Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 07/01/2024
through 12/31/2024

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

Date Stamp
E-Filed 01/23/2025
Filing ID: 217321721

CALIFORNIA FORM 460

Page 1 of 14

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
- [ ] Supplemental Preelection Statement - Attach Form 495

3. Committee Information

I.D. NUMBER: 1457026

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Lindsey Horvath For Supervisor 2022 Officeholder Account

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Encino	CA	91436	(323)655-4065

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
Jane Leiderman

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Encino	CA	91436	(323)655-4065

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 (Date)	By (Signature of Treasurer or Assistant Treasurer)
01/23/2025	Jane Leiderman
01/23/2025	Lindsey Horvath (Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor)
	(Signature of Controlling Officeholder, Candidate, State Measure Proponent)
	(Signature of Controlling Officeholder, Candidate, State Measure Proponent)

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Recipient Committee Campaign Statement Cover Page — Part 2

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Lindsey Horvath

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

County Supervisor: LA County District 3

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP
	West Hollywood	CA	90046

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
Lindsey Horvath for Supervisor 2022	1437724

NAME OF TREASURER	CONTROLLED COMMITTEE?
Jane Leiderman	☒ YES ☐ NO

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Encino	CA	91436	(323)655-4065

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.

Statement covers period
from 07/01/2024
through 12/31/2024

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Lindsey Horvath For Supervisor 2022 Officeholder Account

I.D. NUMBER

1457026

Contributions Received

		Column A (TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)	Column B (CALENDAR YEAR TOTAL TO DATE)
1. Monetary Contributions	*Schedule A, Line 3*	$ 9,353.00	$ 77,402.00
2. Loans Received	*Schedule B, Line 3*	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS	*Add Lines 1 + 2*	$ 9,353.00	$ 77,402.00
4. Nonmonetary Contributions	*Schedule C, Line 3*	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED	*Add Lines 3 + 4*	$ 9,353.00	$ 77,402.00

Expenditures Made

6. Payments Made	*Schedule E, Line 4*	$ 40,892.56	$ 78,916.22
7. Loans Made	*Schedule H, Line 3*	0.00	0.00
8. SUBTOTAL CASH PAYMENTS	*Add Lines 6 + 7*	$ 40,892.56	$ 78,916.22
9. Accrued Expenses (Unpaid Bills)	*Schedule F, Line 3*	0.00	0.00
10. Nonmonetary Adjustment	*Schedule C, Line 3*	0.00	0.00
11. TOTAL EXPENDITURES MADE	*Add Lines 8 + 9 + 10*	$ 40,892.56	$ 78,916.22

Current Cash Statement

12. Beginning Cash Balance	*Previous Summary Page, Line 16*	$ 82,718.80
13. Cash Receipts	*Column A, Line 3 above*	9,353.00
14. Miscellaneous Increases to Cash	*Schedule I, Line 4*	0.00
15. Cash Payments	*Column A, Line 8 above*	40,892.56
16. **ENDING CASH BALANCE**	*Add Lines 12 + 13 + 14, then subtract Line 15*	$ 51,179.24

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

17. LOAN GUARANTEES RECEIVED — *Schedule B, Part 2* — $ 0.00

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*	$ 0.00

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	$	$
21. Expenditures Made	$	$

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.

Statement covers period
from 07/01/2024
through 12/31/2024

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Lindsey Horvath For Supervisor 2022 Officeholder Account

I.D. NUMBER

1457026

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)
07/02/2024	Christian Bender San Francisco, CA 94123	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Founder Golden LLC	1,000.00	1,000.00	
07/05/2024	Cambria Company LLC Le Sueur, MN 56058	[ ] IND [ ] COM [X] OTH [ ] PTY [ ] SCC		249.00	249.00	
10/28/2024	Continental Development Corp. El Segundo, CA 90245	[ ] IND [ ] COM [X] OTH [ ] PTY [ ] SCC		1,500.00	1,500.00	
07/01/2024	Ron Galperin Beverly Hills, CA 90210	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Controller City of Los Angeles	200.00	200.00	
12/31/2024	Madelyn Glickfeld Malibu, CA 90265	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Administrator UCLA	1,500.00	1,500.00	
			SUBTOTAL $	4,449.00		

Schedule A Summary

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) ..... $ 9,299.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 54.00
3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL $** 9,353.00

*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 A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
from 07/01/2024
through 12/31/2024

CALIFORNIA FORM 460

NAME OF FILER
Lindsey Horvath For Supervisor 2022 Officeholder Account

I.D. NUMBER
1457026

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)
12/30/2024	Ira Handelman Woodland Hills, CA 91364	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Consultant Handelman Consulting	250.00	1,250.00	
07/01/2024	Kirsten Howland Rancho Palos Verdes, CA 90275	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Teacher Peninsula Montessori School	1,000.00	1,000.00	
12/30/2024	Deborah Kallick Los Angeles, CA 90049	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Unemployed N.A.	250.00	250.00	
07/10/2024	Los Angeles County Lifeguard Association (ID# 930184) Sacramento, CA 95814	[ ] IND [ ] COM [ ] OTH [ ] PTY [X] SCC		1,500.00	1,500.00	
08/26/2024	Molina Healthcare Inc. Sacramento, CA 95815	[ ] IND [ ] COM [X] OTH [ ] PTY [ ] SCC		1,000.00	1,000.00	
			SUBTOTAL $	4,000.00		

*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 A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded to whole dollars.

Statement covers period
from 07/01/2024
through 12/31/2024

CALIFORNIA FORM 460

NAME OF FILER
Lindsey Horvath For Supervisor 2022 Officeholder Account

I.D. NUMBER
1457026

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)
07/24/2024	Robert Sears Los Angeles, CA 90019	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Executive Director Williams Institute	100.00	100.00	
12/31/2024	Michael Weinstein Los Angeles, CA 90068	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Chief AIDS Healthcare Foundation	500.00	1,500.00	
12/30/2024	Jane Wishon Los Angeles, CA 90064	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Retired n/a	250.00	500.00	
		[ ] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC				
		[ ] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC				
			SUBTOTAL $	850.00		

*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

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Schedule D
Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees

Amounts may be rounded to whole dollars.

SCHEDULE D

Statement covers period
from 07/01/2024
through 12/31/2024

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Lindsey Horvath For Supervisor 2022 Officeholder Account

I.D. NUMBER

1457026

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)
10/04/2024	Asian Democrats of Los Angeles County [X] Support [ ] Oppose	[X] Monetary Contribution [ ] Nonmonetary Contribution [ ] Independent Expenditure		1,000.00	1,000.00	
10/04/2024	Los Angeles County Democratic Party [X] Support [ ] Oppose	[X] Monetary Contribution [ ] Nonmonetary Contribution [ ] Independent Expenditure		1,000.00	1,000.00	
	[ ] Support [ ] Oppose	[ ] Monetary Contribution [ ] Nonmonetary Contribution [ ] Independent Expenditure				
			SUBTOTAL $	2,000.00		

Schedule D Summary

1. Contributions and independent expenditures made this period of $100 or more. (Include all Schedule D subtotals.) ..... $ 2,000.00

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.) ..... **TOTAL $** 2,000.00

Schedule E
Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 07/01/2024
through 12/31/2024

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Lindsey Horvath For Supervisor 2022 Officeholder Account

I.D. NUMBER

1457026

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
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
Asian Democrats of Los Angeles County (ID# 1448626) Los Angeles, CA 90032	CTB			1,000.00
Asian Democrats of Los Angeles County (ID# 1448626) Los Angeles, CA 90032	CVC			500.00
Avance Democratic Club San Pedro, CA 90733	CVC			500.00

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

SUBTOTAL $ 2,000.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 40,830.74
2. Unitemized payments made this period of under $100 ..... $ 61.82
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 $** 40,892.56

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Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 07/01/2024
through 12/31/2024

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Lindsey Horvath For Supervisor 2022 Officeholder Account

I.D. NUMBER

1457026

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
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
Democrats for Israel - Los Angeles Van Nuys, CA 91409	CVC		500.00
Lindsey Horvath West Hollywood, CA 90046	OFC		3,422.61
Lindsey Horvath West Hollywood, CA 90046		Paris 2024 Games	2,082.35
Lindsey Horvath West Hollywood, CA 90046	OFC		831.71
Initiate Justice Action Los Angeles, CA 90014	CVC		500.00

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

SUBTOTAL $ 7,336.67

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 07/01/2024
through 12/31/2024

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Lindsey Horvath For Supervisor 2022 Officeholder Account

I.D. NUMBER

1457026

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
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
Leiderman & Associates Inc. Encino, CA 91436	PRO			9,000.00
Leiderman & Associates Inc. Encino, CA 91436	PRO			2,506.57
Los Angeles County Democratic Party (ID# 744554) Los Angeles, CA 90017	CVC			2,900.00
Los Angeles County Democratic Party (ID# 744554) Los Angeles, CA 90017	CTB			1,000.00
Los Angeles County Democratic Party (ID# 744554) Los Angeles, CA 90017	CVC			2,500.00

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

SUBTOTAL $ 17,906.57

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 07/01/2024
through 12/31/2024

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Lindsey Horvath For Supervisor 2022 Officeholder Account

I.D. NUMBER

1457026

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
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
Los Angeles County Young Democrats (ID# 921188) Oakland, CA 94607	CVC			1,000.00
Los Angeles County Young Democrats (ID# 921188) Oakland, CA 94607	CVC			750.00
Nossaman LLP Los Angeles, CA 90017	PRO			5,365.00
Nossaman LLP Los Angeles, CA 90017	PRO			362.50
Nossaman LLP Los Angeles, CA 90017	PRO			2,102.50

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

SUBTOTAL $ 9,580.00

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 07/01/2024
through 12/31/2024

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Lindsey Horvath For Supervisor 2022 Officeholder Account

I.D. NUMBER

1457026

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
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
Nossaman LLP Los Angeles, CA 90017	CNS		507.50
Pilipino American Los Angeles Democrats Los Angeles, CA 90006	CVC		500.00
Reproductive Freedom for All California Privacy PAC Sacramento, CA 95814	CVC		1,000.00
Fredric Rosen Los Angeles, CA 90077	RFD	Return of 06/15/2024 Contribution	1,500.00
San Fernando Valley Young Democrats (ID# 1274758) Van Nuys, CA 91409	CVC		500.00

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

SUBTOTAL $ 4,007.50

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 07/01/2024
through 12/31/2024

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Lindsey Horvath For Supervisor 2022 Officeholder Account

I.D. NUMBER
1457026

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Lindsey Horvath

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
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
La Fontaine de Mars Paris France, 75007			8/10/2024 - Third District Dinner	1,106.44
Paris 2024-COJOP Association - Immeuble Pulse Saint Denis Siret,			12 Staff Tickets for the Paris 2024 Games	2,082.35
Paseo Pasadena, CA 91101			9/19/2024-Staff Dinner-L.Horvath & 5 people	681.50
RL Restaurant Chicago, IL 60611			8/21/2024 - DNC Convention Lunch	995.13

Attach additional information on appropriately labeled continuation sheets.

TOTAL* $ 4,865.42

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

Amounts may be rounded to whole dollars.

Statement covers period
from 07/01/2024
through 12/31/2024

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Lindsey Horvath For Supervisor 2022 Officeholder Account

I.D. NUMBER
1457026

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Lindsey Horvath

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
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
San Vicente Bungalows Restaurant West Hollywood, CA 90069	MTG	6/21/2024-Dinner Mtg.- L.Horvath & 4 people	531.21

Attach additional information on appropriately labeled continuation sheets.

TOTAL* $ 531.21

** 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.*

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