COVER PAGE **Recipient Committee** CALIFORNIA **Campaign Statement** RECEIVED BY **FORM Cover Page** ANGELES COUNTY 10 Date of election if applicable: Statement covers period (Month, Day, Year) For Official Use Only 01/01/22 CAMPAIGN FINANCE 06/30/22 SEE INSTRUCTIONS ON REVERSE through. 1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. 2. Type of Statement: Preelection Statement Officeholder, Candidate Controlled Committee Primarily Formed Ballot Measure Quarterly Statement O State Candidate Election Committee Committee Semi-annual Statement Special Odd-Year Report O Recall O Controlled 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 3. Committee Information Treasurer(s) 1407794 COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) NAME OF TREASURER Don P Ford John Rush for High School Board 2018 MAILING ADDRESS STREET ADDRESS (NO P.O. BOX) AREA CODE/PHONE ZIP CODE Lancaster Ca 93536 661-466-6303 CITY ZIP CODE AREA CODE/PHONE NAME OF ASSISTANT TREASURER, IF ANY STATE 93536 661-510-9085 Lancaster Ca Rodney | Penner MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX MAILING ADDRESS AREA CODE/PHONE AREA CODE/PHONE CITY ZIP CODE CITY STATE ZIP CODE STATE Palmdale Ca 93551 661-433-1399 OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS RushAVUHSD2018@gmail.com Verification I have used all reasonable diligence in preparing and reviewing this statement an tules is true and complete. I certify under penalty of perjury under the laws of the State of California that the fc 07/01/202 Executed on . 07/01/2022 Executed on.

Executed on ..

Executed on ...

Recipient Committee Campaign Statement Cover Page — Part 2

	COVE	R PAGE	- PART	2
CALIF	FORN DRM	IIA Z	160	
Page _	2	_ of _	10	

Officeholder or Candidate Controlled Committee			Primarily Formed Ball	ot Measure	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE				
John A. Rush OFFICE SOUGHT OR HELD (INCLUDE LOCATIO Antelope Valley Jt. Un High School	N AND DISTRICT NUMBER IF APPLICABLE) Dist Governing Board Trustee Area 1		BALLOT NO. OR LETTER	JURISDICTI	ON		SUPPORT
RESIDENTIAL/BUSINESS ADDRESS (NO. AND			Identify the controlling office			easure propo	nent, if any.
	I in this Statement: List any committees olled by you or are primarily formed to receive lift of your candidacy.		OFFICE SOUGHT OR HELD		Di	ISTRICT NO. IF	ANY
COMMITTEE NAME	I.D. NUMBER	7.	Primarily Formed Can	didate/Offic	ceholder Com	mittee Lis	t names of
NAME OF TREASURER	CONTROLLED COMMITTEE? ☐ YES ☐ NO		officeholder(s) or candidate(s	s) for which thi	s committee is pri	marily formed	i.
COMMITTEE ADDRESS STREET ADDR	ESS (NO P.O. BOX)		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	HT OR HELD	SUPPORT OPPOSE
CITY	ATE ZIP CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	T OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	T OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE? ☐ YES ☐ NO		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGH	HT OR HELD	SUPPORT
COMMITTEE ADDRESS STREET ADDR	ESS (NO P.O. BOX)				1		
CITY	TATE ZIP CODE AREA CODE/PHONE		At	tach continua	tion sheets if nec	essary	

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE CALIFORNIA FORM Statement covers period 01/01/22 from_ 06/30/22 Page _ through. I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER John Rush for High School Board 2018 1407794

Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	COLUMN B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and
\$ 0 0 0 0 0 0	\$ 0 0 0 0 0 0 0	General Elections 1/1 through 6/30 7/1 to Date 20. Contributions Received \$ \$ 21. Expenditures Made \$ \$ *
\$ 68.00 0.00 \$ 68.00 0 0 \$ 68.00	\$ 68.00 0.00 \$ 68.00 0 0 \$ 68.00	Expenditure Limit Summary for State Candidates 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy)
\$ 1357.75 0.00 0.00 68.00 \$ 1289.75 \$ 0 \$ 0	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. FPPC Form 460 (Jan/201
	\$ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) CALENDAR YEAR TOTAL TO DATE

(6)

Schedule A Amounts may be rounded SCHEDULE A to whole dollars. Statement covers period **Monetary Contributions Received** CALIFORNIA 01/01/22 **FORM** from 06/30/22 through SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER John Rush for High School Board 2018 1407794 AMOUNT CUMULATIVE TO DATE PER ELECTION IF AN INDIVIDUAL, ENTER FULL NAME. STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR DATE RECEIVED THIS TO DATE CALENDAR YEAR OCCUPATION AND EMPLOYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE * RECEIVED OF SELF-EMPLOYED, ENTER NAME PERIOD (IF REQUIRED) (JAN, 1 - DEC, 31) OF BUSINESS) □ IND ☐ COM □ OTH □ PTY SCC ☐ IND COM OTH □ PTY SCC ☐ IND СОМ □ OTH □ PTY SCC ☐ IND COM Потн □ PTY SCC ПСОМ ☐ OTH □ PTY SCC SUBTOTAL \$ Schedule A Summary *Contributor Codes

Amount received this period – itemized monetary contributions.

(Include all Schedule A subtotals.)

 Amount received this period – unitemized monetary contributions of less than \$100\$

 Total monetary contributions received this period.

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)

TOTAL \$

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

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Schedule B – Part 1 Loans Received	An	nounts may be ro to whole dollar			Statement cov	ers period)1/22	CALIFORNIA 46		
SEE INSTRUCTIONS ON REVERSE					through 06	/30/22	Page 5	of10_	
NAME OF FILER		I.D. NUMBER							
John Rush for High School Board 2018							1407794		
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)	OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAIL OR FORGIVE THIS PERIOD	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE	
				☐ PAID				CALENDAR YEAR	
				1		RATE %	3	\$	
				FORGIVEN		15.12		PER ELECTION**	
† IND COM OTH PTY SCC		5	s	s	DATE DUE	\$	DATE INCURRED	\$	
				PAID				CALENDAR YEAR	
				\$		%	1	\$	
				FORGIVEN		RATE		PER ELECTION**	
† IND COM OTH PTY SCC		s	5	s	DATE DUE	\$	DATE INCURRED	\$	
				PAID				CALENDAR YEAR	
				\$		RATE %	\$	\$	
				FORGIVEN		MAIL		PER ELECTION **	
† IND COM OTH PTY SCC		\$	\$	1	DATE DUE	\$	DATE INCURRED	1	
		SUBTOTALS :	0	\$ (\$ 0	\$ 0			
Schedule B Summary						(Enter (e) on Schedule E, Line 3)			
Loans received this period				\$	0				
(Total Column (b) plus unitemized loan	ns of less than \$100.)		***************************************			(+	Contributor Codes		
Loans paid or forgiven this period (Total Column (c) plus loans under \$1 (Include loans paid by a third party that	00 paid or forgiven.)			\$	0	· III	ND – Individual COM – Recipient C (other than OTH – Other (e.g.,	Committee PTY or SCC) business entity)	
3. Net change this period. (Subtract Lin	e 2 from Line 1.)			NET \$	0		TY - Political Par CC - Small Contr	ty ributor Committee	
Enter the net here and on the Summa	ry Page, Column A, Line 2.				May be a negative number)				

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

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					SCH	EDULE B - PART	
Schedule B – Part 2 ∟oan Guarantors		Amounts may be rounded to whole dollars.	fro	Statement covers period on 01/01/22	CALIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE			thi	rough06/30/22	_ Page6	of 10	
John Rush for High School Board 2018					1.D. NUMBER 1407794		
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		LENDER		CALENDAR YEAR		
	□ OTH □ PTY □ SCC	_	DATE	_	PER ELECTION (IF REQUIRED)		
	□ IND □ COM		LENDER		CALENDAR YEAR		
	□ OTH □ PTY □ SCC		DATE		PER ELECTION (IF REQUIRED)		
	□ IND □ COM		LENDER		CALENDAR YEAR		
	□OTH □PTY □SCC		DATE		PER ELECTION (IF REQUIRED)		
	□ IND □ COM		LENDER		CALENDAR YEAR		
	□ OTH □ PTY □ SCC	_	DATE		PER ELECTION (IF REQUIRED)		

Enter on Summary Page, Line 17 only.

0

SUBTOTAL \$

Schedule C Nonmonetary Contributions Received			to whole dollars.		State:	01/01/2		CALIFO	DRNIA 460
SEE INSTRUCTION	S ON REVERSE				through.	06/30/	22	Page	7 of 10
NAME OF FILER	or High School Board 2018							1.D. NUMB	ER
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 O GOODS OR SERVI	OF E	AMOUNT/ AIR MARKET VALUE	CALEND	ATIVE TO ATE DAR YEAR - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
		□IND □COM □OTH □PTY □SCC							
		□IND □COM □OTH □PTY □SCC							
		□IND □COM □OTH □PTY □SCC							
		OTH SCC							
Attach additio	nal information on appropriately labeled	continuation	sheets.	SUBTO	TAL\$				

(Include all Schedule C subtotals.)....\$

2. Amount received this period - unitemized nonmonetary contributions of less than \$100\$_

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.).....TOTAL \$

3. Total nonmonetary contributions received this period.

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PTY - Political Party

COM - Recipient Committee

0

0

(other than PTY or SCC)

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

SCC - Small Contributor Committee

ummary of Expenditures upporting/Opposing Other andidates, Measures and Committees		to whole dollars		Statement covers period CALIFORNIA FORM			
ME OF FILER	for High School Board 2018		through 06/3	0/22	86 I.D. NUMBER 1407794		
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	CALEND	VE TO DATE DAR YEAR - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
		1	SUBTOTAL	. \$			

Payments Made Amounts may be rounded to whole dollars.			Statement covers period 61/01/22 61/01/22 61/01/22	CALIFORNIA 460 FORM 10
NAME OF FILER				I.D. NUMBER
John Rush for High School Board 2018				1407794
CODES: If one of the following codes accurately described 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 or meetings a OFC office experience PET petition circ PHO phone ban POL polling and POS postage, d	ommunications and appearances enses culating	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production TRC candidate travel, lodging, ar TRS staff/spouse travel, lodging,	duction costs and meals and meals s of the same candidate/sponsor
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 t	pe summarized on Sc	hedule D.	SI	JBTOTAL\$ 0
Schedule E Summary				
1. Itemized payments made this period. (Include all Schedu	le E subtotals.)			
2. Unitemized payments made this period of under \$100				
3. Total interest paid this period on loans. (Enter amount fro	m Schedule B, P	art 1, Column (e).)		
4. Total payments made this period. (Add Lines 1, 2, and 3.	Enter here and o	on the Summary Page, C	olumn A, Line 6.) To	OTAL \$68.00

Schedule I Miscellaneous Increases to Cash		Amounts may be rounded to whole dollars.	Statement covers period from 01/01/22	CALIFORNIA 460
			through 06/30/22	Page 10 of 10
SEE INSTRUCTIONS ON REVER NAME OF FILER	RSE			I.D. NUMBER
John Rush for High Sc	hool Board 2018			1407794
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
Attach additional inform	mation on appropriately labeled continuation she	ets.	SUBTOTA	L\$ 0
Schedule I Summa	ary			
1. Itemized increases to	cash this period		\$	0
2. Unitemized increase	s to cash of under \$100 this period		\$	0
3. Total of all interest re	eceived this period on loans made to others.	(Schedule H, Column (e).)	\$	0
	increases to cash this period. (Add Lines 1, a 14.)		TOTAL \$	0

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