Recipient Committee Campaign Statement Cover Page

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CALIFORNIA FORM 460 2001/02

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SEE INSTRUCTIONS ON REVERSE

Statement covers period	Date of election if applicable: (Month, Day, Year)
from 9/22/2024 through 10/19/24	11/5/2024

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

- ☐ Officeholder, Candidate Controlled Committee
  - ☐ State Candidate Election Committee
  - ☐ Recall *(Also Complete Part 5)*
- ☐ General Purpose Committee
  - ☐ Sponsored
  - ☐ Small Contributor Committee
  - ☐ Political Party/Central Committee
- ☑ Primarily Formed Ballot Measure Committee
  - ☐ Controlled
  - ☑ Sponsored *(Also Complete Part 6)*
- ☐ Primarily Formed Candidate/ Officeholder Committee *(Also Complete Part 7)*

2. Type of Statement:

- ☑ Preelection Statement
- ☐ Semi-annual Statement
- ☐ Termination Statement (Also file a Form 410 Termination)
- ☐ 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 and under penalty of perjury under the laws of the State of California that the foregoing ad herein and in the attached schedules is true and complete. I certify

Executed on 10/24/2024 (DATE) By _____
SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on _____ (DATE) By _____
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT, OR RESPONSIBLE OFFICER OF PROPONENT

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

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

Recipient Committee
Campaign Statement
Cover Page-Part 2

CALIFORNIA FORM 460

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

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

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

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

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? ☐ YES ☐ NO
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	
CITY STATE ZIP CODE AREA CODE/PHONE	

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? ☐ YES ☐ NO
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	
CITY STATE ZIP CODE AREA CODE/PHONE	

6.Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE
Los Angeles County Homelessness Prevention, Reduction and Accountability Initiative

BALLOT NO. OR LETTER	JURISDICTION	
A	County of Los Angeles	☑ SUPPORT ☐ OPPOSE

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

NAME OF OFFICEHLOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement
Summary Page

Amounts may be rounded to whole dollars.

Statement covers period
from 9/22/2024
through 10/19/2024

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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

Contributions Received

		Column A Total This Period (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	$840,450.00	$4,850,405.97
2. Loans Received	Schedule B, Line 3	$0.00	$380,000.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1+ 2	$840,450.00	$5,230,405.97
4. Nonmonetary Contributions	Schedule C, Line 3	$0.00	$918,570.00
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	$840,450.00	$6,148,975.97

Expenditures Made

6. Payments Made	Schedule E, Line 4	$1,507,544.45	$4,510,589.02
7. Loans Made	Schedule H, Line 3	$0.00	$0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	$1,507,544.45	$4,510,589.02
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	$22,937.94	$22,937.94
10. Nonmonetary Adjustment	Schedule C, Line 3	$0.00	$918,570.00
11. TOTAL EXPENDITURES MADE	Add Lines 8 +9 + 10	$1,530,482.39	$5,452,096.96

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	$818,101.50
13. Cash Receipts	Column A, Line 3 above	$840,450.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4	$0.00
15. Cash Payments	Column A, Line 8 above	$1,507,544.45
16. ENDING CASH BALANCE..Add Lines 12+13+14, then subtract Line 15		$151,007.05

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

17. LOAN GUARANTEES RECEIVED	Schedule B, Part 2	$0.00

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).

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	$402,937.94

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		

Expenditure Limit Summary for State Candidates

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

Date of Election (mm/dd/yyyy)	Total to Date

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

Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

Statement covers period
from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460

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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)
10/09/2024	Manuel Abascal Altadena, CA 91001-2823	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Attorney Latham & Watkins LLP	$500.00	$500.00	
	*** TYPE: Intermediary *** ActBlue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
09/24/2024	California Association of Realtors Issues Mobilization Political Action Committee (IMPAC) Los Angeles, CA 90071-3314 ID: 782560	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC		$25,000.00	$25,000.00	
09/27/2024	California Housing Partnership Corporation San Francisco, CA 94104-2904	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		$5,000.00	$5,000.00	

SUBTOTAL $30,500.00

Schedule A Summary

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)		$840,300.00
2. Amount received this period -unitemized monetary contributions of less than $100		$150.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.)	TOTAL	$840,450.00

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

Schedule A
Monetary Contributions Received

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09/24/2024	California Nurses Association Political Action Committee (CNA-PAC) Oakland, CA 94612-3758 ID: 786967	☐ IND ☐ COM ☐ OTH ☐ PTY ☑ SCC		$100,000.00	$100,000.00	
09/26/2024	Stephanie Caridad Los Angeles, CA 90012-4200	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Executive Director NoHo Home Alliance	$200.00	$200.00	
	*** Type: Intermediary *** Actblue Somerville, MA 02144-3131	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
09/26/2024	Peter Dumas Los Angeles, CA 90019-2919	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Project Scientist University of California Los Angeles	$150.00	$250.00	

SUBTOTAL $100,350.00

Schedule A Summary

1. Amount received this period -itemized monetary contributions (Include all Schedule A subtotals.) $840,300.00
2. Amount received this period -unitemized monetary contributions of less than $100 ..... $150.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.) ..... TOTAL $840,450.00

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Schedule A
Monetary Contributions Received

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	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
10/10/2024	Peter Casey Los Angeles, CA 90019-2919	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Project Scientist University of California Los Angeles	$100.00	$250.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
10/03/2024	Century Housing Corporation Culver City, CA 90230-7608	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		$25,000.00	$25,000.00	

SUBTOTAL $25,100.00

Schedule A Summary

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09/26/2024	Mike Dennis Alhambra, CA 91801-1220	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Non-Profit Liberty Hill Foundation	$100.00	$100.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
09/26/2024	Rebecca Dennison Los Angeles, CA 90007-1659	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Nonprofit Director Venice Community Housing	$250.00	$250.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				

SUBTOTAL $350.00

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3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.)	TOTAL	$840,450.00

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Schedule A
Monetary Contributions Received

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10/11/2024	EAH Housing San Rafael, CA 94901-5545	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		$5,000.00	$5,000.00	
10/16/2024	Enterprise Community Partners Los Angeles, CA 90017-4701	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		$10,000.00	$10,000.00	
10/05/2024	Jane Gan San Tucson, AZ 85715-3750	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Not-Employed N/A	$50.00	$150.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-4102	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				

SUBTOTAL $15,050.00

Schedule A Summary

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10/10/2024	Jami Gan Gan Tucson, AZ 85715-3253	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Not-Employed N/A	$100.00	$150.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-5132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
09/26/2024	Melinda Gibson Santa Monica, CA 90404-4442	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Organizer The Outreach Team	$100.00	$100.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-5132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				

SUBTOTAL $200.00

Schedule A Summary

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10/04/2024	Goldfarb & Lipman LLP Oakland, CA 94612-1[illegible]	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		$10,000.00	$10,000.00	
10/03/2024	Sam Grayeli Los Angeles, CA 9[illegible]5-6566	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Commercial Real Estate Sam Grayeli	$5,000.00	$5,000.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 0[illegible]-[illegible]	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
09/26/2024	Norma Guerrero [illegible] Santa Monica, C[illegible]-2[illegible]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Sr. Advisor The Los Angeles Homeless Services Authority	$100.00	$100.00	

SUBTOTAL $15,100.00

Schedule A Summary

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Schedule A
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	*** TYPE: Intermediary *** ActBlue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
09/26/2024	Katherine Hill Agua Dulce, CA 91390-4559	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Non-Profit Executive PATH	$1,000.00	$2,000.00	
	*** TYPE: Intermediary *** ActBlue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
09/26/2024	Katherine Hill Agua Dulce, CA 91390-4559	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Non-Profit Executive PATH	$1,000.00	$2,000.00	

SUBTOTAL $2,000.00

Schedule A Summary

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Schedule A
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09/26/2024	Jenna Hornstock Los Angeles, CA 90039-4040	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CEO Hornstock Housing and Community Development Strate	$250.00	$250.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
09/27/2024	Julie Hudman e Los Angeles, CA 90036-4618	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Consultant Julie Hudman	$100.00	$100.00	

SUBTOTAL $350.00

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2. Amount received this period -unitemized monetary contributions of less than $100 $150.00
3. Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here on the Summary Page. Column A. Line 1.) TOTAL $840,450.00

*Contributor Codes
IND- Individual
COM- Recipient Committee (other than PTY or SCC)
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SCHEDULE A

Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

Statement covers period
from 9/22/2024
through 10/19/2024

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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)
	*** TYPE: Intermediary *** ActBlue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
09/24/2024	IKE Smart City LLC (Pete Scantland) Columbus, OH 43222-1100	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		$5,000.00	$5,000.00	
09/26/2024	Eric J Ares Los Angeles, CA 90007-1859	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Director of Housing and Homelessness Policy City of Los Angeles	$100.00	$100.00	
	*** TYPE: Intermediary *** ActBlue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				

SUBTOTAL $5,100.00

Schedule A Summary

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)		$840,300.00
2. Amount received this period -unitemized monetary contributions of less than $100		$150.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.)	TOTAL	$840,450.00

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Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE

Statement covers period
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through 10/19/2024

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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)
09/26/2024	Chris Ko Walnut, CA 91789-4803	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	VP United Way LA	$100.00	$100.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
09/26/2024	Erika Lee Pacific Palisades, CA 90272-3336	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Co-Executive Director Venice Community Housing	$100.00	$100.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				

SUBTOTAL $200.00

Schedule A Summary

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3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.)	TOTAL	$840,450.00

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SCHEDULE A

Schedule A
Monetary Contributions Received

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Statement covers period
from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460

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09/26/2024	Veronica Lewis Norwalk, CA 90650-2603	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Director SSG	$100.00	$100.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
09/23/2024	Little Tokyo Service Center Los Angeles, CA 90013-1443	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		$10,000.00	$10,000.00	
10/09/2024	Los Angeles County Federation of Labor AFL-CIO Los Angeles, CA 90006-2272	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		$150,000.00	$150,000.00	

SUBTOTAL $160,100.00

Schedule A Summary

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Schedule A
Monetary Contributions Received

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Statement covers period
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09/26/2024	Joshua M. Decell Los Angeles, CA 90034-2938	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Executive Downtown Women's Center	$100.00	$100.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
09/28/2024	Sally Malone Washington, DC 20008-3157	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Policy Analyst Los Angeles Homeless Services Authority	$100.00	$100.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				

SUBTOTAL $200.00

Schedule A Summary

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3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.)	TOTAL	$840,450.00

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09/26/2024	Sandra McNeill Los Angeles, CA 90007-2105	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Consultant Sandra McNeill Consulting	$500.00	$500.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
09/26/2024	Zoe Mellner Los Angeles, CA 90048-3775	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Vice President Mayor's Fund for LA	$100.00	$100.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				

SUBTOTAL $600.00

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Schedule A
Monetary Contributions Received

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from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460

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09/27/2024	Shannon Murray Gardena, CA 90249-5902	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Social Work Manager WLCAC	$100.00	$100.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
10/02/2024	National Union of Healthcare Workers Issues Committee for Quality Patient Care and Union Democracy Sacramento, CA 95815-4415 ID: 1401024	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC		$10,000.00	$15,000.00	
09/25/2024	Robert Nothoff Signal Hill, CA 90755-3675	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Policy Director Los Angeles County Federation of Labor	$500.00	$500.00	

SUBTOTAL $10,600.00

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Schedule A
Monetary Contributions Received

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Statement covers period
from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460

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	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-2132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
10/15/2024	Opportunity Beach Fund - Re: Richardson Ballot Measure Committee Los Angeles, CA 90017-5864 ID: 1417305	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC		$15,000.00	$15,000.00	
09/26/2024	Lacheryl Porter Los Angeles, CA 90009-4417	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Consultant LaCheryl Porter	$100.00	$100.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-2132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				

SUBTOTAL $15,100.00

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(Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.) TOTAL $840,450.00

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Schedule A
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Statement covers period
from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460

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09/26/2024	Sarah Rubinstein Los Angeles, CA 90024-7166	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Manager United way of Greater LA	$100.00	$100.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
09/26/2024	Ezequiel Sandoval Los Angeles, CA [illegible]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Policy Manager PATH	$100.00	$100.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				

SUBTOTAL $200.00

Schedule A Summary

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3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.)	TOTAL	$840,450.00

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Schedule A
Monetary Contributions Received

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from 9/22/2024
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CALIFORNIA FORM 460

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10/09/2024	Service Employees International Union Local 721 Washington, DC 20036-1906 ID: 691044	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC		$250,000.00	$605,000.00	
10/08/2024	Service Employees International Union United Health Care Workers West Political Issues Committee Los Angeles, CA 90017-5864 ID: 991800	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC		$25,000.00	$25,000.00	
10/18/2024	Sheet Metal, Air, Rail, Transportation Workers' International Union (S.M.A.R.T.) Local 105 PAC Glendora, CA 91740-6720 ID: 962809	☐ IND ☐ COM ☐ OTH ☐ PTY ☑ SCC		$10,000.00	$10,000.00	
10/16/2024	Amber Sheikh San Pedro, CA 90731-6505	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Consultant Sheikh/Impact	$100.00	$100.00	
			SUBTOTAL	$285,100.00		

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Schedule A
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Statement covers period
from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460

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NAME OF FILER
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I.D. NUMBER
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	*** TYPE: Intermediary *** Actblue Somerville, MA 02143-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
09/26/2024	Glenn Smith Harbor City, CA 90710-1221	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Not-Employed N/A	$250.00	$250.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02143-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
09/27/2024	Ryan Smith Los Angeles, CA 90017-4052	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CEO St. Joseph Center	$500.00	$600.00	

SUBTOTAL $750.00

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Schedule A
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	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
09/27/2024	Ryan Smith Los Angeles, CA 90017-4652	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CEO St. Joseph Center	$100.00	$600.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
09/26/2024	Barry Snell Santa Monica, CA 90404-4861	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CPA Barry Snell	$100.00	$100.00	

SUBTOTAL $200.00

Schedule A Summary

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	*** TYPE: Intermediary *** ActBlue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
09/26/2024	Southern California Partnership for Jobs Anaheim, CA 92805-3474	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		$150,000.00	$150,000.00	
10/11/2024	Strategic Actions for a Just Economy (SAJE) Los Angeles, CA 90007-3909	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		$15,000.00	$15,000.00	
09/27/2024	Amy Turk South Pasadena, CA 91030-2309	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Social Work Downtown Women's Center	$250.00	$250.00	

SUBTOTAL $165,250.00

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	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
09/26/2024	Bernabe Valderrama Long Beach, CA 90804-1442	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Director St. Joesph Center	$100.00	$100.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
09/26/2024	Zachary Norma Los Angeles, CA 90013-1140	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Housing & Homelessness Policy Director City of Los Angeles	$100.00	$100.00	

SUBTOTAL $200.00

Schedule A Summary

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)		$840,300.00
2. Amount received this period -unitemized monetary contributions of less than $100		$150.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.)	TOTAL	$840,450.00

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

Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

Statement covers period
from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460

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)
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
10/08/2024	Weingart Center Association Los Angeles, CA 90013-2102	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		$5,000.00	$5,000.00	
09/26/2024	Joe Roman Los Angeles, CA 90029-4377	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CEO Specialty Family Foundation	$100.00	$100.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3132	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				

SUBTOTAL $5,100.00

Schedule A Summary

1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)		$840,300.00
2. Amount received this period -unitemized monetary contributions of less than $100		$150.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.)	TOTAL	$840,450.00

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

Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460

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)
09/25/2024	Women Organizing Resources Knowledge & Services (WORKS) Los Angeles, CA 90042-3282	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		$2,500.00	$2,500.00	
09/26/2024	Anita Zamora Los Angeles, CA 90024-5515	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Healthcare Valley Community Healthcare	$100.00	$100.00	
	*** TYPE: Intermediary *** Actblue Somerville, MA 02144-3133	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				

SUBTOTAL $2,600.00

Schedule A Summary

1. Amount received this period -itemized monetary contributions.
(Include all Schedule A subtotals.) $840,300.00
2. Amount received this period -unitemized monetary contributions of less than $100 $150.00
3. Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.) TOTAL $840,450.00

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

Schedule B - Part 1
Loans Received

Amounts may be rounded to whole dollars.

Statement covers period
from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460

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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 9[illegible]-2211 ☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		$380,000.00	$0.00	☐ PAID ☐ FORGIVEN DATE DUE	$380,000.00	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

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

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)

*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.

Schedule E
Payments Made

Amounts may be rounded to whole dollars.

SCHEDULE E

Statement covers period
from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Actblue t Somerville, MA 02144-3132	OFC			$110.64
Actblue Somerville, MA 02144-3132	OFC			$89.52
[illegible]	CNS			$10,000.00

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

SUBTOTAL $10,200.16

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	$1,507,544.45
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.) TOTAL	$1,507,544.45

Schedule E
Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460

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CMP campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)*
CVC civic donations
FIL candidate filing/ballot fees
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TSF transfer between committees of the same candidate/sponsor
VOT voter registration
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
Barker Strategies, Inc Pasadena, CA 91105-2919	CNS			$8,350.00
Citizens for Accountable Leadership Los Angeles, CA 90018-3757			Slate Mailers	$4,393.08
Corrigan Printing Services Sacramento, CA 95811-7531	LIT			$63,017.16

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

SUBTOTAL $75,760.24

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	$1,507,544.45
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.) TOTAL	$1,507,544.45

Schedule E
Payments Made

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

SCHEDULE E

Statement covers period
from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460

NAME OF FILER
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I.D. NUMBER
1463510

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

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TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
WEB information technology costs (Internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Commerce Printing Services Sacramento, CA 95811-0110	LIT		$52,694.25
Voter Guide Inc Ontario, CA 91761-2503		Slate Mailer	$25,815.00
Capital Tractor Graphic Design Sacramento, CA 95814-4707	LIT		$544.00

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

SUBTOTAL $79,053.25

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)		$1,507,544.45
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.)	TOTAL	$1,507,544.45

Schedule E
Payments Made

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

SCHEDULE E

Statement covers period
from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460

NAME OF FILER
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I.D. NUMBER
1463510

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VOT voter registration
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
Digital Tractor Graphic Design Sacramento, CA 95818-4303	LIT			$1,088.00
Educate Your Vote Encino, CA 91436-1856			Slate Mailer	$11,697.00
Larchmont Chronicle Los Angeles, CA 90004-1504	PRT			$2,080.00

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

SUBTOTAL $14,865.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)		$1,507,544.45
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.)	TOTAL	$1,507,544.45

Schedule E
Payments Made

Amounts may be rounded to whole dollars.

SCHEDULE E

Statement covers period
from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460

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1463510

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TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
WEB information technology costs (Internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Los Angeles Times Communications El Segundo, CA 90245-2813	PRT			$99,000.00
NM Marketing Palmdale, CA 93552-4743	LIT			$41,127.23
NM Marketing Palmdale, CA 93552-4743	POS			$239,116.12

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

SUBTOTAL $379,243.35

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	$1,507,544.45
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.) TOTAL	$1,507,544.45

Schedule E
Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460

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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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CNS campaign consultants
CTB contribution (explain nonmonetary)*
CVC civic donations
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PRT print ads
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SAL campaign workers' salaries
TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
WEB information technology costs (Internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
NM Marketing Palmdale, CA 93552-4743	LIT			$32,721.40
NM Marketing Palmdale, CA 93552-4743	POS			$177,195.71
NM Marketing Palmdale, CA 93552-4743	LIT			$24,989.57

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

SUBTOTAL $234,906.68

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	$1,507,544.45
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.) TOTAL	$1,507,544.45

Schedule E
Payments Made

Amounts may be rounded to whole dollars.

SCHEDULE E

Statement covers period
from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460

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I.D. NUMBER
1463510

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
NM Marketing Palmdale, CA 93552-4743	LIT			$32,721.40
NM Marketing Palmdale, CA 93552-4743	POS			$110,427.13
NM Marketing Palmdale, CA 93552-4743	POS			$174,648.65

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

SUBTOTAL $317,797.18

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	$1,507,544.45
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.) TOTAL	$1,507,544.45

Schedule E
Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460

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1463510

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
NM Marketing Palmdale, CA 93552-4743	LIT			$24,989.57
NM Marketing Palmdale, CA 93552-4743	LIT			$14,696.64
NM Marketing Palmdale, CA 93552-4743	POS			$42,984.16

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

SUBTOTAL $82,670.37

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	$1,507,544.45
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.) TOTAL	$1,507,544.45

Schedule E
Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460

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CMP campaign paraphernalia/misc.
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CTB contribution (explain nonmonetary)*
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TSF transfer between committees of the same candidate/sponsor
VOT voter registration
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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			$113,102.02
[illegible] California Latino Voters Guide [illegible] Angeles, CA [illegible]			Slate Mailer	$15,803.00
[illegible] Graphics [illegible] Valley, CA [illegible]	LIT			$912.20

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

SUBTOTAL $129,817.22

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)		$1,507,544.45
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.)	TOTAL	$1,507,544.45

Schedule E
Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
United Democratic Campaign Committee Inglewood, CA 90301-2064			Slate Mailer	$12,000.00
United Democratic Campaign Committee Inglewood, CA 90301-2064			Slate Mailer	$3,000.00
Voter Newsletter Torrance, CA 90503-2500			Slate Mailer	$24,781.00

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

SUBTOTAL $39,781.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)		$1,507,544.45
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.)	TOTAL	$1,507,544.45

Schedule E
Payments Made

Amounts may be rounded to whole dollars

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460

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

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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		Web Ads	$100,000.00
Voxpop LLC Los Angeles, CA 90035-2642	CNS		$22,450.00
Voxpop LLC Los Angeles, CA 90035-2642	CNS		$13,500.00

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

SUBTOTAL $135,950.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)		$1,507,544.45
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.)	TOTAL	$1,507,544.45

Schedule E
Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 9/22/2024
through 10/19/2024

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

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

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VOT voter registration
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
YPE Communications Los Angeles, CA 90041-1570	CNS			$7,500.00

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

SUBTOTAL $7,500.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)		$1,507,544.45
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.)	TOTAL	$1,507,544.45

Schedule F
Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

Statement covers period
from 9/22/2024
through 10/19/2024

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

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

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CTB contribution (explain nonmonetary)*
CVC civic donations
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TSF transfer between committees of the same candidate/sponsor
VOT voter registration
WEB information technology costs (Internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Kaufman Legal Group Los Angeles, CA 90017-5864	PRO	$0.00	$21,828.50	$0.00	$21,828.50
Kaufman Legal Group Los Angeles, CA 90017-5864	OFC	$0.00	$1,109.44	$0.00	$1,109.44
*Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	$0.00	$22,937.94	$0.00	$22,937.94

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 $22,937.94

2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of $100 or more, plus total unitemized payments on accrued expenses under $100.) ..... PAID TOTALS $0.00

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... NET $22,937.94
(May be a negative number)

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

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

Statement covers period
from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460

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
Voxpop LLC

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

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*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
Audiencex Marina Del Rey, CA 90292-5624		Web Ads	$15,000.00
Meta Menlo Park, CA 94025-1456		Web Ads	$68,500.00
YouTube San Bruno, CA 94066-2914			$10,000.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* $93,500.00

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

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

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

Statement covers period
from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460

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
NM Marketing

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

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*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			$229,034.92
United States Postal Service Washington, DC 20260-0004	POS			$178,586.84
United States Postal Service Washington, DC 20260-0004	POS			$111,285.64
United States Postal Service Washington, DC 20260-0004	POS			$174,648.65

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

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

Statement covers period
from 9/22/2024
through 10/19/2024

CALIFORNIA FORM 460
Page 44 of 44

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
NM Marketing

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*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			$42,984.16
United States Postal Service Washington, DC 20260-0004	POS			$106,822.14

Attach additional information on appropriately labeled continuation sheets.

TOTAL* $843,362.35

* 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.