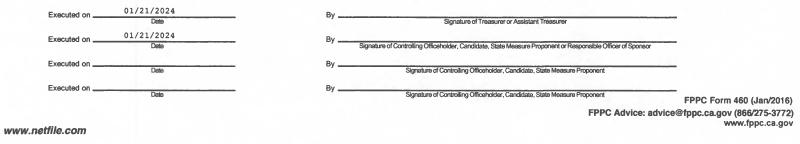
Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)					Date Stamp		orm 460
			Statement covers period	Date of election if applicable:	24	Page .	1 of 22
		fron	n 07/01/2023	(Month, Day, Year)			For Official Use Only
SEE INSTRUCTIONS ON REVERSE		thro	ugh12/31/2023	03/05/2024		ma	Lared 14
. Type of Recipient Commit	ee: All Commi	ittees – Complete	Parts 1, 2, 3, and 4.	2. Type of Statement:	C S S	· · ·	
 Officeholder, Candidate Controll State Candidate Election Con Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Comm 	nmittee	Commit Con Spo (Also Com Primaril Officeho		Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te Amendment (Explain be	man Caral	Quarterly State Special Odd-Y Supplemental Statement - At	/ear Report
8. Committee Information		I.D. NUM 14610		Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S				NAME OF TREASURER			
Myra Demeter for City Cour	cil 2024			Gary Crummitt			
				MAILING ADDRESS 249 E. Ocean Blvd., #0	570		
STREET ADDRESS (NO P.O. BOX)				CITY	STATE	ZIP CODE	AREA CODE/PHON
249 E. Ocean Blvd., #670				Long Beach	CA	90802	
CITY	STATE	ZIP CODE	AREA CODE/PHONE	NAME OF ASSISTANT TREASUR	ER, IF ANY		
Long Beach	CA	90802		Myra Demeter			
MAILING ADDRESS (IF DIFFERENT) No garycrummitt	D. AND STREET	OR P.O. BOX		MAILING ADDRESS			
ger yer dimit ee	STATE	ZIP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHON
CITY	SIATE	ZIF CODE					AREA GODEN HOR

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.



Recipient Committee Campaign Statement Cover Page — Part 2



5. (Officeholder	ог	Candidate	Controlled	Committee
------	--------------	----	-----------	------------	-----------

NAME OF OFFICEHOLDER OR CANDIDATE

Myra Demeter

COMMITTEE NAME

NAME OF TREASURER

COMMITTEE ADDRESS

COMMITTEE NAME

NAME OF TREASURER

COMMITTEE ADDRESS

CITY

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) City Council Member Beverly Hills

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP Beverly Hills CA 90212

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE	
------------------------	--

BALLOT NO. OR LETTER	JURISDICTION

SUPPORT

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

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.

STREET ADDRESS (NO P.O. BOX)

STATE

I.D. NUMBER

YES

I.D. NUMBER

YES

ZIP CODE

CONTROLLED COMMITTEE?

CONTROLLED COMMITTEE?

NO NO

NO

AREA CODE/PHONE

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY

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	
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT

CITY STATE ZIP CODE AREA CODE/PHONE

STREET ADDRESS (NO P.O. BOX)

Attach continuation sheets if necessary

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

Campaign Disclosure Statement						SUMMARY PAGE				
Summary Page		mounts may be round to whole dollars.	ded		ment covers period	CALIFORNIA 460				
,				1	from	07/01/2023				
					through	12/31/2023	Page of2			
SEE INSTRUCTIONS ON REVERSE							I.D. NUMBER			
Myra Demeter for City Council 2024							1461081			
		Column A		Column B	3	Calendar Year Sum	mary for Candidates			
Contributions Received	(TOTAL THIS PERIOD FROMATTACHED SCHEDULES)		CALENDAR YEA TOTAL TODATE	R		e State Primary and			
1. Monetary Contributions Schedule A, Line 3	\$	10,929.00	\$	15,11	14.00		nrough 6/30 7/1 to Date			
2. Loans Received Schedule B, Line 3		10,000.00		10,00	00.00	1/1 0	hrough 6/30 7/1 to Date			
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	20,929.00	\$	25,11	14.00	20. Contributions Received \$	\$			
4. Nonmonetary Contributions Schedule C, Line 3		0.00			0.00	21 Expenditures				
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	20,929.00	\$	25,11	14.00	Made \$	\$			
Expenditures Made						Expenditure Limit	Summary for State			
6. Payments Made Schedule E, Line 4	\$	10,597.42	\$	11,29	91.25	Candidates				
7. Loans Made Schedule H, Line 3		0.00			0.00	22 Cumulativ	a Evpanditurea Madat			
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	10,597.42	\$	11,29	91.25		e Expenditures Made* Voluntary Expenditure Limit)			
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3		0.00			0.00	Date of Election	Total to Date			
10. Nonmonetary Adjustment Schedule C, Line 3		0.00			0.00	(mm/dd/yy)				
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$	10,597.42	\$	11,29	91.25		\$			
Current Cash Statement						//	\$			
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	3,491.17	т	o calculate Column	B, add					
13. Cash Receipts Column A, Line 3 above		20,929.00		mounts in Column /						
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	om Column B of yo	our last	*Amounts in this section m reported in Column B.	nay be different from amounts			
15. Cash Payments Column A, Line 8 above		10,597.42		port. Some amour olumn A may be ne						
16. ENDING CASH BALANCE	\$	13,822.75	fiç	gures that should b	be					
If this is a termination statement, Line 16 must be zero.			ре	ubtracted from pre priod amounts. If the first report being	his is					
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	fo	r this calendar yea	ar, only					
Cash Equivalents and Outstanding Debts			fro	om Lines 2, 7, and ny).						
18. Cash Equivalents See instructions on reverse	\$	0.00								
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	10,000.00								
							FPPC Form 460 (Jan/2016			

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

Monetary	Contributions Received		its may be rounded whole dollars.	Statement cov from07/01/2		CALIFORNIA FORM	\$60 schedule
SEE INSTRUCTIO	DNS ON REVERSE			through12/31/2	023	Page4	of
NAME OF FILER	······································			- <u></u>		I.D. NUMBER	
Myra Demete	r for City Council 2024					1461081	
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 CALENDAR Y (JAN. 1 - DEC	EAR TO	ELECTION O DATE EQUIRED)
12/30/2023	Alan H. Kaye DDS A Professional Corporation 436 N. Roxbury Dr. Beverly Hills, CA 90210	☐IND ☐COM ☑OTH ☐PTY ☐SCC		250.00		250.00 G2024	\$250.0
12/23/2023	Sandra Aronberg 9663 Santa Monica Boulevard Suite 1260 Beverly Hills, CA 90210	IND COM OTH PTY SCC	Retired Retired	100.00		100.00 G2024	\$100.0
11/27/2023	Elliott J. Berkowowitz Forest Hills, NY 11375	XIND COM OTH PTY SCC	Retired N/A	100.00		100.00 G2024	\$100.0
11/23/2023	Janis Black Warner Laguna Beach, CA 92651	IND COM OTH PTY SCC	Real Estate Investor Designer Janis Black Warner	500.00	Ę	500.00 G2024	\$500.0
11/13/2023	Rosemary Elperin Los Angeles, CA 90035		Retired Retired	150.00	,	50.00 G2024	\$150.0
			SUBTOTAL \$	1,100.00			
. Amount re	A Summary ceived this period – itemized monetary contributions. I Schedule A subtotals.)		\$	10,623.00	IND-	ributor Codes Individual – Recipient Commit (other than PTY (
. Total mone	ceived this period – unitemized monetary contributions stary contributions received this period. 1 and 2. Enter here and on the Summary Page, Colun				PTY-	 Other (e.g., busin Political Party Small Contributor 	ness entity)

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

Monetary	A (Continuation Sheet) Contributions Received	Amounts may be rounded to whole dollars.		Statement cove from07/01/ through12/31/	2023 Pag	SCHEDULE A (CON CALIFORNIA FORM 460 Page 5 of 22 I.D. NUMBER 1461081		
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)	PERE	ELECTION DATE EQUIRED)	
07/04/2023	Erica Felsenthal Beverly Hills, CA 90212	IND COM OTH PTY SCC	Psychologist Erica Felsenthal	100.00		0 G2024	\$218.00	
12/03/2023	Erica Felsenthal Beverly Hills, CA 90212	IND COM OTH PTY SCC	Psychologist Erica Felsenthal	118.00	218.0	G2024	\$218.00	
11/29/2023	Isaac Gabai 9454 Wilshire Blvd 525 Beverly Bills, CA 90212		Business Owner Isaac Gabai	100.00	100.0	G2024	\$100.00	
12/01/2023	Brian Goldsmith Beverly Hills, CA 90210	IND COM OTH PTY SCC	Consultant Kona Media LLC	250.00	250.0	G2024	\$250.00	
07/03/2023	Laurie Goldstein New York, NY 10128	IND COM OTH PTY SCC	Retired Retired	250.00	250.00	G2024	\$250.00	
			SUBTOTAL	\$ 818.00				

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

	A (Continuation Sheet) Contributions Received	Amounts may to whole		from07/01/	07/01/2023 F		SCHEDULE A (CONT.) ALIFORNIA FORM 460		
NAME OF FILER						NUMBER			
Myra Demeter	for City Council 2024				14	51081			
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 DATI CALENDAR YEAR (JAN. 1 - DEC. 31)	T	ELECTION D DATE EQUIRED)		
07/26/2023	Bernard J. Hamilton Beverly Hills, CA 90212	IND COM OTH PTY SCC	Retired N/A	450.00	450.0	0 G2024	\$450.0		
08/06/2023	Carolyn Hamilton Beverly Hills, CA 90212	IND COM OTH PTY SCC	Retired N/A	450.00	450.0	0 G2024	\$450.0		
12/18/2023	Ada Horwich Beverly Hills, CA 90210	IND COM OTH PTY SCC	Retired Retired	500.00	500.0	0 G2024	\$500.0		
12/10/2023	Andrew Kadar Beverly Hills, CA 90212	IND COM OTH PTY SCC	Medical Doctor Andrew Kadar	500.00	500.0	0 G2024	\$500.00		
12/12/2023	Michael B. Kaplan 9350 Wilshire Blvd. Ste. 402 Beverly Hills, CA 90212	IND COM OTH PTY SCC	Real Estate Arka Properties Group Inc.	450.00	450.0	0 G2024	\$450.00		
			SUBTOTALS	2,350.00					

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

	hedule A (Continuation Sheet) netary Contributions Received		be rounded dollars.	Statement cove from07/01/ through12/31/	22023 Page	SCHEDULE A (CONT CALIFORNIA FORM 460 Page 7_ of 22_ I.D. NUMBER		
Myra Demeter	for City Council 2024				146	L081		
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)	тс	ELECTION DATE EQUIRED)	
07/17/2023	Theresa Kaplan Beverly Hills, CA 90210	IND COM OTH PTY SCC	Retired Retired	450.00		G2024	\$450.00	
07/29/2023	Karen Kay Beverly Hills, CA 90210	IND COM OTH PTY SCC	Psychologist Karen Kay	250.00	250.00	G2024	\$250.00	
07/29/2023	Stuart Kuschner Beverly Hills, CA 90210	IND COM OTH PTY SCC	Physician Cedars Sinai Medical Center	250.00	250.00	G2024	\$250.00	
07/16/2023	Elliot Landaw Beverly Hills, CA 90212	IND COM OTH PTY SCC	Retired Retired	100.00	100.00	G2024	\$100.00	
12/18/2023	Rona Leuin Beverly Hills, CA 90211	IND COM OTH PTY SCC	Not Empoyed N/A	500.00	500.00	G2024	\$500.00	
			SUBTOTAL	\$ 1,550.00				

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

Schedule A (Continuation Sheet) Monetary Contributions Received		Amounts may to whole		Statement cove from07/01/ through12/31/	/2023 Page	SCHEDULE A (CONT CALIFORNIA FORM 460 Page 8 of 22		
	for City Council 2024				1461			
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)	ТС	ELECTION D DATE EQUIRED)	
12/10/2023	Michael Libow Beveriy Hills, CA 90210	© IND □ COM □ OTH □ PTY □ SCC	Real Estate Compass	180.00		G2024	\$180.00	
08/23/2023	John A. Lipinski Beverly Hills, CA 90211	IND COM OTH PTY SCC	Attorney John A. Lapinski	250.00	250.00	G2024	\$250.00	
12/20/2023	Michael Ma Richmond, CA 94805	COM COM OTH PTY SCC	Owner CreatorDAO	500.00	500.00	G2024	\$500.00	
12/30/2023	Francis S. Maas Beverly Hills, CA 90210		Retired N/A	500.00	500.00	G2024	\$500.00	
0870472023	Virginia Maas Beverly Hills, CA 90210	IND COM OTH PTY SCC	Retired Retired	450.00	450.00	G2024	\$450.00	
			SUBTOTALS	1,880.00	Station States			

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

Schedule A (Continuation Sheet) Monetary Contributions Received		Amounts may to whole		Statement cover from07/01/ through12/31/	/2023 /2023 Pag	SCHEDULE A (CONT CALIFORNIA FORM 460 Page 9 of 22		
Myra Demeter	for City Council 2024				146	1081		
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)	T	ELECTION O DATE EQUIRED)	
12/17/2023	Robinetta Campbell Mack Los Angeles, CA 90016	IND COM OTH PTY SCC	Retired N/A	200.00	200.0	0 G2024	\$200.0	
12/22/2023	Nasser Matloob Beverly Hills, CA 90210	IND COM OTH PTY SCC	Real Estate Broker Matloob Nasser	100.00	100.0	G2024	\$100.0	
12/04/2023	Elisa Newman Los Angeles, CA 90024	COM COM OTH PTY SCC	Medical Doctor Elisa Newman	100.00	100.0	G2024	\$100.0	
12/16/2023	Honey Pietruszka Beverly Hills, CA 90210	IND COM OTH PTY SCC	Psychoanalyst Boney Pietruszka PSY. D.	100.00	100.00	G2024	\$100.0	
12/20/2023	Lisa Polak Beverly Hills, CA 90210	IND COM OTH PTY SCC	Piàno Instructor Lisa Polak	500.00	500.00	G2024	\$500.0	
			SUBTOTALS	1,000.00				

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

	chedule A (Continuation Sheet) Sonetary Contributions Received Amounts may be rounded to whole dollars.			Statement cover from07/01/ through12/31/	2023 2023	SCHEDULE A (CONT.) CALIFORNIA 460 FORM Page 10 of 22		
	for City Council 2024					.D. NUMBER		
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 D CALENDAR YEA (JAN. 1 - DEC. 3	R 1	RELECTION TO DATE REQUIRED)	
11/21/2023	Joel Realberg Bala Cynwyd, PA 19004	IND COM OTH PTY SCC	Retired Retired	125.00	125	.00 G2024	\$125.0(
11/28/2023	Gary Ross Beverly Hills, CA 90212	IND COM OTH PTY SCC	Attorney Ross and Morrison	500.00	500	.00 G2024	\$500.00	
12/17/2023	Tony Sikavi Los Angeles, CA 90024	IND COM OTH PTY SCC	Consulting TS Analytec inc	100.00	100	.00 G2024	\$100.00	
12/18/2023	William Simon Los Angeles, CA 90005	IND COM OTH PTY SCC	Executive Search Korn Ferry	250.00	250	.00 G2024	\$250.00	
12/26/2023	Jay Solnit 414 N Camden Dr Ste 950 Beverly Hills, CA 90210	IND COM OTH PTY SCC	Endodontist Jay Solnit DDS	100.00	100	.00 G2024	\$100.00	
			SUBTOTALS	1,075.00				

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

Schedule A (Continuation Sheet) Monetary Contributions Received		Amounts may to whole (Statement cove	CAL	SCHEDULE A (CONT.) CALIFORNIA FORM 460		
				through 12/31/	2023 Page	<u> 11 o</u>	f	
NAME OF FILER Myra Demeter	for City Council 2024				I.D. N 1463	UMBER		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTERID, 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)	TC	ELECTION DATE EQUIRED)	
11/15/2023	Cynthia Trangsrud Beverly Hills, CA 90212	IND COM OTH PTY SCC	Retired Retired	100.00	100.00	G2024	\$100.0	
12/17/2023	Herbert J. Young Beverly Hills, CA 90212	IND COM OTH PTY SCC	Retired N/A	300.00	300.00	G2024	\$300.0	
10/07/2023	Alice Zekaria Beverly Hills, CA 90212	IND COM OTH PTY SCC	Retired Retired	450.00	450.00	G2024	\$450.0	
		DIND COM OTH PTY SCC						
			SUBTOTAL	\$ 850.00				

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

chedule B - Part 1 Amounts may be rounded to whole dollars.					Statement cov	ers period 1/2023	CALIFORN FORM	11A 460
SEE INSTRUCTIONS ON REVERSE					through12/3	1/2023	Page12	of
NAME OF FILER		·····					I.D. NUMBER	
Myra Demeter for City Council 2024							1461081	
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 PAI OR FORGIVE THIS PERIO	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(9) CUMULATIVE CONTRIBUTIONS TO DATE
Myra Lee Demeter Beverly Hills, CA 90212				PAID \$0_0 FORGIVEN		0_00 % RATE	\$ <u>10,000.00</u>	CALENDAR YEAR \$ PER ELECTION**
		\$0.00	\$ 10,000.00	\$0.0	0 12/31/2025 DATE DUE	\$0.00	11/16/2023 DATE INCURRED	\$ <u>G2025 10,000.0</u>
†□ IND □ COM □ OTH □ PTY □ SCC		\$	\$	PAID S FORGIVEN S	\$ 	% RATE	\$	CALENDAR YEAR \$ PER ELECTION ** \$
				PAID S FORGIVEN	\$	% RATE	\$	CALENDAR YEAR \$ PER ELECTION ***
		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
		SUBTOTALS \$	10,000.00	0.	00\$ 10,000.00	0.00		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
. Loans received this period				\$	10,000.00			
(Total Column (b) plus unitemized loans Loans paid or forgiven this period (Total Column (c) plus loans under \$100 (Include loans paid by a third party that	of less than \$100.) paid or forgiven.) are also itemized on Sched	ule A.)		\$		INE CC OT PT	ontributor Codes D – Individual OM – Recipient Co (other than F 'H – Other (e.g., Y – Political Party C – Small Contrib	PTY or SCC) business entity)
Net change this period. (Subtract Line Enter the net here and on the Summary	rage, column A, Line Z.			NET \$	10,000.00 May be a negative number)			
*Amounts forgiven or paid by another party also m ** If required.	lust be reported on Schedule A.	J			-		FPPC Fo	orm 460 (Jan/201

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

Schedule E	Amounts may be rounded	Statement covers period	CALIFORNIA 460
	to whole dollars.	from07/01/2023	FORM 400
SEE INSTRUCTIONS ON REVERSE		through12/31/2023	Page of2
NAME OF FILER			I.D. NUMBER
Myra Demeter for City Council 2024			1461081

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 nonnonetary)*

 CVC
 civic donations

 FL
 candidate filling/ballot fees
- FND fundraising events
- ND independent expenditure supporting/opposing others (explain)*
- LEG legal defense
- LIT campaign literature and mailings

- PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting)
- PRT print ads

MBR member communications

OFC office expenses

PET petition circulating

MTG meetings and appearances

- 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 Bergmann Zwerdling Direct 1350 Connecticut Ave. NW #400 CMP 284.94 Washington, DC 20036 Bergmann Zwerdling Direct 226.88 CMP 1350 Connecticut Ave. NW #400 Washington, DC 20036 Bergmann Zwerdling Direct 1350 Connecticut Ave. NW #400 Washington, DC 20036 Website/Postcard/Walk piece 891.62 * Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 1,403.44

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	10,547.42
2. Unitemized payments made this period of under \$100	\$	50.00
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.)	OTAL \$	10,597.42

FPPC Form 460 (Jan/2016) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772) www.fppc.ca.gov

Schedule E (Continuation Sheet) Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER	Amounts may b to whole do			Statement covers period from 07/01/2023 through 12/31/2023	CALIFORNIA 460 FORM 460
Myra Demeter for City Council 2024					1461081
CODES: If one of the following codes accurately describ CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundralsing events IND 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 circu PHO phone banks POL polling and s POS postage, deli	munications d appearance ses lating survey resear very and me	35	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and prod TRC candidate travel, lodging, and TRS staff/spouse travel, lodging,	luction costs d meals and meals s of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DES	CRIPTION OF PAYMENT	AMOUNT PAID
Bergmann Zwerdling Direct 1350 Connecticut Ave. NW #400 Washington, DC 20036		СМР			2,919.38
Bergmann Zwerdling Direct 350 Connecticut Ave. NW #400 Rashington, DC 20036		LIT			796.99
Bergmann Zwerdling Direct 350 Connecticut Ave. NW #400 Jashington, DC 20036		СМР			290.00
Citi Cards World Trade Center #100 .ong Beach, CA 90802			Credit Card Payme	nt - See Schedule G	1,544.00
Citi Cards World Trade Center #100 .ong Beach, CA 90802			Credit Card Payme	nt - See Schedule G	439.53
* Payments that are contributions or independent expenditures must als	so be summarized on s	Schedule D.		SUI	BTOTAL \$ 5,989.90

Schedule E (Continuation Sheet) Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER	Amounts may be rounded to whole dollars.			Sta from throug	atement covers period 07/01/2023 gh 12/31/2023	SCHEDULE E (CONT.) CALIFORNIA 460 FORM 22 Page 15 of 22 I.D. NUMBER	
Myra Demeter for City Council 2024 CODES: If one of the following codes accurately describe CMP campaign paraphemalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundralsing events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LT 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	munications appearance ses ating urvey researd very and mes	S	RAD RFD SAL TEL TRC TRS TSF VOT	describe the payment radio airtime and production returned contributions campaign workers' salaries t.v. or cable airtime and pro- candidate travel, lodging, ar staff/spouse travel, lodging transfer between committee voter registration information technology cosl	n costs s duction costs nd meals , and meals es of the same	
NAME AND ADDRESS OF PAYEE (IF COMMITTE, ALSO ENTER I.D. NUMBER)		CODE C	DR D	ESCRIPTION			AMOUNT PAID
Crummitt & Associates, Inc. 249 E. Ocean Blvd., #670 Long Beach, CA 90802		PRO					370.00
Crummitt & Associates, Inc. 249 E. Ocean Blvd., #670 Long Beach, CA 90802		PRO					370.00
Crummitt & Associates, Inc. 249 E. Ocean Blvd., #670 Long Beach, CA 90802		PRO					520.00
Crummitt & Associates, Inc. 249 E. Ocean Blvd., #670 Long Beach, CA 90802		PRO					520.00
Crummitt & Associates, Inc. 249 E. Ocean Blvd., #670 Long Beach, CA 90802		PRO					520.00
* Payments that are contributions or independent expenditures must als	o be summarized on S	Schedule D.			SL	JBTOTAL \$	2,300.00

			Statement covers period from07/01/2023	CALIFORNIA FORM 460
			through <u>12/31/2023</u>	Page 16 of 22
				I.D. NUMBER
				1461081
MBR member com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and 3 POS postage, del	munications d appearance ises lating survey resear ivery and me	es rch essenger services	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and pro TRC candidate travel, lodging, ar TRS staff/spouse travel, lodging,	a costs duction costs ad meals and meals as of the same candidate/sponsor
	CODE	OR DES	CRIPTION OF PAYMENT	AMOUNT PAID
	PRO			520.00
		Credit Card Proce	essing Fees	16.75
		Credit Card Proce	essing Fees	2.75
		Credit Card Proce	essing Fees	5.00
		Credit Card Proce	essing Fees	20.75
	to whole do acribes the payment, y MBR member com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and s POS postage, del PRO professional	MBR member communications MTG meetings and appearance OFC office expenses PET petition circulating PHO phone banks POL polling and survey resear POS postage, delivery and me PRO professional services (leg PRT print ads CODE	scribes the payment, you may enter the code. Othe MER 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 CODE OR DES PRO PRO Credit Card Proce	Amounts may be rounded to whole dollars. from

Schedule E (Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.			Statement covers period from07/01/2023	CALIFORI FORM	
SEE INSTRUCTIONS ON REVERSE				through 12/31/2023	Page 17	of <u>22</u>
NAME OF FILER					I.D. NUMBER	
Myra Demeter for City Council 2024					1461081	
CODES: If one of the following codes accurately describes the CMP campaign paraphemalia/misc. MBI CNS campaign consultants MTR CTB contribution (explain nonmonetary)* OFC CVC civic donations PET FIL candidate filing/ballot fees PHC FND fundraising events POC IND independent expenditure supporting/opposing others (explain)* POC LEG legal defense PRC LIT campaign literature and mailings PRT	R member comr G meetings and C office expens petition circula phone banks polling and su postage, delii professional s	nunications appearances ses ating urvey researc very and mes	3	RAD radio airtime and productio RFD radio airtime and production RFD returned contributions SAL campaign workers' salarie TEL t.v. or cable airtime and pri TRC candidate travel, lodging, a TRS staff/spouse travel, lodging TSF transfer between committe VOT voter registration WEB information technology cos	n costs s oduction costs nd meals I, and meals es of the same	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE O	R DES	CRIPTION OF PAYMENT		AMOUNT PAID
E-Fundraising Connections 2831 G Street, #200 Sacramento, CA 95816			Credit Card Proce	ssing Fees	-	23.50
E-Fundraising Connections 2831 G Street, #200 Sacramento, CA 95816			Credit Card Proce	ssing Fees		20.75
E-Fundraising Connections 2831 G Street, #200 Sacramento, CA 95816			Credit Card Proce	ssing Fees		20.75
E-Fundraising Connections 2831 G Street, #200 Sacramento, CA 95816			Credit Card Proce	ssing Fees		0.55
E-Fundraising Connections 2831 G Street, #200 Sacramento, CA 95816			Credit Card Proce	ssing Fees		0.55
* Payments that are contributions or independent expenditures must also be s	summarized on S	chedule D.		SI	UBTOTAL \$	66.10

Schedule E (Continuation Sheet) Payments Made	Amounts may b to whole do		Statement covers period from 07/01/2023 through 12/31/2023	SCHEDULE E (CONT.) CALIFORNIA 460 FORM 460 Page 18 of 22
Myra Demeter for City Council 2024	the neumant u	our mouse antes the code. Othe	nuting departing the neuronal	1461081
CODES: If one of the following codes accurately describe CMP campaign paraphemalia/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.com MTG meetings and OFC office expen PET petition circul PHO phone banks POL polling and s POS postage, deli	munications 1 appearances ses ating	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and prod TRC candidate travel, lodging, and TRS staff/spouse travel, lodging,	luction costs d meals and meals s of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR DES	SCRIPTION OF PAYMENT	AMOUNT PAID
E-Fundraising Connections 2831 G Street, #200 Sacramento, CA 95816		Credit Card Proce	essing Fees	7.25
E-Fundraising Connections 2831 G Street, #200 Sacramento, CA 95816		Credit Card Proce	essing Fees	5.00
E-Fundraising Connections 2831 G Street, #200 Sacramento, CA 95816		Credit Card Proce	essing Fees	0.73
E-Fundraising Connections 2831 G Street, #200 Sacramento, CA 95816		Credit Card Proce	essing Fees	2.75
E-Fundraising Connections 2831 G Street, #200 Sacramento, CA 95816		Credit Card Proce	essing Fees	6.13
* Payments that are contributions or independent expenditures must als	o be summarized on s	Schedule D.	SUI	BTOTAL \$ 21.86

Schedule E (Continuation Sheet) Payments Made	Amounts may b to whole do		Statement covers period from07/01/2023	CALIFORNIA FORM 460
SEE INSTRUCTIONS ON REVERSE			through12/31/2023	Page 19 of 22
VAME OF FILER				I.D. NUMBER
Myra Demeter for City Council 2024				1461081
CODES: If one of the following codes accurately descr CMP campaign paraphemalia/misc. CMS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND independent expenditure supporting/opposing others (explain)* Ideal defense IT campaign literature and mailings	MBR member com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and a POS postage, del	munications d appearances ses lating	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and prod TRC candidate travel, lodging, and TRS staff/spouse travel, lodging, a	uction costs I meals and meals s of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR DES	SCRIPTION OF PAYMENT	AMOUNT PAID
E-Fundraising Connections 2831 G Street, #200 Sacramento, CA 95816		Credit Card Proc	essing Fees	23.00
-Fundraising Connections 1831 G Street, #200 acramento, CA 95816		Credit Card Proc	essing Fees	5.00
-Fundraising Connections 831 G Street, #200 acramento, CA 95816		Credit Card Proce	essing Fees	23.00
-Fundraising Connections 831 G Street, #200 acramento, CA 95816		Credit Card Proce	essing Fees	17.56
-Fundraising Connections 831 G Street, #200 acramento, CA 95816		Credit Card Proce	essing Fees	9.96
Payments that are contributions or independent expenditures must	also be summarized on	Schedule D.	SUE	3TOTAL \$ 78.52

Schedule E (Continuation Sheet) Payments Made	Amounts may b to whole do		Statement covers period from 07/01/2023 through 12/31/2023	SCHEDULE E (CONT.) CALIFORNIA 460 FORM 22 of 22
NAME OF FILER				I.D. NUMBER
Myra Demeter for City Council 2024				1461081
CODES: If one of the following codes accurately describe CMP campaign paraphemalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events ND 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 circu PHO phone banks POL polling and s POS postage, deli	munications d appearances ses lating	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and pro TRC candidate travel, lodging, an TRS staff/spouse travel, lodging,	a costs duction costs ad meals and meals as of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR DESC	CRIPTION OF PAYMENT	AMOUNT PAID
E-Fundraising Connections 2831 G Street, #200 Sacramento, CA 95816		Credit Card Proces	ssing Fees	31.60
E-Fundraising Connections 2831 G Street, #200 Sacramento, CA 95816		Credit Card Proces	ssing Fees	16.75
E-Fundraising Connections 2831 G Street, #200 Sacramento, CA 95816		Credit Card Proces	ssing Fees	23.00
E-Fundraising Connections 2831 G Street, #200 Sacramento, CA 95816		Credit Card Proces	ssing Fees	46.00
E-Fundraising Connections 2831 G Street, #200 Sacramento, CA 95816		Credit Card Proces	ssing Fees	5.00
* Payments that are contributions or independent expenditures must als	so be summarized on s	Schedule D.	SU	BTOTAL \$ 122.35

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 from07/01/2023	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE		through 12/31/2023	Page 21 of 22
NAME OF FILER			I.D. NUMBER
Myra Demeter for City Council 2024			1461081
NAME OF AGENT OR INDEPENDENT CONTRACTOR			
Bergmann Zwerdling Direct			
CODES: If one of the following codes accurately describes	the payment, you may enter the cod	e. Otherwise, describe the paymen	t.
and the first second seco	IBR member communications	RAD radio airtime and production	costs
	/ITG meetings and appearances	RFD returned contributions	
	OFC office expenses	SAL campaign workers' salaries	
	ET petition circulating	TEL t.v. or cable airtime and prod	
FIL candidate filing/ballot fees P	HO phone banks	TRC candidate travel, lodging, and	d meals

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

POL polling and survey research

PRT print ads

- - 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.

ND independent expenditure supporting/opposing others (explain)*

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 323 N. Crescent Dr. Beverly Bills, CA 90210	POS		234.03
Attach additional information on appropriately labeled continuation sheets.			TOTAL* \$ 234.03

* 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.

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

www.netfile.com

FND fundraising events

LIT campaign literature and mailings

LEG legal defense

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)	Amounts may be rounded to whole dollars.	Statement covers per from07/01/2023	CALIFORNIA 160	
SEE INSTRUCTIONS ON REVERSE		through 12/31/2023	Page 22 of 22	
NAME OF FILER	I.D. NUMBER			
Myra Demeter for City Council 2024		1461081		
NAME OF AGENT OR INDEPENDENT CONTRACTOR			••••	
Citi Cards				
CODES: If one of the following codes accurately describes	the payment, you may enter the cod	e. Otherwise, describe the pa	ayment.	
CNS campaign consultants N CTB contribution (explain nonmonetary)*	IBR member.communications ITG meetings and appearances OFC office expenses ET petition circulating	RAD radio airtime and pro RFD returned contribution SAL campaign workers' s TEL t.v. or cable airtime a	s alaries	

PHO phone banks

PRT print ads

POL polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

TEI	t v	or	cable	airtime	and	production	cos
	ι.ν.	UI.	Capie	anume	anu	production	cos

- 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 1.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Beverly Hills Weekly 140 S. Beverly Dr., #201 Beverly Hills, CA 90212	PRT		400.00
Political Data Intelligence 3780 Kilroy Airport Way, #200 Long Beach, CA 90806	Voter Fi	iles	1,250.00
U.S. Postal Service 323 N. Crescent Dr. Beverly Bills, CA 90210	POS		294.00
Attach additional information on appropriately labeled continuation sl	heets.		TOTAL* \$ 1,944.00

* 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.

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

www.netfile.com

FIL candidate filing/ballot fees

LIT campaign literature and mailings

IND independent expenditure supporting/opposing others (explain)*

FND fundraising events

LEG legal defense