Recipient Committee Campaign Statement Cover Page		LOS ANGELES COUNTY CALIFORNIA 460
(Government Code Sections 84200-84216.5) SEE INSTRUCTIONS ON REVERSE	Statement covers period from 10/01/2021 through 12/31/2021	Date of election if applicable: FEB - I PM I2: 13 (Month, Day, Year) PROPOSITION BUNIT For Official Use Only
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	Complete Parts 1, 2, 3, and 4. 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)
3. Committee Information	No. 1 Alexandre de la contra de	Treasurer(s) NAME OF TREASURER Denise Lewis MAILING ADDRESS CITY STATE ZIP CODE AREA CODE/PHONE Sacramento CA 95841 (916) 348-9100
CITY STATE ZIP C Sacramento CA 958 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR PO.	41 (916) 348-9100	NAME OF ASSISTANT TREASURER, IF ANY
CITY STATE ZIP C OPTIONAL: FAX / E-MAIL ADDRESS (916) 348-9111 / campaigns@rcbs.us	ODE AREA CODE/PHONE	CITY STATE ZIP CODE AREA CODE/PHONE OPTIONAL: FAX / E-MAIL ADDRESS
4. Verification	nia that the foregoing is true and correct. ByBy	nowledge.the information contained herein and in the attached schedules is true and complete. I certify Signature of Treasurer or Assistant Treesurer Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor Signature of Controlling Officeholder, Candidate, State Measure Proponent
Date		Signature of Controlling Officeholder, Candidate, State Measure Proponent FPPC Form 460 (Jan/201 FPPC Advice: advice@fppc.ca.gov (866/275-377



6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	
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Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DIST

- 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	571 DUDGODT
Recall George Gascon	District Attorney Los Angeles County	SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT

Attach continuation sheets if necessary

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIS	TRICT NUMBE	R IF APPLICABLE	E)
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. NU	MBER
NAME OF TREASURER			OLLED COMMITTEE?
COMMITTEE ADDRESS	STREET ADDRESS (N	O P.O. BOX)	
CITY	STATE	ZIP CODE	AREA CODE/PHONE
COMMITTEE NAME		I.D. NU	MBER
NAME OF TREASURER			
COMMITTEE ADDRESS	STREET ADDRESS (N	IO P.O. BOX)	
CITY	STATE	ZIP CODE	AREA CODE/PHONE

Campaign Disclosure Statement	4	mounts may be round	led			SUMMARY PAGE
Summary Page		to whole dollars.		from _	ement covers period 10/01/2021	CALIFORNIA FORM 460
				through	12/31/2021	Page3 of27
NAME OF FILER				1.1.1.2		I.D. NUMBER
Victims of Violent Crime for the Recall of District Attorney	Gase	con				1435471
Contributions Received	.0	COlumn A TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)	t			Summary for Candidates h the State Primary and
1. Monetary Contributions Schedule A, Line 3	\$	12,227.00	5	1,412,279.81		
2. Loans Received		0.00		0.00	1.0.0	1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	12,227.00	\$	1,412,279.81	20. Contributions Received \$	
4. Nonmonetary Contributions Schedule C, Line 3		0.00		25,100.00	21. Expenditures	, ,
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	12,227.00	5	1,437,379.81	Made S	\$\$
Expenditures Made					Expenditure Lin	nit Summary for State
6. Payments Made	\$	37,243.62	s	1,357,340.32	Candidates	
7. Loans Made Schedule H, Line 3		0.00		0.00	22 . Curris	lative Consuditions Mades
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	37,243.62	\$	1,357,340.32		lative Expenditures Made" ject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)		-11,889.80		1,954.84	Date of Election	n Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3		0.00		25,100.00	(mm/dd/yy)	
11. TOTAL EXPENDITURES MADE	\$	25,353.82	s	1,384,395.16		\$
Current Cash Statement	1					\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	81,545.75	To calculate Column B, add amounts in Column A to the corresponding amounts			
13. Cash Receipts Column A, Line 3 above		12,227.00			Advantation of the second s	
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	m Column B of your last	*Amounts in this sect reported in Column B	tion may be different from amounts
15. Cash Payments		37,243.62		bort. Some amounts in lumn A may be negative.	a series des er ertes e	
16. ENDING CASH BALANCE	\$	56,529.13	fig	ures that should be		
If this is a termination statement, Line 16 must be zero.			subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts			
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00				
Cash Equivalents and Outstanding Debts			fro	m Lines 2, 7, and 9 (if y).		
18. Cash Equivalents See instructions on reverse	\$	0.00				
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	1,954.84				
						EDDC 5 400 / 1

Schedule Monetary	A Contributions Received		ts may be rounded whole dollars.	Statement cove		CALIFORNIA FORM 460
SEE INSTRUCTIO	ONS ON REVERSE			through12/31/2	021	Page of7
NAME OF FILER				. <u></u>		I.D. NUMBER
Victims of	Violent Crime for the Recall of District Attorney	Gascon				1435471
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 D CALENDAR YEA (JAN. 1 - DEC. 3	AR TO DATE
10/20/2021	Luis Aquilar El Monte, CA 91732		Secretary City of Los Angeles	100.00	8	50,00
12/12/2021	Joubin Babbay Beverly Hills, CA 90210	IND COM OTH PTY SCC	Surgeon Joubin Gabbay	250.00	25	50.00
12/09/2021	Terilynn Beicek Janesville, CA 96114		Secretary Steve's Pumps & Well Drilling, Inc	500.00	50	00.00
12/04/2021	Stephan Berghoff Beverly Hills, CA 90210		Auto Financing Fastcredit Financial	100,00	10	00.00
12/02/2021	Elliot Berlin Los Angeles, CA 90048		Chiropractor Berlin Chiropractic Corp	100.00	10	00.00
			SUBTOTAL	\$ 1,050.00		
 Amount re (Include a Amount re 	A Summary eceived this period – itemized monetary contributions. Il Schedule A subtotals.) eceived this period – unitemized monetary contributions etary contributions received this period.			10,780.00	IND-I COM- OTH- PTY-	ibutor Codes ndividual - Recipient Committee (other than PTY or SCC) - Other (e.g., business entity) Political Party Small Contributor Committee

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NME OF FILER ID. NUMBER Lictins of Violent Crime for the Recall of District Attorney Gascon 1435471 DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (OCOMMITTEE, AUGO EVERILD NUMBER) CONTRIBUTOR CODE * IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (COUPATION AND EMPLOYER OF SUCHASSIN DOC * COUNTRIBUTOR (COUPATION AND EMPLOYER OF SUCHASSIN OCOM OF SUCHASSIN (JAN 1 - DEC 31) CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31) PER EL TOC (JAN 1 - DEC 31) PER EL TOC (JAN 1 - DEC 31) PER EL TOC (JAN 1 - DEC 31) 12/05/2021 Jenna Binder SIND COM OTH PTY Real Estate Socc 100.00 150.00 ISO.00 11/10/2021 Kyle Bracken Cuiver City, CA 90230 Sales COM OTH PTY Retired COM OTH PTY 100.00 100.00 175.00 12/09/2021 Alison Burchette Costa Mesa, CA 92627 Sales COM OTH PTY Sales Salesforce 100.00 175.00 12/09/2021 Jason Burna Beverly Bills, CA 90210 Socc Agent T/A 100.00 100.00 100.00 12/13/2021 Derek Christensen Rancho Cucamona, CA 91730 SND COM Retired n/A 50.00 125.00			Amounts may to whole	onetary Contributions Received	
Initians of Violent Crime for the Recall of District Attorney Gascon 1435471 DATE RECEIVED FUL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE * IF AN IND/NDUAL_ENTER OCCUPATION AND EMPLOYER OSCUPATION AND EMPLOYER OSCUPATION AND EMPLOYER PERIOD CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) PER EL OSCUPATION AND EMPLOYER OSCUPATION AND EMPLOYER OSCUPATION AND EMPLOYER OSCUPATION AND EMPLOYER PERIOD CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) PER EL OSCUPATION AND EMPLOYER OSCUPATION AND EMPLOYER OSCUPATION AND EMPLOYER Period CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) PER EL OSCUPATION AND EMPLOYER OSCUPATION AND EMPLOYER Period CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) PER EL OSCUPATION AND EMPLOYER OSCUPATION AND EMPLOYER Period CUMULATIVE TO DATE (JAN. 1 - DEC. 31) PER EL OSCUPATION AND EMPLOYER OSCUPATION AND EMPLOYER Period CUMULATIVE TO DATE (JAN. 1 - DEC. 31) PER EL OSCUPATION AND EMPLOYER (JAN. 1 - DEC. 31) CUMULATIVE TO DATE (JAN. 1 - DEC. 31) CUMULATIVE TO TO THE (JAN. 1 - DEC. 31) CUMULATIVE TO TO THE (JAN. 1 - DEC.	through 12/31/2021 Page 5 of				
Date RECEIVED POLL NAME, STREET ADDRESS AND 21° CODE OF CONTRIBUTOR (0000 0000 0000 0000000000000000000000			Gascon	iolent Crime for the Recall of District Attorney	
12/05/2021 Jenna Binder Image: Section of the sect	OCCUPATION AND EMPLOYER RECEIVED THIS CALENDAR YEAR TO DA (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN. 1 - DEC. 31) (IF REQU	OCCUPATION AN (IF SELF-EMPLOYED	CONTRIBUTOR		
Culver City, CA 90230 Image: Commonweak of the prive series	al Estate 100.00 150.00	Real Estate			12/05/2021
Costa Mesa, CA 92627 Salesforce I2/09/2021 Jason Burns Beverly Hills, CA 90210 XIND I2/13/2021 Derek Christensen Rancho Cucamonga, CA 91730 XIND Salesforce Salesforce					11/10/2021
Beverly Bills, CA 90210 Beverly Bills, CA 90210 Dorh PTY SCC PTA Dor PTY SCC PTA Dor A DO Dor A DO Dor A DO Dor A DO Dor A DO Dor A DO DO DO DO DO DO DO DO DO DO					12/04/2021
Rancho Cucamonga, CA 91730					12/09/2021
					12/13/2021

Ionetary Contributions Received			Statement covers period from 10/01/2021		CALIFORNIA FORM 46	
			through12/31/	2021	Page 6 of 27	
iolent Crime for the Recall of District Attorney	Gascon				I.D. NUMBER 1435471	
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 C CALENDAR YEA	AR TO DATE	
Sandro Dazzan Malibu, CA 90265	IND COM OTH PTY SCC	Retired n/a	500.00	50	0.00	
Eric Dransfield Rexburg, ID 83440		Retired n/a	100.00	10	0.00	
James Durst Boise, ID 83714		Retired n/a	100.00	62	5.00	
Roxana Eli Encino, CA 91436	⊠IND □COM □OTH □PTY □SCC	Attorney Roxana Eli	100.00	10	0.00	
Mark Gatto Beverly Bills, CA 90212		Investment Management CION Investments	100.00	10	0.00	
	iolent Crime for the Recall of District Attorney FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (FCOMMITTEE, ALSO ENTERID NUMBER) Sandro Dazzan Malibu, CA 90265. Eric Dransfield Rexburg, ID 83440 James Durst Boise, ID 83714 Roxana Eli Encino, CA 91436 Mark Gatto	To whole it Solent Crime for the Recall of District Attorney Gascon FULL NAME. STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (FCOMMITTEE, ALSO ENTERID, NUMBER) CONTRIBUTOR CODE * Sandro Dazzan IND Malibu, CA 90265 OTH PTY SCC Eric Dransfield IND Rexburg, ID 83440 OCM James Durst IND Boise, ID 83714 COM PTY SCC Roxana Eli IND Encino, CA 91436 OTH PTY SCC Mark Gatto IND Beverly Hills, CA 90212 OTH	To Whole dollars. iolent Crime for the Recall of District Attorney Gascon FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (FCOMMITTEL ALSO ENTERIAL NUMBER) Sandro Dazzan Malibu, CA 90265 COM Brit Dransfield MIND Rexburg, ID 83440 Mark Sandro Dazzan Mark Gatto Mark Gatto Mark Gatto Mark Gatto Mark Gatto Mark Gatto Mark Gatto Mark Gatto Mark Gatto	to whole dollars. from10/01// through12/31/ iolent Crime for the Recall of District Attorney Gascon FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (FCOMMITEE ALSOENTERID NUMBER) IF AN INDIVIDUAL ENTER CODE * AMOUNT CCUPATION AND EMPLOYER OF BURNESS) AMOUNT RECEIVED THIS PERIOD Sandro Dazzan IND ICCOM Retired D'A 500.00 Nalibu, CA 90265 OTH IPPTY Sandro Dazzan 500.00 Eric Dransfield IND ICCOM Retired D'A 100.00 Rexburg, ID 83440 IND IPTY Retired ICCOM 100.00 James Durat IND ISCC Retired ICCOM 100.00 Boise, ID 83714 IND ISCC Attorney ISCC 100.00 Rexana Eli Encino, CA 91436 IND ISCOM IPTY Attorney ISCOM INVestments 100.00 Mark Gatto INVD ISCOM IPTY INVestment Management CION Investments 100.00	to whole dollars. from10/01/2021	

Schedule A (Continuation Sheet) Monetary Contributions Received		Amounts may to whole o		Statement cover		CALIFORNIA FORM 46	
				through12/31/	/2021	Page 7 of 27	
AME OF FILER					1	I.D. NUMBER	
ictims of V	iolent Crime for the Recall of District Attorney	Gascon			1	1435471	
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 (FSELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN. 1 - DEC. 3	TO DATE	
12/04/2021	Ray Goel Van Nuys, CA 91411	⊠IND COM OTH PTY SCC	Sales Associate Best Cellular	100.00	100	0.00	
10/23/2021	David Gordon Los Angeles, CA 90028		Consultant Partnership Strategies LLC	100.00	500	0.00	
11/23/2021	David Gordon Los Angeles, CA 90028		Consultant Partnership Strategies LLC	100.00	500	0.00	
12/05/2021	Robin Hanasab Los Angeles, CA 90014	IND COM OTH PTY SCC	Investor Robin Hanasab	200.00	200	0.00	
1270572021	Cameron Hassid Beverly Hills, CA 90212	IND COM OTH PTY SCC	President Apollo Business Centers	100.00	100	5.00	
			SUBTOTALS	600.00			

Monetary Contributions Received		Amounts may to whole o		Statement cove		CALIFORNIA FORM 46		
				through12/31/	2021 Pa	age 8 of 27		
AME OF FILER	iolent Crime for the Recall of District Attorney	Gascon				D. NUMBER		
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 DA CALENDAR YEAR (JAN: 1 - DEC. 31)	TODATE		
12/05/2021	Ryan Hekmat Los Angeles, CA 90048	IND COM OTH PTY SCC	Investment Ryan Hekmat	200,00	200.	00		
12/11/2021	Robert Hymers Los Angeles, CA 90071	IND COM OTH PTY SCC	Movie Production Robert Hymers	200.00	200.	00		
12/05/2021	Dina Javaheri Los Angeles, CA 90067		Physician Dina Javaheri	500.00	500.	00		
12/05/2021	Jason Javaheri Los Angeles, CA 90067	IND COM OTH PTY SCC	Attorney J&Y Law	100.00	100.	00		
1270472021	Avla Karlin Los Angeles, CA 90046		Attorney Karlin & Karlin Injury Attorneys	100.00	100.	00		

ary Contributions Received			Statement covers period from 10/01/2021		CALIFORNIA FORM 460	
			through 12/31/	2021	Page	9 of 27
iolent Crime for the Recall of District Attorney	Gascon				I.D. NUMBE	
FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTERILD, NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALENDAR YE	AR	PER ELECTION TO DATE (IF REQUIRED)
Payam Kashani Beveriy Hills, CA 90210		Attorney Sunset West Legal Group, PC	100.00	10	10.00	
James Killian Beverly Hills, CA 90210	⊠IND □COM □OTH □PTY □SCC	Real Estate Agent Coastline	100.00	100.00		
Mark Levine Los Angeles, CA 90036		Psychologist Mark Levine	30.00	110.00		
Kate Linden Los Angeles, CA 90039		Manager Kate Linden	100.00	.00 100.00		
Jun Liu Highland, CA 92346		Business Analyst Esri	500.00	50	00.00	
	iolent Crime for the Recall of District Attorney FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (FCOMMITTEE ALSO ENTERID NUMBER) Payam Kashani Beverly Hills, CA 90210 James Killian Beverly Hills, CA 90210 Mark Levine Los Angeles, CA 90036 Kate Linden Los Angeles, CA 90039 Jun Liu	iolent Crime for the Recall of District Attorney Gascon FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (FCOMMITTEE ALSO ENTERID NUMBER) CONTRIBUTOR CODE * Payam Kashani XIND Beverly Rills, CA 90210 COM James Killian XIND Beverly Hills, CA 90210 COM Mark Levine XIND Los Angeles, CA 90036 COM Mark Linden XIND Los Angeles, CA 90039 OTH PTY SCC Jun Liu XIND Highland, CA 92346 COM	to whole dollars. iolent Crime for the Recall of District Attorney Gascon FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (PCCMMITTEE ALSO ENTERILD NUMBER) Payam Kashani IF AN INDIVIDUAL, ENTER CODE * Payam Kashani ICOM Beverly Hills, CA 90210 ICOM James Killian ICOM Beverly Hills, CA 90210 ICOM OTH PTY SCC SCC Mark Levine IND Los Angeles, CA 90036 OTH Van Liu IND Bighland, CA 92346 IND	To whole dollars. from10/01/ through12/31/ toolent Crime for the Recall of District Attorney Gascon FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR ("COMMITTE, ALSOENTERID NUMBER) CONTRIBUTOR CODE * IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER OF USHNESS) AMOUNT RECEIVED THIS PERIOD Payam Kashani EIND Attorney Sunset West Legal Group, COM 100.00 Beveriy Hills, CA 90210 OTH PPTY SCC 100.00 James Killian EIND COM Coastline 100.00 Beveriy Hills, CA 90210 COM OTH PPTY Psychologist Mark Levine 30.00 Los Angeles, CA 90036 COM COM COM Basiness Angeles, CA 90039 Manager Rate Linden 100.00 Los Angeles, CA 90039 OTH PPTY Business Analyst Basiness Analyst Basiness Analyst 500.00 Jun Liu EIND Highland, CA 92346 Eusiness Analyst Basiness Analyst 500.00	Io whole dollars. from10/01/2021	to whole dollars. for

chedule A (Continuation Sheet) Ionetary Contributions Received		ry Contributions Received Amounts may be rounded to whole dollars.		Statement covers period from10/01/2021		CALIFORNIA FORM
				through 12/31/	2021	Page 10 of 27
NAME OF FILER						I.D. NUMBER
victims of V:	iolent Crime for the Recall of District Attorney	Gascon				1435471
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER (.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN. 1 - DEC. 3	AR TO DATE
10/07/2021	Breton Lobner Manhattan Beach, CA 90266	XIND COM OTH PTY SCC	Not Employed n/a	100.00	100	0.00
10/05/2021	Paul Moll La Canada Flintridge, CA 91011	IND COM OTH PTY SCC	Deputy District Attorney Los Angeles County District Attorney's Office	100.00	85	0.00
11/05/2021	Paul Moll La Canada Flintridge, CA 91011		Deputy District Attorney Los Angeles County District Attorney's Office	100.00	850	0.00
12/07/2021	Ronald Moore Rialto, CA 92376	XIND COM OTH PTY SCC	Retired n/a	100.00	10	0.00
12/12/2021	Jasmine Moshfeqh Los Angeles, CA 90049	IND COM OTH PTY SCC	Homemaker n/a	500.00	501	0.00
			SUBTOTALS	900.00	1	

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Contributions Received Amounts may be rounded to whole dollars.			Statement covers period from 10/01/2021		CALIFORNIA FORM 46	
			through12/31/	2021	Page of	
					I.D. NUMBE	R
iolent Crime for the Recall of District Attorney	Gascon				1435471	-
FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALENDAR YEA	AR	PER ELECTION TO DATE (IF REQUIRED)
Herman Muhlstein Valley Village, CA 91607	IND COM OTH PTY SCC	Sales Hammerspace	100.00	201	0.00	
Alexander Needleman Los Angeles, CA 90035	IND COM OTH PTY SCC	Real Estate Agent Alexander Needleman	100.00	10	0.00	
Pacific Oil Group Beverly Hills, CA 90211	□IND □COM ⊠OTH □PTY □SCC		2,000.00	2,00	0.00	
Lou Petracci Upland, CA 91784		Retired n/a	500.00	50	0.00	
Lawrence Roche New Hope, PA 18938		Broker Lawrence Roche	100.00	10	0.00	
	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (FCOMMITTEE, ALSO ENTERID. NUMBER) Herman Muhistein Valley Village, CA 91607 Alexander Needleman Los Angeles, CA 90035 Pacific Oil Group Beverly Hills, CA 90211 Lou Petracci Opland, CA 91784 Lawrence Roche	Violent Crime for the Recall of District Attorney Gascon FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (FCOMMITTEE, ALSO ENTERID, NUMBER) CONTRIBUTOR CODE * Herman Muhlstein XIND Valley Village, CA 91607 COM OTH PTY SCC SCC Alexander Needleman XIND Los Angeles, CA 90035 OTH PTY SCC Pacific Oil Group IND Beverly Hills, CA 90211 COM Yold Petracci XIND Opland, CA 91784 OTH New Hope, PA 18938 COM	Yiolent Crime for the Recall of District Attorney Gascon FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR GrCOMMITTE, ALSOENTERID, NUMBER CONTRIBUTOR CODE * IF AN INDIVIDUAL. ENTER OCCUPATION AND EMPLOYER OF BUSINESS) Herman Muhlstein Valley Village, CA 91607 Sales Hammerspace Alexander Needleman Los Angeles, CA 90035 Soles COM SCC Pacific Oil Group Beverly Hills, CA 90211 SiND SCC Iou Petracci Opland, CA 91784 SiND COM SCC Lawrence Roche New Hope, FA 18938 SiND COM SCC	to whole dollars. form10/01/ from10/01/ through12/31/ follent Crime for the Recall of District Attorney Gascon FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR grounding, States IF AN INDIVIDUAL, ENTER grounding, States AMOUNT RECEIVED THIS PERIOD Grounding, States AMOUNT RECEIVED THIS PERIOD Values Sign colspan="2">AMOUNT RECEIVED THIS PERIOD Values Sign colspan="2">Values Sign colspan="2">AMO	to whole dollars. form10/01/2021	To whole dollars. for

Monetary	A (Continuation Sheet) Contributions Received	Amounts may be rounded to whole dollars.		Statement covers period from 10/01/2021 through 12/31/2021		SCHEDULE A (C CALIFORNIA FORM 46 Page 12 of 27
AME OF FILER	iolent Crime for the Recall of District Attorney	Gascon				I.D. NUMBER 1435471
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YE (JAN. 1 - DEC. 3	AR TODATE
12/09/2021	Steven Simich Los Angeles, CA 90024		Retired n/a	100.00	10	0.00
12/08/2021	John Tillev North Hollywood, CA 91602	IND COM OTH PTY SCC	Distribution The Jacmar Companies	1,000.00	1,00	0.00
12/05/2021	Anh Tran Los Angeles, CA 90012		Realtor Keller Williams	100.00	10	0.00
10/06/2021	Revin Von Tungeln Palmdale, CA 93551	IND COM OTH PTY SCC	Lawyer Thompson Von Tungeln A.P.C	250.00	85	0.00
11/27/2021	Keith Wagner Reseda, CA 91335	XIND COM OTH PTY SCC	Retired n/a	100.00	10	0.00
			SUBTOTAL\$	1,550.00		

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Monetary	netary Contributions Received		Contributions Received Amounts may be rounded to whole dollars.			Statement covers period from 10/01/2021		CALIFORNIA FORM 460	
				through12/31/	2021	Page of7			
AME OF FILER	iolent Crime for the Recall of District Attorney	Gascon				I.D. NUM			
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 (FSELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE CALENDAR (JAN. 1 - DE	YEAR	PER ELECTION TO DATE (IF REQUIRED)		
12/05/2021	Syamak Yamini Encino, CA 91436		Physician Syamak Yamini	100.00		100.00			
12/05/2021	Kia Zoghi Los Angeles, CA 90014	XIND COM OTH PTY SCC	Jeweler Stein Diamonds	500,00		500.00			
		DIND COM OTH PTY SCC							
		DIND COM OTH PTY SCC							
		DIND COM OTH PTY SCC							
			SUBTOTAL	\$ 600.00					

C. T. T. L.	have a second	SCHEDULE E	
Schedule E Payments Made	Amounts may be rounded to whole dollars.	Statement covers period from10/01/2021	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE		through12/31/2021	Page of7
NAME OF FILER			I.D. NUMBER
Victims of Violent Crime for the Recall of District At	torney Gascon		1435471
CODES: If one of the following codes accurately describe	es the payment, you may enter the code. Othe	erwise, 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 pro-	
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, an	d meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging,	
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services		s 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)

CODE OR DESCRIPTION OF PAYMENT	AMOUNT PAID
PRO	2,675.97
OFC	4,50
OFC	10.50
arized on Schedule D. SU	BTOTAL\$ 2,690.97
na	OFC OFC

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	37,230,63
2. Unitemized payments made this period of under \$100	\$	12.99
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.)	TAL \$	37,243.62

	and the second second second	from	SCHEDULE E (CONT.) CALIFORNIA 460 FORM 460 Page 15 of 27 I.D. NUMBER 1435471
CNS campaign consultants MTG mee CTB contribution (explain nonmonetary)* OFC offic CVC civic donations PET petil FIL candidate filing/ballot fees PHO pho FND fundraising events POL polli ND independent expenditure supporting/opposing others (explain)* POS post LEG legal defense PRO prof	hber communications tings and appearances a expenses ion circulating he banks ng and survey research age, delivery and messenger essional services (legal, acco ads	RAD radio airtime and production of returned contributions RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production TRC candidate travel, lodging, and trassection TRS transfer between committees pounting) VOT WEB information technology costs	uction costs meals ind meals of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
eFundraising Connections	OFC		0.90
Sacramento, CA 95816			
eFundraising Connections	OFC		2.50
Sacramento, CA 95816			
eFundraising Connections	OFC		4.50
Sacramento, CA 95816			
eFundraising Connections	OFC		1,50
Sacramento, CA 95816			
eFundraising Connections	OFC		5.20
Sacramento, CA 95816			
* Payments that are contributions or independent expenditures must also be summa		ein	BTOTAL \$ 14.60

Schedule E (Continuation Sheet) Payments Made	Amounts may to whole d		Statement covers period from <u>10/01/2021</u> through <u>12/31/2021</u>	CALIFORNIA FORM 460
NAME OF FILER				I.D. NUMBER
Victims of Violent Crime for the Recall of Dist	rict Attorney Gascon			1435471
CODES: If one of the following codes accurately 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 campaign literature and mailings	MBR member con MTG meetings an OFC office expe PET petition circ PHO phone bank POL polling and cplain)* POS postage, de	nmunications nd appearances nses ulating	RAD radio airtime and produ RFD returned contributions SAL campaign workers' sale TEL t.v. or cable airtime and TRC candidate travel, lodging TRS staff/spouse travel, lodging services TSF transfer between comm	ction costs aries I production costs g, and meals ging, and meals nittees of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBE	R)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
eFundraising Connections Sacramento, CA 95816		OFC		4.50
eFundraising Connections Sacramento, CA 95816		OFC		0.90
eFundraising Connections Sacramento, CA 95816		OFC		4.50
eFundraising Connections Sacramento, CA 95816		OFC		0.90
eFundraising Connections Sacramento, CA 95816		OPC		5,20
* Payments that are contributions or independent expenditur	es must also be summarized or	n Schedule D.		SUBTOTAL \$ 16.00

Schedule E (Continuation Sheet) Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER Victims of Violent Crime for the Recall of District Att	Park (190	ollars.		Statement covers period from 10/01/2021 through 12/31/2021	Page I.D. NUMB	17_ of _27_
CODES: If one of the following codes accurately describe CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC clvic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member con MTG meetings at OFC office expe PET petition circ PHO phone bank POL polling and POS postage, de	nmunications nd appearances nses ulating	services	erwise, describe the payme RAD radio airtime and product RFD returned contributions SAL campaign workers' salar TEL t.v. or cable airtime and p TRC candidate travel, lodging, TRS staff/spouse travel, lodgin TSF transfer between commit VOT voter registration WEB information technology or	ion costs ies production costs and meals ng, and meals tees of the sar	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DES	SCRIPTION OF PAYMENT		AMOUNT PAID
eFundraising Connections Sacramento, CA 95816		OFC.				1.22
eFundraising Connections Sacramento, CA 95816		OFC				6.00
eFundraising Connections Sacramento, CA 95816		OFC				4.50
eFundraising Connections Sacramento, CA 95816		OFC				4.50
eFundraising Connections Sacramento, CA 95816		OFC.				11.40
* Payments that are contributions or independent expenditures must al	so be summarized or	Schedule D.			SUBTOTAL \$	27.62

Schedule E (Continuation Sheet) Payments Made SFE INSTRUCTIONS ON REVERSE NAME OF FILER Victims of Violent Crime for the Recall of District	Amounts may be rounded to whole dollars. from10/01/2021 through12/31/2021		SCHEDULE E (CONT.) CALIFORNIA 460 Page 18 of 27 I.D. NUMBER 1435471 1435471 1435471	
CODES: If one of the following codes accurately desc CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundralsing events ND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member con MTG meetings at OFC office expe PET petition circ PHO phone bank POL polling and POS postage, de	nmunications nd appearances nses ulating	RAD radio airlime and pro RFD returned contribution SAL campaign workers's TEL t.v. or cable airlime a TRC candidate travel, loop TRS staff/spouse travel, loop TRS staff/spouse travel, loop	oduction costs salaries and production costs ging, and meals odging, and meals mmittees of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
eFundraising Connections		OFC		292.90
Sacramento, CA 95816				
eFundraising Connections		OFC		Z.40
Sacramento, CA 95816				
eFundraising Connections		OFC		7.50
Sacramento, CA 95816				
eFundraising Connections		OFC		11.96
Sacramento, CA 95816				
eFundraising Connections		OFC		1.50
Sacramento, CA 95816				

Schedule E (Continuation Sheet) Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER Victims of Violent Crime for the Recall of District A	to whole dollars. from1 through1			Statement covers period from 10/01/2021 through 12/31/2021	CALIFORNIA FORM 4 Page 19 of 1435471	E (CONT.)
CODES: If one of the following codes accurately description 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	MBR member con MTG meetings at OFC office expe PET petition circ PHO phone bank POL polling and POS postage, de	nmunications nd appearances nses ulating	services	herwise, describe the payment RAD radio airline and production RFD returned contributions SAL campaign workers' salarie TEL t.v. or cable airline and pr TRC candidate travel, lodging, a TRS staff/spouse travel, lodging TSF transfer between committee VOT voter registration WEB information technology cost	on costs s oduction costs and meals g, and meals ses of the same candidate	e/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I D. NUMBER)		CODE OR	D	ESCRIPTION OF PAYMENT	AMOUNT	PAID
eFundraising Connections		DFC				4.00
Sacramento, CA 95816						
eFundraising Connections		OFC				56.60
Sacramento, CA 95016						
eFundraising Connections		OFC				32.90
Sacramento, CA 95816						
eFundraising Connections		OFC				2.40
Sacramento, CA 95816						
eFundraising Connections		OFC				23.30
Sacramento, CA 95816						

Schedule E (Continuation Sheet) Am Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER Victims of Violent Crime for the Recall of District Attorney G	Amounts may be rounded to whole dollars. of District Attorney Gascon			Statement covers period from 10/01/2021 through 12/31/2021		CHEDULEE (CONT.) RNIA 460 20 of 27
CNS campaign consultants MTG CTB contribution (explain nonmonetary)* OFC CVC civic donations PET FIL candidate filing/ballot fees PHO FND fundraising events POL ND independent expenditure supporting/opposing others (explain)* POS LEG legal defense PRO	payment, you m member communica meetings and appe office expenses petition circulating phone banks polling and survey postage, delivery a professional service print ads	tions arances research nd messenger	services	RAD radio airtime and product RAD radio airtime and product RFD returned contributions SAL campaign workers' salari TEL t.v. or cable airtime and p TRC candidate travel, lodging, TRS staff/spouse travel, lodgir TSF transfer between commit VOT voter registration WEB information technology co	ion costs es production costs and meals ng, and meals tees of the sam	e candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE ALSO ENTER I D NUMBER)	COD	E OR	DE	SCRIPTION OF PAYMENT		AMOUNT PAID
eFundraising Connections	OF	2				20,50
Sacramento, CA 95815						
eFundraising Connections	DF	3-				1.50
Sacramento, CA 95816						
eFundraising Connections	OF	:				0.90
Sacramento, CA 95816						
eFundraising Connections	OF	2				1.50
Sacramento, CA 95816	-					
Greaory Foster	CN	ŝ				6,000.00
Lake Forest, CA 92630						
* Payments that are contributions or independent expenditures must also be sur	mmarized on Sched	ule D.			SUBTOTAL \$	6,024.40

Schedule E (Continuation Sheet) Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER Victims of Violent Crime for the Recall of District Attorne	Amounts may be rounded to whole dollars. of District Attorney Gascon			Statement covers period CALIF from 10/01/2021 FO through 12/31/2021 Page I.D. NUM 14354		A 400
CNS campaign consultants M CTB contribution (explain nonmonetary)* O CVC civic donations P FIL candidate filing/ballot fees P FND fundraising events P IND independent expenditure supporting/opposing others (explain)* P LEG legal defense P	MBR member commu MTG meetings and a OFC office expense petition circulati HO phone banks OL polling and sun POS postage, delive	unications appearances s ng	services	wise, describe the paymer RAD radio airtime and producti RFD returned contributions SAL campaign workers' salarit TEL t.v. or cable airtime and p TRC candidate travel, lodging, TRS staff/spouse travel, lodgin TSF transfer between committ VOT voter registration WEB information technology co	on costs es roduction costs and meals g, and meals ees of the same	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I D. NUMBER)		CODE OR	DESC	RIPTION OF PAYMENT		AMOUNT PAID
Gregory Foster Lake Forest, CA 92630		CNS				6,000.00
Gateway Media Sacramento, CA 95814		WEB			-	900.00
Nossaman LLP Los Angeles, CA 90017		PRO				3,651.50
Prepaid Expense Card Solutions, Inc. New York, NY 10018		OFC				8.00
RCBS Payroll Sacramento, CA 95841		SAL				2,153.00
* Payments that are contributions or independent expenditures must also be	e summarized on Sc	hedule D.		5	SUBTOTAL \$	12,712.50

Schedule E (Continuation Sheet) Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER Victims of Violent Crime for the Recall of District Atte	Amounts may be rounded to whole dollars. I of District Attorney Gascon			Statement covers period from 10/01/2021 through 12/31/2021	CALIFORNIA 460 FORM 460 Page 22 of 27 I.D. NUMBER 1435471	
CODES: If one of the following codes accurately describe CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events ND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member co MTG meetings a OFC office expe PET petition circ PHO phone ban POL polling and POS postage, d	mmunications nd appearances enses pulating	services	RAD radio airtime and production RFD returned contributions SAL campaign workers' salarie TEL t.v. or cable airtime and pr TRC candidate travel, lodging, a TRS staff/spouse travel, lodging	on costs oduction costs and meals g, and meals sees of the same candidate/spons	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD, NUMBER)		CODE OR	DE	SCRIPTION OF PAYMENT	AMOUNT PAID	
RCBS Pavroll		PRO			71.	
Sacramento, CA 95841						
RCBS Payroll		PRO			71.	
Sacramento, CA 95841						
RCBS Payroll		SAL			2,153	
Sacramento, CA 95841						
RCBS Payroll		PRO			180	
Sacramento, CA 95841						
RCBS Pavroll		PRO			71.	
Sacramento, CA 95841						

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	ny be rounded e dollars.	Statement covers period from 10/01/2021 through 12/31/2021	SCHEDULE E (CONT.) CALIFORNIA 460 FORM 460 Page 23 of 27 I.D. NUMBER 1435471
CNS campaign consultants MTG meetings CTB contribution (explain nonmonetary)* OFC office explain office explain CVC civic donations PET petition of FIL candidate filing/ballot fees PHO phone ballot FND fundraising events POL polling a ND independent expenditure supporting/opposing others (explain)* POS postage,	communications and appearances penses inculating anks nd survey research delivery and messenger anal services (legal, acco	RAD radio airtime and production RFD returned contributions SAL campaign workers' salarie TEL t.v. or cable airtime and pr TRC candidate travel, lodging, a TRS staff/spouse travel, lodging services TSF	on costs as roduction costs and meals g, and meals ees of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER J.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
RCBS Payroll Sacramento, CA 95841	SAL		2,153.00
River City Business Services Sacramento, CA 95841	PRO		2,162.75
River City Business Services Sacramento, CA 95841	PRO		1,092.23
River City Business Services Sacramento, CA 95841	PRO		330.13
Rosales Johnson Agency Sacramento, CA 95014	CNS		22.00
* Payments that are contributions or independent expenditures must also be summarized	f on Schedule D.	s	UBTOTAL \$ 5,768.11

Schedule E (Continuation Sheet) Amounts may be r to whole dolla SEE INSTRUCTIONS ON REVERSE				Statement covers period from10/01/2021 through12/31/2021	CALIFORNIA 460 FORM 460
NAME OF FILER Victims of Violent Crime for the Recall of District Att	torney Gascon				1.D. NUMBER 1435471
CODES: If one of the following codes accurately describ CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FiL candidate filing/ballot fees FND fundraising events ND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings and OFC office expen PET petition circul PHO phone banks POL polling and s POS postage, deli	munications d appearances ses lating	enger services	RAD radio airtime and product returned contributions SAL campaign workers' salari TEL t.v. or cable airtime and p TRC candidate travel, lodging, TRS staff/spouse travel, lodging	nt. ion costs ies production costs and meals ng, and meals tees of the same candidate/sponso
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE OR	DE	SCRIPTION OF PAYMENT	AMOUNT PAID
Rosales Johnson Agency Sacramento, CA 95814		CNS			3,795.
Rosales Johnson Acency Sacramento, CA 95814		CNS			2,800.0
Zoom San Jose, CA 95113		OFC			199.1
Zoom San Jose. CA 95113		OFC.			199.5
* Payments that are contributions or independent expenditures must a	lso be summarized on	Schedule D.			SUBTOTAL \$ 6,994.3

					SCHEDULE F
Schedule F Accrued Expenses (Unpaid Bills)	Amounts may be round to whole dollars.	ed	Statement covers	50	RM 460
SEE INSTRUCTIONS ON REVERSE			through12/31/20	Page	25 of 27
NAME OF FILER			1	I.D. NUM	BER
Victims of Violent Crime for the Recall of District Att	orney Gascon			14354	71
CODES: If one of the following codes accurately describ 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	MBR member communication MTG meetings and appearant OFC office expenses PET petition circulating PHO phone banks POL polling and survey resu POS postage, delivery and PRO professional services (PRT print ads	nces earch messenger services	RAD radio airtime and RFD returned contribu SAL campaign worke TEL t.v. or cable airtir TRC candidate travel, TRS staff/spouse trav	production costs itions rs' salaries ne and production costs lodging, and meals el, lodging, and meals committees of the sam	ne candidate/sponsor
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER LD. 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
Bell, McAndrews & Hiltachk, LLP	PRO	2,675.97	0.00	2,675.97	0.00
Sacramento, CA 95814					
Gateway Media	WEB	900.00	0.00	900.00	0.00
Sacramento, CA 95814					
Nossaman LLP	PRO	3,651.50	0.00	3,651.50	0.00
Los Angeles, CA 90017					
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	7,227.47\$	0.00\$	7,227.47\$	0.00
Schedule F Summary					
1. Total accrued expenses incurred this period. (Include all s accrued expenses of \$100 or more, plus total uniternized			INCUR	RED TOTALS \$ _	1,954.84
2. Total accrued expenses paid this period. (Include all Sch accrued expenses of \$100 or more, plus total uniternized				PAID TOTALS \$ _	13,844.64
3. Net change this period. (Subtract Line 2 from Line 1. En on the Summary Page, Column A, Line 9.)	ter the difference here and	1			-11,669.80 ay be a negative number

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Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)	Amounts may be rounded to whole dollars.	Statement covers period from 10/01/2021	CALIFORNIA FORM 460
		through 12/31/2021	Page 26 of 27
NAME OF FILER			I.D. NUMBER
Victims of Violent Crime for the Recall of District	Attorney Gascon		1435471

CMP campaign paraphernalia/misc.

- CNS campaign consultants
- CTB contribution (explain nonmonetary)*
- CVC civic donations
- FIL candidate filing/ballot fees
- FND fundraising events
- ND independent expenditure supporting/opposing others (explain)*
- LEG legal defense
- LIT campaign literature and mailings

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

- MBR member communications
- MTG meetings and appearances
- OFC office expenses
- PET petition circulating
- PHO phone banks
- POL polling and survey research
- POS postage, delivery and messenger services
- PRO professional services (legal, accounting)
- PRT print ads

- RAD radio airtime and production costs
- RFD returned contributions
- SAL campaign workers' salaries
- TEL t.v. or cable airtime and production costs
- TRC candidate travel, lodging, and meals
- TRS staff/spouse travel, lodging, and meals
- TSF transfer between committees of the same candidate/sponsor
- VOT voter registration
- WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF 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
Nossaman LLP Los Angeles, CA 90017	PRO	0.00	1,954.84	0.00	1,954.8
Rosales Johnson Agency Sacramento, CA 95814	CNS	2,800.00	0.00	2,800.00	0.0
Rosales Johnson Agency Sacramento, CA 95814	CNS	3,795.17	0.00	3,795.17	0.0
Rosales Johnson Agency Sacramento, CA 95814	CNS	22,00	0,00	22.00	0,0
	SUBTOTALS \$	5,617,175	1,954.84\$	6,617.17	1,954.84

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)	Amounts may be rounded to whole dollars.	Statement covers period from10/01/2021	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through 12/31/2021	Page of
NAME OF FILER			I.D. NUMBER
Victims of Violent Crime for the Recall of District Att	orney Gascon		1435471
NAME OF AGENT OR INDEPENDENT CONTRACTOR			1
RCBS Payroll			
CODES: If one of the following codes accurately descrit	pes the payment you may enter the code	Otherwise describe 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 independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and pro TRC candidate travel, lodging, ar TRS staff/spouse travel, lodging,	n costs duction costs nd meals and meals es of the same candidate/sponsor
* Payments that are contributions or independent expenditures must a	so be summarized on Schedule D.		
NAME AND ADDRESS OF PAYEE OR CREDITOR	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID

(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPT	TION OF PAYMENT AMOUNT PAID
Devon Mirsky	SAL	1,678.04
Sylmar, CA 91342		
Devon Mirsky	SAL	1,678.04
Sylmar, CA 91342		

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 3,356.08

* 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.

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