2020-2

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Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

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Date Stamp 10/21/2020 RECEIVED BY LOS ANGELES COUNTY 2020 OCT 21 PM 3:51 CAMPAIGN FINANCE

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CALIFORNIA FORM 460

Page 1 of 11

For Official Use Only G11309

SEE INSTRUCTIONS ON REVERSE

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

Date of election if applicable: (Month, Day, Year) 11/03/2020

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- [ ] Officeholder, Candidate Controlled Committee
  - ◯ State Candidate Election Committee
  - ◯ Recall (Also Complete Part 5)
- [ ] General Purpose Committee
  - ◯ Sponsored
  - ◯ Small Contributor Committee
  - ◯ Political Party/Central Committee
- [X] Primarily Formed Ballot Measure Committee
  - ◯ Controlled
  - ◯ Sponsored (Also Complete Part 6)
- [ ] Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)

2. Type of Statement:

- [X] Preelection Statement
- [ ] Semi-annual Statement
- [ ] Termination Statement (Also file a Form 410 Termination)
- [ ] Amendment (Explain below)
- [ ] Quarterly Statement
- [ ] Special Odd-Year Report
- [ ] Supplemental Preelection Statement - Attach Form 495

3. Committee Information

I.D. NUMBER: 1431845

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE): Committee for Duarte Schools-Yes on S 2020

STREET ADDRESS (NO P.O. BOX): 1191 Huntington Drive #355

CITY: Duarte STATE: CA ZIP CODE: 91010 AREA CODE/PHONE: (626) 203-3039

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

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS: bpatt5352@gmail.com

Treasurer(s)

NAME OF TREASURER: Brad Patterson

MAILING ADDRESS: 1191 Huntington Dr #355

CITY: Duarte STATE: CA ZIP CODE: 91010 AREA CODE/PHONE: (626) 203-3039

NAME OF ASSISTANT TREASURER, IF ANY:

MAILING ADDRESS:

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS: bpatt5352@gmail.com

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 10/18/2020 (Date) By Brad Patterson (Signature of Treasurer or Assistant Treasurer)

Executed on 10/18/2020 (Date) By Ken Bell (Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor)

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

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Recipient Committee Campaign Statement Cover Page — Part 2

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

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

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

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? ☐ YES ☐ 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? ☐ YES ☐ 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
Duarte Unified School District Classroom Repair/Upgrade Student Achievement

BALLOT NO. OR LETTER	JURISDICTION	☒ SUPPORT ☐ OPPOSE
S	Duarte Unified School	

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	☐ 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

Attach continuation sheets if necessary

Campaign Disclosure Statement
Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

CALIFORNIA FORM **460**

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Committee for Duarte Schools-Yes on S 2020

I.D. NUMBER: 1431845

Contributions Received

		Column A (TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES))	Column B (CALENDAR YEAR TOTAL TO DATE)
1. Monetary Contributions	Schedule A, Line 3	$ 52,150.00	$ 52,150.00
2. Loans Received	Schedule B, Line 3	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	$ 52,150.00	$ 52,150.00
4. Nonmonetary Contributions	Schedule C, Line 3	0.00	106.00
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	$ 52,150.00	$ 52,256.00

Expenditures Made

6. Payments Made	Schedule E, Line 4	$ 30,127.70	$ 30,127.70
7. Loans Made	Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	$ 30,127.70	$ 30,127.70
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	1,900.00	1,900.00
10. Nonmonetary Adjustment	Schedule C, Line 3	0.00	106.00
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	$ 32,027.70	$ 32,133.70

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	$ 0.00
13. Cash Receipts	Column A, Line 3 above	52,150.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4	0.00
15. Cash Payments	Column A, Line 8 above	30,127.70
16. **ENDING CASH BALANCE**	Add Lines 12 + 13 + 14, then subtract Line 15	$ 22,022.30

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

17. LOAN GUARANTEES RECEIVED — Schedule B, Part 2 — $ 0.00

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	$ 0.00
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	$ 1,900.00

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).

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	$	$

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
/ /	$
/ /	$

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

Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A

CALIFORNIA FORM **460**

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Committee for Duarte Schools-Yes on S 2020

I.D. NUMBER: 1431845

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)
09/21/2020	Bradley Patterson 226 Star Pine Ct Azusa, CA 91702	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Retired Retired	100.00	100.00	G2020 $100.00
09/28/2020	Castlerock Environmental, Inc. 10040 Painter Ave. Santa Fe Springs, CA 90670-3016	[ ] IND [ ] COM [X] OTH [ ] PTY [ ] SCC		1,500.00	1,500.00	G2020 $1,500.00
09/28/2020	Charlie's Fence Co 23210 Park Rose Ave. Duarte, CA 91010	[ ] IND [ ] COM [X] OTH [ ] PTY [ ] SCC		250.00	250.00	G2020 $250.00
09/28/2020	DLR Group 6457 Frances St. Ste 200 Omaha, NE 68106	[ ] IND [ ] COM [X] OTH [ ] PTY [ ] SCC		7,500.00	7,500.00	G2020 $7,500.00
28/2020	Engineous Group, Inc. 751 N. Fair Oaks Ave Ste 201 Pasadena, CA 91103	[ ] IND [ ] COM [X] OTH [ ] PTY [ ] SCC		1,500.00	1,500.00	G2020 $1,500.00
			SUBTOTAL $	10,850.00		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 52,150.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL $** 52,150.00

*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

Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA FORM 460

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

NAME OF FILER
Committee for Duarte Schools-Yes on S 2020

I.D. NUMBER
1431845

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)
09/28/2020	KNA Structural Engineers, Inc. 9931 Muirlands Blvd Irvine, CA 92618	☐IND ☐COM ☒OTH ☐PTY ☐SCC		1,500.00	1,500.00	G2020 $1,500.00
09/28/2020	Little Diversified Achitectural Consultants Inc. 1300 Dove St Ste 100 Newport Beach, CA 92660	☐IND ☐COM ☒OTH ☐PTY ☐SCC		2,000.00	7,000.00	G2020 $7,000.00
09/28/2020	Little Diversified Achitectural Consultants Inc. 1300 Dove St Ste 100 Newport Beach, CA 92660	☐IND ☐COM ☒OTH ☐PTY ☐SCC		5,000.00	7,000.00	G2020 $7,000.00
09/28/2020	Meteor 690 NE 23rd Ave. Gainesville, FL 32609	☐IND ☐COM ☒OTH ☐PTY ☐SCC		1,000.00	1,000.00	G2020 $1,000.00
09/28/2020	Sandy Pringle Associates, Inc. 1108 Satori Ave. Ste 300 Torrance, CA 90501	☐IND ☐COM ☒OTH ☐PTY ☐SCC		1,000.00	1,000.00	G2020 $1,000.00
			SUBTOTAL $	10,500.00		

*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.)

CALIFORNIA FORM 460

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

NAME OF FILER
Committee for Duarte Schools-Yes on S 2020

I.D. NUMBER
1431845

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)
09/29/2020	AALRR 12800 Center Court Dr. Cerritos, CA 90703	☐IND ☐COM ☒OTH ☐PTY ☐SCC		6,500.00	6,500.00	G2020 $6,500.00
09/29/2020	Dave Bang Associates, Inc PO Box 1088 Tustin, CA 92781	☐IND ☐COM ☒OTH ☐PTY ☐SCC		200.00	200.00	G2020 $200.00
09/29/2020	Encorp 16700 Valley View Ave. La Mirada, CA 90638	☐IND ☐COM ☒OTH ☐PTY ☐SCC		1,000.00	1,000.00	G2020 $1,000.00
09/29/2020	Westgroup Designs, Inc. 19520 Jamboree d Ste 100 Irvine, CA 92612	☐IND ☐COM ☒OTH ☐PTY ☐SCC		5,000.00	5,000.00	G2020 $5,000.00
09/30/2020	Orbach, Huff, Suarez & Henderson LLP 1901 Avenue Of The Stars ste 575 Los Angeles, CA 90067	☐IND ☐COM ☒OTH ☐PTY ☐SCC		2,500.00	2,500.00	G2020 $2,500.00
			SUBTOTAL $	15,200.00		

*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.)

CALIFORNIA FORM 460

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

NAME OF FILER
Committee for Duarte Schools-Yes on S 2020

I.D. NUMBER
1431845

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)
10/02/2020	Davis Demographics 11850 Pierce St. Ste 200 Riverside, CA 92505	☐IND ☐COM ☒OTH ☐PTY ☐SCC		200.00	200.00	G2020 $200.00
10/04/2020	Erickson-Hall Construction Co. 500 Corporate Dr. Escondido, CA 92029	☐IND ☐COM ☒OTH ☐PTY ☐SCC		10,000.00	10,000.00	G2020 $10,000.00
10/07/2020	Harik Construction Inc. 175 W Arrow Hwy Glendora, CA 91740	☐IND ☐COM ☒OTH ☐PTY ☐SCC		1,000.00	1,000.00	G2020 $1,000.00
10/07/2020	Leighton Consulting Inc. 17781 Cowan Irvine, CA 92614	☐IND ☐COM ☒OTH ☐PTY ☐SCC		700.00	700.00	G2020 $700.00
10/07/2020	Amin Salari 26753 Sandburn Pl Stevenson Ranch, CA 91381	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Chelf Operating Officer Fonder-Dalari, Inc	2,500.00	2,500.00	G2020 $2,500.00
			SUBTOTAL $	14,400.00		

*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.)

CALIFORNIA FORM 460

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

NAME OF FILER
Committee for Duarte Schools-Yes on S 2020

I.D. NUMBER
1431845

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)
10/10/2020	Floyd Auten Electric Inc 403 W. Fleetwood Place PO Box 772 Glendora, CA 91740	☐IND ☐COM ☒OTH ☐PTY ☐SCC		1,000.00	1,000.00	G2020 $1,000.00
10/16/2020	Robert Arsenian 1525 Fishburn Ave Los Angeles, CA 90063	☒IND ☐COM ☐OTH ☐PTY ☐SCC	President Southland Environmental Services	200.00	200.00	G2020 $200.00
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
			SUBTOTAL $	1,200.00		

*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 E
Payments Made

Amounts may be rounded to whole dollars.

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

SCHEDULE E
CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Committee for Duarte Schools-Yes on S 2020

I.D. NUMBER: 1431845

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

CMP campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)*
CVC civic donations
[illegible] candidate filing/ballot fees
[illegible] fundraising events
IND independent expenditure supporting/opposing others (explain)*
LEG legal defense
LIT campaign literature and mailings
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)
PRT print ads
RAD radio airtime and production costs
RFD returned contributions
SAL campaign workers' salaries
TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
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
FedEx 3875 Airways, Module H3 Department 4634 Memphis, TN 38116	CMP	Banners	566.44
Data Genomix 10514 Dupont Ave. Cleveland, OH 44108	CMP	Online Advertising	4,117.00
DSPolitical [illegible]60 H St NW #200 [illegible]shington, DC 20005	CMP	Media Buy Agreements 20014	5,883.14

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

SUBTOTAL $ 10,566.58

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 30,077.70
2. Unitemized payments made this period of under $100 ..... $ 50.00
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 Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ..... TOTAL $ 30,127.70

Schedule E
(Continuation Sheet)
Payments Made

Amounts may be rounded to whole dollars.

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

SCHEDULE E (CONT.)

CALIFORNIA FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Committee for Duarte Schools-Yes on S 2020

I.D. NUMBER: 1431845

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
[illegible]	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
[illegible]	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
Clifford Moss 5111 Telegraph Ave #307 Oakland, CA 94609		digital data	1,900.00
Clifford Moss 5111 Telegraph Ave #307 Oakland, CA 94609	CMP	Yes on S Yard Signs	2,445.12
Clifford Moss 5111 Telegraph Ave #307 Oakland, CA 94609	OFC	Zoom Account Fee	166.00
Clifford Moss 5111 Telegraph Ave #307 Oakland, CA 94609	CNS	Campaign Service Fee	15,000.00

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

SUBTOTAL $ 19,511.12

Schedule F
Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

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

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Committee for Duarte Schools-Yes on S 2020

I.D. NUMBER: 1431845

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

CMP campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)*
CVC civic donations
FIL candidate filing/ballot fees
FUN fundraising events
IE independent expenditure supporting/opposing others (explain)*
LEG legal defense
LIT campaign literature and mailings
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)
PRT print ads
RAD radio airtime and production costs
RFD returned contributions
SAL campaign workers' salaries
TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
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
Clifford Moss 5111 Telegraph Ave #307 Oakland, CA 94609	Data Management	0.00	1,900.00	0.00	1,900.00
SUBTOTALS $		0.00$	1,900.00$	0.00$	1,900.00

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

Schedule F Summary

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.) ..... **INCURRED TOTALS $** 1,900.00
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.) ..... **PAID TOTALS $** 0.00
3. Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... **NET $** 1,900.00 (May be a negative number)