RECEIVED

Campaign Statement Cover Page SEE INSTRUCTIONS ON REVERSE Recipient Committee Type of Recipient Committee: All committees - Complete Parts 1, 2, 3, and 4. Committee Information Officeholder, Candidate Controlled Committee
 State Candidate Election Committee
 Recall General Purpose Committee wheelook.sherry@gmail.com OPTIONAL: FAX / E-MAJL ADDRESS Protect Sierra Madre - Stop the Housing Project Sierra Madre CA 91024
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR PO. BOX STREET ADDRESS (NO P.O. BOX) COMMITTEE NAME (OR CAMDIDATE'S NAME IF NO COMMITTEE (Altro Complete Part 5) Sponsored
Small Contributor Committee
Political Party/Central Committee STATE STATE ZIP CODE ZIP CODE Primarily Formed Ballot Measure Primarily Formed Candidate/
Officeholder Committee 1446705 I.D. NUMBER Committee

Controlled

Sportsored

Also Camplets Part 6) (Also Complete Part 3) from March 26,2023 through April 22, 2023 Statement covers period AREA CODE/PHONE 626/3659733 AREA CODE/PHONE MADRE CITY CLERK'S OFFICE Presiection Statement
Semi-arrual Statement
Termhation Statement
(Also tile a Form 410 Termination)
Amandment (Explain below) 200 W. Carter Ave 436 Grove St Sherry Wheelock NAME OF TREASURER OPTIONAL: FAX / E-MAIL ADDRESS Sierra Madre MAILINGADDRESS NAME OF ASSISTANT TREASURER, IF ANY Sierra Madre MAILING ADDRESS Treasurer(s) Type of Statement: APR 2 4 2023 Sama £ STATE Ş STATE Quarterly Statement
Special Odd-Year Report 91024 ZIP CODE 91024 ZIP CODE Pago CALIFORNIA 460 213/4344728 AREA CODE/PHONE 626/3559733 AREA CODE/PHONE let to COVER PAGE

Verification

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

	Executed on	Executed on	Executed on 4/22/23	Executed on 7/27/25
FPPC Form 4b0 (Jan/Z01b)) FPPC Form 4b0 (Jan/Z01b)) FPPC Form 4b0 (Jan/Z01b) FPPC Form 4b0 (Jan/Z01b)	By Signisize of Condrolling Calcaholder, Cannodale, State Measure Propogent	By Signature of Controlling Officetodatr, Cantidate, State Meesure Proporent	By Signature of Controlling Unceholder, Daniddele, State Messaure Proported of Pasponsible Officer of Sponsor	By Human Standard of Inspirers of Assessing Agreetices

Recipient Committee Campaign Statement Cover Page — Part 2



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CITY	COMMITTEE ADDRESS		CONMITTEENAME	COMMITTEE ADDRESS	NAME OF TREASURER	COMMITTEE NAME	Related Committees not included in this statem contributions or make exp		RESIDENTIALIBUSINESS A	NAME OF OFFICEHOLDER OR CANDIDATE	Officeholder or Can
STATE ZIP CODE	STREET ADDRESS (NO P.O. BOX)	1.97	212 n 47 000 n	20	000	(.D.)	Related Committees Not included in this Statement: List any commisses not included in this assement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.		RESIDENTIALIBUSINESS ADDRESS (NO. AND STREET) CHTY	NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOLIGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF ABELICARIES)	Officeholder or Candidate Controlled Committee
AREA CODE/PHONE	DX)		AREACOGENHONE		CONTROLLED COMMITTEE?	i.D. NUMBER	Int: List any committees rimarily formed to receive		STATE ZIP		
			90					71 -		ml Z	6.
Attach	NAME OF OFFICEHOLDER OR CANDIDATE	NAME OF OFFICEHOLDER OR CANDIDATE	NAME OF OFFICEHOLDER OR CANDIDATE	MAINE OF OFFICEROCUER OR CARGINAL	Printarily Formed Candidate/Ufficeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.		OFFICE SOUGHT OR HELD	Identify the controlling officeholder, candidate, or state measure proponent, if any, NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT		NAME OF BALLOT MEASURE For a Relevendum against Ordinance No. 1481 passed by the Sierra Madre City Coundinance Inc. BALLOT NO. OR LETTER JURISDICTION	Primarily Formed Ballot Measure Committee
oontinuat	DIDATE	BTAGIO	DIDATE	3	which this			der, cand	tty of Si	No. 1481 passe	easure
Attach continuation sheets if necessary	OFFICE SOUGHT OR HELD	OFFICE SOUGHT OR HELD	OFFICE SOUGHT OR HELD	CTTICE GOOD GOT CA TELL	enoider Comr		D	date, or state me: PROPONENT	City of Sierra Madre	ssed by the Sierra Ms	Committee
saary	TORHELD	T OR HELD	T OR HELD	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	nittee List		ISTRICT NO. IF ANY	asure propor	B	idre City Cound	
	□ SUPPORT	SUPPORT OPPOSE	SUPPORT OPPOSE	SUPPORT OPPOSE	names of		AWY	ent, if any.	OPPOSE	-	

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

aion Disclo

Amounts may be rounded

www.fppc.ca.gov			
FPPC Advice: advice@fnoc.ca.eov [866/775.3772]		\$	19. Outstanding Debts
	алу).	+	
	from Lines 2, 7, and 9 (if		Cash Equivalents and Outstanding Debts
	filed for this calendar year, only carry over the amounts	1	17. LOAN GUARANTEES RECEIVED Solvedule 8, Part 2
	previous period amounts. If		If this is a termination statement, Line 16 must be zero.
	be negative figures that	\$ 16331.13	16. ENDING CASH BALANCEAdd Lines 12 + 13 + 14, then subtred Line 15
	ζ Ψ	16506.75	15. Cash Payments Column A, Lino 8 above
*Amounts in this section may be different from amounts reported in Column B.	amounts from Column B	0	14. Miscellaneous increases to Cash Schodule J. Line 4
	add amounts in Column	5299	13. Cash Receipts
	To calculate Column B	\$ 27538,68	12. Beginning Cash Baiance Previous Summery Page, Line 16
\$			Current Cash Statement
\$			O AFRATRIADI ORES MADE
	25513 F3	16928 75	
(mm/dd/yy)	422	422	Nonmonetary Adjustment
and on any interest of the section is not	0	0	9
22. Cumulative Expenditures Made* If Schiest to Volunture Syspenditure Limit	\$ 25091.63	\$ 16506.75	
	0	0	7. Loans Made Schedule H, Line 3
Candidates	\$ 25091.63	\$ 16506.75	6. Payments Made Schedute E, Line 4
Expanditure Limit Summary for State			Expenditures Made
	69	1 1	5, TOTAL CONTRIBUTIONS RECEIVED
21. Expanditures	AND PACEN	570	
Xecered v	430	422	Contractor
ons	€ 32837.88	\$ 5298	SUBTOTAL CASH CONTRIBUTIONS
1/1 through 6/30 T/I to Date	0	0	Loans Received
General Elections	\$ 32837.88	\$ 5299	1. Monetary Contributions
Running in both the state Frimary and	TOTAL TO DATE	(FROM ATTACHED SCHEOULES)	
Calendar Year Summary for Candidates	Column B	Сојити А	Contributions Received
1446705			Sherry Wheelock
I.D. NUMBER			NAME OF FILER
through April 22, 2023 Page 3 of 1.72	through A		SEE INSTRUCTIONS OM REVERSE
March 28,2023 FORM 460	from March		Ammay - ago
Statement covers period	State	to whole dellars.	Summary Page

 Total monetary contributions received this period.
 (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)..... Amount received this period – uniternized monetary contributions of less than \$100... Schedule A Summary Amount received this period – itemized monetary contributions, (include all Schedule A subtotals.) 4/20/23 4/18/23 SEE INSTRUCTIONS ON REVERSE Monetary Contributions Received Schedule A 4/18/23 4/11/23 Sherry Wheelock RECEIVED DATE Ken Huynh Howard Hays Vendy Thermos FULL NAME, STREET ADDRESS AND ZIP CODE OF (# COMMITTEE, ALSO ENTER I.D. NUMBER) CONTRIBUTOR CONTRIBUTOR
CODE * OCC PTY PTO ON O SCC COM DOTH NO SOC DALA MANON OF SOC O DSC PTY PTO COM DO COM Amounts may be rounded to whole dollars. Self-Employed RE/MAX Staff Writer LA Times President Dynaflex Products Retired IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) TOTAL \$ 5299.00 SUBTOTAL \$ 2900 \$ 429.00 4870.00 2000 8 500 8 from March 26, 2023 through April 22,2023 RECEIVED THIS Statement covers period AMOUNT PERICO FPPC Advice: advice@fppc.ca.gov (866/275-3772) 2000 2400 500 8 CUMULATIVE TO DATE CALENDAR YEAR (JAN, 1 - DEC, 31) *Contributor Codes
IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Smell Contributor Committee CALIFORNIA 460 1446705 Page 4 I.D. NUMBER FPPC Form 460 (Jan/2016)) FORM PER ELECTION (IF REQUIRED) TO DATE 1218 SCHEDULE A

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Schedule A (Continuation Sheet) Monetary Contributions Received

Schedule	Schedule A (Continuation Sheet)	Amounts may be rounded	be rounded			SCHEDULEA (CONT.)	(CONT)
Monetary	Monetary Contributions Received	to whole dollars.	ollars.	Statement covers period from March 26,2023	rs period	CALIFORNIA 4	460
				through April 22, 2023		Page 5 of Li	6
Sherry Wheelock	elock					1.D. NUMBER 1446705	
DATE	PULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEL ALSO ENTER LD. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME) OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	OATE PER ELECTION TO DATE (IF REQUIRED)	TE RED)
3/28/23	Maria Karafilis	DIND COM DPTY	Professor CalState University	350	350		
3/29/23	BethAnn Armogids	DSCC	self-employed TV comedy writer	100	100		
3/27/23	Mary Steinberg	OTH SCC	relired	100	100		
3/28/23	Darlene Beyer	D PTY	retired	150	150		
3/29/23	Raia Anand	DOCOM SCC	retired	100	100		
			SUBTOTAL \$ 800	800			

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

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Schedule A (Continuation Sheet) Monetary Contributions Received

NAME OF FILER

Amounts may be rounded to whole dollars.

through April 22 2023 from March 26,2023 Statement covers period CALIFORNIA 460 Page 6 2 - 7

LD. NUMBER

Sherry Wheelock	elock					1446705
ĐATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTER LD. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME) OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	DATE PER ELECTION (AR TO DATE (31) (IF REQUIRED)
03/29/23	Mary Hopkins	DOTH SCC	Retired	120	220	
04/06/23	Lou Losorelli	OTH SCC	Retired	300	1400	
04/05/23	Nancy Beckham	OCC PTY	Retired	100	100	
04/06/23	Clyde Staff	DSCC DOTH DOTH	Industrial Real Estate Colliere International	350	350	
04/11/23	Matthew Bryant	D COM D OTH D SCC	self-employed reattor Bryant Companies	300	2800	
			SUBTOTAL \$ 1170	1170		

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

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Schedule C Nonmonetary Contributions Received

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE through April 22, 23 from March 26, 23 Statement covers period Page 7 CALIFORNIA 460 1.0. NUMBER 212

Sherry Wheelock	86lock FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR	CONTRIBUTOR	FAN INDIVIDUAL, ENTER	DESCRIPTION OF	AMOUNTI	1446705
	(IF COMMITTEE ALSO ENTER ID. NUMBER)	6	NAME OF BUSINESS)		VALUE	(JAN 1 - DEC 31)
03/28/23	Bryant Companies	DD SCC		Employee time for mailings	300	300
03/28/23	Bryant Companies	D SCC		Paper and Toner	100	100
		OND				
		DIND DIND				
Attach ack	Attach additional information on appropriately labeled continuation sheets	continuation .	sheets.	SUBTOTAL \$ 400	400	
Schedult 1. Amount (Include	Schedule C Summary 1. Amount received this period – itemized nonmonetary contributions (Include all Schedule C subtotals)	contribution	ça	6A	400	*Contributor Codes IND – Individual COM – Recipient C
2. Amount	2. Amount received this period – unitemized nonmonetary contributions of less than \$100	ary contributi	ons of less than \$100	\$ 22	2	
3. Total noi (Add Lin	 Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page Column A. Lines 4 and 10.) 	Paca Colun	nn A lines & and 10)	TOTAL \$ 422	123	

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	Itemized payments made this period. (Include all Schedule E subtotals.) Unitemized payments made this period of under \$100	Schedule E Summary	* Payments that are contributions or independent expenditures must also be summarized on Schedule D		NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER) CODE	CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, CMP campaign paraphermaliarinise. CNS carripatign consultants CTB contribution (explain nonmonetary)* CTC civic donations FLC candidate filing/ballot fees FLC candidate filing/ballot fees FLC candidate spenditure supporting/opposing others (axplain)* POL points and survey research FLC pagal defense LEG legal defense LTC campaign literature and mailings CND points and services (legal, accounting) PRT print ads WEBR member communications ABR member communications RFD OFC office expenses SAL OFC office expenses PRT petition circulating PHO phone be nake TRS TRS TRS PRO professional services (legal, accounting) VALID VEB	NAME OF FILER Sherry Wheelock	SEE INSTRUCTIONS ON REVERSE	Schedule E Amounts may be rounded to whole dollars.
	ımn (e).)nmary Page, Column.				OR DES	enter the code. Others noss noss noss noss noss noss noss no			ā.
FPPC Advice: advice	4, Line 6.)		210		DESCRIPTION OF PAYMENT			through April 22, 2023	Statement covers period from March 26,2023
FPPC Form 460 (Jan/2016)) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov	\$ 138.44 \$ 0 TOTAL \$ 16506.75	1636B.31			AMOUNT PAID	lescribe the payment. radio airtime and production costs returned contributions campaign workers' salaries rt, or cable airtime and production costs eardidate travel, lodging, and meals staff/spouse travel, lodging, and meals retarrier between committees of the same candidate/sponsor roter registration.	1.b. NUMBER 1446705	Page 6 of 17	SCHEDULE E CALIFORNIA 460

Schedule E (Continuatio Payments M

Amounts may be rounded

ppc.ca.gov (866/275-3772) www.fppc.ca.gov	FPPC Advice: advice@fppc.ca.gov (855/275-3772) www.fppc.ca.gov			
JBTOTAL \$ 4611.40	SUBTOTAL		marized on Schedule D.	* Payments that are contributions or independent expenditures must also be summarized on Schedule D.
1136.40			POS	Bryant Companies
100		META Ads		Blue Icon Communications 12110 Slauson Ave, Suite 11 Santa Fe Springs, CA 90670
250	Fee	PDI Software Fee		Blue Icon Communications 12110 Slauson Ave, Suite 11 Santa Fe Springs CA 90670
1125			i i	Blue loon Communications 12110 Siauson Ave, Suite 11 Santa Fe Springs, CA 90670
2000			CNS	Blue Icon Communications 12110 Slauson Ave, Suite 11 Santa Fe Springs, CA 90670
AMOUNT PAID	DESCRIPTION OF PAYMENT	OR	CODE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER ID NUMBER)
costs ucition costs d meals and meals s off the same candidate/sponsor s (internet, e-mail)	describe the payment. rado airline and production relumed contributions campalign workers salarise tv. or cable airline and proc cancidate travel, lodging, an staffspouse travel, lodging, an staffspouse travel, radging, transfer between committee voter registration	/ enter the code. One o	e payment, you may enter the code R member communications G meetings and appearances C office expenses I petition circulating O phone banks D phone banks O professional services (legal, accounting) T print ads	CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, CMP campaign paraphenralia/misc. CMS campaign consultaints CTB contribution (explain nonmonetary)* CTB contribution (explain nonmonetary)* CVC oxivi cohrations CVC oxivi cohrations CVC axivi cohrations CVC axivi cohrations FEL candidate filing/balict fees FIL petition circulating FIC politing and survey research FIR print ads FIR professional services (legal, accounting) VVEB VVEB CVC Axiv cohractors FIL candidate filing/balict fees FIL petition circulating FIL politing and survey research FIR professional services (legal, accounting) VVEB VVEB CVC Axiv cohractors FIL candidate filing/balict fees FIL petition circulating FIL print ads VVII print ads VVII print ads
JBER	1.D, NUMBER 1.446705			NAME OF FILER Sherry Wheelock
or 1 2	through April 22, 2023 Page 9			SEE INSTRUCTIONS ON REVERSE
FORM 460	Statement covers period CALIFO March 26, 2023 FOR		to whole dollars.	(Continuation Sheet) Payments Made

Schedule E (Continuation Payments M.

JBTOTAL \$ 2609, 12 FPPC Form 460 (Jan/2016)] Ice@fppc.ca.gov (566/275-3772)	SUBTOTAL \$ 2609-12 FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (856/275-3772)		dule D.	* Payments that are contributions or independent expenditures must also be summarized on Schedule D.
1000	;	Full Page Ad	PRT	Grace Lorraine Publications
1000		Paid Callers	PHO	Blue Icon Communications 12110 Sieuson Ave, Sulte 11 Santa Fe Springs, CA 90870
250		P2P texting		Blue Icon Communications 12110 Stauson Ave, Suite 11 Santa Fe Springs CA 90670
140	A8 78	MaliChimp software		Blue Icon Communications 12110 Stauson Ave, Suite 11 Santa Fe Springs, CA 90670
219.12		P2P texting		Blue Icon Communications 12110 Slauson Ave, Sulte 11 Santa Fe Springs, CA 90670
AMOUNT PAID	DESCRIPTION OF PAYMENT	OR DE	CODE C	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)
costs costs uction costs d meels and meals s of the same candidate/sponsor (internet, e-mail)	describe the payment. radio airlime and production radio airlime and production returned contributions campaign workers saidnes tv, or cable airlime and prod candidate travel, lodging, an staff spouse travel, lodging, in transfer between committee vote registration information technology costs	ayment, you may enter the code. Other member communications meetings and appearances office expenses petition circulating phone banks poling and survey research postage, delivery and messenger services protessional services (agai, accounting) print ads	Du may end munications appearances ges at appearances ges at a produce and meson and and and and and and and and and an	CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, CMP campaign parapharmals/misc. CMP campaign parapharmals/misc. CNS campaign consultants CNS contribution (explain nonrionatary)* CNG whice contribution (explain nonrionatary)* CNG chiral contribution FIL candidate faing/ballot/feas FIL patien explaing/ FIL poling and survey research TRS FIL poling and survey research TRS FIL poling and survey research FIR postage, delivary and messanger services FIR processional services (egal, accounting) VOET FIL campaign (tereture and mailings) FIL campaign (tereture and mailings)
4.0. NUMBER 446705	i.d. NUMB 1446705			NAME OF FILER Sherry Wheelock
10 of 12	through April 22, 2023 Page			SEE INSTRUCTIONS ON REVERSE
FORM 460	Statement covers period CALII March 26, 2023 FC		lars.	(Continuation Sheet) to whole dollars.

Schedule E (Continuation : Payments Mad

Amounts may be rounded to whole dollars

1263.32 117 117 105 105 106@fppc.ca.gov (866/275-3772) Ide@fppc.ca.gov	ibute door hangers SUBTO FPPC Advice: advice@		Santa Fe Springs, CA 90670 Blue Icon Communications 12110 Siauson Ave, Suite 11 Santa Fe Springs, CA 90670 Blue Icon Communications 12110 Siauson Ave, Suite 11 Santa Fe Springs CA 90670 Deb Sheridan *Payments that are contributions or independent expenditures must also be summarized on Schedule D.
541.92		Mail Services	Blue Icon Communications 12110 Slauson Ave, Suite 11
AMOUNT PAID	DESCRIPTION OF PAYMENT	DE OR	NAME AND ADDRESS OF PAYEE OF COMMITTEE, ALSO ENTER LD, NUMBER) CODE
ts me candidate/sportsor e-mall)	Otherwise, describe the payment. RAD radio aritime and production costs RFD returned contributions SAL campaign workers salaries TEL tv. or cable airlims and production costs TRC candidate travel, lodging, and meats TRS staffspouse travel, lodging, and meats TSF transfer between committees of the same candidate/sponsor VCT voter registration WEB information technology costs (internet, e-mail)	ayment, you may enter the code. Commentar communications meetings and appearances office expenses patien circulating phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting) print acts	CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, CMP campaign paraphermalia/misc. CMP campaign paraphermalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CTC conic dorrations FND paraphermations ALBR member communications MTG meetings and appearances RFD coffice expanses CTC office expanses FND point banks FND phone ba
MBER 05	1.0. NUMBER 1446705	; :	Sherry Wheelock
Fago 11 of (2	from March 26, 2023 FO through April 22, 2023		Payments Made See INSTRUCTIONS ON REVERSE

Schedule E (Continuation Sheet)

Amounts may be to whole do

		be rounded dollars.
	through April 22, 2023	Statement covers period March 26, 2023
1.D. NUMBER 1446705	Page 12 of 12	CALIFORNIA 460

Payments Made	i	from_	March 26, 2023	FORM	400
SEE INSTRUCTIONS ON REVERSE		throu	through April 22, 2023	Page 12	012
NAME OF FILER Sherry Wheelock				1.D. NUMBER 1446705	
CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign parapharnelia/misc. CMS campaign consultants OFC office expenses OFC office expenses CMS campaign consultants OFC office expenses OFC office expenses CMS campaign consultants OFC office expenses OFC office expense	may ente	or the code. Otherwise, RAD, RFD SAL TEC TRC TRS accounting) VOT	describe the payment. radio altime and production costs returned contributions campaign workers' salaries ty, or cable aintime and production costs candidate travel, lodging, and meals staffispouse travel, lodging, and meals transfer between committees of the same candidate/sponsor voter registration	sts tion costs meals d meals f the same cand	ijdate/sponsor
NAME AND ADDRESS OF PAYER	CODE OR		DESCRIPTION OF PAYMENT	Ą	AMOUNT PAID
Blue Icon Communications 12110 Slauson Ave, Suite 11 Santa Fe Springs, CA 90670	PHO			1000	Ö
Blue Icon Communications 12110 Slauson Ave, Suite 11 Santa Fe Springs, CA 90870				1125	25
Blue Icon Communications 12110 Stauson Ave, Sulte 11 Santa Fe Springs CA 90670		Campaign supplies Staples		70.55	.55
Strumwasswe&Woodher LLP 1250 6th St., Suite 205 Santa Monica, CA 90401	PRO			4805	ਲ -
Matt Bryant		Payback cost of campaign workers	lign workers	120	D
Payments that are contributions or independent expenditures must also be summarized on Schedule D.	ile D.		ans	TOTAL \$ 7120.55	20.55
	And the second s		PPC Form 460 (Jan/2016)) FPPC Advice: advice@fppc.ca.gov (865/275-3772) www.fppc.ca.gov	FPPC Form e@fppc.ca.gov	FPPC Form 450 (Jan/2016)) fppc.ca.gov (866/275-3772) www.fppc.ca.gov