

**Recipient Committee
Campaign Statement
Cover Page**

COVER PAGE

Date Stamp RECEIVED LOS ANGELES 2022 APR 27 PM 3:03 4/25/22 CITY FINANCE	CALIFORNIA FORM 460
Page <u>1</u> of <u>11</u>	For Official Use Only

Statement covers period from <u>01/01/2022</u> through <u>04/23/2022</u>	Date of election if applicable: (Month, Day, Year) <u>06/07/2022</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"/> State Candidate Election Committee
<input type="checkbox"/> Recall
<small>(Also Complete Part 5)</small> | <input type="checkbox"/> Primarily Formed Ballot Measure Committee
<input type="checkbox"/> Controlled
<input type="checkbox"/> Sponsored
<small>(Also Complete Part 6)</small> |
| <input type="checkbox"/> General Purpose Committee
<input type="checkbox"/> Sponsored
<input type="checkbox"/> Small Contributor Committee
<input type="checkbox"/> Political Party/Central Committee | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee
<small>(Also Complete Part 7)</small> |

2. Type of Statement:

- | | |
|---|--|
| <input checked="" type="checkbox"/> Preelection Statement | <input type="checkbox"/> Quarterly Statement |
| <input type="checkbox"/> Semi-annual Statement | <input type="checkbox"/> Special Odd-Year Report |
| <input type="checkbox"/> Termination Statement
<small>(Also file a Form 410 Termination)</small> | |
| <input type="checkbox"/> Amendment (Explain below) | |

3. Committee Information

I.D. NUMBER
1339333

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

LINDA WAH FOR TRUSTEE 2022

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>San Marino</u>	<u>CA</u>	<u>91108</u>	<u>6264076130</u>

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>South Pasadena</u>	<u>CA</u>	<u>91030</u>	

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

James M Okazaki

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>San Marino</u>	<u>CA</u>	<u>91108</u>	<u>213/249-3246</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 4/24/2022
Date

Executed on 4/24/22
Date

Executed on _____
Date

Executed on _____
Date

By _____

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
LINDA S WAH

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
PASADENA AREA COMMUNITY COLLEGE DISTRICT - AREA 5

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
San Marino CA 91108

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
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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

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>01/01/2022</u> through <u>04/23/2022</u>	CALIFORNIA FORM 460
	Page <u>3</u> of <u>11</u>
I.D. NUMBER 1339333	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LINDA S WAH - LINDA WAH FOR TRUSTEE 2022

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions..... <i>Schedule A, Line 3</i>	\$ <u>25249</u>	\$ <u>25249</u>
2. Loans Received..... <i>Schedule B, Line 3</i>	<u>20000</u>	<u>20000</u>
3. SUBTOTAL CASH CONTRIBUTIONS..... <i>Add Lines 1 + 2</i>	\$ <u>45249</u>	\$ <u>45249</u>
4. Nonmonetary Contributions..... <i>Schedule C, Line 3</i>	<u>0</u>	<u>0</u>
5. TOTAL CONTRIBUTIONS RECEIVED..... <i>Add Lines 3 + 4</i>	\$ <u>45249</u>	\$ <u>45249</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 TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made..... <i>Schedule E, Line 4</i>	\$ <u>35586</u>	\$ <u>35586</u>
7. Loans Made..... <i>Schedule H, Line 3</i>	<u>0</u>	<u>0</u>
8. SUBTOTAL CASH PAYMENTS..... <i>Add Lines 6 + 7</i>	\$ <u>35586</u>	\$ <u>35586</u>
9. Accrued Expenses (Unpaid Bills)..... <i>Schedule F, Line 3</i>	<u>0</u>	<u>0</u>
10. Nonmonetary Adjustment..... <i>Schedule C, Line 3</i>	<u>0</u>	<u>0</u>
11. TOTAL EXPENDITURES MADE..... <i>Add Lines 8 + 9 + 10</i>	\$ <u>35586</u>	\$ <u>35586</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..... <i>Previous Summary Page, Line 16</i>	\$ <u>3059</u>
13. Cash Receipts..... <i>Column A, Line 3 above</i>	<u>45249</u>
14. Miscellaneous Increases to Cash..... <i>Schedule I, Line 4</i>	<u>0</u>
15. Cash Payments..... <i>Column A, Line 8 above</i>	<u>35586</u>
16. ENDING CASH BALANCE..... <i>Add Lines 12 + 13 + 14, then subtract Line 15</i>	\$ <u>12722</u>

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

17. LOAN GUARANTEES RECEIVED..... <i>Schedule B, Part 2</i>	\$ <u>0</u>
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents..... <i>See instructions on reverse</i>	\$ <u>0</u>
19. Outstanding Debts..... <i>Add Line 2 + Line 9 in Column B above</i>	\$ <u>20000</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).

*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>01/01/2022</u> through <u>04/23/2022</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LINDA S WAH - LINDA WAH FOR TRUSTEE 2022

I.D. NUMBER

1339333

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)
1/1-4/22	See Attached	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	See Attached	23650	23650	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$				23650		

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.)\$ 23650
- Amount received this period – unitemized monetary contributions of less than \$100\$ 1599
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.).....**TOTAL \$** 25249

*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

LINDA WAH - LINDA WAH FOR TRUSTEE 2022									
SUBVENDOR LIST - SCHEDULE A - PAGE 5-6 - 01/01/22-04/23/22									
Date	Name/Office/District/Committee	Contributor Code	\$/this period	Employer	Cumulative	Address			
29-Mar	Wendy Anderson	IND	\$100.00	WOW Productions		Pasadena	CA		91101
27-Mar	Emile Bayle	IND	\$100.00	Retired		San Marino	CA		91108
29-Mar	Emile Bayle	IND	\$100.00	Retired		San Marino	CA		91108
16-Feb	Joel Bennett	IND	\$100.00	Retired		Marina del Rey	CA		90292
16-Feb	Sera Bennett	IND	\$100.00	Retired		Marina del Rey	CA		90292
29-Mar	Tom Chavez	IND	\$100.00	Thomas E Chavez Law Offices		Temple City	CA		91780
29-Mar	John Chou	IND	\$100.00	SBA		San Marino	CA		91108
9-Feb	Karen Connolly	IND	\$100.00	Surman Law Group		San Marino	CA		91108
28-Mar	Patty D'Orange-Martin	IND	\$100.00	Retired		Temple City	CA		91780
28-Mar	Lois Derry	IND	\$100.00	Retired		San Marino	CA		91108
23-Mar	Ellen Endo-Dizon	IND	\$100.00	Hapa Consulting Services		Sherman Oaks	CA		91411
28-Mar	Robert Gin	IND	\$100.00	Retired		Monterey Park	CA		91754
16-Feb	Julie Giuliani	IND	\$100.00			So Pasadena	CA		91030
8-Apr	Nan Gomez-Heitzberg	IND	\$100.00	Retired		Bakersfield	CA		93306
8-Apr	Sandra Greenstein	IND	\$100.00	Retired		Pasadena	CA		91103
28-Mar	Stephanie Johnson	IND	\$100.00	Retired		San Marino	CA		91108
10-Apr	Meade Johnson	IND	\$100.00	Retired	\$200.00	San Marino	CA		91108
11-Feb	Yukio Kawaratani	IND	\$100.00	Retired		Monterey Park	CA		91754
9-Feb	Alvaro Marin	IND	\$100.00	Retired		Huntington Pk	CA		90255
28-Mar	Mark Matsui	IND	\$100.00	Glendale Community College		Pasadena	CA		91104
28-Mar	Claudia Mostert	IND	\$150.00	Obagi Skin Care		So Pasadena	CA		91030
14-Feb	Nancy Oda	IND	\$100.00	Retired		Van Nuys	CA		91401
1-Apr	Cindy Ohara	IND	\$100.00	Retired		Duarte	CA		91010
1-Apr	Walter Okitsu	IND	\$100.00	KOA Engineering		So Pasadena	CA		91030
10-Feb	Lorraine Saunders	IND	\$100.00	Retired		San Marino	CA		91108
8-Mar	Carmen Schaye	IND	\$100.00	Retired		San Marino	CA		91108
1-Apr	Richard Shieh	IND	\$100.00	Richard Hsieh		San Marino	CA		91108
28-Mar	Tammy Silver	IND	\$100.00	Retired		Pasadena	CA		91106
10-Apr	Marina Wang	IND	\$100.00	Retired		San Marino	CA		91108
5-Mar	J Joseph Wong	IND	\$100.00	Retired		Rollings Hills	CA		90274
1-Apr	Thomas Wong	IND	\$100.00	Southern California Edison		Monterey Park	CA		91754
9-Feb	Thomas Wong	IND	\$150.00	Southern California Edison	\$250.00	Monterey Park	CA		91754
10-Feb	Denise Menchaca	IND	\$150.00	Retired		San Gabriel	CA		91775
28-Mar	Peter Young	IND	\$150.00	Exercise Coach		Los Angeles	CA		90012
29-Mar	Laura Friedman	COM	\$200.00	State of California, #1435032		Encino	CA		91436
12-Feb	Karen Ito	IND	\$200.00	Retired		Los Angeles	CA		90064
5-Apr	Edward Liu	IND	\$200.00	Retired		Rosemead	CA		91775
26-Feb	Margaret Murphy	IND	\$200.00	Retired		San Marino	CA		91108
24-Feb	Bill Payne	IND	\$200.00	Retired		San Marino	CA		91108
23-Mar	Rhett & Fealing Szu	IND	\$200.00	Retired		San Gabriel	CA		91776
28-Feb	Barbara Calhoun	IND	\$250.00	Retired		Compton	CA		90222
14-Feb	Mike Enomoto	IND	\$250.00	Gruen Associates		LA	CA		90065
30-Mar	Preston Howard	IND	\$250.00	Rose City Realty		Pasadena	CA		91116

9-Mar	Lena Louise	Kennedy	IND	\$250.00	Retired		493 W Hammond St	Pasadena	CA	91103
28-Mar	Christine	Kwak	IND	\$250.00	Southern California Medical Group			San Marino	CA	91108
8-Apr	Maribel	Marin	IND	\$250.00	Retired			Woodland Hills	CA	91367
12-Feb	Trisha	Murakawa	IND	\$250.00	Murakawa Communication			Redondo Beach	CA	90278
9-Mar	Diana	Peterson-More	IND	\$250.00	Diana Peterson-More			Pasadena	CA	91105
13-Mar	Jamee	Roberts	IND	\$250.00	Retired			San Marino	CA	91108
12-Feb	Denise	Wadsworth	IND	\$250.00	San Marino Unified School District			Monrovia	CA	91016
30-Mar	Eddie	Yen	IND	\$250.00	Los Angeles County			San Marino	CA	91108
30-Mar	Michelle	Yen	IND	\$250.00	Wang Plastic Surgery			San Marino	CA	91108
1-Apr	David	Zuckerman	IND	\$250.00	Retired			Simi Valley	CA	93063
22-Mar	Judy	Chu	COM	\$500.00	Judy Chu for Congress, C00458125			Encino	CA	91436
10-Apr	Margaret	Kuwabara	IND	\$500.00	Southern California Medical Group			San Marino	CA	91108
17-Feb	Evelyn	Lin	IND	\$500.00	ReMax Realty			Alhambra	CA	91801
28-Mar	Katy	Moffat	IND	\$500.00	Studio Distribution Services			San Marino	CA	91108
1-Mar	NWPC/SGV		Com	\$500.00	National Women's Political Caucus/San Gabriel Valley PAC #770021			So Pasadena	CA	91030
23-Mar	Lisa	Sugimoto	IND	\$500.00	PPL Consultants			Hermosa Beach	CA	90254
8-Apr	Richard	Sun	IND	\$500.00	Retired			Pasadena	CA	91108
13-Feb	Gilbert	Wong	IND	\$500.00	Foothill DeAnza Community College			Cupertino	CA	95014
11-Mar	Peter	Wong	IND	\$500.00	CSULB			Pasadena	CA	91103
28-Mar	Gay	Yuen	IND	\$500.00	CSULA			Monterey Park	CA	91754
13-Feb	Saik Choon	Poh	IND	\$1,000.00	DRP Engineering, Inc			So Pasadena	CA	91030
29-Mar	Ken	Wah	IND	\$2,000.00	Retired			West Hollywood	CA	90048
14-Mar	Linda	Wah	IND	\$5,000.00	Retired			San Marino	CA	91108
2-Feb	Linda	Wah	IND	\$2,000.00	Retired	\$7,000.00		San Marino	CA	91108
12-Apr	Anne	Wilcoxon	IND	\$200.00	Retired	200		Pasadena	CA	91106
12-Apr	Steven	Inunza	IND	\$50.00	Mama's Brick Ove			Monterey Park	CA	91754
12-Apr	Pauline	Wong	IND	\$100.00	Retired			So Pasadena	CA	91030
20-Apr	Deborah	Ikeda	IND	\$250.00	Retired			Fresno	CA	93720
				\$23,650.00						

**Schedule B – Part 1
Loans Received**

Amounts may be rounded
to whole dollars.

Statement covers period from <u>01/01/2022</u> through <u>04/23/2022</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LINDA S WAH - LINDA WAH FOR TRUSTEE 2022

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
Linda S Wah, San Marino, CA 91108 <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$ 20000	\$ 20000	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE _____	0% RATE	\$ 20000 DATE INCURRED _____	CALENDAR YEAR \$ 20000 PER ELECTION** \$ _____
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE _____	% RATE	\$ _____ DATE INCURRED _____	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE _____	% RATE	\$ _____ DATE INCURRED _____	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
SUBTOTALS		\$ 20000	\$ 20000	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

Schedule B Summary

1. Loans received this period \$ 20000
(Total Column (b) plus unitemized loans of less than \$100.)
2. Loans paid or forgiven this period \$ 0
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)
3. Net change this period: (Subtract Line 2 from Line 1.) **NET \$** 20000
Enter the net here and on the Summary Page, Column A, Line 2. (May be a negative number)

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

†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 D
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Amounts may be rounded
to whole dollars.

SCHEDULE D

Statement covers period from <u>01/01/2022</u> through <u>04/23/2022</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LINDA S WAH - LINDA WAH FOR TRUSTEE 2022

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/10/22	Denise Menchaca, San Gabriel City Council 1366985	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Campaign Contribution	153.00	153.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$						

Schedule D Summary

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)..... \$ 153
- Unitemized contributions and independent expenditures made this period of under \$100..... \$ 0
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL** .. \$ 153

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period from <u>01/01/2022</u> through <u>04/23/2022</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LINDA S WAH - LINDA WAH FOR TRUSTEE 2022

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
Chase VISA, San Marino, CA 91108	OFC	Credit Card Payment (Non Accrued) Subvendors paid >\$100 listed in attached sheet. . Multiple expenditures on credit card for campaign.	24907
Subvendor (List Attached)	OFC		
888 Seafood Restaurant	FND	Deposit for Fundraising Event	1000

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

SUBTOTAL \$ 25907

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$ 35554
2. Unitemized payments made this period of under \$100.....	\$ 32
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$ 0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	TOTAL \$ 35586

LINDA WAH - LINDA WAH FOR TRUSTEE 2022						
SUBVENDOR LIST - SCHEDULE E -PAGE 10 - 01/01/22-04/23/22						
Date	Name/Address	Code	Description	Amt This Period	Cumulative -	Source
16-Mar	*Image Cube, Sylmar, CA 91342	LIT	Campaign Flyer/Mailer	\$5,895.00		Visa
21-Mar	*Image Cube, Sylmar, CA 91342	LIT	Campaign Flyer/Mailer	\$13,730.95		Visa
9-Apr	*Image Cube, Sylmar, CA 91342	LIT	Campaign Flyer/Mailer	\$602.25	\$20,228.20	Visa
2/10/22	Denise Menchaca, San Gabriel, CA 91775	CTB	Candidate Support	\$156.00	\$156.00	VISA
20-Mar	Office Depot	OFC	Office Supplies	\$230.71		Visa
24-Feb	Office Depot, Pasadena, CA 91106	OFC	Office Supplies	\$388.95	\$619.66	Visa
15-Feb	PDI, Norwalk, CA 90652	CNS	Data	\$3,400.00	\$3,400.00	VISA
3-Feb	Rough Edit, Glendale, CA, 91206,	PRO	Photos	\$350.00	\$350.00	Visa
					\$24,753.86	

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

Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from <u>01/01/2022</u> through <u>04/23/2022</u>	CALIFORNIA FORM 460 Page <u>11</u> of <u>11</u>
I.D. NUMBER 1339333	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LINDA S WAH - LINDA WAH FOR TRUSTEE 2022

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
Karbis Sarafyan, LA, CA 90028	PRO		VIDEO	1250
Hrag Yedalian, Pasadena, CA 91104	CNS		Campaign Consulting	7140
LA COUNTY Registrar, Norwalk, CA 90650	FIL		Filing Fees	1104
ACT Blue, Somerville, MA 02144	FND		Fundraising Fees	153

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

SUBTOTAL \$ 9647