Reciproent Committee
Campaign Statement
Cover Page
(Government Code Sections 84200-84216.5)

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.
   [X] Primarily Formed Ballot Measure Committee
   [X] Primarily Formed Candidate/Officeholder Committee

2. Type of Statement:
   [X] Quarterly Statement
   [X] Semi-annual Statement
   [X] Termination Statement (Also file a Form 410 Termination)

3. Committee Information
   I.D. NUMBER
   1388878
   COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE):
   No on RRR, Neighborhoods Against the DWP Power Grab, a coalition of Environmental Groups, Consumer Advocacy Organizations, and Employee Organizations
   STREET ADDRESS (NO P.O. BOX):
   CITY
   STATE
   ZIP CODE
   AREA CODE/PHONE
   Los Angeles
   CA
   90020
   (213) 487-9887
   MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX:
   CITY
   STATE
   ZIP CODE
   AREA CODE/PHONE
   Sacramento
   CA
   95814
   OPTIONAL: FAX / EMAIL ADDRESS
   info@olsonhagel.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.
   Executed on 12/19/17
   Date
   Executed on 12/19/17
   Date
   Executed on
   Date
   Executed on
   Date

By
Signature of Controlling Officeholder, Candidate, State Measure Proponent
By
Signature of Controlling Officeholder, Candidate, State Measure Proponent
By
Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPCC Form 460 (Jan/2016)
FPCC Advice: advice@fpcc.ca.gov (866/276-3772)
www.fpcc.ca.gov
5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

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

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

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.

<table>
<thead>
<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF TREASURER</td>
<td>CONTROLLED COMMITTEE?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>COMMITTEE ADDRESS</th>
<th>STREET ADDRESS (NO P.O. BOX)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CITY</td>
<td>STATE</td>
</tr>
</tbody>
</table>

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE
City of Los Angeles Department of Water and Power (DWP) Charter Amendment.

BALLOT NO. OR LETTER JURISDICTION

RRR City of Los Angeles

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

7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
<th>SUPPORT</th>
<th>OPPOSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
<td>SUPPORT</td>
<td>OPPOSE</td>
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<td>OFFICE SOUGHT OR HELD</td>
<td>SUPPORT</td>
<td>OPPOSE</td>
</tr>
</tbody>
</table>

Attach continuation sheets if necessary
Contributions Received

1. Monetary Contributions ........................................... Schedule A, Line 3 $18,000.00 $18,000.00
2. Loans Received ....................................................... Schedule B, Line 3 $0.00 $0.00
3. SUBTOTAL CASH CONTRIBUTIONS ......................... Add Lines 1 + 2 $18,000.00 $18,000.00
4. Nonmonetary Contributions ........................................... Schedule C, Line 3 $0.00 $0.00
5. TOTAL CONTRIBUTIONS RECEIVED....................... Add Lines 3 + 4 $18,000.00 $18,000.00

Expenditures Made

6. Payments Made ....................................................... Schedule F, Line 4 $18,000.00 $18,000.00
7. Loans Made .......................................................... Schedule H, Line 3 $0.00 $0.00
8. SUBTOTAL CASH PAYMENTS ................................. Add Lines 6 + 7 $18,000.00 $18,000.00
9. Accrued Expenses (Unpaid Bills) ................................ Schedule F, Line 3 $-18,000.00 $0.00
10. Nonmonetary Adjustment ......................................... Schedule C, Line 3 $0.00 $0.00
11. TOTAL EXPENDITURES MADE ................................. Add Lines 8 + 9 + 10 $0.00 $18,000.00

Current Cash Statement

12. Beginning Cash Balance ........................................... Previous Summary Page, Line 16 $0.00
13. Cash Receipts ....................................................... Column A, Line 3 above $18,000.00
14. Miscellaneous Increases to Cash ................................ Schedule I, Line 4 $0.00
15. Cash Payments ........................................................ Column A, Line 8 above $18,000.00
16. ENDING CASH BALANCE ........................................ Add Lines 12 + 13 + 14, then subtract Line 15 $0.00

Cash Equivalents and Outstanding Debts

17. LOAN GUARANTEES RECEIVED ......................... Schedule B, Part 2 $0.00
18. Cash Equivalents .................................................... See instructions on reverse $0.00
19. Outstanding Debts .................................................. Add Line 2 + Line 9 in Column A above $0.00

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).

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

Expenditure Limit Summary for State Candidates

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

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

  / / $  
  / / $ 

*Amounts in this section may be different from amounts reported in Column B.
## Schedule A
### Monetary Contributions Received

**Amounts may be rounded to whole dollars.**

**Statement covers period**
- **from:** 01/01/2017
- **through:** 12/07/2017

**NAME OF FILER**
No on RRR, Neighborhoods Against the DWP Power Grab, a coalition of Environmental Groups, Consumer Advocacy Organizations, and Employee Organizations

**I.D. NUMBER**
1388878

### Date Received

<table>
<thead>
<tr>
<th>Date Received</th>
<th>Full Name, Street Address and Zip Code of Contributor</th>
<th>Contributor Code *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>Amount Received This Period</th>
<th>Cumulative To Date Calendar Year (Jan. 1 - Dec. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/04/2017</td>
<td>American Federation of State, County and Municipal Employees, AFL-CIO, Council 36 PAC (IDB 76/152) Los Angeles, CA 90020</td>
<td>IND</td>
<td>COM</td>
<td>9,000.00</td>
<td>9,000.00</td>
<td></td>
</tr>
<tr>
<td>12/04/2017</td>
<td>Service Employees International Union Local 721 CTW, CLC Issues and Initiatives (ID## 891044) Los Angeles, CA 90017</td>
<td>IND</td>
<td>COM</td>
<td>9,000.00</td>
<td>9,000.00</td>
<td></td>
</tr>
</tbody>
</table>

**Schedule A Summary**

1. Amount received this period -- itemized monetary contributions.
   (Include all Schedule A subtotals.) .......................................................... $ 18,000.00

2. Amount received this period -- unitized monetary contributions of less than $100 ........................................ $ 0.00

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ........................................ TOTAL $ 18,000.00

---

*S Contributor Codes
- IND - Individual
- COM - Recipient Committee (other than PTY or SCC)
- OTH - Other (e.g., business entity)
- PTY - Political Party
- SCC - Small Contributor Committee
Schedule E Payments Made

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No on RRR, Neighborhoods Against the DWP Power Grab, a coalition of Environmental Groups, Consumer Advocacy Organizations, and Employee Organizations

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

<table>
<thead>
<tr>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>CMP</td>
<td>campaign paraphernalia/misc.</td>
</tr>
<tr>
<td>CNS</td>
<td>campaign consultants</td>
</tr>
<tr>
<td>CTB</td>
<td>contribution (explain nonmonetary)*</td>
</tr>
<tr>
<td>CVC</td>
<td>civic donations</td>
</tr>
<tr>
<td>FIL</td>
<td>candidate filing/ballot fees</td>
</tr>
<tr>
<td>FND</td>
<td>fundraising events</td>
</tr>
<tr>
<td>IND</td>
<td>independent expenditure supporting/opposing others (explain)*</td>
</tr>
<tr>
<td>LEG</td>
<td>legal defense</td>
</tr>
<tr>
<td>LIT</td>
<td>campaign literature and mailings</td>
</tr>
<tr>
<td>MER</td>
<td>member communications</td>
</tr>
<tr>
<td>MTG</td>
<td>meetings and appearances</td>
</tr>
<tr>
<td>OFC</td>
<td>office expenses</td>
</tr>
<tr>
<td>PET</td>
<td>petition circulating</td>
</tr>
<tr>
<td>PHD</td>
<td>phone banks</td>
</tr>
<tr>
<td>POL</td>
<td>polling and survey research</td>
</tr>
<tr>
<td>POS</td>
<td>postage, delivery and messenger services</td>
</tr>
<tr>
<td>PRO</td>
<td>professional services (legal, accounting)</td>
</tr>
<tr>
<td>PRT</td>
<td>print ads</td>
</tr>
<tr>
<td>RAD</td>
<td>radio airtime and production costs</td>
</tr>
<tr>
<td>RDF</td>
<td>returned contributions</td>
</tr>
<tr>
<td>SAL</td>
<td>campaign workers' salaries</td>
</tr>
<tr>
<td>TEL</td>
<td>t.v. or cable airtime and production costs</td>
</tr>
<tr>
<td>TRC</td>
<td>candidate travel, lodging, and meals</td>
</tr>
<tr>
<td>TRS</td>
<td>staff/spouse travel, lodging, and meals</td>
</tr>
<tr>
<td>TSF</td>
<td>transfer between committees of the same candidate/sponsor</td>
</tr>
<tr>
<td>VOT</td>
<td>voter registration</td>
</tr>
<tr>
<td>WEB</td>
<td>information technology costs (internet, e-mail)</td>
</tr>
</tbody>
</table>

NAME AND ADDRESS OF PAYEE

(PREPARED BY, ALSO ENTER I.D. NUMBER)

David Binder Research
San Francisco, CA 94102

<table>
<thead>
<tr>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>POL</td>
<td></td>
<td>18,000.00</td>
</tr>
</tbody>
</table>

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

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ........................................ $ 18,000.00
2. Unitemized payments made this period of under $100 ........................................................................ $ 0.00
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 $ 18,000.00

SUBTOTAL $ 18,000.00

PPC Form 460 (Jan/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
www.fppc.ca.gov
**Schedule F**  
Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

**NAME OF FILER**  
No on RRR, Neighborhoods Against the DWP Power Grab, a coalition of Environmental Groups, Consumer Advocacy Organizations, and Employee Organizations

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

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

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF CREDITOR</th>
<th>CODE OR DESCRIPTION OF PAYMENT</th>
<th>OUTSTANDING BALANCE BEGINNING OF THIS PERIOD</th>
<th>AMOUNT INCURRED THIS PERIOD</th>
<th>AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)</th>
<th>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>David Binder Research</td>
<td>POL</td>
<td>18,000.00</td>
<td>0.00</td>
<td>18,000.00</td>
<td>0.00</td>
</tr>
</tbody>
</table>

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

**SUBTOTALS**  
18,000.00 $  
0.00 $  
18,000.00 $  
0.00 $  

**Schedule F Summary**

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of $100 or more, plus total unitemized accrued expenses under $100.) .......................................................... **INCURRED TOTALS** $ 0.00

2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of $100 or more, plus total unitemized payments on accrued expenses under $100.) .......................................................... **PAID TOTALS** $ 18,000.00

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) .......................................................... **NET** $ -18,000.00

May be a negative number