

# Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Date Stamp	<b>CALIFORNIA FORM 460</b>
RECEIVED BY LOS ANGELES COUNTY 2023 JUL 31 PM 2:08 CAMPAIGN FINANCE DISCLOSURE SECTION	
Page <u>1</u> of <u>8</u>	For Official Use Only

<b>Statement covers period</b>	<b>Date of election if applicable:</b> (Month, Day, Year)
from <u>01/01/2023</u>	<u>11/08/2024</u>
through <u>06/30/2023</u>	

SEE INSTRUCTIONS ON REVERSE

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

- Officeholder, Candidate Controlled Committee
  - State Candidate Election Committee
  - Recall  
*(Also Complete Part 5)*
- General Purpose Committee
  - Sponsored
  - Small Contributor Committee
  - Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
  - Controlled
  - Sponsored  
*(Also Complete Part 6)*
- Primarily Formed Candidate/Officeholder Committee  
*(Also Complete Part 7)*

### 2. Type of Statement:

- Preelection Statement
- Semi-annual Statement
- Termination Statement  
(Also file a Form 410 Termination)
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report
- Supplemental Preelection Statement - Attach Form 495

### 3. Committee Information

I.D. NUMBER  
1346862

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
Vasquez 4 Water Board 2024

STREET ADDRESS (NO P.O. BOX)

INGLEWOOD	CA	90301	(310)817-6679
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MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE
INGLEWOOD	CA	90301	(310)817-6679

OPTIONAL: FAX / E-MAIL ADDRESS

(310)672-6679 / cine@politicalreportingplus.com

### Treasurer(s)

NAME OF TREASURER

Cine D. Ivery

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
INGLEWOOD	CA	90301	(310)817-6679

NAME OF ASSISTANT TREASURER, IF ANY

Michelle Moore Sanders

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
INGLEWOOD	CA	90301	(310)817-6679

OPTIONAL: FAX / E-MAIL ADDRESS

### 4. Verification

I have used all reasonable diligence in preparing and reviewing this statement under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

I certify

Executed on JUL 26 2023

Executed on JUL 26 2023

Executed on \_\_\_\_\_

Executed on \_\_\_\_\_

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

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE

Leticia Vasquez-Wilson

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

Water Board Member Central Basin Water District 1

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Inglewood CA 90301

**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?

YES  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?

YES  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

SUPPORT  
 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

SUPPORT  
 OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT  
 OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT  
 OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT  
 OPPOSE

*Attach continuation sheets if necessary*

**Campaign Disclosure Statement  
Summary Page**

Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>01/01/2023</u> through <u>06/30/2023</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>3</u> of <u>8</u>
I.D. NUMBER 1346862	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vasquez 4 Water Board 2024

**Contributions Received**

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$ 0.00	\$ 0.00
2. Loans Received	Schedule B, Line 3	0.00	63,000.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$ 0.00	\$ 63,000.00
4. Nonmonetary Contributions	Schedule C, Line 3	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$ 0.00	\$ 63,000.00

**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	Column B
6. Payments Made	Schedule E, Line 4	\$ 32.62	\$ 32.62
7. Loans Made	Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$ 32.62	\$ 32.62
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	0.00	7,810.64
10. Nonmonetary Adjustment	Schedule C, Line 3	0.00	0.00
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	\$ 32.62	\$ 7,843.26

**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	\$ 877.17
13. Cash Receipts	Column A, Line 3 above	0.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4	0.00
15. Cash Payments	Column A, Line 8 above	32.62
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$ 844.55

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

17. LOAN GUARANTEES RECEIVED	Schedule B, Part 2	\$ 0.00
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**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	\$ 70,810.64

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.

**Schedule B – Part 1  
Loans Received**

Amounts may be rounded to whole dollars.

Statement covers period from <u>01/01/2023</u> through <u>06/30/2023</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vasquez 4 Water Board 2024

I.D. NUMBER

1346862

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
Leticia Vasquez-Wilson Lynwood, CA 90262  † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director Central Basin Municipal Water District	\$ <u>5,500.00</u>	\$ <u>0.00</u>	<input type="checkbox"/> PAID \$ <u>0.00</u> <input type="checkbox"/> FORGIVEN \$ <u>0.00</u>	\$ <u>5,500.00</u>  10/11/2017 DATE DUE	<u>0.00</u> % RATE \$ <u>0.00</u>	\$ <u>5,500.00</u>  10/11/2016 DATE INCURRED	CALENDAR YEAR \$ <u>0.00</u> PER ELECTION** \$ _____
Leticia Vasquez-Wilson Lynwood, CA 90262  † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director Central Basin Municipal Water District	\$ <u>15,000.00</u>	\$ <u>0.00</u>	<input type="checkbox"/> PAID \$ <u>0.00</u> <input type="checkbox"/> FORGIVEN \$ <u>0.00</u>	\$ <u>15,000.00</u>  10/17/2017 DATE DUE	<u>0.00</u> % RATE \$ <u>0.00</u>	\$ <u>15,000.00</u>  10/17/2016 DATE INCURRED	CALENDAR YEAR \$ <u>0.00</u> PER ELECTION** \$ _____
Leticia Vasquez-Wilson Lynwood, CA 90262  † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director Central Basin Municipal Water District	\$ <u>20,000.00</u>	\$ <u>0.00</u>	<input type="checkbox"/> PAID \$ <u>0.00</u> <input type="checkbox"/> FORGIVEN \$ <u>0.00</u>	\$ <u>20,000.00</u>  10/25/2017 DATE DUE	<u>0.00</u> % RATE \$ <u>0.00</u>	\$ <u>20,000.00</u>  10/25/2016 DATE INCURRED	CALENDAR YEAR \$ <u>0.00</u> PER ELECTION** \$ _____
<b>SUBTOTALS \$</b>		<b>0.00 \$</b>	<b>0.00 \$</b>	<b>0.00 \$</b>	<b>40,500.00 \$</b>	<b>0.00</b>		

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

**Schedule B Summary**

- Loans received this period ..... \$ 0.00  
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period ..... \$ 0.00  
(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 \$** 0.00  
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>01/01/2023</u>
through <u>06/30/2023</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vasquez 4 Water Board 2024

I.D. NUMBER

1346862

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
Leticia Vasquez-Wilson Lynwood, CA 90262	Director Central Basin Municipal Water District			<input type="checkbox"/> PAID \$ <u>0.00</u> <input type="checkbox"/> FORGIVEN \$ <u>0.00</u>	\$ <u>2,500.00</u>	<u>0.00%</u> RATE	\$ <u>2,500.00</u>	CALENDAR YEAR \$ <u>0.00</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>2,500.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	<u>10/27/2017</u> DATE DUE	\$ <u>0.00</u>	<u>10/28/2016</u> DATE INCURRED	\$ _____
Leticia Vasquez-Wilson Lynwood, CA 90262	Director Central Basin Municipal Water District			<input type="checkbox"/> PAID \$ <u>0.00</u> <input type="checkbox"/> FORGIVEN \$ <u>0.00</u>	\$ <u>1,000.00</u>	<u>0.00%</u> RATE	\$ <u>1,000.00</u>	CALENDAR YEAR \$ <u>0.00</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>0.00</u>	<u>10/31/2017</u> DATE DUE	\$ <u>0.00</u>	<u>10/31/2016</u> DATE INCURRED	\$ _____
Leticia Vasquez-Wilson Lynwood, CA 90262	Director Central Basin Municipal Water District			<input type="checkbox"/> PAID \$ <u>0.00</u> <input type="checkbox"/> FORGIVEN \$ <u>0.00</u>	\$ <u>9,500.00</u>	<u>0.00%</u> RATE	\$ <u>9,500.00</u>	CALENDAR YEAR \$ <u>0.00</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>9,500.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	<u>09/14/2021</u> DATE DUE	\$ <u>0.00</u>	<u>09/14/2020</u> DATE INCURRED	\$ _____
Leticia Vasquez-Wilson Lynwood, CA 90262 Received through intermediary: eFundraising Connections, Sacramento, CA 95816 - 0*	Director Central Basin Municipal Water District			<input type="checkbox"/> PAID \$ <u>0.00</u> <input type="checkbox"/> FORGIVEN \$ <u>0.00</u>	\$ <u>9,500.00</u>	<u>0.00%</u> RATE	\$ <u>9,500.00</u>	CALENDAR YEAR \$ <u>0.00</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>9,500.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	<u>09/15/2021</u> DATE DUE	\$ <u>0.00</u>	<u>09/15/2020</u> DATE INCURRED	\$ _____
<b>SUBTOTALS \$</b>			0.00\$	0.00\$	22,500.00\$	0.00		

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

†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.

SCHEDULE E

Statement covers period from <u>01/01/2023</u> through <u>06/30/2023</u>	<b>CALIFORNIA FORM 460</b>
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	I.D. NUMBER 1346862

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vasquez 4 Water Board 2024

**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

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

**SUBTOTAL \$** 0.00

**Schedule E Summary**

- |  |                 |              |
|--|-----------------|--------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.)   | \$              | 0.00         |
| 2. Unitemized payments made this period of under \$100   | \$              | 32.62        |
| 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.) | <b>TOTAL \$</b> | <b>32.62</b> |

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

Amounts may be rounded to whole dollars.

Statement covers period		<b>CALIFORNIA FORM 460</b>
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through	06/30/2023	Page <u>7</u> of <u>8</u>
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NAME OF FILER		1346862

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

Vasquez 4 Water Board 2024

**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
R&M Associates Santa Fe Springs, CA 90670	CNS	1,256.31	0.00	0.00	1,256.31
Doug Kessler Consulting Selma, CA 93662	CNS Precinct Training	250.00	0.00	0.00	250.00
Capital One Bank Mc Lean, VA 22102	CMP Campaign Expense	420.75	0.00	0.00	420.75

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

<b>SUBTOTALS \$</b>	<b>1,927.06\$</b>	<b>0.00\$</b>	<b>0.00\$</b>	<b>1,927.06</b>
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**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 \$** 0.00
- 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 \$** 0.00  
May be a negative number

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

SCHEDULE F (CONT.)

Amounts may be rounded  
to whole dollars.

Statement covers period		<b>CALIFORNIA FORM 460</b>
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Vasquez 4 Water Board 2024		1346862

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

- |  |  |  |
|--|--|--|
| <b>CMP</b> campaign paraphernalia/misc.                                  | <b>MBR</b> member communications                     | <b>RAD</b> radio airtime and production costs                        |
| <b>CNS</b> campaign consultants  | <b>MTG</b> meetings and appearances                  | <b>RFD</b> returned contributions                                    |
| <b>CTB</b> contribution (explain nonmonetary)*                           | <b>OFC</b> office expenses                           | <b>SAL</b> campaign workers' salaries                                |
| <b>CVC</b> civic donations   | <b>PET</b> petition circulating                      | <b>TEL</b> t.v. or cable airtime and production costs                |
| <b>FIL</b> candidate filing/ballot fees                                  | <b>PHO</b> phone banks                               | <b>TRC</b> candidate travel, lodging, and meals                      |
| <b>FND</b> fundraising events  | <b>POL</b> polling and survey research               | <b>TRS</b> staff/spouse travel, lodging, and meals                   |
| <b>IND</b> independent expenditure supporting/opposing others (explain)* | <b>POS</b> postage, delivery and messenger services  | <b>TSF</b> transfer between committees of the same candidate/sponsor |
| <b>LEG</b> legal defense   | <b>PRO</b> professional services (legal, accounting) | <b>VOT</b> voter registration  |
| <b>LIT</b> campaign literature and mailings                              | <b>PRT</b> print ads                                 | <b>WEB</b> 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
Capital One Bank Mc Lean, VA 22102	CMP Election Night Event Expenses	383.58	0.00	0.00	383.58
Leticia Vasquez-Wilson Lynwood, CA 90262	FIL Candidate Ballot Statement FeeReimbursement	5,500.00	0.00	0.00	5,500.00
<b>SUBTOTALS \$</b>		<b>5,883.58\$</b>	<b>0.00\$</b>	<b>0.00\$</b>	<b>5,883.58</b>