

Recipient Committee
Campaign Statement
Cover Page

(Government Code Sections 84200-84216.5)

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 01/01/2023
through 06/30/2023

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

11/08/2022

CALIFORNIA
FORM

460

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For Official Use Only

Date Stamp

E-Filed
07/27/2023
14:13:03
Filing ID:
208326679

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

- ☒ 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
☐ (Also Complete Part 7)

2. Type of Statement:

- ☐ Preelection Statement
☒ Semi-annual Statement
☐ Termination Statement
☐ Amendment (Explain below)
- ☐ Quarterly Statement
☐ Special Odd-Year Report
☐ Supplemental Preelection Statement - Attach Form 495

3. Committee Information

I.D. NUMBER

1439662

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

ODDO FOR CITY COUNCIL 2022

Treasurer(s)

NAME OF TREASURER

Michelle Moore Sanders

MAILING ADDRESS

STREET ADDRESS (NO P.O. BOX)

CITY

Inglewood

STATE

CA

ZIP CODE

90301

AREA CODE/PHONE

(310) 817-6679

CITY

Inglewood

STATE

CA

ZIP CODE

90301

AREA CODE/PHONE

(310) 817-6679

NAME OF ASSISTANT TREASURER, IF ANY

Cine D. Ivery

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

CITY

Laguna Niguel

STATE

CA

ZIP CODE

92677

AREA CODE/PHONE

CITY

Inglewood

STATE

CA

ZIP CODE

90301

AREA CODE/PHONE

(310) 817-6679

OPTIONAL: FAX / E-MAIL ADDRESS

(310) 672-6679 / mymsanders@politicalreportingplus.com

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 and in the 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 07/27/2023

Date

By Michelle Moore Sanders

Signature of Treasurer or Assistant Treasurer

Executed on 07/27/2023

Date

By Stephanie Oddo

Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on

Date

By

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on

Date

By

Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (Jan/2016)

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

FORM FPPC 460

Recipient Committee
Campaign Statement
Cover Page — Part 2

COVER PAGE - PART 2

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE			
Stephanie Oddo			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)			
City Council Member: Laguna Niguel			
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP
Inglewood	CA	90301	

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 ADDRESS	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 ADDRESS	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, 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

Attach continuation sheets if necessary

Campaign Disclosure Statement
Summary Page

Amounts may be rounded
to whole dollars.

SUMMARY PAGE
CALIFORNIA
FORM

Statement covers period

from 01/01/2023

through 06/30/2023

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ODDO FOR CITY COUNCIL 2022

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Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions Schedule A, Line 3	\$ 1,815.00	\$ 1,815.00
2. Loans Received Schedule B, Line 3	0.00	16,250.00
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 1,815.00	\$ 18,065.00
4. Nonmonetary Contributions Schedule C, Line 3	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 1,815.00	\$ 18,065.00

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

1/1 through 6/30 7/1 to Date

20. Contributions Received \$
21. Expenditures Made \$

Expenditures Made

6. Payments Made Schedule E, Line 4	\$ 2,083.35
7. Loans Made Schedule H, Line 3	0.00
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 2,083.35
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	-1,250.00
10. Nonmonetary Adjustment Schedule C, Line 3	0.00
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 833.35

Expenditure Limit Summary for State
Candidates

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

Date of Election (mm/dd/yy) Total to Date

/ / \$
/ / \$

Current Cash Statement

12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 2,707.67
13. Cash Receipts Column A, Line 3 above	1,815.00
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00
15. Cash Payments Column A, Line 8 above	2,083.35
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 2,439.32

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

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

17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ 0.00
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse	\$ 0.00
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ 16,250.00

Schedule A

Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

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from 01/01/2023

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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
01/19/2023	Anahita Marquetant Laguna Niguel, CA 92677	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Student and Homemaker None	150.00	150.00	G2022 \$150.00
02/07/2023	California Real Estate PAC (CREPAC) (ID# 890106) Los Angeles, CA 90071	☐ IND ☐ COM ☐ OTH ☐ PTY ☒ SCC		500.00	500.00	G2022 \$1,000.00
02/13/2023	Maryam Sharifi Laguna Niguel, CA 92677	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired None	100.00	100.00	G2022 \$150.00
03/09/2023	Theresa Mays Laguna Niguel, CA 92677	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired None	100.00	100.00	G2022 \$215.00
03/29/2023	Patricia 'Patti' Waterman Laguna Niguel, CA 92677	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired None	300.00	300.00	G2022 \$300.00
Received through intermediary: Refundraising Connections Sacramento, CA 95816-3783						
SUBTOTAL \$				1,150.00		

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 1,600.00
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 215.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) TOTAL \$ 1,815.00

*Contributor Codes

IND – Individual

COM – Recipient Committee
(other than PTY or SCC)

OTH – Other (e.g., business entity)

PTY – Political Party

SCC – Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

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NAME OF FILER	
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
06/21/2023	Ken Mintz Laguna Niguel, CA 92677	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired None	100.00 Received through intermediary: eFundraising Connections Sacramento, CA 95816-3783	100.00	G2022 \$500.00
06/22/2023	Sara Harms Laguna Niguel, CA 92677	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired None	350.00 Received through intermediary: eFundraising Connections Sacramento, CA 95816-3783	350.00	G2022 \$1,000.00
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				

SUBTOTAL \$				450.00	
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*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 B – Part 1
Loans Received

SCHEDULE B - PART 1

Amounts may be rounded
to whole dollars.

Statement covers period

from 01/01/2023

SEE INSTRUCTIONS ON REVERSE

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FULL NAME, STREET ADDRESS AND ZIP CODE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Stephanie Oddo Inglewood, CA 90301 LOAN @ -0- % INTEREST	Educator Stephanie Oddo	\$ 16,250.00	\$ 0.00	☐ PAID \$ 0.00 ☐ FORGIVEN	\$ 16,250.00	0.00 %	\$ 20,000.00	0.00 PER ELECTION**
☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					09/21/2023 DATE DUE	\$ 0.00	09/21/2022 DATE INCURRED	\$ 16,250.00 G2022
☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				☐ PAID \$ ☐ FORGIVEN		% RATE	\$ DATE INCURRED	\$ PER ELECTION**
☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				☐ PAID \$ ☐ FORGIVEN		% RATE	\$ DATE INCURRED	\$ PER ELECTION**

SUBTOTALS \$ 0.00 \$ 0.00 \$ 16,250.00 \$ 0.00

Schedule B Summary

- Loans received this period \$ 0.00
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period \$ 0.00
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (Subtract Line 2 from Line 1.) NET \$ 0.00
Enter the net here and on the Summary Page, Column A, Line 2.

†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

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.

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

Amounts may be rounded
to whole dollars.

SCHEDULE D
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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)
06/06/2023	Orange County Young Democrats	☒ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure	OCYD Contribution	100.00	100.00	G2022 \$100.00
	☒ Support ☐ Oppose					
		☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
	☐ Support ☐ Oppose					
		☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
	☐ Support ☐ Oppose					
SUBTOTAL \$				100.00		

Schedule D Summary

- Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) \$ 100.00
- Unitemized contributions and independent expenditures made this period of under \$100 \$ 0.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) TOTAL \$ 100.00

Schedule E
Payments Made

Amounts may be rounded
to whole dollars.

SCHEDULE E

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

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	posting, 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)

USAA Credit Card
San Antonio, TX 78288-0509

CODE OR

CMP Expenditures

DESCRIPTION OF PAYMENT

AMOUNT PAID

34.00

Political Reporting Plus
Inglewood, CA 90301

PRO

Political Accounting NOV 2022

250.00

Political Reporting Plus
Inglewood, CA 90301

PRO

Political Accounting AUG/SEP/OCT 2022

750.00

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

SUBTOTAL \$

1,034.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) \$ 1,956.66
2. Unitemized payments made this period of under \$100 \$ 126.69
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 \$** 2,083.35

Schedule E
(Continuation Sheet)
Payments Made

Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Political Reporting Plus Inglewood, CA 90301		PRO		Political Accounting DEC 2022	250.00
USAA Credit Card San Antonio, TX 78288-0509		CMP		Expenditures	39.50
Political Reporting Plus Inglewood, CA 90301		PRO		Political Accounting SA2-22 INV#SOCC JAN 2023-1	250.00
USAA Credit Card San Antonio, TX 78288-0509		CMP		Expenditures	79.98
USAA Credit Card San Antonio, TX 78288-0509		CMP		Expenditures	53.02
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.					SUBTOTAL \$ 672.50

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

Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
USAA Credit Card San Antonio, TX 78288-0509	CMP		Expenditures	38.58
Orange County Young Democrats (ID# 1277204) Norwalk, CA 90650	CTB		OCYD Contribution	100.00
USAA Credit Card San Antonio, TX 78288-0509	CMP		Expenditures domain name & mailchimp	111.58

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

SUBTOTAL \$

250.16

Schedule F Accrued Expenses (Unpaid Bills)

Amounts may be rounded
to whole dollars.

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

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

NAME AND ADDRESS OF 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
Political Reporting Plus Inglewood, CA 90301	PRO Political Accounting AUG/SEP/OCT 2022	750.00	0.00	750.00	0.00
Political Reporting Plus Inglewood, CA 90301	PRO Political Accounting NOV 2022	250.00	0.00	250.00	0.00
Political Reporting Plus Inglewood, CA 90301	PRO Political Accounting DEC 2022	250.00	0.00	250.00	0.00

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

SUBTOTALS \$

1,250.00\$

0.00\$

1,250.00\$

0.00

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 \$ 0.00

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 \$ 1,250.00

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 \$

-1,250.00
May be a negative number