123 Recipient Committee COVER PAGE Campaign Statement CALIFORNIA 460 Cover Page PECEIVED 2001/02 FORM Statement covers period Date of election if applicable (Month, Day, Year) from 4/1/2022 For Official Use Only SEE INSTRUCTIONS ON REVERSE through 6/30/2022 2. Type of Statement: 2821 1. Type of Recipient Committee: All Committees- Complete Parts 1, 2, 3, and 4. Officeholder, Candidate Controlled Committee Primarily Formed Ballot Measure Preelection Statement Quarterly Statement State Candidate Election Committee Committee ✓ Semi-annual Statement Special Odd-Year Report Recall ✓ Controlled Termination Statement (Also Complete Part 5) (Also file a Form 410 Termination) Sponsored Amendment (Explain below) General Purpose Committee (Also Complete Part 6) Sponsored Primarily Formed Candidate/ Small Contributor Committee Officeholder Committee (Also Complete Part 7) Political Party/Central Committee I.D. NUMBER Treasurer(s) 3. Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) NAME OF TREASURER The Economic Development Reform Coalition of Southern California Geoffrey Yeterian - Hermosa Beach MAILING ADDRESS 777 S. Figueroa St., Ste. 4050 ZIP CODE AREA CODE/PHONE STREET ADDRESS (NO P.O. BOX) Los Angeles 90017 (213) 452-6565 777 S. Figueroa St., Ste. 4050 NAME OF ASSISTANT TREASURER, IF ANY STATE ZIP CODE AREA CODE/PHONE Los Angeles 90017 CA (213) 451-6565 MAILING ADDRESS MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX CITY STATE ZIP CODE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE OPTIONAL: FAX/E-MAIL ADDRESS OPTIONAL: FAX/E-MAIL ADDRESS jguard@kaufmanlegalgroup.com I have used all reasonable diligence in preparing and reviewing this contained herein and in the attached schedules is true and complete. I certify 4. Verification under penalty of perjuyy under the laws of the State of California tha Executed on Executed on Ву DATE FPPC Form 460 (Jan/2016) PROPONENT, OR RESPONSIBLE OFFICER OF PROPONENT FPPC Advice: Executed on SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT advice@fppc.ca.gov (866/275-3772) DATE Executed on DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONEN www.fppc.ca.gov

Recipient Committee Campaign Statement

Campaign Statement Cover Page		27	Date Stan	5670	CALIFORNIA 460 2001/02 FORM
	Statement covers period	Date of election if applicable	PECEIVE		
	from 4/1/2022	(Month, Day, Year)	AUG 0 2 20	1 1	Page 1 of 7 For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through 6/30/2022		HERMOSA BEA CITY CLERK	ACH 20	77 -
1. Type of Recipient Committee: All Committees- Compl	ete Parts 1, 2, 3, and 4.	2. Type of Statemen	153621	MA	
	rily Formed Ballot Measure	Preelection Statement		Quart	erly Statement
	mittee	Semi-annual Statement		Speci	al Odd-Year Report
	ontrolled	Termination Statement			
	oonsored	(Also file a Form 410 Termin	nation)		
	Complete Part 6)	Amendment (Explain be	elow)		
_	rily Formed Candidate/				
	eholder Committee	:			
Ciriali Contributor Committee	Complete Part 7)				
	4050				
3. Committee Information	VIBER	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) The Economic Development Reform Coalition of S	outhern California	NAME OF TREASURER Geoffrey Yeterian			
- Hermosa Beach		MAILING ADDRESS 777 S. Figueroa St.			
STREET ADDRESS (NO P.O. BOX)		CITY	STATE CA	ZIP CODE 90017	AREA CODE/PHONE (213) 452-6565
777 S. Figueroa St., Ste. 4050		Los Angeles NAME OF ASSISTANT TREASUREI		90017	(213) 432 0303
CITY STATE ZIP CODE	AREA CODE/PHONE	TANKE OF MODICINITY THE MODICE	.,		
Los Angeles CA 90017 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX	(213) 451-6565	MAILING ADDRESS			
CITY STATE ZIP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX/E-MAIL ADDRESS jquard@kaufmanlegalgroup.com		OPTIONAL: FAX/E-MAIL ADDRESS			
	ewing this statement and to the best	of my knowledge the information contains	ed herein and in	the attached sc	hedules is true and complete. I certify
under penalty of perjury under the laws of the State of Ca	lifornia that the foregoing is true and				
Executed onDATE	Ву	SIGNATURE OF TREASURER OR ASSISTANT T	REASURER		
Executed on	By SIGNATURE OF CONTROLLING OFF	CEHOLDER, CANDIDATE, STATE MEASURE PROPO	NENT OR RESPONS	SIBLE OFFICER OF	PROPONENT FPPC Form 460 (Jan/2016)
DATE Executed on	By	CENOLDER, CANDIDATE, STATE MEASURE PROPE	TENT, ON NEOPONG	SIDEL OF FOLK OF	FPPC Advice:
DATE	SIGNATURE O	CONTROLLING OFFICEHOLDER, CANDIDATE, OR	STATE MEASURE PR	ROPONENT	advice@fppc.ca.gov (866/275-3772)
Executed onDATE	BySIGNATURE O	F CONTROLLING OFFICEHOLDER, CANDIDATE, OR	STATE MEASURE PR	ROPONENT	www.fppc.ca.gov

Recipient Committee Campaign Statement Cover Page-Part 2

COVER PAGE-PART 2							
CALIFORNIA 460							
Page	2	of	7				

5. Officeholder or Candidate Controlled Co	ommittee	6.Primarily Formed Bal	llot Measure Committe	е
NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BALLOT MEASURE Medicinal & Adult-Us	se Cannabis Regulation	& Safety Act
OFFICE SOUGHT OR HELD(INCLUDE LOCATION AND DISTRICT NUMBER	BER IF APPLICABLE)	BALLOT NO. OR LETTER	JURISDICTION City of Hermosa Beach	SUPPORT
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY	STATE ZIP	Identify the controlling officel	holder, candidate, or state measu	ire proponent, if any
		NAME OF OFFICEHLOLDER, CANDI	DATE, OR PROPONENT	
Related Committees Not Included in this Statement: not included in this statement that are controlled by you or are primare contributions or make expenditures on behalf of your candidacy.	List any committees lly formed to receive	OFFICE SOUGHT OR HELD	DISTRICT NO	D. IF ANY
	D. NUMBER	7. Primarily Formed Cand officeholder(s) or candidate(s) for which	didate/Officeholder Comitties committee is primarily formed.	mittee List names of
NAME OF TREASURER	CONTROLLED COMMITTEE?	NAME OF OFFICEHOLDER OR CANDI	DATE OFFICE SOUGHT OR HEI	□suppoki
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)		THE STATE OF STATE OF SAME	IDATE OFFICE SOUGHT OR HEI	OPPOSE
CITY STATE ZIP CODE	AREA CODE/PHONE	NAME OF OFFICEHOLDER OR CAND	DEFICE SOUGHT OF HE	SUPPORT OPPOSE
COMMITTEE NAME	D. NUMBER	NAME OF OFFICEHOLDER OR CAND	IDATE OFFICE SOUGHT OR HE	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?	NAME OF OFFICEHOLDER OR CAND	IDATE OFFICE SOUGHT OR HE	
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)				OPPOSE
CITY STATE ZIP CODE	AREA CODE/PHONE	Attach co	ontinuation sheets if necessary	

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

 Statement covers period

 from
 4/1/2022

 through
 6/30/2022

CALIFORNIA
FORM
Page 3 of 7

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

The Economic Development Reform Coalition of Southern California - Hermosa Beach

Contributions Received	Column A Total This Period (FROM ATTACHED 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	\$0.00	\$0.00		1/1 through 6/30 7/1 to Date	
2. Loans Received Schedule B, Line 3	\$0.00	\$0.00	20. Contributions		
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1+ 2	\$0.00	\$0.00	Received		
4. Nonmonetary Contributions Schedule C, Line 3	\$0.00	\$57,549.78	21. Expenditures		
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$0.00	\$57,549.78	Made		
Expenditures Made			Expenditure Limi Candidates	t Summary for State	
6. Payments Made Schedule E, Line 4	\$0.00	\$0.00			
7. Loans Made Schedule H, Line 3	\$0.00	\$0.00	1	ve Expenditures Made * voluntary Expenditure Limit)	
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$0.00	\$0.00	(II Subject to	о човня у схраницію сини)	
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	\$6,365.10	\$13,634.20	Date of Election	Total to Date	
10. Nonmonetary Adjustment Schedule C, Line 3	\$0.00	\$57,549.78	(mm/dd/yyyy)		
11. TOTAL EXPENDITURES MADE Add Lines 8 +9 + 10	\$6,365.10	\$71,183.98			
Current Cash Statement					
12. Beginning Cash Balance Previous Summary Page, Line 16	\$0.00	To calculate Column B, add	1		
13. Cash Receipts Column A, Line 3 above	\$0.00	amounts in Column A to the corresponding amounts from			
14. Miscellaneous Increases to Cash Schedule I, Line 4	\$0.00	Column B of your last report. Some amounts in Column A			
15. Cash Payments Column A, Line 8 above	\$0.00	may be negative figures that should be subtracted from	*Amounts in this se	ection may be different from amounts	
16. ENDING CASH BALANCEAdd Lines 12+13+14, then subtract Line 15	\$0.00	previous period amounts. If this is the first report being	reported in schedu		
If this is a termination statement, Line 16 must be zero.		filed for this calendar year, only carry over the amounts			
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$0.00	from Lines 2, 7, and 9 (if any).			
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				FPPC Form 480 (Jan/2016	
15. Outstanding Debte			FPPC /	Advice: advice@fppc.ca.gov (866/275-3772 www.fppc.ca.go	

. Amounts may be rounded to whole dollars.

Schedule F

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here

and on the Summary Page. Column A, Line 9.)

Statement covers period

SCHEDULE F

CALIFORNIA

460 **Accrued Expenses (Unpaid Bills) FORM** 4/1/2022 Page of 4 6/30/2022 through SEE INSTRUCTIONS ON REVERSE I.D. NUMBER NAME OF FILER The Economic Development Reform Coalition of Southern California - Hermosa Beach CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs MRR member communications CMP campaign paraphemalia/misc. RFD returned contributions MTG meetings and appearances CNS campaign consultants SAL campaign workers' salaries OFC office expenses CTB contribution (explain nonmonetary)* TEL t.v. or cable airtime and production costs PET petition circulating CVC civic donations TRC candidate travel, lodging, and meals PHO phone banks FIL candidate filing/ballot fees TRS staff/spouse travel, lodging, and meals POL polling and survey research FND fundraising events TSF transfer between committees of the same candidate/sponsor POS postage, delivery and messenger services IND independent expenditure VOT voter registration PRO professional services (legal, accounting) LEG legal defense WEB information technology costs (Internet, e-mail) PRT print ads LIT campaign literature and mailings AMOUNT PAID THIS OUTSTANDING OUTSTANDING BALANCE AMOUNT INCURRED CODE OR DESCRIPTION OF NAME AND ADDRESS OF CREDITOR BALANCE AT CLOSE THIS PERIOD PERIOD PAYMENT BEGINNING OF THIS (IF COMMITTEE, ALSO ENTER I.D. NUMBER) OF THIS PERIOD PERIOD (ALSO REPORT ON E) Kaufman Legal Group \$0.00 \$3,079.50 \$0.00 \$3,079.50 PRO Los Angeles, CA 90017-5864 Kaufman Legal Group \$1,996.50 \$0.00 \$0.00 \$1,996.50 PRO Los Angeles, CA 90017-5864 Kaufman Legal Group \$2,193.00 \$0.00 \$2,193.00 \$0.00 PRO Los Angeles, CA 90017-5864 \$7,269.00 \$0.00 \$0.00 *Payments that are contributions or independent expenditures must also be SUBTOTALS \$7,269.00 summarized on Schedule D. Schedule F Summary 1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for \$6,365.10 INCURRED TOTALS accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) 2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on PAID TOTALS \$0.00 accrued expenses of \$100 or more, plus total uniternized payments on accrued expenses under \$100.)

\$6,365.10

. Amounts may be rounded to whole dollars.

Statement covers period

4/1/2022

6/30/2022

CALIFORNIA **FORM**

SCHEDULE F

Page 5

SEE INSTRUCTIONS ON REVERSE

Accrued Expenses (Unpaid Bills)

NAME OF FILER

Schedule F

I.D. NUMBER

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphemalia/misc. CMS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure LEG legal defense LIT campaign literature and mailings MBR member communications MTG meetings and appearances MTG meetings and appearances NTG office expenses SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals 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) (a)						
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT					
Kaufman Legal Group Los Angeles, CA 90017-5864	OFC	\$0.10	\$0.00	\$0.00	\$0.10	
Kaufman Legal Group Los Angeles, CA 90017-5864	PRO	\$0.00	\$2,709.00	\$0.00	\$2,709.00	
Kaufman Legal Group Los Angeles, CA 90017-5864	OFC	\$0.00	\$0.90	\$0.00	\$0.90	
*Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$0.10	\$2,709.90	\$0.00	\$2,710.00	
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 payments on accrued expenses under \$100.) \$6,365.1					\$6,365.10	
Total accrued expenses paid this period. (Include all Saccrued expenses of \$100 or more, plus total unitemized)	chedule F, Column (c) subtotals for payments on accrued expenses und	payments on der \$100.)		PAID TOTALS	\$0.00	
3. Net change this period. (Subtract Line 2 from Line 1. E	nter the difference here			NET	\$6,365.10	

and on the Summary Page, Column A, Line 9.)

(May be a negative number) FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (868/275-3772) www.fppc.ca.gov

to whole dollars.

. Amounts may be rounded

SCHEDULE F

Statement covers period CALIFORNIA **FORM** 4/1/2022 Page 6 of 6/30/2022 through I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

Accrued Expenses (Unpaid Bills)

NAME OF FILER

Schedule F

The Economic Development Reform Coalition of Southern California - Hermosa Beach

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

CMP campaign paraphemalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure

LEG legal defense

MBR member communications

MTG meetings and appearances

OFC office expenses

PET petition circulating

PHO phone banks

POL polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

LEG legal detense LIT campaign literature and mailings	PRT print ads WEB information technology co			ion technology costs (Interne	ts (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		
Kaufman Legal Group Los Angeles, CA 90017-5864	PRO	\$0.00	\$853.50	\$0.00	\$853.50		
Kaufman Legal Group Los Angeles, CA 90017-5864	OFC	\$0.00	\$1.20	\$0.00	\$1.20		
Kaufman Legal Group Los Angeles, CA 90017-5864	PRO	\$0.00	\$850.50	\$0.00	\$850.50		
*Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$0.00	\$1,705.20	\$0.00	\$1,705.20		
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 payments on accrued expenses under \$100.)							
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	\$0.00		
3. Net change this period. (Subtract Line 2 from Line 1. E and on the Summary Page, Column A, Line 9.)	3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)				\$6,365.10 May be a negative number)		
					PPC Form 480 (Jan/2016)		

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

. Amounts may be rounded to whole dollars.

SCHEDULE F

Statement covers period

from

4/1/2022 6/30/2022 CALIFORNIA 460 **FORM**

Page 7 of

through I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

The Economic Development Reform Coalition of Southern California - Hermosa Beach

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

CMP campaign paraphemalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)*

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LEG legal defense

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OFC office expenses

PET petition circulating

PHO phone banks

POL polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

MER information technology costs (Internet e-mail)

LIT campaign literature and mailings	PRT print ads	WEB Information technology costs (Internet, e-man)				
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	
Kaufman Legal Group Los Angeles, CA 90017-5864	OFC	\$0.00	\$1,950.00	\$0.00	\$1,950.00	

*Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$0.00	\$1,950.00	\$0.00	\$1,950.00
Schedule F Summary 1. Total accrued expenses incurred this period. (Include all Schedule accrued expenses of \$100 or more, plus total unitemized payments	F, Column (b) subtotals for on accrued expenses under \$100.)		INCURRE	TOTALS	\$6,365.10
2. Total accrued expenses paid this period. (Include all Schedule F, accrued expenses of \$100 or more, plus total unitemized payments	Column (c) subtotals for payments or on accrued expenses under \$100.)	1	PAII	TOTALS	\$0.00
Net change this period. (Subtract Line 2 from Line 1. Enter the diff and on the Summary Page, Column A, Line 9.)	ference here			NET (M	\$6,365.10 ay be a negative number)