

Recipient Committee Campaign Statement Cover Page

Date Stamp

CALIFORNIA FORM 460

Page 1 of 17

For Official Use Only

Indexed 1/24/2020

RECEIVED FEBRUARY 24 2020 10:29 AM

| | |
|---|--|
| <p style="text-align: center;">Statement covers period</p> <p>from <u>01/01/2020</u></p> <p>through <u>01/18/2020</u></p> | <p>Date of election if applicable: (Month, Day, Year)</p> <p style="text-align: center;"><u>03/03/2020</u></p> |
|---|--|

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

3. Committee Information

I.D. NUMBER: 1422088

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Team Lili Bosse 2020 for Beverly Hills City Council

STREET ADDRESS (NO P.O. BOX)
269 S. Beverly Dr., Ste 220,

| | | | |
|----------------------|-----------|--------------|-------------------|
| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
| <u>Beverly Hills</u> | <u>CA</u> | <u>90212</u> | <u>3109636900</u> |

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

| | | | |
|------|-------|----------|-----------------|
| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|------|-------|----------|-----------------|

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER
Ron Stone

MAILING ADDRESS
269 S. Beverly Dr., Ste 697

| | | | |
|----------------------|-----------|--------------|-------------------|
| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
| <u>Beverly Hills</u> | <u>CA</u> | <u>90212</u> | <u>3105581134</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 <u>January 23, 2020</u> <small>Date</small> | By <u>[Signature]</u> <small>Signature of Treasurer or Assistant Treasurer</small> |
| Executed on <u>January 23, 2020</u> <small>Date</small> | By <u>[Signature]</u> <small>Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor</small> |
| Executed on _____ <small>Date</small> | By _____ <small>Signature of Controlling Officeholder, Candidate, State Measure Proponent</small> |
| Executed on _____ <small>Date</small> | By _____ <small>Signature of Controlling Officeholder, Candidate, State Measure Proponent</small> |

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

5. Officeholder or Candidate Controlled Committee

| | | | | |
|--|---------------|-------|-------|--|
| NAME OF OFFICEHOLDER OR CANDIDATE | | | | |
| Lili Bosse | | | | |
| OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) | | | | |
| Beverly Hills City Council | | | | |
| RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) | CITY | STATE | ZIP | |
| 269 S. Beverly Dr., Ste 220, | Beverly Hills | CA | 90212 | |

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 |
| | | |

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 01/01/2020 through 01/18/2020 | CALIFORNIA FORM 460 |
| | Page 3 of 17 |
| | I.D. NUMBER 1422088 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Team Lili Bosse 2020 for Beverly Hills City Council

Contributions Received

| | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|--|--|--|
| 1. Monetary Contributions..... Schedule A, Line 3 | \$ 12254.00 | \$ 12254.00 |
| 2. Loans Received..... Schedule B, Line 3 | | |
| 3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1 + 2 | \$ 12254.00 | \$ 12254.00 |
| 4. Nonmonetary Contributions..... Schedule C, Line 3 | 2317.00 | 2317.00 |
| 5. TOTAL CONTRIBUTIONS RECEIVED.....Add Lines 3 + 4 | \$ 14571.00 | \$ 14571.00 |

**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 TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|--|--|--|
| 6. Payments Made..... Schedule E, Line 4 | \$ 15238.00 | \$ 15238.00 |
| 7. Loans Made..... Schedule H, Line 3 | | |
| 8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7 | \$ 15238.00 | \$ 15238.00 |
| 9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3 | 2672.00 | 2672.00 |
| 10. Nonmonetary Adjustment..... Schedule C, Line 3 | | |
| 11. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10 | \$ 17910.00 | \$ 17910.00 |

**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 |
| 03 / 03 / 20 | \$ 24471.00 |
| ____ / ____ / ____ | \$ _____ |

Current Cash Statement

| | |
|---|-------------|
| 12. Beginning Cash Balance..... Previous Summary Page, Line 16 | \$ 37233.00 |
| 13. Cash Receipts..... Column A, Line 3 above | 12254.00 |
| 14. Miscellaneous Increases to Cash..... Schedule I, Line 4 | |
| 15. Cash Payments..... Column A, Line 8 above | 15238.00 |
| 16. ENDING CASH BALANCE.....Add Lines 12 + 13 + 14, then subtract Line 15 | \$ 34249.00 |

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

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.

| | |
|--|----------|
| 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 | \$ _____ |

**Schedule A
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A

| | |
|--|--------------------------------|
| Statement covers period from <u>01/01/2020</u> through <u>01/18/2020</u> | CALIFORNIA FORM 460 |
| | Page <u>4</u> of <u>17</u> |

SEE INSTRUCTIONS ON REVERSE

| | |
|--|------------------------|
| NAME OF FILER Team Lili Bosse 2020 for Beverly Hills City Council | I.D. NUMBER 1422088 |
|--|------------------------|

| 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) |
|---------------|---|---|---|-----------------------------|--|---------------------------------------|
| 1/14/2020 | Barbara Lazaroff 11400 W Olympic Blvd Los Angeles, CA 90064 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Restaurateur Self | 450.00 | | |
| 1/14/2020 | Benjamin & Jila Yadegar 101 N Robertson Blvd Suite 204 Beverly Hills, CA 90211 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Executive Tarzana Five, LLC. | 250.00 | | |
| 1/14/2020 | James A. Nathan 718 N Linden Drive Beverly Hills Ca 90210 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Executive James A Nathan Foundation | 300.00 | | |
| 1/14/2020 | Melody Doff-Legget 9701 Wilshire Blvd Beverly Hills Ca 90212 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Business Owner Self | 100.00 | | |
| 1/14/2020 | Maryam Maddahi 620 Endrino Place Beverly Hills Ca 90210 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Retired | 450.00 | | |

SUBTOTAL \$ 1550.00

Schedule A Summary

| | |
|--|--------------------------|
| 1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) | \$ 12050.00 |
| 2. Amount received this period – unitemized monetary contributions of less than \$100 | \$ 204.00 |
| 3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)..... | TOTAL \$ 12254.00 |

***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)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|-------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2020 | |
| through | 01/18/2020 | Page <u>5</u> of <u>17</u> |

| | |
|--|------------------------|
| NAME OF FILER Team Lili Bosse 2020 for Beverly Hills City Council | I.D. NUMBER 1422088 |
|--|------------------------|

| 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) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 1/2/20 | Diane Shader Smith 427 South El Camino Drive Beverly Hills, CA 90212 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Communication Self | 450.00 | | |
| 1/2/20 | Mark Smith 427 South El Camino Drive Beverly Hills, CA 90212 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Attorney Sharma, Smith and Gray | 450.00 | | |
| 1/3/20 | David Nazarian 1801 Century Park West 5th Floor Century City, CA 90067 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Executive Nimes Capital | 450.00 | | |
| 1/3/20 | Adam Nathanson 9952 Santa Monica Blvd. Beverly Hills, CA 90212 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | President Mapleton Investment | 450.00 | | |
| 1/3/20 | Lauren Nathanson 10372 Strathmore Dr. Los Angeles | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Homemaker | 450.00 | | |
| SUBTOTAL \$ | | | | 2250.00 | | |

*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)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|-------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2020 | |
| through | 01/18/2020 | Page <u>6</u> of <u>17</u> |

| | |
|---|-------------------------------|
| NAME OF FILER Team Lili Bosse 2020 for Beverly Hills City Council | I.D. NUMBER 1422088 |
|---|-------------------------------|

| 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) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 1/3/2020 | Lori Weinstock 10355 Summer Holly Los Angeles, CA 90077 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Therapist Self | 250.00 | | |
| 1/4/2020 | Danny Pezzotta 630 N Screenland Dr Burbank, CA 91505 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Principal Planet Bravo | 100.00 | | |
| 1/6/2020 | Kurt Rappaport 8383 Wilshire Blvd. Suite 240 Beverly Hills, CA 90211 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | President Westside Estate Agency | 450.00 | | |
| 1/6/2020 | Rochelle Maize 614 N. Alta Dr. Beverly Hills, CA 90210 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Sales Person Normound and Assoc | 250.00 | | |
| 1/7/2020 | Jennifer Clough 600 Clinton Place Beverly Hills, CA 90210 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Executive Holdsworth Holdings | 250.00 | | |
| SUBTOTAL \$ | | | | 1300.00 | | |

***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)
Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|-------------------------|------------|--------------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2020 | |
| through | 01/18/2020 | Page <u>7</u> of <u>17</u> |

| | |
|--|------------------------|
| NAME OF FILER Team Lili Bosse 2020 for Beverly Hills City Council | I.D. NUMBER 1422088 |
|--|------------------------|

| 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) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 1/7/2020 | Cathryn Fogarty 600 Clinton Place Beverly Hills, CA 90210 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Property Manager Holdsworth Holdings | 250.00 | | |
| 1/8/2020 | Bok Hyi Lee 244 South Rodeo Dr Beverly Hills, CA 90212 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Retired | 450.00 | | |
| 1/8/2020 | Wendy Meltzer 1001 North Crescent Drive Beverly Hills, CA 90210 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Homemaker | 250.00 | | |
| 1/8/2020 | Shelley Curtis-Litvack 627 North Palm Drive Beverly Hills, CA 90210 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Producer Self | 450.00 | | |
| 1/7/2020 | Patrick Fogarty 600 Clinton Place Beverly Hills, CA 90210 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Realtor Hooray Henry Ventures | 250.00 | | |
| SUBTOTAL \$ | | | | 1650.00 | | |

*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)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|-------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2020 | |
| through | 01/18/2020 | Page <u>8</u> of <u>17</u> |

| | |
|--|------------------------|
| NAME OF FILER Team Lili Bosse 2020 for Beverly Hills City Council | I.D. NUMBER 1422088 |
|--|------------------------|

| 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) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 1/9/2020 | Marc Nathanson 9952 Santa Monica Blvd Beverly Hills, CA 90212 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Chairman Mapleton Investment | 450.00 | | |
| 1/13/2020 | Marc Teren 213 South Reeves Drive Beverly Hills, CA 90212 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Executive Divy, Inc. | 100.00 | | |
| 1/13/2020 | Jodie Robinson 181 S Beverly Dr Beverly Hills, CA 90212 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Business Owner Self | 100.00 | | |
| 1/13/2020 | Shaun Robinson PO Box 5609 Sherman Oaks, CA 91413 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Philanthropist SHAUN Foundation | 250.00 | | |
| 1/13/2020 | Katy Saei 1020 Napoli Dr Pacific Palisades, CA 90272 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self Employed | 450.00 | | |
| SUBTOTAL \$ | | | | 1350.00 | | |

*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)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | |
|---|--------------------------------|
| Statement covers period from <u>01/01/2020</u> | CALIFORNIA FORM 460 |
| through <u>01/18/2020</u> | |
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| | |
|---|-------------------------------|
| NAME OF FILER Team Lili Bosse 2020 for Beverly Hills City Council | I.D. NUMBER 1422088 |
|---|-------------------------------|

| 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) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 1/14/2020 | Rick Wolfen 919 North Roxbury Drive Beverly Hills, CA 90210 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PIY <input type="checkbox"/> SCC | Executive Rock Asset Management | 450.00 | | |
| 1/15/2020 | Margaret Levy 612 N. Whittier Drive Beverly Hills, CA 90210 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Volunteer | 250.00 | | |
| 1/15/2020 | Myra Nourmand 904 N. Whittier Drive Beverly Hills, CA 90210 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Realtor Nourmand & Associates | 150.00 | | |
| 1/14/2020 | Bernard Kamine 523 W. 6th Street Los Angeles, CA 90014 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Attorney Kamine Law PC | 250.00 | | |
| 1/14/2020 | Danna Ruscha 35 S. Venice Blvd Venice, CA 90291 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Retired | 300.00 | | |
| SUBTOTAL \$ | | | | 1400.00 | | |

*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)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|-------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2020 | |
| through | 01/18/2020 | Page <u>10</u> of <u>17</u> |

| | |
|--|------------------------|
| NAME OF FILER Team Lili Bosse 2020 for Beverly Hills City Council | I.D. NUMBER 1422088 |
|--|------------------------|

| 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) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 1/14/2020 | Kathlene Reims 241 S Camden Drive Beverly Hills, CA 90212 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Retired | 450.00 | | |
| 1/14/2020 | Margaret Levy 621 N Whittier Dr Beverly Hills, CA 90210 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Attorney Manatt, Phelps & Phillips | 100.00 | | |
| 1/14/2020 | Joel Reims 1925 Fox Hills Dr Los Angeles CA 90025 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Retired | 450.00 | | |
| 1/14/2020 | Marjaneh Amirshahi 713 N Camden Dr Beverly Hills, CA 90210 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Consultant Key Management Consulting | 200.00 | | |
| 1/14/2020 | Nicole Mutchnik 26541 Agoura Rd Suite 101 Calabasas, CA 91302 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Homemaker | 450.00 | | |
| SUBTOTAL \$ | | | | 1650.00 | | |

*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)
Monetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|-------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2020 | |
| through | 01/18/2020 | Page <u>11</u> of <u>17</u> |

| | |
|--|------------------------|
| NAME OF FILER Team Lili Bosse 2020 for Beverly Hills City Council | I.D. NUMBER 1422088 |
|--|------------------------|

| 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) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 1/14/2020 | Alan Mutchnik 26541 Agoura Rd Suite 101 Calabasas, CA 91302 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Executive Harbor Freight Tools | 450.00 | | |
| 1/14/2020 | Byron Lazaroff 11400 W Olympic Blvd Los Angeles, CA 90064 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Restaurateur Self | 450.00 | | |
| | | <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 \$ | | | | 900.00 | | |

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 (other than PTY or SCC)
 OTH – Other (e.g., business entity)
 PTY – Political Party
 SCC – Small Contributor Committee

**Schedule C
Nonmonetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE C

| | |
|--|--------------------------------|
| Statement covers period from <u>01/01/2020</u> through <u>01/18/2020</u> | CALIFORNIA FORM 460 |
| | Page <u>12</u> of <u>17</u> |

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Team Lili Bosse 2020 for Beverly Hills City Council

I.D. NUMBER
1422088

| 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) | DESCRIPTION OF GOODS OR SERVICES | AMOUNT/ FAIR MARKET VALUE | CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|--|---|--|----------------------------------|---------------------------|---|------------------------------------|
| 1/5/20 | Joshua Zad 490 N. Beverly Dr. Beverly Hills, CA 90210 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Executive Alfred Coffee | Donuts | 250.00 | | |
| 1/5/20 | Kreestol Lee 9330 W. Pico Blvd. Los Angeles, CA 90035 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Executive Sonny Alexander Flowers | Flowers | 325.00 | | |
| 1/5/20 | Shallom Berkman 267 S Beverly Dr, Beverly Hills, CA 90212 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Executive Urth Catte | Cakes | 200.00 | | |
| 1/14/20 | Todd Okum 447 S. Rodeo Dr. Beverly Hills, CA 90212 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Executive Picoa | Home Event | 242.00 | | |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 1017.00

Schedule C Summary

- Amount received this period – itemized nonmonetary contributions.
(Include all Schedule C subtotals.).....\$ 2227.00
- Amount received this period – unitemized nonmonetary contributions of less than \$100\$ 90.00
- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.).....**TOTAL \$** 2317.00

*Contributor Codes
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(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

**Schedule C
Nonmonetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE C

| | | |
|--|--|--------------------------------|
| Statement covers period from <u>01/01/2020</u> through <u>01/18/2020</u> | | CALIFORNIA FORM 460 |
| | | |
| NAME OF FILER Team Lili Bosse 2020 for Beverly Hills City Council | | I.D. NUMBER 1422088 |

SEE INSTRUCTIONS ON REVERSE

| 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) | DESCRIPTION OF GOODS OR SERVICES | AMOUNT/ FAIR MARKET VALUE | CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|--|---|--|----------------------------------|---------------------------|---|------------------------------------|
| 1/14/20 | Manuel Bergher 224 S. Maple Drive Beverly Hills, CA 90211 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Executive Essential Management, Inc | Home Event | 242.00 | | |
| 1/14/20 | Camille Bergher 224 S. Maple Drive Beverly Hills, CA 90211 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Creative Director Topson Downs | Home Event | 242.00 | | |
| 1/14/20 | Douglas Galen 255 S Bedford Dr, Beverly Hills, CA 90212 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Executive Galen M.D, | Home Event | 242.00 | | |
| 1/14/20 | Laurie Okum 447 S. Rodeo Dr. Beverly Hills, CA 90212 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Psychologist Self | Home Event | 242.00 | | |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 968.00

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions.
(Include all Schedule C subtotals.).....\$ _____
2. Amount received this period – unitemized nonmonetary contributions of less than \$100\$ _____
3. Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.).....**TOTAL \$** _____

*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 C
Nonmonetary Contributions Received**

Amounts may be rounded
to whole dollars.

SCHEDULE C

| | |
|--|--------------------------------|
| Statement covers period from <u>01/01/2020</u> through <u>01/18/2020</u> | CALIFORNIA FORM 460 |
| | Page <u>14</u> of <u>17</u> |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Team Lili Bosse 2020 for Beverly Hills City Council

I.D. NUMBER

1422088

| 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) | DESCRIPTION OF GOODS OR SERVICES | AMOUNT/ FAIR MARKET VALUE | CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|--|---|--|----------------------------------|---------------------------|---|------------------------------------|
| 1/14/20 | Jody Galen 255 S Bedford Dr, Beverly Hills, CA 90212 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Housewife | Home Event | 242.00 | | |
| | | <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 | | | | | |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 242.00

Schedule C Summary

- Amount received this period – itemized nonmonetary contributions.
(Include all Schedule C subtotals.).....\$ _____
- Amount received this period – unitemized nonmonetary contributions of less than \$100\$ _____
- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.).....**TOTAL \$** _____

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 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.

| | | |
|-------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2020 | |
| through | 01/18/2020 | Page 15 of 17 |
| I.D. NUMBER | | 1422088 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Team Lili Bosse 2020 for Beverly Hills City Council

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 |
|--|---------|------------------------|-------------|
| Balloon Celebration 1311 Montana Ave. C Santa Monica, CA 90403 | FND | | 584.00 |
| The Nosh of Beverly Hills 9689 Santa Monica Blvd Beverly Hills, CA 90210 | FND | | 5108.00 |
| Town and Country 7725 Airport Business Park Way Van Nuys, California 91406 | FND | | 750.00 |

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

SUBTOTAL \$ 6442.00

Schedule E Summary

| | |
|---|--------------------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.)..... | \$ 15214.00 |
| 2. Unitemized payments made this period of under \$100..... | \$ 24.00 |
| 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)..... | \$ |
| 4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)..... | TOTAL \$ 15238.00 |

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

Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

| | |
|--|----------------------------|
| Statement covers period from 01/01/2020 through 01/18/2020 | CALIFORNIA FORM 460 |
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| | I.D. NUMBER 1422088 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Team Lili Bosse 2020 for Beverly Hills City Council

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 |
|---|---------|-----------------------------|-------------|
| Pfeiffer Design 1156 Menlo Drive Altadena CA 91001 | PRO | | 1350.00 |
| Political Data Inc 825 S Victory Blvd Burbank, CA 91502 | CMP | | 900.00 |
| Mitchell Publishing PO Box 331292 Los Angeles, CA 90033 | CMP | | 3354.00 |
| Political Data Inc 825 S Victory Blvd Burbank, CA 91502 | | Credit Card Processing Fees | 222.00 |
| Bullseye Marketing 9400 Oso Avenue Chatsworth, CA 91311 | CMP | | 2946.00 |

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

SUBTOTAL \$ 8772.00

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

Amounts may be rounded
to whole dollars.

| | |
|--|-----------------------------|
| Statement covers period from <u>01/01/2020</u> through <u>01/18/2020</u> | CALIFORNIA FORM 460 |
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| | I.D. NUMBER 1422088 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Team Lili Bosse 2020 for Beverly Hills City Council

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 | PFT petition circulating | TFI 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 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 |
|--|--------------------------------|---|------------------------------------|---|--|
| Bullseye Marketing 9400 Oso Avenue Chatsworth, CA 91311 | LIT | 2672.00 | | | 2672.00 |
| | | | | | |
| | | | | | |
| SUBTOTALS \$ | | | \$ | \$ | \$ |

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

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 \$** 2672.00
- 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 \$** 2672.00
May be a negative number