Major Donor and Independent Expenditure Committee Campaign Statement Reviseo

| Campaign Statement   |                     | r<br>}                          |   | NGELES COUNTY  | FORM 461                           |  |  |  |
|--|---------------------|---------------------------------|---|--|------------------------------------|--|--|--|
|  |                     | Statement covers period         |   | of election if applicable: 2025<br>h, Day, Year)   | JAN 27 PH 12: 38<br>MPAIGN FINANCE | Page of For Official Use Only                                |  |  |
| SEE INSTRUCTIONS ON REVERSE  | throu               | igh 12/31/2024                  | 11/0  | 5/2024 CA  | ,                                  | M195,79  |  |  |
|  |                     |                                 | ummary<br>mounts may be rounded to who  | yla dallara \  |                                    |  |  |  |
| NAME OF FILER  Medallion Contracting, Inc. Craig Fries   |                     | <u> </u>                        | 1 .   | Expenditures and contri<br>(including loans) of \$10   | ributions<br>00 or more            | •  |  |  |
| RESIDENTIAL OR MAILING ADDRESS (N  | NO. AND             | STREET)                         | ] _   | made this period. (Part  |                                    | \$   |  |  |
|  | STATE<br>CA         | ZIP CODE 93535                  |   | Unitemized expenditure contributions (including \$100 made this period   | loane) under                       | \$ <u></u>   |  |  |
|  |                     | DE/DAYTIME PHONE                | 3.  | Total expenditures and made this period. (Add  | contributions                      | 14 000 00  |  |  |
|  |                     | 949-3205                        |   | Total expenditures and   |                                    |  |  |  |
| A FILER WHO IS AN INDIVIDUAL MUST LIST THE NAME, ADDRESS, AND BUSINESS INTERESTS OF EMPLOYER OR, IF SELF-EMPLOYED, THE NAME, ADDRESS, AND NATURE OF THE BUSINESS NAME OF EMPLOYER/BUSINESS  BUSINESS INTERESTS |                     |                                 | 1   | made from prior statement. (Enter amount from Line 5 of last statement filed. If this is the first statement for the calendar year, enter zero.) |                                    |  |  |  |
| Medallion Contracting, Inc.  ADDRESS OF EMPLOYER/BUSINESS  Lancaster, CA 93535   |                     | ontractor                       |   | (including loans) made<br>January 1 of the curren<br>(Add Lines 3 + 4.)  | since                              | TOTAL \$   |  |  |
| A FILER THAT IS A BUSINESS ENTITY MUST DESCRIBE  | E THE BL            | USINESS ACTIVITY IN WHICH IT IS | 4. V  | erification  | :                                  |  |  |  |
| General Contractor   |                     |                                 | I have used all reasonable diligence in preparing this statement. I have reviewed the statement and to the best of my knowledge the information |  |                                    |  |  |  |
| A FILER THAT IS AN ASSOCIATION MUST PROVIDE AS   | SPECIFIC            | DESCRIPTION OF ITS INTERESTS    |   | e laws of the State of Ca  |                                    |  |  |  |
| AFILER THAT IS NOT AN INDIVIDUAL, BUSINESS ENTITION COMMON ECONOMIC INTEREST OF THE GROUP OR B   | TY, OR AS<br>ENTITY | SOCIATION MUST DESCRIBE THE     | E   | xecuted on 1/21/2025   | _                                  | OF INDIVIDUAL DONOR OR CER, IF OTHER THAN AN INDIVIDUAL      |  |  |
| Amendment (Explain):   |                     | 4                               | -   |  | FPPC Advice: ac                    | FPPC Form 461 (Jan/2016)<br>dvice@fppc.ca.gov (866/275-3772) |  |  |

## Major Donor and Independent Expenditure Committee Campaign Statement

Amounts may be rounded to whole dollars.

| Statement covers period from 1/1/2024 | CALIFORNIA 461 |  |  |  |
|---------------------------------------|----------------|--|--|--|
| through 12/31/2024                    | Page of        |  |  |  |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Medallion Contracting, Inc.

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Of 1

## 5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made

(If more space is needed, use additional copies of this page for continuation sheets.)

| DATE                  | NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE<br>OF PAYEE              | TYPE OF PAYMENT  | DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY | CANDIDATE AND OFFICE,<br>MEASURE AND JURISDICTION,<br>OR COMMITTEE | AMOUNT THIS PERIOD | CUMULATIVE AMOUNT<br>RELATED TO THIS<br>CANDIDATE, MEASURE, |
|-----------------------|---|--|--|--|--------------------|---|
| 10/08/2024            | Yes On Measure H SKUSD Bond 2024 Sisters, Or 97759 FPPC-1475984         | Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure | Contribution or Loan)  Check                   | Bond Measure Yes on Measure H SKUSD Bond 2024  Support Oppose      | 9,900.00           | 9,900.00  |
| 10/18/2024            | Friends of Lancaster SD YES on LS 2024  Oakland, CA 94607  FPPC-1474939 | Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure | Check  | Bond Measure YES on LS 2024  Z Support Oppose                      | 5,000.00           | 5,000.00  |
|                       |   | Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure |  | ☐ Support ☐ Oppose   |                    |   |
|                       | -   | Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure |  | ☐ Support ☐ Oppose   |                    |   |
| SUBTOTAL \$ 14,900.00 |   |  |  |  |                    |   |