Recipient Committee Date Stamp CALIFORNIA **Campaign Statement** Cover Page S ANGELES COUNT Page Statement covers period Date of election if applicable: (Month, Day, Year) For Official Use Only 07-01-2022 CAMPAIGN FINANCE 09-24-2022 November 8, 2022 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 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)

General Purpose Commit Sponsored Small Contributor Cor Political Party/Central	nmittee		y Formed Candidate/ older Committee ete Part 7)	☐ Amendment (Explain below)			·
Committee Informatio	n	I.D. NUMB 14524		Treasurer(s)	_		
COMMITTEE NAME (OR CANDIDA	ATE'S NAME IF NO COMMIT	ITEE)		NAME OF TREASURER			
Blanco for Antelope Va 2022;Juan	alley High School E	Board of Trus	stee Area #4	Juan Blanco MAILING ADDRESS		·	
STREET ADDRESS (NO P.O. BOX)	·)			CITY	STATE	ZIP CODE	AREA CODE/PHONE
				Palmdale	CA	93551	6618607823
CITY	STATE	ZIP CODE	AREA CODE/PHONE	NAME OF ASSISTANT TREASURER, IF ANY			
Palmdale	CA	93551	6618607823				
MAILING ADDRESS (IF DIFFEREN	IT) NO. AND STREET OR P.	O. BOX		MAILING ADDRESS			
CITY	STATE	ZIP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
OPTIONAL FAX / E-MAIL ADDRE	22			OPTIONAL: EAVIE MAIL ADDRESS			

4. Verification

juanthedem@yahoo.com

41

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 penjury under the laws of the State of California that the forego

Executed on	09-27-2022 Date	By	ristant Treasurer
Executed on	09-27-2022 Date	By _	ire Proponent or Responsible Officer of Sponsor
Executed on	Date	Ву	Signature of Controlling Officeholder, Candidate, State Measure Proponent
Executed on	Date	Ву	Signature of Controlling Officeholder, Candidate, State Measure Proponent

Recipient Committee Campaign Statement Cover Page — Part 2

	COVER F	AGE	- PART 2
CALI F	FORNIA ORM	4	60
Page	2	of	6

Officeholder or Candidate Contr	rolled Committee	6.	Primarily Formed Ballot Me	easure Committee		.*
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE	·		
Juan Blanco						
OFFICE SOUGHT OR HELD (INCLUDE LOCAT	ION AND DISTRICT NUMBER IF APPLICABLE)	•	BALLOT NO. OR LETTER JUF	RISDICTION		SUPPORT
Antelope Valley Joint Union High	School District Governing Board Membe					OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AN	D STREET) CITY STATE ZIP		Identify the controlling officeholds			
38256 Hillcrest Dr	Palmdale, CA., 93551		Identify the controlling officeholds	·	measure propo	nent, it any.
			NAME OF OFFICEHOLDER, CANDIDAT	E, OR PROPONENT		
	ed in this Statement: List any committees strolled by you or are primarily formed to receive shalf of your candidacy.	•	OFFICE SOUGHT OR HELD		DISTRICT NO. II	ANY
COMMITTEE NAME	I.D. NUMBER				1	
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Candidat	e/Officeholder Co	ommittee <i>Li</i> s	t names of
NAIVIE OF TREASURER	YES NO		officeholder(s) or candidate(s) for w	hich this committee is	primarily formed	i.
COMMITTEE ADDRESS STREET ADD	DRESS (NO P.O. BOX)		NAME OF OFFICEHOLDER OR CANDID	DATE OFFICE SOL	JGHT OR HELD	SUPPORT OPPOSE
CITY	STATE ZIP CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR CANDID	OATE OFFICE SOL	JGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR CANDID	DATE OFFICE SOL	JGHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR CANDID	DATE OFFICE SOL	JGHT OR HELD	☐ SUPPORT
	☐ YES ☐ NO					I I OPPOSE
COMMITTEE ADDRESS STREET ADD	DRESS (NO P.O. BOX)					OPPOSE

Campaign Disclosure Statement Summary Page

19. Outstanding Debts...... Add Line 2 + Line 9 in Column B above \$ _

Amounts may be rounded to whole dollars.

						~~
SI	JIV.	πM	А	RY	PA	(∹⊢

Statement covers period

Juninary rage		from	07-01-2022	FORM 400
SEE INSTRUCTIONS ON REVERSE		through .	09-24-2022	Page3 of6
NAME OF FILER Juan Blanco				I.D. NUMBER 1452455
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE		nmary for Candidates e State Primary and
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	\$ \frac{0}{4298} \frac{2000}{2000}	\$ 4298 0 \$ 4298 2000 \$ 6298	1/1 t 20. Contributions Received \$ 21. Expenditures	hrough 6/30 7/1 to Date
Expenditures Made 6. Payments Made	\$ 2852 0 2000	\$ 2852 0 \$ 2852 0 2000 \$ 4852		Summary for State ve Expenditures Made* o Voluntary Expenditure Limit) Total to Date
Current Cash Statement 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 reported in Column B.	may be different from amounts

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

www.fppc.ca.gov

Schedule Monetary	A Contributions Received		nts may be rounded whole dollars.	from	1-2022	CALIFORNIA 460		
SEE INSTRUCTIO	NS ON REVERSE			through09-2	24-2022	Pag	e of6	
NAME OF FILER Juan Bland	co ·					1.D. N 1452	UMBER 455	
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	EAR	PER ELECTION TO DATE (IF REQUIRED)	
09-15-2022	AV Teachers Association 1230947 Lancaster, CA. 93534	☐ IND I COM ☐ OTH ☐ PTY ☐ SCC	Union-Pac	2500			2500	
08-12-2022	Juan Blanco Palmdale, CA. 93551	ZIND COM OTH PTY	Retired	1600			1600	
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						

SUBTOTAL \$ 4100

□ COM □ OTH PTY □ scc

Schedule A Summary

1. Amount received this period – itemized monetary contributions. 4100 (Include all Schedule A subtotals.)\$ 198 2. Amount received this period – unitemized monetary contributions of less than \$100\$ 3. Total monetary contributions received this period.

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

*Contributor Codes

IND -- Individual

4298

COM - Recipient Committee

(other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

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

www.fppc.ca.gov

Schedule C			Amounts may be rounded				SCHEDULE			
	netary Contributions Received		to whole dollars.	Stat	ement covers	period	CALIFORNIA 460			
	•				from	07-01-20	22		DRM	400
	TIONS ON REVERSE				throug	09-24-2	022	Page_	5 of	6
NAME OF FILE	R							I.D. NUI	MBER	
Juan Bla	nco							14524	55	
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 GOODS OR SERV		AMOUNT/ FAIR MARKET VALUE	CUMULA DA CALENDA (JAN 1 -	TE AR YEAR	TO	ELECTION D DATE EQUIRED)
09-21-22	AV Teachers Association #1230947 Lancaster, CA. 63534	□IND ICOM □OTH □PTY □SCC		Campaign Mailers for the November 8, 2022 Election		2000				2000
		□IND □COM □OTH □PTY □SCC		·						
		□IND □COM □OTH □PTY □SCC				·				
		☐IND☐COM☐OTH☐PTY☐SCC								
Attach add	ditional information on appropriately labeled	continuation	sheets.	SUBTO	OTAL \$	2000				
1. Amount	e C Summary received this period – itemized nonmonetar all Schedule C subtotals.)				\$	2000	IND		al ent Commi	
•	received this period – unitemized nonmone					0		l – Òther		or SCC) ess entity)
3. Total no	nmonetary contributions received this period nes 1 and 2. Enter here and on the Summar	d.				2000		– Politica – Small		Committee

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

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

CMP campaign paraphernalia/misc.

CTB contribution (explain nonmonetary)*

campaign literature and mailings

independent expenditure supporting/opposing others (explain)*

CNS campaign consultants

FIL candidate filing/ballot fees

CVC civic donations

LEG legal defense

IND

FND fundraising events

Juan Blanco

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

RAD radio airtime and production costs MBR member communications MTG meetings and appearances RFD returned contributions

OFC office expenses SAL campaign workers' salaries PET petition circulating TEL t.v. or cable airtime and production costs PHO

TRC candidate travel, lodging, and meals phone banks TRS staff/spouse travel, lodging, and meals POL polling and survey research

POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor

PRO professional services (legal, accounting) VOT voter registration

WEB information technology costs (internet, e-mail)

I.D. NUMBER

1452455

* Payments that are contributions or independent expenditures must also be	summarized on Schedule D.	SUBTOTAL	\$ 2812
Palmdale, CA. 9355			
Home2 by Hilton Suites	FND	Facility rental for candidate fund raiser	330
Palmdale, CA. 93550		·	
Ventura Graphix	PRT	4X8 FT CAMPAIGN SIGNS	882
Palmdale, CA. 93551	112		1000
Juan Blanco	FiL	Candidate filing fee for AVUHSD area #4	1600
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE C	DR DESCRIPTION OF PAYMENT	AMOUNT PAID

PRT print ads

1. Itemized payments made this period. (Include all Schedule E subtotals.)	2812
2. Unitemized payments made this period of under \$100	340
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	30
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	2852