De almiant Cananaltta a				COVERPAGE
Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)		CITY OF BELL G	Date Stamp VADENS VFFICE	CALIFORNIA 460 FORM
(,	Statement covers period from 09/25/2022	Date of election if applicable: (Month, Day, Year)	1 3: 25	Page 1 of 11 For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through 10/22/2022	11/08/2022 7100 (ARFIEL	DAVE	
1. Type of Recipient Committee: All Committees - 0	Complete Parts 1, 2, 3, and 4.	2. Type of Statement.	A ANSOL	
 State Candidate Election Committee ○ Recall (Also Complete Part 5) □ General Purpose Committee 	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	⊠ Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination Amendment (Explain below)		Quarterly Statement Special Odd-Year Report Supplemental Preelection Statement - Attach Form 495
3. Committee Information	.D. NUMBER 1451491	Treasurer(s)		and an activation of the property of the prope
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE Jennifer Rodriguez for Bell Gardens City Co	•	NAME OF TREASURER Gary Crummitt MAILING ADDRESS		
STREET ADDRESS (NO P.O. BOX)		CITY Long Beach	STATE :	ZIP CODE AREA CODE/PHONE 90802
CITY STATE ZIP C		NAME OF ASSISTANT TREASURER, IF AN Jennifer Rodriguez		30002
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.		MAILING ADDRESS	1847 - S. A. P. S.	
CITY STATE ZIP C	ODE AREA CODE/PHONE	CITY Long Beach	STATE Z	ZIP CODE AREA CODE/PHONE 90802
OPTIONAL: FAX / E-MAIL ADDRESS	ACTION OF THE PROPERTY OF THE	OPTIONAL: FAX / E-MAIL ADDRESS		TO COLOR
. Verification				
I have used all reasonable diligence in preparing and reviewir under penalty of perjury under the laws of the State of Californ	ng this statement and to the best of my kn nia that the foregoing is true and correct	owledge the information contained herein and in	the attached so	chedules is true and complete. I certify
Executed on	Ву			
Executed on	By .	ontrolling Omcenoider, Candidate, State Measure Proponent or Res	conside Onicer or Spi	onsor
Executed on	Ву	Signature of Controlling Officeholder, Candidate, State Measure F	roponent	MAAAAAAAA QAAAAAAA AAA
Executed on	Ву	Signature of Controlling Officeholder, Candidate, State Measure F	roponent	EDDC Form 460 / Jan/2046)

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2							
CALIF	ORNI	A	160				
FC	RM						
			aller del kalan				
Page _	2	_ of _	_11				

	Officeholder or Candidate Controlled Committee							
NAME OF OFFICEHOLDER OR CANDIDATE		nonanananananananananananananananananan	NAME	OF BALLOT MEASURE				ANNANCEIGA George (et al composition de la composition della compo
Jennifer Rodriguez			manananani		nnovarageone e e e e e e e e e e e e e e e e e e			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	RICT NUMBER IF APPLICA	ABLE)	BALLO	OT NO, OR LETTER	JURISDICTI	ON		SUPPORT
City Council Member City of Bell Gardens			MARINANANANANANANANANANANANANANANANANANAN					OPPOSE
	CITY STATE		ldent	ify the controlling of	fficeholder, ca	ndidate, or stat	te measure p	proponent, if a
I	Long Beach CA	90802	NAME	OF OFFICEHOLDER, CA	NDIDATE, OR PE	ROPONENT		Continue de la constante de la
Related Committees Not Included in this Si not included in this statement that are controlled by you contributions or make expenditures on behalf of your co	ı or are primarily forme		OFFIC	E SOUGHT OR HELD		C	DISTRICT NO. II	F ANY
COMMITTEE NAME	I.D. NUMBER							
	ı							
	CONTROLLED COLUM	HTTEEO.	7. Prim	narily Formed Car	ndidate/Offic	eholder Con	nmittee Lis	st names of
NAME OF TREASURER	CONTROLLED COMM			narily Formed Car holder(s) or candidate(
	YES .		office		s) for which thi		orimarily forme	ed.
	YES .		office	holder(s) or candidate(s) for which thi	s committee is p	orimarily forme	ed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	YES D		NAME	holder(s) or candidate((s) for which thi	s committee is p	orimarily forme	SUPPORT
`	YES D	NO	NAME	holder(s) or candidate((s) for which thi	OFFICE SOUGH	orimarily forme	ed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. CITY STATE ZIP	YES D	NO	NAME NAME	holder(s) or candidate(OF OFFICEHOLDER OR OF OFFICEHOLDER OR	CANDIDATE CANDIDATE	OFFICE SOUGH	orimarily forme	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	YES N	NO	NAME NAME	holder(s) or candidate(CANDIDATE CANDIDATE	OFFICE SOUGH	orimarily forme	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. CITY STATE ZIP	YES N	ODE/PHONE	NAME NAME	holder(s) or candidate(OF OFFICEHOLDER OR OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGH	HT OR HELD HT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS (NO P.O. CITY STATE ZIP COMMITTEE NAME IAME OF TREASURER	DOX) CODE AREA CO I.D. NUMBER CONTROLLED COMMI	ODE/PHONE	NAME NAME	holder(s) or candidate(OF OFFICEHOLDER OR OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGH	HT OR HELD HT OR HELD	SUPPORT OPPOSE SUPPORT SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. CITY STATE ZIP COMMITTEE NAME IAME OF TREASURER	DOX) CODE AREA CO I.D. NUMBER CONTROLLED COMMI	ODE/PHONE	NAME NAME	holder(s) or candidate(OF OFFICEHOLDER OR OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGH	HT OR HELD HT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. CITY STATE ZIP COMMITTEE NAME IAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO P.O. I	ODE AREA C I.D. NUMBER CONTROLLED COMMI	ODE/PHONE	NAME NAME	holder(s) or candidate(OF OFFICEHOLDER OR OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGH	HT OR HELD HT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

Statement covers period CALIFORNIA FORM 09/25/2022

SUMMARY PAGE

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Jennifer Rodriguez for Bell Gardens City Council 2022

from __ Page ___3 __ of ___11___ 10/22/2022 through _ I.D. NUMBER 1451491

Denniter Rodriguez for Berr Gardens City Council 2022	ominimation of the same		**************************************		4.5
Contributions Received	(Column A TOTAL THIS PERIOD FROMATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions Schedule A, Line 3	\$	11,695.00	\$	33,511.33	
2. Loans Received Schedule B, Line 3		0.00		0.00	1/1 through 6/30 7/1 to Dat
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	11,695.00	\$	33,511.33	20. Contributions Received \$\$
4. Nonmonetary Contributions Schedule C, Line 3		0.00		0.00	21. Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	11,695.00	\$	33,511.33	Made \$ \$
Expenditures Made					Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$	16,245.32	\$	27,918.99	Candidates
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	16,245.32	\$	27,918.99	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3				4,906.27	Date of Election Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3		0.00		0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$	21,151.59	\$	32,825.26	 / \$
Current Cash Statement		MATERIA PARA SANSA MANANGAN PANGAN PA		<u>annan entra anna anna ann an ann an ann an ann an</u>	\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	10,142.66	То	calculate Column B, add	
13. Cash Receipts Column A, Line 3 above		11,695.00		ounts in Column A to the responding amounts	
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fror	n Column B of your last	*Amounts in this section may be different from amount reported in Column B.
15. Cash Payments Column A, Line 8 above		16,245.32	rep Col	ort. Some amounts in lumn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	5,592.34	figu	ires that should be	
If this is a termination statement, Line 16 must be zero.	SII AA SEE		per	otracted from previous riod amounts. If this is first report being filed	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for car	this calendar year, only ry over the amounts	
Cash Equivalents and Outstanding Debts			fror any	m Lines 2, 7, and 9 (if	
			1		
18. Cash Equivalents					

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

Schedule A

SCH	F	n	11	E	Δ
		u	.,,	_=	~

Monetary	Contributions Received		whole dollars.	Statement coverage from09/25/2	•	CAL F	460	
SEE INSTRUCTION	ONS ON REVERSE			through	022	Page	44	of11
NAME OF FILER		VA-HEALIHAVAAVATERIN TERRATARIA AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA				I.D. N	UMBER	
Jennifer Ro	driguez for Bell Gardens City Council 2022					1451	491	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		R YEAR TO DATE	
09/30/2022	Conrad Orange LP Downey, CA 90241	☐IND ☐COM ☑OTH ☐PTY ☐SCC		4,900.00	4,	900.00	G2022	\$4,900.00
10/13/2022	Enrique Godinez Los Angeles, CA 90036	⊠IND □COM □OTH □PTY □SCC		1,000.00	1,	000.00	P2022	\$1,000.00
10/14/2022	Golden Management Services Inc. El Monte, CA 91731	□IND □COM 図OTH □PTY □SCC		99.00		495.00	G2022	\$495.00
10/14/2022	Golden Management Services Inc. El Monte, CA 91731	□IND □COM ☑OTH □PTY □SCC		99.00		495.00	G2022	\$495.00
10/14/2022	Golden Management Services Inc. El Monte, CA 91731	□IND □COM ☑OTH □PTY □SCC		99.00		495.00	G2022	\$495.00
			SUBTOTAL\$	6,197.00				
. Amount re	A Summary ceived this period – itemized monetary contributions. I Schedule A subtotals.)		\$	11,695.00	IND-			
	ceived this period – unitemized monetary contributions etary contributions received this period.	of less than \$	100\$	0.00	PTY-	OtherPolitica	(e.g., busi l Party	ness entity) Committee
	s 1 and 2. Enter here and on the Summary Page, Colur	nn A, Line 1.)	TOTAL \$	11,695.00		MANAGEMENT ACCOUNTS ACCOUNTS ACCOUNTS		

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A	(CONT.
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CALIFORNIA

FORM

Statement covers period

from

09/25/2022

				through10/22/	2022	age	c	of
NAME OF FILER			1			I.D. NUME	BER	
Jennifer Rod	riguez for Bell Gardens City Council 2022					1451491	1	
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 D CALENDAR YEA (JAN. 1 - DEC. 3	R	TC	ELECTION DATE EQUIRED)
10/14/2022	Golden Management Services Inc. El Monte, CA 91731	□IND □COM 図OTH □PTY □SCC		99.00	49.	0.00 G2	2022	\$495.00
10/14/2022	Golden Management Services Inc. El Monte, CA 91731	□IND □COM ☑OTH □PTY □SCC		99.00	499	.00 G2	2022	\$495.00
10/13/2022	Jervis Property Service Inc. Downey, CA 90241	□IND □COM ☑OTH □PTY □SCC		2,500.00	2,500	.00 G2	2022	\$2,500.00
10/14/2022	R.F.T. Rental Properties Downey, CA 90240	□IND □COM ☑OTH □PTY □SCC		800.00	800	.00 G2	2022	\$800.00
10/09/2022	Kristin Ronnenberg Newport Beach, CA 92660	⊠IND □COM □OTH □PTY □SCC	Attorney self	2,000.00	2,000	.00 G2	022	\$2,000.00
- 11 - WAI - 11 - WAI		MANAGEM STATE OF STAT	SUBTOTAL \$	5,498.00				

*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 E	
Payments Made	

		SCHEDULE E
Statem	ent covers period	CALIFORNIA AGO
from	09/25/2022	FORM TOU
through .	10/22/2022	Page _ 6 _ of _ 11
		I.D. NUMBER
		1451491

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Jennifer Rodriguez for Bell Gardens City Council 2022

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the paymer	CODES:	lf	one	of	the	following	codes	accurately	y describes	the p	ayment,	you may	y enter	the code.	Otherwise,	describe t	he paymer	ıt.
---	--------	----	-----	----	-----	-----------	-------	------------	-------------	-------	---------	---------	---------	-----------	------------	------------	-----------	-----

CMP	campaign paraphemalia/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
ND	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
Crummitt & Associates Long Beach, CA 90802	PRO		520.00
E- Fundraising Conections Sacramento, CA 95814		Credit Card Processing Fees	2.75
E- Fundraising Conections Sacramento, CA 95814		Credit Card Processing Fees	221.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL\$ 743.75

Schedule E Summary

•	
Itemized payments made this period. (Include all Schedule E subtotals.)\$ \$	16,245.32
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.)	16,245.32

Schedule	E
(Continuat	tion Sheet)
Payments	Made

SEE INSTRUCTIONS ON REVERSE	through	Page7 of11
NAME OF FILER		I.D. NUMBER
Jennifer Rodriguez for Bell Gardens City Council 2022		1451491

Jenn	ifer Rodriguez for Bell Gardens City Council 2022			Account to the term of the ter		1451491	
COD CMP CNS CTB CVC FIL FND IND LEG LIT	contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* OFC office expendence of petition circles of phone bank polling and postage, dependence of polling and postage.	mmunications and appearance ases ulating as survey reseau	es	RAD RFD SAL TEL TRC TRS TSF VOT	describe the payment. radio airtime and production of returned contributions campaign workers' salaries t.v. or cable airtime and producandidate travel, lodging, and staff/spouse travel, lodging, airtransfer between committees voter registration information technology costs (action costs meals and meals of the same	
	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTIO	N OF PAYMENT		AMOUNT PAID
Sacra	amento, CA 95814 Solutions	CNS	Credit Card	Processing	Fees		2,500.00
HKF S	Solutions By, CA 90241		Digital Ads				1,700.00
	Solutions ey, CA 90241		Email blasts				234.00

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

* SUBTOTAL \$ 5,638.49

LIT

1,113.99

HKF Solutions

Downey, CA 90241

Schedule	E	
(Continua	tion	Sheet)
Payments	Mac	de

SCHEDULE E (CONT.) Statement covers period

Payments Made	to initial delication	from09/25/2022	
SEE INSTRUCTIONS ON REVERSE		through 10/22/2022	Page 8 of 11
NAME OF FILER			I.D. NUMBER
Jennifer Rodriguez for Bell Gardens City Council 2022			1451491
CODES: If one of the following codes accurately describes the	payment, you may enter the code. Othe	rwise, describe the payment.	

CODES: If one of the following codes accurately describes CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundralsing events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings an OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, del	munications d appearance ses lating survey resear very and me	es	RAD radio airtime and production cos RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and producti TRC candidate travel, lodging, and more staff/spouse travel, lodging, and transfer between committees of voter registration WEB information technology costs (in	ion costs eals meals the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTIEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
HKF Solutions Downey, CA 90241		CNS			1,250.00
Karina Medina			Canvassing		433.00
Downey, CA 90241					
Karina Medina Downey, CA 90241			Canvassing	,	146.00
Print & Mail Concepts, Inc. Ontario, CA 91761		LIT			796.27
The Card Master		CMP			1,006.50

SUBTOTAL \$ 3,631.77 * Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Los Angeles, CA 90023

Schedule	E	
(Continua	tion	Sheet)
Payments	Mac	de

SCHEDULE E (CONT.)

Statement covers period

from 09/25/2022

the statement 10/22/2022

Payments Made to v	whole dolla	ers.		from_	09/25/2022	FOR	RM
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Jennifer Rodriguez for Bell Gardens City Council 2022				throug	h 10/22/2022	Page	
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 OFC offic petitive potention of the potential of the po	mber comme etings and a ce expense tion circulati ne banks ing and sur tage, delive	unications appearances as ing vey researc ary and mes	3	RAD RFD SAL TEL TRC TRS TSF VOT	radio airtime and pro returned contribution campaign workers' t.v. or cable airtime a candidate travel, lode staff/spouse travel, l	oduction costs ns salaries and production costs ging, and meals odging, and meals mmittees of the san	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE O	R DESC	CRIPTION	OF PAYMENT		AMOUNT PAID
The Card Master Los Angeles, CA 90023		LIT					4,487.65
The Card Master Los Angeles, CA 90023		LIT					1,252.66
The Walking Man Los Angeles, CA 90021			Literature distri	bution			491.00
				HEADON CONTRACTOR OF THE PARTY			
* Payments that are contributions or independent expenditures must also be summar	rized on Sc	hedule D.				SUBTOTAL \$	6,231.31

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

Amounts may be rounded to whole dollars.

Statement covers period 09/25/2022 from through 10/22/2022

CALIFORNIA **FORM**

Page 10 of 11

Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS \$	0.00\$	4,906.27	0.00\$	4,906.2
The Card Master Los Angeles, CA 90023	LIT	0.00	3,586.27	0.00	3,586.2
Occidental Communications Group Coto De Caza, CA 92679	Automated Phone Calls	0.00	1,320.00	0.00	1,320.0
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
CODES: If one of the following codes accurately describ CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense campaign literature and mailings	MBR member communication MTG meetings and appeara OFC office expenses PET petition circulating PHO phone banks POL polling and survey resi POS postage, delivery and PRO professional services (PRT print ads	ns nces earch messenger services	RAD radio airtime ar RFD returned contri- SAL campaign work TEL t.v. or cable air TRC candidate trave TRS staff/spouse tra TSF transfer betwee VOT voter registratio	nd production costs butions ters' salaries time and production cost l, lodging, and meals avel, lodging, and meals committees of the sa	me candidate/sponsor
Jennifer Rodriguez for Bell Gardens City Council 2022			least a state of the Ali	14514	91
NAME OF FILER				I.D. NUR	MBER

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.)	4,906.27
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.)	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.)	4,906.27 May be a negative number

Schedule G	
Payments Made by a	n Agent or Independent
Contractor (on Behal	f of This Committee)

	SCHEDULE G
Statement covers period	CALIFORNIA A CO
from 09/25/2022	FORM 40U
through10/22/2022	Page 11 of 11
	I.D. NUMBER
	1451491

SEE INSTRUCTIONS ON REVERSE

Jennifer Rodriguez for Bell Gardens City Council 2022

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Card Master

NAME OF FILER

CODES: If one of the following codes accurately	describes the payment, you may enter the co	de. Otherwise, describe the payment.
ON ET	1 4PhPh	DAD media pirtima and production on

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		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
ND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
U.S. Postal Service	POS			2,461.2
Downey, CA 90241				
	*			
			ALLIAN DE LA CALLETTE	

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 2,

^{2,461.27}

^{*} 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.