Recipient Committee CALIFÓRNIA Campaign Statement FORM Cover Page Page Date of election if applicable: Statement covers period (Month, Day, Year) For Official Use Only 122 JAN 18 PM **3:** 11 AMPAIGN FINANCE SEE INSTRUCTIONS ON REVERSE 2. Type of Statement: 1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. Preelection Statement Primarily Formed Ballot Measure Officeholder, Candidate Controlled Committee **Quarterly Statement** Committee O State Candidate Election Committee Semi-annual Statement Special Odd-Year Report O Controlled O Recall Termination Statement (Also Complete Part 5) O Sponsored (Also file a Form 410 Termination) (Also Complete Part 6) Amendment (Explain below) General Purpose Committee Primarily Formed Candidate/ O Sponsored Officeholder Committee O Small Contributor Committee (Also Complete Part 7) O Political Party/Central Committee I.D. NUMBER Treasurer(s) 3. Committee Information 1369862 NAME OF TREASURER COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Committee to Elect Sorsabal for AVEK Water Board 2018 Shelley Sorsabal MAILING ADDRESS STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE AREA CODE/PHONE Palmdale CA 93551 661-202-8558 STATE ZIP CODE AREA CODE/PHONE NAME OF ASSISTANT TREASURER, IF ANY CITY Palmdale CA 93551 661-202-8558 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX MAILING ADDRESS AREA CODE/PHONE CITY STATE ZIP CODE STATE ZIP CODE AREA CODE/PHONE CITY 93551 661-202-8558 CA Palmdale OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS 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 ... rer or Assistant Treasurer

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

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on .

Executed on.

Executed on ...

FPPC Form 460 (Jan/2016)

www.fonc.ca.gov

COVER PAGE

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PA	AGE - PART 2
CALIFORNIA FORM	460
Page 2	6

Officeholder or Candidate Controlled Commi	ttee	6.	Primarily Formed Ballot	Measure Committee	•	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE		0.0	
Shelley Sorsabal						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT	NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTION	Ī	SUPPORT
Director, Antelope Valley East Kern Water Agen	cy Div 1					OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CI	TY STATE ZIP e, CA 93551		Identify the controlling office		measure prop	onent, if any.
			NAME OF OFFICEHOLDER, CAND	DIDATE, OR PROPONENT		
Related Committees Not Included in this State not Included in this statement that are controlled by you or contributions or make expenditures on behalf of your canditures.	are primarily formed to receive		OFFICE SOUGHT OR HELD		DISTRICT NO.	IF ANY
COMMITTEE NAME	I.D. NUMBER				1	
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Cand officeholder(s) or candidate(s)	for which this committee is	primarily forms	st names of ed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BO)X)		NAME OF OFFICEHOLDER OR CA	ANDIDATE OFFICE SO	UGHT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP CO	DDE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR CA	ANDIDATE OFFICE SO	UGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR CA	ANDIDATE OFFICE SO	UGHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR CA	ANDIDATE OFFICE SO	UGHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS (NO P.O. BO	ox)					
CITY STATE ZIP C	ODE AREA CODE/PHONE		Attac	ch continuation sheets if	necessary	

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statement covers period from 7/1/202/	CALIFORNIA 460
through 12/31/2021	Page 3 of 6
	I.D. NUMBER
	1369862

	from 111 avai	FORIVI
	through 12/31/2021	Page 3 of 6
SEE INSTRUCTIONS ON REVERSE	through	1 486
NAME OF FILER		I.D. NUMBER
Committee to Elect Sorsabal for AVEK Water Board 2018		1369862

1. Monetary Contributions Schedule A, Line 3 2. Loans Received Schedule B, Line 3 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 4. Nonmonetary Contributions Schedule C, Line 3 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	0	## Column B CALENDAR YEAR	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	0	\$ 50.00 0 \$ 50.00 0 0 \$ 50.00	Expenditure Limit Summary for State Candidates 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) Date of Election (mm/dd/yy) \$
Current Cash Statement 12. Beginning Cash Balance	0 0 50.00 \$ 833.63	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	*Amounts in this section may be different from amounts reported in Column B.
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 Cash Equivalents and Outstanding Debts 18. Cash Equivalents	\$ <u>0</u> \$ <u>5251.14</u>	filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).	FPPC Form 460 (Jan/2016)) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

Schedule B – Part 1 Loans Received	Am	ounts may be ro to whole dollar			Statement cover			1A 460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Committee to Elect Sorsabal for AVEK Water	Board 2018				through 12/3	, 12021	Page <u>4</u> I.D. NUMBER 1369862	of
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	AMOUNT RECEIVED THIS PERIOD	THIS PERIOD	N BALANCE AT	(e) INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTION TO DATE
Shelley Sorsabal Palmdale, CA 93551 † IND	Amargosa Ridge Vineyard & Bushman, LLC Business Owner	\$	ş <u>0</u>	\$ 0 FORGIVEN	\$ 146.43	O %	\$_146.43 8/11/14 DATE INCURRED	\$ 0 PER ELECTION \$ 0
Shelley Sorsabal Palmdale, CA 93551 Told IND COM COM COTH CPTY SCC	Amargosa Ridge Vineyard & Bushman, LLC Business Owner	3900.00	s_0	☐ PAID	\$ 3900.00 SMANU DATE DUE	0 % RATE	8/27/14 DATE INCURRED	s 0 PER ELECTION \$ 0
Shelley Sorsabal Palmdale, CA 93551 † Ø IND	Amargosa Ridge Vineyard & Bushman, LLC Business Owner	\$_50.00	ş_0	\$ O FORGIVEN	\$ 50.00	0 % RATE \$ 0	\$_50.00 12/18/14 DATE INCURRED	\$ 0 PER ELECTION \$ 0
		SUBTOTALS	\$ 0	\$ 0	\$ 4096.43	\$ 0 (Enter (e) on Sch	edule E. Une 3)	
1. Loans received this period	00 paid or forgiven.)			^			†Contributor Codes IND – Individual COM – Recipient C	

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

Enter the net here and on the Summary Page, Column A, Line 2.

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www.fppc.ca.gov

PTY - Political Party

(May be a negative number)

OTH - Other (e.g., business entity)

SCC - Small Contributor Committee

Sched	ule	B	Part	1
Loans	Re	ceiv	ed	

** If required.

Amounts may be rounded to whole dollars.

SCHEDULE B - PART 1

CALIFORNIA AGO

Statement covers period

Specific Committee Specifi	Loans Received					from	2021	FORM	400
TULL NAME, STREET ADDRESS AND ZIP CODE OF LAND MORE MADE AND COLUMNION AND EARN OF PERIOD. FULL NAME, STREET ADDRESS AND ZIP CODE OF LAND MORE MADE AND COLUMNION AND EARN OF PERIOD. FULL NAME, STREET ADDRESS AND ZIP CODE OF LAND MORE MADE AND COLUMNION AND EARN OF PERIOD. FULL NAME, STREET ADDRESS AND ZIP CODE OF LAND MORE MADE AND COLUMNION AND EARN OF PERIOD. FULL NAME, STREET ADDRESS AND ZIP CODE OF LAND MORE MADE AND COLUMNION AND EARN OF PERIOD. FULL NAME, STREET ADDRESS AND ZIP CODE OF LAND MORE MADE AND COLUMNION AND COLUMNION AND EARN OF PERIOD. FULL NAME, STREET ADDRESS AND ZIP CODE OF LAND MORE MADE AND COLUMNION AND COLUM			4			through 12/3	31/2021		of_6
FULL NAME, STREET ADDRESS AND ZIP CODE FAIN MONITOR CONTRIBUTION CONTRIBUT									
Specific Committee Specifi	Committee to Elect Sorsabal for AVEK Water	Board 2018						1369862	
Shelley Sorsabal	OF LENDER	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER	BALANCE BEGINNING THIS	RECEIVED THIS	OR FORGIVEN THIS PERIOD	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	PAID THIS	AMOUNT OF	
Palmdale, CA 93551 Business Owner 100.00 0 0 0 0 0 0 0 0	Shelley Sorsabal					s 100.00	70	\$_100.00	
Shelley Sorsabal			100.00	s_0	_		RATE \$		PER ELECTION**
Palmdale, CA 93551 Palmdale, CA 93551 Business Owner \$1000 \$0 \$0 \$0 \$0 \$0 \$0		, ,							CALENDAR YEAR
Shelley Sorsabal Amargosa Ridge Vineyard & Bushman, LLC Palmdale, CA 93551 Business Owner SUBTOTALS \$ 0 \$ 0 \$ 115471 \$ 0 Enter (e) on Schedule E, Line 3) **Contributor Codes IND - Individual COM - Recipient Committee (other than PTY or SCC) Total Column (c) plus loans under \$100 paid or forgiven.) (Include loans paid by a third party that are also itemized on Schedule A.) 3. Net change this period. (Subtract Line 2 from Line 1.) Enter the net here and on the Summary Page, Column A, Line 2. **Subtract Subtract Line 2 from Line 1.) (May be a negative number) **Subtract Line 2 from Line 2. **Subtract Line 2 from Line 2. **Contributor Codes IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other (e.g., business entity PTY - Political Party PTY - Pol			1000	s	0				s 0
Palmdale, CA 93551 Business Owner \$\frac{54.71}{\$\sqrt{2}\text{ IND} \cappact{Compare}{\sqrt{154.71}} \sqrt{2}\text{ DATE DUE} \sqrt{2}\text{ DATE DUE} \sqrt{2}\text{ Business Owner} \sqrt{2}\text{ \$\frac{54.71}{\$\sqrt{2}\text{ NUTRED}}} \sqrt{2}\text{ \$\frac{54.71}{\$\sqrt{2} N	Shelley Sorsabal				\$_0	s 5471	%	s_54.71	
SUBTOTALS \$ 0 \$ 0 \$ 1154.71 \$ 0 Schedule B Summary 1. Loans received this period		Business Owner	54.71	s_0	-				PER ELECTION**
Schedule B Summary 1. Loans received this period	TØ IND □ COM □ OTH □ PTY □ SCC		SUBTOTALS	• 0	• 0		\$ 0	DATE INCURRED	<u> </u>
Schedule B Summary 1. Loans received this period			SUBTUIALS S	v	a U	ф 1124°11		nedule E. Line 3)	
2. Loans paid or forgiven this period	1. Loans received this period	of loss than \$400.			\$ <u>0</u>		(-)		
	 (Total Column (b) plus unitemized loar Loans paid or forgiven this period (Total Column (c) plus loans under \$10 (Include loans paid by a third party that Net change this period. (Subtract Line) 	ns of less than \$100.) 00 paid or forgiven.) at are also itemized on Sche	edule A.)	······································	\$ 0	ou be a regulius flimbert		IND Individual COM Recipient C (other than OTH Other (e.g., PTY Political Par	Committee PTY or SCC) business entity)
*Amounts forgiven or paid by another party also must be reported on Schedule A.	*Amounts forgiven or paid by another party also n	nust be reported on Schedule A.	٦		(m	ay be d liegans mailbel)			

0-11				SCHEDULE
Schedule E Payments Made	Amounts may b to whole do		Statement covers period from 7/1/2021	california 460
SEE INSTRUCTIONS ON REVERSE			through 13/31/2021	Page 6 of 6
NAME OF FILER Committee to Elect Sorsabal for AVEK Water Board 2018				1.D. NUMBER 1369862
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense campaign literature and mailings	MBR member com MTG meetings and OFC office expens PET petition circuf PHO phone banks POL polling and si POS postage, deliv	munications 1 appearances es lating	RAD radio airtime and production of returned contributions SAL campaign workers' salaries t.v. or cable airtime and production of the candidate travel, lodging, and staff/spouse travel, lodging, and transfer between committees voter registration information technology costs	action costs meals nd meals 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
secretary of State sacramento, CA 95814		Annual fe campaign	commuttel	50.00
·				
* Payments that are contributions or independent expenditures must als	so be summarized on Sche	edule D.	SUI	BTOTAL \$ 5000
Schedule E Summary			•	
1. Itemized payments made this period. (Include all Sche		,		£0.00
2. Unitemized payments made this period of under \$100				
3. Total interest paid this period on loans. (Enter amount				
4 Total nayments made this period (Add Lines 1.2 and	13 Enter here and on	the Summary Page, Column	\ line 6\	TAI & 50.00