

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Date Stamp

E-Filed
05/04/2021
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Filing ID:
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Statement covers period

from 10/18/2020

through 12/31/2020

Date of election if applicable:
(Month, Day, Year)

11/03/2020

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- Officeholder, Candidate Controlled Committee
 - State Candidate Election Committee
 - Recall*(Also Complete Part 5)*
- General Purpose Committee
 - Sponsored
 - Small Contributor Committee
 - Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
 - Controlled
 - Sponsored*(Also Complete Part 6)*
- Primarily Formed Candidate/Officeholder Committee
 - Sponsored*(Also Complete Part 7)*

2. Type of Statement:

- Preelection Statement
- Semi-annual Statement
- Termination Statement
(Also file a Form 410 Termination)
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report
- Supplemental Preelection Statement - Attach Form 495

Includes 2 additional disbursements to Sec'y of State and Twilio, fixed an erroneous contribution record

3. Committee Information

I.D. NUMBER
1426631

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Konstantine Anthony for Burbank City Council 2020

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Burbank	CA	91501	(818) 253-4123

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS
konstantineanthony@gmail.com

Treasurer(s)

NAME OF TREASURER
Margo Rowder

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Burbank	CA	91501	(773) 689-0008

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS
margorowder@gmail.com

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 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 04/30/2021
Date

By Margo Rowder
Signature of Treasurer or Assistant Treasurer

Executed on 04/30/2021
Date

By Konstantine Anthony
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

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

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
 Konstantine Anthony

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
 City Council Member: City of Burbank

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP
	Burbank	CA	91501

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 ADDRESS	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 ADDRESS	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, 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

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

SUMMARY PAGE

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/18/2020	
through	12/31/2020	Page <u>3</u> of <u>26</u>
		I.D. NUMBER 1426631

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Konstantine Anthony for Burbank City Council 2020

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions Schedule A, Line 3	\$ 8,889.75	\$ 52,820.26
2. Loans Received Schedule B, Line 3	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 8,889.75	\$ 52,820.26
4. Nonmonetary Contributions Schedule C, Line 3	532.60	771.60
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 9,422.35	\$ 53,591.86

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	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

Expenditures Made

	Column A	Column B
6. Payments Made Schedule E, Line 4	\$ 26,509.32	\$ 55,505.60
7. Loans Made Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 26,509.32	\$ 55,505.60
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	-3,170.07	0.00
10. Nonmonetary Adjustment Schedule C, Line 3	532.60	771.60
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 23,871.85	\$ 56,277.20

Expenditure Limit Summary for State Candidates

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

Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____

Current Cash Statement

12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 15,221.98
13. Cash Receipts Column A, Line 3 above	8,889.75
14. Miscellaneous Increases to Cash Schedule I, Line 4	2,972.51
15. Cash Payments Column A, Line 8 above	26,509.32
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 574.92

To calculate Column B, add 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 any).

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

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ 0.00
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse	\$ 0.00
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ 0.00

Schedule A Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from	10/18/2020	
through	12/31/2020	Page 4 of 26

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Konstantine Anthony for Burbank City Council 2020	I.D. NUMBER 1426631
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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)
10/27/2020	Samuel Bowers New York, NY 10026	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Video Producer DM Operations Inc.	50.00	200.00	G2020 \$200.00
11/19/2020	Burbank Firefighters Local 778 PAC (ID# 862301) Burbank, CA 91506	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	G2020 \$500.00
10/24/2020	Sam Chalsen Burbank, CA 91505	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Writer Warner Bros Studio	300.00	300.00	G2020 \$300.00
10/22/2020	Maya Chupkov San Francisco, CA 94102	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Communications Director Council of Community Housing Organizations	100.00	100.00	G2020 \$100.00
10/27/2020	Sarah Countryman Burbank, CA 91506	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Quality Manager Pixelogic	100.00	100.00	G2020 \$100.00

SUBTOTAL \$ 1,050.00

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 7,150.00
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 1,739.75
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 8,889.75

*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**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/18/2020	
through	12/31/2020	Page 5 of 26

NAME OF FILER Konstantine Anthony for Burbank City Council 2020	I.D. NUMBER 1426631
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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)
10/23/2020	Dignity CA SEIU Local 2015 (ID# 1357256) Los Angeles, CA 90057	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	G2020 \$500.00
11/02/2020	James Elyea Glendale, CA 91208-1921	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President History for Hire Prop House	500.00	500.00	G2020 \$500.00
11/07/2020	Cecily Gish Fountain Valley, CA 92708	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CFO Presentation Resource Group	100.00	500.00	G2020 \$500.00
10/21/2020	International Union of Painters & Allied Trades Legislative Educational Committee (ID# 1414164) Hanover, MD 21076	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	G2020 \$500.00
10/29/2020	Ash Kalra San Jose, CA 95136	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Assembly Member State of California	200.00	200.00	G2020 \$200.00
SUBTOTAL \$				1,800.00		

*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 A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/18/2020	
through	12/31/2020	Page <u>6</u> of <u>26</u>

NAME OF FILER Konstantine Anthony for Burbank City Council 2020	I.D. NUMBER 1426631
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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)
10/30/2020	Songvit Kiatpiriya Burbank, CA 91505	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Editor iOne Digital	50.00	100.00	G2020 \$100.00
10/22/2020	Evan Kroske Washington, DC 20037	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Software Development Engineer Amazon	100.00	100.00	G2020 \$100.00
11/03/2020	Michael Kusiak Castro Valley, CA 94546	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Higher Education Administration University of California	27.00	108.00	G2020 \$108.00
11/03/2020	Laborers' Local 300 Small Contributor Committee (ID# 950674) Los Angeles, CA 90006	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		500.00	500.00	G2020 \$500.00
10/23/2020	Anne Lloyd Minnetonka, MN 55305	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Project Mgr LMCA	27.00	135.00	G2020 \$135.00
SUBTOTAL \$				704.00		

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 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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/18/2020	
through	12/31/2020	Page <u>7</u> of <u>26</u>

NAME OF FILER Konstantine Anthony for Burbank City Council 2020	I.D. NUMBER 1426631
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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)
11/01/2020	Anne Lloyd Minnetonka, MN 55305	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Project Mgr LMCA	27.00	135.00	G2020 \$135.00
10/28/2020	Kimberly Luce Burbank, CA 91505	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Unemployed Unemployed	100.00	200.00	G2020 \$200.00
11/06/2020	Loraine Lundquist Northridge, CA 91343	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Faculty California State University, Northridge	401.00	496.00	G2020 \$496.00
10/23/2020	Martin Manteca Los Angeles, CA 91042	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Organizer SEIU	50.00	100.00	G2020 \$100.00
11/12/2020	Martin Manteca Los Angeles, CA 91042	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Organizer SEIU	50.00	100.00	G2020 \$100.00
SUBTOTAL \$				628.00		

*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 A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/18/2020	
through	12/31/2020	Page <u>8</u> of <u>26</u>

NAME OF FILER Konstantine Anthony for Burbank City Council 2020	I.D. NUMBER 1426631
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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)
10/18/2020	Brian Matsunaga Burbank, CA 91506	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	TV Editor Cast and Crew Productions	50.00	200.00	G2020 \$200.00
10/25/2020	Brian Matsunaga Burbank, CA 91506	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	TV Editor Cast and Crew Productions	50.00	200.00	G2020 \$200.00
11/01/2020	Brian Matsunaga Burbank, CA 91506	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	TV Editor Cast and Crew Productions	50.00	200.00	G2020 \$200.00
11/09/2020	John McLean Pasadena, CA 91104	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director Greenlots	50.00	300.00	G2020 \$300.00
10/27/2020	Joy Meserve Burbank, CA 91506	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	COO iD Tech	27.00	447.00	G2020 \$447.00
SUBTOTAL \$				227.00		

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 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**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/18/2020	
through	12/31/2020	Page 9 of 26

NAME OF FILER Konstantine Anthony for Burbank City Council 2020	I.D. NUMBER 1426631
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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)
10/21/2020	Glenn Packman Wilton, CT 06897	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Appraiser Self-Employed	25.00	200.00	G2020 \$200.00
10/29/2020	Eugene Paulin Burbank, CA 91505	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Psychologist Self-employed	30.00	257.00	G2020 \$257.00
11/01/2020	Glyne Pease North Hollywood, CA 91602	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Producer Sundance Institute	15.00	130.00	G2020 \$130.00
10/23/2020	Christopher Roth Los Angeles, CA 90014	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Unemployed Unemployed	200.00	250.00	G2020 \$250.00
10/21/2020	Cheryl Rowder Georgetown, TX 78633	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Professor Western Governors University	90.00	500.00	G2020 \$500.00
SUBTOTAL \$				360.00		

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/18/2020	
through	12/31/2020	Page 10 of 26

NAME OF FILER Konstantine Anthony for Burbank City Council 2020	I.D. NUMBER 1426631
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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)
10/21/2020	Susan Sarandon Lancaster, PA 17601	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Actor Silly Goose Productions	500.00	500.00	G2020 \$500.00
10/25/2020	Marcos Serna Riverside, CA 92508	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Manager Barrel and stave	100.00	100.00	G2020 \$100.00
10/21/2020	Rodolfo Solis Los Angeles, CA 91602	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Actor Self	50.00	250.00	G2020 \$250.00
10/21/2020	Southern California Pipe Trades District Council 16 (ID# 760715) Los Angeles, CA 90020	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00	250.00	G2020 \$250.00
10/28/2020	Streets for All (ID# 1425041) Long Beach, CA 90802	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		200.00	200.00	G2020 \$200.00
SUBTOTAL \$				1,100.00		

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 PTY – Political Party
 SCC – Small Contributor Committee

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

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/18/2020	
through	12/31/2020	Page <u>11</u> of <u>26</u>

NAME OF FILER Konstantine Anthony for Burbank City Council 2020	I.D. NUMBER 1426631
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10/19/2020	Hovanes Tonoyan North Hollywood, CA 91606	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Project Manager New Frontier Data	500.00	500.00	G2020 \$500.00
10/23/2020	Mario Uribe Sun Valley, CA 91352	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Service assistant El Pollo Loco	54.00	154.00	G2020 \$154.00
11/09/2020	Emily Walus Burbank, CA 91504	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Artist Cartoon Network	27.00	108.00	G2020 \$108.00
10/20/2020	Shaelyn Watson San Francisco, CA 94118	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Software Engineer SoFi	50.00	100.00	G2020 \$100.00
10/28/2020	Shaelyn Watson San Francisco, CA 94118	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Software Engineer SoFi	50.00	100.00	G2020 \$100.00
SUBTOTAL \$				681.00		

*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 A (Continuation Sheet)
Monetary Contributions Received**

SCHEDULE A (CONT.)

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/18/2020	
through	12/31/2020	Page <u>12</u> of <u>26</u>

NAME OF FILER Konstantine Anthony for Burbank City Council 2020	I.D. NUMBER 1426631
--	------------------------

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)
10/26/2020	George Whitesides La Canada Flintridge, CA 91011	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Virgin Galactic	500.00	500.00	G2020 \$500.00
10/26/2020	Charles Wimer New York, NY 10028	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney First International Title	100.00	100.00	G2020 \$100.00
		<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				
SUBTOTAL \$				600.00		

*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**

Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period		CALIFORNIA FORM 460
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NAME OF FILER		I.D. NUMBER
Konstantine Anthony for Burbank City Council 2020		1426631

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Konstantine Anthony for Burbank City Council 2020

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)
10/31/2020	Democratic Socialists of America - Los Angeles Los Angeles, CA 90020	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		flyers printing	219.00	219.00	G2020 \$219.00
10/19/2020	Ground Game LA (ID# 1432601) Los Angeles, CA 90028	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		professional phone-banking hours	44.80	537.60	G2020 \$537.60
10/20/2020	Ground Game LA (ID# 1432601) Los Angeles, CA 90028	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		professional phone-banking hours	44.80	537.60	G2020 \$537.60
10/21/2020	Ground Game LA (ID# 1432601) Los Angeles, CA 90028	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		phone-banking hours	44.80	537.60	G2020 \$537.60
<i>Attach additional information on appropriately labeled continuation sheets.</i>					SUBTOTAL \$	353.40	

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.)	\$	532.60
2. Amount received this period – unitemized nonmonetary contributions of less than \$100	\$	0.00
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)	TOTAL \$	532.60

*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 (Continuation Sheet)
Nonmonetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE C (CONT.)

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Konstantine Anthony for Burbank City Council 2020

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)
10/22/2020	Ground Game LA (ID# 1432601) Los Angeles, CA 90028	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		phone-banking hours	44.80	537.60	G2020 \$537.60
10/23/2020	Ground Game LA (ID# 1432601) Los Angeles, CA 90028	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		phone-banking hours	44.80	537.60	G2020 \$537.60
10/26/2020	Ground Game LA (ID# 1432601) Los Angeles, CA 90028	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		phone-banking hours	44.80	537.60	G2020 \$537.60
10/27/2020	Ground Game LA (ID# 1432601) Los Angeles, CA 90028	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		phone-banking hours	44.80	537.60	G2020 \$537.60
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 179.20

**Schedule E
Payments Made**

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/18/2020	
through	12/31/2020	Page 15 of 26
NAME OF FILER		I.D. NUMBER
Konstantine Anthony for Burbank City Council 2020		1426631

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Konstantine Anthony for Burbank City Council 2020

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 PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
ActBlue, LLC Somerville, MA 02144	WEB		donation service fee - October	190.16
ActBlue, LLC Somerville, MA 02144	WEB		donation service fee - November	15.91
City of Burbank Burbank, CA 91502	FIL		candidate statement fee, Pt 2 of 2	1,600.00

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

SUBTOTAL \$ 1,806.07

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	26,396.32
2. Unitemized payments made this period of under \$100	\$	113.00
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.)	TOTAL \$	<u>26,509.32</u>

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Konstantine Anthony for Burbank City Council 2020

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
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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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Facebook, Inc Menlo Park, CA 94025-1452	WEB	ads		250.00
Facebook, Inc Menlo Park, CA 94025-1452	WEB	ads		250.00
Facebook, Inc Menlo Park, CA 94025-1452	WEB	ads		250.00
Facebook, Inc Menlo Park, CA 94025-1452	WEB	ads		37.48
Facebook, Inc Menlo Park, CA 94025-1452	WEB	ads		393.98

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

SUBTOTAL \$ 1,181.46

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

Amounts may be rounded
to whole dollars.

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Konstantine Anthony for Burbank City Council 2020

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 PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Heroku, Inc. San Francisco, CA 94105	WEB		text-banking	79.06
HSG Campaigns Pasadena, CA 91101	LIT		postage + mailhouse	3,170.07
HSG Campaigns Pasadena, CA 91101	LIT		postage + mailhouse	2,926.41
Shant Jaltorossian Pasadena, CA 91108	SAL			174.87
Shant Jaltorossian Pasadena, CA 91108	SAL			278.44

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

SUBTOTAL \$ 6,628.85

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Konstantine Anthony for Burbank City Council 2020

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
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FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
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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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Bianca Noone Palmdale, CA 93551	SAL			349.25
Bianca Noone Palmdale, CA 93551	SAL			715.29
Leah Olbrich Glendale, CA 91202	SAL			366.00
Leah Olbrich Glendale, CA 91202	SAL			523.46
Morgan Perry Woodland Hills, CA 91367	SAL			574.53

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

SUBTOTAL \$ 2,528.53

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Konstantine Anthony for Burbank City Council 2020

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 PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Morgan Perry Woodland Hills, CA 91367	SAL			976.11
Political Data Inc. (PDI) Norwalk, CA 90652	WEB			10.08
RCBS Payroll Services Sacramento, CA 95841	SAL		payroll costs for 10/22 (incorrect amount)	2,947.51
RCBS Payroll Services Sacramento, CA 95841	PRO		payroll services fee	88.00
RCBS Payroll Services Sacramento, CA 95841	SAL		EE & ER PR TAX	568.50

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

SUBTOTAL \$ 4,590.20

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Konstantine Anthony for Burbank City Council 2020

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
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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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
RCBS Payroll Services Sacramento, CA 95841	SAL		EE & ER PR TAX	182.12
RCBS Payroll Services Sacramento, CA 95841	PRO		payroll services fee	40.00
RCBS Payroll Services Sacramento, CA 95841	SAL		EE & ER PR TAX	858.29
RCBS Payroll Services Sacramento, CA 95841	PRO		payroll services fee	283.00
Emerald Snow Sherman Oaks, CA 91423	SAL			123.68

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

SUBTOTAL \$ 1,487.09

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Konstantine Anthony for Burbank City Council 2020

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 PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Emerald Snow Sherman Oaks, CA 91423	SAL			30.59
Strategic Printworks Glendora, CA 91741	LIT			3,480.19
Thomas Pike, Campaign Consultant Murrysville, PA 15668	CNS			2,750.00
Joseph Traina Bellflower, CA 90706	SAL			519.94
Joseph Traina Bellflower, CA 90706	SAL			652.28

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

SUBTOTAL \$ 7,433.00

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Konstantine Anthony for Burbank City Council 2020

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 PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Twilio San Francisco, CA 94105	WEB		text-banking	210.66
Twilio San Francisco, CA 94105	WEB		text-banking	125.49
Vantiv, LLC Symmes Township, OH 45249-1384	WEB		Donation processing fees from October 2020	372.67
Vantiv, LLC Symmes Township, OH 45249-1384	WEB		Donation processing fees from November 2020	32.30

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

SUBTOTAL \$ 741.12

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

Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Konstantine Anthony for Burbank City Council 2020

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
HSG Campaigns Pasadena, CA 91101	LIT postage + mailhouse	3,170.07	0.00	3,170.07	0.00

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

SUBTOTALS \$	3,170.07\$	0.00\$	3,170.07\$	0.00
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Schedule F Summary

- 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 \$** 0.00
- 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 \$** 3,170.07
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** -3,170.07
May be a negative number

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

Amounts may be rounded to whole dollars.

Statement covers period
 from 10/18/2020
 through 12/31/2020

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Konstantine Anthony for Burbank City Council 2020

I.D. NUMBER

1426631

NAME OF AGENT OR INDEPENDENT CONTRACTOR

HSG Campaigns

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) |

* 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
Automated Mailers Lake Forest, CA 92630	LIT			725.00
US Postal Service (USPS) Lake Forest, CA 92630-9998	LIT			2,201.41

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 2,926.41

* 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.

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

Amounts may be rounded to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/18/2020	
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NAME OF FILER

Konstantine Anthony for Burbank City Council 2020

I.D. NUMBER

1426631

NAME OF AGENT OR INDEPENDENT CONTRACTOR

RCBS Payroll Services

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)

* 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
Internal Revenue Service Fresno, CA 93888-0002	SAL	EE & ER PR TAX		568.50
Internal Revenue Service Fresno, CA 93888-0002	SAL	EE & ER PR TAX		182.12
Internal Revenue Service Fresno, CA 93888-0002	SAL	EE & ER PR TAX		858.29

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 1,608.91

* 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.

**Schedule I
Miscellaneous Increases to Cash**

Amounts may be rounded
to whole dollars.

Statement covers period
from 10/18/2020
through 12/31/2020

SCHEDULE I

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I.D. NUMBER
1426631

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Konstantine Anthony for Burbank City Council 2020

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
10/21/2020	RCBS Payroll Services Sacramento, CA 95841	reversal of payroll costs for 10/22 (incorrect amount)	2,947.51

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 2,947.51

Schedule I Summary

- 1. Itemized increases to cash this period. \$ 2,947.51
- 2. Unitemized increases to cash of under \$100 this period. \$ 25.00
- 3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) \$ 0.00
- 4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) **TOTAL \$** 2,972.51