

# Independent Expenditure Communication Notification Form 57

Separate notifications must be filed for each candidate or ballot measure that is supported or opposed.

**Original**

## Filer Information

NAME OF FILER <i>(Committee name, if applicable)</i> California Apartment Association Housing Solutions Committee	ID NUMBER <i>(for committees)</i> 1405775
STREET ADDRESS (street address redacted)	
CITY, STATE, ZIP CODE Sacramento , CA 95814	PHONE NUMBER (800) 967-4222
E-MAIL fppc@bmhlaw.com	

## Communication Information

<b>Type:</b> Independent Expenditure		
<b>Purpose</b> Support Tim McOsker for City Council Member District (15)		
<b>Format</b>	<b>Files</b>	<b>Distributions</b>
Web Video	<a href="#">57 WEB DISCLAIMER UPDATE</a> <a href="#">749 BEA CAA TimOsker 101422 WEB CLEAN 9188.mp4</a> <i>(Video)</i> <a href="#">57 WEB CAA Digital Script CD15 9188.pdf</a> <i>(Script)</i>	10/24/2022 - 1 distributions
<input type="checkbox"/> I affirm that this communication includes all mandatory disclaimer language in the required format. <input type="checkbox"/> I affirm that this communication includes the names of major funders.		

### Certification

***I certify under penalty of perjury under the laws of the City of Los Angeles and the State of California that I am the filer or an agent of the filer, that the communication listed above was not behested by a candidate who benefitted from it, and that all information reported through this form is true and complete.***

28-Nov-22

Ashlee Titus

Executed On: (Date)

By: (Signature of Filer/Agent Signature)

28-Nov-22

Ashlee Titus

Executed On: (Date)

By: (Signature of Treasurer/Agent Signature)

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## Spending Information

In the spaces below, identify the amount of spending per payee that was made or incurred for the candidate or ballot measure identified on page 1.

<b>DATE</b> (made or incurred)	<b>AMOUNT</b> (made or incurred)	<b>PAYEE</b> (name and address)
11/28/2022	\$32,500.00	Yosemite Consulting, LLC (street address redacted) Tampa, FL 33602
<b>PAYEE SERVICES</b> (all services provided by payee for reported amount)		
Web Video		
<b>PAYEE VENDORS</b> (name and address of each vendor and subvendor used by payee for reported amount)		
None reported.		

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California Apartment Association Housing Solutions Committee

ID NUMBER *(for committees)*

1405775

## Contributions Made

Persons making independent expenditure communications to support or oppose a City candidate or ballot measure are required to disclose all contributions of \$100 or more that they made to any City candidate or City Committee in the current calendar year. Please select one of the following options:

- I did not make any reportable contributions.  
 I made the following reportable contributions:

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## Contributions Received

Committees must report information about contributions of \$100 or more that they received since their most recent campaign statement or the first day of the calendar year, whichever is later. This does not apply to contributions earmarked for non-City purposes. Please select one of the following options:

- I am not a committee.
- I did not receive any reportable contributions.
- I received the following reportable contributions: