

**Major Donor and
Independent Expenditure Committee
Campaign Statement**

Date Stamp RECEIVED LOS ANGELES CA	CALIFORNIA FORM 461
2022 AUG -2 PM	Page <u>01</u> of <u>2</u>
For Official Use Only CAMPAIGN FINANCE	

Statement covers period from <u>01/01/2022</u> through <u>06/30/2022</u>	Date of election if applicable: (Month, Day, Year) <u>N/A</u>
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SEE INSTRUCTIONS ON REVERSE

1. Name and Address of Filer

NAME OF FILER
Maria de Cardenas

RESIDENTIAL OR MAILING ADDRESS (NO. AND STREET)

CITY STATE ZIP CODE
La Canada Flintridge CA 91011

RESPONSIBLE OFFICER (If filer is other than an individual) AREA CODE/DAYTIME PHONE
626-253-1620

2. Nature and Interests of Filer (Complete each applicable section.)

A FILER WHO IS AN INDIVIDUAL MUST LIST THE NAME, ADDRESS, AND BUSINESS INTERESTS OF EMPLOYER OR, IF SELF-EMPLOYED, THE NAME, ADDRESS, AND NATURE OF THE BUSINESS

NAME OF EMPLOYER/BUSINESS Maria de Cardenas	BUSINESS INTERESTS Self
ADDRESS OF EMPLOYER/BUSINESS La Canada Flintridge, CA, 91011	

A FILER THAT IS A BUSINESS ENTITY MUST DESCRIBE THE BUSINESS ACTIVITY IN WHICH IT IS ENGAGED

A FILER THAT IS AN ASSOCIATION MUST PROVIDE A SPECIFIC DESCRIPTION OF ITS INTERESTS

A FILER THAT IS NOT AN INDIVIDUAL, BUSINESS ENTITY, OR ASSOCIATION MUST DESCRIBE THE COMMON ECONOMIC INTEREST OF THE GROUP OR ENTITY

3. Summary
(Amounts may be rounded to whole dollars.)

1. Expenditures and contributions (including loans) of \$100 or more made this period. (Part 5.).....	\$ <u>10,000</u>
2. Unitemized expenditures and contributions (including loans) under \$100 made this period.....	\$ <u>0.00</u>
3. Total expenditures and contributions made this period. (Add Lines 1 + 2.).....	SUBTOTAL \$ <u>10,000</u>
4. Total expenditures and contributions made from prior statement. (Enter amount from Line 5 of last statement filed. If this is the first statement for the calendar year, enter zero.).....	\$ <u>0.00</u>
5. Total expenditures and contributions (including loans) made since January 1 of the current calendar year. (Add Lines 3 + 4.).....	TOTAL \$ <u>10,000</u>

4. Verification

I have used all reasonable diligence reviewed the statement and to the best of my knowledge the information contained herein is true and correct and complies with the laws of the State of California.

Executed on 08/01/22 E
DATE

Amendment (Explain): _____

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to whole dollars.

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	Page <u>2</u> of <u>2</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Maria de Cardenas

5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made

(If more space is needed, use additional copies of this page for continuation sheets.)

DATE	NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATED TO THIS CANDIDATE, MEASURE, OR COMMITTEE
2/23/22	Committee to Support the Recall of District Attorney George Gascon 500 W. Colorado St, Unit C #455 Glendale, CA 91204 ID # 1440808	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		Recall District Attorney George Gascon Jurisdiction: Los Angeles <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	10,000	10,000
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		 <input type="checkbox"/> Support <input type="checkbox"/> Oppose		
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		 <input type="checkbox"/> Support <input type="checkbox"/> Oppose		
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Loan <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		 <input type="checkbox"/> Support <input type="checkbox"/> Oppose		
SUBTOTAL \$					10,000	10,000