

Recipient Committee
Campaign Statement
Cover Page

COVER PAGE

CALIFORNIA FORM 460

Page 1 of 14
For Official Use Only

Statement covers period
from 1/1/2026
through 6/30/2026

Date of election if applicable:
(Month, Day, Year)
11/3/2026

Date Stamp
Received on 9/24/2026
JPablo
City clerk

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)

Primarily Formed Ballot Measure
Committee
Controlled
Sponsored
(Also Complete Part 6)

General Purpose Committee
Sponsored
Small Contributor Committee
Political Party/Central Committee

Primarily Formed Candidate/
Officeholder Committee
(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

3. Committee Information

I.D. NUMBER

1491691

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

Yasmin Mendoza for Lemon Grove City Council 2026

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

Lemon Grove CA 91945

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

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

Rosa Carney

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

Lemon Grove CA 91945

NAME OF ASSISTANT TREASURER, IF ANY

MAILING 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.

Executed on 9/23/26 Date

Executed on 9/23/26 Date

Executed on Date

Executed on Date

By Signature of Treasurer or Assistant Treasurer

By Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By Signature of Controlling Officeholder, Candidate, State Measure Proponent

By Signature of Controlling Officeholder, Candidate, State Measure Proponent

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

COVER PAGE - PART 2

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Yasmin Mendoza

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

City Council Member - Lemon Grove

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

[REDACTED] Lemon Grove CA 91945

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?

YES 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?

YES 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

SUPPORT
OPPOSE

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.*

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

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period
from 1/1/2026
through 6/30/2026

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yasmin Mendoza for Lemon Grove City Council 2026

I.D. NUMBER

1491691

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions.....	Schedule A, Line 3	\$ 5160.00	\$ 5160.00
2. Loans Received.....	Schedule B, Line 3	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS.....	Add Lines 1 + 2	\$ 5160.00	\$ 5160.00
4. Nonmonetary Contributions.....	Schedule C, Line 3	436.67	436.67
5. TOTAL CONTRIBUTIONS RECEIVED.....	Add Lines 3 + 4	\$ 5596.67	\$ 5596.67

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

6. Payments Made.....	Schedule E, Line 4	\$ 557.44	\$ 557.44
7. Loans Made.....	Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS.....	Add Lines 6 + 7	\$ 557.44	\$ 557.44
9. Accrued Expenses (Unpaid Bills).....	Schedule F, Line 3	0.00	0.00
10. Nonmonetary Adjustment.....	Schedule C, Line 3	436.67	436.67
11. TOTAL EXPENDITURES MADE.....	Add Lines 8 + 9 + 10	\$ 994.11	\$ 994.11

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	\$ 0.00
13. Cash Receipts.....	Column A, Line 3 above	5160.00
14. Miscellaneous Increases to Cash.....	Schedule I, Line 4	0.00
15. Cash Payments.....	Column A, Line 8 above	557.44
16. ENDING CASH BALANCE.....	Add Lines 12 + 13 + 14, then subtract Line 15	\$ 4602.56

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

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.

Schedule A Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period from 1/1/2026		CALIFORNIA FORM 460
through 6/30/2026		
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yasmin Mendoza for Lemon Grove City Council 2026

I.D. NUMBER

1491691

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)
6/19/2026	Adam Carney [REDACTED] Lemon Grove, CA 91946	X IND COM OTH PTY SCC	Fitness Instructor Chuze Fitness	40.00	40.00	
6/19/2026	Stephanie Klein [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Real Estate Agent Harcourts One	50.00	50.00	
6/19/2026	Josh Klein [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Retired	50.00	50.00	
6/19/2026	Jessyka Heredia [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Media Specialist Lemon Grove Media & Communications	100.00	100.00	
6/19/2026	Lauren Falai [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Grocery Manager Sprouts	100.00	100.00	
SUBTOTAL \$				340.00		

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.)\$ 5060.00
- Amount received this period – unitemized monetary contributions of less than \$100\$ 100.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.).....TOTAL \$ 5160.00

*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

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>1/1/2026</u> through <u>6/30/2026</u>		CALIFORNIA FORM 460
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NAME OF FILER Yasmin Mendoza for Lemon Grove City Council 2026		I.D. NUMBER 1491691

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)
6/19/2026	Erica Diedrich [REDACTED] San Diego, CA 92114	X IND COM OTH PTY SCC	Nursing Field UCSD	40.00	40.00	
6/19/2026	Rosa Carney [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Bookkeeper San Diego Diocese	50.00	50.00	
6/19/2026	Dennis Carney [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Director Six Maritime	50.00	50.00	
6/19/2026	Ismael Brizuela [REDACTED] Chula Vista, CA 91913	X IND COM OTH PTY SCC	Instructor Six Maritime	99.00	99.00	
6/15/2026	Victor Vega [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Peace Officer Federal Building	200.00	200.00	
SUBTOTAL \$				439.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>1/1/2026</u> through <u>6/30/2026</u>		CALIFORNIA FORM 460
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NAME OF FILER Yasmin Mendoza for Lemon Grove City Council 2026		I.D. NUMBER 1491691

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)
6/19/2026	Armando Salazar Yuma, AZ 85367	X IND COM OTH PTY SCC	Retired	100.00	100.00	
6/19/2026	Jackie Blue San Diego, CA 92113	X IND COM OTH PTY SCC	Unemployed	40.00	40.00	
6/19/2026	Mathew Lawrence Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Child Youth Development YMCA	40.00	40.00	
6/19/2026	Karina Karavolis Chula Vista, CA 91910	X IND COM OTH PTY SCC	Business Owner Giardinos	100.00	100.00	
6/19/2026	Seth Smith Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Architectural Designer Incobo Design LLC	50.00	50.00	
SUBTOTAL \$				330.00		

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IND – Individual
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Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>1/1/2026</u> through <u>6/30/2026</u>		CALIFORNIA FORM 460
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NAME OF FILER Yasmin Mendoza for Lemon Grove City Council 2026		I.D. NUMBER 1491691

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)
6/19/2026	Sylvia Mendoza [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Retired	99.00	99.00	
6/19/2026	Becky Toth [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Sales Sprouts	50.00	50.00	
6/19/2026	Rachel Kelly [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Underwriting Assistant Venture	20.00	20.00	
6/19/2026	Jerry Jones [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Retired	50.00	50.00	
6/19/2026	Eric Parenteau [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Auto Tech 1 of 1	50.00	50.00	
SUBTOTAL \$				269.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from 1/1/2026 through 6/30/2026		CALIFORNIA FORM 460
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NAME OF FILER Yasmin Mendoza for Lemon Grove City Council 2026		I.D. NUMBER 1491691

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)
6/19/2026	Riley Parenteau [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Student	50.00	50.00	
6/19/2026	Danny Brunner [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Minister Christian Community Ministries	40.00	40.00	
6/19/2026	Cynthia Jurado [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Leadership Coach ARC Leadership Dynamics	50.00	50.00	
6/19/2026	Michelle Evans [REDACTED] La Mesa, CA 91941	X IND COM OTH PTY SCC	Retired	40.00	40.00	
6/19/2026	Raven Hyde [REDACTED] La Mesa, CA 91941	X IND COM OTH PTY SCC	Student	30.00	30.00	
SUBTOTAL \$				210.00		

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Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>1/1/2026</u> through <u>6/30/2026</u>		CALIFORNIA FORM 460
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NAME OF FILER Yasmin Mendoza for Lemon Grove City Council 2026		I.D. NUMBER 1491691

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)
6/26/2026	Israel Madred [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Business Owner SD Wings	140.00	140.00	
6/20/2026	Kenneth King [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Self Employed No Separate DBA	1100.00	1100.00	
6/8/2026	Richard Hammett [REDACTED] La Mesa, CA 91941	X IND COM OTH PTY SCC	Retired	1170.00	1170.00	
6/19/2026	Lori Roder [REDACTED] San Diego, CA 92116	X IND COM OTH PTY SCC	Retired	500.00	500.00	
6/19/2026	Pablo Perez [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Designer P2 Design 3D	40.00	40.00	
SUBTOTAL \$				2950.00		

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SCC – Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>1/1/2026</u> through <u>6/30/2026</u>		CALIFORNIA FORM 460
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NAME OF FILER Yasmin Mendoza for Lemon Grove City Council 2026		I.D. NUMBER 1491691

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)
6/19/2026	Victoria Vega [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Office Manager Santa Sophia Academy	50.00	50.00	
6/19/2026	Jeremy King [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Case Manager Non-Profit	80.00	80.00	
5/19/2026	Yasmin Mendoza [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Tech Scripps	100.00	100.00	
		IND COM OTH PTY SCC				
		IND COM OTH PTY SCC				
SUBTOTAL \$				230.00		

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IND – Individual
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SCC – Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>1/1/2026</u> through <u>6/30/2026</u>		CALIFORNIA FORM 460
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NAME OF FILER Yasmin Mendoza for Lemon Grove City Council 2026		I.D. NUMBER 1491691

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)
6/24/2026	Raven Hyde [REDACTED] La Mesa, CA 91941	X IND COM OTH PTY SCC	Student	65.00	95.00	
6/19/2026	Irma Mendoza [REDACTED] Chula Vista, CA 91913	X IND COM OTH PTY SCC	Self Employed No Separate DBA	99.00	99.00	
6/19/2026	Anthony Anderson [REDACTED] Chula Vista, CA 91913	X IND COM OTH PTY SCC	Student / Valet ACE Parking	99.00	99.00	
6/19/2026	Rosaura Mendoza [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Sales Home Depot	29.00	29.00	
		IND COM OTH PTY SCC				
SUBTOTAL \$				292.00		

*Contributor Codes
IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
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PTY – Political Party
SCC – Small Contributor Committee

Schedule C Nonmonetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from 1/1/2026 through 6/30/2026		CALIFORNIA FORM 460
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		I.D. NUMBER 1491691

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Yasmin Mendoza for Lemon Grove City Council 2026

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)
6/18/2026	Yadira Altamirano [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Business Owner Yadira Altamirano	Food	370.00	370.00	
6/8/2026	Yasmin Mendoza [REDACTED] Lemon Grove, CA 91945	X IND COM OTH PTY SCC	Tech Scripps	Website expense paid personally	66.67	166.67	
		IND COM OTH PTY SCC					
		IND COM OTH PTY SCC					

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 436.67

Schedule C Summary

- Amount received this period – itemized nonmonetary contributions.
(Include all Schedule C subtotals.) \$ 436.67
- 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 \$** 436.67

*Contributor Codes
IND – Individual
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(other than PTY or SCC)
OTH – Other (e.g., business entity)
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SCC – Small Contributor Committee

Schedule E Payments Made

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from 1/1/2026		
through 6/30/2026		Page 13 of 14
NAME OF FILER		I.D. NUMBER
Yasmin Mendoza for Lemon Grove City Council 2026		1491691

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

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
Temu www temu.com	FND	Campaign event supplies	60.00
NextDayFlyers 8000 Haskell Ave. Van Nuys, CA 91406	LIT	Campaign printing	497.44

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

SUBTOTAL \$ 557.44

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 557.44
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 \$ 557.44

