| Recipient Committee<br>Campaign Statement<br>Cover Page<br>(Government Code Sections 84200-84216.5)   | Statement covers period<br>from 01/21/2024  | Date of election iffannlicable  | FEB 2 1 2024 FEB 2         CALIFORNIA<br>FORM         CALIFORNIA<br>FORM         LOS ANGELES COUNT         Image I         2024 FEB 22 PM 4: 58 |   |                                  |  |  |
|---|---|---|---|---|----------------------------------|--|--|
| SEE INSTRUCTIONS ON REVERSE   | from01/21/2024<br>through02/17/2024   |   | SITION B  | F   | For Official Use Only            |  |  |
| <ul> <li>State Candidate Election Committee</li> <li>Recall</li> <li>(Also Complete Part 5)</li> <li>General Purpose Committee</li> <li>Sponsored</li> <li>Small Contributor Committee</li> </ul> | Primarily Formed Ballot Measure         Committee         Controlled         Sponsored         Also Complete Part 6)         Primarily Formed Candidate/         Officeholder Committee         Also Complete Part 7) | <ul> <li>2. Type of Statement:</li> <li>Preelection Statement</li> <li>Semi-annual Statement</li> <li>Termination Statement<br/>(Also file a Form 410 Termination</li> <li>Amendment (Explain below)</li> </ul> | (<br>[<br>]<br>]<br>]   | Quarterly Stat<br>Special Odd-Y<br>Supplemental<br>Statement - Al | /ear Report                      |  |  |
| 3. Committee information  | D.NUMBER<br>1463311<br>Hatami for Los Angeles   | Treasurer(s)<br>NAME OF TREASURER<br>Shea Sanna<br>MAILING ADDRESS  | STATE   | ZIP CODE  | AREA CODE/PHONE                  |  |  |
| CITY STATE ZIP CC   |   | Sacramento  | CA  | 95815   | (916)285-5733                    |  |  |
|   |   | NAME OF ASSISTANT TREASURER, IF A<br>Sonia Hidalgo  | NY  |   |                                  |  |  |
| Sacramento CA 9581<br>MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. E   |   | MAILING ADDRESS   |   |   |                                  |  |  |
| CITY STATE ZIP CO   | DDE AREA CODE/PHONE   | CITY<br>Sacramento  | STATE<br>CA   | ZIP CODE<br>95815   | AREA CODE/PHONE<br>(916)285-5733 |  |  |
| OPTIONAL: FAX / E-MAIL ADDRESS<br>(916)333-1344 / HatamilE@deaneandcompany.com  |   | OPTIONAL: FAX / E-MAIL ADDRESS  |   |   |                                  |  |  |
| A. Verification     I have used all reasonable diligence in preparing and reviewing     under penalty of perjury under the laws of the State of California     Executed on                        | a that the foregoing is true and correct.   | owledge the information contained herein and i  |   |   | and complete. I certify          |  |  |
| Executed on Date  | Ву  | Signature of Controlling Officeholder, Candidate, State Measure   | Proponent   |   |                                  |  |  |

Signature of Controlling Officeholder, Candidate, State Measure Proponent

By .

Executed on \_\_\_\_\_

Date

FPPC Form 460 (Jan/2016)

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#### **COVER PAGE - PART 2**



#### 5. Officeholder or Candidate Controlled Committee

| NAME OF OFFICEHOLDER OR CANDIDATE               |            |                  |     |
|---|------------|------------------|-----|
| OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIS | TRICT NUMB | ER IF APPLICABLE | .)  |
| RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)   | CITY       | STATE            | ZIP |

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

| COMMITTEE NAME    |                   |            | I.D. NUMBE | R               |
|-------------------|-------------------|------------|------------|-----------------|
| COMMITTEETWATE    |                   |            |            |                 |
|                   |                   |            |            |                 |
|                   |                   |            |            |                 |
| NAME OF TREASURER |                   |            | CONTROLL   | EDCOMMITTEE?    |
|                   |                   |            | S YES      | □ NO            |
| COMMITTEE ADDRESS | STREET ADDRESS (N | IO P.O. BO | X)         |                 |
|                   |                   |            |            |                 |
|                   | CTATE             | 710.00     |            |                 |
| CITY              | STATE             | ZIP CC     | DDE        | AREA CODE/PHONE |
|                   |                   |            |            |                 |
| COMMITTEENAME     |                   |            | I.D. NUMBE | R               |
| COMMITTEENAME     |                   |            | I.D. NOWBE | .n              |
|                   |                   |            |            |                 |
|                   |                   |            |            |                 |
| NAME OF TREASURER |                   |            | CONTROLL   | ED COMMITTEE?   |
|                   |                   |            | 🗌 YES      | NO NO           |
| COMMITTEE ADDRESS | STREET ADDRESS (N | 0 P.O. BO  | X)         |                 |
|                   |                   |            | -          |                 |
|                   |                   |            |            |                 |

STATE

ZIP CODE

AREA CODE/PHONE

## 6. Primarily Formed Ballot Measure Committee

| NAME | OF | BALL | OT | MEAS | URE |
|------|----|------|----|------|-----|
|------|----|------|----|------|-----|

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

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

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

| OFFICE SOUGHT OR HELD | DISTRICT NO. IF ANY |
|-----------------------|---------------------|
|                       |                     |

7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD                   | SUPPORT   |  |
|-----------------------------------|---|-----------|--|
| Jonathan Hatami                   | District Attorney<br>Los Angeles County | OPPOSE    |  |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD                   | SUPPORT   |  |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD                   | U SUPPORT |  |
| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD                   | SUPPORT   |  |

Attach continuation sheets if necessary

CITY

| Summary Page       Anounts may be rounded<br>to whole dollars.       Statement covers period<br>from       CALFORNIA       4600         Stel instructions on Reverse<br>Independent Committee in Support of Jonathan Batani for Los Angeles County DA 2014 to Protect Our Children       Page 3       of 8         Contributions Received       ColumnA<br>macrostense<br>interpretation       ColumnA<br>interpretation         1. Ontorneellary Contributions<br>in ColumnA due stowee<br>interpretations in ColumnA<br>in Scelaneous in ColumnA<br>in Scelaneo   | Campaign Disclosure Statement  |      |                    |      |                         |             |                 |                | SUMMARY PAGE                     |
|--|--|------|--------------------|------|-------------------------|-------------|-----------------|----------------|----------------------------------|
| SEE INSTRUCTIONS ON REVERSE     Inform     0.022170202     Page     0       MARGOFFILER     Independent Committee in Support of Jonatian Blatmi for Los Angeles County DA 2024 to Protect Our Children     I.D. NUMBER       Contributions Received     Column A     Column B       1. Monetary Contributions     Schedule A, Line 3     2,000.00     3.1,381.00       2. Loans Received     Schedule A, Line 3     2,000.00     3.23,288.00       3. SUBTOTAL CASH CONTRIBUTIONS     Add Line 3 + 4     2,000.00     3.23,288.00       4. Nommonetary Adjustment     Schedule A, Line 3     2,000.00     3.23,288.00       5. TOTAL CONTRIBUTIONS RECEIVED     Add Lines 3 + 4     2,000.00     3.31,388.00       6. Payments Made     Schedule A, Line 3     0.00     0.00       5. TOTAL CONTRIBUTIONS RECEIVED     Add Lines 4 + 7     5     45,727.15       7. Loans Made     Schedule A, Line 3     0.00     0.00       8. SUBTOTAL CASH PAYMENTS     Add Lines 6 + 7     41,317.80     5       9. Accured Expenses     (Unpaid Bills)     Schedule A, Line 3     0.00     0.00       10. Nommonetary Adjustment     Schedule A, Line 3     0.00     0.00       10. Nommonetary Adjustment     Schedule A, Line 3     0.00     0.00       11. TOTAL EXPENDITURES MADE     Add Lines 6 + 7     5     41,117.80  |  | Jale |                    |      |                         | ment cov    | ers period      | CALIFORNIA 160 |                                  |
| Set instructions university       Instructions   |  |      |                    |      |                         | from        | 01/21/2024 FORM |                |                                  |
| Set instructions unit vertices       ID       NUMBER         And CP File       Independent Committee in Support of Jonatham Batani for Los Angeles County DA 2034 to protect Our Children       ID       NUMBER         Contributions Received       ID       Column A       Took Heighwood       Column B       Column B       Caleman B       Column B       Caleman B       Column B       Column B       Caleman B       Column B       Column B       Caleman B       Column B       Colu   |  |      |                    |      |                         | through     | 02/1            | 7/2024         | Page3 of8                        |
| Indegendent: Committee in Support of Jonathan Batadi for Los Angeles County DA 2024 to Protect Our Children       146311         Contributions Received       Column B<br>(modertholescollable)       Column B<br>(and the State Primary and<br>eneral Elections         1. Monetary Contributions       Schedule A, Line 3       2,000,00       3,1,380,00         3. SUBTOTAL CASH CONTRIBUTIONS       And Lines 1+ 2       2,000,00       3,1,380,00       0.00         3. SUBTOTAL CASH CONTRIBUTIONS       And Lines 1+ 2       2,000,00       3,1,380,00       0.00         6. Payments Made       Schedule E, Line 4       4,1,317,80       4,5,787,15       Schedule K Line 3         6. Payments Made       Schedule E, Line 4       4,1,317,80       4,5,787,15       Schedule K Line 3         9. Accrued Expenses (Unpad Bills)       Schedule E, Line 4       5,1,327,80       5,5,787,15       Expenditures Made'         10. Nonmonetary Adjustment       Schedule C, Line 3       0,00       10,000,00       10,000,00         11. TOTAL EXPENDITURES MADE       Schedule C, Line 3       0,00       10,000,00       10,000,00         11. TOTAL EXPENDITURES MADE       Schedule C, Line 3       0,00       10,000,00       10,000,00         11. TOTAL EXPENDITURES MADE       Columa A angle engands       Schedule C, Line 3       0,00       0,00         12. Ges   |  |      |                    |      |                         | <b></b>     |                 |                |                                  |
| Contributions       Contributions<   | Independent Committee in Support of Jonathan Hatami for Los A  | nge  | les County DA 2024 | to 1 | Protect Our             | Children    |                 |                |                                  |
| 1. Monetary Contributions       Schedule A, Line 3       \$ <ul> <li>2, Loans Received</li> <li>2, Loans Received</li> <li>3, SUBTOTAL CASH CONTRIBUTIONS</li> <li>Add Lines 1+2</li> <li>3, 2, 000, 00</li> <li>3, 2, 000, 00</li> <li>3, 2, 88, 00</li> <li>0, 000</li> <li>0, 000</li></ul>  | Contributions Received   |      | TOTAL THIS PERIOD  |      | CALENDAR                | YEAR        | Runni           | ng in Both     | the State Primary and            |
| 2. Loans Received       Schedule 8, Line 3       0.00       0.00       0.00       0.00         3. SUBTOTAL CASH CONTRIBUTIONS       Add Lines 1+2       \$       0.00       31,388.00       20. Contributions         4. Nonmonetary Contributions       Schedule C, Line 3       0.00       \$       31,388.00       20. Contributions         5. TOTAL CONTRIBUTIONS RECEIVED       Add Lines 3+4       \$       2.000.00       \$       31,388.00         Expenditures Made         6. Payments Made       Schedule E, Line 4       \$       41,317.80       \$       45,787.15         10. Nonmonetary Adjustment       Schedule E, Line 4       \$       41,317.80       \$       45,787.15         9. Accrued Expenses (Unpaid Bills)       Schedule F, Line 3       0.00       0.00       20.000.00         10. Nonmonetary Adjustment       Schedule F, Line 3       0.00       0.00       20.000.00         11. TOTAL EXPENDITURES MADE       Columa A Line 8 above       2.000.00       0.00       -////2       -////2         12. Beginning Cash Balance       Previous Summary Page, Line 15       \$       44,149.27       To calculate Column 8, ad amounts in Goluma A tang above       -////2       \$       -////2       *         13. Cash Receipts       Columa A, Line 8 above   | 1 Monotony Contributions   | ¢    | 2.000.00           | ¢    | 31.                     | 388.00      | Gener           | al Election    | IS                               |
| 2. Counts received and a statement in this section may be different from amounts for this is a termination statement. Line 16 must be zero.       3. Subtraction in the section may be different from amounts for this is a termination statement. Line 16 must be zero.       20. Contributions Received signed and (if any).         20. Contributions in this section may be different from amounts for this is a termination statement. Line 16 must be zero.       3. (a)   |  |      |                    | Ф    |                         |             |                 | 1.             | /1 through 6/30 7/1 to Date      |
| 4. Nonmonetary Contributions       Schedule C, Line 3       0.00       0.00       0.00       21. Expenditures       Made       21. Expenditures         5. TOTAL CONTRIBUTIONS RECEIVED       And Lines 3 + 4       \$       2,000.00       \$       31,386.00       21. Expenditures       Made       \$       21. Expenditures       Made       22. Cumulative Expenditures       Made       22. Cumulative Expenditures       21. Expenditures       21. Expenditures       21. Expenditures       22. Cumulative Expenditures       21. Expenditures       21. Expenditures   |  |      |                    | ¢    | 31.                     |             | 20. Cor         | tributions     |                                  |
| 5. TOTAL CONTRIBUTIONS RECEIVED       Add Lines 3 + 4       \$       2,000.00       \$       31,388.00       Image S   |  |      |                    | Ф    |                         |             |                 |                | \$                               |
| S. TOTAL CONTRIBUTIONS RECEIVED       Add Lines 3*4       \$       Interview and the second |  |      |                    | ¢    | 31.                     |             |                 |                | \$                               |
| 6. Payments Made       Schedule E, Line 4       \$       41,317.80       \$       45,787.15       Candidates         7. Loans Made       Schedule H, Line 3       0.00       0.00       0.00       0.00         8. SUBTOTAL CASH PAYMENTS       Add Lines 6+7       \$       41,317.80       \$       45,787.15       Candidates         9. Accrued Expenses (Unpaid Bills)       Schedule F. Line 3       0.00       0.00       0.00       0.00       0.00         10. Nonmonetary Adjustment       Schedule F. Line 3       0.00       0.00       0.00       0.00       0.00         11. TOTAL EXPENDITURES MADE       Schedule F. Line 4       0.00       0.00       0.00       0.00       0.00         12. Beginning Cash Balance       Previous Summary Page, Line 16       \$       44,149.27       To calculate Column A to the corresponding amounts in Column A to the subtract Line 15       \$       4,831.47         16. Explore CAsh Balance       Add Lines 12 + 13 + 14, then subtract Line 15       \$       4,831.47         17. LOAN GUARANTEES RECEIVED       Schedule B, Part 2       \$       0.00         17. LOAN GUARANTEES RECEIVED       Schedule B, Part 2       \$       0.00         18. Cash Equivalents<   | 5. TO TAL CONTRIBUTIONS RECEIVED   | ¢    | 2,000.00           | \$   |                         |             |                 |                |                                  |
| 1. Loans Made       Schedule H, Line 3       0.00       0.00         8. SUBTOTAL CASH PAYMENTS       Add Lines 6 + 7       \$ 41,317.80       \$ 45,787.15         9. Accrued Expenses (Unpaid Bills)       Schedule F, Line 3       10,000.00       10,000.00       10,000.00         10. Nonmonetary Adjustment       Schedule C, Line 3       0.00       0.00       10,000.00       0.00         11. TOTAL EXPENDITURES MADE       Schedule C, Line 3       0.00       0.00       \$ 55,787.15       J         12. Beginning Cash Balance       Previous Summary Page, Line 16       \$ 44,149.27       To calculate Column B, add corresponding amounts in Colum A to the corresponding amounts in Colum A to the corresponding amounts in Colum A to the corresponding amounts in Column A time 3 above       0.00       -//       *         14. Miscellaneous Increases to Cash       Colum A, Line 8 above       41,317.80       \$ 4,81.47       fues that should be subtracted from previous from Colum A time and the corresponding amounts in Column A time and the subtract Line 15       \$ 4,81.47       *       *         17. LOAN GUARANTEES RECEIVED       Schedule B, Part 2       0.00       Colum       Fues that should be subtracted from previous prover the amounts from Lines 2, 7, and 9 (from Lines 2, 7, and 9   | Expenditures Made  |      |                    |      |                         |             | Expen           | diture Lim     | it Summary for State             |
| <ul> <li>8. SUBTOTAL CASH PAYMENTSAdd Lines 6 + 7 \$ 41,317.80 } 45,787.15<br/>9. Accrued Expenses (Unpaid Bills)Schedule F. Line 3 10,000.00<br/>10. Nonmonetary AdjustmentSchedule C. Line 3 0.00 0.00<br/>11. TOTAL EXPENDITURES MADEAdd Lines 8 + 9 + 10 \$ 51,317.80 \$ 55,787.15<br/>Current Cash StatementAdd Lines 8 + 9 + 10 \$ 51,317.80 \$ 55,787.15<br/>12. Beginning Cash BalancePrevious Summary Page, Line 16 \$ 44,149.27<br/>13. Cash ReceiptsColumn A, Line 3 above 2,000.00<br/>14. Miscellaneous Increases to CashSchedule I, Line 4 0.00<br/>15. Cash PaymentsColumn A, Line 8 above 41, 317.80<br/>16. ENDING CASHBALANCEAdd Lines 12 + 13 + 14, then subtract Line 15 \$ 44,831.47<br/>17. LOAN GUARANTEES RECEIVEDSchedule B, Part 2 \$ 0.00<br/>17. LOAN GUARANTEES RECEIVEDSchedule B, Part 2 \$ 0.00<br/>18. Cash Equivalents and Outstanding Debts<br/>18. Cash EquivalentsSchedule B, Part 2 \$ 0.00<br/>19. Courrent A mounts in Chadra year, only carry over the amounts from Lines 2, 7, and 9 (ff any).</li> </ul>   | Sector Annual An |      |                    | \$   | 45,                     | 787.15      | Candio          | dates          |                                  |
| <ul> <li>8. SUBTOTAL CASH PAYMENTSAdd Lines 6 + 7 \$ 41,317.80 \$ 45,787.15 (if Subjective Volumary Expenditure Limit)</li> <li>9. Accrued Expenses (Unpaid Bills)Schedule F. Line 3 10,000.00</li></ul>   | 7. Loans Made  |      | 0.00               |      |                         | 0.00        |                 | 22 Cumula      | ativo Expondituros Mado*         |
| 10. Nonmonetary Adjustment       Schedule C, Line 3       0.00       0.00       0.00         11. TOTAL EXPENDITURES MADE       Add Lines 8 + 9 + 10       \$ 51,317.80       \$ 55,787.15  | 8. SUBTOTAL CASH PAYMENTS  | \$   | 41,317.80          | \$   | 45,                     | 787.15      | 1               |                |                                  |
| 10. Noninforearly Adjustment       Schedule C, Line 3       0.000         11. TOTAL EXPENDITURES MADE       Add Lines 8 + 9 + 10       \$ 51,317.80       \$ 55,787.15         Current Cash Statement       Image: Column A, Line 3 above       2,000.00       Image: Column A, Line 3 above       2,000.00         13. Cash Receipts       Column A, Line 3 above       2,000.00       Image: Column A, Line 3 above       0.00         14. Miscellaneous Increases to Cash       Schedule I, Line 4       0.00       Image: Column A, Line 8 above       41,317.80         15. Cash Payments       Column A, Line 8 above       41,317.80       Column A may be negative figures that should be subtract Line 15       \$ 4,831.47         17. LOAN GUARANTEES RECEIVED       Schedule B, Part 2       0.00       Colum       Colum Previous Schedule B, Part 2       0.00         18. Cash Equivalents       See instructions on reverse       0.00       Image: Column B, If this is the first report being filed or this calendar year, only carry over the amounts for Lines 2, 7, and 9 (if any).       Image: Column B, Column B   | 9. Accrued Expenses (Unpaid Bills) Schedule F. Line 3  |      | 10,000.00          |      | 10,                     | 000.00      | Da              | te of Election | Total to Date                    |
| Current Cash Statement         12. Beginning Cash Balance       Previous Summary Page, Line 16 \$ 44,149.27         13. Cash Receipts       Column A, Line 3 above       2,000.00         14. Miscellaneous Increases to Cash       Schedule I, Line 4       0.00         15. Cash Payments       Column A, Line 8 above       41,317.80         16. ENDING CASH BALANCE       Add Lines 12 + 13 + 14, then subtract Line 15       4,831.47         17. LOAN GUARANTEES RECEIVED       Schedule B, Part 2 \$ 0.00       0.00         18. Cash Equivalents and Outstanding Debts       See instructions on reverse \$ 0.00       0.00   | 10. Nonmonetary Adjustment   |      | 0.00               |      |                         | 0.00        | (               | mm/dd/yy)      |                                  |
| 12. Beginning Cash Balance       Previous Summary Page, Line 16       44, 149.27         12. Beginning Cash Balance       Previous Summary Page, Line 16       44, 149.27         13. Cash Receipts       Column A, Line 3 above       2,000.00         14. Miscellaneous Increases to Cash       Schedule I, Line 4       0.00         15. Cash Payments       Column A, Line 8 above       41,317.80         16. ENDING CASH BALANCE       Add Lines 12 + 13 + 14, then subtract Line 15       4,831.47         If this is a termination statement, Line 16 must be zero.       Schedule B, Part 2       0.00         17. LOAN GUARANTEES RECEIVED       Schedule B, Part 2       0.00         18. Cash Equivalents       See instructions on reverse       0.00   | 11. TOTAL EXPENDITURES MADE  | \$   | 51,317.80          | \$   | 55,                     | 787.15      |                 | //             | \$                               |
| 12. Beginning Cash Balance       Previous Summary Page, Line 16       44,149.27         13. Cash Receipts       Column A, Line 3 above       2,000.00         14. Miscellaneous Increases to Cash       Schedule I, Line 4       0.00         15. Cash Payments       Column A, Line 8 above       41,317.80         16. ENDING CASH BALANCE       Add Lines 12 + 13 + 14, then subtract Line 15       4,831.47         17. LOAN GUARANTEES RECEIVED       Schedule B, Part 2       0.00         18. Cash Equivalents and Outstanding Debts       0.00         18. Cash Equivalents       See instructions on reverse       0.00   | Current Cash Statement   |      |                    | r    |                         |             | 1               |                | \$                               |
| 13. Cash Receipts       Column A, Line 3 above       2,000.00         14. Miscellaneous Increases to Cash       Schedule I, Line 4       0.00         15. Cash Payments       Column A, Line 8 above       41,317.80         16. ENDING CASH BALANCE       Add Lines 12 + 13 + 14, then subtract Line 15       \$ 4,831.47         17. LOAN GUARANTEES RECEIVED       Schedule B, Part 2       \$ 0.00         18. Cash Equivalents and Outstanding Debts       See instructions on reverse       \$ 0.00         18. Cash Equivalents       See instructions on reverse       \$ 0.00   |  | \$   | 44,149.27          |      | aalaulata Calur         | mn D odd    |                 |                |                                  |
| 14. Miscellaneous Increases to Cash       Schedule I, Line 4       0.00       corresponding amounts from Column B of your last report. Some amounts in this section may be different from amounts from Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filled for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).       *Amounts in this section may be different from amounts reported in Column B.         18. Cash Equivalents and Outstanding Debts       See instructions on reverse       0.00   |  |      |                    | an   | nounts in Colum         | nn A to the |                 |                |                                  |
| 15. Cash Payments       Column A, Line 8 above       41, 317.80         16. ENDING CASH BALANCE       Add Lines 12 + 13 + 14, then subtract Line 15       4, 831.47         If this is a termination statement, Line 16 must be zero.       schedule B, Part 2       0.00         17. LOAN GUARANTEES RECEIVED       Schedule B, Part 2       0.00         18. Cash Equivalents       See instructions on reverse       0.00   |  |      |                    |      |                         |             |                 |                | on may be different from amounts |
| 16. ENDING CASH BALANCE       Add Lines 12 + 13 + 14, then subtract Line 15       4,831.47         If this is a termination statement, Line 16 must be zero.       intermination statement, Line 16 must be zero.       intermination statement, Line 16 must be zero.         17. LOAN GUARANTEES RECEIVED       Schedule B, Part 2       0.00       or this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).         18. Cash Equivalents       See instructions on reverse       0.00       or 0.00  | 15. Cash Payments  |      | 41,317.80          | re   | report. Some amounts in |             | reported        | In Column B.   |                                  |
| 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 from Lines 2, 7, and 9 (if any).         18. Cash Equivalents       See instructions on reverse \$\$  | •  |      |                    |      |                         |             |                 |                |                                  |
| 17. LOAN GUARANTEES RECEIVED       Schedule B, Part 2       0.00       for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).         18. Cash Equivalents       See instructions on reverse       0.00       0.00   |  |      |                    |      |                         |             |                 |                |                                  |
| Cash Equivalents and Outstanding Debts       18. Cash Equivalents       See instructions on reverse \$   | 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2  | \$   | 0.00               | fo   | this calendar y         | year, only  |                 |                |                                  |
| 18. Cash Equivalents See instructions on reverse \$0.00  | Cash Equivalents and Outstanding Dobts   | -    |                    |      |                         |             |                 |                |                                  |
|  |  | s    | 0.00               | an   | y).                     |             |                 |                |                                  |
|  |  |      |                    |      |                         |             |                 |                |                                  |

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

|  | chedule A<br>onetary Contributions Received   |                                      | ts may be rounded<br>whole dollars.  | Statement covers period<br>from01/21/2024 |   | CALIFORNIA 460                           |  |
|--|---|--------------------------------------|--|---|---|--|--|
| SEE INSTRUCTIONS ON REVERSE  |   |                                      |  | through02/17/2                            | 024   | Page _                                   | 4 of 8   |
| NAME OF FILER  |   |                                      |  |   |   | I.D. NUN                                 | IBER   |
| Independent  | Committee in Support of Jonathan Hatami for Los   | Angeles Coun                         | ty DA 2024 to Protect Our C  | Children                                  |   | 146331                                   | 1  |
| 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 AN D EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME<br>OF BUSINESS) | AMOUNT<br>RECEIVED THIS<br>PERIOD         | CUMULATIVETO<br>CALENDAR Y<br>(JAN. 1 - DEC | EAR                                      | PER ELECTION<br>TO DATE<br>(IF REQUIRED)               |
| 01/21/2024   | Alexander Everest<br>Encino, CA 91316   | ⊠IND<br>□COM<br>□OTH<br>□PTY<br>□SCC | Chief Executive Officer<br>Paradigm Health<br>Management, LLC  | 1,000.00                                  | 1,  | 000.00                                   |  |
| 01/21/2024   | David Montes<br>Buena Park, CA 90621  | ⊠IND<br>□COM<br>□OTH<br>□PTY<br>□SCC | Chief Executive Officer<br>Lyon DMS, LLC   | 1,000.00                                  | 1,  | 000.00                                   |  |
|  |   | □IND<br>□COM<br>□OTH<br>□PTY<br>□SCC |  |   |   |  |  |
|  |   | □IND<br>□COM<br>□OTH<br>□PTY<br>□SCC |  |   |   |  |  |
|  |   | □IND<br>□COM<br>□OTH<br>□PTY<br>□SCC |  |   |   |  |  |
|  |   |                                      | SUBTOTAL \$  | 2,000.00                                  |   |  | 1.3 - 2 - 2  |
| <ol> <li>Amount re<br/>(Include al</li> <li>Amount re</li> <li>Total mone</li> </ol> | A Summary<br>eceived this period – itemized monetary contributions.<br>Il Schedule A subtotals.)<br>eceived this period – unitemized monetary contributions<br>etary contributions received this period.<br>s 1 and 2. Enter here and on the Summary Page, Colu | of less than \$                      | \$100 \$   |   | IND-<br>COM<br>OTH<br>PTY-                  | (other th<br>– Other (e<br>– Political P | t Committee<br>an PTY or SCC)<br>.g., business entity) |

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| Summary<br>Supportin<br>Candidate | Schedule D<br>Summary of Expenditures<br>Supporting/Opposing Other<br>Candidates, Measures and Committees<br>EE INSTRUCTIONS ON REVERSE<br>AME OF FILER<br>Independent Committee in Support of Jonathan Hatami for Los Au |   | Statement covers<br>from01/21/20<br>through02/17/20<br>Children | SCHEDULE D<br>IFORNIA 460<br>re5 of _8<br>NUMBER<br>33311 |   |    |
|-----------------------------------|---|---|---|---|---|----|
| DATE                              | NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR<br>MEASURE NUMBER OR LETTER AND JURISDICTION,<br>OR COMMITTEE   | TYPE OF PAYMENT   | DESCRIPTION<br>(IF REQUIRED)                                    | AMOUNT THIS<br>PERIOD                                     | CUMULATIVE TO DA<br>CALENDAR YEAR<br>(JAN. 1 - DEC. 31) |    |
| 01/24/2024                        | Jonathan Hatami<br>District Attorney<br>Los Angeles County<br>X Support Oppose  | Monetary     Contribution     Nonmonetary     Contribution     Independent     Expenditure     Monetary     Contribution     Nonmonetary     Contribution     Independent     Expenditure | Slate Mailer  | 48,000.00   | 48,000  | 00 |
|                                   | Support Oppose  | Monetary<br>Contribution Nonmonetary<br>Contribution Independent<br>Expenditure   |   |   |   |    |
|                                   |   |   | SUBTOTAL  | \$ 48,000.00  |   |    |

# Schedule D Summary

| 1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)         | \$<br>48,000.00 |
|--|-----------------|
| 2. Unitemized contributions and independent expenditures made this period of under \$100                                     | \$<br>0.00      |
| 3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) | \$<br>48,000.00 |

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| Schedule E   | Amounts may be rounded | Statement covers period | CALIFORNIA 460  |
|--|------------------------|-------------------------|-----------------|
| Payments Made                                      | to whole dollars.      | from01/21/2024          | FORM <b>400</b> |
| SEE INSTRUCTIONS ON REVERSE                        |                        | through02/17/2024       | Page of         |
| NAME OF FILER                                      | I.D. NUMBER            |                         |                 |
| Independent Committee in Support of Jonathan Hatam | 1463311                |                         |                 |

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

| CTB        | campaign paraphernalia/misc.<br>campaign consultants<br>contribution (explain nonmonetary)*<br>civic donations     |     | member communications<br>meetings and appearances<br>office expenses<br>petition circulating       | RFD<br>SAL | radio airtime and production costs<br>returned contributions<br>campaign workers' salaries<br>t.v. or cable airtime and production costs |
|------------|--|-----|--|------------|--|
| FIL<br>FND | candidate filing/ballot fees<br>fundraising events   |     | phone banks<br>polling and survey research   |            | candidate travel, lodging, and meals staff/spouse travel, lodging, and meals   |
| ND         | independent expenditure supporting/opposing others (explain)*<br>legal defense<br>campaign literature and mailings | POS | postage, delivery and messenger services<br>professional services (legal, accounting)<br>print ads | TSF<br>VOT | transfer between committees of the same candidate/sponsor<br>voter registration<br>information technology costs (internet, e-mail)       |

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  | CODE OR                          | DESCRIPTION OF PAYMENT A | MOUNT PAID |
|--|----------------------------------|--------------------------|------------|
| ActBlue Technical Services<br>Somerville, MA 02144                   | OFC                              |                          | 112.50     |
| ActBlue Technical Services<br>Somerville, MA 02144                   | OFC                              |                          | 120.00     |
| ActBlue Technical Services<br>Somerville, MA 02144                   | OFC                              |                          | 30.00      |
| * Payments that are contributions or independent expenditures must a | lso be summarized on Schedule D. | SUBTOTAL \$              | 262.50     |

# Schedule E Summary

| 1. Itemized payments made this period. (Include all Schedule E subtotals.) \$                                      | 41,317.80 |
|--|-----------|
| 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.) | 41,317.80 |

| Schedule E   |                               |         | SCHEDULE E (CONT.)                     |  |  |
|--|-------------------------------|---------|--|--|--|
| (Continuation Sheet)<br>Payments Made  | Amounts may be<br>to whole do |         | Statement covers period from01/21/2024 | CALIFORNIA<br>FORM 460   |  |
| SEE INSTRUCTIONS ON REVERSE  |                               |         | through 02/17/2024                     | Page of  |  |
| NAME OF FILER  |                               |         | •                                      | I.D. NUMBER  |  |
| Independent Committee in Support of Jonathan Hatami for Los Angeles County DA 2024 to Protect Our Children 1463311   |                               |         |  |  |  |
| CODES:       If one of the following codes accurately describes the payment, you may enter the code.       Otherwise, describe the payment.         CMP       campaign paraphenalia/misc.       MBR       member communications       RAD       radio airtime and production costs         CNS       campaign consultants       MTG       meetings and appearances       RFD       returned contributions         CVC       civic donations       PET       petition circulating       TEL       t.v. or cable airtime and production costs         FIL       candidate filing/ballot fees       PHO       phone banks       TRC       candidate travel, lodging, and meals         FND       fundraising events       POL       polling and survey research       TRS       staff/spouse travel, lodging, and meals         IND       independent expenditure supporting/opposing others (explain)*       POS       pofessional services (legal, accounting)       VOT       voter registration         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) |                               |         |  | n costs<br>s<br>oduction costs<br>ind meals<br>g, and meals<br>res of the same candidate/sponsor |  |
| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  |                               | CODE OR | DESCRIPTION OF PAYMENT                 | AMOUNT PAID  |  |
| Deane & Company  |                               | PRO     |  | 2,668.69   |  |

IND

OFC

OFC

OFC

Slate Mailer/Support/Jonathan Hatami/District Attorney/Los Angeles County

SUBTOTAL \$

38,000.00

165.46

176.69

44.46

41,055.30

Sacramento, CA 95815

Torrance, CA 90505

San Francisco, CA 94110

San Francisco, CA 94110

San Francisco, CA 94110

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

Stripe, Inc.

Stripe, Inc.

Stripe, Inc.

Election Digest (ID# 1345303)

| Schedule F<br>Accrued Expenses (Unpaid Bills)<br>SEE INSTRUCTIONS ON REVERSE<br>NAME OF FILER<br>Independent Committee in Support of Jonathan Hatami for<br>CODES: If one of the following codes accurately describ<br>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 supporting/opposing others (explain)*<br>LEG legal defense<br>LIT campaign literature and mailings |  | 024 to Protect Our<br>y enter the code. Ot<br>ns<br>nces<br>earch<br>messenger services | herwise, describe the<br>RAD radio airtime and<br>RFD returned contrib<br>SAL campaign worke<br>TEL t.v. or cable airtii<br>TRC candidate travel,<br>TRS staff/spouse trav<br>TSF transfer betweer<br>VOT voter registration | 024     FO       024     Page _       024     Page _       1.D. NUM     146333       e payment.     146333       d production costs     utions       ers' salaries     me and production costs       lodging, and meals     rel, lodging, and meals       rel, lodging, and meals     n committees of the same | ction costs<br>neals<br>Id meals<br>of the same candidate/sponsor |  |
|---|--|---|--|--|---|--|
| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)  | CODE OR<br>DESCRIPTION OF PAYMENT  | (a)<br>OUTSTANDING<br>BALANCE BEGINNING<br>OF THIS PERIOD                               | (b)<br>AMOUNT INCURRED<br>THIS PERIOD  | (c)<br>AMOUNT PAID<br>THIS PERIOD<br>(ALSO REPORT ON E)  | (d)<br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD          |  |
| Election Digest (ID# 1345303)<br>Torrance, CA 90505   | IND Slate Mailer/<br>Support/Jonathan<br>Hatami/District<br>Attorney/Los Angeles<br>County | 0.00  | 10,000.00  | 0.00   | 10,000.00   |  |
| * Payments that are contributions or independent expenditures must also be summarized on Schedule D.  | SUBTOTALS  | <b>\$</b> 0.00\$  | 10,000.00\$  | 0.00\$   | 10,000.00   |  |
| <ul> <li>Schedule F Summary</li> <li>1. Total accrued expenses incurred this period. (Include all S<br/>accrued expenses of \$100 or more, plus total unitemized</li> </ul>   |  |   |  | RED TOTALS \$  | 10,000.00   |  |
| 2. Total accrued expenses paid this period. (Include all Sch accrued expenses of \$100 or more, plus total unitemized   |  |   |  | PAID TOTALS \$   | 0.00  |  |
| 3. Net change this period. (Subtract Line 2 from Line 1. En<br>on the Summary Page, Column A, Line 9.)  |  |   |  | NET \$   | 10,000.00<br>y be a negative number                               |  |

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