Recipient Committee CALIFORNIA Campaign Statement FORM Cover Page Date of election if applicable 0 SEP 27 12 of_ Statement covers period (Month, Day, Year) For Official Use Only 7/1/2018 from MOF WEST COVER SMIY SLERK'S GFFILE 9/22/2018 11/6/2018 SEE INSTRUCTIONS ON REVERSE through 2. Type of Statement: 1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. Preelection Statement Officeholder, Candidate Controlled Committee ☐ Primarily Formed Ballot Measure Quarterly Statement State Candidate Election Committee Committee ✓ Semi-annual Statement ☐ Special Odd-Year Report O Recail O Controlled Termination Statement (Also Complete Part 5) O Sponsored (Also Complete Part 6) (Also file a Form 410 Termination) Amendment (Explain below) General Purpose Committee Primarily Formed Candidate/ O Sponsored Officeholder Committee O Small Contributor Committee (Also Complete Part 7) O Political Party/Central Committee I.D. NUMBER 3. Committee Information Treasurer(s) 1300677 COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) NAME OF TREASURER Supporters for the Fredrick Sykes Council Campaign 2018 Dana Sykes MAILING ADDRESS STREET ADDRESS (NO P.O. BOX) CITY ZIP CODE AREA CODE/PHONE STATE West Covina CA 91792 CITY STATE ZIP CODE AREA CODE/PHONE NAME OF ASSISTANT TREASURER, IF ANY West Covina CA 91792 MAILING ADDRESS (IF DIFFERENT) NO, AND STREET OR P.O. BOX MAILING ADDRESS CITY STATE ZIP CODE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS 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 f Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor Executed on ... Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on ... Signature of Controlling Officeholder, Candidate, State Measure Proponent

COVER PAGE

Recipient Committee Campaign Statement Cover Page — Part 2

CALI	FORNI DRM	A Z	160	
Page_	2	of_	12]

	ed Committee		0.	Primarily Formed Ball	ot Measure	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE		<u>.</u>		NAME OF BALLOT MEASURE				
Fredrick Sykes								
DFFICE SOUGHT OR HELD (INCLUDE LOCATION A	AND DISTRICT NUMBER	IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIO	NC		SUPPORT
West Covina Council District 5								OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND ST	REET) CITY	STATE ZIP			-11			
	West Covina	CA 91792		Identify the controlling office			easure propo	onent, ir any.
				NAME OF OFFICEHOLDER, CA	NDIDATE, OR PR	ROPONENT		
Related Committees Not Included in not included in this statement that are controlle contributions or make expenditures on behalf o	ed by you or are prima:			OFFICE SOUGHT OR HELD		D	ISTRICT NO. IF	ANY
COMMITTEE NAME	I.D. NUME	BER		Market Control of the		<u> </u>		
	CONTRO	LI ED COMMITTEE?	7.	Primarily Formed Can	didate/Offic	eholder Com	mittee List	t names of
NAME OF TREASURER		LLED COMMITTEE?	7.	Primarily Formed Can officeholder(s) or candidate(s)	didate/Offic s) for which this	ceholder Com committee is pri	mittee List imarily formed	t names of i.
	☐ YE		7.	Primarily Formed Can officeholder(s) or candidate(s	s) for which this	ceholder Com s committee is pri	marily formed	<i>1.</i>
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS	☐ YE		7.	officeholder(s) or candidate(s	s) for which this	s committee is pri	marily formed	<i>1.</i>
	S (NO P.O. BOX)		7.	officeholder(s) or candidate(s	s) for which this	s committee is pri	marily formed	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS	S (NO P.O. BOX)	S NO	7.	officeholder(s) or candidate(s NAME OF OFFICEHOLDER OR	s) for which this	OFFICE SOUGH	marily formed	SUPPOR
COMMITTEE ADDRESS STREET ADDRESS	S (NO P.O. BOX)	AREA CODE/PHONE	7.	NAME OF OFFICEHOLDER OR	s) for which this CANDIDATE CANDIDATE	OFFICE SOUGH	HT OR HELD	SUPPOR
COMMITTEE ADDRESS STREET ADDRESS	S (NO P.O. BOX)	AREA CODE/PHONE	7.	officeholder(s) or candidate(s NAME OF OFFICEHOLDER OR	s) for which this CANDIDATE CANDIDATE	OFFICE SOUGH	HT OR HELD	SUPPOR OPPOSE SUPPOR
COMMITTEE ADDRESS STREET ADDRESS CITY STATE COMMITTEE NAME	S (NO P.O. BOX) E ZIP CODE	AREA CODE/PHONE	7.	NAME OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGH	HT OR HELD HT OR HELD	SUPPOR OPPOSE SUPPOR OPPOSE SUPPOR
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COMMITTEE ADDRESS STREET ADDRESS CITY STATE COMMITTEE NAME NAME OF TREASURER	I.D. NUME CONTRO YES (NO P.O. BOX)	AREA CODE/PHONE BER LLED COMMITTEE?	7.	NAME OF OFFICEHOLDER OR NAME OF OFFICEHOLDER OR NAME OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGH	HT OR HELD HT OR HELD	SUPPOR SUPPOR OPPOSE SUPPOR SUPPOR OPPOSE

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period CALIFORNIA FORM 7/1/2018 from ... 9/22/2018 Page _ through ... I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Supporters for the Fredrick Sykes Counvil Campaign 2018 1300677

Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and
1. Monetary Contributions	\$ \frac{1300.00}{3734.00}\$\$ \tag{0.00}{2734.00}\$	\$ 2434.00 1300.00 \$ 3734.00 \$ 3734.00	General Elections 1/1 through 6/30 7/1 to Date 20. Contributions Received \$
Expenditures Made 6. Payments Made	\$ 2973.20 1100.00	\$ 3101.20 0 \$ 3101.20 1100.00 \$ 4201.20	Expenditure Limit Summary for State Candidates 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy)
Current Cash Statement 12. Beginning Cash Balance Previous Summary Page, Line 16 13. Cash Receipts Column A, Line 3 above 14. Miscellaneous Increases to Cash Schedule I, Line 4 15. Cash Payments Column A, Line 8 above 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 If this is a termination statement, Line 16 must be zero. 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 Cash Equivalents and Outstanding Debts 18. Cash Equivalents See instructions on reverse 19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$\$	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. FPPC Form 460 (Jan/2016
13. Outstanding Debts And Line 2 + Line 9 in Column 5 above	Ψ		FPPC Form 486 (all/20) FPPC Advice: advice@fppc.ca.gov (866/275-37)

www.fppc.ca.gov

Schedule A **Monetary Contributions Received**

Amounts may be rounded to whole dollars.

SCHEDULE A

Monetary	Contributions Received	to	whole dollars.	Statement cov from	ers period 2018	CAL F	FORNIA 460
	NIA ON DEVERSE			through9/2	2/2018	Page	4 of 12
NAME OF FILER	ONS ON REVERSE					I.D. NI	JMBER
Supporters	s for the Fredrick Sykes Counvil Campaign 2018					13006	677
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 CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
8/10/2018	Frank P Leon	IND COM OTH PTY	Retired	125.00			125.00
8/14/2018	Fe Jimenez	IND COM OTH PTY	Retired	100.00		AND 12 12 12 12 12 12 12 12 12 12 12 12 12	100.00
8/15/2018	M.C. Sykes	☑IND □COM □OTH □PTY □SCC	Retired	100.00			100.00
8/15/2018	Brenda Sykes	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	100.00			100.00
8/20/2018	Crestview Cadillac	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	250.00	250.00			250.00
			SUBTOTAL \$	675.00			
Schedule .	A Summary				*Con	tributor (Codes
	eceived this period – itemized monetary contributions. Il Schedule A subtotals.)		\$	2025.00			pient Committee
•	eceived this period – unitemized monetary contribution			409.00		- Other	r than PTY or SCC) (e.g., business entity)
3. Total mone	eceived this period – unitemized monetary contribution etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Col			2434.00	PTY	– Politic – Smali	al Party Contributor Committee
•	· -					FD	DC Taum 460 (lan/2016)

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

through9/22/2018	Fage 01
NAME OF FILER Supporters for the Fredrick Sykes Counvil Campaign 2018	I.D. NUMBER 1300677
DATE FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR OCCUPATION AND EMPLOYER RECEIVED THIS CAL	JLATIVE TO DATE PER ELECTION LENDAR YEAR TO DATE AN. 1 - DEC. 31) (IF REQUIRED)
8/27/2018 Chuck Kantrim Com Com Com Com Com Com Com Com Com Co	200.00
8/30/2018 Indian Hill Management Inc. Indian Hill Management Inc. IND I	200.00
9/12/2018 Alfred Williams OCOM OTH OTH OFTY OSCC Retired 100.00	100.00
9/12/2018 Michael L Stine 9/12/2018 Petired COM OTH PTY SCC Retired 200.00	200.00
9/15/2018 Dredd Breakfast Club COM COM DOTH PTY SCC	500.00
SUBTOTAL \$ 1200.00	

*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)	Amounts may	be rounded				SCHEDULE A (CONT.
Monetary	Contributions Received	to whole o	dollars.	Statement cov	ers period 2018		ornia 460
				through9/2:	2/2018	Page _	
NAME OF FILER						I.D. NŲ	MBER
Supporters	for the Fredrick Sykes Counvil Campaign 2018					13006	77
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN IND!VIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE T CALENDAR ' (JAN. 1 - DE	YEAR	PER ELECTION TO DATE (IF REQUIRED)
9/20/2018	Antonio Ramos	☑IND □COM □OTH □PTY □SCC	Retired	150.00			150.00
		IND COM OTH PTY SCC					
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					·
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTOTAL \$

150.00

*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

	A	nounts may be ro	unded				SCHE	DULE B - PART 1
Schedule B - Part 1	All	to whole dollars			Statement co	vers period	CALIFORN	IA 460
Loans Received					from7/1	/2018	FORM	400
								disk die <u>Johann</u>
SEE INSTRUCTIONS ON REVERSE					through9/	22/2018	Page	of12
NAME OF FILER	A MARIA MATERIAL MATE			I			I.D. NUMBER	
Supporters for the Fredrick Sykes Counv	il Campaign 2018						1300677	
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 PAI OR FORGIVE THIS PERIOL	N CLOSE OF THIS	PAID THIS	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Fredrick Sykes	Retired			☐ PAID				CALENDAR YEAR
	LASD Deputy			\$	<u>\$ 12000.00</u>	0.00 %	\$1 <u>2000.00</u>	\$
				FORGIVEN		RATE		PER ELECTION**
		_{\$} 12000.00	s0.00	s	_	\$	8/22/07	s
[†] ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					DATE DUE		DATE INCURRED	
Fredrick Sykes	Retired			☐ PAID				CALENDAR YEAR
	LASD Deputy			s		0.00 %	s <u>9000.00</u>	s
		0000 00	0.00	☐ FORGIVEN				PER ELECTION **
t		\$_9000.00	s0.00	\$	_ DATE DUE	\$		\$
TIND □ COM □ OTH □ PTY □ SCC								CALENDAR YEAR
Fredrick Sykes	Retired LASD Deputy			☐ PAID	s 5500.00	0.00 %	\$ 5500.00	OALLINDAK TERK
	LACE Ecpaty			\$	- <u>* - 5566.56</u>	RATE	\$ 0000.00	PER ELECTION**
		5500.00	0.00	tokalvile			8/18/09	
[†] ☑IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
		SUBTOTALS \$	0.00	\$ 0.0	0 \$ 26500.00	\$	0	
Sala dala D. Carramana		***************************************				(Enter (e) on Schedule E, Line	3)	
Schedule B Summary				¢		Contiduo E, Enio	,	
Loans received this period (Total Column (b) plus unitemized loan	ns of less than \$100.)			·····Ψ		_		
•				_			†Contributor Codes IND – Individual	;
2. Loans paid or forgiven this period				\$		I	COM – Recipient C	ommittee
(Total Column (c) plus loans under \$1 (Include loans paid by a third party that		edule A.)					other than) OTH Other (e.g.,	PTY or SCC) business entity)
,							PTY - Political Par	ty
3. Net change this period. (Subtract Lir	ne 2 from Line 1.)			.NET \$		_ ['	SCC – Small Contr	ibutor Committee

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

** If required.

Enter the net here and on the Summary Page, Column A, Line 2.

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

(May be a negative number)

	A -	t	do.d				SCHE	DULE B - PART 1
Schedule B – Part 1	Ап	nounts may be rou to whole dollars			Statement cov	•	CALIFORN	A 460
oans Received					from7/1/	2018	FORM	
					through 9/2	2/2018	Page8	of12
EE INSTRUCTIONS ON REVERSE AME OF FILER					tarough		I.D. NUMBER	OI
Supporters for the Fredrick Sykes Counv	il Campaign 2018						1300677	
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	(°) AMOUNT PAID OR FORGIVE! THIS PERIOD	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
redrick Sykes	Retired LASD Deputy			PAID \$	\$ 2000.00	0.00_% RATE	s 2000.00	\$PER ELECTION**
☑ IND □ COM □ OTH □ PTY □ SCC		s_2000.00	s	\$	DATE DUE	s	928/09 DATE INCURRED	s
redrick Sykes	Retired LASD Deputy			PAID S FORGIVEN	s <u>5000.00</u>	0.00 % RATE	s 5000.00	\$ PER ELECTION**
☑IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$ 5000.00	\$0.00	\$	DATE DUE	s	10/30/09 DATE INCURRED	\$
Fredrick Sykes	Retired LASD Deputy			PAID \$	\$ <u>1000.00</u>	0.00 %	s 1000.00	\$ PER ELECTION**
☑ IND □ COM □ OTH □ PTY □ SCC		ş <u>1000.00</u>	\$	FORGIVEN S	DATE DUE	\$	8/12/11 DATE INCURRED	S
Address Addres		SUBTOTALS \$	0.00 \$	0.00	\$ 8000.00	\$ (
Schedule B Summary						(Enter (e) on Schedule E, Line 3)	
. Loans received this period (Total Column (b) plus unitemized loar				\$	AND THE STREET OF THE STREET O	(†	Contributor Codes	***************************************
 Loans paid or forgiven this period (Total Column (c) plus loans under \$1 (Include loans paid by a third party the 	00 paid or forgiven.)			\$	MANUSINA DA DE LA COLOR DE LA		ND – Individual COM – Recipient C (other than I CTH – Other (e.g., PTY – Political Part	PTY or SCC) business entity)

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

** If required.

Enter the net here and on the Summary Page, Column A, Line 2.

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(May be a negative number)

SCC - Small Contributor Committee

	Δn	nounts may be ro	unded				SCHE	DULE B - PART 1
Schedule B – Part 1	Zu	to whole dollars			Statement co	vers period	CALIFORN	^{IA} 460
Loans Received					from7/1	/2018	FORM	400
SEE INSTRUCTIONS ON REVERSE					through9/3	22/2018	Page 9	of12
NAME OF FILER						MIN.	I.D. NUMBER	
Supporters for the Fredrick Sykes Counv	il Campaign 2018	•					1300677	
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	(a) AMOUNT RECEIVED THIS PERIOD	(¢) AMOUNT PAI OR FORGIVE THIS PERIO	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Fredrick Sykes	Retired		.,	☐ PAID	***************************************			CALENDAR YEAR
	LASD Deputy			\$	_ <u>\$ 2500.00</u>	0.00 %	\$ <u>2500.00</u>	\$
				FORGIVEN		RATE		PER ELECTION**
[†] ☑IND □ COM □ OTH □ PTY □ SCC		\$ 2500.00	s	\$	DATE DUE	\$	10/13/11 DATE INCURRED	\$
Fredrick Sykes	Retired			☐ PAID				CALENDAR YEAR
Todrick Cykos	LASD Deputy			\$	s 1000.00	0.00 %	s 1000.00	\$
				☐ FORGIVEN		RATE		PER ELECTION**
		s_1000.00	s0.00	\$	_	s	10/14/15	s
DIND COM OTH PTY SCC					DATE DUE		DATE INCURRED	<u> </u>
Dana Sykes	Retired			☐ PAID				CALENDAR YEAR
				\$	s 1300.00	0.00 %	s 1300.00	\$
				FORGIVEN		RATE		PER ELECTION**
		_{\$} 1300.00	\$0.00	\$		\$	8/15/18	s
DIND COM OTH PTY SCC					DATE DUE		DATE INCURRED	
		SUBTOTALS \$	0.00	0.0	0 \$ 4800.00)	
Schedule B Summary						(Enter (e) on Schedule E, Line 3)	
Loans received this period				\$	1300.00	-		
(Total Column (b) plus unitemized loar						<u>_</u>	Contributor Codes	
0				•	0.00	1,	ND – Individual	,
 Loans paid or forgiven this period (Total Column (c) plus loans under \$1 		****************	,.,	—	U.UU	- c	OM - Recipient C	
(Include loans paid by a third party that		edule A.)					otner tnan) (OTH – Other (e.g.,	PTY or SCC) business entity)
		•		NET A	4000.00		PTY – Political Part SCC – Small Contri	
Net change this period. (Subtract Lin Enter the net here and on the Summa	ry Page, Column A. Line 2				1300.00 (May be a negative number)	- (ibutor Committee
Line lie let her allu uli lie Julillia	ry raye, column A, Line 2.							

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

** If required.

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

Schedule E Payments Made	Amounts may b to whole do			State	ment covers period	CALIF FO	SCHEDULE ORNIA 460 RM
SEE INSTRUCTIONS ON REVERSE				through	9/22/2018		10 of 12
NAME OF FILER Supporters for the Fredrick Sykes Counvil Campaign 201	8					1.D. NUM 130067	
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member com MTG meetings and OFC office expens PET petition circul PHO phone banks POL polling and s POS postage, deliv PRO professional s PRT print ads	munications d appearance ses lating urvey researd very and mes	s h senger services	RAD radion RFD returned RFD ret	cribe the payment. o airtime and production rned contributions paign workers' salaries or cable airtime and prod didate travel, lodging, an it/spouse travel, lodging, sfer between committee or registration rmation technology costs	luction costs d meals and meals s of the same	e candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR .	DESCRIPTION OF	PAYMENT		AMOUNT PAID
COGS South Signs		LIT	Lawn Signs				1336.10
COGS South Signs		LIT	Lawn Signs				1296.10
Cops Voter Guide		LIT	Pamphlet				341.00
* Payments that are contributions or independent expenditures must also b	e summarized on Sche	dule D.		4456666	SU	BTOTAL \$	
Schedule E Summary	***************************************				- ALABAMAN AND ALIAN AND AND AND AND AND AND AND AND AND A		
1. Itemized payments made this period. (Include all Schedu	le E subtotals.)					\$	2973.20
2. Unitemized payments made this period of under \$100							•
3. Total interest paid this period on loans. (Enter amount fro	m Schedule B, Par	t 1, Colum	n (e).)			\$	0

Schedule E (Continuation Sheet) Payments Made SEE INSTRUCTIONS ON REVERSE	Amounts may be rounded to whole dollars.	Statement covers period 7/1/2018 through9/22/2018	SCHEDULE E (CONT.) CALIFORNIA 460 FORM Page 11 of 12
NAME OF FILER Supporters for the Fredrick Sykes Counvil Campaign 2018			I.D. NUMBER 1300677
CODES: If one of the following codes accurately describes CMP campaign paraphernalia/misc. 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 LIT campaign literature and mailings	the payment, you may enter the code. Othe MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) print ads	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production TRC candidate travel, lodging, at Staff/spouse travel, lodging,	costs duction costs and meals and meals s of the same candidate/sponsor

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

CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
LIT		80.44

SUBTOTAL \$

			SCHEDULE F				
Schedule F Accrued Expenses (Unpaid Bills)	Amounts may be rounded to whole dollars.	Statement covers period from 7/1/2018	california 460 FORM				
SEE INSTRUCTIONS ON REVERSE		through 9/22/2018	— Page 12 of 12				
NAME OF FILER	- Landau Manaya Carana and Anna		I.D. NUMBER				
Supporters for the Fredrick Sykes Counvil Campaign 2018			1300677				
CODES: If one of the following codes accurately describes	s the payment, you may enter the code	e. Otherwise, describe the paymer	nt.				
CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production	on costs				
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions					
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salarie	L. campaign workers' salaries				
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and pro	t.v. or cable airtime and production costs				

POS postage, delivery and messenger services PRO professional services (legal, accounting)

PHO phone banks

POL polling and survey research

LEG legal defense LIT campaign literature and mailings	PRO professional services (legal, accounting) PRT print ads		VOT voter registration 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
Hi Speed Printing	CMP	130.00	130.00	0	130.00
Political Data	СМР	600.00	600.00	0	600.00
Gold Star Graphix	СМР	370.00	370.00	0	370.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$	\$ \$		S

Schedule F Summary

candidate filing/ballot fees

independent expenditure supporting/opposing others (explain)*

FND fundraising events

FIL.

1	 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.) 	3 \$	1100.00
2	 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.)	s \$	0
3	3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)	Γ\$	1100.00

TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor