JUL 29 2025 FE

COVER PAGE

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

SEE INSTRUCTIONS ON REVERSE

RECEIVED BY LOS ANGELES COUNTY 2025 JUL 29 PM 2:51 PROPOSITION B UNIT

Date Stamp

RECEIVED BY LOS ANGELES COUNTY 2025 JUL 30 PM 2:33 CAMPAIGN FINANCE

CALIFORNIA FORM 460

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For Official Use Only

Statement covers period

from 01/01/2025

through 06/30/2025

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

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
- ☐ Supplemental Preelection Statement - Attach Form 495

3. Committee Information

I.D. NUMBER: 1463038

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Lindsey Horvath Ballot Measure Committee for Accountability and Progress

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Encino	CA	91436	

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

Jane Leiderman

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Encino	CA	91436	(323)655-4065

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the informa contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 07/18/2025 (Date) By _____ (Signature of Treasurer or Assistant Treasurer)

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor)

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

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
Lindsey Horvath for Supervisor 2022-Officeholder Account	1457026
NAME OF TREASURER	CONTROLLED COMMITTEE?
Leiderman Jane	☐ YES ☒ NO
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	
CITY STATE ZIP CODE AREA CODE/PHONE	
Encino CA 91436 (323)655-4065	

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

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	☐ SUPPORT ☐ OPPOSE

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

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee

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

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

SUMMARY PAGE

Statement covers period
from 01/01/2025
through 06/30/2025

CALIFORNIA FORM 460

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Lindsey Horvath Ballot Measure Committee for Accountability and Progress

I.D. NUMBER

1463038

Contributions Received

		Column A (TOTAL THIS PERIOD, FROM ATTACHED SCHEDULES)	Column B (CALENDAR YEAR TOTAL TO DATE)
1. Monetary Contributions	Schedule A, Line 3	$ 226,350.00	$ 226,350.00
2. Loans Received	Schedule B, Line 3	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	$ 226,350.00	$ 226,350.00
4. Nonmonetary Contributions	Schedule C, Line 3	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	$ 226,350.00	$ 226,350.00

Expenditures Made

6. Payments Made	Schedule E, Line 4	$ 61,082.65	$ 61,082.65
7. Loans Made	Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	$ 61,082.65	$ 61,082.65
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	11,694.48	11,694.48
10. Nonmonetary Adjustment	Schedule C, Line 3	0.00	0.00
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	$ 72,777.13	$ 72,777.13

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	$ 33,253.41
13. Cash Receipts	Column A, Line 3 above	226,350.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4	0.00
15. Cash Payments	Column A, Line 8 above	61,082.65
16. **ENDING CASH BALANCE**	Add Lines 12 + 13 + 14, then subtract Line 15	$ 198,520.76

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

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

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	$ 0.00
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	$ 11,694.48

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).

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/yy)	Total to Date
__/__/__	$
__/__/__	$

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

Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

Statement covers period
from 01/01/2025
through 06/30/2025

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Lindsey Horvath Ballot Measure Committee for Accountability and Progress

I.D. NUMBER

1463038

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)
04/24/2025	Alpha Site Services LLC Carlsbad, CA 92011	☐IND ☐COM ☒OTH ☐PTY ☐SCC		25,000.00	25,000.00	O2025 $25,000.00
06/27/2025	Seymour Amster Los Angeles, CA 91402	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Executive Director Parents Educators Teachers and Students in Action	500.00	500.00	O2025 $500.00
01/14/2025	Jonathan Aubry West Hollywood, CA 90069	☒IND ☐COM ☐OTH ☐PTY ☐SCC	CEO ACO	-1,000.00	-1,000.00	O2024 $1,000.00
03/23/2025	Craig Berberian West Hollywood, CA 90069	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Managing Partner Empire Property Group	2,000.00	2,000.00	O2025 $2,000.00
06/11/2025	William Bloomfield Park City, UT 84060	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	10,000.00	10,000.00	O2025 $10,000.00 O2023 $25,000.00
			SUBTOTAL $	36,500.00		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 226,350.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL $** 226,350.00

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

Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
from 01/01/2025
through 06/30/2025

CALIFORNIA FORM 460

NAME OF FILER
Lindsey Horvath Ballot Measure Committee for Accountability and Progress

I.D. NUMBER
1463038

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
06/26/2025	Tayyab Blouch Los Angeles, CA 91326	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Business Owner Rubicon Security System and TK Security Inc	2,500.00	2,500.00	O2025 $2,500.00
06/16/2025	Crimson IT Services Inc Los Angeles, CA 90071	[ ] IND [ ] COM [X] OTH [ ] PTY [ ] SCC		5,000.00	5,000.00	O2025 $5,000.00
03/06/2025	Glen Dake Los Angeles, CA 90062	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Landscape Architect GDML Holdings Inc	10,000.00	0.00	O2025 $0.00 O2024 $5,000.00
03/07/2025	Glen Dake Los Angeles, CA 90062	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Landscape Architect GDML Holdings Inc	-10,000.00	0.00	O2025 $0.00 O2024 $5,000.00
06/27/2025	Fox Corporation Washington, DC 20001	[ ] IND [ ] COM [X] OTH [ ] PTY [ ] SCC		10,000.00	10,000.00	O2025 $10,000.00 O2024 $10,000.00
			SUBTOTAL $	17,500.00		

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IND – Individual
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PTY – Political Party
SCC – Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
from 01/01/2025
through 06/30/2025

CALIFORNIA FORM 460

NAME OF FILER
Lindsey Horvath Ballot Measure Committee for Accountability and Progress

I.D. NUMBER
1463038

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)
03/20/2025	Galisteo Group LLC(Mona Mohammadi) Los Angeles, CA 90068	☐IND ☐COM ☒OTH ☐PTY ☐SCC		15,000.00	15,000.00	O2025 $15,000.00
03/17/2025	Cliff Goldstein Santa Monica, CA 90402	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Investor GPI	10,000.00	10,000.00	O2025 $10,000.00
03/31/2025	Dana Guerin Santa Monica, CA 90402	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Producer Epic Level	10,000.00	10,000.00	O2025 $10,000.00
06/02/2025	Sajid Hameed Los Angeles, CA 90010	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Security Services Allied International Security Inc	10,000.00	10,000.00	O2025 $10,000.00
05/07/2025	International Brotherhood of Electrical Workers Local 11 Pasadena, CA 91101	☐IND ☒COM ☐OTH ☐PTY ☐SCC		25,000.00	25,000.00	O2025 $25,000.00
			SUBTOTAL $	70,000.00		

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OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
from 01/01/2025
through 06/30/2025

CALIFORNIA FORM 460

NAME OF FILER
Lindsey Horvath Ballot Measure Committee for Accountability and Progress

I.D. NUMBER
1463038

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)
03/13/2025	KAB Medical Group Inc Chula Vista, CA 91910	☐IND ☐COM ☒OTH ☐PTY ☐SCC		25,000.00	25,000.00	O2025 $25,000.00
04/28/2025	Laborers International Union of North America Local 300 Los Angeles, CA 90020	☐IND ☒COM ☐OTH ☐PTY ☐SCC		5,000.00	5,000.00	O2025 $5,000.00 O2023 $25,000.00
05/23/2025	Los Angeles County Firefighters Local 1014 (ID# 1338370) El Monte, CA 91731	☐IND ☒COM ☐OTH ☐PTY ☐SCC		10,000.00	10,000.00	O2025 $10,000.00 O2023 $49,000.00
03/06/2025	Jay Luchs Los Angeles, CA 90069	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Real Estate Newmark Pacific	5,000.00	5,000.00	O2025 $5,000.00
05/05/2025	John Chanesian Pasadena, CA 91104	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Deputy Attorney General State of CA	2,500.00	2,500.00	O2025 $2,500.00 O2023 $5,000.00
			SUBTOTAL $	47,500.00		

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

Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
from 01/01/2025
through 06/30/2025

CALIFORNIA FORM 460

NAME OF FILER
Lindsey Horvath Ballot Measure Committee for Accountability and Progress

I.D. NUMBER
1463038

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)
04/02/2025	Drew Planting Los Angeles, CA 90049	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Real Estate GPI	5,000.00	5,000.00	O2025 $5,000.00
03/20/2025	Porter24 LLC( ) Encino, CA 91436	[ ] IND [ ] COM [X] OTH [ ] PTY [ ] SCC		9,850.00	9,850.00	O2025 $9,850.00
04/28/2025	Service Employees International Union Local 721	[ ] IND [X] COM [ ] OTH [ ] PTY [ ] SCC		10,000.00	10,000.00	O2025 $10,000.00
06/18/2025	Stanley Shuster Los Vegas, NV 89135	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	President Grand Havana Enterprises	2,500.00	2,500.00	O2025 $2,500.00
04/22/2025	Southwest Strategies LLC( ) San Diego, CA 92101	[ ] IND [ ] COM [X] OTH [ ] PTY [ ] SCC		2,500.00	2,500.00	O2025 $2,500.00
			SUBTOTAL $	29,850.00		

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

Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded to whole dollars.

Statement covers period
from 01/01/2025
through 06/30/2025

CALIFORNIA FORM 460

NAME OF FILER
Lindsey Horvath Ballot Measure Committee for Accountability and Progress

I.D. NUMBER
1463038

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)
04/30/2025	Martha Swiller Los Angeles, CA 90064	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	250.00	0.00	O2025 $250.00
05/02/2025	Martha Swiller Los Angeles, CA 90064	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Retired n/a	-250.00	0.00	O2025 $250.00
06/30/2025	United Nurses Association of CA/Union of Health Care Professionals PAC (ID# 1295768) Long Beach, CA 90802	☐IND ☒COM ☐OTH ☐PTY ☐SCC		10,000.00	10,000.00	O2025 $10,000.00 O2023 $15,000.00
05/02/2025	Richard Weintraub Los Angeles, CA 90272	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Real Estate Developer WREG LLC	5,000.00	5,000.00	O2025 $5,000.00 O2023 $2,500.00
04/28/2025	Western States Regional Council of Carpenters Issues Committee (ID# 1301846) Los Angeles, CA 90071	☐IND ☒COM ☐OTH ☐PTY ☐SCC		10,000.00	10,000.00	O2025 $10,000.00 O2024 $20,000.00
			SUBTOTAL $	25,000.00		

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

SCHEDULE E

Schedule E
Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 01/01/2025
through 06/30/2025

CALIFORNIA FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Lindsey Horvath Ballot Measure Committee for Accountability and Progress

I.D. NUMBER

1463038

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Avalon Advisory Group LLC Los Angeles, CA 90732	FND		23,300.00
E-Fundraising Connections Sacramento, CA 95816	OFC	Processing Fees	4,789.93
Leiderman & Asscciates, Inc. Encino, CA 91436	PRO		1,000.00

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

SUBTOTAL $ 29,089.93

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 61,082.65
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 $** 61,082.65

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 01/01/2025
through 06/30/2025

CALIFORNIA FORM 460

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NAME OF FILER

Lindsey Horvath Ballot Measure Committee for Accountability and Progress

I.D. NUMBER

1463038

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Leiderman & Associates, Inc. Encino, CA 91436	PRO			807.19
Leiderman & Associates, Inc. Encino, CA 91436	OFC			26.07
Lisa Thompson Brea, CA 92821	CNS			3,500.00
Lisa Thompson Brea, CA 92821	OFC			180.00
Lisa Thompson Brea, CA 92821	CNS			3,500.00

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

SUBTOTAL $ 8,013.26

Schedule E
(Continuation Sheet)
Payments Made

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Statement covers period
from 01/01/2025
through 06/30/2025

CALIFORNIA FORM 460

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Lisa Thompson Brea, CA 92821	FND			14,030.67
Lisa Thompson Brea, CA 92821	FND			2,948.79
Lisa Thompson Brea, CA 92821	CNS			3,500.00
Lisa Thompson Brea, CA 92821	CNS			3,500.00

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

SUBTOTAL $ 23,979.46

Schedule F
Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

Statement covers period
from 01/01/2025
through 06/30/2025

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Lindsey Horvath Ballot Measure Committee for Accountability and Progress

I.D. NUMBER

1463038

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

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

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Lisa Thompson Brea, CA 92821	FND	0.00	11,694.48	0.00	11,694.48
SUBTOTALS $		0.00	11,694.48	0.00	11,694.48

*** 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 accrued expenses under $100.) ..... **INCURRED TOTALS $** 11,694.48
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 $** 11,694.48 (May be a negative number)

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

Amounts may be rounded to whole dollars.

SCHEDULE G

Statement covers period
from 01/01/2025
through 06/30/2025

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Lindsey Horvath Ballot Measure Committee for Accountability and Progress

I.D. NUMBER
1463038

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Lisa Thompson

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
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FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Mailchimp Atlanta, GA 30308	WEB			180.00
SoFi Stadium Inglewood, CA 90301	FND			7,966.92
SoFi Stadium Inglewood, CA 90301	FND			2,948.79
Sunset Marquis Hotel & Villas W. Hollywood, CA 90069	FND			6,063.75

Attach additional information on appropriately labeled continuation sheets.

TOTAL* $ 17,159.46

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

Amounts may be rounded to whole dollars.

Statement covers period
from 01/01/2025
through 06/30/2025

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Lindsey Horvath Ballot Measure Committee for Accountability and Progress

I.D. NUMBER
1463038

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Lisa Thompson

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
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IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
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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
Sunset Marquis Hotel & Villas W. Hollywood, CA 90069	FND			10,313.62
Z Valet Los Angeles, CA 90010	FND			1,380.86

Attach additional information on appropriately labeled continuation sheets.

TOTAL* $ 11,694.48

** 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.*