Recipient Committee Campaign Statement Cover Page

SEE INSTRUCTIONS ON REVERSE

Statement covers period: from October 2017 through June 30, 2018

Date of election if applicable: (Month, Day, Year) November 6, 2018

Date Stamp: FILED 2018 JUL 25 PM 2:27 CITY OF ALHAMBRA CITY CLERK'S OFFICE

CALIFORNIA FORM 460

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For Official Use Only

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

- [X] Officeholder, Candidate Controlled Committee
  - ○ State Candidate Election Committee
  - ○ Recall *(Also Complete Part 5)*
- [ ] General Purpose Committee
  - ○ Sponsored
  - ○ Small Contributor Committee
  - ○ Political Party/Central Committee
- [ ] Primarily Formed Ballot Measure Committee
  - ○ Controlled
  - ○ Sponsored *(Also Complete Part 6)*
- [ ] Primarily Formed Candidate/ Officeholder Committee *(Also Complete Part 7)*

2. Type of Statement:

- [ ] Preelection Statement
- [x] Semi-annual Statement
- [ ] Termination Statement (Also file a Form 410 Termination)
- [ ] Amendment (Explain below)
- [ ] Quarterly Statement
- [ ] Special Odd-Year Report

3. Committee Information

I.D. NUMBER: 1399389

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Suzi Dunkel-Soto for Alhambra City Council 2018

STREET ADDRESS (NO P.O. BOX)
2213 Winthrop Drive

CITY: Alhambra | STATE: CA | ZIP CODE: 91803 | AREA CODE/PHONE:

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

CITY | STATE | ZIP CODE | AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER
Gudiel Crosthwaite

MAILING ADDRESS
2325 Paloma Street

CITY: Pasadena | STATE: CA | ZIP CODE: 91104 | AREA CODE/PHONE:

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY | STATE | ZIP CODE | AREA CODE/PHONE

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 July 20, 2018 (Date) By _____ (Signature of Treasurer or Assistant Treasurer)

Executed on July 24, 2018 (Date) By _____ (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)

Recipient Committee Campaign Statement Cover Page — Part 2

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Suzi Dunkel-Soto

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

Alhambra City Council (5th District)

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP
2213 Winthrop Drive	Alhambra	CA	91803

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
Suzi Dunkel-Soto for Alhambra City Council 2018	1399389
NAME OF TREASURER	CONTROLLED COMMITTEE?
Gudiel Crosthwaite	☑ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

2213 Winthrop Drive

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Alhambra	CA	91803	

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

Statement covers period
from October 2017
through June 30, 2018

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Gudiel Crosthwaite

I.D. NUMBER
1399389

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	$ 14,873	$ 14,873
2. Loans Received	Schedule B, Line 3	0	0
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	$ 14,873	$ 14,873
4. Nonmonetary Contributions	Schedule C, Line 3	0	0
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	$ 14,873	$ 14,873

Expenditures Made

6. Payments Made	Schedule E, Line 4	$ 3,410.31	$ 3,410.31
7. Loans Made	Schedule H, Line 3	0	0
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	$ 3,410.31	$ 3,410.31
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	0	0
10. Nonmonetary Adjustment	Schedule C, Line 3	0	0
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	$ 3,410.31	$ 3,410.31

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	$ 0
13. Cash Receipts	Column A, Line 3 above	0
14. Miscellaneous Increases to Cash	Schedule I, Line 4	0
15. Cash Payments	Column A, Line 8 above	0
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	$ 0

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

17. LOAN GUARANTEES RECEIVED — Schedule B, Part 2 — $ 0

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	$ 0
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	$ 0

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).

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	$ 14,873	$
21. Expenditures Made	$ 3,410.31	$

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
/ /	$
/ /	$

*Amounts in this section may be different from amounts reported in Column B.

Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period
from October 2017
through June 30, 2018

CALIFORNIA FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Gudiel Crosthwaite

I.D. NUMBER
1399389

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)
1/30/18	Judy/Thomas Berge, Sr. 900 E. Main St., Alhambra, CA 91801	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Realtor - Berge Co.	500	500	500
1/28/18	Tom Berge 804 E Grand Ave, Alhambra, CA 91801	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Realtor - Berge Co.	250	250	250
2/1/18	Catrina Family Trust (Check 2725)	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC	Realtor - Catrina R.E. + Investments	500	500	500
2/6/18	California Real Estate Political Action Committee # 890106	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC		5,000	5,000	5,000
2/15/18	Guat-Yin Bihr (Check 8731) 2477 Huntington Dr., San Marino 91108	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Realtor - Masters Realty	200	200	200
			SUBTOTAL $	6,450		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 13,500
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 1,373
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL $** 14,873

*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.)

Statement covers period
from October 2017 January 2018
through June 30, 2018

CALIFORNIA FORM **460**

I.D. NUMBER
1399389

NAME OF FILER
Gudiel Crosthwaite

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)
23/18	Karen Kult 1909 W. Thelbor St., West Covina, CA 91790	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Realtor - Century 21 West Coast Brokers	200	200	200
4/2/18	Stephen Sham for City Council 126 E Valley Blvd, Alhambra, CA 91801	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC		500	500	500
4/2/18	Darrol R Proctor 2011 S Raymond Ave, Alhambra, CA 91803	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Truck Driver, Arrowhead	$150.00	$150.00	$150.00
4/2/18	Jose Pavon 6017 N. Willard Ave, San Gabriel, CA 91775	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Business Owner Al's Towing	250.00	250.00	250.00
4/2/18	Jeff Maloney for Alhambra City Council 2016 PO Box 6005 Alhambra, CA 91802	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC		150	150	150
			SUBTOTAL $	1,250		

*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.)

Statement covers period
from ~~January 2018~~ October 2017
through June 30, 2018

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NAME OF FILER
Gudiel Crosthwaite

I.D. NUMBER
1399389

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)
9/18	Jason Chiu Wah Eng 1005 Geranio Dr Alhambra, CA 91801	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Appraiser, Cal Trans	$250.00	$250.00	$250.00
4/2/18	Michael Glenn Verdone 149 Wellesley Cres. Redwood City, CA 94062	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Realtor - Broker	$100.00	100	100
3/15/18	Helen Chen Marston 6109 Hart Ave., Temple City, CA 91780	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Realtor - Keller Williams Realty	$200	$200	$200
3/15/18	Leticia T. Morales 3241 N. Knoll Dr., Los Angeles, CA 90068 $291.00	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Clerical - JamesCarr Trust	300	300	300
3/15/18	Giuseppe Veneziano 515 W. Whittier Bl., Montebello, CA 90640	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Realtor - IRN	100	100	100
			SUBTOTAL $	950		

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SCC – Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
from ~~January 2018~~ October 2017
through June 30, 2018

CALIFORNIA FORM **460**

NAME OF FILER
Gudiel Crosthwaite

I.D. NUMBER
1399389

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)
'2/18	Donna Dunkel 454 Kelsey Road, San Dimas, CA 91773	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	500	500	500
4/2/18	Nicholas John Baldry 220 E Lime Ave Monrovia, CA 91016	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Realtor Vas Tree Realty	100	100	100
5/9/18	Thomas Maloney 318 Story Pl, Alhambra, CA 91801	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Plumber EL Maloney Plumbing Co	$100	$100.00	$100.00
5/9/18	California Real Estate PAC #22450 525 S. Virgil Ave. Los Angeles, CA 90020	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC		$1,500.00	$1,500.00	$1,500.00
5/9/18	Mindy Yeh 17843 Colima Road, Rowland Heights, CA 91748	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Realtor - ReMax 2000	150	150	150
			SUBTOTAL $	2,350		

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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.)

Statement covers period
from October 2017 January 2018
through June 30, 2018

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NAME OF FILER
Gudiel Crosthwaite

I.D. NUMBER
1399389

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)
2/18	David Mejia 1617 Palm Ave, Alhambra, CA 91803	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Police Officer, LAPD	200	200	200
4/2/18	Laura Martinez-Sanchez 316 S. Meridian Ave. Alhambra, CA 91801	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Construction, Sanz Construction	500	500	500
4/2/18	Victor Franco 985 S. Orange Grove Blvd, #301 Pasadena, CA 91105	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retiree	$150.00	$150.00	$150.00
4/2/18	Lisa M. Dunn 24736 Sauco, Mission Viejo, CA 92692	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Realtor - Casa Bella Realty	250.00	250.00	250.00
4/2/18	Peter Dunkel Enclosed Tow 14555 Alondra Blvd La Mirada, CA 90638	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		1000	1000	1000
			SUBTOTAL $ 2,100			

*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.)

Statement covers period
from October 2017
through June 30, 2018

CALIFORNIA FORM **460**

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NAME OF FILER
Gudiel Crosthwaite

I.D. NUMBER
1399389

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)
5/18	Pat Zicarelli 5416 Topeka Dr., Tarzana, CA 91356	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Realtor - Style Realty	100	100.00	100.00
5/22/18	West DeYoung 3169 Glendale Blvd., Los Angeles, CA 90039	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Realtor - Courtney+Kurt RE	100	100	100
10/25/18	Gudiel Crosthwaite 2325 Paloma Street Pasadena, CA 91104	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Educator Lynwood Unified	200	200	200
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
			SUBTOTAL $	400		

*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

Amounts may be rounded to whole dollars.

Statement covers period
from October 2017
through June 30, 2018

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Gudiel Crosthwaite

I.D. NUMBER
1399389

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (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
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$	$	☐ PAID $ ☐ FORGIVEN $	$ DATE DUE	% RATE $	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION** $
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$	$	☐ PAID $ ☐ FORGIVEN $	$ DATE DUE	% RATE $	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION** $
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$	$	☐ PAID $ ☐ FORGIVEN $	$ DATE DUE	% RATE $	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION** $
		SUBTOTALS $	$	$	$ (Enter (e) on Schedule E, Line 3)			

Schedule B Summary

1. Loans received this period ..... $ 0
   (Total Column (b) plus unitemized loans of less than $100.)
2. Loans paid or forgiven this period ..... $ 0
   (Total Column (c) plus loans under $100 paid or forgiven.)
   (Include loans paid by a third party that are also itemized on Schedule A.)
3. Net change this period. (**Subtract** Line 2 from Line 1.) ..... NET $ N/A
   Enter the net here and on the Summary Page, Column A, Line 2.
   (May be a negative number)

†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 B – Part 2
Loan Guarantors

Amounts may be rounded to whole dollars.

Statement covers period
from October 2017
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Gudiel Crosthwaite

I.D. NUMBER
1399389

FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		LENDER DATE		CALENDAR YEAR $ PER ELECTION (IF REQUIRED) $	
	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		LENDER DATE		CALENDAR YEAR $ PER ELECTION (IF REQUIRED) $	
	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		LENDER DATE		CALENDAR YEAR $ PER ELECTION (IF REQUIRED) $	
	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		LENDER DATE		CALENDAR YEAR $ PER ELECTION (IF REQUIRED) $	
			SUBTOTAL $		Enter on Summary Page, Line 17 only.	

Schedule C
Nonmonetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE C

Statement covers period
from October 2017
through June 30, 2018

CALIFORNIA FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Gudiel Crosthwaite

I.D. NUMBER

1399389

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)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
Attach additional information on appropriately labeled continuation sheets.				**SUBTOTAL $**	0		

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) ..... $ 0
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $ 0
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) ..... **TOTAL $** N/A

*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 C
Nonmonetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE C

Statement covers period
from October 2017
through June 30, 2018

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Gudiel Crosthwaite

I.D. NUMBER
1399389

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)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
Attach additional information on appropriately labeled continuation sheets.					SUBTOTAL $ 0		

Schedule C Summary

1. Amount received this period – Itemized nonmonetary contributions. (Include all Schedule C subtotals.) ..... $ 0
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $ 0
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) ..... TOTAL $ N/A

*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

Amounts may be rounded to whole dollars.

Statement covers period
from October 2017
through June 30, 2018

CALIFORNIA FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Gudiel Crosthwaite

I.D. NUMBER
1399389

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
F 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)
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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Gudiel Crosthwaite 2325 Paloma Street Pasadena, CA 91104	CMP	Reimbursement for business cards and donation envelopes	175.20
Gudiel Crosthwaite 2325 Paloma Street Pasadena, CA 91104	FND	Reimbursement for Fundraiser dinner	380.00
Charlies Trio Restaurant 3[illegible], 47 W Main St, A[illegible]mbra, CA 91801	FND	Fundraiser Dinner	1,092.94

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

SUBTOTAL $ 1,648.14

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 3,148.14
2. Unitemized payments made this period of under $100 ..... $ 262.17
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ..... $ 0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ..... **TOTAL $** 3,410.31

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from October 2017
through June 30, 2018

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Gudiel Crosthwaite

I.D. NUMBER
1399389

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)
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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Checkcard Political Data	POL			1,500

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

SUBTOTAL $ 1,500

Schedule F
Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

Statement covers period
from October 2017
through June 30, 2018

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Gudiel Crosthwaite

I.D. NUMBER
1399389

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
F* fundraising events
II 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)
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)

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
N/A					
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS $	$	$	$	$

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

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 $** 0

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 $** 0
May be a negative number

SCHEDULE G

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

Statement covers period
from October 2017
through June 30, 2018

CALIFORNIA FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Gudiel Crosthwaite

I.D. NUMBER
1399389

NAME OF AGENT OR INDEPENDENT CONTRACTOR

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)*
C* civic donations
F 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)
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)

* 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
N/A				

Attach additional information on appropriately labeled continuation sheets.

TOTAL* $ N/A

** 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.*

Schedule H
Loans Made to Others*

Amounts may be rounded to whole dollars.

Statement covers period
from October 2017
through June 30, 2018

CALIFORNIA FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Gudiel Crosthwaite

I.D. NUMBER
1399389

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (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 LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
		$	$	☐ PAID $ ☐ FORGIVEN $	$ DATE DUE	% RATE $	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION** $
		$	$	☐ PAID $ ☐ FORGIVEN $	$ DATE DUE	% RATE $	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION** $
*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.	SUBTOTALS	$	$	$	$ (Enter (e) on Schedule I, Line 3)			

Schedule H Summary

1. Loans made this period ..... $ N/A
   (Total Column (b) plus unitemized loans of less than $100.)
2. Payments received on loans ..... $ N/A
   (Total Column (c) plus unitemized payments of less than $100.)
3. Net change this period. (Subtract Line 2 from Line 1.) ..... NET $ N/A
   (May be a negative number)
   (Enter the net here and on the Summary Page, Column A, Line 7.)

**If Required

SCHEDULE I

Schedule I
Miscellaneous Increases to Cash

Amounts may be rounded to whole dollars.

Statement covers period
from October 2017
through June 30, 2018

CALIFORNIA FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Gudiel Crosthwaite

I.D. NUMBER
1399389

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL $ N/A

Schedule I Summary

1. Itemized increases to cash this period. ..... $ _____
2. Unitemized increases to cash of under $100 this period. ..... $ _____
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) ..... $ _____
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) ..... **TOTAL** $ N/A