Recipient Committee Campaign Statement

COVERP

SEE INSTRUCTIONS ON REVERSE (Government Code Sections 84200-84216.5) Cover Page Committee Information × YTIS STREET ADDRESS (NO P.O. BOX) Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Alex Monteiro for City Council 2018 General Purpose Committee Officeholder, Candidate Controlled Committee Political Party/Central Committee Small Contributor Committee Sponsored (Also Complete Part 5) State Candidate Election Committee STATE STATE ZIP CODE ZIP CODE I.D. NUMBER Primarily Formed Candidate/ Primarily Formed Ballot Measure Officeholder Committee (Also Complete Part 7) (Also Complete Part 6) Sponsored Controlled Committee from through Statement covers period AREA CODE/PHONE AREA CODE/PHONE 06/30/2020 01/01/2020 Date of election if applicable: (Month, Day, Year) 12 CITY MAILING ADDRESS NAME OF ASSISTANT TREASURER, IF ANY MAILING ADDRESS NAME OF TREASURER Treasurer(s) Yolanda Miranda Demann Crawford Type of Statement: Amendment (Explain below) Semi-annual Statement Preelection Statement Termination Statement (Also file a Form 410 Termination) THE ATT Ouarterly Statement

CITY Special Odd-Year Report

DEPAR Supplemental Preelection Date Stamp STATE STATE T ZIP CODE ZIP CODE Statement - Attach Form 495 C+ + Page CALIFORNIA FORM For Official Use Only AREA CODE/PHO AREA CODE/PHO 약 o

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Verification

OPTIONAL: FAX / E-MAIL ADDRESS

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained berein 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 complete.

OPTIONAL: FAX / E-MAIL ADDRESS

BySignature of Controlling Officeholder, Candidate, State Measure Proponent	Executed on
BySignature of Controlling Officeholder, Candidate, State Measure Proponent	Executed on
Signature of Controlling Cincentider, Candidate, State Measure Proparent of Responsible Officer of Sponsor	Date
	Executed on07/16/2020
	Date
	Executed on 07/16/2020

FPPC Advice: advice@fppc.ca.gov (866/275n 460 (Jan/:

Recipient Committee Campaign Statement Cover Page — Part 2

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	eets if necessary	Attach continuation sheets if necessary	Attaç	ODE AREA CODE/PHONE	STATE ZIP CODE	CITY
SUPPORT OPPOSE	OFFICE SOUGHT OR HELD		NAME OF OFFICEHOLDER OR CANDIDATE	CONTROLLED COMMITTEE? TES NO OX)	STREET ADDRESS (NO P.O. BOX)	NAME OF TREASURER COMMITTEE ADDRESS
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SUPPORT OPPOSE	OFFICE SOUGHT OR HELD		NAME OF OFFICEHOLDER OR CANDIDATE	ODE AREA CODE/PHONE	STATE ZIP CODE	CULX
SUPPORT OPPOSE	OFFICE SOUGHT OR HELD		NAME OF OFFICEHOLDER OR CANDIDATE		STREET ADDRESS (NO P.O. BOX)	COMMITTEE ADDRESS
t names of	r Formed Candidate/Officeholder Committee List names of r(s) or candidate(s) for which this committee is primarily formed.	idate/Officehol	7. Primarily Formed Cand officeholder(s) or candidate(s)	CONTROLLED COMMITTEE?		NAME OF TREASURER
				I.D. NUMBER		COMMITTEE NAME
ANY	DISTRICT NO. IF ANY		OFFICE SOUGHT OR HELD	atement: List any committees or are primarily formed to receive ndidacy.	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.	Related Committee not included in this state contributions or make e
roponent, if a	te, or state measure pr	iceholder, candida DIDATE, OR PROPON	Identify the controlling officeholder, candidate, or state measure proponent, if an NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT	CITY STATE ZIP	(NO. AND STREET)	RESIDENTIAL/BUSINESS ADDRESS
SUPPORT		JURISDICTION	BALLOT NO. OR LETTER	OT NUMBER IF APPLICABLE)	Alexandre T. Monteiro OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) City Council Member City of Hawthorne	Alexandre T. Monteiro OFFICE SOUGHT OR HELD (N City Council Member C
	ımittee	Formed Ballot Measure Committee	6. Primarily Formed Ballo	littee	Officeholder or Candidate Controlled Committee	5. Officeholder or Candidate Con

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

Statement covers period

from _

01/01/2020

SUMMARY F CALIFORNIA 46

FPPC Form 460 (Jan			
		\$ 8,000.00	19. Outstanding Debts Add Line 2 + Line 9 in Column B above
	from Lines 2, 7, and 9 (if any).	\$ 0.00	Cash Equivalents and Outstanding Debts 18. Cash Equivalents See instructions on reverse
	the list report being filed for this calendar year, only carry over the amounts	\$ 0.00	17. LOAN GUARANTEES RECEIVED Schedule B, Part 2
	period amounts. If this is		If this is a termination statement, Line 16 must be zero.
	figures that should be	\$ 6,078.49	16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15
	report. Some amounts in	500.00	15. Cash Payments Column A, Line 8 above
*Amounts in this section may be different from amounts reported in Column R	from Column B of your last	0.00	14. Miscellaneous Increases to Cash Schedule I, Line 4
	amounts in Column A to the	0.00	13. Cash Receipts Column A, Line 3 above
\$	To calculate Column B. add	\$ 6,578.49	12. Beginning Cash Balance Previous Summery Page, Line 16
e e			Current Cash Statement
	\$ 2,500.00	\$ 500_00	11. TOTAL EXPENDITURES MADEAdd Lines 8+9+10
(mm/dd/yy)	0.00	0.00	10. Nonmonetary Adjustment Schedule C, Line 3
Date of Election Total to Date	2,000.00	0.00	9. Accrued Expenses (Unpaid Bills)schedule F. Line 3
(#Subject to Voluntary Expenditure Limit)	\$ 500.00	\$ 500.00	8. SUBTOTAL CASH PAYMENTS Add Lines 6+7
33)	0.00	0.00	7. Loans Made Schedule H, Line 3
Candidates	\$ 500.00	\$ 500.00	6. Payments Made Schedule E, Line 4
Expenditure Limit Summary for State			Expenditures Made
Made \$ \$	\$ 6,000.00	\$ 0.00	5. TOTAL CONTRIBUTIONS RECEIVED
res	0,00	0.00	4. Nonmonetary Contributions Schedule C, Line 3
20. Contributions	\$ 6,000.00	0.00	3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1+2
1/1 through 6/30 7/1 to Date	6,000.00	0,00	
General Elections	9.00	0.00	1. Monetary Contributions Schedule A. Line 3
Calendar Year Summary for Candidates Running in Both the State Primary and	Column B CALENDARYEAR TOTALTODATE	Column A TOTAL THIS PERIOD (FROMATTACHED SCHEDULES)	Contributions Received
1407880			Alex Monteiro for City Council 2018
1.D. NUMBER			NAME OF FILER
06/30/2020 Page 3 of 6	through .		SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

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01/01/2020

Statement covers period CALIFORNIA 46 SCHEDULEB-PAI

Small Contributor Committe	SCC – Small Contrib	_	0.00 (May be a negative number)	NET \$	6 b b c c c c c c c c c c c c c c c c c		2 from Line 1.)y Page, Column A, Line 2.	3. Net change this period. (Subtract Line 2 from Line 1.)
(other than PTY or SCC) Other (e.g., business enti-	(other than PTY or SCC) OTH - Other (e.g., business enti PTY - Political Party	·				dule A.)) paid or forgiven.) are also itemized on Scheu	
mmittee	IND - Individual COM - Recipient Committee		0.00	€9 	# C + T T C C C D T T C A A A A A A A A A A A A A A A A A	**************************************	化银铁矿 计记录记录 电光电子电流 医电压性 医电压性 医电压性 医乳蛋白素 医甲基氏菌素 医甲基氏菌素 医甲基氏菌素 医甲基氏菌素 医甲基氏性 化二甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基	2. Loans paid or forgiven this period
	†Contributor Codes	ट्टी		,			s of less than \$100.)	
			0.00	С	***************************************	\$P\$中央中央学术学学学学学学会 10 10 10 10 10 10 10 10 10 10 10 10 10		1 Loans received this period
		(Enter (e) on Schedule E, Line 3)						Schedule B Summary
		\$ 0.00	6,000.00	\$ 0.00\$	0.00\$	SUBTOTALS \$		
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\$ 62018 5,00	08/06/2018 DATE INCURRED	\$0_00	01/01/0001 DATEDUE	\$0.00	\$0.00	\$ 6,000.00		COS ☐ ALO ☐ WOO ☐ GNF ☑ 4
\$ 0.	s 6,000.00	0.00 % RATE	\$ 6,000.00	\$ 0.00	ph-side side side side side side side side		Improvement Inc.	
CALENDARY				PAID				Alexander T. Monteiro
(g) CUMULATT CONTRIBUTI TO DATE	ORIGINAL AMOUNT OF LOAN	(e) INTEREST PAID THIS PERIOD	OUTSTANDING BALANCEAT CLOSE OF THIS PERIOD	(e) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(b) AMOUNT RECEIVED THIS PERIOD	OUTSTANDING BALANCE BEGINNING THIS PERIOD	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELFEMPLOYED, ENTER NAME OF BUSINESS)	FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTERLD, NUMBER)
	1407880							Alex Monteiro for City Council 2018
	LD. NUMBER				•			NAME OF FILER
of 6	Page4	06/30/2020	through 06/30	rt:			,	SEE INSTRUCTIONS ON REVERSE

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

Schedule E Payments Made

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

from	Stateme
01/01/2020	Statement covers period
FORM	CALIFORNIA / C
	01/01/2020

NAME OF FILER Alex Monteiro for City Council 2018

CODES: If one of the following codes accurately describes the payment, you may enter the coo

5	P F	3	7	尹	၇ ဂ	CIB	S	Q	
campaign literature and mailings	legal defense	independent expenditure supporting/opposing others (explain)*	fundraising events	candidate filing/ballot fees	civic donations	contribution (explain nonmonetary)*	campaign consultants	campaign paraphemalia/misc.	
3	3	g	ğ	잗	西	G G	MG	MBR	
print ads	professional services (legal, accounting)	postage, delivery and messenger services	polling and survey research	phone banks	petition circulating	office expenses	meetings and appearances	member communications	
SE SE	ş	젉	T S	쿥	百	SAL	뀸	RAB	
information technology costs (internet, e-mail)	voter registration	transfer between committees of the same candidate/sp	staff/spouse travel, lodging, and meals	candidate travel, lodging, and meals	t.v. or cable airtime and production costs	campaign workers' salaries	returned contributions	radio airtime and production costs	

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bution (explain nonmonetary)*	유	office expenses	SAL	campaign workers' salaries
donations	円	petition circulating	ಠ	t.v. or cable airtime and production costs
idate filing/ballot fees	모	phone banks	둱	candidate travel, lodging, and meals
aising events	g	polling and survey research	됬	staff/spouse travel, lodging, and meals
pendent expenditure supporting/opposing others (explain)*	g		젉	transfer between committees of the same candidate/spo
defense	3	professional services (legal, accounting)	ð	voter registration
paign literature and mailings	궠	print ads	WIIB	information technology costs (internet, e-mail)

		1407880
de. Otherwise, d	de. Otherwise, describe the payment.	
RAD	radio airtime and production costs	osts
250	returned contributions	
SAL	campaign workers' salaries	
固	t.v. or cable airtime and production costs	ction costs
萔	candidate travel, lodging, and meals	meals
TRS.	staff/spouse travel, lodging, and meals	nd meals
rvices TSF	transfer between committees of the same candidate.	of the same candidate.
ing) VOT	voter registration	
	Section to the state of the sta	Tinking in the state of the sta

45	edule D. SUBTOTAL\$	arized on Sche	* Payments that are contributions or independent expenditures must also be summarized on Schedule
30		PRO	Yolanda Wiranda & Associates
15		Owa	Netfile
AMOUNT PAIL	DESCRIPTION OF PAYMENT	CODE OR	NAME AND ADDRESS OF PAYEE (IF COMMITTEE ALSO ENTER LD. NUMBER)

Schedule E Summary

- 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)......(e).) 2. Uniternized payments made this period of under \$100 1. Itemized payments made this period. (Include all Schedule E subtotals.)...... ↔ 69 450.0 50.0 0.0
- 500.Q

Accrued Expenses (Unpaid Bills) Schedule F

Amounts may be rounded to whole dollars.

from. Statement covers period 01/01/2020

CALIFORNIA FORM

through_ 06/30/2020

I.D. NUMBER 1407880 Page 5 of 6

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and * Payments that are contributions or independent expenditures must also be summarized on Schedule D. Schedule F Summary 무원물리 8 3 8 8 8 ξ SEE INSTRUCTIONS ON REVERSE NAME OF FILER Alex<u>ander T. Mont</u> Alex Monteiro for City Council 2018 CODES: If one of the following codes accurately describes the Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) civic donations contribution (explain nonmonetary)* campaign paraphemalia/misc. campaign literature and mailings independent expenditure supporting/opposing others (explain)* candidate filing/ballot fees campaign consultants legal defense fundraising events NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER) FIL B B B 몽피워 គ្គ VBR BR DESCRIPTION OF PAYMENT office expenses payment, you may enter the code. Otherwise, describe the payment. print ads postage, delivery and messenger services meetings and appearances member communications professional services (legal, accounting) phone banks polling and survey research petition circulating CODEOR SUBTOTALS (a)
OUTSTANDING
BALANCE BEGINNING OF THIS PERIOD 2,000.00\$ 2,000.00 (b)
AMOUNT INCURRED
THIS PERIOD 닦 돐 뒩 山PAID TOTALS \$ transfer between committees of the same candidate/spons staff/spouse travel, lodging, and meals radio airtime and production costs voter registration candidate travel, lodging, and meals tv. or cable airtime and production costs campaign workers' salaries information technology costs (internet, e-mail) returned contributions 0.00\$ (c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E) 0.00\$ 0,00 May be a negative number OUTSTANDING
BALANCE AT CLOS
OF THIS PERIOD 3 2,000 0.00 0.00 2,000

- 1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-37 FPPC Form 460 (Jan/20: