Recipient Committee Campaign Statement Cover Page			Date Stamp	cover page california 460 form
	Statement covers period 10/14/2019	Date of election if applicable: (Month, Day, Year)		For Official Use Only  Malked ##
SEE INSTRUCTIONS ON REVERSE	through12/31/2019	03/03/2020	EDITORS AND SECURITY OF THE PROPERTY OF THE PR	1/3//2020
<ul> <li>Type of Recipient Committee: All Committees - Col</li> <li>✓ Officeholder, Candidate Controlled Committee</li> </ul>		2. Type of Statement:  Preelection Statement		
State Candidate Election Committee  Recall (Also Complete Part 5)  General Purpose Committee  Sponsored Small Contributor Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored Use Complete Part 6) Primarily Formed Candidate/ Officeholder Committee Use Complete Part 7)	Semi-annual Statement Termination Statement (Also file a Form 410 Te	☐ S <sub>I</sub>	uarterly Statement pecial Odd-Year Report
Committee information	NUMBER 422088	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  Team Lili Bosse 2020 for Beverly Hills City Council		NAME OF TREASURER Ron Stone		
		MAILING ADDRESS 269 S. Beverly Dr., Ste	607	
STREET ADDRESS (NO P.O. BOX)		CITY CITY		CODE AREA CODE/PHONE
269 S. Beverly Dr., Ste 220		Beverly Hills	CA 90	212 3105581134
CITY STATE ZIP COI Beverly Hills CA 90212		NAME OF ASSISTANT TREASURER	R, IF ANY	
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX	<u> </u>	MAILING ADDRESS		
CITY STATE ZIP COL	DE AREA CODE/PHONE	СІТҮ	STATE ZIP	CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRES	S	
I have used all reasonable diligence in preparing and reviewir certify under penalty of perjury under the laws of the State of   Executed on   O1/31/2020  Date  Executed on  Date	California that the foregoing is true and	knowledge the information contained correct.  Sonature of Treasurer or Assistant or Treasurer or Treasurer or Assistant or Treasurer or Treasurer or Assistant or Treasurer or	Treasurer	
Executed on	By	Signature of Controlling Officeholder, Candidate, S	tate Measure Proponent	
Executed on	Ву			

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Date

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

	COVE	R PAGE	E - PART 2	2
	FORN	IA 🗸	160	
	ORM			
Page _	2	_ of	23	

NAME OF OFFICEHOLDER OR CANDIDATE  LIII BOSSE  DEVERY HILLS COUNCIL  RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP 269 S. Beverly DT., 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  COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)  TOTAL STATE ZIP CODE AREA CODE/PHONE  NAME OF TREASURER  CONTROLLED COMMITTEE?  COMMITTEE NAME  I.D. NUMBER  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  DISTRICT NO. IF ANY  OFFICE SOUGHT OR HELD  DISTRICT NO. IF ANY  OFFICE SOUGHT OR HELD  Support of the statement that be primarily formed.  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  Support of POPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  Support of POPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  Support of POPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  Support of POPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  Support of POPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  Support of POPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  Support of POPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  Support of POPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  Support of POPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  Support of POPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  OFFICE SOUGHT OR HEL	Officeholder or Candidate Controlled Comm	ittee	6.	Primarily Formed Ballot	t Measure Commi	ttee	
DEFICE 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 OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
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  CONTROLLED COMMITTEE?  YES NO  COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)  COMMITTEE NAME  I.D. NUMBER  I.D.	Lili Bosse						
Beverly Hills City Council  RESIDENTIALBUSINESS 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     I.D. NUMBER     OFFICE SOUGHT OR HELD   OFFICE SOUGHT OR HELD   SUPPORT   OPPOSE	OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRIC	T NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTION		SUPPORT
Identify the controlling officeholder, candidate, or state measure proponent, if any.   NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT	Beverly Hills City Council						
Related Committees Not Included in this Statement: List any 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    LD. NUMBER	RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) C	ITY 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	269 S. Beverly Dr., Ste 220 Beverly	Hills, CA 90212		-	-	•	oponent, if any.
To fincluded 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				NAME OF OFFICEHOLDER, CAND	DIDATE, OR PROPONENT	•	
COMMITTEE NAME  I.D. NUMBER  NAME OF TREASURER  CONTROLLED COMMITTEE?  YES NO  COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)  TO 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  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  NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD SUPPORT OPPOSE  NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD SUPPORT OPPOSE							
NAME OF TREASURER  CONTROLLED COMMITTEE?  YES NO  COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)  TOMMITTEE NAME  COMMITTEE NAME  L.D. NUMBER  TOMMITTEE NAME  L.D. NUMBER  TOMMITTEE NAME  L.D. NUMBER  L.D. NUMBER  L.D. NUMBER  L.D. NUMBER  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  SUPPORT OPPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  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  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  SUPPORT OPPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  OPPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  OPPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  OPPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  OPPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  OPPOSE  NAME OF OFFICEHOLDER OR CANDIDA				OFFICE SOUGHT OR HELD		DISTRICT N	O. IF ANY
NAME OF TREASURER  CONTROLLED COMMITTEE?  YES NO  COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)  TO STATE ZIP CODE AREA CODE/PHONE  COMMITTEE NAME  I.D. NUMBER  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  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  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  SUPPORT OPPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  OPPOSE  NAME OF OFFICEHOLDER OR CANDIDATE							
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)  CITY STATE ZIP CODE AREA CODE/PHONE  COMMITTEE NAME  I.D. NUMBER  NAME OF OFFICEHOLDER OR CANDIDATE  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  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  SUPPORT  OPPOSE  OPPOSE  OPPOSE  OPPOSE  OPPOSE	COMMITTEE NAME	I.D. NUMBER					
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)  CITY STATE ZIP CODE AREA CODE/PHONE  COMMITTEE NAME  I.D. NUMBER  NAME OF OFFICEHOLDER OR CANDIDATE  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  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  SUPPORT  OPPOSE  OPPOSE  OPPOSE  OPPOSE  OPPOSE							
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)  NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD 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  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 OPPOSE  NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD OPPOSE	NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Candi officeholder(s) or candidate(s) :	idate/Officeholde for which this committe	r Committee e is primarily for	List names of med.
CITY STATE ZIP CODE AREA CODE/PHONE  COMMITTEE NAME  I.D. NUMBER  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  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  SUPPORT OPPOSE  OFFICE SOUGHT OR HELD  OFFICE SOUGHT OR HELD  OPPOSE  OPPOSE		YES NO		.,			
NAME OF OFFICEHOLDER OR CANDIDATE  COMMITTEE NAME  I.D. NUMBER  I.D. NUMBER  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  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  OPPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  OPPOSE	COMMITTEE ADDRESS STREET ADDRESS (NO P.O. B	OX)		NAME OF OFFICEHOLDER OR CA	NDIDATE OFFICE	SOUGHT OR HEL	
COMMITTEE NAME  I.D. NUMBER  I.D. NUMBER  NAME OF OFFICEHOLDER OR CANDIDATE  NAME OF OFFICE SOUGHT OR HELD  SUPPORT OPPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  NAME OF 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  OPPOSE  OPPOSE							OPPOSE
COMMITTEE NAME  I.D. NUMBER  NAME OF OFFICEHOLDER OR CANDIDATE  NAME OF OFFICE SOUGHT OR HELD  SUPPORT OPPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  NAME OF OFFICE SOUGHT OR HELD  SUPPORT OPPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  SUPPORT OPPOSE	CITY STATE ZIP C	ODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR CA	NDIDATE OFFICE	SOUGHT OR HEL	
NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  SUPPORT  OPPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  SUPPORT  SUPPORT  OPPOSE  OPPOSE  OPPOSE  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  OPPOSE  OPPOSE							
NAME OF TREASURER  CONTROLLED COMMITTEE?  YES NO  COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  SUPPORT  OPPOSE	COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR CA	NDIDATE OFFICE	SOUGHT OR HELL	<u> </u>
NAME OF TREASURER  CONTROLLED COMMITTEE?  YES NO  COMMITTEE ADDRESS (NO P.O. BOX)  NAME OF OFFICEHOLDER OR CANDIDATE  OFFICE SOUGHT OR HELD  SUPPORT  OPPOSE				TO AND OF THE PROPERTY OF THE	OI TOE	OCCOM CIVILL	SUPPORT
□ YES □ NO  COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)  NAME OF OFFICEHOLDER OR CANDIDATE □ SUPPORT □ OPPOSE □ OPPOSE	NAME OF TREASURER	CONTROLLED COMMITTEE?					
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	TO THE STATE OF TH			NAME OF OFFICEHOLDER OR CA	NDIDATE OFFICE	SOUGHT OR HELI	☐ SUPPORT
CITY STATE ZIP CODE AREA CODE/PHONE	COMMITTEE ADDRESS STREET ADDRESS (NO P.O. B						OPPOSE
CITY STATE ZIP CODE AREA CODE/BHONE	·						
CITY STATE ZIP CODE AREA CODE/PHONE Attach continuation sheets if necessary	CITY STATE ZIP C	ODE AREA CODE/PHONE		Attac	h continuation sheet	s if necessarv	

## **Campaign Disclosure Statement Summary Page**

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Team Lili Bosse 2020 for Beverly Hills City Council 1422088 Column A Column B Calendar Year Summary for Candidates **Contributions Received** CALENDAR YEAR TOTAL TO DATE TOTAL THIS PERIOD Running in Both the State Primary and (FROM ATTACHED SCHEDULES) **General Elections** 26323 1. Monetary Contributions ...... Schedule A, Line 3 \$ \_\_\_\_\_ 1/1 through 6/30 7/1 to Date 20000 20000 46323 20. Contributions 46323 Received 4. Nonmonetary Contributions...... Schedule C, Line 3 21. Expenditures \$\_\_\_\_\_\$\_\_\_ 46323 46323 Made **Expenditures Made Expenditure Limit Summary for State** 9090 9090 6. Payments Made...... Schedule E, Line 4 \$ \_\_\_\_\_ **Candidates** 7. Loans Made...... Schedule H. Line 3 22. Cumulative Expenditures Made\* 9090 9090 8. SUBTOTAL CASH PAYMENTS...... Add Lines 6+7 \$ \_\_\_\_\_ (If Subject to Voluntary Expenditure Limit) 1350 1350 Date of Election Total to Date (mm/dd/vv) 10440 10440 9090 03 / 20 **Current Cash Statement** 12. Beginning Cash Balance ...... Previous Summary Page, Line 16 \$ To calculate Column B. 46323 add amounts in Column A to the corresponding \*Amounts in this section may be different from amounts 14. Miscellaneous Increases to Cash ...... Schedule I. Line 4 amounts from Column B reported in Column B. 9090 of your last report. Some amounts in Column A may 37233 16. ENDING CASH BALANCE ......Add Lines 12 + 13 + 14, then subtract Line 15 \$ be negative figures that should be subtracted from If this is a termination statement, Line 16 must be zero. previous period amounts. If this is the first report being filed for this calendar year, 17. LOAN GUARANTEES RECEIVED...... Schedule B. Part 2 \$ only carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). 18. Cash Equivalents...... See instructions on reverse \$ 

### Schedule A **Monetary Contributions Received**

Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period

Monetary Contributions Received		το	whole donars.	Statement cov	14/2019 CALIFORNIA A FORM		IFORNIA 460 ORM
SEE INSTRUCTIO	NS ON REVERSE			through12/3	31/2019	Page	4 of 23
NAME OF FILER Team Lili E	Bosse 2020 for Beverly Hills City Council			<u> </u>		I.D. NI 1422	JMBER 088
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR N (JAN. 1 - DEC	<b>EAR</b>	PER ELECTION TO DATE (IF REQUIRED)
11/14/2019	Donna Ellman	☑IND □COM □OTH □PTY □SCC	Retired	100			
11/14/2019	Pouran Nazarian	☑IND □COM □OTH □PTY □SCC	Philanthropist	100			
11/14/2019	Frank Morse	☑IND □COM □OTH □PTY □SCC	Real Estate	450			
11/14/2019	Alan L. Isaacman	☑IND □COM □OTH □PTY □SCC	Lawyer	125			
11/14/2019	Debbie Isaacman	☑IND □COM □OTH □PTY □SCC	Homemaker	125			
			SUBTOTAL \$	900			
	A Summary				- 1	tributor (	
l. Amount red (Include all	ceived this period – itemized monetary contributions. Schedule A subtotals.)		\$	26200	1		ient Committee
•	ceived this period – unitemized monetary contribution		·	123			than PTY or SCC) (e.g., business entity)
B. Total mone	tary contributions received this period. 1 and 2. Enter here and on the Summary Page, Col			26323		– Small	Contributor Committee

### **Schedule A (Continuation Sheet)**

Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received	to whole dollars.	Statement covers period	CALIFORNIA 460
		from10/14/2019	Page 5 of 23
NAME OF FILER			I.D. NUMBER
Team Lili Bosse 2020 for Beverly Hills City Council			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)	
11/18/2019	Hon. Rachelle Marcus 707 N Elm Drive Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Retired	100			
11/18/2019	Branko Placik 511 N Rodeo Dr Beverly Hills, CA 90210	☑IND □ COM □ OTH □ PTY □ SCC	Medical Doctor Self	100			
11/18/2019	Teresa Shulze 432 N Oakhurst Dr #305 Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Office Manager Schulze Haynes Loevenguth & Co., Inc	100			
11/18/2019	Ronnie Kassorla 305 S. Bedford Dr Beverly Hills, CA 90212	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Real Estate Agent Nelson Shelton Real Estate	100			
11/18/2019	Beth Sieroty Meltzer 727 N. Camden Dr Beverly Hills, CA 90210	☑ IND □ COM □ OTH □ PTY □ SCC	Mental Health Consultant Self	100			
SUBTOTAL \$ 500							

\*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

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

**CALIFORNIA** 

**FORM** 

Statement covers period

10/14/2019

NAME OF FILER	osse 2020 for Beverly Hills City Council			through12/3	1/2019	Page _	MBER
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
11/18/2019	Bobbie Sapper 516 Foothill Road Beverly Hills, CA 90210	☑IND □ COM □ OTH □ PTY □ SCC	Retired	100			
11/18/2019	Alan Berlin 1033 Wallace Ridge Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Insurance Agent Jules Berlin Agency, Inc.	100			
11/18/2019	Molly Barnes 474 S Rodeo Dr Beverly Hills, CA 90212	☑IND □COM □OTH □PTY □SCC	Art Dealer & Consultant Self	100			
11/18/2019	Sharon Messer 1020 Cove Way Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Retired	100			
11/18/2019	Steven B. Stabler 622 N Beverly Drive Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	CEO and President Commotion Pictures	100			

**SUBTOTAL \$** 

500

\*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

**FORM** 

Statement covers period

250

1050

from

10/14/2019

				through12/3	1/2019	Page_	7 of 23
NAME OF FILER						I.D. NL	IMBER
Team Lili Bo	osse 2020 for Beverly Hills City Council					14220	088
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
11/18/2019	Gary Briskman 511 N Sierra Beverly Hills, CA 90210	☑ IND □ COM □ OTH □ PTY □ SCC	Retired	150			
11/18/2019	Herbert Reston 1136 Calle Vista Dr Beverly Hills, CA 90210	☑ IND □ COM □ OTH □ PTY □ SCC	Builder/Developer Self	150			
11/18/2019	Donna Bernstein 1222 Coldwater Canyon Dr Beverly Hills, CA 90210	☑ IND □ COM □ OTH □ PTY □ SCC	Attorney Children's Court	250			
11/18/2019	Melanie Cook 807 N Linden Dr. Beverly Hills, CA 90210	☑ IND □ COM □ OTH □ PTY □ SCC	Attorney Ziffren Brittenham	250			

**Business Executive** 

Laserod Technologies

**SUBTOTAL \$** 

☑ IND □ COM □ OTH

□ PTY □ SCC

\*Contributor Codes

IND - Individual

11/18/2019

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

Chuck Moffitt

137 S Bedford Dr.

Beverly Hills, CA 90212

PTY - Political Party

SCC - Small Contributor Committee

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

www.fppc.ca.gov

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

**CALIFORNIA** 

**FORM** 

Statement covers period

from

10/14/2019

NAME OF FILER				through12/3	1/2019	Page _	
	osse 2020 for Beverly Hills City Council					14220	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
11/18/2019	Laurie Okum 447 S Rodeo Dr. Beverly Hills, CA 90212	☑IND □COM □OTH □PTY □SCC	MFT Self	125			
11/18/2019	Todd Okum 447 S Rodeo Dr. Beverly Hills, CA 90212	☑IND □COM □OTH □PTY □SCC	Real Estate Investments Portland Investment Co	125			
11/18/2019	Dr. Douglas Galen 255 S Bedford Dr Beverly Hills, CA 90212	☑IND □COM □OTH □PTY □SCC	Oral Surgeon Self	250			
11/18/2019	Tina Sinatra 1021 Wallace Ridge Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Actress, Producer Self	300			
11/18/2019	Michael Libow 516 N. Walden Dr Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Real Estate Compass	450			
			SUBTOTAL \$	1250			

\*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

## **Schedule A (Continuation Sheet)**

Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received	to whole do	llars.	Statement covers period			CALIFORNIA 460		
			from10/14	/2019	FO	RM 400		
			through12/3	1/2019	Page	9 of <u>23</u>		
NAME OF FILER					I.D. NUN	MBER		
Team Lili Bosse 2020 for Beverly Hills City Council					142208	38		
		IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE	TO DATE	DED ELECTION		

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)
11/18/2019	Carrie Brillstein 1150 Shadow Hill Way Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Housewife	450		
11/18/2019	Magali Bergher 232 S Palm Dr Beverly Hills, CA 90212	☑IND □COM □OTH □PTY □SCC	Real Estate Broker Self	450		
11/18/2019	Louis Ignarro 264 El Camino Dr Beverly Hills, CA 90212	☑IND □COM □OTH □PTY □SCC	Professor Emeritus UCLA	450		
11/18/2019	Thomas J. Blumenthal 425 N Maple Drive #201 Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	CEO and President Geary's	450		
11/18/2019	Cynthia Norian 260 S Peck Dr Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Real Estate Self	450		

\*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

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.) Statement covers period **CALIFORNIA FORM** 

10/14/2019

from \_\_

	through12/31/2019	Page of
NAME OF FILER		I.D. NUMBER
Team Lili Bosse 2020 for Beverly Hills City Council		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)
11/18/2019	Thomas Hudnut 211 S Spalding Dr Unit S605 Beverly Hills, CA 90212	☑IND □COM □OTH □PTY □SCC	Retired	450		
11/18/2019	Jeanne Mark 725 North Roxbury Dr. Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Housewife	450		
11/18/2019	David Shalowitz 1030 Tower Rd. Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Real Estate Self	450		
11/18/2019	Joni Marine 801 Foothill Road Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Real Estate JEM Sportswear	450		
11/18/2019	Jeanne Anderson 604 N. Arden Dr. Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Designer Self	450		

\*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

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

State	ment covers period	CALIFORNIA 160
from	10/14/2019	FORM 40U
through _	12/31/2019	Page // of 23
 		I.D. NUMBER
		1422088

NAME OF FILER

Team Lili Bosse 2020 for Beverly Hills City Council

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)
11/18/2019	Kathy Moray 804 N Rexford Dr Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Homemaker	450		
11/18/2019	Jade Mills 1485 Carla Ridge Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Real Estate Agent Coldwell Banker	450		
11/18/2019	Dr. Leonard Mark 725 North Roxbury Dr. Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Urologist UCLA	450		
11/18/2019	Adam Mills 1485 Carla Ridge Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Designer Self	450		
11/18/2019	Ron Shalowitz 1030 Tower Rd. Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Mortgage Broker CNB	450		
***************************************			SUBTOTAL \$	2250		

\*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

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

**CALIFORNIA** 

Statement covers period

				from10/14/2019 F			FORM 400	
				through12/3	1/2019	Page_	12 of 23	
NAME OF FILER						I.D. NU	MBER	
Team Lili B	losse 2020 for Beverly Hills City Council					14220	88	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)	
12/6/19	Jack Simon 510 Doheny Rd Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Music Producer Martino Assoc	450				
12/6/19	Jean Rosenblatt 304 S Oakhurst Dr Beverly Hills, CA 90212	☑IND □COM □OTH □PTY □SCC	Retired	100				
12/6/19	Susan Seifert 342 N Palm Dr Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Retired	100				
12/6/19	Suzanne Ross 233 S Crescent Dr Beverly Hills, CA 90212	☑IND □COM □OTH □PTY □SCC	Licensed MFC Self	100				
12/6/19	Donna Rosen 930 N Beverly Drive Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Philanthropist	300				

**SUBTOTAL \$** 

1050

\*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

Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received	to whole dollars.	State	ment covers period	CALIFORNIA 460		
		from10/14/2019		FORM	400	
		through _	12/31/2019	Page <u>/3</u> of	123	
NAME OF FILER		***		I.D. NUMBER		
Team Lili Bosse 2020 for Beverly Hills City Council				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)
12/6/19	Milo Mandel 725 N Elm Drive Beverly Hills, CA 90210	IZ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	450		
12/6/19	Peter Ostroff 1234 Lago Vista Beverly Hills, CA 90210	☑ IND □ COM □ OTH □ PTY □ SCC	Attorney Sidney Austin LLP	450		
12/6/19	Maggie Simon 510 Doheny Rd Beverly Hills, CA 90210	IND COM OTH PTY	Philanthropist	450		
12/6/19	Anne Ostroff 1234 Lago Vista Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Philanthropist	450		
12/6/19	Virginia Maas 9401 Wilshire Blvd Suite 1250 Beverly Hills, CA 90212	☑ IND □ COM □ OTH □ PTY □ SCC	Philanthropist	450		
			SUBTOTAL \$	2250		

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity) PTY – Political Party

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Monetary Contributions Received		to whole de	Juais.	from10/14	CALIF FC	california 460		
				through 12/3	1/2019	Page	19 of	23
NAME OF FILER						I.D. NUN	MBER	
Team Lili Bosse 2020 for Beverly Hills City Council				14220			88	
DATE		CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE '	TO DATE	PER EL	LECTION

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)
12/6/19	Myra Nourmand 6525 Sunset Blvd Suite 100 Los Angeles. CA 90028	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Real Estate Broker Nourmand Assoc	250		
12/6/19	Frances Maas 9401 Wilshire Blvd Suite 1250 Beverly Hills, CA 90212	☑IND □COM □OTH □PTY □SCC	Attorney-Banking Self	450		
12/17/19	Judith Rubins 1180 S Beverly Drive Suite 405 Los Angeles CA 90035	☑IND □COM □OTH □PTY □SCC	Psychotherapist Self	250		
12/17/19	Alex Nehorai 912 N Crescent Dr Beverly Hills, CA 90210	☑IND □COM □OTH □PTY □SCC	Director Sterling Capital LLP	250		
12/17/19	Carol Foran 705 N Elm Dr Beverly Hills, CA 90210	IND COM OTH PTY	Retired	100		
			SUBTOTAL \$	1300		

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity) PTY – Political Party

#### **Schedule A (Continuation Sheet) Monetary Contrib**

Amounts may be rounded

SCHEDULE A (CONT.)

utions Received	to whole dollars.	Sta	tement covers period	CALIFORNIA 460
		from	10/14/2019	CALIFORNIA 460
		through	12/31/2019	Page 15 of 23
				I.D. NUMBER
for Beverly Hills City Council				1422088

			T		T	
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)
12/17/19	Michael Kanter 719 Sierra Drive Beverly Hills, CA 90210	☑ IND □ COM □ OTH □ PTY □ SCC	Jeweler Kantor Gems	100		
12/17/19	Michal Salkin 709 Walden Dr Beverly Hills, CA 90210	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Investor	250		
12/17/19	Ken Salkin 709 Walden Dr Beverly Hills, CA 90210	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Investor	250		
12/17/19	Lawrence P. Murphy 435 Vista St. Los Angeles CA 90036	☑ IND □ COM □ OTH □ PTY □ SCC	Corp Strat. Advisor Self	100		
12/17/19	Richard Rosenzweig 524 N Canon Dr Beverly Hills, CA 90210	☑ IND □ COM □ OTH □ PTY □ SCC	Retired	250		

\*Contributor Codes

IND - Individual

NAME OF FILER

Team Lili Bosse 2020

COM - Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity) PTY – Political Party

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

**FORM** 

Statement covers period

from.

10/14/2019

				through 12/3	1/2019	Page _	16 of 23	
NAME OF FILER Team Lili Be	osse 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 CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
12/17/19	Judy Herbst 142 Willaman Drive Beverly Hills, CA 90211	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	450				
12/17/19	Hyman Herbst 142 Willaman Drive Beverly Hills, CA 90211	☑ IND □ COM □ OTH □ PTY □ SCC	Retired	450				
12/17/19	Lester Friedman 718 N Sierra Drive Beverly Hills, CA 90210	☑ IND □ COM □ OTH □ PTY □ SCC	Attorney/BH City Councilperson	450				
12/17/19	Bertrand Ginsberg 211 S Spaulding Beverly Hills. CA 90212	☑ IND □ COM □ OTH □ PTY □ SCC	Retired	100				
12/17/19	Giacomino Drago 9405 Brighton Way Beverly Hills, CA CA 90210	☑ IND □ COM □ OTH □ PTY □ SCC	Chef-owner Drago Group Restaurants	450				
	SUBTOTAL \$ 1900							

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity) PTY – Political Party

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

**CALIFORNIA** 

**FORM** 

Statement covers period

from

10/14/2019

				through 12/3	1/2019	Page_	17 of 23	
NAME OF FILER Team Lili Bo	osse 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 CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
12/17/19	Joan A. Quinn 621 N Alta Dr Beverly Hills, CA 90210	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Art Curator Self	400				
12/16/19	Nathalie Marciano 10960 Wilshire Bl. Los Angeles, CA 90024	☑ IND □ COM □ OTH □ PTY □ SCC	Art Advisor Self	450				
12/16/19	Caroline Marciano 144 S Beverly Drive, Suite 600 Beverly Hills, CA 90212	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Investor	450				
12/16/19	Olivia Marciano 144 S Beverly Drive, Suite 600 Beverly Hills, CA 90212	☑ IND □ COM □ OTH □ PTY □ SCC	Investor	450				
12/16/19	Emma Marciano 144 S Beverly Drive, Suite 600 Beverly Hills, CA 90212	☑ IND □ COM □ OTH □ PTY □ SCC	Investor	450				

**SUBTOTAL \$** 

2260

\*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

### **Schedule A (Continuation Sheet)**

Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received		to whole d	ollars.	Statement co	CALIFORNIA 460			
				through 12/3	31/2019	Page _	18 o1	. 23
NAME OF FILER						I.D. NUI	MBER	
Team Lili B	osse 2020 for Beverly Hills City Council					14220	88	
DATE	FINANCE CONTRACTOR AND THE CONTRACTOR AND THE	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE	TO DATE	PER E	LECTION

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)
12/4/19	Sue Brucker 805 N Roxbury Drive Beverly Hills, CA 90210	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Artist Self	450		
12/10/19	Jeffrey Hyland 610 Arkell Drive Beverly Hills, CA 90210	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Real Estate Hilton & Hyland	450		
12/16/19	Maurice Marciano 144 S Beverly Drive, Suite 600 Beverly Hills, CA 90212	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Investor	450		
12/16/19	Paul Marciano 144 S Beverly Drive, Suite 600 Beverly Hills, CA 90212	IND COM OTH PTY	Executive Guess Inc.	450		
12/16/19	Mareva Marciano 144 S Beverly Drive, Suite 600 Beverly Hills, CA 90212	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Investor	450		

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity) PTY – Political Party

#### **Schedule A (Continuation Sheet)** Monetar

Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received	to whole dollars.	Statement covers period	CALIFORNIA ACO		
		from 10/14/2019	california 460		
		through 12/31/2019	Page		
NAME OF FILER			I.D. NUMBER		
Team Lili Bosse 2020 for Beverly Hills City Council			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)
12/17/19	Maralee Beck 523 Hillcrest Rd Beverly Hills, CA 90210	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Philanthropist	150		
12/17/19	Jerry Bruckheimer C/O P. Meeks 16030 Ventura Blvd Encino CA 91435	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Producer, Director Self	450		
12/17/19	Linda Bruckheimer C/O P. Meeks 16030 Ventura Blvd Encino CA 91435	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	450		
12/17/19	Robert Berliner 430 Castle Place Beverly Hills, CA 90210	☑ IND □ COM □ OTH □ PTY □ SCC	Chairman Westmount Capital	250		
12/17/19	Allan Alexander 9595 Wilshire Blvd Beverly Hills, CA,90212	☑ IND □ COM □ OTH □ PTY □ SCC	Attorney Self	450		
		1750				

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity) PTY – Political Party

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

**FORM** 

Statement covers period

from.

10/14/2019

NAME OF FILER  Team Lili Bosse 2020 for Beverly Hills City Council			through 12/3	1/2019	Page 20 of 23  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 CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
12/2/19	Angella Nazarian 1801 Century Park West Los Angeles, CA 90067	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Writer Self employed	450			
12/3/19	Ada Horwich 630 N. Maple Drive Beverly Hills, CA 90210	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	450			
12/7/19	Laura Stein 1225 Benedict Canyon Drive Beverly Hills, CA 90210	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Attorney Robbins Geller	250			
12/17/2019	Donna Black 1130 Tower Rd Beverly Hills, CA 90210	☑ IND □ COM □ OTH □ PTY □ SCC	Attorney Donna Black Assoc	450			
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
			SUBTOTAL	\$ 1600			

\*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

Schedule B – Part 1 Loans Received	Amounts may be rounded to whole dollars.				Statement co	vers period 4/2019	CALIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE NAME OF FILER					through12	/31/2019	Page 21	of23	
Team Lili Bosse 2020 for Beverly Hills Ci	ity Council						1422088		
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PA OR FORGIVE THIS PERIO	N CLOSE OF THIS	PAID THIS	S AMOUNT OF	(g) CUMULATIVE CONTRIBUTION TO DATE	
Lili Bosse 269 S. Beverly Dr., Ste 220 Beverly Hills, CA 90212	City Council Member			PAID  \$	<u>\$ 20000</u>	O %	\$ 20000	\$PER ELECTION	
<sup>†</sup> ☑ IND □ COM □ OTH □ PTY □ SCC		\$0	\$20000	\$	06/30/20 	\$	11/14/19 DATE INCURRED	\$	
				PAID  \$ FORGIVEN	_   \$	% RATE	\$	\$PER ELECTION	
† IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$	
+		\$	\$	PAID  FORGIVEN	\$	% RATE	\$	\$PER ELECTION	
T IND COM OTH PTY SCC					DATE DUE		DATE INCURRED		
		SUBTOTALS \$		<b>\$</b>	<b>\$</b>	\$			
Schedule B Summary  1. Loans received this period (Total Column (b) plus unitemized loar				\$	20000	(Enter (e) on Schedule E, Line 			
2. Loans paid or forgiven this period				\$			IND - Individual	•••	

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

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

(Total Column (c) plus loans under \$100 paid or forgiven.)

(Include loans paid by a third party that are also itemized on Schedule A.)

(May be a negative number)

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

		State	10/14/2019 12/31/2019	Page	22 of 23 BER
ommunications nd appearanc nses culating ks survey reseal elivery and me	es es ch essenger services	RAD radio RFD returned sAL came TEL t.v. came TRC came TRS staff TSF trans	o airtime and production med contributions paign workers' salaries or cable airtime and prod didate travel, lodging, ar /spouse travel, lodging, sfer between committee r registration	duction costs nd meals and meals es of the same	e candidate/sponsor
CODE	OR DESC	RIPTION OF F	PAYMENT		AMOUNT PAID
LIT					8360
WEB					199
	Credit Card Fees				156
nedule D.			SL	JBTOTAL \$	8715
				\$	8715 375
	communications and appearance in ses culating ks I survey resear elivery and me al services (leg CODE LIT WEB	you may enter the code. Other ommunications and appearances successes culating ks I survey research elivery and messenger services all services (legal, accounting)  CODE OR DESCOUNTY  WEB  Credit Card Fees  hedule D.	you may enter the code. Otherwise, description of the code. Otherw	you may enter the code. Otherwise, describe the payment.  Through 12/31/2019  Through 12/31/2019  Through 12/31/2019  Through 12/31/2019  Through 12/31/2019  Through 12/31/2019  Tommunications RAD radio airtime and production returned contributions campaign workers' salaries sculating TEL t.v. or cable airtime and production returned contributions returned contributions campaign workers' salaries stalling tell t.v. or cable airtime and production returned contributions returned contributions returned contributions returned contributions and appearances RFD returned contributions returned contributions staff/spouse travel, lodging, at staff/spouse trave	dollars.    Through   10/14/2019   12/31/2019   Page   I.D. NUM   142208

9090

Schedule F Accrued Expenses (Unpaid Bills)  SEE INSTRUCTIONS ON REVERSE NAME OF FILER Team Lili Bosse 2020 for Beverly Hills City Council	Amounts may be round to whole dollars.	ded	Trom	/2019 F 31/2019 Page	SCHEDULE  IFORNIA 460  ORM 23  of 23  JMBER 2088		
	Pely describes the payment, you may enter the code. Otherwise, describe the payment.  MBR member communications  MTG meetings and appearances  OFC office expenses  PET petition circulating  PHO phone banks  POL polling and survey research  MBR member communications  RAD radio airtime and production costs  RFD returned contributions  campaign workers' salaries  TEL t.v. or cable airtime and production costs  candidate travel, lodging, and meals  TRS staff/spouse travel, lodging, and meals						
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		
Pfeiffer Design 1156 Menlo Drive Altadena, CA 91001	LIT	0	1350	0	1350		

### Schedule F Summary

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

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 \$	1350
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
Net change this period. ( <b>Subtract</b> Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)	NET \$	1350 May be a negative number

SUBTOTALS \$

0 \$

1350 \$

0 \$

1350