

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

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 CITY CLERK DEPARTMENT

Page 1 of 28
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Statement covers period from <u>10/18/2020</u> through <u>12/31/2020</u>	Date of election if applicable: (Month, Day, Year) <u>11/03/2020</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"/> 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 type="checkbox"/> Semi-annual Statement | <input type="checkbox"/> Special Odd-Year Report |
| <input checked="" 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
1420553

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Mike Talleda for Hawthorne City Council 2020

STREET ADDRESS (NO P.O. BOX)
14147 Hawthorne Blvd.

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Hawthorne</u>	<u>CA</u>	<u>90250</u>	<u>(310) 780-4540</u>

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
728 West Edna Place

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Covina</u>	<u>CA</u>	<u>91722</u>	

OPTIONAL: FAX / E-MAIL ADDRESS
mtalleda@aol.com

Treasurer(s)

NAME OF TREASURER
Yolanda Miranda

MAILING ADDRESS
728 West 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 01/13/2021
 Date

Executed on 01/13/2021
 Date

Executed on _____
 Date

Executed on _____
 Date

By 
 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**

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE				
Miguel L. aka Mike Talleda				
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)				
City Council Member Hawthorne				
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP	
4207 W. 141st. Street, Unit A	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 from <u>10/18/2020</u> through <u>12/31/2020</u>	CALIFORNIA FORM 460
Page <u>3</u> of <u>28</u>	I.D. NUMBER <u>1420553</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mike Talleda for Hawthorne City Council 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	\$ <u>21,600.00</u>	\$ <u>38,680.00</u>
2. Loans Received Schedule B, Line 3	<u>-18,100.00</u>	<u>0.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ <u>3,500.00</u>	\$ <u>38,680.00</u>
4. Nonmonetary Contributions Schedule C, Line 3	<u>2,583.82</u>	<u>22,103.82</u>
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ <u>6,083.82</u>	\$ <u>60,783.82</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	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

Expenditures Made

	Column A	Column B
6. Payments Made Schedule E, Line 4	\$ <u>5,497.93</u>	\$ <u>39,150.00</u>
7. Loans Made Schedule H, Line 3	<u>0.00</u>	<u>0.00</u>
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ <u>5,497.93</u>	\$ <u>39,150.00</u>
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	<u>-4,378.27</u>	<u>0.00</u>
10. Nonmonetary Adjustment Schedule C, Line 3	<u>2,583.82</u>	<u>22,103.82</u>
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ <u>3,703.48</u>	\$ <u>61,253.82</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>1,997.93</u>
13. Cash Receipts Column A, Line 3 above	<u>3,500.00</u>
14. Miscellaneous Increases to Cash Schedule I, Line 4	<u>0.00</u>
15. Cash Payments Column A, Line 8 above	<u>5,497.93</u>
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>0.00</u>

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).

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

17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ <u>0.00</u>
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse	\$ <u>0.00</u>
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ <u>0.00</u>

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

**Schedule A
Monetary Contributions Received**

Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period from <u>10/18/2020</u> through <u>12/31/2020</u>	CALIFORNIA FORM 460
	Page <u>4</u> of <u>28</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mike Talleda for Hawthorne City Council 2020

I.D. NUMBER

1420553

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)
10/23/2020	Manuel Balboa 4535 West 133rd Street Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	200.00	450.00	
12/31/2020	Shoreline West 14147 Hawthorne Blvd. Hawthorne, CA 90250	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	23,875.00	
12/31/2020	Shoreline West 14147 Hawthorne Blvd. Hawthorne, CA 90250	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	23,875.00	
12/31/2020	Shoreline West 14147 Hawthorne Blvd. Hawthorne, CA 90250	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		750.00	23,875.00	
12/31/2020	Shoreline West 14147 Hawthorne Blvd. Hawthorne, CA 90250	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	23,875.00	

SUBTOTAL \$ 3,950.00

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 21,600.00
- 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 \$** 21,600.00

*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**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/18/2020	
through	12/31/2020	Page 5 of 28

NAME OF FILER Mike Talleda for Hawthorne City Council 2020	I.D. NUMBER 1420553
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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)
12/31/2020	Shoreline West 14147 Hawthorne Blvd. Hawthorne, CA 90250	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		200.00	23,875.00	
12/31/2020	Shoreline West 14147 Hawthorne Blvd. Hawthorne, CA 90250	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthorne Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	500.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthorne Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	500.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthorne Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	500.00	23,875.00	
SUBTOTAL \$				1,950.00		

***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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/18/2020	
through	12/31/2020	Page <u>6</u> of <u>28</u>
NAME OF FILER		I.D. NUMBER
Mike Talleda for Hawthorne City Council 2020		1420553

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)
12/31/2020	Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	500.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	500.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	750.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	750.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	1,000.00	23,875.00	
SUBTOTAL \$				3,500.00		

*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 A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/18/2020	
through	12/31/2020	Page <u>7</u> of <u>28</u>

NAME OF FILER Mike Talleda for Hawthorne City Council 2020	I.D. NUMBER 1420553
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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)
12/31/2020	Miguel Talleda 14147 Hawthorne Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	1,000.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthorne Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	1,000.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthorne Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	750.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthorne Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	1,000.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthorne Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	500.00	23,875.00	
SUBTOTAL \$				4,250.00		

*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**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	10/18/2020	
through	12/31/2020	Page 8 of 28

NAME OF FILER	I.D. NUMBER
Mike Talleda for Hawthorne City Council 2020	1420553

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)
12/31/2020	Miguel Talleda 14147 Hawthorne Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	1,000.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthorne Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	500.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthorne Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	500.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthorne Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	350.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthorne Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	500.00	23,875.00	
SUBTOTAL \$				2,850.00		

***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**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/18/2020	
through	12/31/2020	Page 9 of 28

NAME OF FILER Mike Talleda for Hawthorne City Council 2020	I.D. NUMBER 1420553
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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)
12/31/2020	Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	200.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	200.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	100.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	25.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	100.00	23,875.00	

SUBTOTAL \$ 625.00

***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**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period
from 10/18/2020
through 12/31/2020

CALIFORNIA FORM 460

Page 10 of 28

NAME OF FILER: Mike Talleda for Hawthorne City Council 2020 I.D. NUMBER: 1420553

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)
12/31/2020	Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	200.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	500.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	250.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	300.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	1,000.00	23,875.00	
SUBTOTAL \$				2,250.00		

*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**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/18/2020	
through	12/31/2020	Page 11 of 28

NAME OF FILER Mike Talleda for Hawthorne City Council 2020	I.D. NUMBER 1420553
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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)
12/31/2020	Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	275.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	350.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	300.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	300.00	23,875.00	
12/31/2020	Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	1,000.00	23,875.00	
SUBTOTAL \$				2,225.00		

*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>10/18/2020</u> through <u>12/31/2020</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Mike Talleda for Hawthorne City Council 2020	I.D. NUMBER 1420553
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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
Shoreline West 14147 Hawthorne Blvd. Hawthorne, CA 90250 † <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ 200.00	\$ 0.00	<input type="checkbox"/> PAID \$ 0.00 <input checked="" type="checkbox"/> FORGIVEN \$ 200.00	\$ 0.00 DATE DUE	0.00% RATE \$ 0.00	\$ 200.00 09/27/2019 DATE INCURRED	CALENDAR YEAR \$ 23,875.00 PER ELECTION** \$
Shoreline West 14147 Hawthorne Blvd. Hawthorne, CA 90250 † <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ 250.00	\$ 0.00	<input type="checkbox"/> PAID \$ 0.00 <input checked="" type="checkbox"/> FORGIVEN \$ 250.00	\$ 0.00 DATE DUE	0.00% RATE \$ 0.00	\$ 250.00 07/08/2020 DATE INCURRED	CALENDAR YEAR \$ 23,875.00 PER ELECTION** \$
Shoreline West 14147 Hawthorne Blvd. Hawthorne, CA 90250 † <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ 1,000.00	\$ 0.00	<input type="checkbox"/> PAID \$ 0.00 <input checked="" type="checkbox"/> FORGIVEN \$ 1,000.00	\$ 0.00 DATE DUE	0.00% RATE \$ 0.00	\$ 1,000.00 07/29/2020 DATE INCURRED	CALENDAR YEAR \$ 23,875.00 PER ELECTION** \$
SUBTOTALS \$			0.00 \$	1,450.00 \$	0.00 \$	0.00		

Schedule B Summary

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

- Loans received this period \$ 3,300.00
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period \$ 21,400.00
(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 \$** -18,100.00
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 B – Part 1 (Continuation Sheet)
Loans Received

Amounts may be rounded to whole dollars.

Statement covers period from <u>10/18/2020</u> through <u>12/31/2020</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mike Talleda for Hawthorne City Council 2020

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
Shoreline West 14147 Hawthorne Blvd. Hawthorne, CA 90250		\$ <u>750.00</u>	\$ <u>0.00</u>	<input type="checkbox"/> PAID \$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN \$ <u>750.00</u>	\$ <u>0.00</u> DATE DUE	<u>0.00</u> % RATE \$ <u>0.00</u>	\$ <u>750.00</u> <u>08/22/2020</u> DATE INCURRED	CALENDAR YEAR \$ <u>23,875.00</u> PER ELECTION** \$ _____
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
Shoreline West 14147 Hawthorne Blvd. Hawthorne, CA 90250 This is a Loan		\$ <u>1,000.00</u>	\$ <u>0.00</u>	<input type="checkbox"/> PAID \$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN \$ <u>1,000.00</u>	\$ <u>0.00</u> DATE DUE	<u>0.00</u> % RATE \$ <u>0.00</u>	\$ <u>1,000.00</u> <u>09/08/2020</u> DATE INCURRED	CALENDAR YEAR \$ <u>23,875.00</u> PER ELECTION** \$ _____
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
Shoreline West 14147 Hawthorne Blvd. Hawthorne, CA 90250		\$ <u>1,000.00</u>	\$ <u>0.00</u>	<input type="checkbox"/> PAID \$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN \$ <u>1,000.00</u>	\$ <u>0.00</u> DATE DUE	<u>0.00</u> % RATE \$ <u>0.00</u>	\$ <u>1,000.00</u> <u>10/16/2020</u> DATE INCURRED	CALENDAR YEAR \$ <u>23,875.00</u> PER ELECTION** \$ _____
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
Miguel Talleda 14147 Hawthorne Blvd. Hawthorne, CA 90250	President Shoreline West	\$ <u>300.00</u>	\$ <u>0.00</u>	<input type="checkbox"/> PAID \$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN \$ <u>300.00</u>	\$ <u>0.00</u> DATE DUE	<u>0.00</u> % RATE \$ <u>0.00</u>	\$ <u>300.00</u> <u>09/27/2019</u> DATE INCURRED	CALENDAR YEAR \$ <u>23,875.00</u> PER ELECTION** \$ _____
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
SUBTOTALS \$		0.00	\$	3,050.00	\$	0.00	\$	0.00

†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

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

Schedule B – Part 1 (Continuation Sheet)
Loans Received

Amounts may be rounded
to whole dollars.

Statement covers period from <u>10/18/2020</u> through <u>12/31/2020</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Mike Talleda for Hawthorne City Council 2020	I.D. NUMBER 1420553
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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
Miguel Talleda 14147 Hawthorne Blvd. Hawthorne, CA 90250	President Shoreline West			<input type="checkbox"/> PAID \$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN \$ <u>1,000.00</u>	\$ <u>0.00</u>	<u>0.00</u> % RATE \$ <u>0.00</u>	\$ <u>1,000.00</u>	CALENDAR YEAR \$ <u>23,875.00</u> PER ELECTION** \$ _____
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ <u>1,000.00</u>	\$ <u>0.00</u>	\$ <u>1,000.00</u>	DATE DUE	\$ _____	<u>12/12/2019</u> DATE INCURRED	\$ _____
Miguel Talleda 14147 Hawthorne Blvd. Hawthorne, CA 90250	President Shoreline West			<input type="checkbox"/> PAID \$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN \$ <u>1,000.00</u>	\$ <u>0.00</u>	<u>0.00</u> % RATE \$ <u>0.00</u>	\$ <u>1,000.00</u>	CALENDAR YEAR \$ <u>23,875.00</u> PER ELECTION** \$ _____
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ <u>1,000.00</u>	\$ <u>0.00</u>	\$ <u>1,000.00</u>	DATE DUE	\$ _____	<u>12/16/2019</u> DATE INCURRED	\$ _____
Miguel Talleda 14147 Hawthorne Blvd. Hawthorne, CA 90250	President Shoreline West			<input type="checkbox"/> PAID \$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN \$ <u>200.00</u>	\$ <u>0.00</u>	<u>0.00</u> % RATE \$ <u>0.00</u>	\$ <u>200.00</u>	CALENDAR YEAR \$ <u>23,875.00</u> PER ELECTION** \$ _____
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ <u>200.00</u>	\$ <u>0.00</u>	\$ <u>200.00</u>	DATE DUE	\$ _____	<u>03/23/2020</u> DATE INCURRED	\$ _____
Miguel Talleda 14147 Hawthorne Blvd. Hawthorne, CA 90250	President Shoreline West			<input type="checkbox"/> PAID \$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN \$ <u>200.00</u>	\$ <u>0.00</u>	<u>0.00</u> % RATE \$ <u>0.00</u>	\$ <u>200.00</u>	CALENDAR YEAR \$ <u>23,875.00</u> PER ELECTION** \$ _____
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ <u>200.00</u>	\$ <u>0.00</u>	\$ <u>200.00</u>	DATE DUE	\$ _____	<u>04/16/2020</u> DATE INCURRED	\$ _____
SUBTOTALS \$			0.00 \$	2,400.00 \$	0.00 \$	0.00		

†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

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

Schedule B – Part 1 (Continuation Sheet)
Loans Received

Amounts may be rounded to whole dollars.

Statement covers period from <u>10/18/2020</u> through <u>12/31/2020</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Mike Talleda for Hawthorne City Council 2020	I.D. NUMBER 1420553
---	----------------------------

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
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	President Shoreline West			<input type="checkbox"/> PAID \$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN \$ <u>200.00</u>	\$ <u>0.00</u>	<u>0.00</u> % RATE \$ <u>0.00</u>	\$ <u>200.00</u> <u>04/30/2020</u> DATE INCURRED	CALENDAR YEAR \$ <u>23,875.00</u> PER ELECTION** \$ _____
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	President Shoreline West			<input type="checkbox"/> PAID \$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN \$ <u>1,000.00</u>	\$ <u>0.00</u>	<u>0.00</u> % RATE \$ <u>0.00</u>	\$ <u>1,000.00</u> <u>05/03/2020</u> DATE INCURRED	CALENDAR YEAR \$ <u>23,875.00</u> PER ELECTION** \$ _____
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	President Shoreline West			<input type="checkbox"/> PAID \$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN \$ <u>500.00</u>	\$ <u>0.00</u>	<u>0.00</u> % RATE \$ <u>0.00</u>	\$ <u>500.00</u> <u>05/15/2020</u> DATE INCURRED	CALENDAR YEAR \$ <u>23,875.00</u> PER ELECTION** \$ _____
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	President Shoreline West			<input type="checkbox"/> PAID \$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN \$ <u>500.00</u>	\$ <u>0.00</u>	<u>0.00</u> % RATE \$ <u>0.00</u>	\$ <u>500.00</u> <u>05/15/2020</u> DATE INCURRED	CALENDAR YEAR \$ <u>23,875.00</u> PER ELECTION** \$ _____
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
SUBTOTALS \$			0.00 \$	2,200.00 \$	0.00 \$	0.00		

†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

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

Schedule B – Part 1 (Continuation Sheet)

Loans Received

Amounts may be rounded to whole dollars.

Statement covers period from <u>10/18/2020</u> through <u>12/31/2020</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Mike Talleda for Hawthorne City Council 2020	I.D. NUMBER 1420553
---	----------------------------

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
Miguel Talleda 14147 Hawthorne Blvd. Hawthorne, CA 90250	President Shoreline West	\$ 25.00	\$ 0.00	<input type="checkbox"/> PAID \$ 0.00 <input checked="" type="checkbox"/> FORGIVEN \$ 25.00	\$ 0.00	0.00% RATE \$ 0.00	\$ 25.00 05/15/2020 DATE INCURRED	CALENDAR YEAR \$ 23,875.00 PER ELECTION** \$
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
Miguel Talleda 14147 Hawthorne Blvd. Hawthorne, CA 90250	President Shoreline West	\$ 500.00	\$ 0.00	<input type="checkbox"/> PAID \$ 0.00 <input checked="" type="checkbox"/> FORGIVEN \$ 500.00	\$ 0.00	0.00% RATE \$ 0.00	\$ 500.00 06/08/2020 DATE INCURRED	CALENDAR YEAR \$ 23,875.00 PER ELECTION** \$
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
Miguel Talleda 14147 Hawthorne Blvd. Hawthorne, CA 90250	President Shoreline West	\$ 275.00	\$ 0.00	<input type="checkbox"/> PAID \$ 0.00 <input checked="" type="checkbox"/> FORGIVEN \$ 275.00	\$ 0.00	0.00% RATE \$ 0.00	\$ 275.00 06/26/2020 DATE INCURRED	CALENDAR YEAR \$ 23,875.00 PER ELECTION** \$
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
Miguel Talleda 14147 Hawthorne Blvd. Hawthorne, CA 90250	President Shoreline West	\$ 100.00	\$ 0.00	<input type="checkbox"/> PAID \$ 0.00 <input checked="" type="checkbox"/> FORGIVEN \$ 100.00	\$ 0.00	0.00% RATE \$ 0.00	\$ 100.00 06/26/2020 DATE INCURRED	CALENDAR YEAR \$ 23,875.00 PER ELECTION** \$
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
SUBTOTALS \$		0.00	\$	900.00	\$	0.00	\$	0.00

†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

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

Schedule B – Part 1 (Continuation Sheet)
Loans Received

Amounts may be rounded
to whole dollars.

Statement covers period from <u>10/18/2020</u> through <u>12/31/2020</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Mike Talleda for Hawthorne City Council 2020	I.D. NUMBER 1420553
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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
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	President Shoreline West	\$ 100.00	\$ 0.00	<input type="checkbox"/> PAID \$ 0.00 <input checked="" type="checkbox"/> FORGIVEN \$ 100.00	\$ 0.00	0.00% RATE \$ 0.00	\$ 100.00 07/09/2020 DATE INCURRED	CALENDAR YEAR \$ 23,875.00 PER ELECTION** \$
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	President Shoreline West	\$ 350.00	\$ 0.00	<input type="checkbox"/> PAID \$ 0.00 <input checked="" type="checkbox"/> FORGIVEN \$ 350.00	\$ 0.00	0.00% RATE \$ 0.00	\$ 350.00 08/03/2020 DATE INCURRED	CALENDAR YEAR \$ 23,875.00 PER ELECTION** \$
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	President Shoreline West	\$ 750.00	\$ 0.00	<input type="checkbox"/> PAID \$ 0.00 <input checked="" type="checkbox"/> FORGIVEN \$ 750.00	\$ 0.00	0.00% RATE \$ 0.00	\$ 750.00 08/22/2020 DATE INCURRED	CALENDAR YEAR \$ 23,875.00 PER ELECTION** \$
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250 This is a loan	President Shoreline West	\$ 350.00	\$ 0.00	<input type="checkbox"/> PAID \$ 0.00 <input checked="" type="checkbox"/> FORGIVEN \$ 350.00	\$ 0.00	0.00% RATE \$ 0.00	\$ 350.00 08/28/2020 DATE INCURRED	CALENDAR YEAR \$ 23,875.00 PER ELECTION** \$
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
SUBTOTALS \$		0.00	\$	1,550.00	\$	0.00	\$	0.00

†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

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

Schedule B – Part 1 (Continuation Sheet)
Loans Received

Amounts may be rounded to whole dollars.

Statement covers period from <u>10/18/2020</u> through <u>12/31/2020</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Mike Talleda for Hawthorne City Council 2020	I.D. NUMBER 1420553
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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
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250 This is a Loan	President Shoreline West	\$ 500.00	\$ 0.00	<input type="checkbox"/> PAID <input checked="" type="checkbox"/> FORGIVEN \$ 500.00	\$ 0.00	0.00% RATE \$ 0.00	\$ 500.00 09/08/2020 DATE INCURRED	CALENDAR YEAR \$ 23,875.00 PER ELECTION** \$
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250 This is a Loan	President Shoreline West	\$ 500.00	\$ 0.00	<input type="checkbox"/> PAID <input checked="" type="checkbox"/> FORGIVEN \$ 500.00	\$ 0.00	0.00% RATE \$ 0.00	\$ 500.00 09/08/2020 DATE INCURRED	CALENDAR YEAR \$ 23,875.00 PER ELECTION** \$
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250 This is a Loan	President Shoreline West	\$ 250.00	\$ 0.00	<input type="checkbox"/> PAID <input checked="" type="checkbox"/> FORGIVEN \$ 250.00	\$ 0.00	0.00% RATE \$ 0.00	\$ 250.00 09/14/2020 DATE INCURRED	CALENDAR YEAR \$ 23,875.00 PER ELECTION** \$
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250 This is a loan	President Shoreline West	\$ 300.00	\$ 0.00	<input type="checkbox"/> PAID <input checked="" type="checkbox"/> FORGIVEN \$ 300.00	\$ 0.00	0.00% RATE \$ 0.00	\$ 300.00 09/26/2020 DATE INCURRED	CALENDAR YEAR \$ 23,875.00 PER ELECTION** \$
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
SUBTOTALS \$			0.00 \$	1,550.00 \$	0.00 \$	0.00		

†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

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

Schedule B – Part 1 (Continuation Sheet)
Loans Received

Amounts may be rounded to whole dollars.

Statement covers period from <u>10/18/2020</u> through <u>12/31/2020</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Mike Talleda for Hawthorne City Council 2020	I.D. NUMBER 1420553
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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
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	President Shoreline West			<input type="checkbox"/> PAID \$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN \$ <u>750.00</u>	\$ <u>0.00</u>	<u>0.00%</u> RATE \$ <u>0.00</u>	\$ <u>750.00</u> <u>09/28/2020</u> DATE INCURRED	CALENDAR YEAR \$ <u>23,875.00</u> PER ELECTION** \$ _____
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	President Shoreline West			<input type="checkbox"/> PAID \$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN \$ <u>750.00</u>	\$ <u>0.00</u>	<u>0.00%</u> RATE \$ <u>0.00</u>	\$ <u>750.00</u> <u>09/28/2020</u> DATE INCURRED	CALENDAR YEAR \$ <u>23,875.00</u> PER ELECTION** \$ _____
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	President Shoreline West			<input type="checkbox"/> PAID \$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN \$ <u>1,000.00</u>	\$ <u>0.00</u>	<u>0.00%</u> RATE \$ <u>0.00</u>	\$ <u>1,000.00</u> <u>10/02/2020</u> DATE INCURRED	CALENDAR YEAR \$ <u>23,875.00</u> PER ELECTION** \$ _____
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	President Shoreline West			<input type="checkbox"/> PAID \$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN \$ <u>500.00</u>	\$ <u>0.00</u>	<u>0.00%</u> RATE \$ <u>0.00</u>	\$ <u>500.00</u> <u>10/09/2020</u> DATE INCURRED	CALENDAR YEAR \$ <u>23,875.00</u> PER ELECTION** \$ _____
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
SUBTOTALS \$			0.00 \$	3,000.00 \$	0.00 \$	0.00		

†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

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

Schedule B – Part 1 (Continuation Sheet)
Loans Received

Amounts may be rounded to whole dollars.

Statement covers period from <u>10/18/2020</u> through <u>12/31/2020</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Mike Talleda for Hawthorne City Council 2020	I.D. NUMBER 1420553
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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
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	President Shoreline West			<input type="checkbox"/> PAID \$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN \$ <u>1,000.00</u>	\$ <u>0.00</u>	<u>0.00</u> % RATE \$ <u>0.00</u>	\$ <u>1,000.00</u> <u>10/16/2020</u> DATE INCURRED	CALENDAR YEAR \$ <u>23,875.00</u> PER ELECTION** \$ _____
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					DATE DUE			
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	President Shoreline West			<input type="checkbox"/> PAID \$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN \$ <u>1,000.00</u>	\$ <u>0.00</u>	<u>0.00</u> % RATE \$ <u>0.00</u>	\$ <u>1,000.00</u> <u>10/16/2020</u> DATE INCURRED	CALENDAR YEAR \$ <u>23,875.00</u> PER ELECTION** \$ _____
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					DATE DUE			
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250 This is a Loan	President Shoreline West			<input type="checkbox"/> PAID \$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN \$ <u>1,000.00</u>	\$ <u>0.00</u>	<u>0.00</u> % RATE \$ <u>0.00</u>	\$ <u>1,000.00</u> <u>10/20/2020</u> DATE INCURRED	CALENDAR YEAR \$ <u>23,875.00</u> PER ELECTION** \$ _____
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					DATE DUE			
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250 This is a Loan	President Shoreline West			<input type="checkbox"/> PAID \$ <u>0.00</u> <input checked="" type="checkbox"/> FORGIVEN \$ <u>500.00</u>	\$ <u>0.00</u>	<u>0.00</u> % RATE \$ <u>0.00</u>	\$ <u>500.00</u> <u>10/20/2020</u> DATE INCURRED	CALENDAR YEAR \$ <u>23,875.00</u> PER ELECTION** \$ _____
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					DATE DUE			
SUBTOTALS \$			1,500.00 \$	3,500.00 \$	0.00 \$	0.00		

†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

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

Schedule B – Part 1 (Continuation Sheet)
Loans Received

Amounts may be rounded to whole dollars.

Statement covers period from <u>10/18/2020</u> through <u>12/31/2020</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Mike Talleda for Hawthorne City Council 2020	I.D. NUMBER 1420553
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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
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250 This is a Loan	President Shoreline West	\$ 0.00	\$ 500.00	<input type="checkbox"/> PAID \$ 0.00 <input checked="" type="checkbox"/> FORGIVEN \$ 500.00	\$ 0.00	0.00% RATE \$ 0.00	\$ 500.00 10/20/2020 DATE INCURRED	CALENDAR YEAR \$ 23,875.00 PER ELECTION** \$
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250 This is a Loan	President Shoreline West	\$ 0.00	\$ 300.00	<input type="checkbox"/> PAID \$ 0.00 <input checked="" type="checkbox"/> FORGIVEN \$ 300.00	\$ 0.00	0.00% RATE \$ 0.00	\$ 300.00 10/23/2020 DATE INCURRED	CALENDAR YEAR \$ 23,875.00 PER ELECTION** \$
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	President Shoreline West	\$ 0.00	\$ 500.00	<input type="checkbox"/> PAID \$ 0.00 <input checked="" type="checkbox"/> FORGIVEN \$ 500.00	\$ 0.00	0.00% RATE \$ 0.00	\$ 500.00 10/31/2020 DATE INCURRED	CALENDAR YEAR \$ 23,875.00 PER ELECTION** \$
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	President Shoreline West	\$ 0.00	\$ 500.00	<input type="checkbox"/> PAID \$ 0.00 <input checked="" type="checkbox"/> FORGIVEN \$ 500.00	\$ 0.00	0.00% RATE \$ 0.00	\$ 500.00 10/31/2020 DATE INCURRED	CALENDAR YEAR \$ 23,875.00 PER ELECTION** \$
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								
SUBTOTALS \$			1,800.00\$	1,800.00\$	0.00\$	0.00		

†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

*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 <u>10/18/2020</u> through <u>12/31/2020</u>	CALIFORNIA FORM 460
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I.D. NUMBER 1420553	

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Mike Talleda for Hawthorne City Council 2020

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)
11/30/2020	Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Shoreline West	Bill Forgiven	2,400.00	23,875.00	
12/31/2020	Yolanda Miranda & Assoc. 728 West Edna Place Covina, CA 91722	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Bill Forgiven	183.82	183.82	
		<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 \$ 2,583.82

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.)	\$	2,583.82
2. Amount received this period – unitemized nonmonetary contributions of less than \$100	\$	0.00
3. 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 \$	2,583.82

*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	10/18/2020	
through	12/31/2020	Page 23 of 28
NAME OF FILER		I.D. NUMBER
Mike Talleda for Hawthorne City Council 2020		1420553

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
American Express P.O. Box 0001 Los Angeles, CA 90096		Credit card payment	170.12
American Express P.O. Box 0001 Los Angeles, CA 90096		Credit card payment	455.91
Facebook 1601 Willow Rd. Menlo Park, CA 94025	WEB	Advertising	250.00

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

SUBTOTAL \$ 876.03

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	5,481.93
2. Unitemized payments made this period of under \$100	\$	16.00
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 \$	5,497.93

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
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through	12/31/2020	Page 24 of 28
NAME OF FILER		I.D. NUMBER
Mike Talleda for Hawthorne City Council 2020		1420553

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
Facebook 1601 Willow Rd. Menlo Park, CA 94025	WEB		Advertising	250.00
Facebook 1601 Willow Rd. Menlo Park, CA 94025	WEB		Advertising	271.45
Facebook 1601 Willow Rd. Menlo Park, CA 94025	WEB		Advertising	260.59
Minuteman Press of Gardena 16829 S. Western Ave. Gardena, CA 90247	LIT			1,506.79
Minuteman Press of Gardena 16829 S. Western Ave. Gardena, CA 90247	LIT			142.74

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

SUBTOTAL \$ 2,431.57

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/18/2020	
through	12/31/2020	Page 25 of 28
NAME OF FILER		I.D. NUMBER
Mike Talleda for Hawthorne City Council 2020		1420553

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mike Talleda for Hawthorne City Council 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
Off The Lip 840 Apollo Street, Ste. 100 El Segundo, CA 90245	WEB			250.00
Andrew Yanez 9050 Carron Dr. Apt. 121 Pico Rivera, CA 90660	PRO		Video & Media services	1,500.00
Yolanda Miranda & Assoc. 728 West Edna Place Covina, CA 91722	POS			8.15
Yolanda Miranda & Assoc. 728 West Edna Place Covina, CA 91722	PRO			300.00
Yolanda Miranda & Assoc. 728 West Edna Place Covina, CA 91722				116.18

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

SUBTOTAL \$ 2,174.33

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

Amounts may be rounded to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/18/2020	
through	12/31/2020	Page <u>26</u> of <u>28</u>
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Mike Talleda for Hawthorne City Council 2020		1420553

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mike Talleda for Hawthorne City Council 2020

I.D. NUMBER

1420553

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 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
American Express P.O. Box 0001 Los Angeles, CA 90096	Credit card payment	170.12	0.00	170.12	0.00
Yolanda Miranda & Assoc. 728 West Edna Place Covina, CA 91722	POS	8.15	0.00	8.15	0.00
Yolanda Miranda & Assoc. 728 West Edna Place Covina, CA 91722	PRO	300.00	0.00	300.00	0.00
SUBTOTALS \$		478.27\$	0.00\$	478.27\$	0.00

* 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 \$** -2,400.00
- 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 \$** 1,978.27
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** -4,378.27
May be a negative number

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

Amounts may be rounded
to whole dollars.

Statement covers period from <u>10/18/2020</u> through <u>12/31/2020</u>	CALIFORNIA FORM 460
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NAME OF FILER Mike Talleda for Hawthorne City Council 2020	I.D. NUMBER 1420553

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
Andrew Yanez 9050 Carron Dr. Apt. 121 Pico Rivera, CA 90660	PRO Video & Media services	1,500.00	0.00	1,500.00	0.00
Miguel Talleda 14147 Hawthore Blvd. Hawthorne, CA 90250	FIL	2,400.00	-2,400.00	0.00	0.00
SUBTOTALS \$		3,900.00 \$	-2,400.00 \$	1,500.00 \$	0.00

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

Amounts may be rounded to whole dollars.

Statement covers period
 from 10/18/2020
 through 12/31/2020

CALIFORNIA FORM 460

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Mike Talleda for Hawthorne City Council 2020

I.D. NUMBER

1420553

NAME OF AGENT OR INDEPENDENT CONTRACTOR

American Express

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
U.S. Postal Services 12700 Inglewood Ave. Hawthorne, CA 90250	POS			110.00
Vons 4705 Torrance Blvd. Torrance, CA 90503			Food for volunteers	220.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 330.00

* 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.