

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

COVER PAGE

Date Stamp	CALIFORNIA FORM	460
RECEIVED 2020 JUL 30 P 12:39 CITY CLERK DEPARTMENT	Page <u>1</u> of <u>24</u>	
	For Official Use Only	

Statement covers period	Date of election if applicable: (Month, Day, Year)
from <u>01/01/2020</u>	<u>11/03/2020</u>
through <u>06/30/2020</u>	

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

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
<i>(Also file a Form 410 Termination)</i> | <input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
| <input type="checkbox"/> Amendment (Explain below) | |

3. Committee Information

I.D. NUMBER
1375353

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Mayor Alex Vargas 2020

STREET ADDRESS (NO P.O. BOX)
11981 York Ave

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Hawthorne</u>	<u>CA</u>	<u>90250</u>	<u>(310) 528-6899</u>

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
11981 York Ave.

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Hawthorne</u>	<u>CA</u>	<u>90250</u>	

OPTIONAL: FAX / E-MAIL ADDRESS
atvargas34@yahoo.com

Treasurer(s)

NAME OF TREASURER
Yolanda Miranda

MAILING ADDRESS
728 W. Edna Place

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Covina</u>	<u>CA</u>	<u>91722</u>	<u>(626) 915-7635</u>

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
------	-------	----------	-----------------

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 07/17/2020
Date

By [Signature]
Signature of Treasurer or Assistant Treasurer

Executed on 07/17/2020
Date

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

Executed on _____
Date

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

Executed on _____
Date

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

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

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
Alejandro Vargas

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
Mayor Hawthorne

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP
11963 Ramona Ave., Unit C	Hawthorne	CA	90250

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
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	<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**

SUMMARY PAGE

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2020	
through		Page 3 of 24
		I.D. NUMBER
		1375353

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mayor Alex Vargas 2020

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$ 5,500.00	\$ 5,500.00
2. Loans Received	Schedule B, Line 3	\$ -30,000.00	\$ 0.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$ -24,500.00	\$ 5,500.00
4. Nonmonetary Contributions	Schedule C, Line 3	\$ 7,800.00	\$ 7,800.00
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$ -16,700.00	\$ 13,300.00

**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	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

Expenditures Made

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made	Schedule E, Line 4	\$ 45,521.56	\$ 45,521.56
7. Loans Made	Schedule H, Line 3	\$ 0.00	\$ 0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$ 45,521.56	\$ 45,521.56
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	\$ 9,957.00	\$ 9,957.00
10. Nonmonetary Adjustment	Schedule C, Line 3	\$ 7,800.00	\$ 7,800.00
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	\$ 63,278.56	\$ 63,278.56

**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	\$ 156,446.38
13. Cash Receipts	Column A, Line 3 above	\$ -24,500.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4	\$ 125.66
15. Cash Payments	Column A, Line 8 above	\$ 45,521.56
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$ 86,550.48

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 \$ 0.00

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	\$ 0.00
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	\$ 9,957.00

**Schedule A
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period from <u>01/01/2020</u> through <u>06/30/2020</u>	CALIFORNIA FORM 460
	Page <u>4</u> of <u>24</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Mayor Alex Vargas 2020	I.D. NUMBER 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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
06/30/2020	Los Angeles Ale Works 12918 Cerise Ave. Hawthorne, CA 90250-5521	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	G2020 \$500.00
06/11/2020	Jeffrey M. Worthe 100 Wilshire Blvd., Ste. 1600 Santa Monica, CA 90401-1115	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Worthe Real Estate Group	5,000.00	5,000.00	G2020 \$5,000.00
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$				5,500.00		

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 5,500.00
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 0.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 5,500.00

*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 B - Part 1 Loans Received

Amounts may be rounded
to whole dollars.

Statement covers period from <u>01/01/2020</u> through <u>06/30/2020</u>	CALIFORNIA FORM 460
	Page <u>5</u> of <u>24</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Mayor Alex Vargas 2020	I.D. NUMBER 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 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
Alejandro Vargas 11981 S. York Ave. Hawthorne, CA 90250	Teacher Centinela Valley Union High School District	\$ 30,000.00	\$ 0.00	<input checked="" type="checkbox"/> PAID \$ 30,000.00 <input type="checkbox"/> FORGIVEN \$ 0.00	\$ 0.00 01/01/0001 DATE DUE	0.00 % RATE \$ 0.00	\$ 30,000.00 12/30/2019 DATE INCURRED	CALENDAR YEAR \$ -30,000.00 PER ELECTION** G2020 0.00 G2015 0.00
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE	_____% RATE \$ _____	\$ _____ DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE	_____% RATE \$ _____	\$ _____ DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
SUBTOTALS \$			0.00 \$	30,000.00 \$	0.00 \$	0.00		

Schedule B Summary

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

- Loans received this period \$ 0.00
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period \$ 30,000.00
(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 \$ -30,000.00**
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 C
Nonmonetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period
from 01/01/2020
through 06/30/2020

**CALIFORNIA
FORM 460**

Page 6 of 24

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

I.D. NUMBER

Mayor Alex Vargas 2020

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)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
06/01/2020	12515 Cerise ZV, LLC 8445 Santa Monica Blvd. West Hollywood, CA 90069	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Voter Contact Phone Services	7,800.00	7,800.00	G2020 \$7,800.00
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 7,800.00

Schedule C Summary

- Amount received this period – itemized nonmonetary contributions.
(Include all Schedule C subtotals.) \$ 7,800.00
- Amount received this period – unitemized nonmonetary contributions of less than \$100 \$ 0.00
- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL \$** 7,800.00

*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 E Payments Made

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2020	
through	06/30/2020	Page 7 of 24
NAME OF FILER		I.D. NUMBER
Mayor Alex Vargas 2020		1375353

SEE INSTRUCTIONS ON REVERSE

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

- | | | |
|--|--|--|
| CMP campaign paraphernalia/misc. | MBR 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 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 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 OF PAYMENT	AMOUNT PAID
Budget Watchdogs Newsletter (ID# 1345115) 22410 Hawthorne Blvd., Suite 5 Torrance, CA 90505	LIT		2,548.00
CA Slates (ID# 1401551) 249 E. Ocean Blvd., Suite 670 Long Beach, CA 90802	LIT		1,000.00
California Families Vote Green (ID# 1408055) 249 E. Ocean Blvd., Suite 685 Long Beach, CA 90802	LIT		500.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL \$ 4,048.00**

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 45,410.40
2. Unitemized payments made this period of under \$100	\$ 111.16
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.)	TOTAL \$ 45,521.56

**Schedule E
(Continuation Sheet)
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2020	
through	06/30/2020	Page <u>8</u> of <u>24</u>
NAME OF FILER		I.D. NUMBER
Mayor Alex Vargas 2020		1375353

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mayor Alex Vargas 2020

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

- | | | |
|--|--|--|
| CMP campaign paraphernalia/misc. | MBR 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 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 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 OF PAYMENT	AMOUNT PAID
California for Quality Education (ID# 1371954) 728 W. Edna Place Covina, CA 91722	LIT		Slate Mailer	139.60
California Voter Guide (ID# 595004) 22410 Hawthorne Blvd., Suite 5 Torrance, CA 90505	LIT		Slate Mailer	505.00
Citizens for Good Government (ID# 599010) 728 W. Edna Place Covina, CA 91722	LIT		Slate Mailer	102.70
Coalition for Senior Citizens Security (ID# 592015) 2658 Griffith Park Blvd., #383 Los Angeles, CA 90039	LIT			339.00
Continuing the Republican Revolution (ID# 598041) 1300 Bristol Street North, Suite 100 Newport Beach, CA 92660	LIT		Slate Mailer	200.00

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

SUBTOTAL \$ 1,286.30

**Schedule E
(Continuation Sheet)
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2020	
through	06/30/2020	Page <u>9</u> of <u>24</u>
NAME OF FILER		I.D. NUMBER
Mayor Alex Vargas 2020		1375353

SEE INSTRUCTIONS ON REVERSE

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

- | | | |
|--|--|--|
| CMP campaign paraphernalia/misc. | MBR 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 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 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 OF PAYMENT	AMOUNT PAID
COPS Voter Guide Inc. (ID# 599014) 705-2 E. Bidwell Street, #370 Folsom, CA 95630	LIT		Slate Mailer	855.00
Costco Wholesale 12530 Prairie Ave. Hawthorne, CA 90250	OFC			119.90
Council of Concerned Woman Voters 2658 Griffith Park Blvd., #383 Los Angeles, CA 90039	LIT			381.00
DCR International, Inc. 5721 W. Slauson Ave., #110 Culver City, CA 90230	PHO			5,000.00
Democratic Voters Choice (ID# 595002) 728 W. Edna Place Covina, CA 91722	LIT		Slate Mailer	606.60

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

SUBTOTAL \$ 6,962.50

**Schedule E
(Continuation Sheet)
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2020	
through	06/30/2020	Page 10 of 24
NAME OF FILER		I.D. NUMBER
Mayor Alex Vargas 2020		1375353

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

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

- | | | |
|--|--|--|
| CMP campaign paraphernalia/misc. | MBR 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 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 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 OF PAYMENT	AMOUNT PAID
Educate Your Vote (ID# 1345655) 16633 Ventura Blvd., #1008 Encino, CA 91436	LIT			1,100.00
Family First Education Voter Guide (ID# 1398433) 249 E. Ocean Blvd., Suite 685 Long Beach, CA 90802	LIT			250.00
Landslide Communications, Inc. 30011 Ivy Glenn Drive, Suite 223 Laguna Niguel, CA 92677	LIT	Slate Mailer		1,054.50
Latino Family Voter Guide (ID# 1386464) 249 E. Ocean Blvd., Suite 685 Long Beach, CA 90802	LIT	Slate Mailer		250.00
Mailchimp 675 Ponce De Leon Ave., NE Suite 5000 Atlanta, GA 30308	WEB			104.00

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

SUBTOTAL \$ 2,758.50

**Schedule E
(Continuation Sheet)
Payments Made**

SCHEDULE E (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2020	
through	06/30/2020	Page 11 of 24
NAME OF FILER		I.D. NUMBER
Mayor Alex Vargas 2020		1375353

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

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

- | | | |
|--|--|--|
| CMP campaign paraphernalia/misc. | MBR 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 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 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 OF PAYMENT	AMOUNT PAID
Mailchimp 675 Ponce De Leon Ave., NE Suite 5000 Atlanta, GA 30308	WEB		104.00
Mailchimp 675 Ponce De Leon Ave., NE Suite 5000 Atlanta, GA 30308	WEB		104.00
Mailchimp 675 Ponce De Leon Ave., NE Suite 5000 Atlanta, GA 30308	WEB		104.00
Mailchimp 675 Ponce De Leon Ave., NE Suite 5000 Atlanta, GA 30308	WEB		94.99
Mailchimp 675 Ponce De Leon Ave., NE Suite 5000 Atlanta, GA 30308	WEB		94.99

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

SUBTOTAL \$ 501.98

**Schedule E
(Continuation Sheet)
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2020	
through	06/30/2020	Page 12 of 24
NAME OF FILER		I.D. NUMBER
Mayor Alex Vargas 2020		1375353

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Mayor Alex Vargas 2020

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

CMP campaign paraphernalia/misc.	MBR 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 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 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 OF PAYMENT	AMOUNT PAID
Menace Studio 4332 W. 133rd Street Hawthorne, CA 90250	LIT			1,583.37
Menace Studio 4332 W. 133rd Street Hawthorne, CA 90250	LIT			1,536.83
Menace Studio 4332 W. 133rd Street Hawthorne, CA 90250	LIT			818.06
Menace Studio 4332 W. 133rd Street Hawthorne, CA 90250	LIT			515.69
Juan Pedro Mendoza 366 57th Street Los Angeles, CA 90011	WEB		Website services	2,500.00

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

SUBTOTAL \$ 6,953.95

**Schedule E
(Continuation Sheet)
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2020	
through	06/30/2020	Page <u>13</u> of <u>24</u>
NAME OF FILER		I.D. NUMBER
Mayor Alex Vargas 2020		1375353

SEE INSTRUCTIONS ON REVERSE

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

- | | | |
|--|--|--|
| CMP campaign paraphernalia/misc. | MBR 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 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 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 OF PAYMENT	AMOUNT PAID
Mid-City Mailing Services, Corp. 17314 So. Broadway Gardena, CA 90248	LIT			1,350.00
Netfile 2707 Aurora Road Mariposa, CA 95338	PRO			150.00
Office Depot 1700 Rosecrans Ave Manhattan Beach, CA 90266	OFC			203.71
Office Depot 1700 Rosecrans Ave Manhattan Beach, CA 90266	OFC			20.79
Office Depot 1700 Rosecrans Ave Manhattan Beach, CA 90266	OFC			66.27

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

SUBTOTAL \$ 1,790.77

**Schedule E
(Continuation Sheet)
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2020	
through	06/30/2020	Page 14 of 24
NAME OF FILER		I.D. NUMBER
Mayor Alex Vargas 2020		1375353

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

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

- | | | |
|--|--|--|
| CMP campaign paraphernalia/misc. | MBR 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 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 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 OF PAYMENT	AMOUNT PAID
Office Depot 1700 Rosecrans Ave Manhattan Beach, CA 90266	OFC			31.76
Online Labels, Inc. 2021 E. Lake Mary Blvd. Sanford, FL 32773	OFC			341.64
Our California Latino Voters Guide (ID# 596004) 930 Colorado Blvd #2 Los Angeles, CA 90041	LIT		Slate Mailer	900.00
Our Voice Latino Voter Guide (ID# 599015) 2658 Griffith Park Blvd., #383 Los Angeles, CA 90039	LIT			335.00
Political Data, Inc. 12501 Imperial Hwy., Suite 200 Norwalk, CA 90650	LIT		Mail Data	3,300.00

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

SUBTOTAL \$ 4,908.40

**Schedule E
(Continuation Sheet)
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2020	
through	06/30/2020	Page 15 of 24
NAME OF FILER		I.D. NUMBER
Mayor Alex Vargas 2020		1375353

SEE INSTRUCTIONS ON REVERSE

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

- | | | |
|---|--|--|
| CMP campaign paraphernalia/misc. | MBR 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 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 |
| ND 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 OF PAYMENT	AMOUNT PAID
Political Data, Inc. 12501 Imperial Hwy., Suite 200 Norwalk, CA 90650	LIT		135.00
Progressive Voter Guide (ID# 1385678) 2658 Griffith Park Blvd., #383 Los Angeles, CA 90039	LIT		289.00
U.S. Postal Service 12700 Inglewood Ave Hawthorne, CA 90250	POS		1,050.00
U.S. Postal Service 12700 Inglewood Ave Hawthorne, CA 90250	POS		1,750.00
U.S. Postal Service 12700 Inglewood Ave Hawthorne, CA 90250	POS		1,750.00

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

SUBTOTAL \$ 4,974.00

**Schedule E
(Continuation Sheet)
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2020	
through	06/30/2020	Page 16 of 24
NAME OF FILER		I.D. NUMBER
Mayor Alex Vargas 2020		1375353

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

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

CMP campaign paraphernalia/misc.	MBR 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 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
ND 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 OF PAYMENT	AMOUNT PAID
U.S. Postal Service 12700 Inglewood Ave Hawthorne, CA 90250	POS		1,750.00
U.S. Postal Service 12700 Inglewood Ave Hawthorne, CA 90250	POS		4,416.85
U.S. Postal Service 12700 Inglewood Ave Hawthorne, CA 90250	POS		1,435.00
Voter Newsletter (ID# 1355767) 15021 Ventura Blvd., #530 Sherman Oaks, CA 91403	LIT		1,600.00
Yolanda Miranda & Associates 728 W Edna Place Covina, CA 91722	POS		7.65

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

SUBTOTAL \$ 9,209.50

**Schedule E
(Continuation Sheet)
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2020	
through	06/30/2020	Page <u>17</u> of <u>24</u>
NAME OF FILER		I.D. NUMBER
Mayor Alex Vargas 2020		1375353

SEE INSTRUCTIONS ON REVERSE

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

- | | | |
|--|--|--|
| CMP campaign paraphernalia/misc. | MBR 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 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 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 OF PAYMENT	AMOUNT PAID
Yolanda Miranda & Associates 728 W Edna Place Covina, CA 91722	PRO			500.00
Yolanda Miranda & Associates 728 W Edna Place Covina, CA 91722	OFC			8.50
Yolanda Miranda & Associates 728 W Edna Place Covina, CA 91722	PRO			500.00
Yolanda Miranda & Associates 728 W Edna Place Covina, CA 91722	OFC			8.00
Yolanda Miranda & Associates 728 W Edna Place Covina, CA 91722	PRO			500.00

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

SUBTOTAL \$ 1,516.50

**Schedule E
(Continuation Sheet)
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2020	
through	06/30/2020	Page <u>18</u> of <u>24</u>
NAME OF FILER		I.D. NUMBER
Mayor Alex Vargas 2020		1375353

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

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

- | | | |
|--|--|--|
| CMP campaign paraphernalia/misc. | MBR 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 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 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 OF PAYMENT	AMOUNT PAID
Your Community Voter Guide (ID# 1408057) 249 E. Ocean Blvd., Suite 685 Long Beach, CA 90802	LIT		Slate Mailer	500.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL \$** 500.00

**Schedule F
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2020	
through	06/30/2020	Page <u>19</u> of <u>24</u>
NAME OF FILER		I.D. NUMBER
Mayor Alex Vargas 2020		1375353

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mayor Alex Vargas 2020

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

CMP campaign paraphernalia/misc.	MBR 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 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
ND 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 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
California Families Vote Green (ID# 1408055) 249 E. Ocean Blvd., Suite 685 Long Beach, CA 90802	LIT	0.00	1,000.00	0.00	1,000.00
Family First Education Voter Guide (ID# 1398433) 249 E. Ocean Blvd., Suite 685 Long Beach, CA 90802	LIT	0.00	500.00	0.00	500.00
Latino Family Voter Guide (ID# 1386464) 249 E. Ocean Blvd., Suite 685 Long Beach, CA 90802	LIT Slate Mailer	0.00	294.00	0.00	294.00
SUBTOTALS \$		0.00\$	1,794.00\$	0.00\$	1,794.00

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

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) **INCURRED TOTALS \$** 9,957.00
- 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.) **PAID TOTALS \$** 0.00
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** 9,957.00
May be a negative number

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2020	
through	06/30/2020	Page 20 of 24
NAME OF FILER		I.D. NUMBER
Mayor Alex Vargas 2020		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. | MBR 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 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 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) |

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

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
Your Community Voter Guide (ID# 1408057) 249 E. Ocean Blvd., Suite 685 Long Beach, CA 90802	LIT Slate Mailer	0.00	600.00	0.00	600.00
Landslide Communications, Inc. 30011 Ivy Glenn Drive, Suite 223 Laguna Niguel, CA 92677	LIT Slate Mailer	0.00	1,054.50	0.00	1,054.50
Election Digest (ID# 1345303) 22410 Hawthorne Blvd., Suite 5 Torrance, CA 90505	LIT Slate Mailer	0.00	3,516.00	0.00	3,516.00
CALSAL Voter Guide (ID# 1368249) 22410 Hawthorne Blvd., Suite 5 Torrance, CA 90505	LIT	0.00	1,303.00	0.00	1,303.00
SUBTOTALS \$		0.00 \$	6,473.50 \$	0.00 \$	6,473.50

**Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

Amounts may be rounded
to whole dollars.

Statement covers period from <u>01/01/2020</u> through <u>06/30/2020</u>	CALIFORNIA FORM 460
	Page <u>21</u> of <u>24</u>

NAME OF FILER Mayor Alex Vargas 2020	I.D. NUMBER 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. | MBR 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 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 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) |

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

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
CA Slates (ID# 1401551) 249 E. Ocean Blvd., Suite 670 Long Beach, CA 90802	LIT Slate	0.00	1,184.00	0.00	1,184.00
Yolanda Miranda & Associates 728 W Edna Place Covina, CA 91722	PRO	0.00	500.00	0.00	500.00
Yolanda Miranda & Associates 728 W Edna Place Covina, CA 91722	POS	0.00	5.50	0.00	5.50
SUBTOTALS \$		0.00 \$	1,689.50 \$	0.00 \$	1,689.50

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

SCHEDULE G

Amounts may be rounded to whole dollars.

Statement covers period
 from 01/01/2020
 through 06/30/2020

CALIFORNIA FORM 460

Page 22 of 24

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
 Mayor Alex Vargas 2020

NAME OF AGENT OR INDEPENDENT CONTRACTOR
 Landslide Communications, Inc.

I.D. NUMBER
 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. | MBR 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 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 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) |

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
California Public Safety Voter Guide (ID# 1298740) 30011 Ivy Glenn Drive, Suite 223 Laguna Niguel, CA 92677	LIT		351.50
L.A. County Republican Leadership Voter Guide (ID# 1305336) 30011 Ivy Glenn Dr #223 Laguna Niguel, CA 92677	LIT		351.50
National Tax Limitation Committee Early Voter Guide (ID# 1306386) 30011 Ivy Glenn Drive, Suite 223 Laguna Niguel, CA 92677	LIT		351.50
Save Prop 13 (ID# 598040) 5405 Alton Parkway Irvine, CA 92604	LIT		351.50

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 1,406.00

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G (Continuation Sheet)
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	01/01/2020	
through	06/30/2020	Page <u>23</u> of <u>24</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Mayor Alex Vargas 2020	I.D. NUMBER 1375353
NAME OF AGENT OR INDEPENDENT CONTRACTOR Landslide Communications, Inc.	

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR 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 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 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) |

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Taxifornia Tax Fighters' Newsletter (ID# 1378949) 30011 Ivy Glenn Drive, Suite 223 Laguna Niguel, CA 92677	LIT		351.50
Woman's Voice (ID# 1293667) 30011 Ivy Glenn Drive, Suite 223 Laguna Niguel, CA 92677	LIT		351.50

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 703.00

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

**Schedule I
Miscellaneous Increases to Cash**

Amounts may be rounded
to whole dollars.

Statement covers period
from 01/01/2020
through 06/30/2020

SCHEDULE I

**CALIFORNIA
FORM 460**

Page 24 of 24

I.D. NUMBER
1375353

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mayor Alex Vargas 2020

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
04/16/2020	Online Labels, Inc. 2021 E. Lake Mary Blvd. Sanford, FL 32773	Refund expense	125.66

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 125.66

Schedule I Summary

- 1. Itemized increases to cash this period. \$ 125.66
- 2. Unitemized increases to cash of under \$100 this period. \$ 0.00
- 3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) \$ 0.00
- 4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) **TOTAL \$** 125.66