

**Recipient Committee
Campaign Statement
Cover Page**

Date Stamp	CALIFORNIA FORM 460 Page <u>1</u> of <u>8</u> For Official Use Only <i>indexed</i> <i>1/28/22</i> <i>HA</i>

Statement covers period from <u>JULY 1, 2021</u> through <u>DEC 31, 2021</u>	Date of election if applicable: (Month, Day, Year) <u>JUNE 7, 2022</u>
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SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- | | |
|---|--|
| <input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee
<input type="checkbox"/> State Candidate Election Committee
<input type="checkbox"/> Recall
<small>(Also Complete Part 5)</small> | <input type="checkbox"/> Primarily Formed Ballot Measure Committee
<input type="checkbox"/> Controlled
<input type="checkbox"/> Sponsored
<small>(Also Complete Part 6)</small> |
| <input type="checkbox"/> General Purpose Committee
<input type="checkbox"/> Sponsored
<input type="checkbox"/> Small Contributor Committee
<input type="checkbox"/> Political Party/Central Committee | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee
<small>(Also Complete Part 7)</small> |

2. Type of Statement:

- | | |
|---|--|
| <input type="checkbox"/> Preelection Statement | <input type="checkbox"/> Quarterly Statement |
| <input checked="" type="checkbox"/> Semi-annual Statement | <input type="checkbox"/> Special Odd-Year Report |
| <input type="checkbox"/> Termination Statement
<small>(Also file a Form 410 Termination)</small> | |
| <input type="checkbox"/> Amendment (Explain below) | |

3. Committee Information

I.D. NUMBER
1442212

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

LESTER FRIEDMAN FOR BH CITY COUNCIL (2022)

STREET ADDRESS (NO P.O. BOX)

c/o FTA EVENTS 269 S. BEVERLY DRIVE SUITE 755

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>BEVERLY HILLS</u>	<u>CA</u>	<u>90212</u>	<u>(310)956-4479</u>

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS

LJF718@GMAIL.COM

Treasurer(s)

NAME OF TREASURER

MICHAEL BARRY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>BEVERLY HILLS</u>	<u>CA</u>	<u>90212</u>	<u>[REDACTED]</u>

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

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. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on JANUARY 26, 2022
Date

Executed on JANUARY 26, 2022
Date

Executed on _____
Date

Executed on _____
Date

By [Signature]
Signature of Treasurer or Assistant Treasurer

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Recipient Committee
Campaign Statement
Cover Page — Part 2**

COVER PAGE - PART 2

CALIFORNIA
FORM **460**

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
LESTER FRIEDMAN

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
CITY COUNCIL OF BEVERLY HILLS

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
269 S. BEVERLY DRIVE STE 755 BEVERLY HILLS CA 90212

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

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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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	DISTRICT NO. IF ANY
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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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

Attach continuation sheets if necessary

**Campaign Disclosure Statement
Summary Page**

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>JULY 1, 2021</u> through <u>DEC 31, 2021</u>	CALIFORNIA FORM 460
	Page <u>3</u> of <u>8</u>
	I.D. NUMBER 1442212

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LESTER FRIEDMAN FOR BH CITY COUNCIL (2022)

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions..... Schedule A, Line 3	\$ <u>14,405</u>	\$ <u>14,405</u>
2. Loans Received..... Schedule B, Line 3	\$ <u>10,000</u>	\$ <u>10,000</u>
3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1 + 2	\$ <u>24,405</u>	\$ <u>24,405</u>
4. Nonmonetary Contributions..... Schedule C, Line 3	\$ <u>0</u>	\$ <u>0</u>
5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4	\$ <u>24,405</u>	\$ <u>24,405</u>

**Calendar Year Summary for Candidates
Running in Both the State Primary and
General Elections**

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$ _____	\$ <u>14,405</u>
21. Expenditures Made	\$ _____	\$ <u>3,846</u>

Expenditures Made

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made..... Schedule E, Line 4	\$ <u>3,846</u>	\$ <u>3,846</u>
7. Loans Made..... Schedule H, Line 3	\$ <u>0</u>	\$ <u>0</u>
8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7	\$ <u>3,846</u>	\$ <u>3,846</u>
9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3	\$ <u>0</u>	\$ <u>0</u>
10. Nonmonetary Adjustment..... Schedule C, Line 3	\$ <u>0</u>	\$ <u>0</u>
11. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10	\$ <u>3,846</u>	\$ <u>3,846</u>

**Expenditure Limit Summary for State
Candidates**

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)	
Date of Election (mm/dd/yy)	Total to Date
/ /	\$ _____
/ /	\$ _____

Current Cash Statement

12. Beginning Cash Balance..... Previous Summary Page, Line 16	\$ <u>0</u>
13. Cash Receipts..... Column A, Line 3 above	\$ <u>24,405</u>
14. Miscellaneous Increases to Cash..... Schedule I, Line 4	\$ _____
15. Cash Payments..... Column A, Line 8 above	\$ <u>3,846</u>
16. ENDING CASH BALANCE..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>20,559</u>

If this is a termination statement, Line 16 must be zero.

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be 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).

*Amounts in this section may be different from amounts reported in Column B.

17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2 \$ _____

Cash Equivalents and Outstanding Debts

18. Cash Equivalents..... See instructions on reverse	\$ <u>20,559</u>
19. Outstanding Debts..... Add Line 2 + Line 9 in Column B above	\$ <u>10,000</u>

Schedule A
Monetary Contributions Received

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

Statement covers period from July 1, 2021 through December 31, 2021	CALIFORNIA FORM 460 Page 4 of 8
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SEE INSTRUCTIONS ON REVERSE

Lester Friedman For BH City Council (2022)

I.D. NUMBER 1442212

DATE RECEIVED	FULL NAME, STREET ADDRESS & ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)					CONTRIB. CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ETNER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	First Name	Last Name	Street	City	Zip		Occupation	Employer (if Applic.)		
12/10/2021	Hon. Alissa	Roston		Beverly Hills	90212	IND	Retired		200	\$200.00
12/10/2021	Mr. and Mrs. Michael	Barry		Beverly Hills	90212	IND	Retired		250	\$250.00
12/10/2021	Mr. Thomas	Blumenthal		Beverly Hills	90210	IND	Retailer	Geary's	450	\$450.00
12/10/2021	Mr. and Mrs. Maynard	Brittan		Beverly Hills	90210	IND	Property Manager	Roxbury Management Co.	450	\$450.00
12/10/2021	Mr. Bernardo	DeLa Torre	7640Greenleaf Ave.	Whittier	90802	IND	Attorney	Law Office of B. De La Torre	100	\$100.00
12/10/2021	Cheryl Wallach and Scott	Ford		Los Angeles	90034	IND	Attorney	Ford & Wallach	450	\$450.00
12/10/2021	Dr. and Mrs. Simon	Gamer		Beverly Hills	90210	IND	Dentist	Self	200	\$200.00
12/10/2021	Mrs. Donna Ellman	Garber		Beverly Hills	90211	IND	Retired		100	\$100.00
12/10/2021	Bernard	Katzman		Huntington Beach	92846	IND	Retired		100	\$100.00
12/10/2021	Mr. and Mrs. Stephen	Kravitz		Beverly Hills	90211	IND	Nurse/Businessman		100	\$100.00
12/10/2021	Miles	Lee		Beverly Hills	90211	IND	Retired		450	\$450.00
12/10/2021	Jeffrey S.	Levine		Beverly Hills	90211	IND	Real Estate Management	Levine Management Group, Inc.	100	\$100.00
12/10/2021	Mr. Michael	Libow		Beverly Hills	90210	IND	Realtor	Compass Realty	380	\$380.00
12/10/2021	Mr. Gary	Mandinach		Los Angeles	90046	IND	Retired		250	\$250.00
12/10/2021	Jeanne and Dr. Leonard	Marks		Beverly Hills	90210	IND	Retired and Physician	UCLA	900	\$900.00
12/10/2021	Ms. Kathy	Melamed		Beverly Hills	90210	IND	Retired		450	\$450.00
12/10/2021	Ms. Michelle	Melamed		Beverly Hills	90210	IND	Designer	Self	450	\$450.00
12/10/2021	Dr. Ruben	Melamed		Beverly Hills	90210	IND	Retired		450	\$450.00
12/10/2021	Mr. Adam	Nathanson	9952 S. Santa Monica	Beverly Hills	90212	IND	Executive		450	\$450.00
12/10/2021	Miriam and Jack	Pitson		Beverly Hills	90211	IND	Self Employed	Aero Shade Co.	200	\$200.00
12/13/2021	Jay Roth and Shery	Grant		Los Angeles	90004	IND	Attorney	GEKLAW	500	\$500.00
12/16/2021	Elliot	Berkowitz		Beverly Hills	90210	IND	Attorney	Self	450	\$450.00
12/16/2021	Hon. Steven	Fenton		Los Angeles	90048	IND	Executive	Leeza Gibbons Foundation	250	\$250.00
12/16/2021	Dr. and Mrs. Ilan	Tamir		Beverly Hills	90211	IND	Physician	Self	100	\$100.00
12/18/2021	Bernard	Baltaxe		Oakland	94609	IND	Lawyer	Self	100	\$100.00

Schedule A
 Monetary Contributions Received

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

Statement covers period from <u>July 1, 2021</u> through <u>December 31, 2021</u>	CALIFORNIA FORM 460 Page <u>5</u> of <u>8</u>
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SEE INSTRUCTIONS ON REVERSE

Lester Friedman For BH City Council (2022)

I.D. NUMBER 144212

DATE RECEIVED	FULL NAME, STREET ADDRESS & ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)					CONTRIB. CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ETNER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	First Name	Last Name	Street	City	Zip		Occupation	Employer (if Applic.)		
12/18/2021	Russell	Glauber	350 W. Arden Ave. Suite 100	Glendale	91203	IND	Lawyer	Glauber/Berenson LLP	250	\$250.00
12/18/2021	Mr. Steven	Gordon	[REDACTED]	Beverly Hills	90212	IND	Real Estate Investor	Domino Realty	450	\$450.00
12/18/2021	Alan	Kreida	[REDACTED]	Long Beach	90808	IND	Attorney	Glow and Kreida	100	\$100.00
12/18/2021	Mr. and Mrs. Larry	Stern	[REDACTED]	Beverly Hills	90212	IND	Attorney	Mallery & Stern	900	\$900.00
12/26/2021	Michele and Hon. Dr. Julian	Gold	[REDACTED]	Beverly Hills	90210	IND	Educator/Retired	USC	900	\$900.00
12/26/2021	Terry and Bruce	Hatkoff	[REDACTED]	Northridge	91325	IND	Attorney/Professor CSUN		150	\$150.00
12/26/2021	Rebecca and Chris	Huebner	[REDACTED]	Long Beach	90808	IND	Physical Therapist/Educator	Self/UCLB	900	\$900.00
12/26/2021	Mr. and Mrs. Macolm	Orland	[REDACTED]	Beverly Hills	90211	IND	Retired		100	\$100.00
12/26/2021	Ms. Jean	Rosenblatt	[REDACTED]	Beverly Hills	90212	IND	Retired		450	\$450.00
12/26/2021	Mr. Howard	Rosoff	[REDACTED]	Beverly Hills	90210	IND	Retired		150	\$150.00
12/26/2021	Rosalie	Rubbaum	[REDACTED]	Beverly Hills	90210	IND	Retired		200	\$200.00
12/26/2021	Dr. and Mrs. James	Sherman	[REDACTED]	Beverly Hills	90210	IND	Physician	Self	250	\$250.00
12/26/2021	Robert	Sherwin	20750 Ventura Blvd. #400	Woodland Hills	91364	IND	Attorney	Lewis, Marenstein, Wicke, Sherwin & Lee LLP	450	\$450.00
12/26/2021	Antonio Villalobos, Phd. and Diane	Weiss, MD	435 N. Bedford Dr.	Beverly Hills	90210	IND	Psychiatrist	Self Employed	450	\$450.00
12/26/2021	Rosalya	Zisman	[REDACTED]	Beverly Hills	90210	IND	Retired		100	\$100.00
12/27/2021	Hauri and Jerry	Illoulian	[REDACTED]	Beverly Hills	90210	IND	Homemaker/Property Mgmt		500	\$500.00

Schedule A
 Monetary Contributions Received

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

Statement covers period from <u>July 1, 2021</u> through December 31, <u>2021</u>	CALIFORNIA FORM 460 Page <u>6</u> of <u>8</u>
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SEE INSTRUCTIONS ON REVERSE

Lester Friedman For BH City Council (2022)

I.D. NUMBER 1442212

DATE RECEIVED	FULL NAME, STREET ADDRESS & ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIB. CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ETNER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
First Name	Last Name	Street	City	Zip	Occupation	Employer (if Applic.)
SUBTOTALS					\$14,180.00	\$0.00

SCHEDULE A SUMMARY

1. Amount received this period - itemized monetary contributions. (Include all Schedule A subtotals.).....	\$14,180.00
2. Amount received this period - unitemized monetary contributions of less than \$100.....	\$225.03
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.).....	\$14,405.03

* Contributor Codes
IND - Individual
COM - Recipient Committee
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

**Schedule B – Part 1
Loans Received**

Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 1

Statement covers period from <u>JULY 1, 2021</u> through <u>DEC 31, 2021</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LESTER FRIEDMAN FOR BH CITY COUNCIL (2022)

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Lester Friedman c/o/ FTA Events & Marketing 269 S. Beverly Drive. Ste. 755 Beverly Hills, CA 90212		\$ 0	\$ 10,000	<input type="checkbox"/> PAID \$ 0 <input type="checkbox"/> FORGIVEN \$ 0	\$ 10,000 Demand DATE DUE	0 % RATE \$ 0	\$ 500 9/17/21 DATE INCURRED	\$ 10,000 PER ELECTION** \$ 10,000
<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								CALENDAR YEAR \$ PER ELECTION** \$
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								CALENDAR YEAR \$ PER ELECTION** \$
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								CALENDAR YEAR \$ PER ELECTION** \$
SUBTOTALS		\$	\$ 10,000	\$ 0	\$ 10,000	\$ 0		

Schedule B Summary

(Enter (e) on
Schedule E, Line 3)

- Loans received this period \$ 10,000
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period \$ 0
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (Subtract Line 2 from Line 1.) NET \$ 10,000
Enter the net here and on the Summary Page, Column A, Line 2. (May be a negative number)

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

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.

Schedule E
Payments Made

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

Statement covers period from July 1, 2021	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

Lester Friedman For BH City Council (2022)

I.D. NUMBER
1442212

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MSR 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 circulation | TEL tv 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 postage, delivery and messenger services | TSF transfer between committees 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) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION	AMOUNT PAID
Budget Printing & Copy 1718 Westwood Blvd., Los Angeles, CA 90024	LIT	Remit & Envelopes	\$597
Bullseye Marketing, Inc. 9400 Oso Avenue, Chatsworth, CA 91311	LIT	1st Mailing	\$2,733
Budget Printing & Copy 1718 Westwood Blvd., Los Angeles, CA 90024	LIT	Stationary	\$356

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL** \$3,685

SCHEDULE E SUMMARY

1. Itemized payments made this period. (Include all Schedule E Subtotals).....	\$3,685
2. Unitemized payments made this period of under \$100.....	\$160
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e)).....	\$0
4. Total payments made this period. (add Lines 1,2,3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$3,846