D 1 1 4 0 1/4					COVER PAGE
Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)			Date Stamp		FORNIA 460
	Statement covers period from	Date of election if applicable: (Month, Day, Year)	RECEIVE 2023 JAN 31 D	Page _	1 of 15 or Official Use Only
SEE INSTRUCTIONS ON REVERSE	through12/31/2022		JAN 31 D		
 State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee 	rimarily Formed Ballot Measure committee) Controlled) Sponsored (so Complete Part 6) rimarily Formed Candidate/ fficeholder Committee (so Complete Part 7)	2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 T Amendment (Explain b	termination)	Quarterly State Special Odd-Yo Supplemental I Statement - Att	ement ear Report Preelection tach Form 495
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Mayor Alex Vargas 2024 STREET ADDRESS (NO P.O. BOX)	. NUMBER .375353	Treasurer(s) NAME OF TREASURER Yolanda Miranda MAILING ADDRESS CITY Covina	STATE CA	ZIP CODE 91722	AREA CODE/PHONE
Hawthorne CA 9025 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO	0	NAME OF ASSISTANT TREASU	RER, IF ANT		
CITY STATE ZIP COMMENTED CA 90250 OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADD	STATE	ZIP CODE	AREA CODE/PHONE
4. 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 01/20/2023 Date Executed on 01/20/2023 Date Executed on Date		Signature of Controlling Officeholder, Candidate, S	State Measure Proponent	lules is true	and complete. I certify
Executed on	Ву	Signature of Controlling Officeholder, Candidate, S	State Measure Proponent		DDO F 400 / I /0040

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2							
CALIF FC	ORNIA ORM	4	160				
Page	2	of	15				

Officeholder or Candidate Controlled Com	mittee		6.	Primarily Formed Ballo	t Measure	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE				NAME OF BALLOT MEASURE				
Alejandro Vargas								
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIST	RICT NUMBER IF APPLICAE	BLE)		BALLOT NO. OR LETTER	JURISDICTIO	N	,	SUPPORT
Mayor City of Hawthorne							_	OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE	ZIP		Identify the controlling office	ceholder, car	ididate, or state	measure pi	roponent, if any.
	Hawthorne CA	90250		NAME OF OFFICEHOLDER, CANE	DIDATE, OR PR	OPONENT		
Related Committees Not Included in this S not included in this statement that are controlled by yo contributions or make expenditures on behalf of your of	u or are primarily formed			OFFICE SOUGHT OR HELD		DIS	TRICT NO. IF	ANY
COMMITTEE NAME	I.D. NUMBER	***************************************						4 1000
NAME OF TREASURER	CONTROLLED COMMIT		7.	Primarily Formed Cand officeholder(s) or candidate(s)				
COMMITTEE ADDRESS STREET ADDRESS (NO P.O	. BOX)			NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
CITY STATE ZIF	CODE AREA CO	DE/PHONE		NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER			NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMIT			NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O CITY STATE ZIF	,	DE/PHONE		Attac	h continuatio	on sheets if nece	escari/	<u> </u>
				Allaci	Commutatio	ni sheets li Nece	səsai y	

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

Mayor Alex Vargas 2024

NAME OF FILER

Amounts may be rounded to whole dollars.

Column B

CALENDAR YEAR

TOTALTODATE

any).

17,050.00

17,050.00

17,050.00

0.00

Statement covers period **CALIFORNIA FORM** 07/01/2022

Calendar Year Summary for Candidates

Running in Both the State Primary and

Expenditure Limit Summary for State

1/1 through 6/30

Page ___3 ___ of ___15___ 12/31/2022 through _

General Elections

20. Contributions

21. Expenditures Made

Candidates

Received

LD. NUMBER

SUMMARY PAGE

7/1 to Date

Total to Date

1375353

Column A **Contributions Received** TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) 1. Monetary Contributions Schedule A, Line 3 \$ _____ 2. Loans Received Schedule B, Line 3 4. Nonmonetary Contributions Schedule C, Line 3 **Expenditures Made** 7. Loans Made Schedule H. Line 3 10. Nonmonetary Adjustment Schedule C, Line 3 **Current Cash Statement** 17,050.00 13. Cash Receipts Column A, Line 3 above 0.00 14. Miscellaneous Increases to Cash Schedule I, Line 4 15,711.62 8,068.84 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ If this is a termination statement, Line 16 must be zero. 17. LOAN GUARANTEES RECEIVED Schedule B. Part 2 \$ Cash Equivalents and Outstanding Debts 18. Cash Equivalents See instructions on reverse \$

22. Cumulative Expenditures Made* \$ ___ 25,004.14 (If Subject to Voluntary Expenditure Limit) Date of Election (mm/dd/yy) 0.00 25,004.14 To calculate Column B. add amounts in Column A to the corresponding amounts *Amounts in this section may be different from amounts from Column B of your last reported in Column B. 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

FPPC Form 460 (Jan/2016)

FPPC Advice: advice@fpnc.ca.gov (866/275-3772)

Schedule Monetary	A Contributions Received		s may be rounded whole dollars.	Statement cov	ers period	SCHEDULE A		
,		10	whole dollars.	from07/01/2		FORI		
SEE INSTRUCTION	ONS ON REVERSE			through12/31/2	022	Page	4 of15	
NAME OF FILER					I	I.D. NUMBE	ER	
Mayor Alex	Vargas 2024					1375353		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEAI (JAN. 1 - DEC. 31	R	PER ELECTION TO DATE (IF REQUIRED)	
12/01/2022	Associated Soils Engineering, Inc. Signal Hill, CA 90755	□IND □COM ☑OTH □PTY □SCC		1,500.00	1,500	0.00		
09/15/2022	CHC Property Management Redondo Beach, CA 90277	□IND □COM ☑OTH □PTY □SCC		2,000.00	4,550	0.00		
09/29/2022	CHC Property Management Redondo Beach, CA 90277	□IND □COM ☑OTH □PTY □SCC		1,500.00	4,550	0.00		
12/02/2022	CHC Property Management Redondo Beach, CA 90277	□IND □COM 図OTH □PTY □SCC		1,050.00	4,550	0.00		
11/06/2022	DRC Engineering, Inc. Anaheim, CA 92808	□IND □COM ⊠OTH □PTY □SCC		2,500.00	2,500	0.00		
			SUBTOTAL \$	8,550.00				
1. Amount re	A Summary eceived this period – itemized monetary contributions. Il Schedule A subtotals.)		\$	17,050.00	IND-In COM-F	Recipient C	es Committee n PTY or SCC)	
	eceived this period – unitemized monetary contributions etary contributions received this period.	of less than \$	\$100\$	0.00	OTH = 0 PTY = P	Other (e.g Political Pa	., business entity)	

FPPC Form 460 (Jan/2016)

17,050.00

Schedule A (Continuation Sheet) Monetary Contributions Received Amounts may be rounded to whole dollars. Statement covers period from 07/01/2022 CALIFORNIA 460 through 12/31/2022 Page 5 of 15

NAME OF FILER					I.	D. NUMBER
Mayor Alex Va	argas 2024				1	375353
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEA (JAN. 1 - DEC. 3	R TO DATE
12/02/2022	Fine Line Auto Body Hawthorne, CA 90250	□IND □COM 図OTH □PTY □SCC		250.00	250	.00
12/05/2022	Michael D. Hotaling San Diego, CA 92128	⊠IND □COM □OTH □PTY □SCC	Executive Vice President C&S Companies	500.00	500	.00
12/02/2022	Hotel CHC Inc. dab Holiday Inn Express Hawthorne, CA 90250	□IND □COM ☑OTH □PTY □SCC		950.00	950	.00
11/17/2022	Gregory Kyle Los Angeles, CA 90017	⊠IND □COM □OTH □PTY □SCC	Planning and Design Engineering Consultant Kimley - Horn and Associates, Inc.	500.00	500	.00
11/07/2022	LE03- Awin Management, Inc. Pheonix, AR 85054	☐IND ☐COM 図OTH ☐PTY ☐SCC		1,500.00	1,500	.00
			SUBTOTAL\$	3,700.00		

*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

	A (Continuation Sheet) Contributions Received	Amounts may to whole o		Statement cove	2022		SCHEDULE A (CONT. FORNIA 460 DRM
				through 12/31/	2022		6 of 15
NAME OF FILER Mayor Alex V	argas 2024					1.D. NUN	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
09/06/2022	Tina Mckinnor Hawthorne, CA 90250	⊠IND □COM □OTH □PTY □SCC	N/A N/A	100.00	1	00.00	
09/29/2022	Hamid Pournamdari Inglewood, CA 90303	⊠IND □COM □OTH □PTY □SCC	Retired N/A	500.00	1,0	00.00	
12/30/2022	Hamid Pournamdari Inglewood, CA 90303	⊠IND □COM □OTH □PTY □SCC	Retired N/A	500.00	1,0	00.00	
12/02/2022	Sam's Alignment & Tire, Inc. Hawthorne, CA 90250	□IND □COM ☑OTH □PTY □SCC		200.00	2	00.00	
11/07/2022	Justine L. Suarez Los Angeles, CA 90042	⊠IND □COM □OTH □PTY □SCC	Consultant Justine L. Suarez	2,500.00	2,5	00.00	

SUBTOTAL\$

3,800.00

*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

Schedule A (Continuation Sheet) Monetary Contributions Received					ers period	SCHEDULE A (CONT.) CALIFORNIA 460 FORM		
				through 12/31/	2022	Page_	7 of 15	
NAME OF FILER						I.D. NU	MBER	
Mayor Alex V	argas 2024					13753	53	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE T CALENDAR ` (JAN. 1 - DE	YEAR	PER ELECTION TO DATE (IF REQUIRED)	
11/06/2022	Richard Taylor Santa Monica, CA 90405	⊠IND □COM □OTH □PTY □SCC	Partner Dakota Communications	500.00		500.00		
11/09/2022	Y & K Entertainment Corporation dba JAM Los Angeles, CA 90020	□IND □COM 図OTH □PTY □SCC		500.00		500.00		
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						

SUBTOTAL\$

1,000.00

*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

COLLEGE		- n	m 4		
SCHEDI	11 1	– H –	$P\Delta$	ĸı	1

Schedule B – Part 1 Loans Received	Amo	ounts may be ro to whole dollar			Statement cov	vers period	CALIFORN FORM	^{IIA} 460
SEE INSTRUCTIONS ON REVERSE				1	through12/3	1/2022	Page8	of <u>15</u>
NAME OF FILER	A			_______			I.D. NUMBER	
Mayor Alex Vargas 2024							1375353	
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 PA OR FORGIVI THIS PERIO	EN CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTION TO DATE
Alejandro T. Vargas Hawthorne, CA 90250	Teacher Centinela Valley Union High School District			PAID \$O_C FORGIVEN	s 3,200.00	0_0.0% RATE	\$ 3,200.00	\$O_OOPER ELECTION
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$0_0	\$ 3,200.00	\$0_0	DATE DUE	\$0.00	09/22/2022 DATE INCURRED	s
Alejandro T. Vargas Hawthorne, CA 90250 Check returned	Teacher Centinela Valley Union High School District			\$O_C	1	0_0% RATE	\$0.00	\$O_OO PER ELECTION
†⊠ IND □ COM □ OTH □ PTY □ SCC		\$0_00	\$0_00	\$0.0	DATE DUE	\$0.00	09/27/2022 DATE INCURRED	\$
Alejandro T. Vargas Hawthorne, CA 90250	Teacher Centinela Valley Union High School District			PAID \$ 3,200 € □ FORGIVEN	1	00% RATE	\$ 3,200.00	\$O_O(
†⊠ IND □ COM □ OTH □ PTY □ SCC		\$0.00	\$_3,200_00	\$0.0	DATE DUE	\$0.00	DATE INCURRED	\$
		SUBTOTALS \$	3,200.00	\$ 3,200.	00\$ 0.00	\$ 0.00		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
Loans received this period (Total Column (b) plus unitemized loan				\$	3,200.00		Contributor Codes	S
Loans paid or forgiven this period (Total Column (c) plus loans under \$10 (Include loans paid by a third party that)	0 paid or forgiven.)			\$	3,200.00		ID – Individual OM – Recipient Co (other than TH – Other (e.g., TY – Political Part	PTY or SCC) business entity)
Net change this period. (Subtract Line Enter the net here and on the Summar			•••••	NET \$	0 . 0 0 (May be a negative number)	٥	CC – Small Contri	

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

** If required.

FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) Schedule D SCHEDULE D **Summary of Expenditures** Statement covers period **CALIFORNIA** Amounts may be rounded Supporting/Opposing Other to whole dollars. **FORM** 07/01/2022 from **Candidates. Measures and Committees** through $\frac{12}{31/2022}$ of __15 SEE INSTRUCTIONS ON REVERSE NAME OF FILER LD. NUMBER Mayor Alex Vargas 2024 1375353 CUMULATIVE TO DATE PER ELECTION NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR DESCRIPTION DATE TYPE OF PAYMENT AMOUNT THIS CALENDAR YEAR TO DATE MEASURE NUMBER OR LETTER AND JURISDICTION. (IF REQUIRED) PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OR COMMITTEE 09/22/2022 3,100.00 6,600.00G2022 Donnisha Sanford Phone banking & GOTV \$6,600.00 City Council Member Contribution City of Hawthorne In-Kind contribution X Nonmonetary Contribution ☐ Independent Expenditure X Support ☐ Oppose 09/26/2022 Donnisha Sanford Phone banking & GOTV 1,000.00 6,600.00 G2022 \$6,600.00 City Council Member Contribution City of Hawthorne In-Kind contribution X Nonmonetary Contribution Independent Expenditure X Support ☐ Oppose 09/17/2022 Tony Reynoso 4,500.00 8,600.00 G2022 \$8,600.00 X Monetary City Council Member City of Hawthorne Contribution □ Nonmonetary Contribution ☐ Independent Expenditure X Support ☐ Oppose SUBTOTAL \$ 8,600.00 Schedule D Summary

Schedule D (Continuation Sheet) SCHEDULE D (CONT.) **Summary of Expenditures** Amounts may be rounded Statement covers period CALIFORNIA to whole dollars. Supporting/Opposing Other **FORM** 07/01/2022 Candidates, Measures and Committees through 12/31/2022 Page ______ of ____ 15 NAME OF FILER I.D. NUMBER Mayor Alex Vargas 2024 1375353 CUMULATIVE TO DATE PER ELECTION NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR DESCRIPTION DATE TYPE OF PAYMENT AMOUNT THIS CALENDAR YEAR TO DATE MEASURE NUMBER OR LETTER AND JURISDICTION. (IF REQUIRED) PERIOD (IF REQUIRED) (JAN, 1 - DEC, 31) OR COMMITTEE 09/22/2022 Tony Reynoso Phone banking & GOTV 3,100.00 8,600.00 G2022 \$8,600.00 City Council Member Contribution City of Hawthorne In-Kind contribution Nonmonetary Contribution Independent Expenditure X Support ☐ Oppose 09/26/2022 8,600.00 G2022 Phone banking & GOTV 1,000.00 \$8,600.00 Tony Reynoso City Council Member Contribution City of Hawthorne In-Kind contribution Nonmonetary Contribution ☐ Independent Expenditure X Support ☐ Oppose ☐ Monetary Contribution Nonmonetary Contribution ☐ Independent ☐ Support ☐ Oppose Expenditure Contribution □ Nonmonetary Contribution Independent Expenditure ☐ Support Oppose

SUBTOTAL \$

4,100.00

0.00

SCHEDULE E (CONT.)

Schedule E	
(Continuation Shee	t)
Payments Made	

Culver City, CA 90230

Amounts may be rounded to whole dollars.

Statement covers period **CALIFORNIA FORM** 07/01/2022 from through ___12/31/2022 Page 12 of 15 I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Mayor Alex Vargas 2024 1375353 **CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. radio airtime and production costs MBR member communications campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations petition circulating t.v. or cable airtime and production costs PET candidate filing/ballot fees candidate travel, lodging, and meals PHO phone banks staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services transfer between committees of the same candidate/sponsor IND POS TSF LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings WEB information technology costs (internet, e-mail) PRT print ads NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE OR **DESCRIPTION OF PAYMENT** AMOUNT PAID DCR International, Inc. PHO 6,200.00 Culver City, CA 90230 DCR International, Inc. PHO 2,000.00

Mailchimp WEB 205.00 Atlanta, GA 30308 Mailchimp WEB 205.00 Atlanta, GA 30308 Mailchimp WEB 205.00 Atlanta, GA 30308

* Payments that are cor	. 4 1 1 4 2			
Payments that are cor	itrini itione or ingana	nagat avagaattiirac	milet alen na elimm:	arizon on Schoniilo II
i avincina matare coi	iti ibutions of mucbe	HUCHL CAPCHULLICS	illust also be sulllille	anzed on Schedule D.

SUBTOTAL \$

8,815.00

Schedule E (Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.	from07/01/2022	SCHEDULE E (CONT.) CALIFORNIA 460 FORM
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		through12/31/2022	Page 13 of 15 I.D. NUMBER
Mayor Alex Vargas 2024			1375353
CODES: If one of the following codes accurately describes campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production TRC candidate travel, lodging, and staff/spouse travel, lodging,	costs duction costs d meals and meals s of the same candidate/sponsor

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AM	OUNT PAID
Mailchimp Atlanta, GA 30308	WEB				205.00
MailchimpAtlanta, GA 30308	WEB				205.00
Mailchimp Atlanta, GA 30308	WEB				205.00
Netfile Mariposa, CA 95338	PRO				150.00
Tony Reynoso for Council 2022 (ID# 1447757) Hawthorne, CA 90250	СТВ				4,500.00
* Payments that are contributions or independent expenditures must also be	summarized on Schedule	D.	Si	JBTOTAL \$	5,265.00

SCHEDULE E (CONT.)

Schedule	Ε	
(Continua	tion	Sheet)
Payments	Mad	de

Amounts may be rounded to whole dollars.

		• • · · · · · · · · · · · · · · · · · ·
Statement covers period		CALIFORNIA 460
from	07/01/2022	FORM TOO
through	12/31/2022	Page14 of15
		I.D. NUMBER
		1375353

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mayor Alex Vargas 2024

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs CMP campaign paraphernalia/misc. MBR member communications CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals candidate filing/ballot fees PHO phone banks POL polling and survey research FND fundraising events TRS staff/spouse travel, lodging, and meals

IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services

LEG legal defense campaign literature and mailings PRO professional services (legal, accounting) PRT print ads

transfer between committees of the same candidate/sponsor TSF VOT voter registration

WEB information technology costs (internet, e-mail)

Lit campaign illerature and mailings	PRI plint aus	VVED information technology costs (internet, e-mail)			
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODI	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID	
Yolanda Miranda & Associates Covina, CA 91722	PRO			500.00	
Yolanda Miranda & Associates Covina, CA 91722	PRO			500.00	
Yolanda Miranda & Associates Covina, CA 91722	PRO			500.00	
Yolanda Miranda & Associates Covina, CA 91722	PRO			1.68	
* Douments that are contributions or independent expanditures m	1	<u> </u>	CI	IRTOTAL \$ 1.501.68	

E .					SCHEDULE F
Schedule F Accrued Expenses (Unpaid Bills)	Amounts may be round to whole dollars.	ded	Statement cove	T.C	ORNIA 460
			through	2022 Page	15 of 15
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				I.D. NUN	
W 22- Yz-w 0004					
Mayor Alex Vargas 2024	as the neumant way may	, antar the anda Ot	homijo dogajbo 4	13753	53
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member communication MTG meetings and appeara OFC office expenses PET petition circulating PHO phone banks POL polling and survey resi POS postage, delivery and PRO professional services (PRT print ads	ns nces earch messenger services	RAD radio airtime ar RFD returned contri SAL campaign work TEL t.v. or cable air TRC candidate trave TRS staff/spouse tra TSF transfer betwee VOT voter registration	nd production costs butions kers' salaries time and production cost el, lodging, and meals avel, lodging, and meals en committees of the sal	me candidate/sponsor
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Netfile Mariposa, CA 95338	PRO	150.00	0.00	150.00	0.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$ 150.00\$	0.00\$	150.00\$	0.00
Schedule F Summary					
Total accrued expenses incurred this period. (Include all S accrued expenses of \$100 or more, plus total unitemized)			INCU	RRED TOTALS \$ _	0.00
Total accrued expenses paid this period. (Include all Scheaccrued expenses of \$100 or more, plus total unitemized				.PAID TOTALS \$ _	150.00
Net change this period. (Subtract Line 2 from Line 1. En on the Summary Page, Column A, Line 9.)	ter the difference here and	d 		NET \$	-150.00 lay be a negative number