

**Recipient Committee  
Campaign Statement  
Cover Page**

10/27/22 EX

Date Stamp LOS ANGELES COU	CALIFORNIA FORM <b>460</b>
2022 OCT 28 AM 11:49	Page 1 of 10
CAMPAIGN FINANCE	
For Official Use Only	

<b>Statement covers period</b> from <u>09/25/2022</u> through <u>10/22/2022</u>	<b>Date of Election if applicable</b> <u>11/06/2018</u> (Month, Day, Year)
---------------------------------------------------------------------------------------	----------------------------------------------------------------------------------

**1. Type of Recipient Committee**

- |                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee<br><input checked="" type="radio"/> State Candidate Election Committee<br><input type="radio"/> Recall<br><input type="checkbox"/> General Purpose Committee<br><input type="radio"/> Sponsored<br><input type="radio"/> Small Contributor Committee<br><input type="radio"/> Political Party/Central Committee | <input type="checkbox"/> Primarily Formed Ballot Measure Committee<br><input type="radio"/> Controlled<br><input type="radio"/> Sponsored<br><input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**2. Type of Statement**

- |                                                                                                                                                                                                      |                                                                                                                                                                                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Pre-election Statement<br><input type="checkbox"/> Semi-Annual Statement<br><input type="checkbox"/> Termination Statement<br><input type="checkbox"/> Amendment | <input type="checkbox"/> Quarterly Statement<br><input type="checkbox"/> Special Odd-Year Statement<br><input type="checkbox"/> Supplemental Pre-election Statement - Attach Form 495 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**3. Committee Information**

I.D. Number 1367374

COMMITTEE NAME  
Scott Houston For Director West Basin 2022

**Treasurer(s)**

NAME OF TREASURER  
Jane Leiderman

STREET ADDRESS

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

NAME OF ASSISTANT TREASURER, IF ANY

STREET ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

STREET ADDRESS (IF DIFFERENT)

CITY STATE ZIP CODE AREA CODE/PHONE  
Encino CA 91436 310/613-1632

MAILING ADDRESS (IF DIFFERENT)

CITY STATE ZIP CODE

OPTIONAL: FAX / E-MAIL ADDRESS

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 is true and complete. I certify under penalty of perjury it is correct.

Executed on <u>10/27/22</u>	By _____	OR RESPONSIBLE OFFICER OF SPONSOR
Executed on <u>10/25/2022</u>	By _____	
Executed on _____	By _____	
Executed on _____	By _____	

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

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

Statement covers period  
from 09/25/2022  
through 10/22/2022

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE  
Scott Houston

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)  
West Basin Municipal Water Dist - District 4 LA County

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP  
El Segundo CA 90245

**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 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 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	<input 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 OR 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

**Campaign Disclosure Statement  
Summary Page**

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	09/25/2022	
through	10/22/2022	
		Page 3 of 10

NAME OF FILER Scott Houston For Director West Basin 2022

I.D. NUMBER  
1367374

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
<b>Contributions Received</b>		
1. Monetary Contributions . . . . . <i>Schedule A, Line 3</i>	\$ 3,860.00	\$ 24,459.00
2. Loans Received . . . . . <i>Schedule B, Line 3</i>	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS . . . . . <i>Add Lines 1+2</i>	\$ 3,860.00	\$ 24,459.00
4. Nonmonetary Contributions . . . . . <i>Schedule C, Line 3</i>	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED . . . . . <i>Add Lines 3 + 4</i>	\$ 3,860.00	\$ 24,459.00

**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	\$ 7,900	\$ 16,559
21. Expenditures Made	\$ 6,167	\$ 38,225

	Column A	Column B
<b>Expenditures Made</b>		
6. Payments Made . . . . . <i>Schedule E, Line 4</i>	\$ 4,159.53	\$ 44,392.81
7. Loans Made . . . . . <i>Schedule H, Line 3</i>	0.00	0.00
8. SUBTOTAL CASH PAYMENTS . . . . . <i>Add Lines 6 + 7</i>	\$ 4,159.53	\$ 44,392.81
9. Accrued Expenses (Unpaid Bills) . . . . . <i>Schedule F, Line 3</i>	0.00	0.00
10. Nonmonetary Adjustment . . . . . <i>Schedule C, Line 3</i>	0.00	0.00
11. TOTAL EXPENDITURES MADE . . . . . <i>Add Lines 8 + 9 + 10</i>	\$ 4,159.53	\$ 44,392.81

**Expenditure Limit Summary  
for State Candidates**

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

\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

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

<b>Current Cash Statement</b>	
12. Beginning Cash Balance . . . . . <i>Previous Summary Page, Line 16</i>	\$ 51,571.87
13. Cash Receipts . . . . . <i>Column A, Line 3 above</i>	3,860.00
14. Miscellaneous Increases to Cash . . . . . <i>Schedule I, Line 4</i>	0.00
15. Cash Payments . . . . . <i>Column A, Line 8 above</i>	4,159.53
16. ENDING CASH BALANCE <i>Add Lines 12 + 13 + 14, then subtract Line 15</i>	\$ 51,272.34
17. LOAN GUARANTEES RECEIVED. . . . . <i>Schedule B, Part 2</i>	\$ 0.00

<b>Cash Equivalents and Outstanding Debts</b>	
18. Cash Equivalents . . . . .	\$ 0.00
19. Outstanding Debts. . . . . <i>Add Lines 2 + Line 9 in Column B above</i>	\$ 0.00

**Schedule A  
Monetary Contributions Received**

SCHEDULE A

Statement covers period from <u>09/25/2022</u> through <u>10/22/2022</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Scott Houston For Director West Basin 2022

I.D. NUMBER  
1367374

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/14/2022	Maria Barden  El Segundo, CA 90245	IND	UCLA Executive Assistant  UCLA Health	100.00	100.00	
10/12/2022	BizFed PAC  Sacramento, CA 95814	SCC	ID No. 1305594	250.00	250.00	
10/05/2022	Drew Boyles  El Segundo, CA 90245	IND	Entrepreneur  Endless Pursuit Corp	100.00	100.00	
10/18/2022	Lisa M Fimiani  Los Angeles, CA 90066	IND	Executive Director  Loyola Marymount University	100.00	100.00	

**SUBTOTAL \$ 550.00**

**Schedule A Summary**

1. Amount received this period - itemized contributions (Includes all Schedule A subtotals) .....	\$	3,425.00
2. Amount received this period - unitemized .....	\$	435.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page. Column A Line 1) .....	<b>TOTAL \$</b>	<b>3,860.00</b>

\*\* Contributor Codes  
IND - Individual  
COM - Recipient Committee (other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Statement covers period		<b>CALIFORNIA</b> <b>FORM 460</b>
from	09/25/2022	
through	10/22/2022	Page 5 of 10

NAME OF FILER Scott Houston For Director West Basin 2022

I.D. NUMBER  
1367374

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/17/2022	Aleen Houston  FULTON, KS 66138	IND	Retired  n/a	125.00	125.00	
09/27/2022	Robert Johnson  El Segundo, CA 90245	IND	Retired  n/a	250.00	250.00	
10/17/2022	LA League of Conservation Voters (LALCV)  Los Angeles, CA 90017	SCC	ID No. 810317	500.00	500.00	
10/03/2022	Andrew Lachman  Culver City, CA 90230	IND	Attorney  Lachman Law	100.00	100.00	

**SUBTOTAL \$** 975.00

\*\* Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Statement covers period from <u>09/25/2022</u> through <u>10/22/2022</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Scott Houston For Director West Basin 2022

I.D. NUMBER  
1367374

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/18/2022	Lyle R Maul  Manhattan Beach, CA 90266	IND	Investor  Pacsan Management Corp	250.00	250.00	
09/27/2022	Tindara Mollica  Culver City, CA 90232	IND	Retired  n/a	100.00	100.00	
09/29/2022	Mohsin Mortada  Laguna Niguel, CA 92677	IND	Consultant  IBI	250.00	250.00	
10/05/2022	David Vela  Montebello, CA 90640	IND	CEO  Velada Consulting	500.00	500.00	

**SUBTOTAL \$** 1,100.00

\*\* Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

Schedule A (Continuation Sheet)  
 Monetary Contributions Received

SCHEDULE A

Statement covers period		<b>CALIFORNIA</b> <b>FORM 460</b>
from	09/25/2022	
through	10/22/2022	Page 7 of 10

NAME OF FILER Scott Houston For Director West Basin 2022

I.D. NUMBER  
1367374

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/28/2022	Antoine Vuillermet  Montclair, NJ 07043	IND	Engineer  NAJE Consulting LLC	100.00	100.00	
09/27/2022	WEHO PAC  WEST HOLLYWOOD, CA 90046	COM	ID No. 1248664	500.00	500.00	
10/16/2022	Matthew Zimmerman  Anaheim, CA 92806	IND	Immigration Services Officer  US Immigration Services	100.00	400.00	
09/30/2022	Matthew Zimmerman  Anaheim, CA 92806	IND	Immigration Services Officer  US Immigration Services	100.00	400.00	

**SUBTOTAL \$**

800.00

\*\* Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	09/25/2022	
through	10/22/2022	Page 8 of 10

NAME OF FILER Scott Houston For Director West Basin 2022

I.D. NUMBER  
1367374

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)
10/07/2022	Joseph Rocha State Senator State District Office	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		250.00	250.00	250.00 (G22)
		<input checked="" type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE				

**SUBTOTAL \$ 250.00**

**Schedule D Summary**

1. Itemized contributions and independent expenditures made this period. ( Include all Schedule D subtotals. ) .....	\$ 250.00
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 \$	250.00



**Schedule E  
Payments Made**

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	09/25/2022	
through	10/22/2022	Page 9 of 10
NAME OF FILER Scott Houston For Director West Basin 2022		I.D. NUMBER 1367374

NAME OF FILER Scott Houston For Director West Basin 2022

**CODES:** If one of the following 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 production costs                            |
| FIL candidate filing / ballot fees                      | PHO phone banks                               | TRC candidate travel, lodging and meals                       |
| FND fundraising expenses                                | POL polling and survey research               | TRS staff/spouse travel, lodging and meals                    |
| IND independent expenditures supporting/opposing others | 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	CODE or	DESCRIPTION OF PAYMENT	AMOUNT PAID
Click & Pledge  Blacksburg, VA 24060	OFC		122.97
Continuing the Republican Revolution  Newport Beach, CA 92660 ID No: 598041	LIT		380.00
Leiderman & Associates Inc.  Encino, CA 91436	PRO		506.56
<b>SUBTOTAL \$</b>			<b>1,009.53</b>

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 4,159.53
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 Line 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	<b>TOTAL \$ 4,159.53</b>

**Schedule E (Continuation Sheet)  
Payments Made**

Statement covers period from <u>09/25/2022</u>	<b>CALIFORNIA FORM 460</b>
through <u>10/22/2022</u>	
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NAME OF FILER Scott Houston For Director West Basin 2022

I.D. NUMBER  
1367374

**CODES:** If one of the following 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 production costs                            |
| FIL candidate filing / ballot fees                      | PHO phone banks                               | TRC candidate travel, lodging and meals                       |
| FND fundraising expenses                                | POL polling and survey research               | TRS staff/spouse travel, lodging and meals                    |
| IND independent expenditures supporting/opposing others | 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	CODE or	DESCRIPTION OF PAYMENT	AMOUNT PAID
Joseph Rocha for Senate 2022  Los Angeles, CA 90017 ID No: 1443327	CTB		250.00
Voter Newsletter  Sherman Oaks, CA 91403	LIT		2,900.00

**SUBTOTAL \$** 3,150.00