



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

**CALIFORNIA FORM 460**

Page 2 of 17

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE

RICHARD DASKAM

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

CITY COUNCIL MEMBER CITY OF SIGNAL HILL

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

[REDACTED]

**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
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NAME OF TREASURER	CONTROLLED COMMITTEE?
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YES  NO

COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
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CITY	STATE	ZIP CODE	AREA CODE/PHONE
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COMMITTEE NAME	I.D. NUMBER
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NAME OF TREASURER	CONTROLLED COMMITTEE?
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YES  NO

COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
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CITY	STATE	ZIP CODE	AREA CODE/PHONE
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**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, CANDIDATE, OR PROPOSER

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY
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**7. Primarily Formed Candidate/Officeholder Committee** *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

*Attach continuation sheets if necessary*



**Schedule A**  
**Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A

Statement covers period from <u>11/18/22</u> through <u>12/31/2022</u>	CALIFORNIA <b>460</b> FORM
Page <u>4</u> of <u>17</u>	I.D. NUMBER <u>1443162</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

RICHARD DASKAM FOR SIGNAL HILL CITY COUNCIL 2022

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)
10/30/22	Leroy Brown [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Broker Brownstone Realty	0	100.00	100.00
10/26/22	California Real Estate Political Action Committee [REDACTED]	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		0	700.00	700.00
11/5/22	Sanford Simmons [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Employed Laundromats and other small businesses.	0	100.00	100.00
11/8/22	Christine Pietsch [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Integra Escrow	0	200.00	200.00
11/8/22	Dina Alcantar [REDACTED]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Sales Fidelity National title	0	100.00	100.00
<b>SUBTOTAL \$ 0</b>						

**Schedule A Summary**

- Amount received this period – itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 0
- Amount received this period – unitemized monetary contributions of less than \$100 ..... \$ 0
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$ 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 may be rounded  
 to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>11/18/22</u>	to <u>12/31/2022</u>
through <u>12/31/2022</u>	
Page <u>5</u>	of <u>17</u>

I.D. NUMBER

1443162

NAME OF FILER

RICHARD DASKAM FOR SIGNAL HILL CITY COUNCIL 2022

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)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL \$ 0</b>						

\*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

**CALIFORNIA FORM 460**

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## Schedule B – Part 1

### Loans Received

Amounts may be rounded to whole dollars.

**SCHEDULE B - PART 1**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

RICHARD DASKAM FOR SIGNAL HILL CITY COUNCIL 2022

**Statement covers period**

from 11/18/22

through 12/31/2021

**CALIFORNIA FORM 460**

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I.D. NUMBER

1443162

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD *	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE			
Richard Daskam [REDACTED]	RMD Real Estate Inc Broker	0 \$ _____	0 \$ _____	<input type="checkbox"/> PAID \$ _____	2225.00 \$ _____	0 % RATE	2225.00 \$ _____	2225.00 \$ _____			
				<input type="checkbox"/> FORGIVEN \$ _____	12/31/22 DATE DUE	0 \$ _____	10/7/2022 DATE INCURRED	PER ELECTION** \$ 2225.00			
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								CALENDAR YEAR			
				<input type="checkbox"/> PAID \$ _____	\$ _____	_____ % RATE	\$ _____	\$ _____			
				<input type="checkbox"/> FORGIVEN \$ _____	DATE DUE	\$ _____	DATE INCURRED	PER ELECTION** \$ _____			
† <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				<input type="checkbox"/> PAID \$ _____	\$ _____	_____ % RATE	\$ _____	CALENDAR YEAR			
				<input type="checkbox"/> FORGIVEN \$ _____	DATE DUE	\$ _____	DATE INCURRED	\$ _____			
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC								PER ELECTION** \$ _____			
				<b>SUBTOTALS</b>		\$ 0	\$ 0	\$ 2225.00	\$ 0		

## Schedule B Summary

1. Loans received this period ..... \$ 0  
(Total Column (b) plus unitemized loans of less than \$100.)
2. Loans paid or forgiven this period ..... \$ 0  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)
3. Net change this period. (**Subtract** Line 2 from Line 1.) ..... **NET** \$ 0  
Enter the net here and on the Summary Page, Column A, Line 2.

†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 forgiven or paid by another party also must be reported on Schedule A.

Amounts for  
\*\* If required

(May be a negative number)

EPPC Form 460 (Jan/2016))

FPPC Advice: advice@fppc.ca.gov (866/275-3772)  
[www.fppc.ca.gov](http://www.fppc.ca.gov)

**Schedule B – Part 2**  
**Loan Guarantors**

 Amounts may be rounded  
 to whole dollars.

 Statement covers period  
 from 11/18/22

 through 12/31/2022
**CALIFORNIA FORM 460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

RICHARD DASKAM FOR SIGNAL HILL CITY COUNCIL 2022

I.D. NUMBER

1443162

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)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____		CALENDAR YEAR \$ _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		DATE _____		PER ELECTION (IF REQUIRED) \$ _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____		CALENDAR YEAR \$ _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		DATE _____		PER ELECTION (IF REQUIRED) \$ _____	
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	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		DATE _____		PER ELECTION (IF REQUIRED) \$ _____	
<b>SUBTOTAL \$ 0</b>				Enter on Summary Page, Line 17 only.		

**Schedule C**  
**Nonmonetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE C

Statement covers period  
from 11/18/22  
through 12/31/2022

**CALIFORNIA FORM 460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

RICHARD DASKAM FOR SIGNAL HILL CITY COUNCIL 2022

I.D. NUMBER

1443162

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

Amounts may be rounded to whole dollars.

Statement covers period from <u>11/18/22</u>	<b>CALIFORNIA</b> <b>FORM</b>	<b>460</b>
through <u>12/31/2022</u>	9	of 17
	Page <u>1</u>	
	I.D. NUMBER	
	1443162	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

RICHARD DASKAM FOR SIGNAL HILL CITY COUNCIL 2022

## Schedule D Summary

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)..... \$ 0  
2. Unitemized contributions and independent expenditures made this period of under \$100..... \$ 0  
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ..... **TOTAL** .. \$ 0

**Schedule D  
(Continuation Sheet)  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

Amounts may be rounded to whole dollars.

SCHEDULE D (CONT.)

Statement covers period  
from 11/18/22

CALIFORNIA FORM 460

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**I.D. NUMBER**

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

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**NAME OF FILER**

RICHARD DASKAM FOR SIGNAL HILL CITY COUNCIL 2022

Amounts may be rounded to whole dollars.

Statement covers period from <u>11/18/22</u> through <u>12/31/2022</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>12</u> of <u>17</u>
	I.D. NUMBER <u>1443162</u>

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

CMP	campaign paraphernalia/misc.
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
LIT	campaign literature and mailings

MBR	member communications
MTG	meetings and appearances
OFC	office expenses
PET	petition circulating
PHO	phone banks
POL	polling and survey research
POS	postage, delivery and messenger services
PRO	professional services (legal, accounting)
PRT	print ads

RAD	radio airtime and production costs
RFD	returned contributions
SAL	campaign workers' salaries
TEL	t.v. or cable airtime and production costs
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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID

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

**SUBTOTAL \$**

# Schedule F

## Accrued Expenses (Unpaid Bills)

Amounts may be rounded  
to whole dollars.

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

RICHARD DASKAM FOR SIGNAL HILL CITY COUNCIL 2022

Statement covers period from <u>11/18/22</u> through <u>12/31/2022</u>	<b>CALIFORNIA FORM 460</b>
Page <u>13</u> of <u>17</u>	I.D. NUMBER <u>1443162</u>

**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
Richard Daskam, [REDACTED] [REDACTED]	FIL	775.00	0	775.00	0
Richard Daskam, [REDACTED] [REDACTED]	CMP	534.40	0.00	525.40	9.00
Richard Daskam, [REDACTED] [REDACTED]	WEB	41.00	0	0	41.00

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

**SUBTOTALS \$ 1350.40 \$ 0 \$ 1300.40 \$ 50.00**

### Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) ..... **INCURRED TOTALS \$ 0**
2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) ..... **PAID TOTALS \$ 1300.40**
3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... **NET \$ -1300.40**  
May be a negative number

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

Amounts may be rounded  
to whole dollars.

Statement covers period  
from 11/18/22  
through 12/31/2022

**CALIFORNIA FORM 460**  
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NAME OF FILER

RICHARD DASKAM FOR SIGNAL HILL CITY COUNCIL 2022

I.D. NUMBER  
1443162

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

CMP campaign paraphernalia/misc.  
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  
LIT campaign literature and mailings

MBR member communications  
MTG meetings and appearances  
OFC office expenses  
PET petition circulating  
PHO phone banks  
POL polling and survey research  
POS postage, delivery and messenger services  
PRO professional services (legal, accounting)  
PRT print ads

RAD radio airtime and production costs  
RFD returned contributions  
SAL campaign workers' salaries  
TEL t.v. or cable airtime and production costs  
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 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
SUBTOTALS	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0



**Schedule H**  
**Loans Made to Others\***

 Amounts may be rounded  
 to whole dollars.

 Statement covers period  
 from 11/18/22

 through 12/31/2022
**CALIFORNIA FORM 460**

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NAME OF FILER

RICHARD DASKAM FOR SIGNAL HILL CITY COUNCIL 2022

I.D. NUMBER

1443162

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
		\$ _____	\$ _____	<input type="checkbox"/> FORGIVEN	\$ _____ DATE DUE	\$ _____ RATE		CALENDAR YEAR
		\$ _____	\$ _____	<input type="checkbox"/> PAID	\$ _____ DATE DUE	\$ _____ RATE		PER ELECTION**
		\$ _____	\$ _____	<input type="checkbox"/> FORGIVEN	\$ _____ DATE DUE	\$ _____ RATE		CALENDAR YEAR
		\$ _____	\$ _____	<input type="checkbox"/> PAID	\$ _____ DATE DUE	\$ _____ RATE		PER ELECTION**
*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.		<b>SUBTOTALS</b>	\$	\$	\$	\$		
							(Enter (e) on Schedule I, Line 3)	

**Schedule H Summary**

1. Loans made this period ..... \$ 0  
 (Total Column (b) plus unitemized loans of less than \$100.)
2. Payments received on loans ..... \$ 0  
 (Total Column (c) plus unitemized payments of less than \$100.)
3. Net change this period. (Subtract Line 2 from Line 1.) ..... \$ 0  
 (Enter the net here and on the Summary Page, Column A, Line 7.)

\*\*If Required

(May be a negative number)

## **Schedule I**

### **Miscellaneous Increases to Cash**

Amounts may be rounded to whole dollars.

**SCHEDULE I**

**CALIFORNIA FORM 460**

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I.D. NUMBER

1443162

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

RICHARD DASKAM FOR SIGNAL HILL CITY COUNCIL 2022

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

*Attach additional information on appropriately labeled continuation sheets.*

**SUBTOTAL \$**

## Schedule I Summary

1. Itemized increases to cash this period. ....	\$ 0
2. Unitemized increases to cash of under \$100 this period. ....	\$ 0
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) ....	\$ 0
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) ....	<b>TOTAL \$ 0</b>

TOTAL **0**

EPPC Form 460 (Jan/2016))

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[www.fppc.ca.gov](http://www.fppc.ca.gov)