Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5) SEE INSTRUCTIONS ON REVERSE	Statement covers period from07/01/2021 through12/31/2021	Date of election if applicable: (Month, Day, Year)	Pate Stamp RECEIVED S ANGELES 22 JAN 25 PA AMPAIGN FIR	BY COUR 1 2: 52Pag	COVER PAGE ALIFORNIA 460 FORM of 16 For Official Use Only
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	rimarily Formed Ballot Measure committee) Controlled) Sponsored (so Complete Part 5) rimarily Formed Candidate/ fficeholder Committee (so Complete Part 7)	2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Term Amendment (Explain belo	,	Supplemen	itatement d-Year Report tal Preelection Attach Form 495
3. Committee information	DE AREA CODE/PHONE 4 (916) 442-7757	Treasurer(s) NAME OF TREASURER Ashlee N. Titus MAILING ADDRESS CITY Sacramento NAME OF ASSISTANT TREASURE KC Jenkins MAILING ADDRESS	STATE CA R, IF ANY	ZIP CODE 95814	AREA CODE/PHONE (916) 442-7757
OPTIONAL: FAX / E-MAIL ADDRESS (916) 442-7759 / fppc@bmhlaw.com	DE AREA CODE/PHONE	Sacramento OPTIONAL: FAX / E-MAIL ADDRES	STATE CA	ZIP CODE 95814	AREA CODE/PHONE (916)442-7757
Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California Executed on	that the foregoing is true and correct. By	wiedge ti Signature of Treasurer or Assistant Tre	asurer		rue and complete. I certify
Executed on	Bv	Signature of Controlling Officeholder, Candidate, State Signature of Controlling Officeholder, Candidate, State		-	FPPC Form 460 (Jan/2016)

COVER PAGE - PART 2

CALIFORNIA 460

Page ____2 of ___16

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP Identify th NAME OF O 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 7. Primarily officeholde NAME OF O COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX) COMMITTEE NAME I.D. NUMBER NAME OF O	FBALLOT MEASURE NO. OR LETTER JURISDICTION the controlling officeholder, candidate, or state of the controller, candidate, or state of the controller, candidate, or state of the controller, candidate, or proponent SOUGHT OR HELD DIST	□ SUPPORT □ OPPOSE measure proponent, if any. TRICT NO. IF ANY
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP Identify the NAME OF O 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 7. Primarily officeholded NAME OF O COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE AREA CODE/PHONE NAME OF O	the controlling officeholder, candidate, or state of the controlling of t	☐ OPPOSE measure proponent, if any.
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 7. Primarily officeholde YES NO COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE AREA CODE/PHONE NAME OF O	F OFFICEHOLDER, CANDIDATE, OR PROPONENT	
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 7. Primarily officeholde NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE AREA CODE/PHONE NAME OF O		TRICT NO. IF ANY
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NAME OF TREASURER CONTROLLED COMMITTEE? YES NO NAME OF O NAME OF O NAME OF O CITY STATE ZIP CODE AREA CODE/PHONE COMMITTEE NAME LD. NUMBER		
NAME OF TREASURER CONTROLLED COMMITTEE? YES NO NAME OF O NAME OF O CITY STATE ZIP CODE AREA CODE/PHONE NAME OF O COMMITTEE NAME LD. NUMBER		
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE AREA CODE/PHONE NAME OF O	rily Formed Candidate/Officeholder Comn older(s) or candidate(s) for which this committee is prin	
COMMITTEE NAME LD. NUMBER	F OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT	OR HELD SUPPORT OPPOSE
COMMITTEE NAME I.D. NUMBER NAME OF O	F OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT	OR HELD SUPPORT OPPOSE
	F OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT	OR HELD SUPPORT OPPOSE
☐ YES ☐ NO		OR HELD SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	F OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT	J 002
CITY STATE ZIP CODE AREA CODE/PHONE	F OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT	

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

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Statement cover	ers period	CALIFORNIA 160				
from07/03	1/2021	FORM TOU				
through12/3	1/2021	Page3 of16				
		I.D. NUMBER				
		702117				

Apartment Association of California Southern Cities PAC Column A Column B Calendar Year Summary for Candidates Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROMATTACHED SCHEDULES) TOTALTODATE General Elections 1/1 through 6/30 7/1 to Date 2. Loans Received Schedule B, Line 3 0.00 20. Contributions 222.75 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ _____ 122.75 Received 0.00 4. Nonmonetary Contributions Schedule C, Line 3 21. Expenditures Made 222.75 **Expenditures Made Expenditure Limit Summary for State** Candidates 7. Loans Made Schedule H, Line 3 22. Cumulative Expenditures Made* 57,003.27 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ _____ 52,340.77 (If Subject to Voluntary Expenditure Limit) 563.22 563.22 Total to Date Date of Election (mm/dd/yy) 0.00 0.00 57,566.49 **Current Cash Statement** 64,937.85 To calculate Column B. add amounts in Column A to the 122.75 13. Cash Receipts Column A, Line 3 above corresponding amounts *Amounts in this section may be different from amounts 0.00 14. Miscellaneous Increases to Cash Schedule I, Line 4 from Column B of your last reported in Column B. report. Some amounts in 52,340.77 Column A may be negative 12,719.83 figures that should be 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ subtracted from previous If this is a termination statement, Line 16 must be zero.

0.00

any).

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

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

17. LOAN GUARANTEES RECEIVED Schedule B. Part 2 \$ _____

18. Cash Equivalents See instructions on reverse \$ 0.00

19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ 563.22

Cash Equivalents and Outstanding Debts

Schedule		Amoun	ts may be rounded				SCHEDULE.
Monetary	Contributions Received		whole dollars.	from07/01/2	•		FORNIA 460
CEE INICTELIATIO	Dive on DE (EDOS			through _12/31/2	021	Page	4 of16
NAME OF FILER	DNS ON REVERSE					f.D. NU	
Apartment A	ssociation of California Southern Cities PAC					78211	17
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTERLD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	D DATE EAR	PER ELECTION TO DATE (IF REQUIRED)
11/30/2021	Elaine Hutchinson Long Beach, CA 90804	☑IND □COM □OTH □PTY □SCC	Manager Paragon Equities	100.00		100.00	
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					
			SUBTOTAL\$	100.00			
1. Amount re	A Summary eceived this period – itemized monetary contributions. Il Schedule A subtotals.)		\$	100.00	IND- COM	(other	al ent Committee than PTY or SCC)
2. Amount re	eceived this period – unitemized monetary contributions	of less than	\$100 \$	22.75		OtherPolitical	(e.g., business entity)
	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colu	mn A, Line 1.))TOTAL \$	122.75			Contributor Committee

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Supporti	e D y of Expenditures ng/Opposing Other es, Measures and Committees	Amounts may be to whole dolla		Statement covers		CALIFO FOR	RNIA	460
	IONS ON REVERSE			through	21			of <u>16</u>
Apartment 3	R Association of California Southern Cities PAC					I.D. NUME		
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 CALENDA (JAN. 1 - D	R YEAR	TC	ELECTION DATE EQUIRED)
07/01/2021	Autumn Burke State Assembly Person Assembly District District 62			1,500.00		1,500.00 P	2022	\$1,500.00
07/01/2021	Cristina Garcia State Assembly Person Assembly District District 58	Monetary Contribution Nonmonetary Contribution Independent Expenditure		2,500.00	-	2,500.00 F	2022	\$2,500.00
07/01/2021	X Support Oppose Lena Gonzalez State Senator Senate District District 33 X Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure		1,000.00		1,000.00 F	2024	\$1,000.00
			SUBTOTAL	\$ 5,000.00				
1. Contribut	D Summary ions and independent expenditures made this per						2	2,500.00
2. Unitemize	ed contributions and independent expenditures ma	ade this period of under	\$100			\$		0.00
3. Total con	tributions and independent expenditures made thi	s period. (Add Lines 1 a	and 2. Do not enter on th	e Summary Page.)	тс	TAL \$_	2	2,500.00

Schedule D (Continuation Sheet) SCHEDULE D (CONT.) **Summary of Expenditures** Amounts may be rounded Statement covers period **CALIFORNIA** to whole dollars. Supporting/Opposing Other **FORM** 07/01/2021 from. Candidates, Measures and Committees through__12/31/2021 Page 6 of__16 NAME OF FILER I.D. NUMBER Apartment Association of California Southern Cities PAC 782117 CUMULATIVE TO DATE PER ELECTION NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR DESCRIPTION DATE TYPE OF PAYMENT AMOUNT THIS CALENDAR YEAR TO DATE MEASURE NUMBER OR LETTER AND JURISDICTION. (IF REQUIRED) **PERIOD** (JAN. 1 - DEC. 31) (IF REQUIRED) OR COMMITTEE 07/15/2021 Al Austin Officeholder Account 750.00 750.00 X Monetary City Council Member City of Long Beach Contribution □ Nonmonetary Contribution Independent Expenditure X Support ☐ Oppose 07/15/2021 Cindy Allen Officeholder Account 500.00 500.00 X Monetary City Council Member City of Long Beach Contribution District 02 □ Nonmonetary Contribution Independent Expenditure X Support ☐ Oppose 07/15/2021 Robert Garcia Officeholder Account 1,000.00 1,000.00 X Monetary Mayor Contribution City of Long Beach ■ Nonmonetary Contribution ☐ Independent X Support ☐ Oppose Expenditure 09/09/2021 Rex Richardson 400.00 400.00 P2022 \$400.00 X Monetary City Council Member City of Long Beach Contribution District 09 □ Nonmonetary Contribution Independent Expenditure X Support □ Oppose

SUBTOTAL \$

2,650.00

Schedule D (Continuation Sheet) SCHEDULE D (CONT.) **Summary of Expenditures** Amounts may be rounded Statement covers period **CALIFORNIA** to whole dollars. Supporting/Opposing Other **FORM** 07/01/2021 from Candidates, Measures and Committees through __ 12/31/2021 Page ___7 NAME OF FILER I.D. NUMBER Apartment Association of California Southern Cities PAC 782117 CUMULATIVE TO DATE PER ELECTION NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR DESCRIPTION DATE TYPE OF PAYMENT AMOUNT THIS CALENDAR YEAR TO DATE MEASURE NUMBER OR LETTER AND JURISDICTION, (IF REQUIRED) **PERIOD** (IF REQUIRED) (JAN. 1 - DEC. 31) OR COMMITTEE 09/28/2021 Long Beach Area Chamber of Commerce PAC 10,000.00 10,000.00 X Monetary General Purpose Recipient Committee City of Long Beach Contribution Nonmonetary Contribution Independent Expenditure X Support ☐ Oppose 09/28/2021 Rex Richardson Officeholder Account 750.00 750.00 X Monetary City Council Member Contribution City of Long Beach District 09 ☐ Nonmonetary Contribution Independent Expenditure Oppose 10/20/2021 Kevin James 1,500.00 1,500.00 P2022 \$1,500.00 X Monetary City Attorney City of Los Angeles Contribution ☐ Nonmonetary Contribution ☐ Independent X Support Oppose Expenditure 11/03/2021 Doug Haubert 600.00 600.00 P2022 \$600.00 X Monetary City Prosecutor City of Long Beach Contribution ☐ Nonmonetary Contribution Independent Expenditure □ Oppose SUBTOTAL \$ 12,850.00

Schedule D (Continuation Sheet) SCHEDULE D (CONT.) **Summary of Expenditures** Amounts may be rounded Statement covers period **CALIFORNIA** to whole dollars. Supporting/Opposing Other **FORM** 07/01/2021 from. Candidates, Measures and Committees through ___ 12/31/2021 Page __8 of __16_ 1.D. NUMBER NAME OF FILER 782117 Apartment Association of California Southern Cities PAC CUMULATIVE TO DATE PER ELECTION NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR DESCRIPTION TYPE OF PAYMENT AMOUNT THIS DATE CALENDAR YEAR TO DATE MEASURE NUMBER OR LETTER AND JURISDICTION, (IF REQUIRED) **PERIOD** (JAN. 1 - DEC. 31) (IF REQUIRED) OR COMMITTEE 600.00 600.00 P2022 \$600.00 11/30/2021 Dawn McIntosh X Monetary City Attorney City of Long Beach Contribution ☐ Nonmonetary Contribution Independent Expenditure X Support ☐ Oppose 600.00 600.00 P2022 \$600.00 12/15/2021 Karen Bass X Monetary Mayor Contribution City of Los Angeles □ Nonmonetary Contribution Independent Expenditure X Support ☐ Oppose 800.00 P2022 \$800.00 Tim McOsker 800.00 12/15/2021 X Monetary City Council Member Contribution City of Los Angeles District 15 ☐ Nonmonetary Contribution ☐ Independent ☐ Oppose Expenditure X Support ☐ -Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure ☐ Support □ Oppose SUBTOTAL \$ 2,000.00

						ζ -		SCHEDULE
Schedule E	Amoui	nts may b	e rounde	d		Statement covers period	CALIFO	
Payments Made		whole d			fr	om07/01/2021	FOF	RM 400
SEE INSTRUCTIONS ON REVERSE					th	rough	_ Page	of16
NAME OF FILER				· · · · · · · · · · · · · · · · · · ·	1		I.D. NUM	
Apartment Association of California Southern Cities PAC							782117	
CODES: If one of the following codes accurately describes	s the pay	ment, yo	u may e	nter the code. C	Otherwise,	describe the payment.		
CMP campaign paraphernalia/misc.		ember com				D radio airtime and productio	n costs	
CNS campaign consultants CTB contribution (explain nonmonetary)*		eetings and fice expen		ces		D returned contributions L campaign workers' salarie	e	
CVC civic donations		etition circul			TE			
FIL candidate filing/ballot fees		one banks				C candidate travel, lodging, a		
FND fundraising events ND independent expenditure supporting/opposing others (explain)*		olling and s		arch nessenger services	TS	S staff/spouse travel, lodging F transfer between committe	, and meals es of the san	ne candidate/snonso
LEG legal defense				egal, accounting)		T voter registration		
LIT campaign literature and mailings	PRT pri	int ads			WE	EB information technology cos	ts (internet, e	-mail)
NAME AND ADDRESS OF PAYEE (FCOMMITTEE, ALSO ENTER LD. NUMBER)			CODE	OR	DESCRIPT	ION OF PAYMENT		AMOUNT PAID
Autumn Burke for Assembly 2022 (ID# 1435170)			CTB					1,500.0
Sacramento, CA 95814				1			- 1	
				İ				
California Strategic Advisors			CNS					500.0
Sacramento, CA 95814								
Cristina Garcia for Assembly 2022 (ID# 1435524)			CTB					2,500.0
Sacramento, CA 95814							1	
Payments that are contributions or independent expenditures in	nust also	be summ	arized on	Schedule D.		s	UBTOTAL\$	4,500.0
Schedule E Summary								
Itemized payments made this period. (Include all Schedule)	E subtota	als.)					\$	52,338.92
2. Unitemized payments made this period of under \$100		•						
Total interest paid this period on loans. (Enter amount from								0.00

SCHEDULE E (CONT.)

(Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA 460
Payments Made	to whole dollars.	from07/01/2021	FORM 400
SEE INSTRUCTIONS ON REVERSE		through	— Page 10 of 16
NAME OF FILER			I.D. NUMBER
Apartment Association of California Southern C	Cities PAC		782117
CODES: If one of the following codes accurate	ly describes the navment you may enter the code	Otherwise describe the navm	ent

COL	DES: If one of the following codes accurately describe	s 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
СТВ	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
ЦΤ	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
Lena Gonzalez for Senate 2024 (ID# 1435497)	СТВ		1,000.00
Sacramento, CA 95815			
J. Richard Eichman, CPA	PRO		32.00
Sacramento, CA 95814			
Al Austin City Council Officeholder Account (ID# 1342831)	СТВ	Officeholder Account	750.00
Long Beach, CA 90807			
Bell, McAndrews & Hiltachk, LLP	PRO		60.00
Sacramento, CA 95814			
Cindy Allen Officeholder Account (ID# 1436981)	СТВ	Officeholder Account	500.00
Long Beach, CA 90802			
* Payments that are contributions or independent expenditures must also be summarized	- Cabadul- C	el ID.	TOTAL \$ 2,342.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 2,342.00

SCHEDULE E (CONT.)

(Continuation Sheet)	Amounts may be rounded to whole dollars.	Statement covers period	CALIFORNIA 460
Payments Made	to whole dollars.	from07/01/2021	FORM TOO
SEE INSTRUCTIONS ON REVERSE	-	through 12/31/2021	Page 11 of 16
NAME OF FILER			I.D. NUMBER
Apartment Association of California Southern	Cities PAC		782117
CODES: If one of the following codes accurate	ely describes the payment, you may enter the code. O	Otherwise, describe the payment	
CIP agranging passabarralia/miss	APP member communications	DAD andia sistems and association	

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 TRS staff/spouse travel, lodging, and meals POL polling and survey research ND. independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor professional services (legal, accounting) LEG legal defense VOT voter registration ЦΤ 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
Mayor Robert Garcia Officeholder Account 2016 (ID# 1359161)	CTB	Officeholder Account	1,000.00
Long Beach, CA 90802			
California Strategic Advisors	CNS		500.00
Sacramento, CA 95814			
Rex Richardson for City Council 2022 (ID# 1435795)	СТВ		400.00
Long Beach, CA 90802			
Bell, McAndrews & Hiltachk, LLP	PRO		60.00
Sacramento, CA 95814			
Bell, McAndrews & Hiltachk, LLP	PRO		300.10
Sacramento, CA 95814			
* Payments that are contributions or independent expenditures must also be summarized on	Schedule D	SUBTOT	AL\$ 2,260.10

Schedule E (Continuation Sheet) Payments Made

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

	SCHEDULE E (CONT.)
Statement covers period	CALIFORNIA 460
from07/01/2021	FORM TOO
through12/31/2021	Page of16
	I.D. NUMBER
	792117

Apartment Association of California Southern Cities PAC

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 candidate travel, lodging, and meals FIL candidate filing/ballot fees PHO phone banks staff/spouse travel, lodging, and meals FND fundraising events polling and survey research TRS ND independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor legal defense VOT voter registration LEG professional services (legal, accounting) campaign literature and mailings WEB information technology costs (internet, e-mail) பா PRT print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Edmond Group, LLC	CNS		19,020.00
Long Beach, CA 90814			
California Strategic Advisors	CNS		500.00
Sacramento, CA 95814			
Long Beach Area Chamber of Commerce PAC (ID# 1291389)	СТВ		10,000.00
Long Beach, CA 90802			
Rex Richardson Officeholder Account 2014 (ID# 1359540)	CTB	Officeholder Account	750.00
Long Beach, CA 90802			
California Strategic Advisors	CNS		500.00
Sacramento, CA 95814			
**		1	TOTAL & SO SEC SO

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

SUBTOTAL \$

30,770.00

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Statement covers period	CALIFORNIA AGO			
from07/01/2021	FORM 400			
through 12/31/2021	Page13 of16			
	I.D. NUMBER			
	782117			

Apartment Association of California Southern Cities PAC

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 candidate travel, lodging, and meals FIL candidate filing/ballot fees PHO phone banks staff/spouse travel, lodging, and meals FND fundraising events polling and survey research TRS IND independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor professional services (legal, accounting) VOT voter registration LEG legal defense WEB information technology costs (internet, e-mail) campaign literature and mailings PRT print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Bell, McAndrews & Hiltachk, LLP	PRO.	$\neg \top$		450.48
Sacramento, CA 95814				
Kevin James for City Attorney 2022 (ID# 1435508)	CTB			1,500.00
Long Beach, CA 90802				
Doug Haubert for City Prosecutor 2022 (ID# 1436895)	СТВ	+-		600.00
Long Beach, CA 90802				
)				
California Strategic Advisors	CNS	_		500.00
Sacramento, CA 95814				
Bell, McAndrews & Hiltachk, LLP	PRO			971.34
Sacramento, CA 95814				
				,
* Payments that are contributions or independent available must also be sum	an and an Oak adula F		CUD	OTAL \$ 4 021 82

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

SUBTOTAL \$

4,021.82

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

Amounts may be rounded to whole dollars.

		SCHEDOLE E (CONT.)					
Stateme	ent covers period	CALIFORNIA 460					
from	07/01/2021	FORM TOO					
through	12/31/2021	Page 14 of 16					
		I.D. NUMBER					
		782117					

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Apartment Association of California Southern Cities PAC

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

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

RAD radio-airtime and production costs CMP campaign paraphernalia/misc. MBR member communications MTG meetings and appearances RFD returned contributions CNS campaign consultants SAL campaign workers' salaries CTB contribution (explain nonmonetary)* OFC office expenses CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees candidate travel, lodging, and meals РНО phone banks TRC FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor IND legal defense professional services (legal, accounting) VOT voter registration LEG பா 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
Dawn McIntosh for Long Beach City Attorney 2022 (ID# 1441513)	CTB	T		600.00
Long Beach, CA 90802				
Edmond Group, LLC	OFC			5,945.00
Long Beach, CA 90814				
Karen Bass for Mayor 2022 (ID# 1441328)	CTB	+		600.00
Los Angeles, CA 90017				
Tim McOsker for City Council 2022 (ID# 1437071)	CTB			800.00
San Pedro, CA 90732			•	
		\perp	, , , , , , , , , , , , , , , , , , , ,	
California Strategic Advisors	CNS			500.00
Sacramento, CA 95814				
	<u> </u>			

SUBTOTAL \$

8,445.00

					SCHEDULE	
		ded	25 45 4	FC	CALIFORNIA 460	
, restrict Expenses (empara Eme)	to whole dollars.		from07/01/	2021		
SEE INSTRUCTIONS ON REVERSE			through12/31/	2021 Page.	15 of16	
NAME OF FILER				I.D. NUM	BER	
Amounts may be rounded to whole dollars. Statement covers period from 37/01/2021 Page 33 of 36.						
CODES: If one of the following codes accurately describe	es the payment, you may	enter the code. Ot	therwise, describe t	he payment.		
CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense	MTG meetings and appeara OFC office expenses PET petition circulating PHO phone banks POL polling and survey res POS postage, delivery and PRO professional services	nces earch messenger services	RFD returned contri SAL campaign work TEL t.v. or cable air TRC candidate trave TRS staff/spouse tra TSF transfer betwee VOT voter registrati	ibutions kers' salaries time and production cost el, lodging, and meals evel, lodging, and meals en committees of the sar on	me candidate/sponsor	
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)		OUTSTANDING BALANCE BEGINNING	AMOUNTINCURRED	AMOUNT PAID THIS PERIOD	OUTSTANDING BALANCE AT CLOSE	
Bell, McAndrews & Hiltachk, LLP	PRO	0.00	563.22	0.00	563.2	
Sacramento, CA 95814						
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS :	\$ 0.00\$	563.22	0.00\$	563.2	
Schedule F Summary						
1. Total accrued expenses incurred this period. (Include all S			INCU	RRED TOTALS \$ _	563.22	
				PAID TOTALS \$	0.00	
on the Summary Page, Column A, Line 9.)	ter the difference here and			NET \$	563.22 ay be a negative number	

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 07/01/2021	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE		through12/31/2021	Page16 of16
NAME OF FILER			I.D. NUMBER
Apartment Association of California Southern Cities PAC			782117
NAME OF AGENT OR INDEPENDENT CONTRACTOR		· -	
Edmond Group, LLC			
CODES. If one of the following codes accurately describes the	a naverant way may anter the and	la Othaniaa daariba tha naumant	

CC	DDES: If one of the following codes accurately describe	s the	payment, you may enter the code.	Otherwise	e, describe the payment.
CMF	campaign paraphemalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTE	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
ш	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	AM	OUNT PAID
California Target Book	OFC				1,200.00
Los Angeles, CA 90017					
Capitol Morning Report	OFC	+			1,210.00
Sacramento, CA 95814					
Capitol Track	OFC	+			3,535.00
West Sacramento, CA 95605	.,		•		
			•		
Attach additional information on appropriately labeled continuation sheets	<u> </u>		то	TAL* \$	5,945.00

^{*} 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.