			7/31/23	3 FX	00//50 0405
Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)			Date Stamp RECEIV	ED BY	LIFORNIA 460
SEE INSTRUCTIONS ON REVERSE	Statement covers period  from01/01/2023  through06/30/2023	Date of election if applicable: (Month, Day, Year)	2023 AUG - I	PM 3:P20	For Official Use Only
		0. 7	DISCLOSUR	E SECTION	
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored Also Complete Part 6) 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 To	ermination)	Quarterly Sta Special Odd Supplementa Statement - A	Year Report
3. Committee Information	D. NUMBER 1398148	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) BENITEZ FOR SCHOOL BOARD 2022		NAME OF TREASURER Juan Benitez MAILING ADDRESS			
STREET ADDRESS (NO P.O. BOX)		CITY	STATE	ZIP CODE	AREA CODE/PHONE
CITY STATE ZIP CO		Long Beach NAME OF ASSISTANT TREASUR	CA RER, IF ANY	90802	(562)712-6656
Long Beach CA 9080 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. B		Christopher Thomas MAILING ADDRESS 80 Lime Ave., #7	.,		
CITY STATE ZIP CO	DDE AREA CODE/PHONE	CITY Long Beach	STATE CA	ZIP CODE 90802	AREA CODE/PHONE (562)712-6656
OPTIONAL: FAX / E-MAIL ADDRESS christhomasad70@yahoo.com		OPTIONAL: FAX / E-MAIL ADDR	RESS		
Verification     I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of Californi	g this statemen! a that the foregi			'n	e and complete. I certify
Executed on					

Executed on \_\_\_\_

## Recipient Committee Campaign Statement Cover Page — Part 2

COVER F	AGE-PART2
CALIFORNIA FORM	460
Page2	of <u>11</u>

Officeholder or Candidate Controlled Committee			6.	Primarily Formed Balle	Ballot Measure Committee				
NAME OF OFFICEHOLDER OR CANDIDATE					NAME OF BALLOT MEASURE				
JUAN M. BENITEZ									
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIS	STRICT NUMBER I	F APPLICAB	LE)		BALLOT NO. OR LETTER	JURISDICTIO	ON		SUPPORT
Board of Education Long Beach Unif.Sch. District 3									OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP		Identify the controlling off	ficeholder, car	ndidate, or sta	ite measure j	proponent, if any.
<u> </u>	Long Beach	CA	90802		NAME OF OFFICEHOLDER, CAN	NDIDATE OR PR	OPONENT		
Related Committees Not Included in this not included in this statement that are controlled by contributions or make expenditures on behalf of you	you or are prima				OFFICE SOUGHT OR HELD			DISTRICT NO. I	F ANY
COMMITTEE NAME	I.D. NUMBE	ER		,	Primarily Formed Con	didata/Offic	shalder Co.		
NAME OF TREASURER	CONTROLL	ED COMMIT	TEE?	7.	Primarily Formed Can officeholder(s) or candidate(s				
	☐ YES	. NO	)						
COMMITTEE ADDRESS STREET ADDRESS (NO P	O. BOX)				NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	SHT OR HELD	SUPPORT OPPOSE
CITY STATE	ZIP CODE	AREA CO	DE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	HT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBE	ER			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	SHT OR HELD	SUPPORT
NAME OF TREASURER	CONTROLL	.ED COMMIT	TEE?		NAME OF OFFICEHOLDER OR (	ANDIDATE	OFFICE SOUG	OUT OR HELD	OPPOSE
	☐ YES	□ NO			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	SHI OK HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P	.O. BOX)				-				
CITY STATE :	ZIP CODE	AREA COL	DE/PHONE		Atta	ch continuatio	on sheets if no	ecessary	

## Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

	SUIVINART PAGE
Statement covers period	CALIFORNIA 160
from01/01/2023	FORM TOU
through06/30/2023	Page 3 of 11
	I.D. NUMBER
	1200140

OLIVATA DIVIDA OF

NAME OF FILER BENITEZ FOR SCHOOL BOARD 2022 Column A Column B Calendar Year Summary for Candidates **Contributions Received** TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROMATTACHED SCHEDULES) TOTAL TO DATE **General Elections** 7/1 to Date 1/1 through 6/30 0.00 0.00 20. Contributions SUBTOTAL CASH CONTRIBUTIONS ...... Add Lines 1 + 2 \$ \_\_\_\_\_\_ 0.00 Received 0.00 0.00 Nonmonetary Contributions ...... Schedule C, Line 3 21. Expenditures Made 5. TOTAL CONTRIBUTIONS RECEIVED ...... Add Lines 3 + 4 \$ \_\_\_\_\_ 0.00 **Expenditures Made Expenditure Limit Summary for State Candidates** 0.00 0.00 22. Cumulative Expenditures Made\* 6,275.00 (If Subject to Voluntary Expenditure Limit) 0.00 Date of Election Total to Date (mm/dd/yy) 10. Nonmonetary Adjustment ....... Schedule C, Line 3 0.00 0.00 **Current Cash Statement** 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 25,452.12 To calculate Column B, add 0.00 amounts in Column A to the 13. Cash Receipts ...... Column A. Line 3 above corresponding amounts \*Amounts in this section may be different from amounts 150.00 14. Miscellaneous Increases to Cash ...... Schedule I, Line 4 from Column B of your last reported in Column B. report. Some amounts in 15. Cash Payments ...... Column A, Line 8 above 6,275.00 Column A may be negative 19,327.12 figures that should be 16. ENDING CASH BALANCE ......... Add Lines 12 + 13 + 14, then subtract Line 15 \$ subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 17. LOAN GUARANTEES RECEIVED ...... Schedule B, Part 2 \$ \_\_\_\_\_ carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). 18. Cash Equivalents ...... See instructions on reverse \$ \_\_\_\_\_ 19. Outstanding Debts ...... Add Line 2 + Line 9 in Column B above \$ \_\_\_\_\_ FPPC Form 460 (Jan/2016)

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

Schedule D SCHEDULE D **Summary of Expenditures** Statement covers period **CALIFORNIA** Amounts may be rounded Supporting/Opposing Other **FORM** to whole dollars. 01/01/2023 from Candidates, Measures and Committees through \_\_06/30/2023 Page \_\_4 \_\_ of \_\_11 SEE INSTRUCTIONS ON REVERSE I.D. NUMBER NAME OF FILER 1398148 BENITEZ FOR SCHOOL BOARD 2022 CUMULATIVE TO DATE PER ELECTION NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR DESCRIPTION AMOUNT THIS TYPE OF PAYMENT CALENDAR YEAR TO DATE DATE MEASURE NUMBER OR LETTER AND JURISDICTION. (IF REQUIRED) PERIOD (IF REQUIRED) (JAN. 1 - DEC. 31) OR COMMITTEE Greater Long Beach Black Democratic Club 500.00 500.00 02/24/2023 Monetary Contribution □ Nonmonetary Contribution Independent Expenditure ∑ Support □ Oppose 500.00 500.00 02/24/2023 Long Beach Democratic Club Monetary Contribution □ Nonmonetary Contribution Independent Expenditure ∑ Support Oppose 500.00 05/30/2023 Tunua Thrash-Ntuk 500.00 Monetary

Contribution

Nonmonetary Contribution Independent Expenditure

			_	
Sch	iedu	ie D	Sum	mary

City Council Member

∑ Support

☐ Oppose

City of Long Beach

District 8

1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)		\$ 2,000.00
2. Unitemized contributions and independent expenditures made this period of under \$100		\$ 0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	. TOTAL	\$ 2,000.00

1,500.00

SUBTOTAL \$

Summary Supportin	D ation Sheet) of Expenditures ng/Opposing Other es, Measures and Committees	Amounts may to whole d		Statement covers  from01/01/20  through06/30/20	23	SCHEDULE D (CONT.)  CALIFORNIA 460  FORM  Page 5 of 11		
NAME OF FILER						I.D. NUMB	ER	
BENITEZ FOR	SCHOOL BOARD 2022					139814	8	
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 - [	R YEAR	PER ELECTION TO DATE (IF REQUIRED)	
06/06/2023	Suely Saro City Council Member City of Long Beach District 6  X Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	`	500.00		500.00		
,	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure						
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure						
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure						
	,		SUBTOTAL	\$ 500.00			The second secon	

Schedule E Payments Made  SEE INSTRUCTIONS ON REVERSE NAME OF FILER  REPNATEZ, FOR COURSE PARE 2022		ts may b	e rounde ollars.	d .		Statem om	01/01/2 06/30/2	023	Page6	6 of11
CODES: If one of the following codes accurately describes 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 mei MTG mee OFC offii PET peti PHO pho POL poli POS pos PRO proi	mber cometings and ce expendition circul one banks ling and stage, deli	munication: i appearant ses ating urvey rese very and n	s ces	PARE SARE SARE TE	D radio D retui L cam L t.v. o C cano S staff F trans	o airtime and rned contribu paign worker or cable airtin didate travel, dispouse traves fer between or registration	production cos tions rs' salaries ne and product lodging, and mel, lodging, and committees of	its ion costs eals meals the sam	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CODE	OR	DESCRIPT	ION OF F	PAYMENT			AMOUNT PAID
GOULD & ORELLANA, LLC Norwalk, CA 90650			PRO							150.00
GOULD & ORELLANA. LLC Norwalk, CA 90650	<u> </u>	,	PRO				,			- 150.00
Greater Long Beach Black Democratic Club (ID# 1442145) Norwalk, CA 90650			СТВ		,					500.00
* Payments that are contributions or independent expenditures n	nust also b	e summa	arized on	Schedule D.				SUBT	OTAL\$	800.0
Schedule E Summary				4						
1. Itemized payments made this period. (Include all Schedule	E subtotal	s.)							\$	6,200.00
2. Unitemized payments made this period of under \$100									\$	75.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)							\$	0.00		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SCH	<b>FDIII</b>	FF	(CONT.)	
			CONT	

Statement covers period	CALIFORNIA 460
from01/01/2023	FORM TOO
through06/30/2023	Page 7 of11
	I.D. NUMBER
	1398148

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 petition circulating TEL t.v. or cable airtime and production costs PET phone banks FIL candidate filing/ballot fees PHO TRC candidate travel, lodging, and meals FND fundraising events polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)\* postage, delivery and messenger services transfer between committees of the same candidate/sponsor legal defense PRO professional services (legal, accounting) VOT voter registration LEG WEB information technology costs (internet, e-mail) LIT campaign literature and mailings PRT print ads

3,

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE C	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Long Beach Democratic Club (ID# 981723)	СТВ		500.00
Norwalk, CA 90650			
Citi Cards	CMP		1,500.00
Phoenix, AZ 85062			
GOULD & ORELLANA, LLC	PRO		150.00
Norwalk, CA 90650		,	7
GOULD & ORELLANA. LLC	PRO	_	150.00
Norwalk, CA 90650			
GOULD & ORELLANA. LLC	PRO		150.00
Norwalk, CA 90650			

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 2,450.00

Schedule E
(Continuation Sheet)
Payments Made

Amounts may be rounded to whole dollars.

			SCHE	DULE	E (CO	NT.
Stater	ment covers period	CALIF	ORN	A /	6	n
from	01/01/2023	FO	FORM		<del>-</del>	
through_	06/30/2023	Page	8	of	11	

I.D. NUMBER

1398148

EE	INS	TRUC	TIONS	ON	REV	ERSE

NAME OF FILER

BENITEZ FOR SCHOOL BOARD 2022

CMP campaign paraphernalia/misc.

CNS campaign consultants

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

MBR member communications RAD radio airtime and production costs 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

candidate filing/ballot fees phone banks TRC candidate travel, lodging, and meals FIL PHO FND fundraising events polling and survey research TRS staff/spouse travel, lodging, and meals

IND independent expenditure supporting/opposing others (explain)\* 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

ЦΤ campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

	riti piili aus		WED Information technology costs (internet, e-mail)			
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION OF PAYMENT	AM	OUNT PAID
GOULD & ORELLANA, LLC	<del></del>	PRO	$\top$			150.00
Norwalk, CA 90650						
Long Beach Forward		cvc	+			500.00
Long Beach, CA 90802						
Partners of Parks		cvc	+			500.00
Long Beach, CA 90815						
Thrash-Ntuk for LB City Council 2024 (ID# 1459179)		CTB	+			500.00
Norwalk, CA 90650						
Thomas & Associates. LLC		PRO	+			800.00
Long Beach, CA 90802						
* Payments that are contributions or independent expenditures must als	so be summarized on	Schedule !	D.	SUBTO	TAL S	2,450.00

## Schedule E

SCHE	-DULE	: =	(CC	N I.)

Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA 460
Payments Made	to whole dollars.	from01/01/2023	FORM TOO
EE INSTRUCTIONS ON REVERSE		through 06/30/2023	Page 9 of 11
AME OF FILER			I.D. NUMBER
SENITEZ FOR SCHOOL BOARD 2022			1398148

CODES: If one of the following codes accurately	describes the pay	ment, you may enter the	code. Otherwise,	describe the payment.
CMP campaign paraphernalia/misc.	MBR me	mber communications	RAD	radio airtime and production costs
CNS campaign consultants	MTG me	etings and appearances	RFD	returned contributions
CTB contribution (explain nonmonetary)*	OFC offi	ce expenses	SAL	campaign workers' salaries
CVC civic donations	PET pet	tion circulating	TEL	t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO pho	ne banks	TRC	candidate travel, lodging, and meals
FND fundraising events	POL poli	ing and survey research	TRS	staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (ex	plain)* POS pos	tage, delivery and messenger	services TSF	transfer between committees of the same candidate/sponsor
LEG legal defense	PRO pro	fessional services (legal, acco	unting) VOT	voter registration
LIT campaign literature and mailings	PRT prin	it ads	WEB	information technology costs (internet, e-mail)
NAME AND ADDRESS OF DAVIE				

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)  Suely Saro for Long Beach City Council 2024 (ID# 1458520)		OR	DESCRIPTION OF PAYMENT	AMOUNT PAID	
				500.00	
Long Beach, CA 90802					
•					

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

500.00

•			
NAME OF FILER BENITEZ FOR SCHOOL BOARD 2022	Amounts may be rounded to whole dollars.	Statement covers period from 01/01/2023	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE		through06/30/2023	Page 10 of 11
NAME OF FILER			I.D. NUMBER
BENITEZ FOR SCHOOL BOARD 2022	<b>3</b>		1398148
NAME OF AGENT OR INDEPENDENT CONTRACTOR		,	
Citi Cards			
CODES: If one of the following codes accurately describe	s the payment, you may enter the cod	le. Otherwise, describe the paymen	t.
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)*	MBR member communications MTG meetings and appearances OFC office expenses	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries	costs

candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research 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 professional services (legal, accounting) VOT voter registration LIT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

petition circulating

PET

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT		AMOUNT PAID
Partners of Parks	CVC				1,500.00
Long Beach, CA 90815					
		,			
	د ا				
Attach additional information on appropriately labeled continuation sheets.				TOTAL* \$	1,500.00

<sup>\*</sup> Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

TEL t.v. or cable airtime and production costs

CVC civic donations

Schedule I **SCHEDULE I** Miscellaneous Increases to Cash Amounts may be rounded Statement covers period CALIFORNIA to whole dollars. **FORM** 01/01/2023 through 06/30/2023 Page \_\_\_11\_\_ of \_\_\_11\_\_ SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER 1398148 BENITEZ FOR SCHOOL BOARD 2022 DATE AMOUNT OF FULL NAME AND ADDRESS OF SOURCE DESCRIPTION OF RECEIPT RECEIVED INCREASE TO CASH (IF COMMITTEE, ALSO ENTER I.D. NUMBER) 03/13/2023 GOULD & ORELLANA, LLC check not negotiated 150,00 Norwalk, CA 90650 Attach additional information on appropriately labeled continuation sheets. SUBTOTAL \$ 150.00 Schedule I Summary 1. Itemized increases to cash this period. ......\$ 2. Unitemized increases to cash of under \$100 this period.......\$ 3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) ......\$ 4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the 150.00

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www.fppc.ca.gov