Type or print in ink. Amounts may be rounded to whole dollars.

| | SCHEDULE I |
|-------------------------|----------------|
| Statement covers period | CALIFORNIA 460 |
| from | FORM 100 |
| through | 15 / 21 |
| | I.D. NUMBER |
| | 1222010 |

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Assessor Rick Auerbach's Officeholder Account | 1222010 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 returned contributions MTG meetings and appearances CTB contribution (explain nonmonetary)* SAL campaign workers' salaries OFC office expenses CVC civic donations petition circulating t.v. or cable airtime and production costs PET candidate filing/ballot fees FIL PHO phone banks candidate travel, lodging, and meals FND fundraising events staff/spouse travel, lodging, and meals POL polling and survey research independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services transfer between committees of the same candidate/spons-POS TSF legal defense voter registration LEG. PRO professional services (legal, accounting) VOT campaign literature and mailings PRT print ads WEB information technology costs (internet, email) NAME AND ADDRESS OF PAYEE OR CREDITOR CODE OR **DESCRIPTION OF PAYMENT AMOUNT PAID** (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Credit Card Payment 71.70 American Express ID: **OFC** 168.66 American Express ID: LIT 715.52 Bill Scott & Associates, Inc. ID: **SUBTOTAL \$** * Payments that are contributions or independent expenditures must also be summarized on Schedule D. Schedule E Summary 1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)......\$ 14873.75 10.00 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).) 14883.75

Schedule E

Type or print in ink. Amounts may be rounded

| | SCHEDULE E |
|-------------------------|----------------|
| Statement covers period | CALIFORNIA 460 |
| from | FURINI 100 |
| through | 16 / 21 |
| | I.D. NUMBER |
| | 1222010 |

| Payments Made | | | whole doll | | from_ | | FO | FORM 400 | | |
|--|---|--------------|--|------------------|---|---|---|--------------------------------|--|--|
| SEE INSTRUCTIONS ON REVERSE | | | | | throug | h | _ 1 | 16 / 21 | | |
| NAME OF FILER | | | | | | | I.D. NUN | MBER | | |
| Assessor Rick Auerbach's Officeholder Account | | | | | • | | 12220 | 10 | | |
| CODES: If one of the following codes accurately describes t | he paym | nent, you m | ay enter t | he code. Other | wise, 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 supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings | MTG OFC PET PHO POL POS PRO | | d appearand ises ilating s survey rese livery and m | ces | RFD SAL TEL TRC TRS TSF VOT | radio airtime and produce returned contributions campaign workers' salt.v. or cable airtime and candidate travel, lodgin staff/spouse travel, lod transfer between comvoter registration information technology | aries d production ng, and meals lging, and me mittees of the | eals e same candidate/spons | | |
| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | | | CODE | OR | DESCRIPTION OF | PAYMENT | | AMOUNT PAID | | |
| Bob Moretti Memorial Scholarship Foundation | ID: | | cvc | | | | | 600.00 | | |
| California Bank & Trust | ID: | | OFC | | | | | 211.90 | | |
| Diamond Bar Friends of the Library | ID: | | CVC | | | | | 100.00 | | |
| * Payments that are contributions or independent expenditures | must als | o be summa | arized on S | Schedule D. | | | UBTOTAL \$ | | | |
| Schedule E Summary | | | | | | | | | | |
| 1. Payments made this period of \$100 or more. (Include all | Schedul | e E subtota | ıls.) | | | | \$ _ | | | |
| 2. Unitemized payments made this period of under \$100 | | | | | | | \$ _ | | | |
| 3. Total interest paid this period on loans. (Enter amount fro | m Sched | lule B, Part | 1, Colum | n (e).) | | | \$ _ | | | |
| 4. Total payments made this period. (Add lines 1, 2, and 3. | Enter he | ere and on | the Sumn | nary Page, Colui | mn A, Line 6.). | т | TOTAL \$ _ | | | |

Type or print in ink. Amounts may be rounded to whole dollars.

| | SCHEDULE E |
|-------------------------|----------------|
| Statement covers period | CALIFORNIA 160 |
| from | FORM 400 |
| through | 17/21 |
| • | I.D. NUMBER |
| | |

| SEE INSTRUCTIONS ON REVERSE | | | | | | throug | h | 1 | 7 / 21 |
|--|----------|--|-----------|-----|------------------|---|--|-----------|-------------|
| NAME OF FILER | | | | | | | | I.D. NUM | BER |
| Assessor Rick Auerbach's Officeholder Account | | | | | | | | 12220 | 10 |
| CODES: If one of the following codes accurately describes the | e payr | nent, you m | nay 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 supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings | | meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting) | | | | RFD SAL TEL TRC TRS TSF VOT | AD radio airtime and production costs The returned contributions The campaign workers' salaries The campaign workers in the campaign workers are candidated workers registration The campaign workers in the campaign workers workers and campaign workers wo | | |
| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER) | | | CODE | OF | DESC | RIPTION OF | PAYMENT | | AMOUNT PAID |
| Mt. SAC Foundation | ID: | | cvc | | | | | | 100.00 |
| National Multiple Sclerosis Society, OR Chapter | ID: | | cvc | | | | | | 100.00 |
| S.W. Voter Registration Education Project | ID: | | CVC | | <u> </u> | | | | 800.00 |
| * Payments that are contributions or independent expenditures r | nust als | so be summ | arized on | Sc | nedule D. | | SUE | STOTAL \$ | |
| Schedule E Summary | | | | | | | | | |
| 1. Payments made this period of \$100 or more. (Include all S | chedu | le E subtota | als.) | | | | | \$ _ | |
| 2. Unitemized payments made this period of under \$100 | | | | | | | | \$ | |
| 3. Total interest paid this period on loans. (Enter amount fron | | | | | | | | | |
| 4. Total payments made this period. (Add lines 1, 2, and 3. | | | | | | | | | |

| | | - | | | | | Annicacoosmoniyaaadana | | | | | SCHEDULE I | |
|--|------------------------|---|------------|-------|------------|------------|--|------------|------|-----------|--------------|------------|--|
| Schedule E | Amounts may be rounded | | | | State | ement cove | rs period | CALIF | | 460 | | | |
| Payments Made | | | whole dol | | | | from | | | FO | RM | 400 | |
| SEE INSTRUCTIONS ON REVERSE | | | | | | | through | | | 1 | 8/21 | | |
| NAME OF FILER | | | | | | | | | | I.D. NUM | BER | | |
| Assessor Rick Auerbach's Officeholder Account | | | | | | | | | | 12220 | 10 | | |
| CODES: If one of the following codes accurately describes to | he payme | ent, you m | nay enter | the c | ode. Othe | rwise, d | escribe | the paymer | nt. | | | | |
| 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 supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings | MTG I | petition circulating phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting) | | | | | RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals Staff/spouse travel, lodging, and meals transfer between committees of the same candidate VOT voter registration WEB information technology costs (internet, email) | | | | ndidate/spon | | |
| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | | | CODE | OR | | DESCRI | PTION OF | PAYMENT | | | AMO | UNT PAID | |
| SBC | ID: | | OFC | | | | | | | | | 115.46 | |
| Southern CA First Jurisdiction | ID: | | PRT | | | | | | | | | 500.00 | |
| The Bruin Democrats | ID: | 782082 | СТВ | | | | | | | ^ | | 250.00 | |
| * Payments that are contributions or independent expenditures | must also | be summ | arized on | Sche | dule D. | | === | | . SU | BTOTAL \$ | | | |
| Schedule E Summary | | | | | | | | | | | | | |
| 1. Payments made this period of \$100 or more. (Include all S | Schedule | E subtota | als.) | | | | | ••••• | | \$ | | | |
| 2. Unitemized payments made this period of under \$100 | | | | | | | | | | \$ | | | |
| 3. Total interest paid this period on loans. (Enter amount from | m Schedi | ule B, Par | t 1, Colun | nn (e |).) | | | | | \$ _ | | | |
| 4. Total payments made this period. (Add lines 1, 2, and 3. | Enter he | re and on | the Sumr | mary | Page, Colu | umn A, l | ine 6.) | | тс | TAL \$ _ | | | |

Type or print in ink. Amounts may be rounded to whole dollars.

| | SCHEDULE E |
|-------------------------|----------------|
| Statement covers period | CALIFORNIA 460 |
| from | FORW SAIL |
| through | 19 / 21 |
| | I.D. NUMBER |
| | 1000040 |

| · ·· / · · · · · · · · · · · · · · · · · · · | 10 | wildle dol | iai S. | from | | 5.90 | | | |
|---|--|--|------------------|--|--|---|--------------------------|--|--|
| SEE INSTRUCTIONS ON REVERSE | | | | through_ | | 19 / 21 | | | |
| NAME OF FILER | | | | | | I.D. NUM | BER | | |
| Assessor Rick Auerbach's Officeholder Account | | | | | | 122201 | 0 | | |
| CODES: If one of the following codes accurately describes the 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 supporting/opposing others (explain)* LEG legal defense | MBR member con MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and seponsage, de | nmunication d appearar nses ulating s survey rese livery and r | is nces | RAD ra RFD re SAL co TEL t. TRC co TRS si TSF tr | adio airtime and productions eturned contributions ampaign workers' salarie v. or cable airtime and pr andidate travel, lodging, a taff/spouse travel, lodgin | es roduction cand and meals g, and mea | duction costs d meals | | |
| LIT campaign literature and mailings | PRT print ads | | | | formation technology co | sts (interne | t, emai <u>l)</u> | | |
| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | | CODE | OR | DESCRIPTION OF PA | AYMENT | | AMOUNT PAID | | |
| The George Harvey Liver Research Fund | ID: | cvc | | | | | 500.00 | | |
| United Farm Workers U.F.W. | ID: | cvc | | | | | 250.00 | | |
| Villa Esperanza Services | ID: | cvc | | | | | 650.00 | | |
| * Payments that are contributions or independent expenditures i | must also be summ | arized on | Schedule D. | | SUB | TOTAL \$ | | | |
| Schedule E Summary | | | | | | | | | |
| 1. Payments made this period of \$100 or more. (Include all S | Schedule E subtota | ıls.) | | | | \$ | | | |
| 2. Unitemized payments made this period of under \$100 | | | | | | \$ | | | |
| 3. Total interest paid this period on loans. (Enter amount from | n Schedule B, Parl | t 1, Colun | nn (e).) | | | \$ | | | |
| 4. Total payments made this period. (Add lines 1, 2, and 3. | Enter here and on | the Sumi | mary Page, Colum | nn A, Line 6.) | тот | AL \$ | | | |
| | | | | | | | | | |

Type or print in ink. Amounts may be rounded to whole dollars.

| | SCHEDULE E |
|-------------------------|----------------|
| Statement covers period | CALIFORNIA 460 |
| from | FORM 400 |
| through | 20 / 21 |
| | I.D. NUMBER |
| | 4000040 |

| SEE INSTRUCTIONS ON REVERSE | | | | | | h | 20 / 21 | |
|---|----------|---|--------------|---------------------|-------------|--|---|----------------------------|
| NAME OF FILER | | | | | | | I.D. NUM | BER |
| Assessor Rick Auerbach's Officeholder Account | | | | | | | 122201 | i0 |
| CODES: If one of the following codes accurately describes t | he payr | nent, you n | nay enter th | ne code. Otherwise, | describe | the payment. | - | |
| CMP campaign paraphemalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings | | meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting) RFD campaign wo t.v. or cable a TRC candidate trav staff/spouse t TRS transfer between | | | | radio airtime and producti returned contributions campaign workers' salari t.v. or cable airtime and p candidate travel, lodging, staff/spouse travel, lodgir transfer between commit voter registration information technology co | es production c and meals ng, and mea tees of the | als same candidate/spon |
| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER) | | | CODE | OR DESC | RIPTION OF | PAYMENT | | AMOUNT PAID |
| American Express | ID: | | | Credit Card Paymer | nt | | | 9740.51 |
| Hollywood Bowl | ID: | | FND | | | | _ | info[9508.00] |
| Pacific Dining Car | ID: | | MTG | | | - | | info[142.67] |
| * Payments that are contributions or independent expenditures | must als | so be summ | arized on S | chedule D. | | SUE | STOTAL \$ | 14873.75 |
| Schedule E Summary | | | | | | | | |
| 1. Payments made this period of \$100 or more. (Include all | Schedu | le E subtota | als.) | | | | \$ | |
| 2. Unitemized payments made this period of under \$100 | | | | | | | | |
| 3. Total interest paid this period on loans. (Enter amount from | m Sche | dule B, Par | t 1, Colum | n (e).) | ••••• | | \$ | |
| 4. Total payments made this period (Add lines 1.2 and 3. | Enter h | ere and on | the Summ | arv Page. Column A | . Line 6.). | то | TAL\$_ | |