

Recipient Committee
Campaign Statement
Cover Page

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DATE Stamp FEB 01 2021
CITY CLERK
CITY OF SAN FERNANDO
For Official Use Only
1 of 19
460

Statement covers period
from 09/20/2020
through 10/17/2020

Date of Election if applicable
11 / 3 / 2020
(Month, Day, Year)

1. Type of Recipient Committee

- ☒ Officeholder, Candidate Controlled Committee
☐ State Candidate Election Committee
☐ Recall
☐ General Purpose Committee
Sponsored
Small Contributor Committee
Political Party/Central Committee
☐ Primarily Formed Ballot Measure Committee
Controlled
Sponsored
☐ Primarily Formed Candidate/Officeholder Committee

2. Type of Statement

- ☒ Pre-election Statement
☒ Semi-Annual Statement
☐ Termination Statement
☒ Amendment
☐ Quarterly Statement
☐ Special Odd-Year Statement
☐ Supplemental Pre-election Statement - Attach Form 495

To amend Sec. E and Summary Page.

3. Committee Information

I.D. Number 1432968

COMMITTEE NAME
Families for Cindy Montanez for City Council 2020

STREET ADDRESS (NO PO BOX)

CITY STATE ZIP CODE AREA CODE/PHONE
CA 91436

MAILING ADDRESS (IF DIFFERENT)

CITY STATE ZIP CODE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER
Jane Leiderman

STREET ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
CA 91436

NAME OF ASSISTANT TREASURER, IF ANY

STREET 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 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 2/1/21

Executed on 1/31/2021

Executed on

Executed on

By SIGNATURE OF TREASURER OR ASSISTANT TREASURER

By SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

By SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

By SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Recipient Committee
Campaign Statement
Cover Page - Part 2

COVER PAGE - PART 2

CALIFORNIA
FORM 460

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Statement covers period

from 09/20/2020

through 10/17/2020

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Cindy Montanez

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

City Council Member - District 3 San Fernando Valley

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)

CITY

STATE

ZIP

Van Nuys

CA

91405

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

Cindy Montanez For LA City Council
2013

I.D. NUMBER

1354210

NAME OF TREASURER

Jane Leiderman

CONTROLLED COMMITTEE?

☒ YES

☐ NO

COMMITTEE STREET ADDRESS (NO P.O. BOX)

CITY

STATE

ZIP CODE

AREA CODE/PHONE

CA

91436

COMMITTEE NAME

Cindy Montanez For City Council
2013-General

I.D. NUMBER

1358024

NAME OF TREASURER

Jane Leiderman

CONTROLLED COMMITTEE?

☒ YES

☐ NO

COMMITTEE STREET ADDRESS (NO P.O. BOX)

CITY

STATE

ZIP CODE

AREA CODE/PHONE

CA

91436

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER

JURISDICTION

☐ SUPPORT

☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER OR 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

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

Recipient Committee
Campaign Statement
Cover Page - Part 2 (Continuation Page)

COVER PAGE - PART 2

CALIFORNIA
FORM **460**

Statement covers period
from 09/20/2020
through 10/17/2020

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NAME OF FILER FAMILIES FOR CINDY MONTANEZ FOR CITY COUNCIL 2020

I.D. NUMBER
1432968

5. Officeholder or Candidate Controlled Committee - Related Committees Not Included in this Statement

COMMITTEE NAME

Families For Cindy Montanez for LA City Council 2015

I.D. NUMBER

1373949

NAME OF TREASURER

Jane Leiderman

CONTROLLED COMMITTEE ?



YES



NO

COMMITTEE STREET ADDRESS (NO P.O. BOX)

[REDACTED]

CITY

Encino

STATE

CA

ZIP CODE

91436

AREA CODE / PHONE

[REDACTED]

Cover Page Note

To amen Sch. E

Campaign Disclosure Statement Summary Page

Statement covers period	CALIFORNIA FORM 460
from 09/20/2020	
through 10/17/2020	
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NAME OF FILER Families for Cindy Montanez for City Council 2020

I.D. NUMBER
1432968

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
Contributions Received		
1. Monetary Contributions Schedule A, Line 3	\$ 16,023.00	\$ 17,523.00
2. Loans Received Schedule B, Line 3	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 16,023.00	\$ 17,523.00
4. Nonmonetary Contributions Schedule C, Line 3	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 16,023.00	\$ 17,523.00

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		
6. Payments Made Schedule E, Line 4	\$ 13,365.21	\$ 13,365.21
7. Loans Made Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 13,365.21	\$ 13,365.21
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	3,017.07	3,017.07
10. Nonmonetary Adjustment Schedule C, Line 3	0.00	0.00
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 16,382.28	\$ 16,382.28

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made *
(If Subject to Voluntary Expenditure Limits)

_____ \$ _____
_____ \$ _____

* Amounts in this Section may be different from amounts reported in Column B.

Current Cash Statement

12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 1,500.00
13. Cash Receipts Column A, Line 3 above	16,023.00
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00
15. Cash Payments Column A, Line 8 above	13,365.21
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 4,157.79
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ 0.00

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	\$ 0.00
19. Outstanding Debts Add Lines 2 + Line 9 in Column B above	\$ 3,017.07

Schedule A Monetary Contributions Received

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER Families for Cindy Montanez for City Council 2020

I.D. NUMBER
1432968

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/06/2020	Roberto Barragan [REDACTED]	IND	Executive Director CCEDA	100.00	100.00	
10/12/2020	Jason Benavidez [REDACTED]	IND	Developer The Ranch Companies	100.00	100.00	
09/30/2020	Kenneth Bentley [REDACTED]	IND	Retired n/a	100.00	100.00	
10/03/2020	Mukhles Bhuiyan [REDACTED]	IND	Engineer City of Los Angeles	500.00	500.00	

SUBTOTAL \$ 800.00

Schedule A Summary

- Amount received this period - itemized contributions
(Includes all Schedule A subtotals) \$ 15,515.00
- Amount received this period - unitemized \$ 508.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A Line 1) **TOTAL \$** 16,023.00

**** Contributor Codes**
 IND - Individual
 COM - Recipient Committee (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

FPPC Form 460 - (JAN/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule A (Continuation Sheet)
Monetary Contributions Received

SCHEDULE A

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I.D. NUMBER
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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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/29/2020	Philip Boesch [REDACTED]	IND	Attorney Boesch Law Group	500.00	500.00	
09/28/2020	Larisa Cespedes [REDACTED]	IND	Gov't Relations Miller Cesepedes & Associates	500.00	500.00	
10/01/2020	Denis Couturier [REDACTED]	IND	Academic Adminisration UCLA	500.00	500.00	
09/28/2020	Dabbah Haddad & Suleiman [REDACTED]	OTH		500.00	500.00	
SUBTOTAL \$				2,000.00		

** Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER Families for Cindy Montanez for City Council 2020

I.D. NUMBER
1432968

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/30/2020	Dominic Adam DeLaTorre [REDACTED]	IND	Emergency Department Technician Stanford Healthcare	440.00	440.00	
09/29/2020	Martha Escutia [REDACTED] 1	IND	Vice President USC	100.00	100.00	
10/01/2020	Rodney Franks [REDACTED]	IND	Consultant Rodney Franks	500.00	500.00	
09/30/2020	Jose Hernandez [REDACTED]	IND	Consultant IDEATE California	500.00	500.00	

SUBTOTAL \$ 1,540.00

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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NAME OF FILER Families for Cindy Montanez for City Council 2020

I.D. NUMBER
1432968

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/30/2020	Ernesto G. Hidalgo [REDACTED]	IND	President Civic Impact Group	500.00	500.00	
10/05/2020	Kent Kauss [REDACTED]	IND	Regional VP San Diego Gas & Electric	250.00	250.00	
10/07/2020	Gideon Kracov [REDACTED]	IND	Attorney Gideon Kracov	200.00	200.00	
09/21/2020	LA Taxi Cooperative Inc. DBA Yellow Cab [REDACTED]	OTH		500.00	500.00	

SUBTOTAL \$ 1,450.00

** Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER Families for Cindy Montanez for City Council 2020

I.D. NUMBER
1432968

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/30/2020	Maribelle Landa [REDACTED]	IND	Coordinator Optum Health	100.00	100.00	
09/29/2020	George Leddy [REDACTED]	IND	Professor L.A. Community College District	200.00	200.00	
10/05/2020	Julio Llerenas [REDACTED]	IND	Businessperson Julio Llerenas	200.00	500.00	
09/30/2020	Julio Llerenas [REDACTED]	IND	Businessperson Julio Llerenas	300.00	500.00	

SUBTOTAL \$ 800.00

** Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

SCHEDULE A

Statement covers period from 09/20/2020 through 10/17/2020		CALIFORNIA FORM 460
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NAME OF FILER Families for Cindy Montanez for City Council 2020		I.D. NUMBER 1432968

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/17/2020	Local Union No.11 International Brotherhood of Electrical Workers [REDACTED]	COM	ID No. 822725	500.00	500.00	
09/30/2020	Baltazar R. Martinez [REDACTED]	IND	Diversity Development Director Farmer's Insurance	100.00	100.00	
09/29/2020	Efren Martinez [REDACTED]	IND	Consultant Efren Martinez	500.00	500.00	
09/24/2020	MediWaste Disposal LLC [REDACTED]	OTH		500.00	500.00	
SUBTOTAL \$				1,600.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

SCHEDULE A

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NAME OF FILER Families for Cindy Montanez for City Council 2020

I.D. NUMBER
1432968

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/29/2020	Gabriel Monares [REDACTED]	IND	President The Monares Group	250.00	250.00	
10/16/2020	David Nahai [REDACTED]	IND	Attorney David Nahai	500.00	500.00	
09/25/2020	Irma Padilla [REDACTED]	IND	Retired n/a	500.00	500.00	
09/20/2020	Lorraine Paskett [REDACTED]	IND	Owner Lorraine Paskett	500.00	500.00	

SUBTOTAL \$ 1,750.00

** Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

SCHEDULE A

Statement covers period from 09/20/2020 through 10/17/2020		CALIFORNIA FORM 460
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NAME OF FILER Families for Cindy Montanez for City Council 2020		I.D. NUMBER 1432968

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/30/2020	Prima Waste [REDACTED]	OTH		500.00	500.00	
09/29/2020	Thomas Safran [REDACTED]	IND	Real Estate Thomas Safran & Associates	500.00	500.00	
10/10/2020	Marco Santana [REDACTED]	IND	Vice President San Fernando Valley Young Democrats	250.00	250.00	
09/29/2020	Timea Schafferova [REDACTED]	IND	Unemployed N.A.	500.00	500.00	

SUBTOTAL \$ 1,750.00

** Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

SCHEDULE A

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NAME OF FILER Families for Cindy Montanez for City Council 2020

I.D. NUMBER
1432968

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/10/2020	Daniel Schnur [REDACTED]	IND	Educator USC	250.00	250.00	
10/13/2020	Service Employees International Union Local 721 [REDACTED]	COM	ID No. 743794	500.00	500.00	
09/29/2020	Tim Sexton [REDACTED]	IND	Consultant Make Good Group	500.00	500.00	
09/29/2020	Angelica Solis-Montero [REDACTED]	IND	Executive Director Alliance for a Better Community	100.00	100.00	

SUBTOTAL \$ 1,350.00

** Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

SCHEDULE A

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NAME OF FILER Families for Cindy Montanez for City Council 2020

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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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/17/2020	Jose Solorio [REDACTED]	IND	Councilman City of Santa Ana	125.00	125.00	
10/05/2020	Karen B Strelitz [REDACTED]	IND	Executive Vice President CA Metal X	500.00	500.00	
09/30/2020	Tim Strelitz [REDACTED]	IND	Executive CMX	500.00	500.00	
09/27/2020	Kevin Taylor [REDACTED]	IND	Marketing Consultant Kevin Taylor	100.00	100.00	

SUBTOTAL \$

1,225.00

** Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

SCHEDULE A

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NAME OF FILER Families for Cindy Montanez for City Council 2020

I.D. NUMBER
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09/29/2020	Jane Usher [REDACTED]	IND	Attorney Musick Peeler & Garrett	250.00	250.00	
09/25/2020	Valley Vista Services [REDACTED] 8	OTH		500.00	500.00	
10/07/2020	Ira Ziering [REDACTED]	IND	Retired n/a	500.00	500.00	

SUBTOTAL \$ 1,250.00

** Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

Schedule E
Payments Made

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	09/20/2020	
through	10/17/2020	Page 16 of 19
NAME OF FILER Families for Cindy Montanez for City Council 2020		I.D. NUMBER 1432968

CODES: If one of the following 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 production costs
FIL candidate filing / ballot fees	PHO phone banks	TRC candidate travel, lodging and meals
FND fundraising expenses	POL polling and survey research	TRS staff/spouse travel, lodging and meals
IND independent expenditures supporting/opposing others	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	CODE or	DESCRIPTION OF PAYMENT	AMOUNT PAID
Bryson Gillette LLC [REDACTED]	CNS		3,000.00
Bryson Gillette LLC [REDACTED]	LIT		4,196.25
Bryson Gillette LLC [REDACTED]	LIT		4,717.52
SUBTOTAL \$			11,913.77

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 13,268.21
2. Unitemized payments made this period of under \$100	\$ 97.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ 0.00
4. Total payments made this period. (Add Line 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$ 13,365.21

Schedule E (Continuation Sheet)
Payments Made

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	09/20/2020	
through	10/17/2020	Page 17 of 19
NAME OF FILER Families for Cindy Montanez for City Council 2020		I.D. NUMBER 1432968

CODES: If one of the following 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 production costs
FIL candidate filing / ballot fees	PHO phone banks	TRC candidate travel, lodging and meals
FND fundraising expenses	POL polling and survey research	TRS staff/spouse travel, lodging and meals
IND independent expenditures supporting/opposing others	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	CODE or	DESCRIPTION OF PAYMENT	AMOUNTPAID
Political Data Inc. [REDACTED]	LIT		1,200.00
Premiere Political Communications [REDACTED]	PHO		154.44

SUBTOTAL \$ 1,354.44

Schedule F
Accrued Expenses (Unpaid Bills)

SCHEDULE F

Statement covers period from 09/20/2020 through 10/17/2020		CALIFORNIA FORM 460
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NAME OF FILER Families for Cindy Montanez for City Council 2020		I.D. NUMBER 1432968

CODES: If one of the following 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 production costs
FIL candidate filing / ballot fees	PHO phone banks	TRC candidate travel, lodging and meals
FND fundraising expenses	POL polling and survey research	TRS staff/spouse travel, lodging and meals
IND independent expenditures supporting/opposing others	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	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
American Express [REDACTED]	Various credit card purchases. See Schedule G for Credit Card Payees meeting threshold.	0.00	3,017.07	0.00	3,017.07

SUBTOTALS \$ 0.00 \$ 3,017.07 \$ 0.00 \$ 3,017.07

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 \$ 3,017.07**
- 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 \$ 3,017.07**

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	09/20/2020	
through	10/17/2020	Page 19 of 19

NAME OF FILER Families for Cindy Montanez for City Council 2020

I.D. NUMBER
1432968

NAME OF AGENT OR INDEPENDENT CONTRACTOR
American Express

CODES: If one of the following 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
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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)

* Payments that re contributions or independent expenditures are also summarized on Schedule D

NAME AND ADDRESS OF PAYEE OR CREDITOR	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
CampaignRep.com [REDACTED]	WEB		500.00
Mitchell Publishing Inc. [REDACTED]	LIT		2,502.08

TOTAL \$ 3,002.08