Statement Coute Sections 84200-84216.5 Statement covers period from 01/01/2022 through 06/10/2022 through	Desirient Committee				COVER PAGE
Statement covers period from01/01/2022 through06/39/2022 T	Campaign Statement Cover Page				
State Candidate Election Committee State Candidate Election Committee State Candidate Election Committee State Election Committee State Election Committee State Election Committee State Election Committee Special Odd-Year Report Speci		from01/01/2022		18:56:15 P . Filing ID:	<u> </u>
State Candidate Election Committee Recall	I. Type of Recipient Committee: All Committees - Co	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:	<u> </u>	
A COMMITTEE NAME (OR CANDIDATES NAME IF NO COMMITTEE) Recall of Redondo Beach City Council member 2ein Obagi, Jr., Sponsored by South Cord Managment LLC Sponsored by South Cord Managment LLC STATE ZIP CODE AREA CODE/PHONE Los Angeles CA 9017 (213)452-6565 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX CITY STATE ZIP CODE AREA CODE/PHONE LOS Angeles CA 9017 (213)452-6565 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 CITY STATE ZIP CODE AREA CODE/PHONE OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS 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 08/01/2022 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	☐ Officeholder, Candidate Controlled Committee ☐ State Candidate Election Committee ☐ Recall (Also Complete Part 5) ☐ General Purpose Committee ☐ Sponsored ☐ Small Contributor Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te	Special C Supplement Statement	dd-Year Report ental Preelection
Recall of Redondo Beach City Councilmember Zein Obagi, Jr., STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE AREA CODE/PHONE Los Angeles CA 90017 (213) 452-6565 MAILING ADDRESS CITY STATE ZIP CODE AREA CODE/PHONE LOS Angeles CA 90017 (213) 452-6565 MAILING ADDRESS CITY STATE ZIP CODE AREA CODE/PHONE LOS Angeles CA 90017 (213) 452-6565 MAILING ADDRESS CITY STATE ZIP CODE AREA CODE/PHONE OPTIONAL: FAX / E-MAIL ADDRESS CITY STATE ZIP CODE AREA CODE/PHONE OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS 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 penally of perjury under the laws of the State of California that the foregoing is true and correct. Executed on 08/01/2022 Date By Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponeor Executed on Date By Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date Signature of Controlling Officeholder, Candidate, State Measure Proponent	3. Committee Information		Treasurer(s)		
STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE AREA CODE/PHONE Log Angeles CA 90017 (213) 452-6565 MAILING ADDRESS MAILING ADDRESS MAILING ADDRESS CITY STATE ZIP CODE AREA CODE/PHONE Log Angeles CA 90017 (213) 452-6565 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX CITY STATE ZIP CODE AREA CODE/PHONE OPTIONAL: FAX / E-MAIL ADDRESS 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 08/01/2022 Date By Timothy Lewis Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date By Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date By Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date By Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date By Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date By Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date By Signature of Controlling Officeholder, Candidate, State Measure Proponent			NAME OF TREASURER		
Los Angeles CA 90017 (213) 452-6565 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 Description of Date By Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date Date By Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date By Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date By Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date Signature of Controlling Officeholder, Candidate, State Measure Proponent		ein Obagi, Jr.,	-		
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 CITY STATE ZIP CODE AREA CODE/PHONE OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS 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 preparing the state of California that the foregoing is true and correct. Executed on 08/01/2022 Date Executed on Date Date Date Date By Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date Date Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date Date Date Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date Date Date Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date Date Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date Date Date Signature of Controlling Officeholder, Candidate, State Measure Proponent	STREET ADDRESS (NO P.O. BOX)				AREA CODE/PHONE (213)452-6565
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX MAILING ADDRESS CITY STATE ZIP CODE AREA CODE/PHONE OPTIONAL: FAX / E-MAIL ADDRESS 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 08/01/2022 Date By Timothy Lewis Signature of Treasurer or Assistant Treasurer Executed on Date By Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date By Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date By Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date Date By Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on Date Date Signature of Controlling Officeholder, Candidate, State Measure Proponent	CITY STATE ZIP CO	DE AREA CODE/PHONE		RER, IF ANY	<u> </u>
CITY STATE ZIP CODE AREA CODE/PHONE OPTIONAL: FAX / E-MAIL ADDRESS In the part of the state of controlling of the state		<u> </u>			
OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS	MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. B	OX	MAILING ADDRESS		
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 Timothy Lewis	CITY STATE ZIP CO	DE AREA CODE/PHONE	CITY	STATE ZIP CODE	AREA CODE/PHONE
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	OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDR	RESS	,
Executed on	I have used all reasonable diligence in preparing and reviewing		owledge the information contained her	rein and in the attached schedules is	true and complete. I certify
Date 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 Executed on		ByTimothy Le	wis Signature of Treasurer or Assistant 7	Treasurer	-
Date Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on	Executed on	BySignature of Co	ontrolling Officeholder, Candidate, State Measure Pro	ponent or Responsible Officer of Sponsor	-
Date Signature of Controlling Officeholder Candidate State Measure Proponent	Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, St	tate Measure Proponent	-
	Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, St	ate Measure Proponent	- FPPC Form 460 (Jan/2016)

Recipient Committee Campaign Statement Cover Page — Part 2

	COVER	PAG	E - PART	2
	FORNIA DRM	4	160	
Page _	2	of _	17	

Officeholder or Candidate Controlled Committee		6.	Primarily Formed Ball	ot Measure	Committee)	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE Recall of Redondo Bea	ch City Cou	ncilmember	Zein Obaji,	Jr.
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUM	BER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTI	ON .edondo Beac	IΓ	SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY	STATE ZIP		Identify the controlling of	, ÷		·	proponent, if any
			NAME OF OFFICEHOLDER, CA	ndidate, or Pi	ROPONENT		
Related Committees Not Included in this Statement included in this statement that are controlled by you or are contributions or make expenditures on behalf of your candidacy.	orimarily formed to receive		OFFICE SOUGHT OR HELD			DISTRICT NO.	IF ANY
COMMITTEE NAME I.D. N	IUMBER						
	TROLLED COMMITTEE? YES NO	7.	Primarily Formed Car officeholder(s) or candidate(
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	IGHT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP CODE	AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	IGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME I.D. N	IUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	IGHT OR HELD	SUPPORT OPPOSE
	TROLLED COMMITTEE? YES NO		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	IGHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)							
CITY STATE ZIP CODE	AREA CODE/PHONE		Atta	nch continuati	on sheets if	necessary	

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

		SUMMARY PAGE
Statem	ent covers period	CALIFORNIA 460
from	01/01/2022	FORM 400
through _	06/30/2022	Page3 of17
		I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Recall of Redondo Beach City Councilmember Zein Obagi, Jr., Sponsored by South Cord Managment LLC

1447050

Recall of Redondo Beach City Councilmember Zein Obagi, Jr., S	pons	sored by South Cord	Man	nagment LLC		1447050
Contributions Received		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTALTO DATE	Calendar Year Sum Running in Both the General Elections	mary for Candidates State Primary and
1. Monetary Contributions Schedule A, Line 3	\$	126,354.73	\$	126,354.73		rough 6/20 7/4 to Data
2. Loans Received Schedule B, Line 3		0.00		0.00	1/1 th	rough 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	126,354.73	\$	126,354.73	20. Contributions Received \$	\$
4. Nonmonetary Contributions		182,763.88		182,763.88	21. Expenditures	•
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	309,118.61	\$	309,118.61	Made \$	\$
Expenditures Made					Expenditure Limit S	Summary for State
6. Payments Made Schedule E, Line 4	\$	109,324.69	\$	109,324.69	Candidates	
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulativ	Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	109,324.69	\$	109,324.69		Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3				3,778.83	Date of Election	Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3		182,763.88		182,763.88	(mm/dd/yy)	
11. TOTAL EXPENDITURES MADE	\$	295,867.40	\$	295,867.40	/	_ \$
Current Cash Statement					/	_ \$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	0.00	То	calculate Column B, add		
13. Cash Receipts		126,354.73		nounts in Column A to the rresponding amounts		1 199
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	om Column B of your last	reported in Column B.	ay be different from amounts
15. Cash Payments Column A, Line 8 above		109,324.69		port. Some amounts in blumn A may be negative		
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	17,030.04	fig	ures that should be btracted from previous		
If this is a termination statement, Line 16 must be zero.			ре	riod amounts. If this is e first report being filed		
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for	r this calendar year, only rry over the amounts		
Cash Equivalents and Outstanding Debts			fro	om Lines 2, 7, and 9 (if my).		
18. Cash Equivalents See instructions on reverse	\$	0.00				
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	3,778.83				
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	Þ	3,770.03				ERBC Advisor as

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

Schedule Monetary	A Contributions Received		s may be rounded whole dollars.	Statement cov	•		SCHEDULE ORNIA 460 RM
SEE INSTRUCTION	DNS ON REVERSE			through06/30/2	022	Page _	4 of <u>17</u>
NAME OF FILER Recall of Re	edondo Beach City Councilmember Zein Obagi, Jr.,	Sponsored by	South Cord Managment LLC			I.D. NUN 144705	
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 D CALENDAR YEA (JAN. 1 - DEC. 3	AR	PER ELECTION TO DATE (IF REQUIRED)
04/18/2022	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ☑OTH □PTY □SCC		19,226.33	309,11	8.61	
05/09/2022	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ☑OTH □PTY □SCC		18,449.50	309,11	8.61	
05/16/2022	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ☑OTH □PTY □SCC		20,000.00	309,11	8.61	
05/20/2022	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ☑OTH □PTY □SCC		8,678.90	309,11	8.61	
06/01/2022	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ☑OTH □PTY □SCC		20,000.00	309,11	8.61	

SUBTOTAL\$

86,354.73

Schedule A Summary

Amount received this period – itemized monetary contributions.
 (Include all Schedule A subtotals.)

 Amount received this period – unitemized monetary contributions of less than \$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

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

SCHEDULE A (CONT.)

wonetary	Contributions Received	to whole o		from01/01/	•	CALIF FC	ORM 460
				through 06/30/	2022	Page _	5 of 17
IAME OF FILER						I.D. NUI	MBER
Recall of Rec	dondo Beach City Councilmember Zein Obagi, Jr., S	sponsored by	South Cord Managment LLC			14470	50
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 CALENDAR Y (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)
06/06/2022	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	☐IND ☐COM ⓒOTH ☐ PTY ☐SCC		40,000.00	309,1	118.61	
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					
			SUBTOTAL	\$ 40,000.00			

*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 C **Nonmonetary Contributions Received**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

	SCHEDULE C
Statement covers period	CALIFORNIA 460
from01/01/2022	FORM 40U
through 06/30/2022	Page6 of17
	I.D. NUMBER
	1447050

Recall of	Redondo Beach City Councilmember Zein	Obagi, Jr., Sp	onsored by South Cord Ma	anagment LLC		1447050	
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)
02/10/2022	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ☑OTH □PTY □SCC		WEB	800.00	309,118.61	
02/10/2022	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ⊠OTH □PTY □SCC		PRT	1,950.00	309,118.61	
03/30/2022	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ☑OTH □PTY □SCC		PET	854.33	309,118.61	
04/12/2022	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ⊠OTH □PTY □SCC		WEB	2,150.00	309,118.61	
Attach ad	ditional information on appropriately lab	eled continuat	ion sheets	SUBTOTAL	5,754.33		

Attach additional information on appropriately labeled continuation sheets.

SUBIDIAL \$

182,763.88

Schedule C Summary

1.	Amount received this period – itemized nonmonetary contributions.		
	(Include all Schedule C subtotals.)	. \$	182,763.88
2	Amount received this period – unitemized nonmonetary contributions of less than \$100		0.00
	•	Ψ	
- 3	Total nonmonetary contributions received this period		

*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 may be rounded to whole dollars.

		SCHEDULE C (CONT.)
State	ement covers period	CALIFORNIA 160
from	01/01/2022	FORM 40U
	06/30/2022	Page7 of17
		I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Recall of	Redondo Beach City Councilmember Zein	Obagi, Jr., Sp	onsored by South Cord Ma	anagment LLC		1447050	
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)
	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ☑OTH □PTY □SCC		LIT	4,250.00	309,118.61	
	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ☑OTH □PTY □SCC		PRT	950.00	309,118.61	
	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ☑OTH □PTY □SCC		WEB	250.00	309,118.61	
	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ☑OTH □PTY □SCC		LIT	2,353.90	309,118.61	
	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ⊠OTH □PTY □SCC		LIT	5,125.00	309,118.61	
Attach add	ditional information on appropriately lab	eled continuati	ion sheets.	SUBTOTAL \$	12,928.90		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

			SCH	DUL	EC(CO	NT.
Statement	covers period	CALIF	ORN	IIA	16	lacksquare
from0	L/01/2022	FC	ORM		40	U
through	5/30/2022	Page _	8	_ of _	17	
-		I.D. NUM	IBER			
		144705	50			

Recall of Redondo Beach City Councilmember Zein Obagi, Jr., Sponsored by South Cord Managment LLC

Recall of	_		IF AN INDIVIDUAL ENTED		AMOUNT/	CUMULATIVE TO	
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	DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ⊠OTH □PTY □SCC		PRO	6,499.50	309,118.61	
	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ⊠OTH □PTY □SCC		POS	239.74	309,118.61	
	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ⊠OTH □PTY □SCC		WEB	475.00	309,118.61	
06/01/2022	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ⊠OTH □PTY □SCC		OFC	4,485.60	309,118.61	
	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ⊠OTH □PTY □SCC		PET	415.15	309,118.61	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

		SCHEDULE C (CONT.)
State	ement covers period	CALIFORNIA ACO
from	01/01/2022	FORM 40U
	06/30/2022	0 15
through	06/30/2022	Page9 of17
		I.D. NUMBER

Redondo Beach City Councilmember Zein	Obagi, Jr., Sp	onsored by South Cord Ma	anagment LLC		1447050	
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)
South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ☑OTH □PTY □SCC		TRS	102.00	309,118.61	
South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ☑OTH □PTY □SCC		LIT	8,003.29	309,118.61	
South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ☑OTH □PTY □SCC		TRS	117.00	309,118.61	
South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ☑OTH □PTY □SCC		OFC	1,117.01	309,118.61	
South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ⊠OTH □PTY □SCC		PRO	1,817.50	309,118.61	
	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE * South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 COM SOUTH PTY SCC South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 COM SOTH PTY SCC South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 COM SOTH PTY SCC South Cord Management LLC (Elliot IND COM SOTH PTY SCC South Cord Management LLC (Elliot IND COM SOTH PTY SCC South Cord Management LLC (Elliot IND COM SOTH PTY SCC South Cord Management LLC (Elliot IND COM SOTH PTY SCC South Cord Management LLC (Elliot IND COM SOTH PTY SCC South Cord Management LLC (Elliot IND COM SOTH PTY SCC South Cord Management LLC (Elliot IND COM SOTH PTY SCC South Cord Management LLC (Elliot IND COM SOTH PTY SCC South Cord Management LLC (Elliot IND COM SOTH PTY SCC South Cord Management LLC (Elliot IND COM SOTH PTY SCC	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	CONTRIBUTOR CODE * CONTRIBUTOR CODE * CODE * CODE * CONTRIBUTOR CODE * CO	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (UF COMMITTE, ALSO ENTER ID. NUMBER) South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213 South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	FULL NAME. STREET ADDRESS AND ZIP CODE TOTAL TREE TO CODE TO C

Attach additional information on appropriately labeled continuation sheets.

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

	SCHEDULE C (CONT.)
Statement covers period	CALIFORNIA 460
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ecall of	Redondo Beach City Councilmember Zein	Obagi, Jr., Sp	onsored by South Cord Ma	anagment LLC		1447050	
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)
5/22/2022	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ⊠OTH □PTY □SCC		OFC	472.05	309,118.61	
5/22/2022	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ⊠OTH □PTY □SCC		TRS	6,210.71	309,118.61	
5/22/2022	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ⊠OTH □PTY □SCC		SAL	52,223.25	309,118.61	
/22/2022	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ⊠OTH □PTY □SCC		SAL	26,070.00	309,118.61	
5/22/2022	South Cord Management LLC (Elliot Lewis) Long Beach, CA 90803-4213	□IND □COM ⊠OTH □PTY □SCC		SAL	11,369.25	309,118.61	

Attach additional information on appropriately labeled continuation sheets.

Amounts may be rounded to whole dollars.

		SCHEDULE C (CONT.)
State	ement covers period	CALIFORNIA 460
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SEE INSTRUCTIONS ON REVERSE NAME OF FILER Recall of Redondo Beach City Councilmember Zein Obagi, Jr., Sponsored by South Cord Managment LLC 1447050 CUMULATIVE TO IF AN INDIVIDUAL, ENTER AMOUNT/ PER ELECTION FULL NAME, STREET ADDRESS AND CONTRIBUTOR **DESCRIPTION OF** DATE DATE OCCUPATION AND EMPLOYER FAIR MARKET TO DATE ZIP CODE OF CONTRIBUTOR CODE * **GOODS OR SERVICES** CALENDAR YEAR **RECEIVED** (IF SELF-EMPLOYED, ENTER VALUE (IF REQUIRED) (IF COMMITTEE, ALSO ENTER I.D. NUMBER) (JAN 1 - DEC 31) NAME OF BUSINESS) SAL 06/22/2022 South Cord Management LLC (Elliot 34,353.40 309,118.61 \square IND □ COM Long Beach, CA 90803-4213 X OTH \Box PTY □SCC 06/30/2022 South Cord Management LLC (Elliot 410.20 309,118.61 Text Messaging □ COM Long Beach, CA 90803-4213 X OTH □ PTY SCC 06/30/2022 South Cord Management LLC (Elliot SAL 9,700.00 309,118.61 \square IND COM Long Beach, CA 90803-4213 X OTH □PTY □SCC \square OTH □ PTY □ SCC \Box OTH □PTY □SCC **SUBTOTAL \$** Attach additional information on appropriately labeled continuation sheets. 44,463.60

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

Schedule E
Payments Made

Amounts may be rounded to whole dollars.

		SCHEDULE E
	Statement covers period	CALIFORNIA 460
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	through06/30/2022	Page of
_		I.D. NUMBER
		1447050

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Recall of Redondo Beach City Councilmember Zein Obagi, Jr., Sponsored by South Cord Managment LLC

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)
LII	campaign incrature and mailings	1 131	print add	VVLD	information technology costs (internet, e mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OF	२	DESCRIPTION OF PAYMENT	AMOUNT PAID
Ford Printing & Mailing Baldwin Park, CA 91706-1323	LIT				2,353.90
Kaufman Legal Group Los Angeles, CA 90017-5864	PRO				1,817.50
The Easy Reader Hermosa Beach, CA 90254-3508	PRT				1,950.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTAL\$	6,121.40
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Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)\$	109,324.69
2. Unitemized payments made this period of under \$100\$_	0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)\$	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	109,324.69

Schedule E	
(Continuation Sheet))
Payments Made	

Amounts may be rounded to whole dollars.

Statement covers period	CALIFORNIA 160
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	I.D. NUMBER
	1447050

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Recall of Redondo Beach City Councilmember Zein Obagi, Jr., Sponsored by South Cord Managment LLC

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 MTG meetings and appearances campaign consultants RFD returned contributions CNS CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries PET petition circulating CVC civic donations TEL t.v. or cable airtime and production costs candidate filing/ballot fees FIL PHO phone banks TRC candidate travel, lodging, and meals

polling and survey research staff/spouse travel, lodging, and meals fundraising events independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor

professional services (legal, accounting) VOT voter registration LEG legal defense WEB information technology costs (internet, e-mail)

campaign literature and mailings PRT print ads

Campaign illerature and mailings	PRI pilit aus		WEB IIIIOITTIAtion technology costs (Internet, e-mail)					
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBE	R) CO	DE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID				
The Monaco Group Santa Ana, CA 92705-4323	L	IT		2,674.66				
The Monaco Group Santa Ana, CA 92705-4323	L	IT		1,114.46				
The Monaco Group Santa Ana, CA 92705-4323	Pé	OS		100.00				
The Monaco Group Santa Ana, CA 92705-4323	Pe	OS		2,620.44				
The Monaco Group Santa Ana, CA 92705-4323	Po	os		1,246.32				
Santa Ana, CA 92705-4323								

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

SUBTOTAL \$

7,755.88

Schedule E	
(Continuation Sheet))
Payments Made	

Amounts may be rounded to whole dollars.

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Recall of Redondo Beach City Councilmember Zein Obagi, Jr., Sponsored by South Cord Managment LLC

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 MTG meetings and appearances campaign consultants RFD returned contributions CNS CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries PET petition circulating CVC civic donations TEL t.v. or cable airtime and production costs candidate filing/ballot fees FIL PHO phone banks TRC candidate travel, lodging, and meals

The printer statistics and the state of the same candidate/sponsor will be stated as the state of the same candidate/sponsor will be stated as the state of the same candidate/sponsor will be stated as the state of the same candidate/sponsor will be stated as the state of the same candidate/sponsor will be stated as the state of the same candidate/sponsor will be stated as the state of the same candidate/sponsor will be stated as the state of the same candidate/sponsor will be stated as the state of the same candidate/sponsor will be stated as the state of the same candidate/sponsor will be stated as the state of the same candidate/sponsor will be stated as the state of the same candidate/sponsor will be stated as the state of the same candidate/sponsor will be stated as the state of the same candidate/sponsor will be stated as the state of the same candidate/sponsor will be stated as the state of the same candidate/sponsor will be stated as the stated as

LEG legal defense PRO professional services (legal, accounting) VOT voter registration

T 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
The Monaco Group Santa Ana, CA 92705-4323	LIT		247.41
Torres Consulting Downey, CA 90240-2021	CNS		12,000.00
Torres Consulting Downey, CA 90240-2021	CNS		10,000.00
Torres Consulting Downey, CA 90240-2021	CNS		20,000.00
Torres Consulting Downey, CA 90240-2021	CNS		11,670.00

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 53,917.41

Schedule E	
(Continuation Sheet))
Payments Made	

Amounts may be rounded to whole dollars.

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		1447050

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Recall of Redondo Beach City Councilmember Zein Obagi, Jr., Sponsored by South Cord Managment LLC

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

campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs campaign consultants CNS 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 polling and survey research staff/spouse travel, lodging, and meals fundraising events POL TRS

IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services

LEG legal defense PRO professional services (legal, accounting)

TSF transfer between committees of the same candidate/sponsor VOT voter registration

LIT campaign literature and mailings PRT print ads WE

WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE CODE OR **DESCRIPTION OF PAYMENT** AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Torres Consulting CNS 8,330.00 Downey, CA 90240-2021 Torres Consulting CNS 20,000.00 Downey, CA 90240-2021 Valencia Marketing PRT 6,400.00 Whittier, CA 90605-1521 PRT Valencia Marketing 6,800.00 Whittier, CA 90605-1521

SUBTOTAL \$

41,530.00

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

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

Amounts may be rounded to whole dollars.

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Recall of Redondo Beach City Councilmember Zein Obagi, Jr., Sponsored by South Cord Managment LLC

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 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	3,778.83	0.00	3,778.83
* Payments that are contributions or independent expenditures must also be	SUBTOTAL S	0.00	2 770 02	0.00	2 770 02

summarized on Schedule D.

SUBTOTALS \$

0.00\$

3,778.83\$

0.00\$

3,778.83

Schedule F Summary

- 1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for
- 2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on
- 3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and

www.fppc.ca.gov

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

Amounts may be rounded to whole dollars.

	SCHEDULE G	
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Recall of Redondo Beach City Councilmember Zein Obagi, Jr., Sponsored by South Cord Managment LLC

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Monaco Group

CODES: If one of the following codes accurate	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 PET petition circulating TEL t.v. or cable airtime and production costs CVC civic donations

candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research independent expenditure supporting/opposing others (explain)* transfer between committees of the same candidate/sponsor POS postage, delivery and messenger services TSF

LEG legal defense professional services (legal, accounting) LIT campaign literature and mailings PRT

VOT voter registration

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
United States Postal Service Hermosa Beach, CA 90254-8200	POS		2,620.44
United States Postal Service Hermosa Beach, CA 90254-8200	POS		1,246.32

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

3,866.76

^{*} 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.