COVER PAGE **Recipient Committee** Date Stamp CALIFORNIA **Campaign Statement** RECEIVED BY **FORM Cover Page** 1.03 ANGELES COUNT Page 1 Statement covers period Date of election if applicable: (Month, Day, Year) For Official Use Only from January 1, 2022 through June 30, 2022 SEE INSTRUCTIONS ON REVERSE 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 State Candidate Election Committee Semi-annual Statement Committee Special Odd-Year Report O Recall Termination Statement Controlled (Also file a Form 410 Termination) (Also Complete Part 5) Sponsored Amendment (Explain below) (Also Complete Part 6) General Purpose Committee Primarily Formed Candidate/ Sponsored Small Contributor Committee Officeholder Committee Political Party/Central Committee (Also Complete Part 7) I.D. NUMBER 3. Committee Information Treasurer(s) 1378133 COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) NAME OF TREASURER Jay Chen for Mt. Sac Board of Trustee, #5 Karen Chang MAILING ADDRESS STREET ADDRESS (NO P.O. BOX) CITY ZIP CODE AREA CODE/PHONE STATE 562-631-9519 Hacienda Heights CA 91745 CITY ZIP CODE AREA CODE/PHONE NAME OF ASSISTANT TREASURER, IF ANY STATE CA 626-617-9899 Hacienda Heights 91745 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX MAILING ADDRESS CITY STATE AREA CODE/PHONE ZIP CODE CITY AREA CODE/PHONE STATE ZIP CODE Hacienda Heights CA 91745 OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS trusteejaychen@gmail.com hikarenchang@gmail.com 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 tru

Executed on 7/28/27 Date	Ву		
Executed on 7 /28/2-2 Date	BySignature		sible Officer of Sponsor
Executed onDate	BySi	Signature of Controlling Officeholder, Candidate, State Measure Pro	pponent
Executed on	BySi	Signature of Controlling Officeholder, Candidate, State Measure Pro	ponent

FPPC Form 460 (Jan/2016))

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Recipient Committee Campaign Statement Cover Page — Part 2

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Officeholder or Candidate	e Controlled Commi	ttee	6	6. I	Primarily Formed Ballo	t Measure	Committee		
NAME OF OFFICEHOLDER OR CA	NDIDATE			ī	NAME OF BALLOT MEASURE				
Jay Chen									
OFFICE SOUGHT OR HELD (INCLU	JDE LOCATION AND DISTR	ICT NUMBER IF APPLI	ICABLE)	į	BALLOT NO. OR LETTER	JURISDICTI	ON	Tr	SUPPORT
Mt. Sac Community College	Trustee Area #5							[1	OPPOSE
RESIDENTIAL/BUSINESS ADDRES	S (NO. AND STREET) CI	TY STAT	E ZIP						
	I	Hacienda He CA	91745		dentify the controlling office	holder, candi	date, or state	measure prop	ponent, if any.
					NAME OF OFFICEHOLDER, CA	NDIDATE, OR F	PROPONENT		
Related Committees Not	Included in this Stat	tement: List any co	ommittees						
not included in this statement that contributions or make expenditur	at are controlled by you or	are primarily formed t			OFFICE SOUGHT OR HELD		,	DISTRICT NO	. IF ANY
COMMITTEE NAME		I.D. NUMBER							
NAME OF TREASURER		CONTROLLED COM	7	7.	Primarily Formed Cand	lidate/Offic	eholder Co	mmittee L	ist names of
NAME OF TREASURER		YES ON		'	officeholder(s) or candidate(s)	for which this	committee is	primarily form	ed.
COMMITTEE ADDRESS STE	REET ADDRESS (NO P.O. E				NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOL	JGHT OR HELD	
	, , , , , , , , , , , , , , , , , , ,	,							☐ SUPPORT
CITY	STATE ZIP C	ODE AREA CO	ODE/PHONE	ī	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOL	JGHT OR HELD	
									SUPPORT
COMMITTEE NAME		I.D. NUMBER	11.0						OPPOSE
				1	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT
									☐ OPPOSE
NAME OF TREASURER		CONTROLLED COM		· i	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT
		YES N	10						☐ OPPOSE
COMMITTEE ADDRESS STE	REET ADDRESS (NO P.O. E	BOX)							
CITY	STATE ZIP C	ODE AREACO	ODE/PHONE						
OH	STATE ZIP CO	ODE AREACI	ODEIPHONE		Atta	ch continuati	on sheets if n	ecessary	

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statement covers period from January 1, 2022	CALIFORNIA 460
through June 30, 2022	Page 3 of 7
	I.D. NUMBER
	1378133

Column B CALENDAR YEAR TOTAL TO DATE \$ 13.60 \$ 0 \$ 0 \$ 13.60 \$ 13.60 \$ 13.60 \$ 13.60 \$ 13.60 \$ 2263.48 \$ 2263.48
\$\frac{0}{2263.48}\$ \[\begin{array}{cccccccccccccccccccccccccccccccccccc
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. *Amounts in this section may be different from amounts reported in Column B. *Amounts in this section may be different from amounts reported in Column B. *FPPC Form 460 (Jan/2016 FPPC Advice: advice@fppc.ca.gov (866/275-3773)
3

Schedule A Monetary Contributions Received Amounts may be rounded to whole dollars.				Statement coverage from January 1, 2		california 460		
SEE INSTRUCTION	NS ON REVERSE			through June 30,	2022	Page _	4of_8	
NAME OF FILER Jay Chen for M	Mt. Sac Board of Trustee #5, 2020					1.D. NUI 1378133		
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 CALENDAR Y (JAN. 1 - DEC	YEAR	PER ELECTION TO DATE (IF REQUIRED)	
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC						
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC						
		□IND □COM □OTH □PTY □SCC						
		□IND □ COM □ OTH □ PTY □ SCC				,		
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC						
			SUBTOTAL	\$	图 35			
(Include all	A Summary eived this period – itemized monetary contribution Schedule A subtotals.)	•••••	1.9	.60	IND COM	(other t	al ent Committee than PTY or SCC) e.g., business entity)	

3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)......TOTAL \$ $\frac{13.60}{1.00}$

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www.fppc.ca.gov

SCC - Small Contributor Committee

Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		Amounts may be ro to whole dolla	Statement covers period from January 1, 2022		CALIFORNIA 460		
SEE INSTRUC	TIONS ON REVERSE			through June 30, 20)22	Page _5	of
	r Mt. Sac Board of Trustee, #5		•			1.D. NUM 137813	
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	CUMULATIV CALENDA (JAN. 1 - E	RYEAR	PER ELECTION TO DATE (IF REQUIRED)
2/14/22	Kim Nguyen for Supervisor, District 2	Monetary Contribution		\$250	\$250		\$250
	Santa Ana, CA 92704 ID: 1442910	Nonmonetary Contribution					
	☑ Support ☐ Oppose	Independent Expenditure					
2/23/22	Frank Yokohama For Cerritos City Council 2022	Monetary Contribution		\$250	\$250		\$250
	Cerritos, CA 90703 ID: 1442100	Nonmonetary Contribution		-			
	☑ Support ☐ Oppose	Independent Expenditure					
3/31/22	Diedre Thu Ha Nguyen for Assembly	Monetary Contribution		\$250	\$250		\$250
	Sacramento, CA 95841 ID: 1444098	Nonmonetary Contribution					
	☑ Support ☐ Oppose	Independent Expenditure					
			SUBTOTAL	\$ 750.00			
Schedule	e D Summary						
	contributions and independent expenditures made	e this period. (Include :	all Schedule D subtotals	.		s ²	2180
	red contributions and independent expenditures ma						10.00
	ntributions and independent expenditures made thi						2220

Schedule D (Continuation Sheet) Amounts may be rounded SCHEDULE D (CONT.) to whole dollars. **Summary of Expenditures** Statement covers period **CALIFORNIA** from January 1, 2022 Supporting/Opposing Other FORM Candidates, Measures and Committees Page $\frac{6}{}$ through June 30, 2022 NAME OF FILER I.D. NUMBER Jay Chen Mt. Sac Board of Trustee, #5 1378133 NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR CUMULATIVE TO DATE PER ELECTION DESCRIPTION AMOUNT THIS DATE MEASURE NUMBER OR LETTER AND JURISDICTION, TYPE OF PAYMENT CALENDAR YEAR TO DATE (IF REQUIRED) PERIOD OR COMMITTEE (JAN. 1 - DEC. 31) (IF REQUIRED) Monetary 4/26/22 Connor Traut for Buena Park, District 5 \$150 \$150 \$150 Contribution Nonmonetary Buena Park, CA 90620 ID: 1435102 Contribution Independent Support □ Oppose Expenditure ✓ Monetary \$530 \$530 \$530 4/13/22 California Democratic Party Contribution ☐ Nonmonetary Sacramento, CA 95811 ID:741666 Contribution Independent Support Oppose Expenditure ✓ Monetary \$500 5/6/22 David Chiu for City Attorney. 2022 \$500 \$500 Contribution Nonmonetary San Francisco, CA 94104 ID: 1441936 Contribution Independent Support ☐ Oppose Expenditure ✓ Monetary 5/6/22 Alton Wang PCC Board of Trustee \$250 \$250 \$250 Contribution Nonmonetary Inglewood, CA 90301 ID: 1443867 Contribution

SUBTOTAL \$ 1430

Independent

Expenditure

Support

Oppose

			SCHEDULE E
chedule E	Amounts may be rounded to whole dollars.	Statement covers period	CALIFORNIA 460
ayments Made		from January 1, 2022	FORM 400
		June 20, 2022	7 8

through June 30, 2022 Page _ SEE INSTRUCTIONS ON REVERSE I.D. NUMBER NAME OF FILER Jay Chen for Mt. Sac Board of Trustee #5 1378133

CODES: If one of the following codes accurately desc	ribes 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 C	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Kim Nguyen for Supervisor	СТВ	Campaign contribution	\$250
Santa Ana, CA 92704 ID: 1442910			
Frank Yokoyama for Cerritos City Council	СТВ	Campaign Contribution	\$250
Cerritos, CA 90703 ID: 1442100			
Thu Ha Nguyen for Assembly	СТВ	Campaign Contribution	\$250
Sacramento, CA 95841 ID: 1444098			

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 750 Schedule E Summary 2180 1. Itemized payments made this period. (Include all Schedule E subtotals.).....\$ 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)......\$

SCHEDULE E (CONT	SCH	IEDI	JLE	Ε	(CON	Т.
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Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

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Statement covers period January 1, 2022 from	CALIFORNIA 460
through <u>June 30, 2022</u>	Page of
	I.D. NUMBER
	1378133

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Jay Chen for Mt. Sac Board of Trustee, #5

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		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)

CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
СТВ		\$150
		·
СТВ		\$500
СТВ		\$250
СТВ		\$530
	СТВ	CTB CTB

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