

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

| | | | | |
|----------------------------------------------------------------|----------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------|----------------------------------------------------------------------|
| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing 12/11/2014 | Date Stamp RECEIVED BY: LOS ANGELES COUNTY 2014 DEC 12 AM 10:58 | GALIFORNIA FORM 497 For Official Use Only 019505 C10162 |
| AREA CODE/PHONE NUMBER [REDACTED] | I.D. NUMBER (if applicable) 1363752 | Report No. LCR-20141208 | No. of Pages 2 | |
| STREET ADDRESS [REDACTED] | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY [REDACTED] | STATE [REDACTED] | ZIP CODE [REDACTED] | CAMPAIGN FINANCE DISCLOSURE SECTION 1/2 | |

Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small> | CONTRIBUTOR CODE * | IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small> | AMOUNT RECEIVED |
|----------------|-----------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-----------------|
| 12/08/2014 | Pacifica Services Inc. [REDACTED] ID: _____ | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 1000.00 |
| 12/08/2014 | Howard S. Welinsky [REDACTED] ID: _____ | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | SVP Wamer Brothers | 500.00 |
| | ID: _____ | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |

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

Reason for Amendment: _____

JR

PAGE 01/02
PADILLA & ASSOCIATES
12/11/2014 17:32

Late Contribution Report

Type or print in ink.
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| | | | | |
|----------------------------------------------------------------|----------------------------------------|---------------------------------------------------------------------------|-----------------------|----------------------------------------------------------------------|
| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing <u>12/11/2014</u> | Date Stamp | CALIFORNIA FORM 497 For Official Use Only 019505 C10162 |
| AREA CODE/PHONE NUMBER [REDACTED] | I.D. NUMBER (if applicable) 1363752 | Report No. <u>LGR-20141211</u> | | |
| STREET ADDRESS [REDACTED] | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY [REDACTED] | STATE [REDACTED] | ZIP CODE [REDACTED] | No. of Pages <u>2</u> | 1/2 |

Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING 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 |
|---------------|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-----------------|
| 12/11/2014 | Orbach Huff Suarez & Henderson LLP [REDACTED] ID: _____ | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 1000.00 |
| | ID: _____ | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |
| | ID: _____ | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |

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 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Reason for Amendment: _____

JA

2142-4

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

| | | | | |
|----------------------------------------------------------------|----------------------------------------|---------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing 01/14/2015 | Date Stamp RECEIVED BY LOS ANGELES COUNTY 2015 JAN 14 PM 5:28 CAMPAIN FINANCE DISCLOSURE SECTION 1/2 | CALIFORNIA FORM 497 For Official Use Only 019505 C10162 |
| AREA CODE/PHONE NUMBER | I.D. NUMBER (if applicable) 1363752 | Report No. LCR-20150113 | | |
| STREET ADDRESS | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY | STATE | ZIP CODE | | |

Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING 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 |
|---------------|-------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-----------------|
| 01/13/2015 | Coalition for L.A. Community College Reform in Support of Francesca Vega Mike For [redacted] ID: 1315215 | <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Svet Svonkin & Sydney Kamiager for Trustee 2015 | 4900.00 |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |

*Contributor Codes

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

Reason for Amendment: _____

PAGE 01/02

PADILLA & ASSOCIATES

01/14/2015 16:21

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER
Vega For Community College Board Trustee 2015

AREA CODE/PHONE NUMBER [REDACTED] I.D. NUMBER (if applicable)
1363752

STREET ADDRESS [REDACTED]

CITY [REDACTED] STATE [REDACTED] ZIP CODE [REDACTED]

Date of This Filing 01/14/2015

Report No. LCR-20150107

Amendment to Report No. _____
(explain below)

No. of Pages 2

RECEIVED
LOS ANGELES
2015 JAN 14 PM 5:29

CALIFORNIA FORM 497
For Official Use Only

CAMPAIGN FINANCE DISCLOSURE SECTION

112

019505
C10162

Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING 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 |
|---------------|-------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|-----------------|
| 01/07/2015 | Coalition for L.A. Community College Reform in Support of Francesca Vega Mike For [REDACTED] ID: 1315215 | <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | For [REDACTED] Svonkin & Sydney Kamlager for Trustee 2015 | 29537.50 |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |

*Contributor Codes

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OTH - Other

PTY - Political Party
SCC - Small Contributor Committee

Reason for Amendment: _____

JR

PAGE 02/02

PADILLA & ASSOCIATES

01/14/2015 16:21

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER
Vega For Community College Board Trustee 2015

AREA CODE/PHONE NUMBER _____ **I.D. NUMBER (if applicable)**
1363752

STREET ADDRESS

CITY _____ **STATE** _____ **ZIP CODE** _____

Date of This Filing 01/27/2015

Report No. LCR-20150126

Amendment to Report No. _____
(explain below)

No. of Pages 2

Date Stamp
JAN 28 PM 12:22

CALIFORNIA FORM 497

For Official Use Only

Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING 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 |
|---------------|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-----------------|
| 01/26/2015 | Telacu Industries Inc. [REDACTED] ID: _____ | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 1000.00 |
| | ID: _____ | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |
| | ID: _____ | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |

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SCC - Small Contributor Committee

Reason for Amendment: _____

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

| | | | | |
|-----------------------------------------------------------------------|-----------------------------------------------|----------------------------------------------------------------------------------|--------------------------------------------------------------------------------|-----------------------------------------------------|
| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing 02/03/2015 | Date Stamp RECEIVED 2015 FEB -3 PM 5:13 CAMPAIGN FINANCIAL DISCLOSURE | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER [REDACTED] | I.D. NUMBER (if applicable) 1363752 | Report No. LCR-20150202 | | |
| STREET ADDRESS [REDACTED] | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY _____ | STATE _____ | ZIP CODE _____ | No. of Pages 3 | 1/3 |

Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING 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 |
|----------------|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-----------------|
| 02/02/2015 | I.L.W.U. Local 13 PAC [REDACTED] ID: 1 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 2500.00 |
| 02/02/2015 | Holly J Mitchell for Senate 2014 [REDACTED] ID: 1361039 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 2000.00 |
| 02/02/2015 | Southern California District Council of Laborers PAC [REDACTED] ID: 1358150 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC | | 2500.00 |

***Contributor Codes**

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 PTY - Political Party
 SCC - Small Contributor Committee

Reason for Amendment: _____

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LATE CONTRIBUTION REPORT

| | | | |
|-----------------------------------------------------------------------|-----------------------------------------------|----------------------------------------------------------------------------------|-----------------------------------------------------|
| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing _____ RECEIVED BY LISC | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER _____ | I.D. NUMBER (if applicable) 1363752 | Report No. _____ 2015 FEB -3 PM 5:13 | |
| STREET ADDRESS _____ | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | |
| CITY _____ | STATE _____ | ZIP CODE _____ | |

Late Contribution(s) Made

| DATE MADE | FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION | AMOUNT OF CONTRIBUTION | DATE OF ELECTION (IF APPLICABLE) |
|-----------|------------------------------------------------------------------------------------------------|--------------------------------------------------|------------------------|----------------------------------|
| | ID: _____ | Ballot: Dist: | | |
| | ID: _____ | Ballot: Dist: | | |
| | ID: _____ | Ballot: Dist: | | |
| | ID: _____ | Ballot: Dist: | | |

Reason for Amendment: _____

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

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|----------------------------------------------------------------|----------------------------------------|---------------------------------------------------------------------------|------------------------------------------|-------------------------------------------------|
| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing _____ | Date Stamp RECEIVED BY MAR 15 2015 | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER | I.D. NUMBER (if applicable) 1363752 | Report No. _____ 2015 | FEB -3 PM 5:13 | |
| STREET ADDRESS | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | CAMPAIGN FINANCE DISCLOSURE STATEMENT | |
| CITY | STATE | ZIP CODE | No. of Pages _____ 3/3 | |

Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING 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 |
|---------------|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-----------------|
| 02/02/2015 | Telacu Industries Inc. [REDACTED] ID: _____ | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 1000.00 |

***Contributor Codes**

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OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Reason for Amendment: _____

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

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|-----------------------------------------------------------------------|-----------------------------------------------|---------------------------------------------------------------------------|------------------------------------------|------------------------------------------------------------------|
| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing 02/10/2015 | Date Stamp 2015 FEB 10 PM 2:00 | CALIFORNIA FORM 497 For Official Use Only 019505 C10162 |
| AREA CODE/PHONE NUMBER [REDACTED] | I.D. NUMBER (if applicable) 1363752 | Report No. LCR-20150209 | | |
| STREET ADDRESS [REDACTED] | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY _____ | STATE _____ | ZIP CODE _____ | No. of Pages 2 | |

Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING 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 |
|---------------|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|-----------------|
| 02/09/2015 | Lara for Senate 2016 [REDACTED] ID: 1354200 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 5000.00 |
| 02/09/2015 | Kevin De Leon for Senate 2014 [REDACTED] ID: 1334203 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 5000.00 |
| 02/09/2015 | Fabian Nunez for Treasurer 2018 [REDACTED] ID: 1366750 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 5000.00 |

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 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Reason for Amendment: _____

PAGE 01/02
 PADILLA ASSOC
 02/10/2015 03:33

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

| | | | |
|-----------------------------------------------------------------------|-----------------------------------------------|----------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|
| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing _____ | CALIFORNIA FORM 497 For Official Use Only REC'D FEB 10 PM 5:00 CALIFORNIA STATE BOARD OF EQUAL OPPORTUNITY |
| AREA CODE/PHONE NUMBER _____ | I.D. NUMBER (if applicable) 1363752 | Report No. _____ | |
| STREET ADDRESS _____ | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | |
| CITY _____ | STATE _____ | ZIP CODE _____ | |
| | | No. of Pages _____ | 212 |

Late Contribution(s) Made

| DATE MADE | FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION | AMOUNT OF CONTRIBUTION | DATE OF ELECTION (IF APPLICABLE) |
|-----------|------------------------------------------------------------------------------------------------|--------------------------------------------------|------------------------|----------------------------------|
| | ID: _____ | Ballot: Dist: | | |
| | ID: _____ | Ballot: Dist: | | |
| | ID: _____ | Ballot: Dist: | | |
| | ID: _____ | Ballot: Dist: | | |

Reason for Amendment: _____

Late Contribution Report

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LATE CONTRIBUTION REPORT

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|----------------------------------------------------------------|----------------------------------------|---------------------------------------------------------------------------|-----------------------------------|----------------------------------------------|
| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing <u>02/11/2015</u> | Date Stamp 2015 FEB 11 PM 4:23 | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER [REDACTED] | I.D. NUMBER (if applicable) 1363752 | Report No. <u>LCR-2015020</u> | CAMPAIGN DISCLOSURE 1/2 | |
| STREET ADDRESS [REDACTED] | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY [REDACTED] | STATE [REDACTED] | ZIP CODE [REDACTED] | No. of Pages <u>2</u> | |

Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING 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 |
|----------------|-------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|-----------------|
| 02/10/2015 | Coalition for L.A. Community College Reform in Support of Francesca Vega Mike For [REDACTED] ID: 1315215 | <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Scott Svonkin & Sydney Kamlager for Trustee 2015 | 15225.30 |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |

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 IND - Individual
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Reason for Amendment: _____

Late Contribution Report

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LATE CONTRIBUTION REPORT

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|----------------------------------------------------------------|----------------------------------------|---------------------------------------------------------------------------|-----------------------------------|----------------------------------------------|
| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing 02/11/2015 | Date Stamp 2015 FEB 11 PM 4:23 | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER [REDACTED] | I.D. NUMBER (if applicable) 1363752 | Report No. LCR-20150209-1 | | |
| STREET ADDRESS [REDACTED] | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY [REDACTED] | STATE [REDACTED] | ZIP CODE [REDACTED] | No. of Pages 2 | 1/2 |

Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING 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 |
|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-----------------|
| 02/09/2015 | Coalition for L.A. Community College Reform in Support of Francesca Vega Mike Forgo, Scott Svonkin & Sydney Kamlager for Trustee 2015 [REDACTED] ID: 1315215 | <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 16348.53 |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |

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Reason for Amendment: _____

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|------------------------------------------------------------------------------------------|---------------------------------------------|----------------------------------------------------------------------------------|-----------------------------------------------------|
| NAME OF FILER Vega For Community College Board Trustee 2015 <i>RECEIVED</i> | | Date of This Filing 02/11/2015 Date Stamp | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER [REDACTED] | ID NUMBER (if applicable) 1362752 | Report No. LCR-20150120 FEB 12 PM 4:00 AM 10:24 | |
| STREET ADDRESS [REDACTED] | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | 1/2 |
| CITY [REDACTED] | DIST STATE ZIP CODE [REDACTED] | | |

Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED |
|---------------|-------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-----------------|
| 01/20/2015 | Coalition for L.A. Community College Reform in Support of Francesca Vega Mike For [REDACTED] ID: 1315215 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Scott Svonkin & Sydney Kamlager for Trustee 2015 | 86831.59 |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |

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Reason for Amendment: _____

PAGE 01/01

PADILLA ASSOC

02/11/2015 04:02

Late Contribution Report

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LATE CONTRIBUTION REPORT

| | | | | |
|-----------------------------------------------------------------------|----------------------------------------------------|---------------------------------------------------------|------------------------------------------------------|-----------------------------------------------------|
| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing 02/11/2015 | Date Stamp 2015 FEB 11 CALIFORNIA ELECTORAL | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER [REDACTED] | I.D. NUMBER (if applicable) 1363752 | Report No. LCR-20150203 | | |
| STREET ADDRESS [REDACTED] | | Amendment to Report No. _____ (explain below) | 2015 FEB 24 | |
| CITY [REDACTED] | STATE [REDACTED] ZIP CODE [REDACTED] | No. of Pages 2 | | |

Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING 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 |
|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-----------------|
| 02/03/2015 | Coalition for L.A. Community College Reform in Support of Francesca Vega Mike For [REDACTED] Svonkin & Sydney Kamlager for Trustee 2015 ID: 1315215 | <input checked="checked" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 16033.60 |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |

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 OTH - Other

Reason for Amendment: _____

PAGE 01/01
 PADILLA ASSDC
 02/11/2015 04:03

Late Contribution Report

Type or print in ink.
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LATE CONTRIBUTION REPORT

| | | | | |
|----------------------------------------------------------------|---------------------------------------|---------------------------------------------------------------------------|------------------------------------|----------------------------------------------|
| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing 02/12/2015 | Date Stamp 2015 FEB 13 AM 11:15 | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER [REDACTED] | ID. NUMBER (if applicable) 1363752 | Report No. LCR-20150211 | | |
| STREET ADDRESS [REDACTED] | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY [REDACTED] | STATE [REDACTED] | ZIP CODE [REDACTED] | No. of Pages 2 | 1/2 |

Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING 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 |
|----------------|------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-----------------|
| 02/11/2015 | Arcadis [REDACTED] ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 1000.00 |
| 02/11/2015 | Coalition for L.A. Community College Reform in Support of Francesca Vega Mike Forgo [REDACTED] ID: 1315215 | <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Forgo, Svonkin & Sydney Kamtager for Trustee 2015 | 6753.50 |
| 02/11/2015 | Dakota Communications [REDACTED] ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 1000.00 |

*Contributor Codes

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

Reason for Amendment: _____

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

| | | | | |
|----------------------------------------------------------------|----------------------------------------|---------------------------------------------------------------------------|--------------------------------------|----------------------------------------------|
| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing <u>02/13/2015</u> | Date Stamp FEB 13 2015 PM 1:35 | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER [REDACTED] | I.D. NUMBER (if applicable) 1363752 | Report No. <u>LCR-20150212</u> | No. of Pages <u>2</u> | |
| STREET ADDRESS [REDACTED] | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY [REDACTED] | STATE [REDACTED] | ZIP CODE [REDACTED] | 1/2 | |

Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING 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 |
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| 02/12/2015 | Coalition for L.A. Community College Reform in Support of Francesca Vega Mike [REDACTED] ID: 1315215 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | For [REDACTED] Svonkin & Sydney Kamlager for Trustee 2015 | 437.50 |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |

*Contributor Codes
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 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Reason for Amendment: _____

PAGE 01/01
PADILLA ASSOC
02/12/2015 23:53

Late Contribution Report

Type of print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER
Vega For Community College Board Trustee 2015

AREA CODE/PHONE NUMBER [REDACTED] **I.D. NUMBER (if applicable)**
1363752

STREET ADDRESS
[REDACTED]

CITY _____ **STATE** _____ **ZIP CODE** _____

Date of This Filing 02/18/2015

Report No. LCR-20150210-1

Amendment to Report No. _____
(explain below)

No. of Pages 2

Date Stamp

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LOS ANGELES COUNTY
2015 FEB 19 AM 11:57
CAMPAIGN FINANCE
DISCLOSURE SECTION
112

CALIFORNIA FORM 497

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Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING 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 |
|---------------|--------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-----------------|
| 02/10/2015 | John David Ek [REDACTED] ID: _____ | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Owner Ek and Svakin | 1000.00 |
| | ID: _____ | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |
| | ID: _____ | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |

***Contributor Codes**

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COM - Recipient Committee (other than PTY or SCC)
OTH - Other

PTY - Political Party
SCC - Small Contributor Committee

Reason for Amendment: _____

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

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LOS ANGELES COUNTY
LATE CONTRIBUTION REPORT

Date Stamp
2015 FEB 19 AM 11:00

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3-1 CAMPAIGN FINANCE
DISCLOSURE SECTION

No. of Pages 2

NAME OF FILER
Vega For Community College Board Trustee 2015

AREA CODE/PHONE NUMBER [REDACTED] **I.D. NUMBER (if applicable)**
1363752

STREET ADDRESS
[REDACTED]

CITY [REDACTED] **STATE** [REDACTED] **ZIP CODE** [REDACTED]

Date of This Filing 02/18/2015

Report No. LCR-201502

Amendment to Report No. _____
(explain below)

No. of Pages 2

Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING 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 |
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| 02/13/2015 | Service Employees Int'l Union Local 721 [REDACTED] ID: 743794 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 3000.00 |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |

***Contributor Codes**

IND - Individual
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OTH - Other

PTY - Political Party
SCC - Small Contributor Committee

Reason for Amendment: _____

PAGE 01/01

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

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| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing <u>02/18/2015</u> | RECEIVED LOS ANGELES COUNTY FEB 19 AM 11:57 | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER [REDACTED] | I.D. NUMBER (if applicable) 1363752 | Report No. <u>LCR-20150213</u> | CAMPAIGN FINANCE DISCLOSURE SECTION 1/2 | |
| STREET ADDRESS [REDACTED] | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY [REDACTED] | STATE [REDACTED] | ZIP CODE [REDACTED] | | |

Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small> | CONTRIBUTOR CODE * | IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small> | AMOUNT RECEIVED |
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| 02/13/2015 | Service Employees International Union Local 99 Candidate PAC [REDACTED] ID: 980422 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC | | 3000.00 |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |

*Contributor Codes

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| COM - Recipient Committee (other than PTY or SCC) | SCC - Small Contributor Committee |
| OTH - Other | |

Reason for Amendment: _____

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 FAULLA ASSOC
 PAGE 01/01

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

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|----------------------------------------------------------------|----------------------------------------|---------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|----------------------------------------------|
| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing <u>02/19/2015</u> | Date Stamp RECEIVED BY LOS ANGELES CO 2015 FEB 19 PM 1:10 CAMPAIGN FINANCE DISCLOSURE SECTION 1/2 | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER | I.D. NUMBER (if applicable) 1363752 | Report No. <u>LCR-20150213-2</u> | | |
| STREET ADDRESS | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY | STATE | ZIP CODE | | |

Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING 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 |
|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-----------------|
| 02/13/2015 | Coalition for L.A. Community College Reform in Support of Francesca Vega Mike For [redacted] Svonkin & Sydney Kamlager for Trustee 2015 ID: 1315215 | <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 4089.51 |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |

***Contributor Codes**

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OTH - Other
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SCC - Small Contributor Committee

Reason for Amendment: _____

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

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| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing 02/23/2015 | Date Stamp RECEIVED BY LOS ANGELES COUNTY 2015 FEB 24 AM 9:13 CAMPAIGN FINANCE DISCLOSURE SECTION 1/2 | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER | I.D. NUMBER (if applicable) 1363752 | Report No. LCR-20150218 | <input type="checkbox"/> Amendment to Report No. (explain below) | |
| STREET ADDRESS | | No. of Pages 2 | | |
| CITY | STATE | ZIP CODE | | |

Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING 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 |
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| 02/18/2015 | Coalition for L.A. Community College Reform in Support of Francesca Vega Mike For [redacted] ID: 1315215 | <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | For [redacted] Svonkin & Sydney Kamlager for Trustee 2015 | 617.12 |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |

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Reason for Amendment: _____

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

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|----------------------------------------------------------------|----------------------------------------|---------------------------------------------------------------------------|-------------------------------------|----------------------------|
| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing <u>02/26/2015</u> | Date Stamp BY LOS ANGELES COUNTY | CALIFORNIA FORM 497 |
| AREA CODE/PHONE NUMBER | I.D. NUMBER (if applicable) 1363752 | Report No. <u>LCR-2015022</u> | 2015 FEB 26 PM 4:11 | For Official Use Only |
| STREET ADDRESS | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | CAMPAIGN FINANCE DISCLOSURE SECTION | |
| CITY | STATE | ZIP CODE | No. of Pages <u>2</u> | 1 / 2 |

Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING 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 |
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| 02/25/2015 | Bicycle Casino [REDACTED] ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 2000.00 |
| 02/25/2015 | Commerce Hotel Casino [REDACTED] ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 2000.00 |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |

*Contributor Codes
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 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Reason for Amendment: _____

PAGE 01/08
PADILLA ASSOC
03/02/2015 05:30

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

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| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing 02/19/2015 | RECEIVED BY LOS ANGELES COURT 18 MAR -3 PM 4:15 CAMPION FINANCIAL DISCLOSURE SECTION Date Stamp 1/2 | GALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER | I.D. NUMBER (if applicable) 1363752 | Report No. LCM-20150218 | | |
| STREET ADDRESS | | <input type="checkbox"/> Amendment to Report No. (explain below) | | |
| CITY | STATE | ZIP CODE | No. of Pages 2 | |

Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING 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 |
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IND - Individual
COM - Recipient Committee (other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Reason for Amendment: _____

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

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| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing _____ | RECEIVED BY LOS ANGELES COUNTY 2015 MAR -3 PM 4:15 CAMPAIGN FINANCE DISCLOSURE SECTION 2/2 | CALIFORNIA FORM 497 |
| AREA CODE/PHONE NUMBER | I.D. NUMBER (if applicable) 1363752 | Report No. _____ | | |
| STREET ADDRESS | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY | STATE | ZIP CODE | | No. of Pages _____ |

Late Contribution(s) Made

| DATE MADE | FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION | AMOUNT OF CONTRIBUTION | DATE OF ELECTION (IF APPLICABLE) |
|------------|--------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|-------------------------------|----------------------------------|
| 02/18/2015 | Coalition for L.A. Community College Reform in Support of Francesca [REDACTED] ID: 1315215 | Vega Mike Fong Scott Svonkin & Sydney Kamlager for Ballot: Dist: | 6000.00 4000.00 | 2015 06/07/2016 |
| | ID: | Ballot: Dist: | | |
| | ID: | Ballot: Dist: | | |
| | ID: | Ballot: Dist: | | |

Reason for Amendment: _____

Late Contribution Report

Type or print in ink. Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER
Vega For Community College Board Trustee 2015

AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable)
1363752

STREET ADDRESS

CITY STATE ZIP CODE

Date of This Filing 02/19/2015

Report No. LCM-201502

Amendment to Report No. _____
(explain below)

No. of Pages 2

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LOS ANGELES COUNTY
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CALIFORNIA FORM **497**

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Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING 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 |
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| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |
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*Contributor Codes
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 OTH - Other

Reason for Amendment: _____

Late Contribution Report

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LATE CONTRIBUTION REPORT

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| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing _____ | RECEIVED BY LOS ANGELES COUNTY 2015 MAR -3 PM 4:15 CAMPAIGN FINANCE DISCLOSURE SECTION 2/2 | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER _____ | I.D. NUMBER (if applicable) 1363752 | Report No. _____ | | |
| STREET ADDRESS _____ | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY _____ | STATE _____ | ZIP CODE _____ | | No. of Pages _____ |

Late Contribution(s) Made

| DATE MADE | FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION | AMOUNT OF CONTRIBUTION | DATE OF ELECTION (IF APPLICABLE) |
|----------------|--------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|-----------------------------------|----------------------------------|
| 02/11/2015 | Coalition for L.A. Community College Reform in Support of Francesca [REDACTED] ID: 1315215 | Vega Mike Fong Scott Svonkin & Sydney Kamlager Ballot: Dist: | 15,000.00 15,000.00 | 2015 03/03/2015 |
| | ID: _____ | Ballot: Dist: | | |
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| | ID: _____ | Ballot: Dist: | | |

Reason for Amendment: _____

PAGE 04/08

PADILLA ASSOC

03/02/2015 05:30

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Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER
Vega For Community College Board Trustee 2015

AREA CODE/PHONE NUMBER: [REDACTED] I.D. NUMBER (if applicable): 1363752

STREET ADDRESS: [REDACTED]

CITY: [REDACTED] STATE: [REDACTED] ZIP CODE: [REDACTED]

Date of This Filing: 02/19/2015

Report No.: LCM-20150204

Amendment to Report No. _____
(explain below)

No. of Pages: 2

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2015 MAR -3 PM 4:15
CAMPAIGN FINANCE
DISCLOSURE SECTION
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CALIFORNIA FORM 497

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Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING 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 |
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| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |
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SCC - Small Contributor Committee

Reason for Amendment: _____

PAGE 05/08

PADILLA ASSOC

03/02/2015 05:30

Late Contribution Report

Type or print in ink.
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LATE CONTRIBUTION REPORT

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| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing _____ | RECEIVED BY LOS ANGELES CO 2015 MAR -3 PM 4:15 CAMPAIGN FINANCIAL DISCLOSURE SECTION 2/2 | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER | I.D. NUMBER (if applicable) 1363752 | Report No. _____ | | |
| STREET ADDRESS | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY | STATE | ZIP CODE | | |

Late Contribution(s) Made

| DATE MADE | FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION | AMOUNT OF CONTRIBUTION | DATE OF ELECTION (IF APPLICABLE) |
|------------|--------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------|-------------------------------------|
| 02/04/2015 | Coalition for L.A. Community College Reform in Support of Francesca [REDACTED] ID: 1315215 | Vega Mike Fong Scott Svonkin & Sydney Kamlager for Ballot: Dist: | 7000.00 \$1000.50 | 03/03/2015 |
| | ID: | Ballot: Dist: | | |
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Reason for Amendment: _____

PAGE 06/08

PADILLA ASSOC

03/02/2015 05:30

Late Contribution Report

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Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

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| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing <u>02/19/2015</u> | Date Stamp RECEIVED LOS ANGELES 2015 MAR -3 PM 4:15 CAMPAIGN FINANCE DISCLOSURE SECTION 1/2 | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER [REDACTED] | I.D. NUMBER (if applicable) 1363752 | Report No. <u>LCM-20150108</u> | | |
| STREET ADDRESS [REDACTED] | | <input type="checkbox"/> Amendment to Report No. _____ (explain below) | | |
| CITY _____ | STATE _____ | No. of Pages <u>2</u> | | |
| [REDACTED] | | | | |

Late Contribution(s) Received

| DATE RECEIVED | FULL NAME, MAILING 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 |
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| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |
| | ID: | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | |
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Reason for Amendment: _____

PAGE 07/08
 PADILLA ASSOC
 03/02/2015 05:30

Late Contribution Report

Type or print in ink.
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LATE CONTRIBUTION REPORT

| | | | | |
|----------------------------------------------------------------|----------------------------------------|------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| NAME OF FILER Vega For Community College Board Trustee 2015 | | Date of This Filing _____ | RECEIVED BY LOS ANGELES CO 2015 MAR -3 PM 4:15 CAMPAIGN FINANCE DISCLOSURE SECTION 2/2 | CALIFORNIA FORM 497 For Official Use Only |
| AREA CODE/PHONE NUMBER | I.D. NUMBER (if applicable) 1363752 | Report No. _____ | | |
| STREET ADDRESS | | <input type="checkbox"/> Amendment to Report No. _____ <small>(explain below)</small> | | |
| CITY | STATE | ZIP CODE | | |

Late Contribution(s) Made

| DATE MADE | FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small> | CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION | AMOUNT OF CONTRIBUTION | DATE OF ELECTION <small>(IF APPLICABLE)</small> |
|------------|---------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|------------------------|----------------------------------------------------|
| 01/08/2015 | Coalition for L.A. Community College Reform in Support of Francesca [REDACTED] ID: 1315215 | Vega Mike Fong Scott Svonkin & Sydney Kamtager Ballot: Dist: | 6500.00 35000.00 | 03/03/2015 |
| | ID: | Ballot: Dist: | | |
| | ID: | Ballot: Dist: | | |
| | ID: | Ballot: Dist: | | |

Reason for Amendment: _____

Recipient Committee Campaign Statement Cover Page

COVER PAGE

| | |
|-------------------------------------------------------------------------------|-------------------------------------------|
| Date Stamp 2015 JAN 23 PM 4:21 1/22/15 a.n. CALIFORNIA DISCLOSURE | CALIFORNIA FORM 460 |
| Page 1 of 9 | For Official Use Only 019505 C10162 |

| | |
|-------------------------------------------------------------------------|---------------------------------------------------------------------------|
| Statement covers period from 01/01/2015 through 01/17/2015 | Date of Election if applicable 03/03/2015 (Month, Day, Year) |
|-------------------------------------------------------------------------|---------------------------------------------------------------------------|

1. Type of Recipient Committee

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

2. Type of Statement

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

3. Committee Information

I.D. Number 1363752

COMMITTEE NAME
Vega For Community College Board Trustee 2015

STREET ADDRESS (NO PO BOX)
[REDACTED]
CITY STATE ZIP CODE AREA CODE/PHONE

MAILING ADDRESS (IF DIFFERENT)
[REDACTED]
CITY STATE ZIP CODE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER
Jane Leiderman
STREET ADDRESS
[REDACTED]
CITY STATE ZIP CODE AREA CODE/PHONE

NAME OF ASSISTANT TREASURER, IF ANY
STREET ADDRESS
CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein is true and complete. I certify under penalty of perjury under [REDACTED] correct.

Executed on 1/22/15 By [REDACTED]

Executed on 1/22/15 By [REDACTED]

Executed on _____ By _____

Executed on _____ By _____

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

JR

**Recipient Committee
Campaign Statement
Cover Page - Part 2**

Statement covers period
from 01/01/2015
through 01/17/2015

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Francesca Vega

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

Board of Education Los Angeles

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

Related Committees Not Included in this Statement: *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy*

COMMITTEE NAME I.D. NUMBER

NAME OF TREASURER CONTROLLED COMMITTEE ?

YES NO

COMMITTEE STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME I.D. NUMBER

NAME OF TREASURER CONTROLLED COMMITTEE ?

YES NO

COMMITTEE STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER JURISDICTION

SUPPORT
 OPPOSE

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

NAME OF OFFICEHOLDER OR CANDIDATE OR PROPONENT

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT
 OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT
 OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT
 OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT
 OPPOSE

**Campaign Disclosure Statement
Summary Page**

| | | |
|-------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2015 | |
| through | 01/17/2015 | |
| | | Page 3 of 3 |

NAME OF FILER Vega For Community College Board Trustee 2015

I.D. NUMBER
1363752

| | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|-----------------------------------------------------------|------------------------------------------------------------|--------------------------------------------|
| Contributions Received | | |
| 1. Monetary Contributions Schedule A, Line 3 | \$ 525.00 | \$ 525.00 |
| 2. Loans Received Schedule B, Line 3 | 0.00 | 0.00 |
| 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 | \$ 525.00 | \$ 525.00 |
| 4. Nonmonetary Contributions Schedule C, Line 3 | 34,437.50 | 34,437.50 |
| 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 | \$ 34,962.50 | \$ 34,962.50 |

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

| | 1/1 through 8/30 | 7/1 to Date |
|----------------------------|------------------|-------------|
| 20. Contributions Received | \$ _____ | \$ _____ |
| 21. Expenditures Made | \$ _____ | \$ _____ |

| | | |
|-----------------------------------------------------------------|--------------|--------------|
| Expenditures Made | | |
| 6. Payments Made Schedule E, Line 4 | \$ 39,916.99 | \$ 39,916.99 |
| 7. Loans Made Schedule F, Line 3 | 0.00 | 0.00 |
| 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 | \$ 39,916.99 | \$ 39,916.99 |
| 9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 | -4,055.85 | 0.00 |
| 10. Nonmonetary Adjustment Schedule C, Line 3 | 34,437.50 | 34,437.50 |
| 11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10 | \$ 70,298.64 | \$ 74,354.49 |

**Expenditure Limit Summary
for State Candidates**

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

| | |
|-------|----------|
| _____ | \$ _____ |
| _____ | \$ _____ |

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

| Current Cash Statement | |
|-----------------------------------------------------------------------|--------------|
| 12. Beginning Cash Balance Previous Summary Page, Line 16 | \$ 43,002.04 |
| 13. Cash Receipts Column A, Line 3 above | 525.00 |
| 14. Miscellaneous Increases to Cash Schedule I, Line 4 | 0.00 |
| 15. Cash Payments Column A, Line 8 above | 39,916.99 |
| 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 | \$ 3,610.05 |
| 17. LOAN GUARANTEES RECEIVED. Schedule B, Part 2 | \$ 0.00 |

| Cash Equivalents and Outstanding Debts | |
|-----------------------------------------------------------------------|---------|
| 18. Cash Equivalents | \$ 0.00 |
| 19. Outstanding Debts. Add Lines 2 + Line 9 in Column B above | \$ 0.00 |

**Schedule A
Monetary Contributions Received**

SCHEDULE A

| | | |
|-------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2015 | |
| through | 01/17/2015 | Page 4 of 9 |

NAME OF FILER Vega For Community College Board Trustee 2015

I.D. NUMBER
1363752

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|-------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------|---------------------------------------|
| 01/01/2015 | Dana Dean [REDACTED] | IND | Attorney Dana Dean | 250.00 | 250.00 | |
| 01/06/2015 | Rendon for Assembly 2014 [REDACTED] | COM | ID No. 1354096 | 250.00 | 250.00 | |

SUBTOTAL \$ 500.00

Schedule A Summary

| | | |
|---------------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------|
| 1. Amount received this period - itemized contributions (Includes all Schedule A subtotals) | \$ | 500.00 |
| 2. Amount received this period - unitemized | \$ | 25.00 |
| 3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A Line 1) | TOTAL \$ | 525.00 |

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

**Schedule C
Nonmonetary Contributions Received**

SCHEDULE C

| | | |
|-------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2015 | |
| through | 01/17/2015 | Page 5 of 9 |

| | |
|-------------------------------------------------------------|------------------------|
| NAME OF FILER Vega For Community College Board Trustee 2015 | I.D. NUMBER 1363752 |
|-------------------------------------------------------------|------------------------|

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR | CONTRIBUTOR CODE | OCCUPATION & EMPLOYER OR COMMITTEE ID NO. | DESCRIPTION OF GOODS OR SERVICES | AMOUNT/ FAIR MARKET VALUE | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|----------------------------------------------------------------------------------------|------------------|-------------------------------------------|----------------------------------|---------------------------|-----------------------------------------------------|------------------------------------|
| 01/07/2015 | Coalition for L.A. Community College Reform in Support of Francesca Vega [REDACTED] | COM | ID No. 1315215 | Slate Mailer | 29,537.50 | 34,437.50 | |
| 01/13/2015 | Coalition for L.A. Community College Reform in Support of Francesca Vega [REDACTED] | COM | ID No. 1315215 | Slate Mailer | 4,900.00 | 34,437.50 | |

| | |
|--------------------|-----------|
| SUBTOTAL \$ | 34,437.50 |
|--------------------|-----------|

Schedule C Summary

| | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| 1. Amount received this period - itemized contributions (Includes all Schedule C subtotals) | \$ 34,437.50 |
| 2. Amount received this period - unitemized | \$ 0.00 |
| 3. 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 \$ 34,437.50 |

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

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

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2015 | |
| through | 01/17/2015 | Page 6 of 9 |

NAME OF FILER Vega For Community College Board Trustee 2015

ID NUMBER
1363752

| 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) |
|------------|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|--------------------|---------------------------------------------------|------------------------------------|
| 01/08/2015 | Coalition for L.A. Community College Reform in Support of Francesca Vega Mike Fong Scott Svonkin | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure | | 35,000.00 | 35,000.00 | |
| | | <input checked="" type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE | | | | |

SUBTOTAL \$ 35,000.00

Schedule D Summary

| | |
|-------------------------------------------------------------------------------------------------------------------------------------|--------------|
| 1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) | \$ 35,000.00 |
| 2. Unitemized contributions and independent expenditures made this period of under \$100. | \$ 0.00 |
| 3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) .TOTAL | \$ 35,000.00 |

**Schedule E
Payments Made**

| | | |
|-------------------------------------------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2015 | |
| through | 01/17/2015 | Page 7 of 9 |
| NAME OF FILER Vega For Community College Board Trustee 2015 | | ID NUMBER 1363752 |

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

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

| NAME AND ADDRESS OF PAYEE | CODE or DESCRIPTION OF PAYMENT | AMOUNT PAID |
|-------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|------------------|
| Coalition for L.A. Community College Reform in Support of Francesca Vega Mike Fong Scott Svonkin [REDACTED] ID No: 1315215 | CTB | 35,000.00 |
| Mailing Pros Inc. [REDACTED] | LIT | 365.19 |
| Mitchell Publishing Inc. 2014 [REDACTED] | LIT | 495.95 |
| SUBTOTAL \$ | | 35,861.14 |

Schedule E Summary

| | |
|-------------------------------------------------------------------------------------------------------------------|---------------------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.) | \$ 39,916.99 |
| 2. Unitemized payments made this period of under \$100 | \$ 0.00 |
| 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) | \$ 0.00 |
| 4. Total payments made this period. (Add Line 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) | TOTAL \$ 39,916.99 |


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

SCHEDULE E

| | | |
|-------------------------------------------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2015 | |
| through | 01/17/2015 | Page 8 of 9 |
| NAME OF FILER Vega For Community College Board Trustee 2015 | | I.D. NUMBER 1363752 |

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

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

| NAME AND ADDRESS OF PAYEE | CODE or | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|--------------------------------------------------------------------------------------------------|---------|------------------------|-------------|
| Nicole Ward  | CNS | | 4,055.85 |

SUBTOTAL \$ 4,055.85

**Schedule F
Accrued Expenses (Unpaid Bills)**

| | | |
|-------------------------|------------|-------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2015 | |
| through | 01/17/2015 | Page 9 of 9 |

NAME OF FILER Vega For Community College Board Trustee 2015

I.D. NUMBER
1363752

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

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

| NAME AND ADDRESS OF CREDITOR | CODE OR DESCRIPTION OF PAYMENT | (a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD | (b) AMOUNT INCURRED THIS PERIOD | (c) AMOUNT PAID THIS PERIOD | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD |
|------------------------------|-------------------------------------------|-----------------------------------------------------|------------------------------------|--------------------------------|----------------------------------------------------|
| Nicole Ward [REDACTED] | See Schedule E for codes or descriptions. | 4,055.85 | 0.00 | 4,055.85 | 0.00 |

SUBTOTALS \$ 4,055.85 \$ 0.00 \$ 4,055.85 \$ 0.00

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) **INCURRED TOTALS \$ 0.00**
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) **PAID TOTALS \$ 4,055.85**
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, column A, Line 9.) **NET \$ -4,055.85**

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CAMPAIGN FINANCE
DISCLOSURE SECTION

Recipient Committee
Campaign Statement
Cover Page

COVER PAGE

Date Stamp

CALIFORNIA
FORM **460**

Page 1 of 27

For Official Use Only

| | |
|------------------------------------------------------------------|--------------------------------------------------------------------|
| Statement covers period from 01/18/2015 through 02/14/2015 | Date of Election if applicable 03/03/2015 (Month, Day, Year) |
|------------------------------------------------------------------|--------------------------------------------------------------------|

1. Type of Recipient Committee

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

2. Type of Statement

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

3. Committee Information

I.D. Number 1363752

COMMITTEE NAME
Vega For Community College Board Trustee 2015

STREET ADDRESS (NO PO BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

MAILING ADDRESS (IF DIFFERENT)

CITY STATE ZIP CODE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER
Jane Leiderman

STREET ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

NAME OF ASSISTANT TREASURER, IF ANY

STREET ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing this statement and certify that the information contained herein is true and correct. I certify under penalty of perjury that the information contained herein is true and correct.

Executed on 2/19/15 By [Redacted]

Executed on 2-19-15 By [Redacted]

Executed on _____ By _____

Executed on _____ By _____

SIGNATURE OF CONTROLLING OFFICERHOLDER, CANDIDATE, STATE MEASURE PROPONENT

SIGNATURE OF CONTROLLING OFFICERHOLDER, CANDIDATE, STATE MEASURE PROPONENT

**Recipient Committee
Campaign Statement
Cover Page - Part 2**

**CALIFORNIA
FORM 460**

Statement covers period
from 01/18/2015
through 02/14/2015

Page 2 of 27

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Francesca Vega

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

Board of Education Los Angeles

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

[REDACTED ADDRESS]

Related Committees Not Included in this Statement: *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

| COMMITTEE NAME | I.D. NUMBER |
|----------------|-------------|
| | |

| NAME OF TREASURER | CONTROLLED COMMITTEE ? |
|-------------------|----------------------------------------------------------|
| | <input type="checkbox"/> YES <input type="checkbox"/> NO |

COMMITTEE STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

| COMMITTEE NAME | I.D. NUMBER |
|----------------|-------------|
| | |

| NAME OF TREASURER | CONTROLLED COMMITTEE ? |
|-------------------|----------------------------------------------------------|
| | <input type="checkbox"/> YES <input type="checkbox"/> NO |

COMMITTEE STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER JURISDICTION

SUPPORT
 OPPOSE

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

NAME OF OFFICEHOLDER OR CANDIDATE OR PROPONENT

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed

| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | |
|-----------------------------------|-----------------------|----------------------------------|
| | | <input type="checkbox"/> SUPPORT |
| | | <input type="checkbox"/> OPPOSE |

| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | |
|-----------------------------------|-----------------------|----------------------------------|
| | | <input type="checkbox"/> SUPPORT |
| | | <input type="checkbox"/> OPPOSE |

| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | |
|-----------------------------------|-----------------------|----------------------------------|
| | | <input type="checkbox"/> SUPPORT |
| | | <input type="checkbox"/> OPPOSE |

| NAME OF OFFICEHOLDER OR CANDIDATE | OFFICE SOUGHT OR HELD | |
|-----------------------------------|-----------------------|----------------------------------|
| | | <input type="checkbox"/> SUPPORT |
| | | <input type="checkbox"/> OPPOSE |

**Campaign Disclosure Statement
Summary Page**

| | | |
|-------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/18/2015 | |
| through | 02/14/2015 | |
| | | Page 3 of 27 |

NAME OF FILER Vega For Community College Board Trustee 2015

I.D. NUMBER
1363752

| | Column A <small>TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)</small> | Column B <small>CALENDAR YEAR TOTAL TO DATE</small> |
|-------------------------------------------------------|----------------------------------------------------------------------------|------------------------------------------------------------|
| Contributions Received | | |
| 1. Monetary Contributions Schedule A, Line 3 | \$ 44,483.00 | \$ 45,008.00 |
| 2. Loans Received Schedule B, Line 3 | 0.00 | 0.00 |
| 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1+2 | \$ 44,483.00 | \$ 45,008.00 |
| 4. Nonmonetary Contributions Schedule C, Line 3 | 146,545.53 | 180,983.03 |
| 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 | \$ 191,028.53 | \$ 225,991.03 |

**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 | \$ _____ | \$ _____ |

| | Column A | Column B |
|-------------------------------------------------------------|---------------|---------------|
| Expenditures Made | | |
| 6. Payments Made Schedule E, Line 4 | \$ 24,969.69 | \$ 64,886.68 |
| 7. Loans Made Schedule H, Line 3 | 0.00 | 0.00 |
| 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 | \$ 24,969.69 | \$ 64,886.68 |
| 9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 | 5,332.43 | 5,332.43 |
| 10. Nonmonetary Adjustment Schedule C, Line 3 | 146,545.53 | 180,983.03 |
| 11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10 | \$ 176,847.65 | \$ 251,202.14 |

**Expenditure Limit Summary
for State Candidates**

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

_____ \$ _____
_____ \$ _____

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

| Current Cash Statement | |
|-----------------------------------------------------------------------|--------------|
| 12. Beginning Cash Balance Previous Summary Page, Line 16 | \$ 3,935.05 |
| 13. Cash Receipts Column A, Line 3 above | 44,483.00 |
| 14. Miscellaneous Increases to Cash Schedule I, Line 4 | 0.00 |
| 15. Cash Payments Column A, Line 8 above | 24,969.69 |
| 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 | \$ 23,448.36 |
| 17. LOAN GUARANTEES RECEIVED Schedule B Part 2 | \$ 0.00 |

| Cash Equivalents and Outstanding Debts | |
|--------------------------------------------------------------------|-------------|
| 18. Cash Equivalents | \$ 0.00 |
| 19. Outstanding Debts Add Lines 2 + Line 9 in Column B above | \$ 5,332.43 |

**Schedule A
Monetary Contributions Received**

SCHEDULE A

| | |
|--------------------------------------------------------------------------------|--------------------------------|
| Statement covers period from <u>01/18/2015</u> through <u>02/14/2015</u> | CALIFORNIA FORM 460 |
| | Page 4 of 27 |

NAME OF FILER Vega For Community College Board Trustee 2015

I.D. NUMBER
1363752

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|----------------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------------|-----------------|-----------------------------------------------------|------------------------------------|
| 02/10/2015 | Teresa Acuna [REDACTED] | IND | Unemployed N.A. | 100.00 | 100.00 | |
| 01/29/2015 | Sylvia Alva [REDACTED] | IND | Professor CA State University | 100.00 | 100.00 | |
| 02/11/2015 | Christopher Antonelli [REDACTED] | IND | Special Asst. State of CA | 100.00 | 100.00 | |
| 02/11/2015 | Arcadis [REDACTED] | OTH | | 1,000.00 | 1,000.00 | |

SUBTOTAL \$ 1,300.00

Schedule A Summary

| | |
|-----------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| 1. Amount received this period - itemized contributions (Includes all Schedule A subtotals) | \$ 43,750.00 |
| 2. Amount received this period - unitemized | \$ 733.00 |
| 3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A Line 1) | TOTAL \$ 44,483.00 |


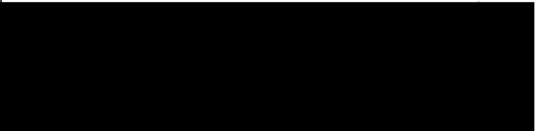
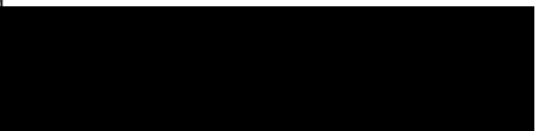
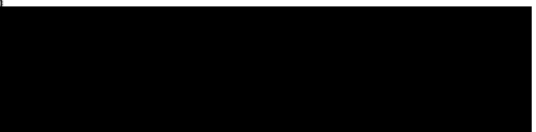
** Contributor Codes
 IND - Individual
 COM - Recipient Committee (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

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

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/18/2015 | |
| through | 02/14/2015 | Page 5 of 27 |

NAME OF FILER Vega For Community College Board Trustee 2015

ID NUMBER
1363752

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|---------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------|---------------------------------------|
| 02/11/2015 | Laura Barrera  | IND | Principal LB Consulting | 100.00 | 100.00 | |
| 02/11/2015 | Kelli Bernard  | IND | Urban Planner City of LA | 100.00 | 100.00 | |
| 02/11/2015 | Rosalina Cardenas  | IND | Consultant Consulting | 250.00 | 250.00 | |
| 02/11/2015 | Freddy Ceja  | IND | Director St. John's Well Child & Family Center | 150.00 | 150.00 | |

SUBTOTAL \$ 600.00

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

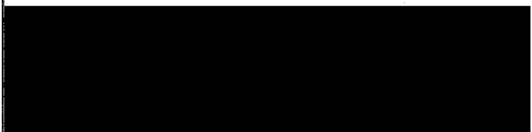
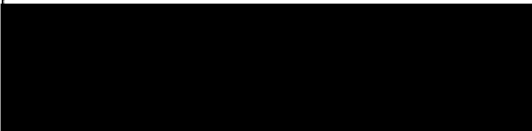


**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A

| | |
|--------------------------------------------------------------------------------|--------------------------------------------|
| Statement covers period from <u>01/18/2015</u> through <u>02/14/2015</u> | CALIFORNIA FORM 460 Page 6 of 27 |
|--------------------------------------------------------------------------------|--------------------------------------------|

NAME OF FILER Vega For Community College Board Trustee 2015

ID NUMBER
1363752

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|------------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------------------------------|-----------------|-----------------------------------------------------------|---------------------------------------|
| 02/09/2015 | Cindy Chernow  | IND | Consultant Cindy Chernow | 100.00 | 100.00 | |
| 02/11/2015 | Dakota Communications  | OTH | | 1,000.00 | 1,000.00 | |
| 02/10/2015 | James Dantona  | IND | Chief of Staff City of LA | 250.00 | 250.00 | |
| 01/18/2015 | James F Davis  | IND | Retired N.A. | 250.00 | 250.00 | |

SUBTOTAL \$ 1,600.00

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

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

| | |
|--------------------------------------------------------------------------------|----------------------------|
| Statement covers period from <u>01/18/2015</u> through <u>02/14/2015</u> | CALIFORNIA FORM 460 |
| | Page 7 of 27 |

NAME OF FILER Vega For Community College Board Trustee 2015

I.D. NUMBER
1363752

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|----------------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------------|-----------------|-----------------------------------------------------|------------------------------------|
| 02/05/2015 | Norma Dominguez [REDACTED] | IND | Finance WellsFargo | 100.00 | 100.00 | |
| 02/11/2015 | Curtis J. Earnest [REDACTED] | IND | Chief of Staff LA City | 100.00 | 100.00 | |
| 02/10/2015 | John David Ek [REDACTED] | IND | Owner Ek and Svakin | 1,000.00 | 1,500.00 | |
| 02/09/2015 | John David Ek [REDACTED] | IND | Owner Ek and Svakin | 500.00 | 1,500.00 | |

SUBTOTAL \$ 1,700.00



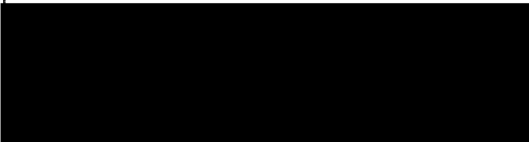

** Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

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

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/18/2015 | |
| through | 02/14/2015 | Page 8 of 27 |

NAME OF FILER Vega For Community College Board Trustee 2015

I.D. NUMBER
1363752

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|---------------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------|---------------------------------------|
| 01/21/2015 | Norma Fernandez  | IND | Manager EveryoneOn | 100.00 | 100.00 | |
| 01/18/2015 | Foremen's Union Local 94  | COM | ID No. 1349650 | 250.00 | 250.00 | |
| 02/09/2015 | Victor Franco  | IND | Consultant Ek & Ek | 200.00 | 200.00 | |
| 02/11/2015 | Mary Galvan  | IND | Manager GSK | 100.00 | 100.00 | |

SUBTOTAL \$ 650.00


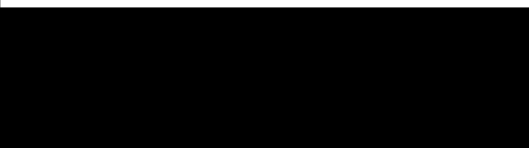


** Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

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

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/18/2015 | |
| through | 02/14/2015 | Page 9 of 27 |

NAME OF FILER Vega For Community College Board Trustee 2015

I.D. NUMBER
1363752

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|---------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------|---------------------------------------|
| 02/09/2015 | Rosalio Galvan  | IND | Administrator LAUSD | 100.00 | 100.00 | |
| 02/10/2015 | Julio Garcia  | IND | Event Planner Event Production | 100.00 | 100.00 | |
| 02/02/2015 | Jose Adolfo Gomez  | IND | Vice President Financial Services California State Un | 250.00 | 250.00 | |
| 02/09/2015 | Stephanie Graves  | IND | CEO Lee Andreus Group | 250.00 | 250.00 | |

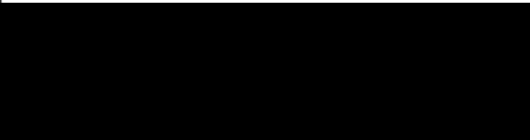
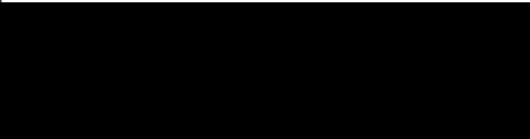
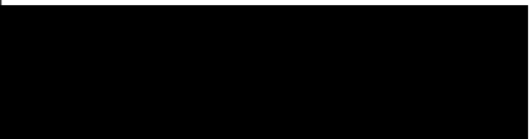
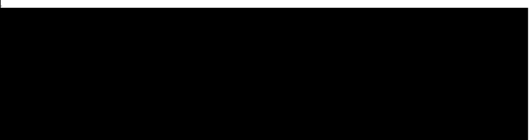
SUBTOTAL \$ 700.00

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

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

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/18/2015 | |
| through | 02/14/2015 | Page 10 of 27 |

| | |
|-------------------------------------------------------------|------------------------|
| NAME OF FILER Vega For Community College Board Trustee 2015 | I.D. NUMBER 1363752 |
|-------------------------------------------------------------|------------------------|

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|-------------------------------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------------|-----------------|-----------------------------------------------------|------------------------------------|
| 02/11/2015 | Ariadna Gutierrez  | IND | Ad Sales Director Deily Journal Corp | 100.00 | 100.00 | |
| 02/10/2015 | Thien Ho  | IND | Businessperson Restaurant | 100.00 | 100.00 | |
| 02/02/2015 | I.L.W.U. Local 13 PAC  | COM | ID No. 1226530 | 2,500.00 | 2,500.00 | |
| 02/13/2015 | LA Jobs PAC  | COM | ID No. 1308418 | 500.00 | 500.00 | |

SUBTOTAL \$ 3,200.00

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

Schedule A (Continuation Sheet)
Monetary Contributions Received

Statement covers period from 01/18/2015 through 02/14/2015
CALIFORNIA FORM 460
Page 11 of 27

NAME OF FILER Vega For Community College Board Trustee 2015
I.D. NUMBER 1363752

Table with 7 columns: DATE RECEIVED, FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR, CONTRIBUTOR CODE, IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER, AMOUNT RECEIVED, CUMULATIVE TO DATE CALENDAR YEAR, PER ELECTION TO DATE. Rows include Lara for Senate 2016, Gloria Michel Leon, Kevin De Leon for Senate 2014, and Andre Lewis.

SUBTOTAL \$ 10,400.00

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

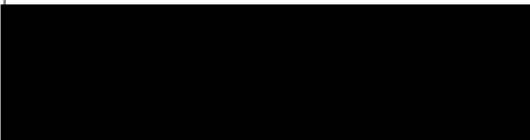

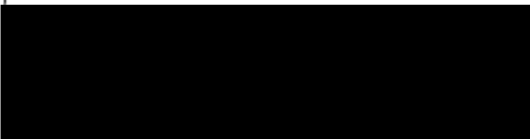

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A

| | |
|------------------------------------------------------------------|---------------------------------------------|
| Statement covers period from 01/18/2015 through 02/14/2015 | CALIFORNIA FORM 460 Page 12 of 27 |
|------------------------------------------------------------------|---------------------------------------------|

NAME OF FILER Vega For Community College Board Trustee 2015

ID NUMBER
1363752

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|-------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------|---------------------------------------|
| 02/12/2015 | Local Union 105 Political Education Fund  | COM | ID No. 962809 | 750.00 | 750.00 | |
| 02/11/2015 | Michael S. Loya  | IND | Business Owner Partners In Marketing | 100.00 | 100.00 | |
| 02/11/2015 | Alma Marquez  | IND | CEO Education | 500.00 | 500.00 | |
| 02/11/2015 | Nury Martinez  | IND | Council Member LA City | 500.00 | 500.00 | |

SUBTOTAL \$ 1,850.00

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





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

SCHEDULE A

| | |
|--------------------------------------------------------------------------------|---------------------------------------------|
| Statement covers period from <u>01/18/2015</u> through <u>02/14/2015</u> | CALIFORNIA FORM 460 Page 13 of 27 |
|--------------------------------------------------------------------------------|---------------------------------------------|

NAME OF FILER Vega For Community College Board Trustee 2015

I.D. NUMBER
1363752

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|-----------------------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------|---------------------------------------|
| 02/09/2015 | Maria Mejia  | IND | Regional Director Gen Next | 100.00 | 100.00 | |
| 02/02/2015 | Holly J Mitchell for Senate 2014  | COM | ID No. 1361039 | 2,000.00 | 2,000.00 | |
| 02/04/2015 | Wendy Mitchell  | IND | President WM | 250.00 | 250.00 | |
| 02/11/2015 | Uduak-Joe Ntuk  | IND | Engineer City of Long Beach | 150.00 | 150.00 | |

SUBTOTAL \$ 2,500.00





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

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

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/18/2015 | |
| through | 02/14/2015 | Page 14 of 27 |

NAME OF FILER Vega For Community College Board Trustee 2015

I.D. NUMBER
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| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|-------------------------------------------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------------|-----------------|-----------------------------------------------------|------------------------------------|
| 02/09/2015 | Fabian Nunez for Treasurer 2018  | COM | ID No. 1366750 | 5,000.00 | 5,000.00 | |
| 02/11/2015 | Orbach Huff Suarez & Henderson LLP  | OTH | | 500.00 | 500.00 | |
| 02/13/2015 | Ana Ponce  | IND | Educator Camino Nuevo Charter | 100.00 | 100.00 | |
| 02/10/2015 | Fernando Ramirez  | IND | Special Assistant County of Los Angeles | 100.00 | 100.00 | |

SUBTOTAL \$ 5,700.00





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

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

| | | |
|-------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/18/2015 | |
| through | 02/14/2015 | Page 15 of 27 |

NAME OF FILER Vega For Community College Board Trustee 2015

I.D. NUMBER
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| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|----------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------|---------------------------------------|
| 02/11/2015 | Leticia Ramirez  | IND | Law Clerk USDC | 100.00 | 100.00 | |
| 02/11/2015 | Eloy U Retamal  | IND | Engineer EVR Consulting | 150.00 | 150.00 | |
| 02/11/2015 | Monica Rodriguez  | IND | Commissioner City of LA | 100.00 | 100.00 | |
| 02/11/2015 | Refugio Rodriguez  | IND | Co-Founder PUC Schools | 250.00 | 250.00 | |

SUBTOTAL \$ 600.00

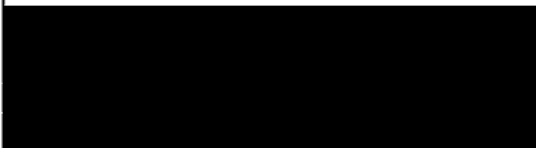



** Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

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

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/18/2015 | |
| through | 02/14/2015 | Page 16 of 27 |

NAME OF FILER Vega For Community College Board Trustee 2015

I.D. NUMBER
1363752

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|---------------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------|---------------------------------------|
| 02/11/2015 | Christina Sanchez-Camino  | IND | PR Milagro Communications | 100.00 | 600.00 | |
| 02/11/2015 | Christina Sanchez-Camino  | IND | PR Milagro Communications | 500.00 | 600.00 | |
| 02/09/2015 | Gabriel Sandoval  | IND | Attorney Andulson | 250.00 | 250.00 | |
| 02/11/2015 | Angelique L Santana  | IND | Manager GAP Inc. | 100.00 | 100.00 | |

SUBTOTAL \$ 950.00

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

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

| | |
|--------------------------------------------------------------------------------|----------------------------|
| Statement covers period from <u>01/18/2015</u> through <u>02/14/2015</u> | CALIFORNIA FORM 460 |
| | Page 17 of 27 |

NAME OF FILER Vega For Community College Board Trustee 2015

I.D. NUMBER
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| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|----------------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------------|-----------------|-----------------------------------------------------|------------------------------------|
| 02/11/2015 | Paula Santana [REDACTED] | IND | Ed Manager LA Chamber | 100.00 | 100.00 | |
| 01/21/2015 | Naomi Seligman [REDACTED] | IND | Communications Seligman Consulting | 100.00 | 100.00 | |
| 02/13/2015 | Service Employees Int'l Union Local 721 [REDACTED] | COM | ID No. 743794 | 3,000.00 | 3,000.00 | |
| 02/13/2015 | Service Employees International Union Local 99 Candidate PAC [REDACTED] | SCC | ID No. 980422 | 3,000.00 | 3,000.00 | |

SUBTOTAL \$ 6,200.00

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



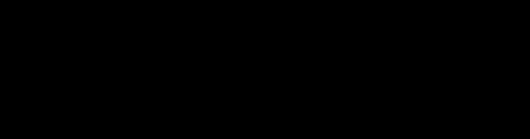
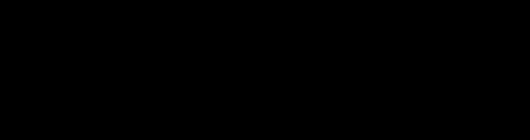
**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A

| | |
|--------------------------------------------------------------------------------|---------------------------------------------|
| Statement covers period from <u>01/18/2015</u> through <u>02/14/2015</u> | CALIFORNIA FORM 460 Page 18 of 27 |
|--------------------------------------------------------------------------------|---------------------------------------------|

NAME OF FILER Vega For Community College Board Trustee 2015

ID NUMBER
1363752

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|-------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------|---------------------------------------|
| 02/02/2015 | Southern California District Council of Laborers PAC  | SCC | ID No. 1358150 | 2,500.00 | 2,500.00 | |
| 02/02/2015 | Telacu Industries Inc.  | OTH | | 1,000.00 | 2,000.00 | |
| 01/26/2015 | Telacu Industries Inc.  | OTH | | 1,000.00 | 2,000.00 | |
| 02/12/2015 | Elizabeth Toomey  | IND | Unemployed N.A. | 200.00 | 200.00 | |

SUBTOTAL \$ 4,700.00

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

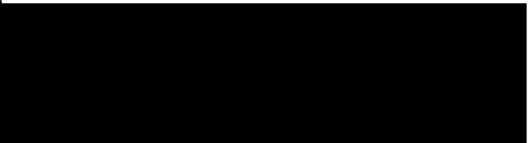
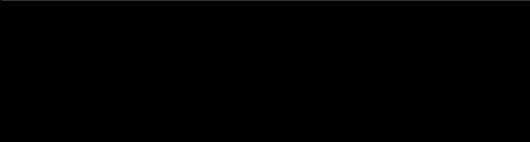
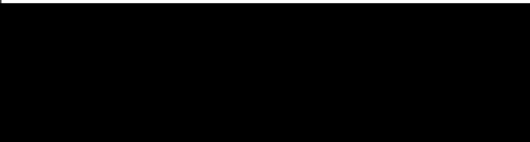
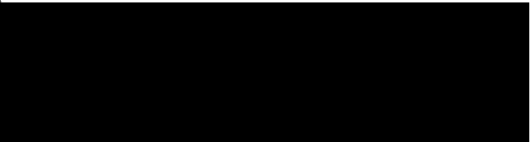
**Schedule A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A

| | | |
|-------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/18/2015 | |
| through | 02/14/2015 | Page 19 of 27 |

NAME OF FILER Vega For Community College Board Trustee 2015

I.D. NUMBER
1363752

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|----------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------|---------------------------------------|
| 02/05/2015 | Catherine Unger  | IND | Retired N.A. | 150.00 | 150.00 | |
| 02/09/2015 | Veronica Villalobos  | IND | Lobbyist at State Level AICCU | 100.00 | 100.00 | |
| 02/09/2015 | Dan Weinstein  | IND | Solar Development Grid Partners | 250.00 | 250.00 | |
| 02/09/2015 | Amy Yager  | IND | Businessperson Consulting | 250.00 | 250.00 | |



SUBTOTAL \$ 750.00

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

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

| | |
|------------------------------------------------------------------|----------------------------|
| Statement covers period from 01/18/2015 through 02/14/2015 | CALIFORNIA FORM 460 |
| | Page 20 of 27 |

| | |
|-------------------------------------------------------------|------------------------|
| NAME OF FILER Vega For Community College Board Trustee 2015 | I.D. NUMBER 1363752 |
|-------------------------------------------------------------|------------------------|

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|----------------------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------------|-----------------|-----------------------------------------------------|------------------------------------|
| 01/20/2015 | Marisa Yeager  | IND | Gov't LACMTA | 100.00 | 100.00 | |
| 02/10/2015 | Edgar Zelaya  | IND | Construction Management Kal Krishnan Consulting Services Inc | 250.00 | 250.00 | |

| | | |
|--------------------|--------|----------------------|
| SUBTOTAL \$ | 350.00 | <input type="text"/> |
|--------------------|--------|----------------------|

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

**Schedule C
Nonmonetary Contributions Received**

| | | |
|--------------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/18/2015 | |
| through | 02/14/2015 | Page 21 of 27 |

NAME OF FILER Vega For Community College Board Trustee 2015

I.D. NUMBER
1363752

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR | CONTRIBUTOR CODE | OCCUPATION & EMPLOYER OR COMMITTEE ID NO. | DESCRIPTION OF GOODS OR SERVICES | AMOUNT/ FAIR MARKET VALUE | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|----------------------------------------------------------------------------------------|------------------|-------------------------------------------|----------------------------------|---------------------------|-----------------------------------------------------|------------------------------------|
| 01/20/2015 | Coalition for L.A. Community College Reform in Support of Francesca Vega [REDACTED] | COM | ID No. 1315215 | Postage, Mailer | 86,831.59 | 180,157.03 | |
| 02/03/2015 | Coalition for L.A. Community College Reform in Support of Francesca Vega [REDACTED] | COM | ID No. 1315215 | Consulting fee and Mailing | 16,033.60 | 180,157.03 | |
| 02/09/2015 | Coalition for L.A. Community College Reform in Support of Francesca Vega [REDACTED] | COM | ID No. 1315215 | Postage & Mailing | 16,348.53 | 180,157.03 | |
| 02/10/2015 | Coalition for L.A. Community College Reform in Support of Francesca Vega [REDACTED] | COM | ID No. 1315215 | Postage & Mailing | 15,225.30 | 180,157.03 | |

SUBTOTAL \$ 134,439.02

Schedule C Summary

| | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-------------------|
| 1. Amount received this period - itemized contributions (Includes all Schedule C subtotals) | \$ | 146,545.53 |
| 2. Amount received this period - unitemized | \$ | 0.00 |
| 3. 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 \$ | <u>146,545.53</u> |




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

**Schedule C (Continued)
Nonmonetary Contributions Received**

| | | |
|-------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/18/2015 | |
| through | 02/14/2015 | Page 22 of 27 |

NAME OF FILER Vega For Community College Board Trustee 2015

I.D. NUMBER
1363752

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR | CONTRIBUTOR CODE | OCCUPATION & EMPLOYER OR COMMITTEE ID NO. | DESCRIPTION OF GOODS OR SERVICES | AMOUNT/ FAIR MARKET VALUE | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------------------------------------------|----------------------------------|---------------------------|-----------------------------------------------------|------------------------------------|
| 02/11/2015 | Coalition for L.A. Community College Reform in Support of Francesca Vega Mike Fong Scott Svonkin  | COM | ID No. 1315215 | Postage & Mailing | 6,753.50 | 180,157.03 | |
| 02/12/2015 | Coalition for L.A. Community College Reform in Support of Francesca Vega Mike Fong Scott Svonkin  | COM | ID No. 1315215 | Mailing | 437.50 | 180,157.03 | |
| 02/13/2015 | Coalition for L.A. Community College Reform in Support of Francesca Vega Mike Fong Scott Svonkin  | COM | ID No. 1315215 | Mailer | 4,089.51 | 180,157.03 | |


SUBTOTAL \$ 11,280.51

** Contributor Codes: IND - Individual COM - Recipient Committee OTH - Other PTY - Political Party SCC - Small Contributor Committee

Schedule C (Continued)
Nonmonetary Contributions Received

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/18/2015 | |
| through | 02/14/2015 | Page 23 of 27 |

| | |
|-------------------------------------------------------------|------------------------|
| NAME OF FILER Vega For Community College Board Trustee 2015 | I.D. NUMBER 1363752 |
|-------------------------------------------------------------|------------------------|

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR | CONTRIBUTOR CODE | OCCUPATION & EMPLOYER OR COMMITTEE ID NO. | DESCRIPTION OF GOODS OR SERVICES | AMOUNT/ FAIR MARKET VALUE | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|-------------------------------------------------------------------------------------------------------------------------------|------------------|-------------------------------------------|----------------------------------|---------------------------|-----------------------------------------------------|------------------------------------|
| 01/30/2015 | Svonkin For Community College Board 2015  | COM | ID No. 1319629 | Mailer | 826.00 | 826.00 | |

| | | |
|--------------------|--------|--|
| SUBTOTAL \$ | 826.00 | |
|--------------------|--------|--|

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

| | | |
|-------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/18/2015 | |
| through | 02/14/2015 | Page 24 of 27 |

NAME OF FILER Vega For Community College Board Trustee 2015

I.D. NUMBER
1363752

| 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) |
|------------|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|--------------------|---------------------------------------------------|------------------------------------|
| 02/04/2015 | Coalition for L.A. Community College Reform in Support of Francesca Vega Mike Fong Scott Svonkin | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure | | 7,000.00 | 57,000.00 | |
| | | <input checked="" type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE | | | | |
| 02/11/2015 | Coalition for L.A. Community College Reform in Support of Francesca Vega Mike Fong Scott Svonkin | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure | | 15,000.00 | 57,000.00 | |
| | | <input checked="" type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE | | | | |

SUBTOTAL \$ 22,000.00

Schedule D Summary

- | | |
|------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| 1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) | \$ 22,000.00 |
| 2. Unitemized contributions and independent expenditures made this period of under \$100. | \$ 0.00 |
| 3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) . TOTAL \$ | 22,000.00 |

**Schedule E
Payments Made**

| | | |
|-------------------------------------------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/18/2015 | |
| through | 02/14/2015 | Page 25 of 27 |
| NAME OF FILER Vega For Community College Board Trustee 2015 | | I.D. NUMBER 1363752 |

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

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

| NAME AND ADDRESS OF PAYEE | CODE or DESCRIPTION OF PAYMENT | AMOUNT PAID |
|-------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|------------------|
| Gary Atwood [REDACTED] | LIT | 120.00 |
| Coalition for L.A. Community College Reform in Support of Francesca Vega Mike Fong Scott Svonkin [REDACTED] ID No: 1315215 | CTB | 7,000.00 |
| Coalition for L.A. Community College Reform in Support of Francesca Vega Mike Fong Scott Svonkin [REDACTED] ID No: 1315215 | CTB | 15,000.00 |
| SUBTOTAL \$ | | 22,120.00 |

Schedule E Summary

| | |
|-------------------------------------------------------------------------------------------------------------------|---------------------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.) | \$ 24,967.61 |
| 2. Unitemized payments made this period of under \$100 | \$ 2.08 |
| 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) | \$ 0.00 |
| 4. Total payments made this period. (Add Line 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) | TOTAL \$ 24,969.69 |

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

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/18/2015 | |
| through | 02/14/2015 | Page 26 of 27 |

NAME OF FILER Vega For Community College Board Trustee 2015

I.D. NUMBER

1363752

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

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

| NAME AND ADDRESS OF PAYEE | CODE or | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---------------------------------------------|---------|------------------------|-------------|
| Mitchell Publishing Inc. 2014 [REDACTED] | LIT | | 288.85 |
| Mitchell Publishing Inc. 2014 [REDACTED] | LIT | | 528.65 |
| Padilla & Associates [REDACTED] | PRO | | 1,510.71 |
| Padilla & Associates [REDACTED] | PRO | | 519.40 |

SUBTOTAL \$ 2,847.61

**Schedule F
Accrued Expenses (Unpaid Bills)**


| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/18/2015 | |
| through | 02/14/2015 | Page 27 of 27 |

NAME OF FILER Vega For Community College Board Trustee 2015

ID NUMBER
1363752

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

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

| NAME AND ADDRESS OF CREDITOR | CODE OR DESCRIPTION OF PAYMENT | (a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD | (b) AMOUNT INCURRED THIS PERIOD | (c) AMOUNT PAID THIS PERIOD | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD |
|--------------------------------------------------------------------------------------------------|--------------------------------|-----------------------------------------------------|------------------------------------|--------------------------------|----------------------------------------------------|
| Nicole Ward  | CNS | 0.00 | 5,332.43 | 0.00 | 5,332.43 |

SUBTOTALS \$ 0.00 \$ 5,332.43 \$ 0.00 \$ 5,332.43

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) **INCURRED TOTALS \$ 5,332.43**
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) **PAID TOTALS \$ 0.00**
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, column A, Line 9.) **NET \$ 5,332.43**