## Recipient Committee Campaign Statement Cover Page

Cover Page	SEPENCO			
	Statement covers period from $\frac{01/01/22}{}$	Date of election if applicable: (Month, Day, Year)	Las VIIGELES COOKT	ge 1 of 2 For Official Use Only
EE INSTRUCTIONS ON REVERSE	through	11/3/20	2023 JAN 23 PM 3: 27 CAMPAIGN FINANCE	020152 C11324
. Type of Recipient Committee: All Committees - Cor	nplete Parts 1, 2, 3, and 4.	2. Type of Statement:		
State Candidate Election Committee Recall (Also Complete Part 5)  General Purpose Committee Sponsored Small Contributor Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored Uso Complete Part 6) Primarily Formed Candidate/ Officeholder Committee	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te Amendment (Explain be Corrected Totals on page	ermination)	Statement dd-Year Report
O Political Party/Central Committee	ilso Complete Part 7)			
	NUMBER 427897	Treasurer(s)	-	
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)	427077	NAME OF TREASURER		
Laura Bollinger for Citrus College Board of Trustees	2020	Laura Bollinger		
		MAILING ADDRESS		
			4	
STREET ADDRESS (NO P.O. BOX)		\ CITY	STATE ZIP CODE	AREA CODE/PHONE
,		Claremont	CA 91711	909-261-2150
CITY STATE ZIP CO	DE AREA CODE/PHONE	NAME OF ASSISTANT TREASUR	ER, IF ANY	
Claremont CA 9171		•		
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX		MAILING ADDRESS		
CITY STATE ZIP CO	DE AREA CODE/PHONE	CITY	STATE ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS				
		OPTIONAL: FAX / E-MAIL ADDRE	:55	
laurabollinger4citrus@gmail.com				
Verification     I have used all reasonable diligence in preparing and reviewing certify under penalty of perjury under the laws of the State of Executed on		knowledge the information contained	herein and in the attached schedule	s is true and complete. I
Executed onDate			or Responsible Officer of Sponsor	
Executed onDate	ву	Signature of Controlling Officeholder, Candidate, S	State Measure Proponent	
Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, S	State Measure Proponent	

FPPC Form 460 (Jan/2016))

FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

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Date Stamp

COVER PAGE

CALIFORNIA 1

## Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

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Statement covers period from 01/01/2022	CALIFORNIA 460		
through06/30/2022	Page of		
	I.D. NUMBER		
	1427897		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Laura Bollinger for Citrus College Board of Trustees 2020

Contributions Received	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
<ol> <li>Monetary Contributions</li> <li>Loans Received</li> <li>Schedule A, Line 3</li> <li>SUBTOTAL CASH CONTRIBUTIONS</li> <li>Add Lines 1 + 2</li> <li>Nonmonetary Contributions</li> <li>Schedule C, Line 3</li> <li>TOTAL CONTRIBUTIONS RECEIVED</li> <li>Add Lines 3 + 4</li> </ol>	0	\$\frac{0}{2,800.00}\$ \$\frac{2,800.00}{0}\$ \$\frac{2,800.00}{0}\$	General Elections  1/1 through 6/30 7/1 to Date  20. Contributions Received \$ \$  21. Expenditures Made \$ \$
Expenditures Made  6. Payments Made	0	\$\frac{0}{0}\$ \$\frac{0}{0}\$ \$\frac{0}{0}\$ \$\frac{0}{0}\$ \$\frac{0}{0}\$ \$\frac{0}{0}\$	Expenditure Limit Summary for State Candidates  22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)  Date of Election (mm/dd/yy)
12. Beginning Cash Balance	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.
18. Cash Equivalents	\$ 2,800.00	_	FPPC Form 460 (Jan/2016 FPPC Advice: advice@fppc.ca.gov (866/275-377 www.fppc.ca.go