

**Recipient Committee  
Campaign Statement  
Cover Page**

5124  
COVER PAGE

③ 01/08/2024  
Date Stamp

**CALIFORNIA FORM 460**

RECEIVED  
LOS ANGELES COUNTY of 30  
2024 JAN 10 AM 11:51  
CAMPAIGN FINANCE 611271

Statement covers period  
from 07/01/23  
through 12/31/23

Date of election if applicable:  
(Month, Day, Year)

SEE INSTRUCTIONS ON REVERSE

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

- |                                                                                                                                                                                                                           |                                                                                                                                                                                  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Officeholder, Candidate Controlled Committee<br><input type="checkbox"/> State Candidate Election Committee<br><input type="checkbox"/> Recall<br><i>(Also Complete Part 5)</i>                  | <input type="checkbox"/> Primarily Formed Ballot Measure Committee<br><input type="checkbox"/> Controlled<br><input type="checkbox"/> Sponsored<br><i>(Also Complete Part 6)</i> |
| <input checked="" type="checkbox"/> General Purpose Committee<br><input type="checkbox"/> Sponsored<br><input type="checkbox"/> Small Contributor Committee<br><input type="checkbox"/> Political Party/Central Committee | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee<br><i>(Also Complete Part 7)</i>                                                                      |

**2. Type of Statement:**

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

**3. Committee Information**

I.D. NUMBER  
1422805

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
National Womens Political Caucus Greater Pasadena Area

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Pasadena</u>	<u>CA</u>	<u>91105-2749</u>	<u>626-864-5255</u>

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS

jon\_fuhrman@outlook.com

**Treasurer(s)**

NAME OF TREASURER  
Tina Wallin

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Altadena</u>	<u>CA</u>	<u>91001</u>	<u>626-506-8004</u>

NAME OF ASSISTANT TREASURER, IF ANY

Jonathan Fuhrman

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Pasadena</u>	<u>CA</u>	<u>91105-2749</u>	<u>626-864-5255</u>

OPTIONAL: FAX / E-MAIL ADDRESS

office@twallinservices.com; jon\_fuhrman@outlook.com

**4. Verification**

I have used all reasonable diligence in preparing and reviewing this statement certify under penalty of perjury under the laws of the State of California that

in the attached schedules is true and complete. I

Executed on 01/03/2024  
Date

Executed on \_\_\_\_\_  
Date

Executed on \_\_\_\_\_  
Date

Executed on \_\_\_\_\_  
Date

*orig sig*

Responsible Officer of Sponsor

Signature of Controlling Officeholder, Candidate, State Measure Proponent

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

# Campaign Disclosure Statement Summary Page

Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>07/01/2023</u> through <u>12/31/2023</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>2</u> of <u>30</u>
	I.D. NUMBER 1422805

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
National Womens Political Caucus Greater Pasadena Area

## Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions..... Schedule A, Line 3	\$ 33706.00	\$ 33706.00
2. Loans Received..... Schedule B, Line 3	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1 + 2	\$ 33706.00	\$ 33706.00
4. Nonmonetary Contributions..... Schedule C, Line 3	650.00	650.00
5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4	\$ 34356.00	\$ 34356.00

## Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

## Expenditures Made

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made..... Schedule E, Line 4	\$ 17462.23	\$ 17462.23
7. Loans Made..... Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7	\$ 17462.23	\$ 17462.23
9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3	0.00	0.00
10. Nonmonetary Adjustment..... Schedule C, Line 3	650.00	650.00
11. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10	\$ 18112.23	\$ 18112.23

## 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
____/____/____	\$ _____
____/____/____	\$ _____

## Current Cash Statement

12. Beginning Cash Balance..... Previous Summary Page, Line 16	\$ 9281.18
13. Cash Receipts..... Column A, Line 3 above	33706.00
14. Miscellaneous Increases to Cash..... Schedule I, Line 4	0.00
15. Cash Payments..... Column A, Line 8 above	17462.23
16. ENDING CASH BALANCE..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ 25524.95

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

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

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

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

# Schedule A Monetary Contributions Received

Amounts may be rounded  
to whole dollars.

SCHEDULE A

Statement covers period from <u>07/01/23</u> through <u>12/31/23</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>3</u> of <u>30</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER <b>National Womens Political Caucus Greater Pasadena Area</b>	I.D. NUMBER <b>1422805</b>
--------------------------------------------------------------------------------	-------------------------------

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)
07/14/23	Monica Hubbard Altadena, CA 91001 via:ACTBlue, Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	350K	350	
07/19/23	Kristine Lowe Sierra Madre, CA 91024 via:ACTBlue, Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Teacher / Glendale USD	100	100	
07/20/23	Deborah Williams Altadena, CA 91001 via:ACTBlue, Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	200	200	
07/20/23	H Susan Henderson, Sierra Madre, CA 91024 via:ACTBlue, Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	100	100	
07/20/23	Jeannette Mann Pasadena, CA 91104 via:ACTBlue, Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	500	500	

**SUBTOTAL \$ 1250**

## Schedule A Summary

- Amount received this period – itemized monetary contributions.  
(Include all Schedule A subtotals.) .....\$ 32551.00
- Amount received this period – unitemized monetary contributions of less than \$100 .....\$ 1155.00
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.).....**TOTAL \$** 33706.00

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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/23</u> through <u>12/31/23</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>4</u> of <u>30</u>
I.D. NUMBER 1422805	

NAME OF FILER <b>National Womens Political Caucus Greater Pasadena Area</b>	I.D. NUMBER 1422805
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME) OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
07/21/23	Eve Moir via:ACTBlue, Glendale, CA 91241 Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Transportation Planner / LA Metro	250	250	
07/21/23	Jennifer Thibault via:ACTBlue, Pasadena, CA 91107 Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Non-profit consultant / Jennifer Thibault	500	500	
07/23/23	Mary Freeman via:ACTBlue, Pasadena, CA 91106 Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	100	100	
07/25/23	Kimberly Leong via:ACTBlue, Pasadena, CA 91104 Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	100	100	
07/28/23	Carolyn Smith via:ACTBlue, Vallejo, CA 94591 Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Business writer / Content Runway	250	250	
<b>SUBTOTAL \$ 1200</b>						

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



**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/23</u> through <u>12/31/23</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>5</u> of <u>30</u>
NAME OF FILER <b>National Womens Political Caucus Greater Pasadena Area</b>	
I.D. NUMBER <b>1422805</b>	

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)
07/28/23	Karlene Goller Pasadena, CA 91105 via:ACTBlue, Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney / Karlene Goller	100	100	
07/30/23	Denise Robb Pasadena, CA 91107 via:ACTBlue, Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Professor / Pierce College	100	100	
08/01/23	Phlunte Riddle Pasadena, CA 91107 via:ACTBlue, Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Commissioner / CDCR	500	<del>1000</del> 1000	
08/02/23	Tammy Silver Pasadena, CA 91106 via:ACTBlue, Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Trustee / PCC	250	250	
08/07/23	Bonnie Armstrong Pasadena, CA 91103 via:ACTBlue, Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	100	100	
<b>SUBTOTAL \$ 1050</b>						

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PTY - Political Party  
SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/23</u> through <u>12/31/23</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>6</u> of <u>30</u>

NAME OF FILER <b>National Womens Political Caucus Greater Pasadena Area</b>	I.D. NUMBER <b>1422805</b>
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME) OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/07/23	Michelle Richardson Bailey Pasadena, CA 91104 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Academic Advisor / Pacific Oaks College	100	100	
08/07/23	Susanne Miele Pasadena, CA 91105 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	250	250	
08/09/23	Mona Field Los Angeles, CA 90042 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	100	100	
08/12/23	Judy Matthews Altadena, CA 01001 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	100	100	
08/13/23	Ann Diederich Los Angeles, CA 90042 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Teacher / Polytechnic School	100	<del>250</del> 250	

**SUBTOTAL \$ 650**

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IND - Individual  
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(other than PTY or SCC)  
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PTY - Political Party  
SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/23</u> through <u>12/31/23</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>7</u> of <u>30</u>
NAME OF FILER <b>National Womens Political Caucus Greater Pasadena Area</b>	
I.D. NUMBER <b>1422805</b>	

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)
08/13/23	Elizabeth Pomeroy Pasadena, CA 91104 via:ACTBlue, Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	250	250	
08/13/23	Jennifer Lee Altadena, CA 91001 via:ACTBlue, Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Trustee / PUSD	100	100	
08/15/23	Joanne Wendler Pasadena, CA 91104 via:ACTBlue, Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	100	100	
08/15/23	Pixie Boyden Pasadena, CA 91103 via:ACTBlue, Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	IT Director / USC	155	155	
08/19/23	Yarma Velazquez Pasadena, CA 91105 via:ACTBlue, Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Professor / CSUN	100	100	
<b>SUBTOTAL \$ 705</b>						

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OTH - Other (e.g., business entity)  
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SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/23</u> through <u>12/31/23</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>7</u> of <u>30</u>
I.D. NUMBER 1422805	

NAME OF FILER

National Womens Political Caucus Greater Pasadena Area

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)
08/21/23	Kimberly Kenne Pasadena, CA 91104 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	250	250	
08/21/23	Sandy Greenstein Pasadena, CA 91103 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	250	250	
08/23/23	Steven Madison Pasadena, CA 91105 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney / Quinn Emanuel	2500	2500	
08/30/23	Lynnette West Pasadena, CA 91103 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Broker / Westlyn Realtors	440	<del>440</del> 690	
08/31/23	Phlunte Riddle Pasadena, CA 91107 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Commissioner / CDCR	500	1000	

**SUBTOTAL \$ 3940**

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**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/23</u> through <u>12/31/23</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>9</u> of <u>30</u>
I.D. NUMBER 1422805	

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09/01/23	Yvette Chappell via:ACTBlue, Pasadena, CA 91101 Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO / AABLI	110	110	
09/01/23	Marguerite Cooper via:ACTBlue, Pasadena, CA 91101 , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	155	155	
09/02/23	Carol Clark via:ACTBlue, Pasadena, CA 91104 , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	100	100	
09/07/23	H. Susan Henderson, Sierra Madre, CA 91024 via:ACTBlue, Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	100	200	
09/07/23	Judy Chu for Congress via:ACTBlue, , Los Angeles, CA 91436 , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1000	1000	

**SUBTOTAL \$ 1465**

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**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/23</u> through <u>12/31/23</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>10</u> of <u>30</u>
I.D. NUMBER 1422805	

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09/07/23	Shauna Clark Pasadena, CA 91106 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Special Advisor / Baker Tilly Public Sector Advisory Group	500	500	
09/08/23	Jeanne Register Altadena, CA 91001 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	1000	1000	
09/08/23	Jacque Robinson Baisley Pasadena, CA 91103 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Outreach Manager / Blue Shield	250	250	
09/08/23	Phyllis Currie ., Los Angeles, CA 90056 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	500	500	
09/08/23	Charlotte Bland ., Pasadena, CA 91107 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant / Charlotte Bland	101	101	

**SUBTOTAL \$ 2351**

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

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/23</u> through <u>12/31/23</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>11</u> of <u>30</u>
I.D. NUMBER 1422805	

NAME OF FILER

National Womens Political Caucus Greater Pasadena Area

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)
09/08/23	Martha Zavala Walnut, CA 91789 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	100	100	
09/09/23	Carol Liu La Canada, CA 91011 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	500	500	
09/09/23	Sasha Renee Perez Alhambra, CA 91803 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Vice-Mayor / City of Alhambra	250	250	
09/09/23	Taylor Morton Altadena, CA 91001 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Medical A/R Negotiator / Taylor Morton	100	100	
09/09/23	Tina Fredericks Pasadena, CA 91107 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Software Engineer / Green Dot	250	250	

**SUBTOTAL \$ 1200**

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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/23</u> through <u>12/31/23</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>12</u> of <u>30</u>
I.D. NUMBER 1422805	

NAME OF FILER

National Womens Political Caucus Greater Pasadena Area

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)
09/11/23	Ashlynn McNeal Riverside, CA 92507 via:ACTBlue, PO Box 441146, Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Funeral Director / Tillman Riverside Mortuary	1000	1000	
09/11/23	Ellen Asatryan for City Council -- ID 1442796 Inglewood, CA 90301 via:ACTBlue, Sommerville, MA 02144	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1000	1000	
09/11/23	Greta Mandell Altadena, CA 91001 via:ACTBlue, Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	500	500	
09/11/23	Jan Sanders Pasadena, CA 91104 via:ACTBlue, Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	210	210	
09/11/23	Jessica Rivas Pasadena, CA 91104 via:ACTBlue, Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney / LACERA	250	250	
<b>SUBTOTAL \$ 2960</b>						

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**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/23</u> through <u>12/31/23</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>13</u> of <u>30</u>
I.D. NUMBER 1422805	

NAME OF FILER

National Womens Political Caucus Greater Pasadena Area

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)
09/11/23	Patrice Marshall McKenzie #203, Pasadena, CA 91107 via:ACTBlue, PO Box 441146, Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Board Member / PUSD	250	250	
09/11/23	Sandra Chen Lau Pasadena, CA 91101 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive / AFI	250	250	
09/11/23	Steven Belhumeur Woodland Hills, CA 91346 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner / SB Strategies	250	250	
09/11/23	Yvonne Brown Altadena, CA 91001 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	100	100	
09/12/23	Jeanne Ward Altadena, CA 91001 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	100	100	

**SUBTOTAL \$ 950**

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**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/23</u> through <u>12/31/23</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>14</u> of <u>30</u>

NAME OF FILER <b>National Womens Political Caucus Greater Pasadena Area</b>	I.D. NUMBER <b>1422805</b>
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/13/23	Cheryl Myers Tujunga, CA 91042 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Marketing Manager / Lionbridge	100	100	
09/13/23	D. J. Lyon Pasadena, CA 91106 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney / Hahn & Hahn	250	250	
09/13/23	Lena Louise Kennedy Pasadena, CA 91103 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO / L. Kennedy Consulting and Assoc.	100	<del>100</del> 650	
09/13/23	Lynette West Pasadena, CA 91104 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Broker / Westlyn Realtors	250	690	
09/14/23	Kelly Kreibs Sierra Madre, CA 91024 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney / Munger Tolles Olson	250	250	

**SUBTOTAL \$ 950**

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**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/23</u> through <u>12/31/23</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>15</u> of <u>30</u>
NAME OF FILER <b>National Womens Political Caucus Greater Pasadena Area</b>	
I.D. NUMBER <b>1422805</b>	

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)
09/14/23	Maria Ramirez Whittier, CA 90602 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney/ County of Los Angeles	250	250	
09/14/23	Lena Louise Kennedy Pasadena, CA 91103 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO / L. Kennedy Consulting and Assoc.	440	<del>250</del> 650	
09/15/23	Ann Diederich Angeles, CA 90042 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Teacher / Polytechnic School	150	250	
09/16/23	Ann Hickambottom , Pasadena, CA 91103 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Field Rep / State Assembly	250	250	
09/16/23	Perry Wiggins Pasadena, CA 91104 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	100	100	
<b>SUBTOTAL \$ 1190</b>						

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**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/23</u> through <u>12/31/23</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>16</u> of <u>30</u>
I.D. NUMBER 1422805	

NAME OF FILER

National Womens Political Caucus Greater Pasadena Area

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)
09/16/23	Aislyn Namanga Compton, CA 90223 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Broker / Aislyn Namanga	250	250	
09/17/23	Betty Ann Jansson Pasadena, CA 91106 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	250	250	
09/18/23	Cynthia Cannaday Pasadena, CA 91103 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney / Cynthia Cannaday	100	100	
09/18/23	Natalya Romo , Sylmar, CA 91345 via:ACTBlue, Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Supervisor's Deputy / LA County	110	110	
09/19/23	Tara Peterson , Glendale, Ca 91206 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO / YMCA Glendale and Pasadena	100	100	

**SUBTOTAL \$ 810**

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**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/23</u> through <u>12/31/23</u>	<b>CALIFORNIA FORM 460</b>
	Page <del>17</del> of <u>30</u>
NAME OF FILER <b>National Womens Political Caucus Greater Pasadena Area</b>	
I.D. NUMBER <b>1422805</b>	

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)
09/19/23	Hoyt Hilsman Pasadena, CA 91106 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Writer / Hoyt Hilsman	100	100	
09/20/23	Mary Ann Lutz Monrovia, CA 91016 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant / Lutz and Company	100	100	
09/20/23	Diana Peterson-More Pasadena, CA 91106 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant / Diana Peterson-More	100	100	
09/22/23	Edward Washatka Pasadena, CA 91104 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	250	250	
09/23/23	Debra Ward Altadena, CA 91001 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO / YMCA San Gabriel Valley	500	500	

**SUBTOTAL \$ 1050**

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**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/23</u> through <u>12/31/23</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>18</u> of <u>30</u>
NAME OF FILER <b>National Womens Political Caucus Greater Pasadena Area</b>	
I.D. NUMBER <b>1422805</b>	

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)
09/23/23	Brandon Lamar #7, Pasadena, CA 91104 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Organizer / Youth Advocate Programs	100	100	
09/24/23	Laura Farber South Pasadena, CA 91030 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney / Hahn and Hahn	250	250	
09/25/23	Harriet Diane Scott Pasadena, CA 91107 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Administrator / Michael B. Scott MD	100	100	
09/26/23	G M Yeargin Pasadena, CA 91107 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	105	105	
09/27/23	Patricia Horton Los Angeles, CA 90017 via:ACTBlue, Somerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Administrator / Schiff for Congress	110	110	
<b>SUBTOTAL \$ 665</b>						

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**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/23</u> through <u>12/31/23</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>19</u> of <u>30</u>
I.D. NUMBER 1422805	

NAME OF FILER

National Womens Political Caucus Greater Pasadena Area

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)
09/28/23	Linda McLarnan Dugan ., Arcadia, CA 91006 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney / Linda Dugan	105	105	
09/29/23	Lena Louise Kennedy , Pasadena, CA 91103 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO / L. Kennedy Consulting and Assoc.	110	650	
10/13/23	Tamika Farr Pasadena, CA 91107 via:ACTBlue, , Sommerville, MA 02144	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO / PWLA	250	250	
08/13/23	Margaret McAustin Pasadena, CA 91104	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	250	250	
08/29/23	Chris Holden for Assembly 2022 , Los Angeles, CA 90017 ID 1435690	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2500	2500	

**SUBTOTAL \$ 3215**

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**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/23</u> through <u>12/31/23</u>	<b>CALIFORNIA FORM 460</b> Page <u>20</u> of <u>30</u>
I.D. NUMBER 1422805	

NAME OF FILER National Womens Political Caucus Greater Pasadena Area	I.D. NUMBER 1422805
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME) OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/09/23	Lara Larramendi Monrovia, CA 91016	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner / Lara Communications	100	100	
09/12/23	Gwen McMullin Altadena, CA 91001	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	100	100	
09/26/23	Sandra Martin Northridge, CA 91343	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker / None	100	100	
09/26/23	Martin Gordon Altadena, CA 91001	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	100	100	
09/28/23	Christina Hill Pasadena, CA 91105	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	100	100	
<b>SUBTOTAL \$ 500</b>						

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**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/23</u> through <u>12/31/23</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>201</u> of <u>30</u>
I.D. NUMBER 1422805	

NAME OF FILER

National Womens Political Caucus Greater Pasadena Area

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)
09/28/23	Belinda Walker Los Angeles, CA 90027	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	100	100	
09/29/23	Carmen Schaye Rolling Hills, CA 90274	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	100	100	
09/29/23	Christina Gold Pasadena, CA 91105	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	150	150	
09/29/23	Jan Perry Galanter Los Angeles, CA 90056	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	100	100	
10/04/23	Beverly Morgan Sandoz Pasadena, CA 91105	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired / None	1000	1000	
<b>SUBTOTAL \$ 1450</b>						

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other (e.g., business entity)  
PTY - Political Party  
SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/23</u> through <u>12/31/23</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>22</u> of <u>30</u>
NAME OF FILER <b>National Womens Political Caucus Greater Pasadena Area</b>	
I.D. NUMBER <b>1422805</b>	

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)
10/14/23	Kathryn Barger for Supervisor 2024 Los Angeles, CA 90017 ID 1456528	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		5000	5000	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				

**SUBTOTAL \$ 5000**

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other (e.g., business entity)  
PTY - Political Party  
SCC - Small Contributor Committee

**Schedule C  
Nonmonetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE C

Statement covers period from <u>07/01/2023</u> through <u>12/31/2023</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>23</u> of <u>30</u>
I.D. NUMBER 1422805	

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

National Womens Political Caucus Greater Pasadena Area

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
12/31/23	Jonathan Fuhrman  Pasadena, CA 91105-2749	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Political reporting specialist / Jonathan Fuhrman	Payment of \$50 annual filing fee; preparation of semi-annual	650.00	650.00	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL \$**

**Schedule C Summary**

- Amount received this period – itemized nonmonetary contributions.  
(Include all Schedule C subtotals.).....\$ 650.00
- Amount received this period – unitemized nonmonetary contributions of less than \$100 .....\$ \_\_\_\_\_
- Total nonmonetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.).....**TOTAL \$** 650.00

\*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 D  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

Amounts may be rounded  
to whole dollars.

SCHEDULE D

Statement covers period from <u>07/01/2023</u> through <u>12/31/2023</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>24</u> of <u>30</u>
I.D. NUMBER 1422805	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

National Womens Political Caucus Greater Pasadena Area

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/23/23	Phlunte Riddle State Assembly District 41	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		2500.00	2500.00	2500.00
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/29/23	Elen Asatryan State Assembly District 44	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		2500	2500	2500
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
12/22/23	Stephanie Fossan La Canada City Council (at large)	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		1000	1000	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
<b>SUBTOTAL \$ 6000</b>						

**Schedule D Summary**

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)..... \$ 9000.00
- Unitemized contributions and independent expenditures made this period of under \$100..... \$ 0.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ..... **TOTAL .. \$ 9000.00**

**Schedule D  
(Continuation Sheet)  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

Amounts may be rounded  
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period from <u>07/01/23</u> through <u>12/31/23</u>	<b>CALIFORNIA FORM 460</b> Page <u>245</u> of <u>30</u>
I.D. NUMBER 1422805	

NAME OF FILER

National Womens Political Caucus Greater Pasadena Area

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/22/23	Jeanne Hobson La Canada City Council (at large)	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		1000	1000	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
12/22/23	Desiree Rabinov Glendale Community College Board of Trustees District 1	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		1000	1000	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
12/22/23	Felicia Williams Pasadena City Council District 2	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		1000	1000	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					

**SUBTOTAL \$ 3000.00**

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

Statement covers period from <u>07/01/23</u> through <u>12/31/23</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>206</u> of <u>30</u>
I.D. NUMBER 1422805	

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

National Womens Political Caucus Greater Pasadena Area

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Phlunte Riddle for Assembly 2024 Ste. 200, Norwalk, CA 90650 ID: 1457161	CTB		2500.00
Elen Asatryan for State Assembly 2024 Inglewood, CA 90801 ID: 1460844	CTB		2500.00
Felicia Williams for City Council Sacramento, CA 95814 ID: 1462322	CTB		1000.00

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

**SUBTOTAL \$ 6000.00**

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 17322.96
2. Unitemized payments made this period of under \$100	\$ 139.27
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.)	<b>TOTAL \$ 17462.23</b>

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

Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period  
from 07/01/23  
through 12/31/23

**CALIFORNIA FORM 460**

Page 287 of 30

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

National Womens Political Caucus Greater Pasadena Area

I.D. NUMBER

1422805

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Stephanie Fossan for La Canada Flintridge City Council 2024 La Canada CA 91011 ID: 1463302	CTB		1000.00
Jeanne Hobson for City Council 2024 La Canada, CA 91011 ID: 1464134	CTB		1000.00
Desiree Rabinov for GCC Board of Trustees 2024 #1008, Encino, CA 91436 ID: 1460010	CTB		1000.00
The Flowerman Pasadena, CA 91107	FND		512.66
Print That Now Fontana, CA 92335	FND		1034.40

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

**SUBTOTAL \$ 4547.06**

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

Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period  
from 07/01/23  
through 12/31/23

**CALIFORNIA FORM 460**  
Page 28 of 30  
I.D. NUMBER  
1422805

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

National Womens Political Caucus Greater Pasadena Area

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Charlotte Bland Pasadena, CA 91107	FND		Miscellaneous supplies for fundraiser	120.15
Onil Chibas Events Pasadena, CA 91104	FND			3149.59
Eve Moir Glendale, CA 91741	FND			233.43
National Womens Political Caucus -- Operating Account Pasadena, CA 91107	FND		Reimbursement for expenses for fundraiser	1161.01
National Womens Political Caucus -- Operating Account Pasadena, CA 91107	CVC		Revenue-sharing allocation from fundraiser	818.93

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

**SUBTOTAL \$ 5483.11**



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

Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period  
from 07/01/23  
through 12/31/23

**CALIFORNIA FORM 460**

Page ~~28~~ 29 of 30

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

National Womens Political Caucus Greater Pasadena Area

I.D. NUMBER

1422805

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
ACTBlue Sommerville, MA 02144	FND			946.41
Alfred Haymond, Observational Photography Altadena, CA 91001	FND			246.38
Elisha Irish , Pasadena, CA 91107	FND		Sound equipment	100.00

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

**SUBTOTAL \$ 1292.79**

**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 07/01/23  
 through 12/31/23

**CALIFORNIA FORM 460**

Page 30 of 30

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

National Womens Political Caucus Greater Pasadena Area

I.D. NUMBER

1422805

NAME OF AGENT OR INDEPENDENT CONTRACTOR

National Womens Political Caucus Greater Pasadena Area -- Operating Account

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

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

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Amazon Seattle, WA 98108	FND			316.68
West Coast Trophies Pasadena, CA 91106	FND			352.80

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\* \$ 669.48**

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