D	asiniant Committee			A			COVER PAGE
C	ecipient Committee ampaign Statement over Page overnment Code Sections 84200-84216.5)			Dat	e Stamp	Ó	FORM 460
•	Control (Anti-Anti-Anti-Anti-Anti-Anti-Anti-Anti-	Statement covers period	Date of election if applicable:	O	တ	P	age1 of10
		from07/01/2023	(Month, Day, Year)	告	-		
				8	#	- 1	For Official Use Only
SE	EINSTRUCTIONS ON REVERSE	through		LERKS OFC	M2344 9.1		
1.	Type of Recipient Committee: All Committees - Co	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:	Ž	inda.		
	State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	rimarily Formed Ballot Measure committee Controlled Sponsored Uso Complete Part 6) rimarily Formed Candidate/ officeholder Committee Uso Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te	ermination)	724	Suppleme	Statement dd-Year Report ental Preelection t - Attach Form 495
3.	Committee Information	. NUMBER .354771	Treasurer(s)				
	COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)	-	NAME OF TREASURER				
	Gardena Police Officers Association Politica	l Action Committee	Roberto Rosales				
			MAILING ADDRESS				
			1718 W. 162nd Street				
	STREET ADDRESS (NO P.O. BOX)	_	CITY		STATE	ZIP CODE	AREA CODE/PHONE
	1718 W. 162nd Street		Gardena		CA	90247	(310) 938-8682
	CITY STATE ZIP CO	DE AREA CODE/PHONE	NAME OF ASSISTANT TREASUR	ER, IF ANY			
	Gardena CA 9024		Yolanda Miranda				
	MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO	OX .	MAILING ADDRESS				
	P.O. Box 2252		728 W. Edna Place				
	CITY STATE ZIP CO		CITY		STATE	ZIP CODE	AREA CODE/PHONE
		7-0116	Covina		CA	91722	(626) 915-7635
	OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRE	ESS			
	Verification			A-0-01/2			
	I have used all reasonable diligence in preparing and reviewing	this statement and to the best of my kr				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	Ву					
	Executed on	BySignature of Con	trolling Officeholder, Candidate, State Measure Propo	onent or Responsib	le Officer of	Sponsor	
	Executed on	Ву	Signature of Controlling Officeholder, Candidate, Stat	te Measure Propon	ent		
	Executed on	Ву	Signature of Controlling Officeholder, Candidate, Stat	te Measure Propon	ent		FPPC Form 460 (Jan/2016)
							FFFC FUIII 400 (Jaii/2016)

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

Officeholder or Candidate Contr	rolled Committee	6.	Primarily Formed Bal	lot Measur	e Committee		
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE		·		
OFFICE SOUGHT OR HELD (INCLUDE LOCAT	TION AND DISTRICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICT	TION		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AN	D STREET) CITY STATE ZIP		Identify the controlling of	ficeholder, c	andidate, or state	e measure p	proponent, if any
			NAME OF OFFICEHOLDER, CA	NDIDATE, OR F	ROPONENT	-	
	ed in this Statement: List any committees ntrolled by you or are primarily formed to receive shalf of your candidacy.		OFFICE SOUGHT OR HELD		DI	ISTRICT NO. II	ANY
COMMITTEE NAME	I.D. NUMBER						
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Can officeholder(s) or candidate(
COMMITTEE ADDRESS STREET ADDR	RESS (NO P.O. BOX)		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	T OR HELD	SUPPORT OPPOSE
CITY S	STATE ZIP CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	T OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	T OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	T OR HELD	SUPPORT OPPOSE
	RESS (NO P.O. BOX)						
CITY S	ITATE ZIP CODE AREA CODE/PHONE		Atta	ch continuati	on sheets if nec	essary	

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statem	ent covers period	CALIFORNIA 460
from	07/01/2023	FORM 400
through _	12/31/2023	Page3 of10
		I.D. NUMBER
		1354771

Gardena Police Officers Association Political Action Committee

Contributions Received	Column A		Column B CALENDAR YEAR	Calendar Year Summary for Candidates
	(FROMATTACHED SCHEDULES)		TOTAL TO DATE	Running in Both the State Primary and General Elections
1. Monetary Contributions Schedule A, Line 3	\$ 0.00	\$	7,326.00	
2. Loans Received	0.00		0.00	1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 0.00	\$	7,326.00	20. Contributions Received \$ \$
4. Nonmonetary Contributions	0.00		0.00	21 Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 0.00	\$	7,326.00	Made \$ \$
Expenditures Made				Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$ 15,313.00	\$	15,313.00	Candidates
7. Loans Made Schedule H, Line 3	0.00		0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 15,313.00	\$	15,313.00	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)	2,000.00		2,509.23	Date of Election Total to Date
10. Nonmonetary Adjustment	0.00		0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$ 17,313.00	\$	17,822.23	\$
Current Cash Statement				\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 52,543.37	То	calculate Column B, add	
13. Cash Receipts	0.00	am	nounts in Column A to the rresponding amounts	
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00	fro	m Column B of your last	*Amounts in this section may be different from amounts reported in Column B.
15. Cash Payments	15,313.00		oort. Some amounts in Dlumn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 37,230.37	fig	ures that should be	
If this is a termination statement, Line 16 must be zero.		ре	btracted from previous riod amounts. If this is	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ 0.00	for	e first report being filed this calendar year, only try over the amounts	
Cash Equivalents and Outstanding Debts			m Lines 2, 7, and 9 (if	
18. Cash Equivalents	\$ 0.00	an	J).	
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ 2,509.23			
		J		FPPC Form 460 (Ja FPPC Advice: advice@fppc.ca.gov (866/27

Schedule D **Summary of Expenditures** Supporting/Opposing Other

Amounts may be rounded to whole dollars

Statement covers period **CALIFORNIA**

Candidates, Measures and Committees	to whole dollars.	from	07/01/2023	FO	RM	100
SEE INSTRUCTIONS ON REVERSE		through _	12/31/2023	Page _	4	of <u>10</u>
NAME OF FILER				I.D. NUN	/BER	
Gardena Police Officers Association Political Action Comm	ittee			13547	71	
* "					1	

			T		T	
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)
12/14/2023	Anthony Dixon City Council Member City of Gardena X Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Slate mailer	469.00	3,272.50	P2024 \$3,272.50
12/16/2023	Anthony Dixon City Council Member City of Gardena Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Billboard	2,803.50	3,272.50	P2024 \$3,272.50
12/14/2023	Mark Henderson City Council Member City of Gardena Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Slate mailer	469.00	3,522.50	P2024 \$3,522.50
			SUBTOTAL \$	3,741.50		

Schedule D Summary

1.	. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)	\$	6,795.00
2.	. Unitemized contributions and independent expenditures made this period of under \$100	\$	0.00
3	Total contributions and independent expenditures made this period (Add Lines 1 and 2. Do not enter on the Summary Page).	¢	6,795.00

Schedule D (Continuation Sheet) Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees

		SCHEDULE D (CONT
Amounts may be rounded to whole dollars.	Statement covers period	CALIFORNIA 460
	from07/01/2023	FORM 400
	through	Page5 of10
		I.D. NUMBER

Gardena Pol	ice Officers Associatio	on Political Action Com	mittee	,		13547	71
DATE	MEASURE NUMBER OR LE	OFFICE, AND DISTRICT, OR ETTER AND JURISDICTION, MMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/16/2023	Mark Henderson City Council Member City of Gardena	☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure		250.00	3,522.50	P2024 \$3,522.50
12/16/2023	Mark Henderson City Council Member City of Gardena	Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	Billboard	2,803.50	3,522.50	P2024 \$3,522.50
	☐ Support	☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure				
	☐ Support	☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure				
- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	1			SUBTOTAL \$	3,053.50		

NAME OF FILER

Schedule E	
Payments Made	

Amounts may be rounded to whole dollars.

· · · · · · · · · · · · · · · · · · ·		SCHEDULE E
Statem	ent covers period	CALIFORNIA 160
from	07/01/2023	FORM TOO
through	12/31/2023	Page6 of10
		I.D. NUMBER
		1354771

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Gardena Police Officers Association Political Action Committee

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

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 cano	idate/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
Budget Watchdogs Newsletter (ID# 1345115) 22410 Hawthorne Blvd, Ste 5 Torrance, CA 90505	LIT		1,420.00
CA Slates (ID# 1401551) 249 E. Ocean Blvd., #670 Long Beach, CA 90802	LIT		4,004.00
California Voter Guide (ID# 595-004) 22410 Hawthorne Blvd, Suite 5 Torrance, CA 90505	LIT		340.00

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

SUBTOTAL \$ 5,764.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	15,263.00
2. Unitemized payments made this period of under \$100	\$	50.00
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 \$	15,313.00

Schedule E	
(Continuation	Sheet)
Daymonte May	40

Amounts may be rounded to whole dollars.

	SCHEDULE E (CONT.
tatement covers period	CALIFORNIA 460
07/01/0003	FORM TOU

Payments Made	to whole dollars.	from07/01/2023	FORIVI	
SEE INSTRUCTIONS ON REVERSE		through12/31/2023	Page 7 of _	10
NAME OF FILER			I.D. NUMBER	
Gardena Police Officers Association Political Action Committe	е		1354771	

COL	DES: If one of the following codes accurately describe	s the	payment, y	ou may	enter the code.	Otherwise,	describe the payment.	
CMP CNS CTB CVC 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	MBR MTG OFC PET PHO POL POS PRO PRT		d appearantses lating survey reservery and n	nces	TEL TRC TRS TSF VOT	returned contributions	me candidate/sponsor
	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CODE	OR	DESCRIPTIO	N OF PAYMENT	AMOUNT PAID

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Clear Channel Outdoor 19320 Harborgate Way Torrance, CA 90501	CMP Billk	poard	5,607.00
COPS Voter Guide Inc. (ID# 599014) 705 East Bidwell Street Folsom, CA 95630	LIT		469.00
COPS Voter Guide Inc. (ID# 599014) 705 East Bidwell Street Folsom, CA 95630	LIT		469.00
Election Digest (ID# 134530) 22410 Hawthorne Blvd, Ste 5 Torrance, CA 90505	LIT		1,654.00
Mark Henderson for City Council 2024 (ID# 1458940) 1700 West 162nd St. Gardena, CA 90247	CTB		250.00

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

SUBTOTAL \$

8,449.00

Schedule E
(Continuation Sheet)
Payments Made

Amounts may be rounded to whole dollars.

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

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

		SCHED	JLE E (CONT.
State	ment covers period	CALIFORNIA	460
from	07/01/2023	FORM	-100
through	12/31/2023	Page8	of10

i dymenta made	from	
SEE INSTRUCTIONS ON REVERSE	through12/31/2023	Page8 of10
NAME OF FILER		I.D. NUMBER
Gardena Police Officers Association Political Action Committee		1354771

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 con MTG meetings ar OFC office exper PET petition circu PHO phone bank POL polling and POS postage, de	nmunications nd appearances nses ulating s	RAD radio airtime and production of returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production of candidate travel, lodging, and transfer between committees	nction costs meals nd meals of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Senior Advocate (ID# 1439476) 22410 Hawthorne Blvd. Ste 5 Torrance, CA 90505		LIT		1,050.00

1,050.00

SUBTOTAL \$

Schedule	e F		
Accrued	Expenses	(Unpaid	Bills)

Amounts may be rounded to whole dollars.

CALIFORNIA Statement covers period **FORM** 07/01/2023 from through $\frac{12}{31/2023}$ of ___10 Page ___9 I.D. NUMBER

1354771

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Gardena Police Officers Association 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. member communications RAD radio airtime and production costs campaign consultants MTG meetings and appearances returned contributions contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CTB CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees phone banks candidate travel, lodging, and meals fundraising events POL polling and survey research staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor IND independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF

legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT

print ads

WEB information technology costs (internet, e-mail)

(b) (d) (a) CODE OR NAME AND ADDRESS OF CREDITOR OUTSTANDING **AMOUNT INCURRED** AMOUNT PAID **OUTSTANDING** (IF COMMITTEE, ALSO ENTER I.D. NUMBER) DESCRIPTION OF PAYMENT THIS PERIOD BALANCE BEGINNING THIS PERIOD BALANCE AT CLOSE OF THIS PERIOD (ALSO REPORT ON E) OF THIS PERIOD POS Yolanda Miranda & Assoc. 9.23 0.00 9.23 0.00 728 West Edna Place Covina, CA 91722 PRO Yolanda Miranda & Assoc. 500.00 0.00 0.00 500.00 728 West Edna Place Covina, CA 91722 PRO Yolanda Miranda & Assoc. 500.00 0.00 500.00 0.00 728 West Edna Place Covina, CA 91722 * Payments that are contributions or independent expenditures must also be **SUBTOTALS \$** 509.23\$ 500.00\$ 0.00\$ 1,009.23 summarized on Schedule D.

Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for

2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on

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 \$ 2,000.00

0.00

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

Amounts may be rounded to whole dollars.

	0011220221 (001111)					
Statement covers period	CALIFORNIA 460					
from07/01/2023	FORM TOO					
through12/31/2023	Page of					
	I.D. NUMBER					
	1254771					

WEB information technology costs (internet, e-mail)

NAME OF FILER

Gardena Police Officers Association 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.	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

campaign literature and mailings PRT print ads

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

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
Yolanda Miranda & Assoc. 728 West Edna Place Covina, CA 91722	PRO	0.00	500.00	0.00	500.00
Yolanda Miranda & Assoc. 728 West Edna Place Covina, CA 91722	PRO	0.00	500.00	0.00	500.00
Yolanda Miranda & Assoc. 728 West Edna Place Covina, CA 91722	PRO	0.00	500.00	0.00	500.00
	SUBTOTALS \$	0.00\$	1,500.00\$	0.00 \$	1,500.00