Recipient Committee Campaign Statement Cover Page	Statement covers period	Date of election if applicable:	LC CITTO Alter Al	CALIFORNIA 460 FORM Page 1 of 17
	from October 21, 2020	(Month, Day, Year)		For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through December 31, 2020		557 272 272	undered #4
1. Type of Recipient Committee: All Committees - Con	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:		COVID-19- Filing
State Candidate Election Committee     Recall     (Also Complete Part 5)     General Purpose Committee     O Sponsored     Small Contributor Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored Nato Complete Part 6) Primarily Formed Candidate/ Officeholder Committee Nato Completo Part 7)	Preelection Statement     Semi-annual Statement     Termination Statement     (Also file a Form 410 Te     Amendment (Explain be	l 🗆 Sp ermination)	uarterly Statement pecial Odd-Year Report
3. Committee Information	D. NUMBER lot yet received	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)		NAME OF TREASURER		
Save Beverly Hills		Darian Bojeaux MAILING ADDRESS		
STREET ADDRESS (NO P.O. BOX)		CITY Beverly Hills NAME OF ASSISTANT TREASURI	CA 90	0210 AREA CODE/PHONE
Beverly Hills CA 9021 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX	<	MAILING ADDRESS		
CITY STATE ZIP CO	DE AREA CODE/PHONE	Сіту	STATE ZIP	CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRE	SS	
ResidentsDecide@gmail.com		bojeaux@earthlink.net		
4. Verification I have used all reasonable diligence in preparing and reviewin certify under penalty of perjury under the laws of the State of Executed on January 29, 2021 Dato Executed on January 29, 2021 Executed on Dato Executed on Dato Executed on Dato Executed on Dato	California that the foregoing is true and ByByBySignature of Contro BySignature of Contro BySignature of Contro		Treasurer openent or Responsible Officer of Spi State Measure Proponent	
2007		na construction and an annual annaichtean an a		FPPC Form 460 (Jan/2016))

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## 5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR	CANDIDATE		
OFFICE SOUGHT OR HELD (IN	CLUDE LOCATION AND	DISTRICT NUMBER	FAPPLICABLE)
RESIDENTIAL/BUSINESS ADD	RESS (NO. AND STREE	T) CITY	STATE ZIP
Related Committees No not included in this statement contributions or make expend	that are controlled by	you or are primarily i	
		I.D. NUMBER	
NAME OF TREASURER		CONTROLLE	D COMMITTEE?
COMMITTEE ADDRESS	STREET ADDRESS (NO	) Р.О. ВОХ)	
CITY	STATE	ZIP CODE	AREA CODE/PHONE
		I.D. NUMBER	
NAME OF TREASURER		CONTROLLE	D COMMITTEE?
COMMITTEE ADDRESS	STREET ADDRESS (NO	D P.O. BOX)	
CITY	STATE	ZIP CODE	AREA CODE/PHONE

## 6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

Not applicable as measure did not qualify for ballot

BALLOT NO. OR LETTER	JURISDICTION	
N/A	Beverly Hills, Los Angeles, CA	

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

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

Darian Bojeaux, proponent and principal officer

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY
Not applicable	

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	
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	

Attach continuation sheets if necessary

Campaign Disclosure Statement	Amounts may be rounded				SUMMARY PAGE
Summary Page	to whole dollars.		nent covers period	CALIFORNIA 460	
			from Octo	ober 21, 2020	FORM 400
SEE INSTRUCTIONS ON REVERSE			through _I	December 31, 2020	Page <u>3</u> of <u>17</u>
NAME OF FILER	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			I.D. NUMBER
Save Beverly Hills					Not yet received
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column CALENDAR TOTAL TO D	YEAR		mary for Candidates e State Primary and
1. Monetary Contributions Schedule A, Line 3		\$ _2,480.05			2004 10 Date
2. Loans Received Schedule B, Line 3	0	0			
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	•	\$		20. Contributions Received \$	\$
4. Nonmonetary Contributions Schedule C, Line 3	8,300.00	8.300.00		21. Expenditures	
5. TOTAL CONTRIBUTIONS RECEIVEDAdd Lines 3 + 4	\$	\$ 10,780.05	<u> </u>	Made \$	\$
Expenditures Made	<u></u>			Expenditure Limit (	Summany for State
6. Payments Made Schedule E, Line 4	\$ 2,480.05	<u>\$</u> <u>2,480.05</u>		Candidates	Jummary for Julio
7. Loans Made Schedule H, Line 3	0	0			
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 2,480.05	\$ 2,480.05			ve Expenditures Made* Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	0	0		Date of Election	Total to Date
10. Nonmonetary Adjustment	0	0		(mm/dd/yy)	Total to Date
11. TOTAL EXPENDITURES MADE	\$ 2,480.05	\$ 2,480.05		//	_ \$
Current Cash Statement					_ \$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$ _0	To colouioto Colu	P		
13. Cash Receipts Column A, Line 3 above	2,480.05	To calculate Colu add amounts in C	Column		
14. Miscellaneous Increases to Cash Schedule I, Line 4	0	A to the correspon amounts from Co			nay be different from amounts
15. Cash Payments Column A, Line 8 above	2.480.05	of your last report	t. Some	reported in Column B.	
16. ENDING CASH BALANCE	\$ <u>0</u>	amounts in Colum be negative figure	es that		
If this is a termination statement, Line 16 must be zero.		should be subtrat previous period a	mounts. If		
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$_0	<ul> <li>this is the first rep filed for this calen only carry over th</li> </ul>	idar year, e amounts		
Cash Equivalents and Outstanding Debts		from Lines 2, 7, a any).	ind 9 (if		
18. Cash Equivalents See instructions on reverse	\$				
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$				FPPC Form 460 (Jan/2016))
		1		FPPC Advice: adv	rice@fppc.ca.gov (866/275-3772)

www.fppc.ca.gov

Schedule Monetary	Contributions Received		ts may be rounded whole dollars.	Statement covers period from October 21, 2020			FORNIA 460
	ONS ON REVERSE			through Decemb	er 31, 2020	Page	4of
NAME OF FILER Save Beverly						I.D. NU Not yet	MBER t received
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)
10/21/20- 12/26/20	Darian Bojeaux Beverly Hills, CA 90210		Attorney, self-employed Law Offices of Darian Bojeaux.	\$1,480.05	\$1,480.05		
11/17/20	Alice Lake-Zachary and Claude B. Zachary Beverly Hills, CA 90211		Photographer & meditation instructor, self-employed, and Archivist at USC.	\$200.00	\$200.00		6
11/21/20	Sergio and Debora Farber Beverly Hills, CA 90212		None and Distinguished Professor at UCLA.	\$100.00	\$100.00		
11/24/20	Vivien Bonert Beverly Hills, CA 90212		Physician, Cedars-Sinai	\$100.00	\$100.00		
11/30/20	Phil Savenick Los Angeles, CA 90024		None.	\$500.00	\$500.00		
			SUBTOTAL S	\$ 2,380.05			CARLE
1. Amount re (Include al	A Summary ceived this period – itemized monetary contribution I Schedule A subtotals.)	•••••••••••••••••••••••••••••••••••••••		180.05	*Con IND COM OTH PTY	tributor C – Individu 1 – Recipi (other – Other ( – Politica	al ent Committee than PTY or SCC) (e.g., business entity)
3. Total mone	etary contributions received this period. a 1 and 2. Enter here and on the Summary Page, C			180.05	scc	- Small ( FPP)	

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Schedule	A (Continuation Sheet)	Amounts may	be rounded			SCHEDULEA (CONT.)		
Monetary	Contributions Received	ons Received to whole dollars.			vers period	CALIFORNIA 460		
				through	0	Page 5		
NAME OF FILER Save Beverly						I.D. NUM Not yet	BER received	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME) OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE T CALENDAR 1 (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)	
12/3/20	Lev and Carole Hakak Beverly Hills, CA 90210		None.	\$100.00	\$100.00			
						i.		
			SUBTOTAL	\$ 100.00				

\*Contributor Codes 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

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	Am	ounts may be ro	unded				SCHE	DULE B - PART 1
Schedule B – Part 1		Statement cov	ers period	CALIFORNIA 460				
Loans Received		fi					FORM	
SEE INSTRUCTIONS ON REVERSE					through <u>12/31/2</u>	0	Page <u>6</u>	of_17
NAME OF FILER	······						I.D. NUMBER	
Save Beverly Hills							Not yet recei	ved
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER LD. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(8) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(6) AMOUNT RECEIVED THIS PERIOD	(C) AMOUNT PAI OR FORGIVE THIS PERIO	N BALANCE AT	(*) INTEREST PAID THIS PERIOD	(i) ORIGINAL AMOUNT OF LOAN	(9) CUMULATIVE CONTRIBUTIONS TO DATE
None				PAID				CALENDAR YEAR
None				\$	-   \$	RATE	\$	s
						NAIE		PER ELECTION**
•		s	s	s	-	\$		s
					DATE DUE		DATE INCURRED	CALENDAR YEAR
				PAID				CALENDAR TEAR
				\$	-   \$	RATE	\$	\$
								PER ELECTION**
•		s	s	s		\$	·	\$
					DATE DUE		DATE INCURRED	CALENDAR YEAR
								CALENDAR TEAR
				,	-   •	RATE	5	\$
							Î	PER ELECTION**
		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
	S	UBTOTALS \$	5 O \$	\$ O	\$ 0	\$ 0		
Schedule B Summary						(Enter (e) on Scher	tule E, Line 3)	
1. Loans received this period				s <sup>0</sup>				
(Total Column (b) plus uniternized loar	ns of less than \$100 \					G		
2. Loans paid or forgiven this period	- 			\$ <u>0</u>			Contributor Codes	5
( Iotal Column (c) plus loans under \$1						OM - Recipient C		
(Include loans paid by a third party that 3. Net change this period. (Subtract Lin				NET ¢ 0			other than) TH – Other (e.g.,	PTY or SCC)
Enter the net here and on the Summa				.HEI 🖗 🗕		P	TY - Political Par	ty i
						s	CC – Small Contr	ibutor Committee
				(	May be a negative number)	_		
*Amounts forgiven or paid by another party also n	nust be reported on Schedule A.	1						

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\*\* If required.

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			_				SCHE	DULE B - PART 2		
Schedule B – Part 2 Loan Guarantors		Amounts may be rounded to whole dollars.			Statement covers period from 10/21/20			CALIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE				through	12/31/20	_	Page	of		
NAME OF FILER							I.D. NUMBER			
Save Beverly Hills							Not yet rec	eived		
FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE <sup>*</sup>	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN		AMOUNT GUARANTEED THIS PERIOD		MULATIVE O DATE	BALANCE OUTSTANDING TO DATE		
None			LENDER		o	CALI	ENDAR YEAR			
	□OTH □PTY □SCC		DATE			PEF (IF	RELECTION REQUIRED)			
			LENDER			CALE	INDAR YEAR			
	□ OTH □ PTY □ SCC		DATE			PEF (IF I	RELECTION REQUIRED)			
			LENDER			CALE	ENDAR YEAR			
			DATE			PEF (IF) S	RELECTION REQUIRED)			
			LENDER			CALE	ENDAR YEAR			
			DATE			PEF (IF)	RELECTION REQUIRED)			
			SUE	BTOTAL	\$ 0	Sur	Enler on nmary Page, ne 17 only.			

Schedule C Nonmonetary Contributions Received			Amounts may be rounded to whole dollars.				period	CALIFORNIA 460					
SEE INSTRUC	TIONS ON REVERSE				thro	ugh12/31/20		Page 8	of				
NAME OF FILL			de la companya de la					I.D. NUM	BER				
Save Beverl	y Hills							Not yet	received				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION GOODS OR SERV		AMOUNT/ FAIR MARKET VALUE	CUMULA DA CALENDA (JAN 1 -	TE AR YEAR	PER ELECTION TO DATE (IF REQUIRED)				
11/27/20	Renee Touriel Beverly Hills, CA 90011		None.	Payment to another to gather signatures.		another to gather		another to gather		\$300.00	\$300.00		
12/1/20- 12/26/20	Darian Bojeaux Beverly Hills, CA 90210	DIND COM OTH PTY SCC	Attorney, self-employed, Law Offices of Darian Bojeaux	Legal services, complaint, ex parte ap., and appellate.		\$8,000	\$8,000						
		IND COM OTH PTY SCC					5						
Attach add	ditional information on appropriately labeled	continuation	sheets.	SUBTO	DTAL	\$ 8,300.00	神戸 一部 元						
Schedule C Summary 1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.)						8,300.00			nt Committee an PTY or SCC)				
2. Amount received this period – unitemized nonmonetary contributions of less than \$100					\$_	0	PTY	- Political	.g., business entity) Party ontributor Committee				
	nmonetary contributions received this period les 1 and 2. Enter here and on the Summary		nn A, Lines 4 and 10.)	тота	L\$_	8,300.00							

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Supporti Candida	y of Expenditures ing/Opposing Other tes, Measures and Committees	Amounts may be to whole do		Statement cover from October 21, 2 through December	.020	CALIFORNIA 460 FORM 460		
Save Beverly	y Hills					Not yet	received.	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIV CALENDA (JAN. 1-1	R YEAR	PER ELECTION TO DATE (IF REQUIRED)	
	None	Monetary Contribution		0				
		Nonmonetary Contribution						
	Support Dppose	Independent Expenditure						
		Monetary Contribution						
		Nonmonetary Contribution						
	Support Oppose	Independent Expenditure						
		Monetary Contribution						
		Nonmonetary Contribution						
	Support Dppose	- Independent Expenditure						
			SUBTOTAL	\$ 0				

## Schedule D Summary

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1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)	\$
2. Unitemized contributions and independent expenditures made this period of under \$100	\$_ <u>0</u>
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	\$

Schedule D (Continuation Sheet) Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		Amounts may be to whole dol		Statement cover from 10/21/20 through 12/31/20	s period	1	0 of <u>17</u>
Save Beverly	Hills					Not yet	received.
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIV CALENDA (JAN. 1 - I	R YEAR	PER ELECTION TO DATE (IF REQUIRED)
	None Support Oppose Support Oppose	Monetary     Contribution     Nonmonetary     Contribution     Independent     Expenditure     Monetary     Contribution     Nonmonetary     Contribution     Independent     Expenditure     Independent     Expenditure     Monetary     Contribution     Independent     Expenditure     Monetary     Contribution		0			
	Support Oppose	Contribution  Independent Expenditure  Monetary Contribution  Nonmonetary Contribution Independent Expenditure					
	• <u>•</u> ••••••••••••••••••••••••••••••••••		SUBTOTAL	\$ 0			

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Schedule E Payments Made	Amounts may be rounded to whole dollars.	Statement covers period from October 21, 2020	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE		through December 31, 2020	Page 11 of 17
Save Beverly Hills			Not yet received
CODES: If one of the following codes accurate CMP campaign paraphemalia/misc.	tely describes the payment, you may enter the code. Oth MBR member communications	erwise, describe the payment. RAD radio airtime and production	costs

CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMNITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Los Angeles County Registrar-Recorder 12400 Imperial Highway, Norwalk, CA 90650	VOT		\$54.00
Frank Angel, Esq., 2601 Ocean Park Blvd., Santa Monica, CA, 90405	PRO		\$225.00
Los Angeles Superior Court, 111 North Hill Street, Los Angeles, CA, 90012, directly and through Greenfiling.com		Filing fees for complaint, ex parte application and VCourt Appearance	\$592.20

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

SUBTOTAL \$ 871.20

## **Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)\$.	2,480.05
2. Unitemized payments made this period of under \$100 \$	0
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	-
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	2,480.05

Schedule E (Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.			Statement covers period from		CHEDULE E (CONT.)
SEE INSTRUCTIONS ON REVERSE				through <u>12/31/20</u>	Page	12 of <u>17</u>
NAME OF FILER					I.D. NUM	
Save Beverly Hills					Not yet	received
CODES: If one of the following codes accurately desce CMP campaign paraphematia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundralsing events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings and OFC office expens PET petition circul PHO phone banks POL polling and s POS postage, deliv	munications l appearances es ating urvey research very and mes	\$	rwise, describe the payment. RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and proc TRC candidate travel, lodging, ar TRS staff/spouse travel, lodging, TSF transfer between committee VOT voter registration WEB information technology costs	luction costs d meals and meals s of the sam	e candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE C	DR DES	CRIPTION OF PAYMENT		AMOUNT PAID
Court of Appeal for Second District, 300 South Spring Street, 2 Tower, Los Angeles, CA, 90013, through TrueFiling.com	nd Floor, South		Filing fees for Peti Service	ition for Writ of Mandate and Pr	oof of	\$829.75
California Supreme Court, 350 McAllister Street, Room 1295, 94102, through TrueFiling.com	San Frncisco, CA,		Filing fees for Pet Notice	ition for Review and Request for	Judicial	\$746.30
Sacramento Superior Court, 720 9th Street, Sacramento, CA, 9 SacCourt.ca.gov.	5814, through		Copies of legal do	ocuments		\$32.80
				<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
* Payments that are contributions or independent expenditures must als	o be summarized on Sche	dule D.	•	SI	JBTOTAL	\$ \$1,608.85

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						SCHEDULE
Schedule F Accrued Expenses (Unpaid Bills)	Amounts may be rounded to whole dollars.		Statement cov from 10/21/20	ers period	CALIF FO	ORNIA 460
SEE INSTRUCTIONS ON REVERSE			through <u>12/31/2</u>	0	Page .	<u>13</u> of <u>17</u>
NAME OF FILER					I.D. NUN	ABER
Save Beverly Hills					Not re	ceived yet
CODES: If one of the following codes accurately describe CMP campaign paraphemalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundralsing events IND independent expenditure supporting/opposing others (explain)* LEG legal defense campaign literature and mailings	ABR member communication MBR member communication MTG meetings and appeara OFC office expenses PET petition circulating PHO phone banks POL polling and survey rese POS postage, delivery and r PRO professional services (I PRT print ads	ns nces parch nessenger services	RAD radio airtime a RFD returned contri SAL campaign work TEL t.v. or cable air TRC candidate traw. TRS staff/spouse tra TSF transfer betwee VOT voter registrati	nd production co butions kers' salaries time and produci el, lodging, and n avel, lodging, and en committees of	tion costs neals d meals f the same	e candidate/sponsor
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 P THIS PERI (ALSO REPORT	OD 0	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
None		0	0	0		0
* Represente that are entribuilleer, or independent over and investment date be						
<ul> <li>Payments that are contributions or independent expenditures must also be summarized on Schedule D.</li> </ul>	SUBTOTALS	\$ 0	\$0 \$	\$ 0	\$	0
<ol> <li>Schedule F Summary</li> <li>Total accrued expenses incurred this period. (Include all S accrued expenses of \$100 or more, plus total uniternized</li> <li>Total accrued expenses paid this period. (Include all Sch accrued expenses of \$100 or more, plus total uniternized</li> <li>Net change this period. (Subtract Line 2 from Line 1. En on the Summary Page, Column A, Line 9.)</li> </ol>	edule F, Column (c) subtot payments on accrued exp ter the difference here and	als for payments on enses under \$100.).		PAID TOTA	\LS \$ IET \$	) ) ay be a negative number
			FP	PC Advice: advic	FPPC	Form 460 (Jan/2016)) a.gov (866/275-3772) www.fppc.ca.gov

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Schedule F	Amounts may be rounded	SCHEDULE F (CONT.)				
(Continuation Sheet) Accrued Expenses (Unpaid Bills)	to whole dollars.	Statement covers period from 10/21/20 through 12/31/20	CALIFORNIA FORM 460			
NAME OF FILER Save Beverly Hills		I	I.D. NUMBER Not received yet			
CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.						

- CMP campaign paraphemalia/misc. CNS campaign consultants
- CTB contribution (explain nonmonetary)\*
- CVC civic donations

- FIL candidate filing/ballot fees
- FND fundraising events
- Independent expenditure supporting/opposing others (explain)\* IND
- LEG legal defense
- campaign literature and mailings LIT

- MBR member communications
- MTG meetings and appearances
- OFC office expenses
- PET petition circulating
- PHO phone banks
- polling and survey research POL
- postage, delivery and messenger services professional services (legal, accounting) POS
- PRO
- 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)

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

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
None		0	0	0	0
	SUBTOTALS	<b>5</b> 0	<b>\$</b> 0	\$ 0	<b>\$</b> 0

SEE INSTRUCTIONS ON REVERSE       through 12/31/20       Page 15 of 17         NAME OF FILER       LD. NUMBER         Save Beverly Hills       Not yet received         NAME OF AGENT OR INDEPENDENT CONTRACTOR       Not yet received         None       CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.         CMP campaign paraphemalia/mise.       MBR member communications         CNS campaign consultants       MTG meetings and appearances         CT contribution (explain nonmonetary)*       OFC office expenses         CVC civic donations       PET petition circulating         FL candidate filing/bellot fees       PHO phone banks         FND tundraising events       POL polling and survey research         ND independent expenditure supporting/opposing others (explain)*       POS postage, delivery and messenger services         PRO professional services (legal, accounting)       TSF transfer between committees of the same candidate/sponsor         VOT voter registration       WEB information technology costs (internet, e-mail)         * Payments that are contributions or independent expenditures must also be summarized on Schedule D.	Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)	Amounts may be rounded to whole dollars.	Statement covers period from 10/21/20	california 460				
Name of Filter       Not yet received         Save Beverly Hills       Not yet received         NAME OF AGENT OR INDEPENDENT CONTRACTOR       None         CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.         CMP campaign paraphemalia/misc.       MBR member communications       RAD radio airtime and production costs         CTB contribution (synplain nonmonetary)*       OFC office expenses       SAL campaign onsultants         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 intravel, lodging, and meals         FND fundrating events       POS postage, delivery and messenger services       TSF transfer between committees of the same candidate/sponsor         VOT voter registration       PRT print ads       PRT print ads       WEB information technology costs (internet, e-mail)	SEE INSTRUCTIONS ON REVERSE		through					
None         CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.         CMP campaign paraphemalia/mise.       MBR member communications         CNS campaign consultants       MTG meetings and appearances         CVC civic donations       MTG meetings and appearances         CVC civic donations       PET petition circulating         FIL candidate filing/ballot fees       PHO phone banks         FND fundraising events       POL polling and survey research         IND independent expenditure supporting/opposing others (explain)*       POS postage, delivery and messenger services         PRO professional services (legal, accounting)       TSF transfer between commutitees of the same candidate/sponsor         VOT campaign literature and mailings       PRT print ads	Save Beverly Hills							
CMP campaign paraphemalia/misc.MBR member communications meetings and appearancesRAD radio airtime and production costsCMS campaign consultantsMTG meetings and appearancesRAD 								
	CMP       campaign paraphemalia/misc.       MBR       member communications       RAD       radio airtime and production costs         CNS       campaign consultants       MTG       meetings and appearances       RFD       returned contributions         CTB       contribution (explain nonmonetary)*       OFC       office expenses       SAL       campaign workers' salaries         CVC       civic donations       PET       petition circulating       TEL       t.v. or cable airtime and production costs         FIL       candidate filing/ballot fees       PHO phone banks       TRC       candidate travel, lodging, and meals         FND       fundraising events       POL       polling and survey research       TRS       staff/spouse travel, lodging, and meals         Independent expenditure supporting/opposing others (explain)*       PRO       professional services (legal, accounting)       VOT       voter registration							

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE	OR DES		AMOUNT PAID
None				0
Attach additional information on appropriately labeled continuation sheets.			TOTAL*	\$ 0

....

TOTAL\* \$ 0

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the egent or independent contractor as reported on Schedule E.

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								SCHEDULE H
Schedule H	Amounts may be rounded to whole dollars.			Statement covers period from 10/21/20		CALIEORN	ACO	
Loans Made to Others*						CALIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE					through12/31/2	0	Page <u>16</u>	of <u>17</u>
NAME OF FILER							I.D. NUMBER	
Save Beverly Hills								
Save Beveriy Hills						Not received	yet	
FULL NAME, STREET ADDRESS AND ZIP CODE	IF AN INDIVIDUAL, ENTER	(a) OUTSTANDING	(5) AMOUNT	(c)		(0)	(I) ORIGINAL	(g) CUMULATIVE
OF RECIPIENT (IF COMMITTEE, ALSO ENTER I D. NUMBER)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER	BALANCE BEGINNING THIS	LOANED THIS	REPAYMENT O	S BALANCE AT	INTEREST	AMOUNT OF	LOANS
	NAME OF BUSINESS)	PERIOD	PERIOD	THIS PERIOD	PERIOD	RECEIVED	LOAN	TO DATE
								CALENDAR YEAR
None								
				·	•	RATE	·	s
				FORGIVEN			1	PER ELECTION"
		s	s	s		s		s
····				l	DATE DUE		DATE INCURRED	
								CALENDAR YEAR
				s	s	×		
					•	RATE		,
								PER ELECTION"
		s	\$	\$	DATE DUE	s	DATE INCURRED	s
· · · · · · · · · · · · · · · · · · ·	l	L					DATE INCORRED	
*Loans that are contributions to another candidate also be summarized on Schedule D. Loans forgive	n must also be							
reported on Schedule E.		SUBTOTALS	<b>\$</b> 0	<b>\$</b> 0	\$ 0	\$ 0		
				<u> </u>		(Entar (e) on		<u></u>
						Schedule I, Line 3)		
Schedule H Summary						•	•	
1. Loans made this period					\$		_	
(Total Column (b) plus unitemized loans of less than \$100.)								**If Required
2. Payments received on loans							. L	
(Total Column (c) plus unitemized payn	nents of less than \$100.)							
3. Net change this period. (Subtract Line 2				••••••	NET \$			
(Enter the net here and on the Summa	ry Page, Column A, Line 7.)	)						

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(May be a negative number)

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Schedule	1	Amounts may be ro	unded	SCHEDULE			
	eous Increases to Cash	to whole dollar	8.	Statement covers period	CALIFORNIA 460		
				from <u>10/21/20</u>			
				through	Page 17 of 17		
SEE INSTRUCTION	DNS ON REVERSE			•	I.D. NUMBER		
	*-11						
Save Beverly H					Not received yet		
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		DES	CRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH		
	None						
Attach addi	\$ 0						
Schedule I	Summary	······································			- · · · · · · · · · · · · · · · · · · ·		
1. Itemized in	creases to cash this period			\$_0	_		
2. Unitemized	d increases to cash of under \$100 this period		••••••	\$_ <u>0</u>	-		
3. Total of all	interest received this period on loans made to others.	(Schedule H, Column (e	e).)	\$_ <u>0</u>	<b>_</b>		
4. Total misce Summary I	ellaneous increases to cash this period. (Add Lines 1, 2 Page, Line 14.)	2, and 3. Enter here and	l on the		<ul> <li>FPPC Form 460 (Jan/2016))</li> <li>ce@fppc.ca.gov (866/275-3772)</li> <li>www.fppc.ca.gov</li> </ul>		

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