Recipient Committee
Campaign Statement
Cover Page
(Government Code Sections 84200-84216.5)

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees—Complete Parts 1, 2, 3, and 4.
   - Officelholder, 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/Officelholder Committee
   - Controlled
   - Sponsored

2. Type of Statement:
   - Pre-election Statement
   - Semi-annual Statement
   - Termination Statement
   - Amendment (Explain below)

3. Committee Information
   - I.D. NUMBER: 1227285
   - COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE): West Covina Firefighters Political Action Committee
   - STREET ADDRESS (NO P.O. BOX):
     - CITY: Inglewood
     - STATE: CA
     - ZIP CODE: 90301
   - MAILING ADDRESS (IF DIFFERENT): NO. AND STREET OR P.O. BOX
     - CITY: Inglewood
     - STATE: CA
     - ZIP CODE: 90301
   - 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 attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
   - Executed on 10/25/2018
   - Date
   - By
   - Signature of Controlling Officerholder, Candidate, State Measure Proponent

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
## 5. Officeholder or Candidate Controlled Committee

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)</td>
</tr>
<tr>
<td>RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)</td>
</tr>
</tbody>
</table>

**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.

<table>
<thead>
<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF TREASURER</td>
<td>CONTROLLED COMMITTEE?</td>
</tr>
<tr>
<td>STREET ADDRESS (NO. P.O. BOX)</td>
<td>CITY</td>
</tr>
</tbody>
</table>

## 6. Primarily Formed Ballot Measure Committee

<table>
<thead>
<tr>
<th>NAME OF BALLOT MEASURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>BALLOT NO. OR LETTER</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>OFFICE SOUGHT OR HELD</td>
</tr>
</tbody>
</table>

## 7. Primarily Formed Candidate/Officeholder Committee

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

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
<th>□ SUPPORT</th>
<th>□ OPPOSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
<td>□ SUPPORT</td>
<td>□ OPPOSE</td>
</tr>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
<td>□ SUPPORT</td>
<td>□ OPPOSE</td>
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<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
<td>□ SUPPORT</td>
<td>□ OPPOSE</td>
</tr>
</tbody>
</table>

**Attach continuation sheets if necessary**
## Contributions Received

1. Monetary Contributions
   
   Schedule A, Line 3
   
   $ \text{Column A} \quad \text{TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)} \quad $ \text{Column B} \quad \text{CALIFORNIA FORM 460} \quad \text{TOTAL TO DATE}

2. Loans Received
   
   Schedule B, Line 3
   
   $ \text{Column A} \quad \text{TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)} \quad $ \text{Column B} \quad \text{CALIFORNIA FORM 460} \quad \text{TOTAL TO DATE}

3. SUBTOTAL CASH CONTRIBUTIONS
   
   Add Lines 1 + 2
   
   $ \text{Column A} \quad \text{TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)} \quad $ \text{Column B} \quad \text{CALIFORNIA FORM 460} \quad \text{TOTAL TO DATE}

4. Nonmonetary Contributions
   
   Schedule C, Line 3
   
   $ \text{Column A} \quad \text{TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)} \quad $ \text{Column B} \quad \text{CALIFORNIA FORM 460} \quad \text{TOTAL TO DATE}

5. TOTAL CONTRIBUTIONS RECEIVED
   
   Add Lines 3 + 4
   
   $ \text{Column A} \quad \text{TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)} \quad $ \text{Column B} \quad \text{CALIFORNIA FORM 460} \quad \text{TOTAL TO DATE}

## Expenditures Made

6. Payments Made
   
   Schedule E, Line 4
   
   $ \text{Column A} \quad \text{TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)} \quad $ \text{Column B} \quad \text{CALIFORNIA FORM 460} \quad \text{TOTAL TO DATE}

7. Loans Made
   
   Schedule H, Line 3
   
   $ \text{Column A} \quad \text{TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)} \quad $ \text{Column B} \quad \text{CALIFORNIA FORM 460} \quad \text{TOTAL TO DATE}

8. SUBTOTAL CASH PAYMENTS
   
   Add Lines 6 + 7
   
   $ \text{Column A} \quad \text{TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)} \quad $ \text{Column B} \quad \text{CALIFORNIA FORM 460} \quad \text{TOTAL TO DATE}

9. Accrued Expenses (Unpaid Bills)
   
   Schedule F, Line 3
   
   $ \text{Column A} \quad \text{TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)} \quad $ \text{Column B} \quad \text{CALIFORNIA FORM 460} \quad \text{TOTAL TO DATE}

10. Nonmonetary Adjustment
    
    Schedule C, Line 3
    
    $ \text{Column A} \quad \text{TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)} \quad $ \text{Column B} \quad \text{CALIFORNIA FORM 460} \quad \text{TOTAL TO DATE}

11. TOTAL EXPENDITURES MADE
    
    Add Lines 8 + 9 + 10
    
    $ \text{Column A} \quad \text{TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)} \quad $ \text{Column B} \quad \text{CALIFORNIA FORM 460} \quad \text{TOTAL TO DATE}

## Current Cash Statement

12. Beginning Cash Balance
    
    Previous Summary Page, Line 16
    
    $ \text{Column A} \quad \text{TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)} \quad $ \text{Column B} \quad \text{CALIFORNIA FORM 460} \quad \text{TOTAL TO DATE}

13. Cash Receipts
    
    Column A, Line 3 above
    
    $ \text{Column A} \quad \text{TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)} \quad $ \text{Column B} \quad \text{CALIFORNIA FORM 460} \quad \text{TOTAL TO DATE}

14. Miscellaneous Increases to Cash
    
    Schedule I, Line 4
    
    $ \text{Column A} \quad \text{TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)} \quad $ \text{Column B} \quad \text{CALIFORNIA FORM 460} \quad \text{TOTAL TO DATE}

15. Cash Payments
    
    Column A, Line 8 above
    
    $ \text{Column A} \quad \text{TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)} \quad $ \text{Column B} \quad \text{CALIFORNIA FORM 460} \quad \text{TOTAL TO DATE}

16. ENDING CASH BALANCE
    
    Add Lines 12 + 13 + 14, then subtract Line 15
    
    $ \text{Column A} \quad \text{TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)} \quad $ \text{Column B} \quad \text{CALIFORNIA FORM 460} \quad \text{TOTAL TO DATE}

   \text{If this is a termination statement, Line 16 must be zero.}

17. LOAN GUARANTEES RECEIVED
    
    Schedule B, Part 2
    
    $ \text{Column A} \quad \text{TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)} \quad $ \text{Column B} \quad \text{CALIFORNIA FORM 460} \quad \text{TOTAL TO DATE}

## Cash Equivalents and Outstanding Debts

18. Cash Equivalents
    
    See Instructions on reverse
    
    $ \text{Column A} \quad \text{TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)} \quad $ \text{Column B} \quad \text{CALIFORNIA FORM 460} \quad \text{TOTAL TO DATE}

19. Outstanding Debts
    
    Add Line 2 + Line 9 in Column B above
    
    $ \text{Column A} \quad \text{TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)} \quad $ \text{Column B} \quad \text{CALIFORNIA FORM 460} \quad \text{TOTAL TO DATE}

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

- Contributions Received
  
  $ \text{Column A} \quad \text{TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)} \quad $ \text{Column B} \quad \text{CALIFORNIA FORM 460} \quad \text{TOTAL TO DATE}

- Expenditures Made
  
  $ \text{Column A} \quad \text{TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)} \quad $ \text{Column B} \quad \text{CALIFORNIA FORM 460} \quad \text{TOTAL TO DATE}

## Expenditure Limit Summary for State Candidates

- Cumulative Expenditures Made
  
  $ \text{Column A} \quad \text{TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)} \quad $ \text{Column B} \quad \text{CALIFORNIA FORM 460} \quad \text{TOTAL TO DATE}

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

**Payments Made**

Amounts may be rounded to whole dollars.

Statement covers period from 01/01/2017 through 06/30/2017

NAME OF FILER

West Covina Firefighters Political Action Committee

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

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

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<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Political Reporting Plus</td>
<td>PRO</td>
<td>Political Accounting - Amended Reports 1/1/12 - 6/30/2016</td>
<td>1,250.00</td>
</tr>
<tr>
<td>Political Reporting Plus</td>
<td>PRO</td>
<td>Political Accounting - June, 2015</td>
<td>250.00</td>
</tr>
<tr>
<td>Political Reporting Plus</td>
<td>POS</td>
<td>Reimbursement - Messenger Service</td>
<td>16.61</td>
</tr>
</tbody>
</table>

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

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.) $27,185.50
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 Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) TOTAL $27,185.50

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FPPC Form 460 (Jan/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
www.fppc.ca.gov
## Schedule E
(Continuation Sheet)
Payments Made

**NAME OF FILER**
West Covina Firefighters Political Action Committee

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

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

**NAME AND ADDRESS OF PAYEE**

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Political Reporting Plus</td>
<td>POS</td>
<td>Reimbursement - Messenger Service</td>
<td>4.18</td>
</tr>
<tr>
<td>Political Reporting Plus</td>
<td>PRO</td>
<td>Political Accounting - January, 2016</td>
<td>250.00</td>
</tr>
<tr>
<td>Political Reporting Plus</td>
<td>PRO</td>
<td>Political Accounting - June, 2016</td>
<td>250.00</td>
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<tr>
<td>Political Reporting Plus</td>
<td>FIL</td>
<td>SOS Reimbursement of 2015, 2016 &amp; 2017</td>
<td>150.00</td>
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<tr>
<td>Political Reporting Plus</td>
<td>POS</td>
<td>Reimbursement - Messenger Service</td>
<td>13.01</td>
</tr>
</tbody>
</table>

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

**SUBTOTAL $**
667.19

**Statement covers period from 01/01/2017 through 06/30/2017**

CALIFORNIA FORM 460
I.D. NUMBER 1227285

SEE INSTRUCTIONS ON REVERSE
## Schedule E (Continuation Sheet)

**Payments Made**

Amounts may be rounded to whole dollars.

Statement covers period from **01/01/2017** through **06/30/2017**

**NAME OF FILER**

West Covina Firefighters Political Action Committee

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

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

### NAME AND ADDRESS OF PAYEE

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>OR</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>California Professional Firefighters PAC (ID# 1241835)</td>
<td>CMP</td>
<td>Legislative Conference</td>
<td>450.00</td>
<td></td>
</tr>
<tr>
<td>Paul Krueger</td>
<td>TRC</td>
<td>Travel &amp; Expenses Reimbursement</td>
<td>685.76</td>
<td></td>
</tr>
<tr>
<td>Jimmy Blackman &amp; Associates</td>
<td>CNS</td>
<td>Consulting Services</td>
<td>5,000.00</td>
<td></td>
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<tr>
<td>Paul Krueger</td>
<td>TRC</td>
<td>Airfare Reimbursement</td>
<td>412.96</td>
<td></td>
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<tr>
<td>KBC Mailing</td>
<td>LIT</td>
<td></td>
<td>1,200.00</td>
<td></td>
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</tbody>
</table>

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

SUBTOTAL $ 7,748.72

**I.D. NUMBER**

1227285

FPPC Form 460 (Jan/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Schedule E (Continuation Sheet)  
Payments Made  

Name of Filer: West Covina Firefighters Political Action Committee  

Statement covers period from 01/01/2017 through 06/30/2017  

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

<table>
<thead>
<tr>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
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<tbody>
<tr>
<td>POS</td>
<td>POS: 1,994.30</td>
<td>1,994.30</td>
</tr>
<tr>
<td>TRS</td>
<td>TRS: Travel &amp; Expenses Reimbursement 762.30</td>
<td>762.30</td>
</tr>
<tr>
<td>CNS</td>
<td>CNS: Consulting Services</td>
<td>5,000.00</td>
</tr>
<tr>
<td>CNS</td>
<td>CNS: Consulting Services</td>
<td>5,000.00</td>
</tr>
<tr>
<td>LIT</td>
<td>LIT: Graphic Design Services</td>
<td>1,250.00</td>
</tr>
</tbody>
</table>

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

SUBTOTAL $ 14,006.60
# Schedule E (Continuation Sheet)
## Payments Made

Amounts may be rounded to whole dollars.

**Statement covers period**
- **from:** 01/01/2017
- **through:** 06/30/2017

**CALIFORNIA 460**

### CODES:

- **ClvP**: campaign paraphernalia/misc.
- **CNS**: campaign consultants
- **CTB**: contribution (explain nonmonetary)*
- **CVC**: civic donations
- **FIL**: candidate filing/ballot fees
- **FND**: fundraising events
- **IND**: independent expenditure supporting/opposing others (explain)*
- **LEG**: legal defense
- **LIT**: campaign literature and mailings
- **MBR**: member communications
- **MTG**: meetings and appearances
- **OFF**: office expenses
- **PET**: petition circulating
- **PHO**: phone banks
- **POL**: polling and survey research
- **POS**: postage, delivery and messenger services
- **PRO**: professional services (legal, accounting)
- **PRT**: print ads
- **RAD**: radio airtime and production costs
- **RFD**: returned contributions
- **SAL**: campaign workers' salaries
- **TEL**: t.v. or cable airtime and production costs
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- **VOT**: voter registration
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### NAME AND ADDRESS OF PAYEE

**Continental Colorcraft**

<table>
<thead>
<tr>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
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</thead>
<tbody>
<tr>
<td>LIT</td>
<td>Printing Expenses</td>
<td>3,246.38</td>
</tr>
</tbody>
</table>

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

**SUBTOTAL $** 3,246.38
### Schedule F

**Accrued Expenses (Unpaid Bills)**

Amounts may be rounded to whole dollars.

**West Covina Firefighters Political Action Committee**

Statement covers period from **01/01/2017** through **06/30/2017**

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

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

**NAME AND ADDRESS OF CREDITOR**

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF CREDITOR</th>
<th>CODE OR DESCRIPTION OF PAYMENT</th>
<th>AMOUNT INCURRED THIS PERIOD</th>
<th>AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)</th>
<th>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Political Reporting Plus</td>
<td>PRO Political Accounting - June, 2015</td>
<td>250.00</td>
<td>0.00</td>
<td>250.00</td>
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<td>Political Reporting Plus</td>
<td>PRO Political Accounting - January, 2016</td>
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<td>PRO Political Accounting - June, 2016</td>
<td>250.00</td>
<td>0.00</td>
<td>250.00</td>
</tr>
</tbody>
</table>

**SUBTOTALS $**

- **750.00**
- **0.00**
- **750.00**

**Schedule F Summary**

1. 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 $**

2. 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 $**

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ............................................ **NET $**

**PPC Form 460 (Jan/2016)**

**FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)**