Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)		י ביינות דו	Date Stamp		FORNIA 460
SEE INSTRUCTIONS ON REVERSE	Statement covers period from	Date of election if applicable LES C (Month, Day, Year)  2022 SEP 30 PM  11/08/2022  CAMPAIGN FIRE	3: 04	Page	1 of17
State Candidate Election Committee  Recall (Also Complete Part 5)  General Purpose Committee  Sponsored Small Contributor Committee	inplete Parts 1, 2, 3, and 4. imarily Formed Ballot Measure committee ) Controlled ) Sponsored so Complete Part 6) imarily Formed Candidate/ fficeholder Committee so Complete Part 7)	2. Type of Statement:    Yerelection Statement     Semi-annual Statement     Termination Statement (Also file a Form 410 Termination)     Amendment (Explain below)		Quarterly Stat Special Odd- Supplemental Statement - A	ear Report
3. Committee Information	NUMBER 445676	Treasurer(s)  NAME OF TREASURER  Art Chacon  MAILING ADDRESS			
STREET ADDRESS (NO P.O. BOX)  CITY STATE ZIP COLL  Long Beach CA 90802  MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO	(562) 983-0815	Long Beach NAME OF ASSISTANT TREASURER, IF ANY Gary Crummitt MAILING ADDRESS	STATE CA	ZIP CODE 90802	AREA CODE/PHONE (562)983-0815
OPTIONAL: FAX / E-MAIL ADDRESS  gary@crummittandassociates.com	DE AREA CODE/PHONE	CITY Long Beach OPTIONAL: FAX / E-MAIL ADDRESS	STATE CA	ZIP CODE 90802	AREA CODE/PHONE (562) 983-0815
4. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California  Executed on	this statement and to the best of my know that the foregoing is true and correct.  By  By  Signature by  By  By	Signature of Controlling Officeholder, Candidate, State Measure P	onsible Officer of s		e and complete. I certify

FPPC Form 460 (Jan/2016)

5.	Officeholder or Candidate Controlled Comm	ittee	6.	Primarily Formed Ballot	Measure (	Committee	,	
	NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE				
	Art Chacon							
	OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRIC	T NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIO	N		SUPPORT
·	Water Board Los Angeles County District 3							OPPOSE
•	,	TY STATE ZIP		Identify the controlling office	eholder, can	didate, or st	ate measure	e proponent, if any.
		ng Beach CA 90002		NAME OF OFFICEHOLDER, CAND	DIDATE, OR PRO	PONENT		
	Related Committees Not included in this Stanot included in this statement that are controlled by you contributions or make expenditures on behalf of your call	or are primarily formed to receive		OFFICE SOUGHT OR HELD	·.		DISTRICT NO	D. IF ANY
	COMMITTEE NAME	I.D. NUMBER						
	NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Cand				
		☐ YES ☐ NO		officeholder(s) or candidate(s)	tor which this	committee is	primarily foi	rmed.
	COMMITTEE ADDRESS STREET ADDRESS (NO P.O. B	DX)	,	NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
•	CITY STATE ZIP C	ODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
	COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
	NAME OF TREASURER	CONTROLLED COMMITTEE?  YES NO		NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
	COMMITTEE ADDRESS STREET ADDRESS (NO P.O. B			Attach	n continuation	n sheets if r	necessary	

### **Campaign Disclosure Statement**

Amounts may be rounded

Statement covers period

SUMMARY PAGE

Summary Page	to whole dollars.		from07/01/2022	FORM 460		
SEE INSTRUCTIONS ON REVERSE  NAME OF FILER  Art Chacon for Water Board 2022			through09/24/2022	Page 3 of 17 I.D. NUMBER 1445676		
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column CALENDAR Y TOTALTOD	(EAR Bunning in Both t	mmary for Candidates the State Primary and		
1. Monetary Contributions	\$ 46,475.00 0.00 \$ 46,475.00 0.00 \$ 46,475.00	\$73,	375.00	\$\$		
Evnandituras Mada	· · · · · · · · · · · · · · · · · · ·		F	. 0		

#### Expenditures image 6. Payments Made ...... Schedule E, Line 4 \$ 40,673.43 7. Loans Made ...... Schedule H, Line 3 0.00 8. SUBTOTAL CASH PAYMENTS ...... Add Lines 6 + 7 \$ 37,544.93 40,673.43 3,975.00 3,975.00 0.00 0.00 10. Nonmonetary Adjustment ...... Schedule C, Line 3 \$ 44,648.43

### Expenditure Limit Summary for State **Candidates**

#### 22. Cumulative Expenditures Made\* (If Subject to Voluntary Expenditure Limit)

(mm/dd/yy)	lotal to Date
	\$

Ĺ	;	urr	en	t (	Cash	ı	Sta	at	ement	
	_	_			_		-			

12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 23,771.50
13. Cash Receipts Column A, Line 3 above	46,475.00
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00
15. Cash Payments Column A, Line 8 above	37,544.93
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 32,701.57
If this is a termination statement, Line 16 must be zero.	

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

19. Outstanding Debts ...... Add Line 2 + Line 9 in Column B above \$ 3,975.00

**Cash Equivalents and Outstanding Debts** 

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

0.00

To calculate Column B, add

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

www.fppc.ca.gov

<sup>\*</sup>Amounts in this section may be different from amounts reported in Column B.

Schedule Monetary	A Contributions Received		its may be rounded whole dollars.	Statement cove	ers period	SCHEDULE			
Monotary		to	whole donars.	from07/01/2	022		RM	460	
SEE INSTRUCTION	ONS ON REVERSE			through09/24/2	022	Page _	of	17	
	for Water Board 2022					144567			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELE TO D (IF REQ	ATE	
08/12/2022	Daniel Andalon Los Angeles, CA 90042	⊠IND □COM □OTH □PTY □SCC	Consultant Daniel Andalon	500.00	5	500.00			
08/08/2022	Bulletin Displays, LLC(Mark Kudler) Long Beach, CA 90805	□IND □COM ☑OTH □PTY □SCC		1,000.00	1,0	000.00			
08/12/2022	California Alliance Group LLC(Paul Fickas) Sacramento, CA 95841	□IND □COM ☑OTH □PTY □SCC		1,000.00	1,0	000.00			
09/19/2022	Steven L. Craig Newport Beach, CA 92657	⊠IND □COM □OTH □PTY □SCC	Real Estate Craig Realty Group	3,500.00	3,5	00.00			
9/24/2022	Glen Dake Los Angeles, CA 90062	⊠IND □COM □OTH □PTY □SCC	Landscape Architect GDML Holdings	500.00	5	00.00			
			SUBTOTAL \$	6,500.00				78.1	
1. Amount re (Include a	A Summary eceived this period – itemized monetary contributions. all Schedule A subtotals.)				IND-I COM-	(other th	des at Committe nan PTY or e.g., busine	SCC)	
<ol><li>Amount re</li></ol>	eceived this period - unitemized monetary contributions	s of less than '	\$100 \$ <u> </u>	0.00	I DTV	Political E	.g., busine	35 Citity)	

3. Total monetary contributions received this period.

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

PTY - Political Party

46,475.00

# Schedule A (Continuation Sheet)

SCHEDULE A	(CONT.)
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Monetary Contributions Received		to whole o		from07/01/		FORM 460		
				through 09/24/	2022	Page	5 of <u>17</u>	
NAME OF FILER						I.D. NUM	BER	
Art Chacon fo	or Water Board 2022					144567	6	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN, 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)	
08/14/2022	Juan Garza Bellflower, CA 90706	IND  COM  OTH  PTY  SCC	Public Relations Six Heron LLC	500.00	5	00.00		
08/12/2022	Obdulia Hernandez Walnut, CA 91789		Retired N/A	2,000.00	2,0	00.00		
08/12/2022	IAO Distribution, Inc. San Diego, CA 92130	□IND □COM ☑OTH □PTY □SCC		5,000.00	5,0	00.00		
08/12/2022	JT Construction Group Inc.  Duarte, CA 91010	□IND □COM ☑OTH □PTY □SCC		5,000.00	5,0	00.00		
07/13/2022	Kastros Heating & Cooling Whittier, CA 90604	□IND □COM ☑OTH □PTY □SCC		1,000.00	1,0	00.00		
			SUBTOTALS	13,500.00		<b>基</b> 學		

\*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)
OTH – Other (e.g., business entity)

PTY - Political Party

# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A	(CONT.)
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Monetary	Contributions Received	Amounts may to whole d		\$\tatement coverence \text{from } \( \frac{07/01}{2} \) through \( \frac{09/24}{2} \)	/2022	CALIFORNIA <b>460</b> Page6 of17		
NAME OF FILER						I.D. NUI	MBER	
Art Chacon f	or Water Board 2022		neb			14456	76	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR . 31)	PER ELECTION TO DATE (IF REQUIRED)	
08/18/2022	Kennev & Kropff, Lawyers Pico Rivera, CA 90660	□IND □COM 図OTH □PTY □SCC		1,000.00	1,0	00.00		
08/20/2022	Kudco Diversified Inc. Long Beach, CA 90805	□IND □COM ☑OTH □PTY □SCC		250.00	1,5	00.00		
08/20/2022	Kudco Diversified LLC(Mark A. Kudler)  Long Beach, CA 90805	□IND □COM ☑OTH □PTY □SCC		250.00	1,5	00.00		
07/05/2022	Laborers' Local 300 (ID# 950674) Los Angeles, CA 90006	□IND □COM □OTH □PTY ⊠SCC		2,500.00	2,5	00.00		
08/13/2022	MetaMax Arcadía, CA 91006	□IND □COM ☑OTH □PTY □SCC		5,000.00	5,0	00.00		
			SUBTOTAL	\$ 9,000.00	an aveler	per antique		

\*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

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

PTY - Political Party SCC - Small Contributor Committee

# Schedule A (Continuation Sheet)

SCHEDULE A	(CONT.)
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Monetary	Contributions Received	Amounts may to whole d		from 07/01/2022 CALIFORNIA FORM			
				through09/24/	2022	Page_	
NAME OF FILER						I.D. NUN	IBER
Art Chacon f	or Water Board 2022	<del> </del>				144567	76
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT CUMULATIVE TO I RECEIVED THIS CALENDAR YE PERIOD (JAN. 1 - DEC. 1)		'EAR	PER ELECTION TO DATE (IF REQUIRED)
08/17/2022	Nationwide Environmental Services  Norwalk, CA 90650	□IND □COM 図OTH □PTY □SCC		1,000.00	1,0	00.00	
09/19/2022	Olivarez Madruga Law Organization, LLP Los Angeles, CA 90071	□IND □COM ☑OTH □PTY □SCC		1,000.00	1,0	000.00	
08/12/2022	OMI Truck Parking Facilities, Inc. Chino Hills, CA 91709	□IND □COM ☑OTH □PTY □SCC		1,375.00	3,3	375.00	
09/08/2022	OMI Truck Parking Facilities, Inc. Chino Hills, CA 91709	□IND □COM ☑OTH □PTY □SCC		2,000.00	3,3	75.00	
08/12/2022	Ortega Strategies Group Fullerton, CA 92835	□IND □COM . 図OTH □PTY □SCC		1,000.00	1,0	000.00	
			SUBTOTAL	\$ 6,375.00	n Property		

\*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

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

PTY - Political Party

# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A	(CONT.)
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Monetary	netary Contributions Received Amounts may be rounded to whole dollars.				2022 /2022	FO	FORM 460	
NAME OF FILER						I.D. NUM	BER	
Art Chacon fo	or Water Board 2022					144567	6	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	OCCUPATION AND EMPLOYER RECEIVED THIS CALENDAR Y  (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN. 1 - DFC)		EAR . 31)	PER ELECTION TO DATE (IF REQUIRED)	
08/08/2022	Haiq Papaian Manhattan Beach, CA 90266	⊠IND □COM □OTH □PTY □SCC	President Commerce Casino	2,500.00	3,500.00			
08/12/2022	Heather M. Repenning Los Angeles, CA 90027	⊠IND □COM □OTH □PTY □SCC	Executive Officer LA Metro	100.00	100.00			
09/24/2022	Luis Sarinana El Paso, CA 79925	⊠IND □COM □OTH □PTY □SCC	Retired 500.00 50		00.00			
09/23/2022	Reuben Stewart  Lake Elsinore, CA 92530	☑IND □COM □OTH □PTY □SCC	Health Care Highpointe Care	1,500.00	1,500.00			
08/30/2029	Beveriy Hills, CA 90211	□IND □COM ☑OTH □PTY □SCC		1,000.00	1,0	00.00		
			SUBTOTALS	5,600.00	allery The		1.473.421.10	

\*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC) OTH - Other (e.g., business entity)

PTY - Political Party

# Schedule A (Continuation Sheet)

SCHEDULE A	(CONT.)
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Monetary Contributions Received		to whole	dollars.	Statement covers period  from07/01/2022			FORM 460		
				through 09/24/	2022	Page	9 of 17		
NAME OF FILER						I.D. NUM	BER		
Art Chacon f	or Water Board 2022					144567	6		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)		
08/05/2022	The Commerce Casino Commerce, CA 90040	□IND □COM ☑OTH □PTY □SCC		5,000.00	10,0	00.00			
08/12/2022	Evangelina Vela Montebello, CA 90640		Retired Retired	500.00	5	00.00			
		☐IND ☐COM ☐OTH ☐PTY ☐SCC							
)		□IND □COM □OTH □PTY □SCC							
		□IND □COM □OTH □PTY □SCC							
			SUBTOTALS	5,500.00	<b>第</b> 5章 对身		The State State		

\*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC) OTH - Other (e.g., business entity)

PTY - Political Party

SEE INSTRUCTION NAME OF FILER Art Chacon fo	or Water Board 2022				022	FOR	<sup>RNIA</sup> 460
	or Water Roard 2022			through09/24/20	)22	Page	
Art Chacon fo	or Water Board 2022					I.D. NUME	BER
1	The first board board		· · · · · · · · · · · · · · · · · · ·			144567	6 
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 1 CALENDAR \(\) (JAN. 1 - DEC	YEAR	PER ELECTION TO DATE (IF REQUIRED)
•	Toe Baca City Council Member City of Rialto  X Support Oppose	Monetary     Contribution     Nonmonetary     Contribution     Independent     Expenditure		500.00		500.00	
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
			SUBTOTAL	\$ 500.00			k ik 📑
1. Contribution	D Summary  ns and independent expenditures made this period  contributions and independent expenditures made		•				500.00

Schedule E  Payments Made  Amounts may be rounded to whole dollars.		Statement covers period  from07/01/2022		LIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE				through09/24/2022		.1 of17
NAME OF FILER					I.D. NUMI	BER
Art Chacon for Water Board 2022					1445676	6
CODES: If one of the following codes accurately described campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  L candidate filing/ballot fees  fND independent expenditure supporting/opposing others (explain)*  LEG legal defense  LIT campaign literature and mailings	MBR member co MTG meetings a OFC office expe PET petition circ PHO phone ban POL polling and POS postage, d	mmunications and appearance conses culating assistance survey researe culoury and m	ces	radio airtime and production RFD returned contributions SAL campaign workers' salaries t.v. or cable airtime and pro TRC candidate travel, lodging, at TRS transfer between committee VOT voter registration WEB information technology cost	duction costs nd meals , and meals es of the sam	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR D	DESCRIPTION OF PAYMENT		AMOUNT PAID
Violeta Alvarez		FND	See Schedule G			1,325.0
Bell, CA 90201						
Asian American Pacific Islander Voter Guide #1436366		•	Slate Mailer			1,067.0
Sacramento, CA 95841						
Budget Watchdogs Newsletter #1345115		+	Slate Mailer			2,541.0
forrance, CA 90505						
* Payments that are contributions or independent expenditures	must also be sum	marized on	Schedule D.	SI	UBTOTAL\$	4,933.0
Schedule E Summary						
1. Itemized payments made this period. (Include all Schedul	e E subtotals.)				\$	37,544.93
2. Unitemized payments made this period of under \$100	••••				\$	0.00
3. Total interest paid this period on loans. (Enter amount from	n Schedule B, Par	t 1, Column	(e).)		\$	0.00

Schedule'	E	
(Continuat	tion	Sheet)
Payments	Mad	de

CMP campaign paraphernalia/misc. CNS campaign consultants

CVC civic donations

CTB contribution (explain nonmonetary)\*

Amounts may be rounded to whole dollars.

MBR member communications

OFC office expenses

PET petition circulating

MTG meetings and appearances

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

SCHEDULE E	(CONT.)
------------	---------

Statement covers period	CALIFORNIA 460
from07/01/2022	FORM TOO
through09/24/2022	Page12 of17
	I.D. NUMBER
	1445676

RAD radio airtime and production costs

TEL t.v. or cable airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Art Chacon for Water Board 2022

FIL candidate filing/ballot fees ND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	PHO POL POS PRO PRT	polling and s postage, deli	urvey resea	arch nessenger services egal, accounting)	TRC TRS TSF VOT	staff/spouse travel, lo transfer between com- voter registration	ing, and meals	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CODE	OR	DESCRIPTIO	ON OF PAYMENT	AM	MOUNT PAID
California Outdoor Graphic Services South			CMP					11,006.93
Santa Ana, CA 92707								
Crummitt & Associates Inc.			PRO					775.00
Long Beach, CA 90802								
Crummitt & Associates Inc.			PRO					775.00
ong Beach, CA 90802								
Crummitt & Associates Inc.			PRO					775.00
Long Beach, CA 90802				}				
E- Fundraising Conections				Credit Card F	Processing	Fees		45.50
Sacramento, CA 95814		-						
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.  * SUBTOTAL \$						13,377.43		

SEE INSTRUCTIONS ON REVERSE

SCHEDULE E (CONT.)

Statement covers perio	CALIFORNIA A
from07/01/2022	FORM TOU
through09/24/2022	Page 13 of 17
	I.D. NUMBER
	1445676

NAME OF FILER

Art Chacon for Water Board 2022

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
E- Fundraising Conections		Credit Card Processing Fees	23.00
Sacramento, CA 95814			
E- Fundraising Conections		Credit Card Processing Fees	46.00
Sacramento, CA 95814			
E- Fundraising Conections		Credit Card Processing Fees	225.50
Sacramento, CA 95814			
E- Fundraising Conections		Credit Card Processing Fees	45.50
Sacramento, CA 95814			
E- Fundraising Conections		Credit Card Processing Fees	45.50
Sacramento, CA 95814			

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 385.50

Schedule E
(Continuation Sheet)
Payments Made

LEG legal defense

campaign literature and mailings

Amounts may be rounded

	SCHEDULE E (CONT.)
Statement covers period	CALIFORNIA 460
from07/01/2022	FORM TOO
through09/24/2022	Page 14 of 17

VOT voter registration

WEB information technology costs (internet, e-mail)

Payments Made	to whole dollars.	from07/01/2022	FORM 400
SEE INSTRUCTIONS ON REVERSE		through09/24/2022	Page14 of17
NAME OF FILER			I.D. NUMBER
Art Chacon for Water Board 2022			1445676
CODES: If one of the following codes accurately describ	es the payment, you may enter the code. Oth	nerwise, describe the payment	
CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production	
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions	
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries	S
CVC civic donations	PET petition circulating	TEL. t.v. or cable airtime and pro	oduction costs
FIL candidate filing/ballot fees  ND fundraising events	PHO phone banks	TRC candidate travel, lodging, as	nd meals
ND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging	, and meals
independent expenditure supporting/opposing others (explain)*	POS postage delivery and messanger services	TSE transfer between committee	ee of the came candidate/enonen

PRO professional services (legal, accounting)

PRT

print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AF	MOUNT PAID
Election Digest #1345303		Slate Mailer		2,602.00
Torrance, CA 90505				
Fidelitas Consulting	CNS			5,000.00
Impac+ Posting anta Ana, CA 92707		Sign Placement		3,975.00
Joe Baca for Rialto City Council 2022 (ID# 1444865) Rialto, CA 92376	СТВ			500.00
Los Angeles County Registrar-Recorder/County Clerk Norwalk, CA 90650	FIL			2,300.00
* Payments that are contributions or independent expenditures must also be summarized	on Schedule D.		SUBTOTAL \$	14,377.00

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

			SCHED	ULE E	(CON	T.)
Staten	nent covers period	CALIF	ORNIA	1	60	۱
om	07/01/2022	FO	RM		-00	4
hrough	09/24/2022	_	1.5			

(Continuation Sheet) Payments Made  SEE INSTRUCTIONS ON REVERSE	A	mounts may b to whole do			from_	07/01/2022 09/24/2022	CALIFORNIA 460 FORM 460	
NAME OF FILER		_			<u> </u>		I.D. NUMB	ER
Art Chacon for Water Board 2022							144567	5
CODES: If one of the following coordinates:  CMP campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  fundraising events  independent expenditure supporting/or  LEG legal defense  LIT campaign literature and mailings	MBR MTG OFC PET PHO POL	member com meetings an office expen petition circu phone banks polling and s postage, del professional	munications d appearance ses lating survey resear	es	RAD ra RFD ra SAL of TEL t. TRC of TRS s TSF tr	lescribe the paymen adio airtime and production turned contributions ampaign workers' salarie v. or cable airtime and prandidate travel, lodging, a taff/spouse travel, lodging ransfer between committed oter registration formation technology cost	on costs  s  coduction costs  and meals  g, and meals  ees of the sar	ne candidate/sponsor
NAME AND A (IF COMMITTEE, A	ADDRESS OF PAYEE ALSO ENTER I.D. NUMBER)		CODE	OR DES	CRIPTION	OF PAYMENT		AMOUNT PAID
No Party Preference Voter Guide #	1343983			Slate Mailer				2,110.0
Sacramento, CA 95841								
Senior Advocates #1439476				Slate Mailer				1,512.0
Torrance, CA 90505								
Universal Graphics Services			CMP			•		850.0
as Cruces, NM 88007								

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

SUBTOTAL \$

•					SCHEDULE F	
Schedule F Accrued Expenses (Unpaid Bills)	Amounts may be round to whole dollars.	ded	Statement cove	FO	CALIFORNIA 460 FORM	
SEE INSTRUCTIONS ON REVERSE			through09/24/2	2022 Page _	16 of 17	
NAME OF FILER				I.D. NUM	BER	
Art Chacon for Water Board 2022				14456	76	
CODES: If one of the following codes accurately describ	es the payment, you may	y enter the code. Ot	herwise, describe th	ne payment.		
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations CIL candidate filing/ballot fees FIL candidate filing/ballot fees fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LT campaign literature and mailings	MBR member communication MTG meetings and appeara OFC office expenses PET petition circulating PHO phone banks POL polling and survey resipostage, delivery and PRO professional services ( PRT print ads	ences search messenger services	TRC candidate trave TRS staff/spouse tra TSF transfer betwee VOT voter registration	butions ters' salaries time and production costs I, lodging, and meals evel, lodging, and meals on committees of the sar	ne candidate/sponsor	
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	
Tmpact Posting	Sign Placement	0.00	3,975.00	0.00	3,975.00	
Santa Ana, CA 92707						
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$ 0.00\$	3,975.00\$	0.00\$	3,975.00	
Schedule F Summary						
Total accrued expenses incurred this period. (Include all saccrued expenses of \$100 or more, plus total uniternized)	accrued expenses under S	\$100.)		RRED TOTALS \$ _	3,975.00	
<ol><li>Total accrued expenses paid this period. (Include all Sch accrued expenses of \$100 or more, plus total unitemized</li></ol>	payments on accrued exp	otals for payments on benses under \$100.).		. PAID TOTALS \$ _	0.00	
<ol> <li>Net change this period. (Subtract Line 2 from Line 1. En on the Summary Page, Column A, Line 9.)</li> </ol>	iter the difference here and	d		NET \$ <sub>M</sub>	3,975.00 ay be a negative number	

Contractor (on Behalf of This Committee)				ts may be round whole dollars.	ed	fro	Statement covers per m 07/01/2022 cough 09/24/2022	FOR	
	NSTRUCTIONS ON REVERSE E OF FILER							I.D. NUMBE	
	Chacon for Water Board 2022							1445676	
NAME	OF AGENT OR INDEPENDENT CONTRACTOR								_
Vio	leta Alvarez					6			
СО	DES: If one of the following codes accurately describ	es the	payment,	you may ente	er the code	. Otherwis	e, describe the pa	ayment.	
FIL FND IND LEG LIT	campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings yments that are contributions or independent expenditures must als	MBR MTG OFC PET PHO POL POS PRO PRT	meetings an office exper petition circulphone banks polling and spostage, del professional print ads	d appearances nses ulating s survey research livery and messe services (legal,		RFD SAL TEL TRC TRS	radio airtime and proc returned contribution: campaign workers' s t.v. or cable airtime a candidate travel, lodg staff/spouse travel, lo transfer between con voter registration information technolog	s calaries and production costs ling, and meals odging, and meals and meals and meals	
	NAME AND ADDRESS OF PAYEE OR CREDITOR			CODE OR		DESCRIPTION	N OF PAYMENT		AMOUNT PAID

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID	5
Steven's Steak & Seafood House	FND	Candidate + 39 for fundraiser 8/12/22	1,32	25.00
Commerce, CA 90040				
				_
3				
J				
				_
Attach additional information on appropriately labeled continuation sheets.	<u>L.</u>	TOT	TAL* \$ 1,32!	25.00

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