| Recipient Committee<br>Campaign Statement<br>Cover Page             |  |   | Date Star              | 200                        | cover page<br>ORNIA 460<br>1/02  |  |
|---|--|---|------------------------|----------------------------|--|--|
|   | Statement covers period from 7/1/2021  | Date of election if applicable:<br>(Month, Day, Year) |                        | Page                       | ORM           1         of         22           For Official Use Only         Only |  |
| SEE INSTRUCTIONS ON REVERSE   | through <u>12/31/2021</u>  | _   |                        |                            |  |  |
| 1. Type of Recipient Committee: All Commit                          | tees- Complete Parts 1, 2, 3, and 4.   | 2. Type of Staten                                     | nent:                  | ·                          |  |  |
| ✓ Officeholder, Candidate Controlled Committee                      | Primarily Formed Ballot Measure  | Preelection Statem                                    | ent                    | Quarterly Stat             | ement  |  |
| State Candidate Election Committee                                  | Committee  | Semi-annual Stater                                    | nent                   | Special Odd-               | /ear Report  |  |
| Recall  | Controlled   | Termination Statem                                    | nent                   |                            |  |  |
| (Also Complete Part 5)  | <br>Sponsored  | (Also file a Form 410 T                               | ermination)            |                            |  |  |
| General Purpose Committee   | (Also Complete Part 6)   | Amendment (Expla                                      | in below)              |                            |  |  |
|   | Primarily Formed Candidate/  |   |                        |                            |  |  |
| Small Contributor Committee   | Officeholder Committee   |   |                        |                            |  |  |
| Political Party/Central Committee                                   | (Also Complete Part 7)   |   |                        |                            |  |  |
| 3. Committee Information  | I.D. NUMBER<br>1399573   | Treasurer(s)  |                        |                            |  |  |
| COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)                |  | NAME OF TREASURER                                     |                        |                            |  |  |
| Committee for Stronger and Safer Neighb                             | orhoods - Supervisor   | Janice Hahn   |                        |                            |  |  |
| Janice Hahn Ballot Measure Committee                                |  | MAILING ADDRESS                                       |                        |                            |  |  |
| STREET ADDRESS (NO P.O. BOX)  |  | CITY  | STATE                  |                            | AREA CODE/PHONE  |  |
|   |  | Los Angeles   | CA                     | 90017 (2                   | 213) 452-6565  |  |
| CITY STATE ZIP COD  |  | NAME OF ASSISTANT TREAS                               | URER, IF ANY           |                            |  |  |
| Los Angeles CA 90017  | . ,  | MAILING ADDRESS                                       |                        |                            |  |  |
| MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BC            | X  | WALLING ADDITEOU                                      |                        |                            |  |  |
| CITY STATE ZIP COD  | E AREA CODE/PHONE  | CITY  | STATE                  | ZIP CODE A                 | REA CODE/PHONE   |  |
| OPTIONAL:FAX/E-MAIL ADDRESS<br>(213) 452-6575 / sshin@kaufmanlegalg | roup.com   | OPTIONAL: FAX/E-MAIL ADDF                             | RESS                   |                            |  |  |
|   | ing and reviewing this statement and to the bes<br>State of California that the foregoing is true an<br>By |   | ntained herein and in  | the attached schedules is  | true and complete. I certify   |  |
| DATE  |  | SIGNATURE OF TREASURER OR ASSIST                      | ANT TREASURER          |                            |  |  |
| Executed on DATE  | By   | FICEHOLDER, CANDIDATE, STATE MEASURE F                | PROPONENT, OR RESPONS  | SIBLE OFFICER OF PROPONENT | FPPC Form 460 (Jan/2016)   |  |
| Executed on   | Ву   |   |                        |                            | FPPC Advice:   |  |
| DATE  |  | OF CONTROLLING OFFICEHOLDER, CANDIDAT                 | E, OR STATE MEASURE PR | ROPONENT                   | advice@fppc.ca.gov<br>(866/275-3772)   |  |
| Executed on DATE  | By SIGNATURE C   | OF CONTROLLING OFFICEHOLDER, CANDIDAT                 | E, OR STATE MEASURE PR | ROPONENT                   | www.fppc.ca.gov  |  |

5.

**COVER PAGE-PART 2** 



| Officeholder or   | Candidate Con                | trolled C                                  | Committee  | 1                               | 6.Primar                                   |
|---|------------------------------|--|--|---------------------------------|--|
| NAME OF OFFICEHOLDER (  | DR CANDIDATE                 |  |  |                                 | NAME OF E                                  |
| OFFICE SOUGHT OR HELD(  | INCLUDE LOCATION AND I       | DISTRICT NUM                               | MBER IF APPLICAI   | BLE)                            | BALLOT NO                                  |
| RESIDENTIAL/BUSINESS AD   | DRESS (NO. AND STREET        | ) CITY                                     | S  | TATE ZIP                        | Identify t                                 |
| Related Committees<br>not included in this statement<br>contributions or make exper                                     | nt that are controlled by yo | u or are prima                             | -  |                                 |  |
|   |                              |  | I.D. NUMBER  |                                 | 7. Primaril                                |
|   |                              |  |  |                                 |  |
|   | Supervisor 201               | 6  | 1394146  |                                 | -  |
| Janice Hahn for   | -                            | 6  |  | OMMITTEE?                       | officeholder(s                             |
| Janice Hahn for<br>NAMEOFEREASURER Act  | -                            | 6  | 1394146  | DMMITTEE?                       | officeholder(s                             |
| Janice Hahn for<br>NAME OF TREASURER Acc  | -                            |  | 1394146<br>CONTROLLED CO   |                                 | officeholder(s                             |
| Janice Hahn for<br>NAMEioFGREASURER Acc<br>Janice Kay Hahn  | count                        |  | 1394146<br>CONTROLLED CO   |                                 | officeholder(s                             |
| Janice Hahn for<br>NAMEioFGREASURER Acc<br>Janice Kay Hahn  | count                        |  | 1394146<br>CONTROLLED CO   | NO                              | officeholder(s                             |
| Janice Hahn for<br>MANEOFERFREASURER Acc<br>Janice Kay Hahn<br>COMMITTEE ADDRESS  | STREET ADDRESS (I            | NO P.O. BOX)                               | 1394146<br>CONTROLLED CO<br>YES  | NO                              | officeholder(s                             |
| Janice Hahn for<br>MANEOFEREASURER Acc<br>Janice Kay Hahn<br>COMMITTEE ADDRESS<br>CITY                                  | STREET ADDRESS (F            | NO P.O. BOX)<br>ZIP CODE                   | 1394146<br>CONTROLLED CO<br>YES  | NO                              | officeholder(s                             |
| Janice Hahn for<br>MANEOFEREASURER Acc<br>Janice Kay Hahn<br>COMMITTEE ADDRESS<br>CITY                                  | STREET ADDRESS (F            | NO P.O. BOX)<br>ZIP CODE<br>90017-         | 1394146<br>CONTROLLED CO<br>YES  | NO                              | NAME OF OF                                 |
| Janice Hahn for<br>MANEOFERPASURER Acc<br>Janice Kay Hahn<br>COMMITTEE ADDRESS<br>CITY<br>Los Angeles<br>COMMITTEE NAME | STREET ADDRESS (F            | NO P.O. BOX)<br>ZIP CODE<br>90017-         | 1394146<br>CONTROLLED CO<br>YES<br>AREA CODI<br>2134                                   | <b>NO</b><br>E/PHONE<br>4526565 | -  |
| Janice Hahn for<br>MANEOFERPASURER Acc<br>Janice Kay Hahn<br>COMMITTEE ADDRESS<br>CITY<br>Los Angeles<br>COMMITTEE NAME | STREET ADDRESS (F            | NO P.O. BOX)<br>ZIP CODE<br>90017-         | 1394146<br>CONTROLLED CO<br>YES<br>AREA CODI<br>- 2134                                 | <b>NO</b><br>E/PHONE<br>4526565 | NAME OF OF                                 |
| Janice Hahn for<br>MAMEOFERPASURERACO<br>Janice Kay Hahn<br>COMMITTEE ADDRESS<br>CITY<br>Los Angeles                    | STREET ADDRESS (F            | NO P.O. BOX)<br>ZIP CODE<br>90017-<br>5864 | 1394146<br>CONTROLLED CO<br>YES<br>AREA CODI<br>- 2134<br>I.D. NUMBER<br>CONTROLLED CO | <b>E/PHONE</b><br>4526565       | Officeholder(s<br>NAME OF OF<br>NAME OF OF |

### 6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

| BALLOT NO. OR LETTER | JURISDICTION | SUPPORT |
|----------------------|--------------|---------|
|                      |              | OPPOSE  |

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

AME 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 |         |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD |         |
|                                   |                       |         |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | SUPPORT |
|                                   |                       | OPPOSE  |

Attach continuation sheets if necessary

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

#### COVER PAGE-PART 2



#### 5. Officeholder or Candidate Controlled Committee

| NAME OF OFFICEHOLDER OR CANDIDATE           |                        |           |
|---|------------------------|-----------|
| Janice Hahn                                 |                        |           |
| OFFICE SOUGHT OR HELD(INCLUDE LOCATION AND  | DISTRICT NUMBER IF APP | LICABLE)  |
| Held: County Supervisor                     |                        |           |
| County                                      | County of Los 2        | Angeles 4 |
| RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREE | T) CITY                | STATE ZIP |
|   | Los Angeles            | CA 90017  |

**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 (N | O 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 (N | O 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 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 |         |
|                                   |                       | OPPOSE  |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD |         |
|                                   |                       | OPPOSE  |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD |         |
|                                   |                       | OPPOSE  |

Attach continuation sheets if necessary

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

| Compaign Disclosure Statement                                    | Amounts may b  | be rounded  | SUMMARY PAGE            |  |
|--|--|---|-------------------------|--|
| Campaign Disclosure Statement<br>Summary Page                    | to whole dollars.  |   | Statement covers period | CALIFORNIA 460   |
| Summary Fage   |  |   | from 7/1/2021           |  |
|  |  |   | through 12/31/2021      | Page <u>4</u> of <u>22</u>   |
| SEE INSTRUCTIONS ON REVERSE NAME OF FILER                        |  | I   |                         | I.D. NUMBER  |
| Committee for Stronger and Safer Neighborhoods - Supervisor      | Janice Hahn Ballot M                                       | leasure Committee   |                         | 1399573  |
| Contributions Received   | Column A<br>Total This Period<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE                    |                         | mmary for Candidates<br>he State Primary and                         |
| 1. Monetary Contributions Schedule A, Line 3                     | \$217 <b>,</b> 500.00                                      | \$217,500.00  | 0                       | 1/1 through 6/30 7/1 to Date   |
| 2. Loans Received Schedule B, Line 3                             | \$0.00   | \$0.00  | 0 20. Contributions     | , , , , , , , , , , , , , , , , , , ,                                |
| 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1+ 2                    | \$217,500.00   | \$217,500.00  |                         |  |
| 4. Nonmonetary Contributions Schedule C, Line 3                  | \$0.00   | \$0.00  | 21. Expenditures        |  |
| 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4                  | \$217,500.00   | \$217,500.00  | 0 Made                  |  |
| Expenditures Made  |  |   |                         | Summary for State  |
| 6. Payments Made Schedule E, Line 4                              | \$38,926.15  | \$44,610.41   | 1 Candidates            |  |
| 7. Loans Made Schedule H, Line 3                                 | \$0.00   | \$0.00  | 22. Cumulativ           | e Expenditures Made *  |
| 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7                        | \$38,926.15  | \$44,610.41   | — (If Subject to )      | Voluntary Expenditure Limit)   |
| 9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3            | -\$1,254.46  | \$2,880.00  | _                       | Total to Date  |
| 10. Nonmonetary Adjustment Schedule C, Line 3                    | \$0.00   | \$0.00  | (mm/dd/yyyy)            |  |
| 11. TOTAL EXPENDITURES MADE Add Lines 8 +9 + 10                  | \$37,671.69  | \$47,490.41   | <u> </u>                |  |
| Current Cash Statement   |  |   |                         |  |
| 12. Beginning Cash Balance Previous Summary Page, Line 16        | \$21,392.60  | To calculate Column B, add                                    |                         |  |
| 13. Cash Receipts Column A, Line 3 above                         | \$217,500.00   | amounts in Column A to the<br>corresponding amounts from      |                         |  |
| 14. Miscellaneous Increases to Cash Schedule I, Line 4           | \$0.00   | Column B of your last report.<br>Some amounts in Column A     |                         |  |
| 15. Cash Payments Column A, Line 8 above                         | \$38,926.15  | may be negative figures that<br>should be subtracted from     | *Amounts in this se     | ction may be different from amounts                                  |
| 16. ENDING CASH BALANCEAdd Lines 12+13+14, then subtract Line 15 | \$199,966.45   | previous period amounts. If<br>this is the first report being | reported in schedule    |  |
| If this is a termination statement, Line 16 must be zero.        |  | filed for this calendar year,<br>only carry over the amounts  |                         |  |
| 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2                  | \$0.00   | from Lines 2, 7, and 9 (if any).                              |                         |  |
| Cash Equivalents and Outstanding Debts                           |  |   |                         |  |
| 18. Cash Equivalents See instructions on reverse                 | \$0.00   | 1   |                         |  |
| 19. Outstanding Debts       Add Line 2+Line 9 in Column B above  | \$2,880.00   |   | FPPC A                  | FPPC Form 460 (Jan/2016)<br>dvice: advice@fppc.ca.gov (866/275-3772) |

| SEE INSTRUCTIO   | Contributions Received  |   |   | Statement covers                  | 2021 FOR  | M 400<br>5 of 22                         |
|------------------|---|---|---|-----------------------------------|---|--|
| DATE<br>RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR<br>CODE *                     | IF AN INDIVIDUAL, ENTER<br>OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME<br>OF BUSINESS) | AMOUNT<br>RECEIVED THIS<br>PERIOD | CUMULATIVE TO DATE<br>CALENDAR YEAR<br>(JAN. 1-DEC. 31) | PER ELECTION<br>TO DATE<br>(IF REQUIRED) |
| 10/27/2021       | David Bloom<br>Far Rockaway, NY 11691-5402  | VIND<br>COM<br>OTH<br>PTY<br>SCC          | Real Estate Agent<br>David Bloom  | \$25,000.00                       | \$25,000.00   |  |
| 10/18/2021       | Bill Bloomfield<br>Park City, UT 84060-5148   | ✓ IND<br>COM<br>OTH<br>PTY<br>SCC         | Retired<br>N/A  | \$7,500.00                        | \$7,500.00  |  |
| 11/03/2021       | Continental Development, Corp.<br>El Segundo, CA 90245-4792                                     | ☐ IND<br>☐ COM<br>✔ OTH<br>☐ PTY<br>☐ SCC |   | \$10,000.00                       | \$10,000.00   |  |
| 10/25/2021       | Cordoba Corporation (George Pla)<br>Los Angeles, CA 90012-1410                                  | ☐ IND<br>☐ COM<br>✔ OTH<br>☐ PTY<br>☐ SCC |   | \$10,000.00                       | \$10,000.00   |  |

| SUBTOT  | AL \$52,500.00 |  |
|---|----------------|--|
| Schedule A Summary  |                | *Contributor Codes   |
| 1. Amount received this period -itemized monetary contributions.<br>(Include all Schedule A subtotals.) | \$217,500.00   | IND- Individual<br>COM- Recipient Committee<br>(other than PTY or SCC) |
| 2. Amount received this period -unitemized monetary contributions of less than \$100                    | \$0.00         | OTH- Other (e.g., business entity)<br>PTY- Political Party             |
| 3. Total monetary contributions received this period.   |                | SCC- Small Contributor Committee<br>FPPC Form 460 (Jan/2016)           |
| (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.) TOTAL                            | \$217,500.00   | FPPC Advice: advice@fppc.ca.gov (866/275-3772)                         |

FPPC Advice: advice@fppc.ca.gov (866/2/5-3//2) www.fppc.ca.gov

#### SCHEDULE A

# Schedule A

. Amounts may be rounded

SCHEDULE A

| -                                | Contributions Received   |   | to whole dollars.   | Statement covers<br>from 7/1/<br>through 12/31/ | 2021 <b>FOR</b>   |  |
|----------------------------------|--|---|---|---|---|--|
| NAME OF FILER<br>Committee for S | Stronger and Safer Neighborhoods - Supervisor Janice Hah   | n Ballot Measure                          | Committee   |   | I.D. NUMBEF<br>1399573                                  | R  |
| DATE<br>RECEIVED                 | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)                    | CONTRIBUTOR<br>CODE *                     | IF AN INDIVIDUAL, ENTER<br>OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME<br>OF BUSINESS) | AMOUNT<br>RECEIVED THIS<br>PERIOD               | CUMULATIVE TO DATE<br>CALENDAR YEAR<br>(JAN. 1-DEC. 31) | PER ELECTION<br>TO DATE<br>(IF REQUIRED) |
| 11/03/2021                       | International Brotherhood of Electrical Workers<br>Local Union No. 11 PAC<br>Pasadena, CA 91101-1567<br>ID: 822725 | ☐ IND<br>☐ COM<br>☐ OTH<br>☐ PTY<br>✔ SCC |   | \$25,000.00                                     | \$25,000.00   |  |
| 11/03/2021                       | International Longshore and Warehouse Union Local<br>13 PAC (ILWU)<br>San Pedro, CA 90731-3328<br>ID: 1226530      | □ IND<br>□ COM<br>□ OTH<br>□ PTY<br>✓ SCC |   | \$25,000.00                                     | \$25,000.00   |  |
| 12/21/2021                       | Molina Healthcare, Inc. (Sean Hoffman)<br>Long Beach, CA 90802-4302  | ☐ IND<br>☐ COM<br>✔ OTH<br>☐ PTY<br>☐ SCC |   | \$5,000.00                                      | \$5,000.00  |  |
| 10/27/2021                       | Devora Raichik<br>Los Angeles, CA 90036-2813   | ✓ IND<br>COM<br>OTH<br>PTY<br>SCC         | Office Manager<br>Boardwalk West<br>Financial   | \$10,000.00                                     | \$10,000.00   |  |

| SUBTOTA  | L \$65,000.00 |  |
|--|---------------|--|
| Schedule A Summary   |               | *Contributor Codes   |
| 1. Amount received this period -itemized monetary contributions.<br>(Include all Schedule A subtotals.)  | \$217,500.00  | IND- Individual<br>COM- Recipient Committee<br>(other than PTY or SCC)   |
| 2. Amount received this period -unitemized monetary contributions of less than \$100   | \$0.00        | OTH- Other (e.g., business entity)<br>PTY- Political Party   |
| 3. Total monetary contributions received this period.         (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.)         TOTAL | \$217,500.00  | SCC- Small Contributor Committee<br>FPPC Form 460 (Jan/2016)<br>FPPC Advice: advice@fppc.ca.gov (866/275-3772) |

رحہ: advice@tppc.ca.gov (مەنىدە-ەرمەر) www.fppc.ca.gov

# Schedule A

SCHEDULE A

| SEE INSTRUCTIO                   | Contributions Received   |   | to whole dollars.   | Statement covers<br>from 7/1/<br>through 12/31/ | 2021 FOR  |  |
|----------------------------------|--|---|---|---|---|--|
| NAME OF FILER<br>Committee for S | Stronger and Safer Neighborhoods - Supervisor Janice Hah   | n Ballot Measure                          | e Committee   |   | I.D. NUMBER<br>1399573                                  |  |
| DATE<br>RECEIVED                 | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  | CONTRIBUTOR<br>CODE *                     | IF AN INDIVIDUAL, ENTER<br>OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME<br>OF BUSINESS) | AMOUNT<br>RECEIVED THIS<br>PERIOD               | CUMULATIVE TO DATE<br>CALENDAR YEAR<br>(JAN. 1-DEC. 31) | PER ELECTION<br>TO DATE<br>(IF REQUIRED) |
| 11/03/2021                       | SA Recycling LLC (Moises Figueroa)<br>San Pedro, CA 90731-7539   | ☐ IND<br>☐ COM<br>✔ OTH<br>☐ PTY<br>☐ SCC |   | \$25,000.00                                     | \$25,000.00   |  |
| 09/10/2021                       | Service Employees International Union Local 721<br>CTW, CLC<br>Los Angeles, CA 90017-4510<br>ID: 1296889   | □ IND<br>□ COM<br>□ OTH<br>□ PTY<br>✓ SCC |   | \$25,000.00                                     | \$25,000.00   |  |
| 09/23/2021                       | Southwest Regional Council of Carpenters PAC<br>Los Angeles, CA 90071-1715<br>ID: 870169   | □ IND<br>□ COM<br>□ OTH<br>□ PTY<br>▼ SCC |   | \$25,000.00                                     | \$25,000.00   |  |
| 11/03/2021                       | Union of American Physicians and Dentists<br>Independent Expenditure Committee Restricted-Use<br>Account<br>Sacramento, CA 95814-4715<br>ID: 1395989 | ☐ IND<br>✓ COM<br>☐ OTH<br>☐ PTY<br>☐ SCC |   | \$10,000.00                                     | \$10,000.00   |  |

| SUBTOTA  | AL \$85,000.00 |  |
|--|----------------|--|
| Schedule A Summary   |                | *Contributor Codes   |
| 1. Amount received this period -itemized monetary contributions.<br>(Include all Schedule A subtotals.)                              | \$217,500.00   | IND- Individual<br>COM- Recipient Committee<br>(other than PTY or SCC)   |
| 2. Amount received this period -unitemized monetary contributions of less than \$100   | \$0.00         | OTH- Other (e.g., business entity)<br>PTY- Political Party   |
| 3. Total monetary contributions received this period.         (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.) | \$217,500.00   | SCC- Small Contributor Committee<br>FPPC Form 460 (Jan/2016)<br>FPPC Advice: advice@fppc.ca.gov (866/275-3772) |

رحہ: advice@tppc.ca.gov (مەنىدە-ەرمەر) www.fppc.ca.gov

### Schedule A

#### Statement covers period CALIFORNIA 460 **Monetary Contributions Received** 7/1/2021 FORM from through 12/31/2021 Page 8 of 22 SEE INSTRUCTIONS ON REVERSE NAME OF FILER Committee for Stronger and Safer Neighborhoods - Supervisor Janice Hahn Ballot Measure Committee I.D. NUMBER 1399573 IF AN INDIVIDUAL, ENTER CONTRIBUTOR AMOUNT CUMULATIVE TO DATE PER ELECTION FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR DATE OCCUPATION AND EMPLOYER CODE \* RECEIVED THIS CALENDAR YEAR TO DATE RECEIVED (IF COMMITTEE, ALSO ENTER I.D. NUMBER) (IF SELF-EMPLOYED, ENTER NAME (IF REQUIRED) PERIOD OF BUSINESS) (JAN. 1-DEC. 31) IND СОМ Wagner Law Firm (Avraham Wagner) 10/27/2021 🗸 ОТН \$5,000.00 \$5,000.00 PTY Los Angeles, CA 90067-2722 SCC ✓ IND David Weldler COM Financer 10/27/2021 OTH Boardwalk West \$10,000.00 \$10,000.00 PTY Lakewood, NJ 08701-3163 Financial SCC

| SUBTOTAL  | \$15,000.00            |  |
|---|------------------------|--|
| Schedule A Summary  |                        | *Contributor Codes   |
| <ol> <li>Amount received this period -itemized monetary contributions.         <ul> <li>(Include all Schedule A subtotals.)</li></ul></li></ol> | \$217,500.00<br>\$0.00 | IND- Individual<br>COM- Recipient Committee<br>(other than PTY or SCC)<br>OTH- Other (e.g., business entity)<br>PTY- Political Party<br>SCC- Small Contributor Committee |
| (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Line 1.)  | \$217,500.00           | FPPC Form 460 (Jan/2016)<br>FPPC Advice: advice@fppc.ca.gov (866/275-3772)<br>www.fppc.ca.gov  |

| Schedule E   | . Amounts may be rounded to whole dollars. | SCHEDULE E              |                |  |  |
|--|--|-------------------------|----------------|--|--|
| Payments Made  |  | Statement covers period | CALIFORNIA 460 |  |  |
| r ayments wade   |  | from 7/1/2021           | FORM 400       |  |  |
| SEE INSTRUCTIONS ON REVERSE  |  | through 12/31/2021      | Page 9 of 22   |  |  |
| NAME OF FILER  |  | •                       | I.D. NUMBER    |  |  |
| Committee for Stronger and Safer Neighborhoods - Supervisor Janice H | ahn Ballot Measure Committee               |                         | 1399573        |  |  |

| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MTG meetings an<br>OFC office exper<br>PET petition circu<br>PHO phone bank<br>POL polling and<br>POS postage, de | MBR member communications<br>MTG meetings and appearances<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey research<br>POS postage, delivery and messenger services<br>PRO professional services (legal, accounting)<br>PRT print ads |      | <ul> <li>RAD radio airtime and production costs</li> <li>RFD returned contributions</li> <li>SAL campaign workers' salaries</li> <li>TEL t.v. or cable airtime and production costs</li> <li>TRC candidate travel, lodging, and meals</li> <li>TRS staff/spouse travel, lodging, and meals</li> <li>TSF transfer between committees of the same candidate/sponsor</li> <li>VOT voter registration</li> <li>WEB information technology costs (Internet, e-mail)</li> </ul> |       |             |
|--|---|--|------|---|-------|-------------|
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  |   | CODE   | OR   | DESCRIPTION OF PAYMENT  |       | AMOUNT PAID |
| First Bank Merchant Svc Discount<br>Atlanta, GA 30342-1651   |   | OFC  |      |   |       | \$9.95      |
| First Bank Merchant Svc Discount<br>Atlanta, GA 30342-1651   |   | OFC  |      |   |       | \$9.95      |
| First Bank Merchant Svc Discount<br>Atlanta, GA 30342-1651   |   | OFC  |      |   |       | \$9.95      |
| * Payments that are contributions or independent expenditu   | ires must also be summai  | rized on Schedul   | e D. | SUB   | TOTAL | \$29.85     |

| 1. Itemized payments made this period. (Include all Schedule E subtotals.)   | \$38,926.15 |
|--|-------------|
| 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.) | \$38,926.15 |

| Schedule E   | . Amounts may be rounded to whole dollars. | SCHEDULE E                |                |  |
|--|--|---------------------------|----------------|--|
| Payments Made  | to whole donars.                           | Statement covers period   | CALIFORNIA 460 |  |
| r ayments made   |  | from 7/1/2021             | FORM 400       |  |
| SEE INSTRUCTIONS ON REVERSE  |  | through <u>12/31/2021</u> | Page 10 of 22  |  |
| NAME OF FILER  |  |                           | I.D. NUMBER    |  |
| Committee for Stronger and Safer Neighborhoods - Supervisor Janice Hah | n Ballot Measure Committee                 |                           | 1399573        |  |

| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MTG meetings ar<br>OFC office exper<br>PET petition circu<br>PHO phone bank<br>POL polling and s<br>POS postage, de | MBR member communications<br>MTG meetings and appearances<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey research<br>POS postage, delivery and messenger services<br>PRO professional services (legal, accounting)<br>PRT print ads |      | RAD radio airtime and production costs<br>RFD returned contributions<br>SAL campaign workers' salaries<br>TEL t.v. or cable airtime and production costs<br>TRC candidate travel, lodging, and meals<br>TRS staff/spouse travel, lodging, and meals<br>TSF transfer between committees of the same candidate/sponsor<br>VOT voter registration<br>WEB information technology costs (Internet, e-mail) |                    |
|--|---|--|------|---|--------------------|
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  |   | CODE   | OR   | DESCRIPTION OF PAYMENT  | AMOUNT PAID        |
| First Bank Merchant Svc Discount<br>Atlanta, GA 30342-1651   |   | OFC  |      |   | \$9.95             |
| First Bank Merchant Svc Discount<br>Atlanta, GA 30342-1651   |   | OFC  |      |   | \$268.14           |
| First Bank Merchant Svc Discount<br>Atlanta, GA 30342-1651   |   | OFC  |      |   | \$9.95             |
| * Payments that are contributions or independent expendit  | ures must also be summar  | ized on Schedul  | e D. | SUBTO   | <b>AL</b> \$288.04 |

| 1. Itemized payments made this period. (Include all Schedule E subtotals.)   | \$38,926.15 |
|--|-------------|
| 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.) | \$38,926.15 |

| Schedule E  | . Amounts may be rounded to whole dollars. | SCHEDULE E              |                             |  |
|---|--|-------------------------|-----------------------------|--|
| Payments Made   |  | Statement covers period | CALIFORNIA 460              |  |
| r ayments made  |  | from 7/1/2021           | FORM <b>400</b>             |  |
| SEE INSTRUCTIONS ON REVERSE   |  | through 12/31/2021      | Page <u>11</u> of <u>22</u> |  |
| NAME OF FILER   |  |                         | I.D. NUMBER                 |  |
| Committee for Stronger and Safer Neighborhoods - Supervisor Janice Ha | hn Ballot Measure Committee                |                         | 1399573                     |  |

| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MTG meetings at<br>OFC office exper<br>PET petition circu<br>PHO phone bank<br>POL polling and<br>POS postage, de | MBR member communications<br>MTG meetings and appearances<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey research<br>POS postage, delivery and messenger services<br>PRO professional services (legal, accounting)<br>PRT print ads |      | RAD radio airtime and production costs<br>RFD returned contributions<br>SAL campaign workers' salaries<br>TEL t.v. or cable airtime and production costs<br>TRC candidate travel, lodging, and meals<br>TRS staff/spouse travel, lodging, and meals<br>TSF transfer between committees of the same candidate/sponsor<br>VOT voter registration<br>WEB information technology costs (Internet, e-mail) |                  | ISOT  |
|--|---|--|------|---|------------------|-------|
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  |   | CODE   | OR   | DESCRIPTION OF PAYMENT  | AMOUNT P         | 'AID  |
| First Bank Merchant Svc Fee<br>Atlanta, GA 30342-1651  |   | OFC  |      |   | \$44             | 1.95  |
| First Bank Merchant Svc Fee<br>Atlanta, GA 30342-1651  |   | OFC  |      |   | \$44             | 1.95  |
| First Bank Merchant Svc Fee<br>Atlanta, GA 30342-1651  |   | OFC  |      |   | \$44             | 1.95  |
| * Payments that are contributions or independent expenditur  | es must also be summa   | rized on Schedul   | e D. | SUBTO   | <b>)TAL</b> \$13 | 84.85 |

| 1. Itemized payments made this period. (Include all Schedule E subtotals.)   | \$38,926.15 |
|--|-------------|
| 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.) | \$38,926.15 |

| Schedule E  | . Amounts may be rounded to whole dollars. | SCHEDULE E              |                             |  |  |
|---|--|-------------------------|-----------------------------|--|--|
| Payments Made   |  | Statement covers period | CALIFORNIA 460              |  |  |
| r ayments wate  |  | from 7/1/2021           | FORM 400                    |  |  |
| SEE INSTRUCTIONS ON REVERSE   |  | through 12/31/2021      | Page <u>12</u> of <u>22</u> |  |  |
| NAME OF FILER   |  | •                       | I.D. NUMBER                 |  |  |
| Committee for Stronger and Safer Neighborhoods - Supervisor Janice Ha | hn Ballot Measure Committee                |                         | 1399573                     |  |  |

| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MTG meetings an<br>OFC office exper<br>PET petition circu<br>PHO phone bank<br>POL polling and<br>POS postage, de | MBR member communications<br>MTG meetings and appearances<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey research<br>POS postage, delivery and messenger services<br>PRO professional services (legal, accounting)<br>PRT print ads |      | RAD radio airtime and production costs<br>RFD returned contributions<br>SAL campaign workers' salaries<br>TEL t.v. or cable airtime and production costs<br>TRC candidate travel, lodging, and meals<br>TRS staff/spouse travel, lodging, and meals<br>TSF transfer between committees of the same candidate/sponsor<br>VOT voter registration<br>WEB information technology costs (Internet, e-mail) |      |             |
|--|---|--|------|---|------|-------------|
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  |   | CODE   | OR   | DESCRIPTION OF PAYMENT  |      | AMOUNT PAID |
| First Bank Merchant Svc Fee<br>Atlanta, GA 30342-1651  |   | OFC  |      |   |      | \$44.95     |
| First Bank Merchant Svc Fee<br>Atlanta, GA 30342-1651  |   | OFC  |      |   |      | \$19.95     |
| First Bank Merchant Svc Fee<br>Atlanta, GA 30342-1651  |   | OFC  |      |   |      | \$44.95     |
| * Payments that are contributions or independent expenditu   | res must also be summa  | rized on Schedul   | e D. | SUBT  | OTAL | \$109.85    |

| 1. Itemized payments made this period. (Include all Schedule E subtotals.)   | \$38,926.15 |
|--|-------------|
| 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.) | \$38,926.15 |

| Schedule E   | . Amounts may be rounded to whole dollars. | SCHEDULE E              |                             |  |  |
|--|--|-------------------------|-----------------------------|--|--|
| Payments Made  | to whole dollars.                          | Statement covers period | CALIFORNIA 460              |  |  |
| r ayments made   |  | from 7/1/2021           | FORM 400                    |  |  |
| SEE INSTRUCTIONS ON REVERSE  |  | through 12/31/2021      | Page <u>13</u> of <u>22</u> |  |  |
| NAME OF FILER  |  |                         | I.D. NUMBER                 |  |  |
| Committee for Stronger and Safer Neighborhoods - Supervisor Janice Hah | n Ballot Measure Committee                 |                         | 1399573                     |  |  |

| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MTG meetings at<br>OFC office exper<br>PET petition circu<br>PHO phone bank<br>POL polling and s<br>POS postage, de | MBR member communications<br>MTG meetings and appearances<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey research<br>POS postage, delivery and messenger services<br>PRO professional services (legal, accounting)<br>PRT print ads |      | RAD radio airtime and production costs<br>RFD returned contributions<br>SAL campaign workers' salaries<br>TEL t.v. or cable airtime and production costs<br>TRC candidate travel, lodging, and meals<br>TRS staff/spouse travel, lodging, and meals<br>TSF transfer between committees of the same candidate/sponsor<br>VOT voter registration<br>WEB information technology costs (Internet, e-mail) |          |             |
|--|---|--|------|---|----------|-------------|
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  |   | CODE   | OR   | DESCRIPTION OF PAYMENT  |          | AMOUNT PAID |
| Kaufman Legal Group, APC<br>Los Angeles, CA 90017-5864   |   | PRO  |      |   |          | \$824.00    |
| Kaufman Legal Group, APC<br>Los Angeles, CA 90017-5864   |   | OFC  |      |   |          | \$3.00      |
| Kaufman Legal Group, AFC<br>Los Angeles, CA 90017-5864   |   | PRO  |      |   |          | \$102.00    |
| * Payments that are contributions or independent expenditur  | es must also be summar  | rized on Schedul   | e D. |   | SUBTOTAL | \$929.00    |

| 1. Itemized payments made this period. (Include all Schedule E subtotals.)   | \$38,926.15 |
|--|-------------|
| 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.) | \$38,926.15 |

| Schedule E  | . Amounts may be rounded to whole dollars. | SCHEDULE E              |                             |  |  |
|---|--|-------------------------|-----------------------------|--|--|
| Payments Made   |  | Statement covers period | CALIFORNIA 460              |  |  |
| r ayments made  |  | from 7/1/2021           | FORM <b>400</b>             |  |  |
| SEE INSTRUCTIONS ON REVERSE   |  | through 12/31/2021      | Page <u>14</u> of <u>22</u> |  |  |
| NAME OF FILER   |  |                         | I.D. NUMBER                 |  |  |
| Committee for Stronger and Safer Neighborhoods - Supervisor Janice Ha | hn Ballot Measure Committee                |                         | 1399573                     |  |  |

| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MTG meetings a<br>OFC office exper<br>PET petition circ<br>PHO phone bank<br>POL polling and<br>POS postage, de | MBR member communications<br>MTG meetings and appearances<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey research<br>POS postage, delivery and messenger services<br>PRO professional services (legal, accounting)<br>PRT print ads |      | RAD radio airtime and production costs<br>RFD returned contributions<br>SAL campaign workers' salaries<br>TEL t.v. or cable airtime and production costs<br>TRC candidate travel, lodging, and meals<br>TRS staff/spouse travel, lodging, and meals<br>TSF transfer between committees of the same candidate/sponsor<br>VOT voter registration<br>WEB information technology costs (Internet, e-mail) |      |             |
|--|---|--|------|---|------|-------------|
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  |   | CODE   | OR   | DESCRIPTION OF PAYMENT  |      | AMOUNT PAID |
| Kaufman Legal Group, APC<br>Los Angeles, CA 90017-5864   |   | OFC  |      |   |      | \$9.29      |
| Kaufman Legal Group, APC<br>Los Angeles, CA 90017-5864   |   | PRO  |      |   |      | \$180.00    |
| Kaufman Legal Group, APC<br>Los Angeles, CA 90017-5864   |   | OFC  |      |   |      | \$3.85      |
| * Payments that are contributions or independent expendit  | ures must also be summa   | rized on Schedul   | e D. | SUBT  | OTAL | \$193.14    |

| 1. Itemized payments made this period. (Include all Schedule E subtotals.)   | \$38,926.15 |
|--|-------------|
| 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.) | \$38,926.15 |

| Schedule E  | . Amounts may be rounded to whole dollars. | SCHEDULE E              |                             |  |  |
|---|--|-------------------------|-----------------------------|--|--|
| Payments Made   | to whole dollars.                          | Statement covers period | CALIFORNIA 460              |  |  |
| r ayments made  |  | from 7/1/2021           | FORM 400                    |  |  |
| SEE INSTRUCTIONS ON REVERSE   |  | through 12/31/2021      | Page <u>15</u> of <u>22</u> |  |  |
| NAME OF FILER   |  | •                       | I.D. NUMBER                 |  |  |
| Committee for Stronger and Safer Neighborhoods - Supervisor Janice Ha | hn Ballot Measure Committee                |                         | 1399573                     |  |  |

| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MTG meetings ar<br>OFC office exper<br>PET petition circu<br>PHO phone bank<br>POL polling and<br>POS postage, de | MBR member communications<br>MTG meetings and appearances<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey research<br>POS postage, delivery and messenger services<br>PRO professional services (legal, accounting)<br>PRT print ads |      | <ul> <li>RAD radio airtime and production costs</li> <li>RFD returned contributions</li> <li>SAL campaign workers' salaries</li> <li>TEL t.v. or cable airtime and production costs</li> <li>TRC candidate travel, lodging, and meals</li> <li>TRS staff/spouse travel, lodging, and meals</li> <li>TSF transfer between committees of the same candidate/spon</li> <li>VOT voter registration</li> <li>WEB information technology costs (Internet, e-mail)</li> </ul> |                   |
|--|---|--|------|--|-------------------|
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  |   | CODE   | OR   | DESCRIPTION OF PAYMENT   | AMOUNT PAID       |
| Kaufman Legal Group, APC<br>Los Angeles, CA 90017-5864   |   | OFC  |      |  | \$12.82           |
| Kaufman Legal Group, APC<br>Los Angeles, CA 90017-5864   |   | PRO  |      |  | \$119.50          |
| Kaufman Legal Group, APC<br>Los Angeles, CA 90017-5864   |   | PRO  |      |  | \$90.00           |
| * Payments that are contributions or independent expenditures  | must also be summa  | rized on Schedul   | e D. | SUBTOTA  | <b>L</b> \$222.32 |

| 1. Itemized payments made this period. (Include all Schedule E subtotals.)   | \$38,926.15 |
|--|-------------|
| 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.) | \$38,926.15 |

| Schedule E  | . Amounts may be rounded to whole dollars. | SCHEDULE E              |                             |  |  |
|---|--|-------------------------|-----------------------------|--|--|
| Payments Made   |  | Statement covers period | CALIFORNIA 460              |  |  |
| r ayments wate  |  | from 7/1/2021           | FORM 400                    |  |  |
| SEE INSTRUCTIONS ON REVERSE   |  | through 12/31/2021      | Page <u>16</u> of <u>22</u> |  |  |
| NAME OF FILER   |  | •                       | I.D. NUMBER                 |  |  |
| Committee for Stronger and Safer Neighborhoods - Supervisor Janice Ha | hn Ballot Measure Committee                |                         | 1399573                     |  |  |

| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MTG meetings a<br>OFC office exper<br>PET petition circ<br>PHO phone bank<br>POL polling and<br>POS postage, de | MBR member communications<br>MTG meetings and appearances<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey research<br>POS postage, delivery and messenger services<br>PRO professional services (legal, accounting)<br>PRT print ads |      | <ul> <li>RAD radio airtime and production costs</li> <li>RFD returned contributions</li> <li>SAL campaign workers' salaries</li> <li>TEL t.v. or cable airtime and production costs</li> <li>TRC candidate travel, lodging, and meals</li> <li>TRS staff/spouse travel, lodging, and meals</li> <li>TSF transfer between committees of the same candidate/sponsor</li> <li>VOT voter registration</li> <li>WEB information technology costs (Internet, e-mail)</li> </ul> |               |  |
|--|---|--|------|---|---------------|--|
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  |   | CODE   | OR   | DESCRIPTION OF PAYMENT  | AMOUNT PAID   |  |
| Kaufman Legal Group, APC<br>Los Angeles, CA 90017-5864   |   | OFC  |      |   | \$13.75       |  |
| Kaufman Legal Group, APC<br>Los Angeles, CA 90017-5864   |   | PRO  |      |   | \$460.25      |  |
| Kaufman Legal Group, APC<br>Los Angeles, CA 90017-5864   |   | PRO  |      |   | \$4,614.50    |  |
| * Payments that are contributions or independent expendit  | ures must also be summa   | rized on Schedul   | e D. | SUBTOT  | AL \$5,088.50 |  |

| 1. Itemized payments made this period. (Include all Schedule E subtotals.)   | \$38,926.15 |
|--|-------------|
| 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.) | \$38,926.15 |

| Schedule E   | . Amounts may be rounded to whole dollars. | SCHEDULE E              |                             |  |  |
|--|--|-------------------------|-----------------------------|--|--|
| Payments Made  | to whole donars.                           | Statement covers period | CALIFORNIA 460              |  |  |
| r ayments made   |  | from 7/1/2021           | FORM 400                    |  |  |
| SEE INSTRUCTIONS ON REVERSE  |  | through 12/31/2021      | Page <u>17</u> of <u>22</u> |  |  |
| NAME OF FILER  |  |                         | I.D. NUMBER                 |  |  |
| Committee for Stronger and Safer Neighborhoods - Supervisor Janice Hah | in Ballot Measure Committee                |                         | 1399573                     |  |  |

| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MBR member communications<br>MTG meetings and appearances<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey research<br>POS postage, delivery and messenger services<br>PRO professional services (legal, accounting)<br>PRT print ads |        | RAD radio airtime and production costs<br>RFD returned contributions<br>SAL campaign workers' salaries<br>TEL t.v. or cable airtime and production costs<br>TRC candidate travel, lodging, and meals<br>TRS staff/spouse travel, lodging, and meals<br>TSF transfer between committees of the same candidate/spo<br>VOT voter registration<br>WEB information technology costs (Internet, e-mail) |                        |             |
|--|--|--------|---|------------------------|-------------|
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  |  | CODE ( | DR  | DESCRIPTION OF PAYMENT | AMOUNT PAID |
| Kaufman Legal Group, APC<br>Los Angeles, CA 90017-5864   | с  | OFC    |   |                        | \$5.60      |
| Megan Egoscue Inc<br>Long Beach, CA 90807-2435   | с  | CNS    |   |                        | \$7,500.00  |
| Megan Egoscue Inc<br>Long Beach, CA 90807-2435   | с  | CNS    |   |                        | \$24,375.00 |

#### \* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$31,880.60

| 1. Itemized payments made this period. (Include all Schedule E subtotals.)   | \$38,926.15 |
|--|-------------|
| 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.) | \$38,926.15 |

| Schedule E  | . Amounts may be rounded to whole dollars. | SCHEDULE E              |                             |  |  |  |
|---|--|-------------------------|-----------------------------|--|--|--|
| Payments Made   |  | Statement covers period | CALIFORNIA 460              |  |  |  |
| r ayments made  |  | from 7/1/2021           | FORM <b>400</b>             |  |  |  |
| SEE INSTRUCTIONS ON REVERSE   |  | through 12/31/2021      | Page <u>18</u> of <u>22</u> |  |  |  |
| NAME OF FILER   |  |                         | I.D. NUMBER                 |  |  |  |
| Committee for Stronger and Safer Neighborhoods - Supervisor Janice Hahr |  | 1399573                 |                             |  |  |  |

| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MTG meetings ar<br>OFC office expen<br>PET petition circu<br>PHO phone bank<br>POL polling and s<br>POS postage, del | MBRmember communicationsMTGmeetings and appearancesOFCoffice expensesPETpetition circulatingPHOphone banksPOLpolling and survey researchPOSpostage, delivery and messenger servicesPROprofessional services (legal, accounting)PRTprint ads |        | RAD radio airtime and production costs<br>RFD returned contributions<br>SAL campaign workers' salaries<br>TEL t.v. or cable airtime and production costs<br>TRC candidate travel, lodging, and meals<br>TRS staff/spouse travel, lodging, and meals<br>TSF transfer between committees of the same candidate/sponsor<br>VOT voter registration<br>WEB information technology costs (Internet, e-mail) |             |  |
|--|--|---|--------|---|-------------|--|
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  |  | CODE OF   | R DESC | RIPTION OF PAYMENT  | AMOUNT PAID |  |
| Secretary of State<br>Political Reform Division<br>Sacramento, CA 95814-5701   |  | OFC   |        |   | \$50.00     |  |

| * Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTA       |  |             |  |
|--|--|-------------|--|
| Schedule E Summary   |  |             |  |
| 1. Itemized payments made this period. (Include all Schedule E subtotals.)   |  | \$38,926.15 |  |
| 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.) |  | \$38,926.15 |  |

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here

and on the Summary Page, Column A, Line 9.)

. Amounts may be rounded to whole dollars.

| Accrued Expenses (Unpaid Bills)   | to whole dollars.   | Statement covers period            | CALIFORNIA<br>FORM 46 |    |    | 460 | D |  |
|---|---------------------|------------------------------------|-----------------------|----|----|-----|---|--|
| SEE INSTRUCTIONS ON REVERSE   |                     | from $\frac{77172021}{12/31/2021}$ | Page                  | 19 | of | 22  |   |  |
| NAME OF FILER<br>Committee for Stronger and Safer Neighborhoods - Supervisor Janice Hahn Ballot | t Measure Committee |                                    | I.D. NUM<br>13995     |    |    |     |   |  |

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

| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MBR member communications<br>MTG meetings and appearances<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey research<br>POS postage, delivery and messenger services<br>PRO professional services (legal, accounting)<br>PRT print ads |   | RAD radio airtime and<br>RFD returned contribu<br>SAL campaign worke<br>TEL t.v. or cable airtir<br>TRC candidate travel<br>TRS staff/spouse trave<br>TSF transfer between<br>VOT voter registration<br>WEB information tech |   | ne candidate/sponsor  |
|--|--|---|--|---|---|
| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)   | CODE OR DESCRIPTION OF<br>PAYMENT  | (a)<br>OUTSTANDING BALANCE<br>BEGINNING OF THIS<br>PERIOD | (b)<br>AMOUNT INCURRED<br>THIS PERIOD  | (c)<br>AMOUNT PAID THIS<br>PERIOD<br>(ALSO REPORT ON E) | <sup>(d)</sup><br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD |
| Kaufman Legal Group, APC   |  |   |  |   |   |
| Los Angeles, CA 90017-5864   | PRO  | \$824.00  | \$0.00   | \$824.00  | \$0.00  |
| Kaufman Legal Group, APC   |  |   |  |   |   |
| Los Angeles, CA 90017-5864   | OFC  | \$3.00  | \$0.00   | \$3.00  | \$0.00  |
| Kaufman Legal Group, APC   |  |   |  |   |   |
| Los Angeles, CA 90017-5864   | PRO  | \$102.00  | \$0.00   | \$102.00  | \$0.00  |
| *Payments that are contributions or independent expenditures must also be summarized on Schedule D.  | SUBTOTALS  | \$929.00  | \$0.00   | \$929.00  | \$0.00  |
| Schedule F Summary           1. Total accrued expenses incurred this period. (Include a accrued expenses of \$100 or more, plus total unitemized   |  |   | IN   | CURRED TOTALS   | \$0.00  |
| 2. Total accrued expenses paid this period. (Include all So accrued expenses of \$100 or more, plus total unitemized   |  |   |  | PAID TOTALS   | \$1,254.46  |

NET (\$1,254.46)

(May be a negative number)

. Amounts may be rounded to whole dollars.

| Accrued Expenses (Unpaid Bills)  | 7/1/2021   | CALIFORNI<br>FORM      | <sup>IA</sup> 460 |
|--|--|------------------------|-------------------|
| SEE INSTRUCTIONS ON REVERSE  | $\frac{\text{from } 77172021}{\text{through } 12/31/2021}$ | <b>Page</b> 20         | 22                |
| NAME OF FILER<br>Committee for Stronger and Safer Neighborhoods - Supervisor Janice Hahn Ballot Measure Comm |  | I.D. NUMBER<br>1399573 |                   |

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

| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MBR member communication<br>MTG meetings and appearan<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey resea<br>POS postage, delivery and m<br>PRO professional services (le<br>PRT print ads | ces<br>Irch<br>essenger services                          | RAD radio air<br>RFD returned<br>SAL campaig<br>TEL t.v. or ca<br>TRC candidat<br>TRS staff/spo<br>TSF transfer I<br>VOT voter rec<br>WEB informat | ne candidate/sponsor                                    |  |
|--|--|---|--|---|--|
| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)   | CODE OR DESCRIPTION OF<br>PAYMENT  | (a)<br>OUTSTANDING BALANCE<br>BEGINNING OF THIS<br>PERIOD | (b)<br>AMOUNT INCURRED<br>THIS PERIOD  | (c)<br>AMOUNT PAID THIS<br>PERIOD<br>(ALSO REPORT ON E) | (d)<br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD |
| Kaufman Legal Group, APC<br>Los Angeles, CA 90017-5864   | OFC  | \$9.29  | \$0.00   | \$9.29  | \$0.00   |
| Kaufman Legal Group, APC   | PRO  | \$180.00  | \$0.00   | \$180.00  | \$0.00   |
| Los Angeles, CA 90017-5864<br>Kaufman Legal Group, APC   | OFC  | \$3.85  | \$0.00   | \$3.85  | \$0.00   |
| Los Angeles, CA 90017-5864  *Payments that are contributions or independent expenditures must also be  |  |   |  |   |  |
| <ul> <li>Schedule F Summary</li> <li>1. Total accrued expenses incurred this period. (Include a accrued expenses of \$100 or more, plus total unitemized</li> </ul>  |  |   | \$0.00<br>IN   | \$193.14  | \$0.00   |
| 2. Total accrued expenses paid this period. (Include all So accrued expenses of \$100 or more, plus total unitemized   | chedule F, Column (c) subtotals for p<br>payments on accrued expenses unc  | payments on<br>ler \$100.)                                |  | PAID TOTALS   | \$1,254.46   |
| 3. Net change this period. (Subtract Line 2 from Line 1. E and on the Summary Page, Column A, Line 9.)   |  |   |  | <b>NET</b> (M   | (\$1,254.46)<br>ay be a negative number)                 |

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

. Amounts may be rounded to whole dollars.

| Accrued Expenses (Unpaid Bills)   |              | 7/1/2021                            | CALIF<br>FC | FORNI<br>DRM | Α  | 460 |  |
|---|--------------|-------------------------------------|-------------|--------------|----|-----|--|
| SEE INSTRUCTIONS ON REVERSE   |              | from //1/2021<br>through 12/31/2021 | Page        | 21           | of | 22  |  |
| NAME OF FILER<br>Committee for Stronger and Safer Neighborhoods - Supervisor Janice Hahn Ballot Measu | re Committee |                                     | I.D. NUME   |              |    |     |  |

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

| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MBR member communication<br>MTG meetings and appearant<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey resea<br>POS postage, delivery and m<br>PRO professional services (le<br>PRT print ads | ces<br>rch<br>essenger services                           | RFD returned<br>SAL campaig<br>TEL t.v. or ca<br>TRC candidat<br>TRS staff/spo<br>TSF transfer I<br>VOT voter rec | n workers' salaries<br>ble airtime and production cos<br>e travel, lodging, and meals<br>use travel, lodging, and meals<br>between committees of the sa | s<br>me candidate/sponsor                                |
|--|---|---|---|---|--|
| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)   | CODE OR DESCRIPTION OF<br>PAYMENT   | (a)<br>OUTSTANDING BALANCE<br>BEGINNING OF THIS<br>PERIOD | (b)<br>AMOUNT INCURRED<br>THIS PERIOD   | (c)<br>AMOUNT PAID THIS<br>PERIOD<br>(ALSO REPORT ON E)   | (d)<br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD |
| Kaufman Legal Group, APC<br>Los Angeles, CA 90017-5864   | PRO   | \$119.50  | \$0.00  | \$119.50  | \$0.00   |
| Kaufman Legal Group, APC<br>Los Angeles, CA 90017-5864   | OFC   | \$12.82   | \$0.00  | \$12.82   | \$0.00   |
| NGP Van, Inc.<br>Washington, DC 20005-5006   | OFC   | \$960.00  | \$0.00  | \$0.00  | \$960.00   |
| *Payments that are contributions or independent expenditures must also be<br>summarized on Schedule D.   | SUBTOTALS   | \$1,092.32  | \$0.00  | \$132.32  | \$960.00   |
| <b>Schedule F Summary</b><br>1. Total accrued expenses incurred this period. (Include a<br>accrued expenses of \$100 or more, plus total unitemized  |   |   | IN  | CURRED TOTALS   | \$0.00   |
| 2. Total accrued expenses paid this period. (Include all So accrued expenses of \$100 or more, plus total unitemized   |   |   |   | PAID TOTALS   | \$1,254.46   |
| 3. Net change this period. (Subtract Line 2 from Line 1. E and on the Summary Page, Column A, Line 9.)   |   |   |   | <b>NET</b> (M   | (\$1,254.46)<br>lay be a negative number)                |

Washington, DC 20005-5006

| Accrued Expenses (Unpaid Bills)  |             | 7/1/2021                         | CALIF<br>FC | FORNI<br>DRM | A  | 460 |   |
|--|-------------|----------------------------------|-------------|--------------|----|-----|---|
| SEE INSTRUCTIONS ON REVERSE  |             | $\frac{\text{from}}{12/31/2021}$ | Page        | 22           | of | 22  | - |
| NAME OF FILER<br>Committee for Stronger and Safer Neighborhoods - Supervisor Janice Hahn Ballot Measur | e Committee |                                  | I.D. NUME   |              |    |     |   |

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

| CMP campaign paraphernalia/misc.<br>CNS campaign consultants<br>CTB contribution (explain nonmonetary)*<br>CVC civic donations<br>FIL candidate filing/ballot fees<br>FND fundraising events<br>IND independent expenditure<br>LEG legal defense<br>LIT campaign literature and mailings | MBR member communication<br>MTG meetings and appearan<br>OFC office expenses<br>PET petition circulating<br>PHO phone banks<br>POL polling and survey resea<br>POS postage, delivery and m<br>PRO professional services (le<br>PRT print ads | earances       RFD       returned contributions         SAL       campaign workers' salaries         TEL       t.v. or cable airtime and production costs         TRC       candidate travel, lodging, and meals         research       TRS         nd messenger services       TSF         transfer between committees of the same candidate |                                       |   | ne candidate/sponsor  |
|--|--|---|---------------------------------------|---|---|
| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)   | CODE OR DESCRIPTION OF<br>PAYMENT  | (a)<br>OUTSTANDING BALANCE<br>BEGINNING OF THIS<br>PERIOD   | (b)<br>AMOUNT INCURRED<br>THIS PERIOD | (c)<br>AMOUNT PAID THIS<br>PERIOD<br>(ALSO REPORT ON E) | <sup>(d)</sup><br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD |
| NGP Van, Inc.<br>Washington, DC 20005-5006   | OFC  | \$960.00  | \$0.00                                | \$0.00  | \$960.00  |
| NGP Van, Inc.  | OFC  | \$960.00  | \$0.00                                | \$0.00  | \$960.00  |

| *Payments that are contributions or independent expenditures must also be<br>summarized on Schedule D.  | SUBTOTALS | \$1,920.00 | \$0.00   | \$0.00       | \$1,920.00                                |
|---|-----------|------------|----------|--------------|---|
| Schedule F Summary<br>1. Total accrued expenses incurred this period. (Include all Schedul<br>accrued expenses of \$100 or more, plus total unitemized payments |           | 00.)       | INCURRED | TOTALS       | \$0.00                                    |
| 2. Total accrued expenses paid this period. (Include all Schedule F, accrued expenses of \$100 or more, plus total unitemized payments                          |           |            | PAID     | TOTALS       | \$1,254.46                                |
| 3. Net change this period. (Subtract Line 2 from Line 1. Enter the di and on the Summary Page, Column A, Line 9.)   |           |            |          | <b>NET</b> ( | (\$1,254.46)<br>May be a negative number) |

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