

Recipient Committee  
Campaign Statement  
Cover Page

COVER PAGE

CALIFORNIA 460  
2001/02  
FORM

Date Stamp

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AUG 01 2023

City Clerk's Office  
City of Laguna Beach, CA

Page 1 of 8  
For Official Use Only

Statement covers period  
from 1/1/2023  
through 6/30/2023

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

SEE INSTRUCTIONS ON REVERSE

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

- 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
- 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  
1441800

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

Yes on Measure R and S - Citizens for Sustainable  
Laguna Beach, Sponsored by Unite Here Local 11

STREET ADDRESS (NO P.O. BOX)  
464 Lucas Ave. Suite 201

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Los Angeles	CA	90017	(213) 452-6565

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX  
777 S Figueroa St Ste 4050

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Los Angeles	CA	90017	(213) 452-6565

OPTIONAL: FAX/E-MAIL ADDRESS  
pcdfilings@kaufmanlegalgroup.com

Treasurer(s)

NAME OF TREASURER  
Susan Minato

MAILING ADDRESS  
464 S. Lucas Ave., Suite 201

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Los Angeles	CA	90017	(213) 452-6565

NAME OF ASSISTANT TREASURER, IF ANY  
Kurt Petersen

MAILING ADDRESS  
464 Lucas Ave Ste 201

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Los Angeles	CA	90017-2074	(213) 481-8530

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 7/31/2023  
DATE

Executed on \_\_\_\_\_  
DATE

Executed on \_\_\_\_\_  
DATE

Executed on \_\_\_\_\_  
DATE

By \_\_\_\_\_  
SIGNATURE OF TREASURER OR ASSISTANT TREASURER

By \_\_\_\_\_  
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT, OR RESPONSIBLE OFFICER OF PROPONENT

By \_\_\_\_\_  
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

By \_\_\_\_\_  
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

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

**Recipient Committee  
Campaign Statement  
Cover Page-Part 2**

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE

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

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

**Related Committees Not Included in this Statement:** List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> 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  
Hotel Worker Protection Ordinance Initiative & Initiative to Create the Hotel Development Overlay Zoning District and Require Voter Approval for Hotel Development Projects

BALLOT NO. OR LETTER S	JURISDICTION City of Laguna Beach	<input checked="" type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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**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
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**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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

Attach continuation sheets if necessary

**Campaign Disclosure Statement  
Summary Page**

Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on Measure R and S - Citizens for a Sustainable Laguna Beach, Sponsored by Unite Here Local 11

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	1/1/2023	
through	6/30/2023	
Page 3 of 8		I.D. NUMBER 1441800

**Contributions Received**

	Column A Total This Period (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions..... Schedule A, Line 3	\$0.00	\$0.00
2. Loans Received..... Schedule B, Line 3	\$0.00	\$0.00
3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1+ 2	\$0.00	\$0.00
4. Nonmonetary Contributions..... Schedule C, Line 3	\$0.00	\$0.00
5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4	\$0.00	\$0.00

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

	1/1 through 6/30	7/1 to Date
20. Contributions Received		
21. Expenditures Made		

**Expenditures Made**

	Column A	Column B
6. Payments Made..... Schedule E, Line 4	\$61.96	\$61.96
7. Loans Made..... Schedule H, Line 3	\$0.00	\$0.00
8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7	\$61.96	\$61.96
9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3	\$453.00	\$4,629.02
10. Nonmonetary Adjustment..... Schedule C, Line 3	\$0.00	\$0.00
11. TOTAL EXPENDITURES MADE..... Add Lines 8 +9 + 10	\$514.96	\$4,690.98

**Expenditure Limit Summary for State  
Candidates**

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

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

**Current Cash Statement**

12. Beginning Cash Balance..... Previous Summary Page, Line 16	\$4,898.05
13. Cash Receipts..... Column A, Line 3 above	\$0.00
14. Miscellaneous Increases to Cash..... Schedule I, Line 4	\$0.00
15. Cash Payments..... Column A, Line 8 above	\$61.96
16. ENDING CASH BALANCE...Add Lines 12+13+14, then subtract Line 15	\$4,836.09

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

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

18. Cash Equivalents..... See instructions on reverse	\$0.00
19. Outstanding Debts..... Add Line 2+Line 9 in Column B above	\$4,629.02

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).

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

**Schedule C  
Nonmonetary Contributions Received**

Amounts may be rounded to whole dollars.

SCHEDULE C

Statement covers period	<b>CALIFORNIA FORM 460</b>
from 1/1/2023	
through 6/30/2023	
Page 4 of 8	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on Measure R and S - Citizens for a Sustainable Laguna Beach, Sponsored by Unite Here Local 11

I.D. NUMBER  
1441800

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)
03/01/2023	UNITE HERE Local 11 (Nonprofit) 501 (c)(5)) 464 Lucas Ave # 201 Los Angeles, CA 90017-2074 ID: 1405171	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Memo: \$3105.80 Legal & Treasury Fees and Expenses Paid by	\$0.00	\$0.00	
03/01/2023	UNITE HERE Local 11 (Nonprofit) 501 (c)(5)) 464 Lucas Ave # 201 Los Angeles, CA 90017-2074 ID: 1405171	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Memo: \$247.86 Legal & Treasury Fees and Expenses Paid by	\$0.00	\$0.00	
04/20/2023	UNITE HERE Local 11 (Nonprofit) 501 (c)(5)) 464 Lucas Ave # 201 Los Angeles, CA 90017-2074 ID: 1405171	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Memo: \$0.20 Legal & Treasury Fees and Expenses Paid by	\$0.00	\$0.00	

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL** \$0.00

**Schedule C Summary**

- Amount received this period -itemized nonmonetary contributions.  
(Include all Schedule C subtotals.)..... \$0.00
- Amount received this period -unitemized nonmonetary contributions of less than \$100..... \$0.00
- Total nonmonetary contributions received this period.  
(Add Lines 1 and 2. Enter here on the Summary Page, Column A, Lines 4 and 10.)..... **TOTAL** \$0.00

\*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 C**  
**Nonmonetary Contributions Received**

. Amounts may be rounded  
to whole dollars.

SCHEDULE C

Statement covers period		<b>CALIFORNIA</b> <b>FORM</b> <b>460</b>
from	1/1/2023	
through	6/30/2023	Page <u>5</u> of <u>8</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on Measure R and S - Citizens for a Sustainable Laguna Beach, Sponsored by Unite Here Local 11

I.D. NUMBER  
1441800

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)
04/20/2023	UNITE HERE Local 11 (Nonprofit 501 (c) (5)) 464 Lucas Ave # 201 Los Angeles, CA 90017-2074 ID: 1405171	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Memo: \$823.00 Legal & Treasury Fees and Expenses Paid by	\$0.00	\$0.00	
04/20/2023	UNITE HERE Local 11 (Nonprofit 501 (c) (5)) 464 Lucas Ave # 201 Los Angeles, CA 90017-2074 ID: 1405171	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Memo: \$73.66 Legal & Treasury Fees and Expenses Paid by	\$0.00	\$0.00	
04/20/2023	UNITE HERE Local 11 (Nonprofit 501 (c) (5)) 464 Lucas Ave # 201 Los Angeles, CA 90017-2074 ID: 1405171	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Memo: \$178.50 Legal & Treasury Fees and Expenses Paid by	\$0.00	\$0.00	

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL** \$0.00

**Schedule C Summary**

1. Amount received this period -itemized nonmonetary contributions. (Include all Schedule C subtotals.).....	\$0.00
2. Amount received this period -unitemized nonmonetary contributions of less than \$100.....	\$0.00
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Column A, Lines 4 and 10.).....	<b>TOTAL</b> \$0.00

\*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

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

**Schedule C  
Nonmonetary Contributions Received**

. Amounts may be rounded to whole dollars.

SCHEDULE C

Statement covers period	<b>CALIFORNIA FORM 460</b>
from <u>1/1/2023</u>	
through <u>6/30/2023</u>	
Page <u>6</u> of <u>8</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Yes on Measure R and S - Citizens for a Sustainable Laguna Beach, Sponsored by Unite Here Local 11

I.D. NUMBER  
1441800

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)
04/20/2023	UNITE HERE Local 11 (Nonprofit) 501 (c)(5) 464 Lucas Ave # 201 Los Angeles, CA 90017-2074 ID: 1405171	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Memo: \$51.20 Legal & Treasury Fees and Expenses Paid by	\$0.00	\$0.00	
05/24/2023	UNITE HERE Local 11 (Nonprofit) 501 (c)(5) 464 Lucas Ave # 201 Los Angeles, CA 90017-2074 ID: 1405171	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Memo: \$486.00 Legal & Treasury Fees and Expenses Paid by	\$0.00	\$0.00	
05/24/2023	UNITE HERE Local 11 (Nonprofit) 501 (c)(5) 464 Lucas Ave # 201 Los Angeles, CA 90017-2074 ID: 1405171	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Memo: \$50.00 Legal & Treasury Fees and Expenses Paid by	\$0.00	\$0.00	

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL** \$0.00

**Schedule C Summary**

1. Amount received this period -itemized nonmonetary contributions.

(Include all Schedule C subtotals.)..... \$0.00

2. Amount received this period -unitemized nonmonetary contributions of less than \$100..... \$0.00

3. Total nonmonetary contributions received this period.

(Add Lines 1 and 2. Enter here on the Summary Page, Column A, Lines 4 and 10.)..... **TOTAL** \$0.00

\*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**

. Amounts may be rounded  
to whole dollars.

SCHEDULE E

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	1/1/2023	
through	6/30/2023	
		Page <u>7</u> of <u>8</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on Measure R and S - Citizens for a Sustainable Laguna Beach, Sponsored by Unite Here Local 11

I.D. NUMBER

1441800

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             | 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

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

**SUBTOTAL** \$0.00

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$0.00
2. Unitemized payments made this period of under \$100.....	\$61.96
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.).....	<b>TOTAL</b> \$61.96

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

Amounts may be rounded to whole dollars.

SCHEDULE F

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yes on Measure R and S - Citizens for a Sustainable Laguna Beach, Sponsored by Unite Here Local 11

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	1/1/2023	
through	6/30/2023	Page 8 of 8

I.D. NUMBER  
1441800

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             | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense                       | PRO professional services (legal, accounting) | VOT voter registration  |
| LIT campaign literature and mailings    | PRT print ads                                 | WEB information technology costs (Internet, e-mail)           |

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Kaufman Legal Group 777 S Figueroa St Ste 4050 Los Angeles, CA 90017-5864	PRO	\$0.00	\$403.00	\$0.00	\$403.00
Kaufman Legal Group 777 S Figueroa St Ste 4050 Los Angeles, CA 90017-5864	OFC	\$0.00	\$50.00	\$0.00	\$50.00
UNITE HERE Local 11 PAC 464 Lucas Ave Ste 201 Los Angeles, CA 90017-2074 ID: 981585	PHO	\$4,176.02	\$0.00	\$0.00	\$4,176.02

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

**SUBTOTALS** \$4,176.02 \$453.00 \$0.00 \$4,629.02

**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.)	<b>INCURRED TOTALS</b>	\$453.00
2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)	<b>PAID TOTALS</b>	\$0.00
3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)	<b>NET</b>	\$453.00
		(May be a negative number)