

Recipient Committee
Campaign Statement
Cover Page

COVER PAGE

Statement covers period from <u>09/20/2026</u> through <u>10/17/2026</u>		Date of election if applicable: (Month, Day, Year) <u>11/03/2026</u>	Date Stamp Received OCT 22 2026 City Clerk <u>441</u>	CALIFORNIA FORM 460
Page <u>1</u> of <u>13</u> For Official Use Only				

1. Type of Recipient Committee - 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
(Also Complete Part 7)

2. Type of Statement:

- ☒ Pre-election Statement
☐ Quarterly Statement
☐ Semi-annual Statement
☐ Termination Statement
(Also file a Form 410 Termination)
☐ Amendment (Explain Below)

3. Committee Information

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

I.D. NUMBER **1312577**

Lemon Grove Firefighters PAC, Sponsored by Heartland Firefighters of Lemon Grove Local 2728

Treasurer(s)

NAME OF TREASURER

Travis Medina

MAILING ADDRESS

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

Lemon Grove, CA

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

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

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.

Oct 22, 2026

Executed on DATE

Executed on DATE

Executed on DATE

Executed on DATE

Executed on DATE

By _____

By _____

By _____

By _____

By _____

Signature of Controlling Officeholder, Candidate, State Measure Proponent

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

Received
OCT 2 2 2026
City Clerk *KMY*

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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
<p>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</p>			
COMMITTEE NAME	ID. NUMBER	CONTROLLED COMMITTEE?	
NAME OF TREASURER		☐ YES	☐ NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)		
CITY	STATE	ZIP CODE	AREA CODE/PHONE
COMMITTEE NAME	ID. NUMBER	CONTROLLED COMMITTEE?	
NAME OF TREASURER		☐ YES	☐ NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)		
CITY	STATE	ZIP CODE	AREA

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE			
BALLOT NO. OR LETTER	JURISDICTION	☐ SUPPORT	☐ OPPOSE
<p>Identify the controlling officeholder, candidate, or state measure proponent, if any.</p>			
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.

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

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.
Received

OCT 2 2 2026

City Clerk **KAY**

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Lemon Grove Firefighters PAC, Sponsored by Heartland Firefighters of Lemon Grove Local 2728

Statement covers period
from 09/20/2026
through 10/17/2026

CALIFORNIA 460 FORM
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I.D. NUMBER 1312577

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3 \$ 1,080.00	\$ 11,840.00
2. Loans Received	Schedule B, Line 3 0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS.....	Add Lines 1 + 2 \$ 1,080.00	\$ 11,840.00
4. Nonmonetary Contributions	Schedule C, Line 3 0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED.....	Add Lines 3 + 4 \$ 1,080.00	\$ 11,840.00

Expenditures Made

6. Payments Made	Schedule E, Line 4 \$ 1,270.00	\$ 4,090.00
7. Loans Made	Schedule H, Line 3 0.00	0.00
8. SUBTOTAL CASH PAYMENTS.....	Add Lines 6 + 7 \$ 1,270.00	\$ 4,090.00
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3 0.00	0.00
10. Nonmonetary Adjustment	Schedule G, Line 3 0.00	0.00
11. TOTAL EXPENDITURES MADE.....	Add Lines 8 + 9 + 10 \$ 1,270.00	\$ 4,090.00

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16 \$ 35,017.26	
13. Cash Receipts	Column A, Line 3 above 1,080.00	
14. Miscellaneous Increases to Cash	Schedule I, Line 4 0.00	
15. Cash Payments	Column A, Line 8 above 1,270.00	
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15 \$ 34,827.26	
<i>If this is a termination statement, Line 16 must be zero.</i>		
17. LOAN GUARANTEES RECEIVED.....	Schedule B, Line 2 \$ 0.00	

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	

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	\$ 0.00	\$ 0.00
21. Expenditures Made	\$ 0.00	\$ 0.00

Expenditures Limit Summary for State Candidates

22. Cumulative Expenditures Made*	
(If Subject to Voluntary Expenditure Limit)	
Date of Election (mm/dd/yy)	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
Received

OCT 22 2026

City Clerk *FAV*

Statement covers period
from 09/20/2026
through 10/17/2026

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FORM

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Lemon Grove Firefighters PAC, Sponsored by Heartland Firefighters of Lemon Grove Local 2728

I.D. NUMBER
1312577

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF 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)
10/01/2026	Lemon Grove Firefighters PAC, Sponsored by Heartland ID: 1312577	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		540.00	10,800.00	
10/15/2026	Lemon Grove Firefighters PAC, Sponsored by Heartland ID: 1312577	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		540.00	11,340.00	

Schedule A Summary

1. Amount received this period - itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 1,080.00
2. Amount received this period - unitemized 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 \$ 1,080.00

* 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

SUBTOTAL \$ 1,080.00

Schedule B - Part 1 Loans Received

Amounts may be rounded
to whole dollars.

Receiver

OCT 22 2026

City Clerk *WAV*

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Lemon Grove Firefighters PAC, Sponsored by Heartland Firefighters of Lemon Grove Local 2728

Statement covers period from 09/20/2026 through 10/17/2026	CALIFORNIA FORM 460
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FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF 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 PAID OR FORGIVEN THIS PERIOD **	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$	\$	☐ PAID ☐ FORGIVEN	\$ DATE DUE	% RATE	\$ DATE INCURRED	CALENDAR YEAR \$ PER ELECTION**
☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$	\$	☐ PAID ☐ FORGIVEN	\$ DATE DUE	% RATE	\$ DATE INCURRED	CALENDAR YEAR \$ PER ELECTION**

Schedule B Summary

- Loans received this period (Total Column (b) plus unitemized loans of less than \$100.) \$ 0.00
- Loans paid or forgiven this period (Total Column (c) plus loans under \$100 paid or forgiven) (Include loans paid by a third party that are also itemized on Schedule A.) \$ 0.00
- Net change this period. (Subtract Line 2 from Line 1.) NET \$ 0.00
(May be a negative number)

* 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

SUBTOTALS \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00

* Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.

Schedule B - Part 2 Loan Guarantors

Amounts may be rounded
RECEIVED

OCT 22 2026

City Clerk *Wxy*

SEE INSTRUCTIONS ON REVERSE
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Lemon Grove Firefighters PAC, Sponsored by Heartland Firefighters of Lemon Grove Local 2728

Statement covers period from <u>09/20/2026</u> through <u>10/17/2026</u>	CALIFORNIA FORM 460
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FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SOC		<div>LENDER</div> <div>DATE</div>		<div>\$</div> <div>PER ELECTION (IF REQUIRED)</div>	

SUBTOTAL \$

Enter on Summary Page, Line 17 only.

Schedule C Nonmonetary Contributions Received

Amounts may be rounded
to whole dollars.
Received

OCT 22 2026

City Clerk *WXY*

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Lemon Grove Firefighters PAC, Sponsored by Heartland Firefighters of Lemon Grove Local 2728

I.D. NUMBER
1312577

SCHEDULE C
CALIFORNIA 460
FORM

Statement covers period
from **09/20/2026**
through **10/17/2026**

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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 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)
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

Schedule C Summary

- Amount received this period - itemized nonmonetary contributions.
(Include all Schedule C subtotals.) \$ 0.00
- Amount received this period - unitemized nonmonetary contributions of less than \$100 \$ 0.00
- 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 \$ 0.00

* 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

SUBTOTAL \$ 0.00

Schedule D
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures, and Committees

Amounts may be rounded
FOOTNOTES

OCT 2 2 2026

City Clerk

6/14/21

Statement covers period
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through 10/17/2026

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SCHEDULE D

NAME OF FILER
Lemon Grove Firefighters PAC, Sponsored by Heartland Firefighters of Lemon Grove Local 2728

L.D. NUMBER
1312577

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/30/2026	Jennifer Mendoza City City Council Member DISTRICT #: at Large ☒ Support ☐ Oppose	☒ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure		1,230.00	1,230.00	

SCHEDULE D SUMMARY

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) \$ 1,230.00
2. Unitemized contributions and independent expenditures made this period of under \$100 \$ 0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) TOTAL \$ 1,230.00

SUBTOTAL \$ 1,230.00

Schedule E
Payments Made

Amounts may be rounded
to whole dollars.
Received

OCT 22 2026

City Clerk [Signature]

Statement covers period

from 09/20/2026

through 10/17/2026

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SEE INSTRUCTIONS ON REVERSE
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Lemon Grove Firefighters PAC, Sponsored by Heartland Firefighters of Lemon Grove Local 2728

I.D. NUMBER

1312577

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 tv, 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
Jennifer Mendoza for Lemon Grove City council 2026 7066 San Miguel Lemon Grove, CA 91945 ID: 1493044	CTB		1,230.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	1,230.00
2. Unitemized payments made this period of under \$100	40.00
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 \$ 1,270.00

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

SUBTOTAL \$ 1,230.00

Amounts may be rounded
to whole dollars.

OCT 22 2026

City Clerk

Lemon Grove Firefighters PAC, Sponsored by Heartland Firefighters of Lemon Grove Local 2728

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1312577

ID. NUMBER

1312577

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

- CNP 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

- RAAD radio airtime and production costs
- RPD returned contributions
- SAL campaign workers' salaries
- TEL tv 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 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

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 \$	0.00
----------------	------

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 \$	0.00
--------	------

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

SUBTOTALS	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
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Schedule G
Payments Made by an Agent or Independent
Contractor (on Behalf of This Committee)

Amounts may be rounded
 Whole dollars
Received

OCT 22 2026

City Clerk *WNY*

Statement covers period from <u>09/20/2026</u> through <u>10/17/2026</u>	CALIFORNIA 460 FORM
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SEE INSTRUCTIONS ON REVERSE
 NAME OF FILER

Lemon Grove Firefighters PAC, Sponsored by Heartland Firefighters of Lemon Grove Local 2728

NAME OF AGENT OR INDEPENDENT CONTRACTOR

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

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

TOTAL * \$

** 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.

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Schedule H Loans Made to Others*

Amounts may be rounded
to whole dollars

Received

OCT 22 2026

City Clerk

Statement covers period
from 09/20/2026
through 10/17/2026

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SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Lemon Grove Firefighters PAC, Sponsored by Heartland Firefighters of Lemon Grove Local 2728

I.D. NUMBER 1312577

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD *	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
		\$	\$	☐ PAID ☐ FORGIVEN \$	\$ DATE DUE	RATE % \$	\$ DATE INCURRED	CALENDAR YEAR PER ELECTION** \$

SUBTOTALS

\$

\$

\$

\$

*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E

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

CALIFORNIA
FORM 460

SCHEDULE H

Schedule I
Miscellaneous Increases to Cash

Amounts may be rounded
if received

OCT 22 2026

City Clerk

1312577

Statement covers period

from 09/20/2026

through 10/17/2026

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I.D. NUMBER

1312577

SEE INSTRUCTIONS ON REVERSE
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Lemon Grove Firefighters PAC, Sponsored by Heartland Firefighters of Lemon Grove Local 2728

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Schedule I Summary

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

SUBTOTAL \$ 0.00

LM-FF_F460_Report_2026.10.17

Final Audit Report

2026-10-23

Created:	2026-10-23
By:	Stephanie Sánchez (stephanie@pctreasury.com)
Status:	Signed
Transaction ID:	CBJCHBCAABAAvXeATY9Qs8z1kaxONWKIhVUaQPkrvz4g

"LM-FF_F460_Report_2026.10.17" History

-  Document created by Stephanie Sánchez (stephanie@pctreasury.com)
2026-10-23 - 3:00:02 AM GMT - IP address: 68.8.92.95
-  Document emailed to Travis Medina (travissmedina@yahoo.com) for signature
2026-10-23 - 3:00:05 AM GMT
-  Email viewed by Travis Medina (travissmedina@yahoo.com)
2026-10-23 - 3:24:22 AM GMT - IP address: 174.221.161.193
-  Document e-signed by Travis Medina (travissmedina@yahoo.com)
Signature Date: 2026-10-23 - 3:31:43 AM GMT - Time Source: server- IP address: 174.221.161.193 - Signature Appearance Selected: MOBILE_IMAGE
-  Agreement completed.
2026-10-23 - 3:31:43 AM GMT



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