue Somerville, MA 02144-3132	OFC		\$3.93
Actblue Somerville, MA 02144-3132	OFC		\$111.23

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL** \$117.24

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$553,915.50
2. Unitemized payments made this period of under \$100.....	\$0.00
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> \$553,915.50



. Amounts may be rounded to whole dollars.

# Schedule E Payments Made

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	7/1/2024	
through	9/21/2024	Page 17 of 31

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates	I.D. NUMBER 1463510
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**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.        | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants                | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)* | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations                     | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| 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
Actblue Somerville, MA 02144-3132	OFC		\$2.08
Actblue Somerville, MA 02144-3132	OFC		\$18.73
Avila Team LLC West Covina, CA 91790-2087	CNS		\$10,000.00

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL** \$10,020.81

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$553,915.50
2. Unitemized payments made this period of under \$100.....	\$0.00
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> \$553,915.50

. Amounts may be rounded to whole dollars.

# Schedule E Payments Made

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	7/1/2024	
through	9/21/2024	Page 18 of 31

SEE INSTRUCTIONS ON REVERSE

**NAME OF FILER**

Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates

**I.D. NUMBER**

1463510

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Barkan Strategies, Inc Pasadena, CA 91107-3976	CNS		\$8,350.00
Barkan Strategies, Inc Pasadena, CA 91107-3976	CNS		\$8,350.00
Barkan Strategies, Inc Pasadena, CA 91107-3976	CNS		\$8,350.00

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

**SUBTOTAL** \$25,050.00

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$553,915.50
2. Unitemized payments made this period of under \$100.....	\$0.00
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> \$553,915.50

. Amounts may be rounded to whole dollars.

# Schedule E Payments Made

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	7/1/2024	
through	9/21/2024	Page 19 of 31

SEE INSTRUCTIONS ON REVERSE

**NAME OF FILER**

Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates

**I.D. NUMBER**

1463510

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Barkan Strategies, Inc  Pasadena, CA 91107-3976	CNS		\$8,350.00
Budoet Watchdoos Newsletter  Torrance, CA 90505-2500		Slate Mailer	\$55,000.00
Cal Voter  Torrance, CA 90505-2500		Slate Mailer	\$20,825.00

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

**SUBTOTAL** \$84,175.00

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$553,915.50
2. Unitemized payments made this period of under \$100.....	\$0.00
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> \$553,915.50

. Amounts may be rounded to whole dollars.

# Schedule E Payments Made

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	7/1/2024	
through	9/21/2024	Page 20 of 31

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates	I.D. NUMBER 1463510
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**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.        | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants                | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)* | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations                     | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| 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
David Binder Research  San Francisco, CA 94102-5975	CNS		\$32,500.00
Digital Tractor Graphic Design  Sacramento, CA 95818-4303	LIT		\$924.80
Election Digest  Torrance, CA 90505-2500		Slate Mailer	\$27,875.00

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL** \$61,299.80

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$553,915.50
2. Unitemized payments made this period of under \$100.....	\$0.00
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> \$553,915.50

. Amounts may be rounded to whole dollars.

# Schedule E Payments Made

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	7/1/2024	
through	9/21/2024	Page 21 of 31

SEE INSTRUCTIONS ON REVERSE

**NAME OF FILER**

Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates

**I.D. NUMBER**

1463510

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Kaufman Legal Group Los Angeles, CA 90017-5864	PRO		\$8,113.50
Kaufman Legal Group Los Angeles, CA 90017-5864	OFC		\$102.60
Kaufman Legal Group Los Angeles, CA 90017-5864	PRO		\$12,094.00

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

**SUBTOTAL** \$20,310.10

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$553,915.50
2. Unitemized payments made this period of under \$100.....	\$0.00
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> \$553,915.50

. Amounts may be rounded to whole dollars.

# Schedule E Payments Made

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	7/1/2024	
through	9/21/2024	Page 22 of 31

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates	I.D. NUMBER 1463510
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**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.        | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants                | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)* | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations                     | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| 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
Kaufman Legal Group Los Angeles, CA 90017-5864	OFC		\$137.31
Kaufman Legal Group Los Angeles, CA 90017-5864	PRO		\$5,726.00
Kaufman Legal Group Los Angeles, CA 90017-5864	OFC		\$657.44

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL** \$6,520.75

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$553,915.50
2. Unitemized payments made this period of under \$100.....	\$0.00
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> \$553,915.50

. Amounts may be rounded to whole dollars.

# Schedule E Payments Made

Statement covers period	<b>CALIFORNIA FORM 460</b>
from <u>7/1/2024</u> through <u>9/21/2024</u>	
Page <u>23</u> of <u>31</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates	I.D. NUMBER 1463510
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**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.        | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants                | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)* | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations                     | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| 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
Kaufman Legal Group Los Angeles, CA 90017-5864	PRO		\$12,101.50
Kaufman Legal Group Los Angeles, CA 90017-5864	OFC		\$104.20
Kaufman Legal Group Los Angeles, CA 90017-5864	PRO		\$6,424.50

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL** \$18,630.20

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$553,915.50
2. Unitemized payments made this period of under \$100.....	\$0.00
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>\$553,915.50</b>

. Amounts may be rounded to whole dollars.

# Schedule E Payments Made

Statement covers period	<b>CALIFORNIA FORM 460</b>
from <u>7/1/2024</u> through <u>9/21/2024</u>	
Page <u>24</u> of <u>31</u>	

SEE INSTRUCTIONS ON REVERSE

**NAME OF FILER**

Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates

**I.D. NUMBER**

1463510

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Kaufman Legal Group  Los Angeles, CA 90017-5864	OFC		\$118.90
Meeno Inc.  Los Angeles, CA 90031-2830	CNS		\$4,000.00
NM Marketing  Palmdale, CA 93552-4743	LIT		\$33,085.50

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

**SUBTOTAL** \$37,204.40

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$553,915.50
2. Unitemized payments made this period of under \$100.....	\$0.00
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> \$553,915.50



. Amounts may be rounded to whole dollars.

# Schedule E Payments Made

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	7/1/2024	
through	9/21/2024	Page 25 of 31

SEE INSTRUCTIONS ON REVERSE

**NAME OF FILER**

Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates

**I.D. NUMBER**

1463510

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
NM Marketing Palmdale, CA 93552-4743	POS		\$150,263.62
Senior Advocate Torrance, CA 90505-2500		Slate Mailer	\$21,750.00
The Outreach Team Ithaca, NY 14850-6701	LIT		\$16,922.45

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

**SUBTOTAL** \$188,936.07

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$553,915.50
2. Unitemized payments made this period of under \$100.....	\$0.00
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> \$553,915.50

. Amounts may be rounded to whole dollars.

# Schedule E Payments Made

Statement covers period	<b>CALIFORNIA FORM 460</b>
from <u>7/1/2024</u> through <u>9/21/2024</u>	
Page <u>26</u> of <u>31</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates	I.D. NUMBER 1463510
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**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |   |   |   |
|---|---|---|
| CMP campaign paraphernalia/misc.        | MBR member communications                     | RAD radio airtime and production costs                        |
| CNS campaign consultants                | MTG meetings and appearances                  | RFD returned contributions                                    |
| CTB contribution (explain nonmonetary)* | OFC office expenses                           | SAL campaign workers' salaries                                |
| CVC civic donations                     | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| 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
The Outreach Team  Ithaca, NY 14850-6701		Field Program Expenses	\$67,934.88
Voxpop LLC  Los Angeles, CA 90035-2642	CNS		\$9,127.00
Voxpop LLC  Los Angeles, CA 90035-2642	CNS		\$9,126.00

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL** \$86,187.88

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$553,915.50
2. Unitemized payments made this period of under \$100.....	\$0.00
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> \$553,915.50

. Amounts may be rounded to whole dollars.

# Schedule E Payments Made

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	7/1/2024	
through	9/21/2024	Page 27 of 31

SEE INSTRUCTIONS ON REVERSE

**NAME OF FILER**

Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates

**I.D. NUMBER**

1463510

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Voxpop LLC Los Angeles, CA 90035-2642	CNS		\$9,126.00
Marilvn Wells Los Angeles, CA 90004-3704	FND		\$5,763.06

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

**SUBTOTAL** \$14,889.06

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$553,915.50
2. Unitemized payments made this period of under \$100.....	\$0.00
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> \$553,915.50

. Amounts may be rounded to whole dollars.

# Schedule F Accrued Expenses (Unpaid Bills)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	7/1/2024	
through	9/21/2024	
		Page 28 of 31

SEE INSTRUCTIONS ON REVERSE

**NAME OF FILER**

Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates

**I.D. NUMBER**

1463510

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

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

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Kaufman Legal Group Los Angeles, CA 90017-5864	PRO	\$8,113.50	\$0.00	\$8,113.50	\$0.00
Kaufman Legal Group Los Angeles, CA 90017-5864	OFC	\$102.60	\$0.00	\$102.60	\$0.00
Kaufman Legal Group Los Angeles, CA 90017-5864	PRO	\$12,094.00	\$0.00	\$12,094.00	\$0.00
<b>SUBTOTALS</b>		\$20,310.10	\$0.00	\$20,310.10	\$0.00

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

## Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)	<b>INCURRED TOTALS</b>	\$0.00
2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)	<b>PAID TOTALS</b>	\$20,447.41
3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)	<b>NET</b>	(\$20,447.41) <small>(May be a negative number)</small>

. Amounts may be rounded to whole dollars.

# Schedule F Accrued Expenses (Unpaid Bills)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	7/1/2024	
through	9/21/2024	
		Page 29 of 31

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates	I.D. NUMBER 1463510
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**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

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

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Kaufman Legal Group  Los Angeles, CA 90017-5864	OFC	\$137.31	\$0.00	\$137.31	\$0.00

*Payments that are contributions or independent expenditures must also be summarized on Schedule D.	<b>SUBTOTALS</b>	\$137.31	\$0.00	\$137.31	\$0.00
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## Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) .....	<b>INCURRED TOTALS</b>	\$0.00
2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) .....	<b>PAID TOTALS</b>	\$20,447.41
3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) .....	<b>NET</b>	(\$20,447.41) <small>(May be a negative number)</small>

. Amounts may be rounded to whole dollars.

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

SEE INSTRUCTIONS ON REVERSE

Statement covers period	<b>CALIFORNIA FORM 460</b>
from <u>7/1/2024</u>	
through <u>9/21/2024</u>	
Page <u>30</u> of <u>31</u>	

**NAME OF FILER**  
 Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates

**I.D. NUMBER**  
 1463510

**NAME OF AGENT OR INDEPENDENT CONTRACTOR**  
 Marilyn Wells

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

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

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Bright Entertainment Torrance, CA 90501-1113	FND			\$1,740.16
Jennifer Bullock Productions Sunland, CA 91040-1928	FND			\$780.00
Your Chef Catering & Meal Prep Los Angeles, CA 90004-3704	FND			\$2,542.90

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\*** \$5,063.06

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

. Amounts may be rounded to whole dollars.

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

SEE INSTRUCTIONS ON REVERSE

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	7/1/2024	
through	9/21/2024	Page 31 of 31

<b>NAME OF FILER</b> Yes on A: Community Experts United for Homelessness and Housing Solutions, a Coalition of Nonprofit Organizations and Housing Advocates	<b>I.D. NUMBER</b> 1463510
<b>NAME OF AGENT OR INDEPENDENT CONTRACTOR</b> NM Marketing	

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

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

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
United States Postal Service Washington, DC 20260-0004	POS		\$150,263.62

Attach additional information on appropriately labeled continuation sheets. **TOTAL\*** \$150,263.62

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