Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)		x.	Date Stamp		FORM 460
(Government Good Cooling or 200 or 210.0)	Statement covers period from01/21/2024	Date of election if applicable: (Month, Day, Year)	074FEB 22 PH	D ₂	ge1 of11 For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through02/17/2024	03/05/2024	LE OF PARKE	1000	
O State Candidate Election Committee O Recall (Also Complete Part 5) General Purpose Committee O Sponsored O Small Contributor 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: \[\times \text{ Preelection Statement} \\ \times \text{ Semi-annual Statement} \\ \times \text{ Termination Statement} \\ \times \text{ Also file a Form 410 Te} \\ \times \text{ Amendment (Explain be} \\ \text{ Amendment (Explain be} \)		Suppleme	Statement id-Year Report ntal Preelection - Attach Form 495
3 Committee Intermation	D. NUMBER 1464337	Treasurer(s) NAME OF TREASURER Gary Crummitt MAILING ADDRESS 249 E. Ocean Blvd., #	STATE	ZIP CODE	AREA CODE/PHONE
CITY STATE ZIP CO Paramount CA 9072 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. B 249 E. Ocean Blvd., #670 CITY STATE ZIP CO Long Beach CA 9080 OPTIONAL: FAX / E-MAIL ADDRESS gary@crummittandassociates.com	DDE AREA CODE/PHONE	Long Beach NAME OF ASSISTANT TREASUR Brenda Olmos MAILING ADDRESS 249 E. Ocean Blvd., # CITY Long Beach OPTIONAL: FAX / E-MAIL ADDR	670 STATE CA	90802 ZIP CODE 90802	AREA CODE/PHONE (562) 983-0815
4. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of Californi Executed on	a that the foregoing is true and correct.	Signature of Treasurer or Assistant Strolling Officeholder, Candidate, State Measure Pro	Treasurer ponent or Responsible Officer o tate Measure Proponent		true and complete. I certify

COVER PAGE

Officeholder or Candidate Controlled Comr	nittee	6.	Primarily Formed Ballo	ot Measure Committe	e	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
Brenda Olmos				Lucionionion		
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	ICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTION		SUPPORT OPPOSE
City Council Member City of Paramount						
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE Z	IP	Identify the controlling offi	iceholder, candidate, or	state measure p	roponent, if any
249 E. Ocean Blvd., #670	ong Beach CA 90	802	NAME OF OFFICEHOLDER, CAN	IDIDATE, OR PROPONENT		
				,		
Related Committees Not Included in this St not included in this statement that are controlled by you contributions or make expenditures on behalf of your co	or are primarily formed to rec		OFFICE SOUGHT OR HELD		DISTRICT NO. II	FANY
COMMITTEE NAME	I.D. NUMBER					
	CONTROLLED COMMITTEE?	7,	Primarily Formed Can	didate/Officeholder (Committee Lis	t names of
NAME OF TREASURER	YES NO		officeholder(s) or candidate(s) for which this committee	is primarily form	ed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.		_	NAME OF OFFICEHOLDER OR C	CANDIDATE OFFICE SC	DUGHT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP	CODE AREA CODE/PH	ONE	NAME OF OFFICEHOLDER OR C	CANDIDATE OFFICE SO	OUGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR O	CANDIDATE OFFICE SO	OUGHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR O	CANDIDATE OFFICE SC	DUGHT OR HELD	☐ SUPPORT
	YES NO					OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	BOX)		<u> </u>			
CITY STATE ZIP	CODE AREA CODE/PH	ONE	Attac	ch continuation sheets i	f necessary	

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

Column A

TOTAL THIS PERIOD

(FROM ATTACHED SCHEDULES)

0.00

0.00

0.00

0.00

13,793.00

Stater	ment covers period	CALIFORNIA	460
m	01/21/2024	FORM	400

from	01/21/2024	- TOTAL		
through _	02/17/2024	Page3_	of _	11

SEE INSTRUCTIONS ON REVERSE

Contributions Received

Expenditures Made

NAME OF FILER

Brenda Olmos for Paramount City Council 2024

1. Monetary Contributions Schedule A, Line 3 \$ _____

5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 \$ _____13,793.00

8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ 6,046.49

2. Loans Received Schedule B. Line 3

4. Nonmonetary Contributions Schedule C, Line 3

10. Nonmonetary Adjustment Schedule C, Line 3

3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$

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

LD NUMBER

1464337

Made

Expenditure Limit Summary for State Candidates

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

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

SUMMARY PAGE

Current Cash Statement

12. Beginning Cash Balance Previous Summary Page, Line 16	\$	22,282.95
13. Cash Receipts Column A, Line 3 above	109	13,793.00
14. Miscellaneous Increases to Cash Schedule I, Line 4))*	0.00
15. Cash Payments	1.4	6,046.49
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$.	30,029.46
If this is a termination statement, Line 16 must be zero.		

17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ _____

18. Cash Equivalents See instructions on reverse \$ _____

19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$

Cash Equivalents and Outstanding Debts

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

To calculate Column B, add

Column B

CALENDARYEAR

TOTAL TO DATE

7,127.03

16,543.00

16,543.00

16,543.00

0.00

0.00

0.00

0.00

7,127.03

21. Expenditures

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

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

www.fppc.ca.gov

Schedule A Monetary Contributions Received

Amounts may be rounded to whole dollars.

	IJЕ
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CALIFORNIA

Statement covers period

Wionetary	Contributions Necessed	to	whole dollars.	from01/21/2	024	FORM	400
SEE INSTRUCTIO	ONS ON REVERSE			through02/17/2	024 Pag	e4	of11
NAME OF FILER					I.D. I	NUMBER	
Brenda Olmos	s for Paramount City Council 2024			285	146	4337	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, ALSO ENTER LD. 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)	(IF R	ELECTION O DATE EQUIRED)
02/16/2024	Anthony Almaz San Dimas, CA 91773	⊠IND □COM □OTH □PTY □SCC	General Council South Cord Holdings	250.00		D P2024	\$250.00
02/10/2024	Todd Bousema Paramount, CA 90723	⊠IND □ COM □ OTH □ PTY □ SCC	Wholesale pool supply company Self	300.00	300.0	0 P2024	\$300.00
02/16/2024	Casa Gamino Family Restaurant Inc. Paramount, CA 90723	□IND □COM ☑OTH □PTY □SCC		500.00		0 P2024	\$500.00
02/16/2024	Citizens for Safer Cities (ID# 1463021) 249 E. Ocean Blvd., #670 Long Beach, CA 90802	□IND □COM □OTH □PTY □SCC		4,500.00	4,500.0) P2024	\$4,500.00
02/16/2024	Dabbah Haddad Suleiman Montrose, CA 91020	□IND □COM ☑OTH □PTY □SCC		500.00	500.0	0 P2024	\$500.00
			SUBTOTAL\$	6,050.00			
1. Amount re (Include al 2. Amount re 3. Total mone	A Summary received this period – itemized monetary contributions. Il Schedule A subtotals.)	s of less than	\$100 \$	0.00	OTH - Oth PTY - Politi	dual pient Comm er than PTY er (e.g., bus cal Party	
(Add Lines	s 1 and 2. Enter here and on the Summary Page, Colu	mn A, Line 1.) TOTAL \$	13,793.00			100 (11004

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA ACO
from	01/21/2024	FORM 400
through_	02/17/2024	Page5 of11
		I.D. NUMBER
		1464337

NAME OF FILER

Brenda Olmos for Paramount City Council 2024

PER ELECTION AMOUNT CUMULATIVE TO DATE IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR RECEIVED THIS CALENDAR YEAR TO DATE DATE OCCUPATION AND EMPLOYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE * (IF REQUIRED) PERIOD RECEIVED (IF SELF-EMPLOYED, ENTER NAME (JAN. 1 - DEC. 31) OF BUSINESS) 500,00 P2024 \$500.00 500.00 02/16/2024 Fiesta Taxi CO-OP, Inc. 1515 W. 190th St. Ste. 250 □сом Gardena, CA 90249 **▼**OTH PTY □ SCC \$245.00 245.00 P2024 245.00 02/16/2024 International Brotherhood of Electrical Workers ПСОМ 297 N. Marengo Ave. ₩ OTH Pasadena, CA 91101 □ PTY □ SCC 1,500.00 P2024 \$1,500.00 1,500.00 02/17/2024 Justman Packaging & Display 6300 Telegraph Rd. □ COM Commerce, CA 90040 **⊠**OTH □ PTY □ SCC 249.00 G0001 \$249.00 249.00 Managing Partner 01/22/2024 Matt Knabe ▼ IND □ COM Long Beach, CA 90815 Потн □ PTY □ SCC 250.00 P2024 \$250.00 250.00 Realtor 02/16/2024 Timothy Lewis ⊠ IND Eliot Lewis Broker □ COM Long Beach, CA 90815 □ OTH □ PTY □ scc 2,744.00 SUBTOTAL\$

*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

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)
CALIFORNIA 160

from 01/21/2024 CALIFORNIA FORM 460

through____02/17/2024 Page___6__ of___11__

I.D. NUMBER

DATE RECEIVED FULL NAME, SIRE! ADDRESS AND JET COURS OF COURTING AND EMPLOYER (FOR SELEMPLOYER, OF BUSINESS) COLUMN FOR SELEMPLOYER, OF BUSINESS) FOR SELEMPLOYER, OF BUSINESS FOR SELEMPLOY FOR SELEMPLOYER, OF BUSINESS FOR SELEMPLOY FOR SELEMPLOYER, OF BUSINESS FOR SELEMPLOYER, OF BUSINESS	Brenda Olmos	for Paramount City Council 2024		IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE TO		PER	ELECTION
ND COM Comparison Compa		FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME		(JAN. 1 - DEC	. 31)	(IF R	EQUIRED)
Damian Martin	02/16/2024	(ID# 90539) 100 E. Corson St. Ste. 410	©COM □OTH □PTY		500.00				
Nationwide Environmental Services IND COM COM	02/16/2024		□COM □OTH □PTY	Attorney Damian A. Martin	250.00				\$250.0
Redondo Beach, CA 90277 Colin Obrien	01/26/2024	11914 Front Street	□COM □OTH □PTY		1,000.00	1,0	00.00	P2024	\$1,000.0
South Cord Management LLC(Elliot Lewis) 401 Pine Ave. Long Beach, CA 90802 COM OTH PTY	02/15/2024		□COM □OTH □PTY						\$1,500.0
	02/16/2024	401 Pine Ave.	□COM ☑OTH □PTY		250.00	2	50.00	P2024	\$250.0

*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 to w

	SCHEDU	LEA (CONT.)
ΛΙII	EORNIA	7	20

s may be rounded	Statement covers period	CALIFORNIA 160		
vhole dollars.	from01/21/2024	FORM 400		
	through02/17/2024	Page 7 of 11		
		I.D. NUMBER		
		1464337		

NAME OF FILER

Brenda Olmos	for Paramount City Council 2024				1464:	337
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. 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)
02/16/2024	Southern California Armenian Democrats (ID# 1333867) 1 W. Manchester Blvd. Ste. 700 Inglewood, CA 90301	□IND □COM □OTH □PTY □SCC		250.00	250.00	
02/16/2024	Southern California Pipe Trades District Council #16 (ID# 760715) 501 Shatto Place Ste. 400 Los Angeles, CA 90020	□IND ☑COM □OTH □PTY □SCC		250.00	250.00	
02/16/2024	UA Journeymen & Apprentices Local #250 (ID# 743-959) 18355 S. Figueroa St. Gardena, CA 90248	□IND □COM □OTH □PTY ☑SCC		250.00	250.00	
02/16/2024	Willdan Group. Inc. 2401 E Katella Ave. Ste. 300 Anaheim, CA 92806	□IND □COM ☑OTH □PTY □SCC		249.00	249.00	
02/05/2024	Harding Young Lynwood, CA 90262	⊠IND □COM □OTH □PTY □SCC	MD self	500.00	500.00	P2024 \$500.00
			SUBTOTALS	1,499.00		

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Schedule E				ſ-	Stateme	ent covers period	CALIE	SCHEDULE CALIFORNIA 160		
Payments Made	Amounts may be to whole d		d	fre	om	01/21/2024	New York Control of the Control of t	RM	460	
SEE INSTRUCTIONS ON REVERSE				th	rough _	02/17/2024			of	
NAME OF FILER				**			I.D. NU	MBER		
Brenda Olmos for Paramount City Council 2024							14643	37		
CODES: If one of the following codes accurately describes CMP campaign paraphernalia/misc. CNS campaign consultants contribution (explain nonmonetary)* CVC civic donations candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings and OFC office expen PET petition circul PHO phone banks POL polling and s POS postage, deli	munication d appearar ses lating survey rese ivery and r	s ces arch	RAI RFI SA TEL TRO TRO SS TSI VO	D radio D return L camp L t.v. or C candid S staff/s transf T voter	pe the payment. airtime and production aed contributions aign workers' salaries cable airtime and proc date travel, lodging, and spouse travel, lodging, er between committee registration nation technology costs	duction cos d meals and meals s of the sa	ame cand	idate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE	OR	DESCRIPT	ON OF PA	AYMENT		AM	OUNT PAID	
Stephanie Chavez		OFC							75.1	
Norwalk, CA 90650										
Crummitt and Associates Inc. 249 E. Ocean Blvd. #670 Long Beach, CA 90802		PRO							525.0	
E- Fundraising Connections 2831 G Street Sacramento, CA 95814			Credit Card	l Processin	g Fees				46.0	
* Payments that are contributions or independent expenditures m	ust also be summ	arized on	Schedule D.			SL	JBTOTAL	\$	646.1	

Itemized payments made this period. (Include all Schedule E subtotals.)....

\$_______\$

Schedule E Summary

6,046.49

6,046.49

0.00

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

	SCHEDULE E (CONT.)
Statement covers period	CALIFORNIA 460
from 01/21/2024	FORM TOO
through02/17/2024	Page 9 of 11
	I.D. NUMBER
	1464337

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Brenda Olmos for Paramount City Council 2024

.

CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense MTG mc OFC of OFC of PET pe PHO ph PhO ph POL po PRO pn	yment, you may of the property	RAD radio airtime and production costs returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production cost TRC candidate travel, lodging, and meals arch TRS staff/spouse travel, lodging, and meals ressenger services TSF transfer between committees of the sal	me candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
E- Fundraising Connections 2831 G Street Sacramento, CA 95814		Credit Card Processing Fees	45.50
E- Fundraising Connections 2831 G Street Sacramento, CA 95814		Credit Card Processing Fees	45.50
E- Fundraising Connections 2831 G Street Sacramento, CA 95814		Credit Card Processing Fees	34.75
Lux Marketing Group, LLC 23922 Pennsylvania Ave. Torrance, CA 90501	CMP		2,059.13
Lux Marketing Group, LLC 23922 Pennsylvania Ave. Torrance, CA 90501	POS		2,265.00
* Payments that are contributions or independent expenditures must also be sumn	narized on Schedule I	D. SUBTOTAL	\$ 4,449.88

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

Amounts may be rounded to whole dollars.

		SCHEDULE E (CONT.
State	ment covers period	CALIFORNIA 460
from	01/21/2024	FORM TOO
through	02/17/2024	Page of11
		I.D. NUMBER
		1464337

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Brenda Olmos for Paramount City Council 2024

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs MBR member communications CMP campaign paraphernalia/misc. RFD returned contributions MTG meetings and appearances CNS campaign consultants SAL campaign workers' salaries CTB contribution (explain nonmonetary)* OFC office expenses TEL t.v. or cable airtime and production costs petition circulating CVC civic donations PET TRC candidate travel, lodging, and meals РНО phone banks candidate filing/ballot fees FIL TRS staff/spouse travel, lodging, and meals polling and survey research POL FND fundraising events TSF transfer between committees of the same candidate/sponsor POS postage, delivery and messenger services independent expenditure supporting/opposing others (explain)* IND VOT voter registration professional services (legal, accounting) legal defense LEG WEB information technology costs (internet, e-mail) PRT print ads campaign literature and mailings

LIT campaign literature and mailings	PRI pilit aus		TIES IIIIOMIGUEN COMMONG,	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE C	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Political Data, Inc. 12501 Imperial Hwy., #200 Norwalk, CA 90650			Voter Files	250.00
Political Data, Inc. 12501 Imperial Hwy., #200 Norwalk, CA 90650			Voter Files	250.00
Political Data, Inc. 12501 Imperial Hwy., #200 Norwalk, CA 90650			Voter Files	150.84
Political Data, Inc. 12501 Imperial Hwy., #200 Norwalk, CA 90650			Voter Files	299.62

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

SUBTOTAL \$

950.46

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

Amounts may be rounded to whole dollars.

	SCHEDULE G
Statement covers period	CALIFORNIA 160
from01/21/2024	FORM 400
through02/17/2024	Page 11 of 11
	I.D. NUMBER
	1464337

COULDINE

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Brenda Olmos for Paramount City Council 2024

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Lux Marketing Group, LLC

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

print ads

PRO

PRT

CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* PET CVC civic donations PHO phone banks candidate filing/ballot fees FIL POL polling and survey research FND fundraising events POS postage, delivery and messenger services

independent expenditure supporting/opposing others (explain)* IND LEG legal defense campaign literature and mailings LIT

RAD radio airtime and production costs MBR member communications RFD returned contributions MTG meetings and appearances

SAL campaign workers' salaries OFC office expenses TEL t.v. or cable airtime and production costs petition circulating

TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

^{*} 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
U.S. Postal Service 7200 Somerset Blvd. Paramount, CA 90723	POS			2,265.0

professional services (legal, accounting)

Attach additional information on appropriately labeled continuation sheets.

2,265.00 TOTAL* \$

^{*} 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.