| Recipient Committee<br>Campaign Statement<br>Cover Page<br>Government Code Sections 84200-84216.5)   |   |   | Date Stamp RECEIV     | ED BY     | LIFORNIA 460  |
|--|---|---|-----------------------|-----------|---|
| SEE INSTRUCTIONS ON REVERSE  | Statement covers period from09/25/2022                              | Date of election if applicable:<br>(Month, Day, Year)   |                       | PM 12: 00 | ge 1 of 14 For Official Use Only                                  |
|  |   |   | UAITAIUN              | LIMMITOL  | -   |
| I. Type of Recipient Committee: All Committees  Solution Committee State Candidate Election Committee Recall (Also Complete Part 5)  General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee | - Complete Parts 1, 2, 3, and 4.  □ Primarily Formed Ballot Measure | 2. Type of Statement:    Preelection Statement     Semi-annual Statement     Termination Statement     (Also file a Form 410 Te | -                     | Supplemen | tatement<br>d-Year Report<br>tal Preelection<br>- Attach Form 495 |
| COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITT Cerdan 4 School Board 2022  STREET ADDRESS (NO P.O. BOX)   | I.D. NUMBER<br>1449235<br>TEE)                                      | Treasurer(s)  NAME OF TREASURER  YOLANDA MIRANDA  MAILING ADDRESS  CITY   | STATE                 | ZIP CODE  | AREA CODE/PHONE   |
|  | P CODE AREA CODE/PHONE<br>01722 (323) 497-0826<br>0. BOX            | NAME OF ASSISTANT TREASUR   | CA<br>RER, IF ANY     | 91722     | (626) 915-7635  |
|  | P CODE AREA CODE/PHONE  | OPTIONAL: FAX / E-MAIL ADDR   | STATE                 | ZIP CODE  | AREA CODE/PHONE   |
| 4. Verification  I have used all reasonable diligence in preparing and revie under penalty of perjury under the laws of the State of Calification  Executed on   |   | · · · · · · · · · · · · · · · · · · ·   |                       | ı         | rue and complete. I certify                                       |
| Executed on  | Ву  | Signature of Controlling Officeholder, Candidate, St  | ate Measure Proponent |           |   |
| Executed onDate  | Ву  | Signature of Controlling Officeholder, Candidate, St  | ate Measure Proponent |           | FPPC Form 460 (Jan/2016)  |

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

#### Recipient Committee Campaign Statement Cover Page — Part 2

|             | COVER       | PAG | E-PART2    |
|-------------|-------------|-----|------------|
| CALIF<br>FC | ORNIA<br>RM | 4   | <b>160</b> |
| Page        | 2           | of_ | 14         |

| Officeholder or Candidate Controlled Committee  |                   |            | 6.       | 6. Primarily Formed Ballot Measure Committee |                                |               |                |              |                  |
|---|-------------------|------------|----------|--|--------------------------------|---------------|----------------|--------------|------------------|
| NAME OF OFFICEHOLDER OR CANDIDATE   |                   |            |          | NAME OF BALLOT MEASURE                       |                                |               |                |              |                  |
| Carlos Cerdan   |                   |            |          |  |                                |               |                |              |                  |
| OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIST  | RICT NUMBER IF    | APPLICABI  | LE)      |  | BALLOT NO. OR LETTER           | JURISDICTI    | ON             |              | SUPPORT          |
| Board of Education Montebello USD   |                   |            |          |  |                                |               |                |              | OPPOSE           |
| RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)   | CITY              | STATE      | ZIP      |  | Identify the controlling of    | Saabaldar aa  |                | -t           |                  |
| 1   | Montebello        | CA         | 90640    |  | Identify the controlling of    |               |                | ate measure  | proponent, if an |
|   |                   |            |          |  | NAME OF OFFICEHOLDER, CA       | NDIDATE, OR P | ROPONENT       |              |                  |
| Related Committees Not Included in this S   | Statament: 1      | !=4 == ==. |          |  |                                |               |                |              |                  |
| not included in this statement that are controlled by yo<br>contributions or make expenditures on behalf of your of | u or are primarii |            |          |  | OFFICE SOUGHT OR HELD          |               |                | DISTRICT NO. | IF ANY           |
| COMMITTEE NAME  | I.D. NUMBER       | ₹          |          |  |                                |               |                |              |                  |
|   |                   |            |          |  |                                |               |                |              |                  |
|   |                   |            |          | 7.   | Primarily Formed Can           | didate/Offic  | eholder Co     | mmittee /    | ist names of     |
| NAME OF TREASURER   | CONTROLLE         | D COMMIT   | TEE?     | •••  | officeholder(s) or candidate(s |               |                |              |                  |
|   | ☐ YES             | □ NO       | )        |  |                                |               | LOSSION COLUMN | OUT OR UELD  |                  |
| COMMITTEE ADDRESS STREET ADDRESS (NO P.O  | . BOX)            |            |          |  | NAME OF OFFICEHOLDER OR        | CANDIDATE     | OFFICE SOU     | GHT OR HELD  | SUPPORT OPPOSE   |
| CITY STATE ZIF  | P CODE            | AREA COI   | DE/PHONE |  | NAME OF OFFICEHOLDER OR        | CANDIDATE     | OFFICE SOU     | GHT OR HELD  | SUPPORT          |
| COMPUTERVIANE   | I n want          |            |          |  |                                |               |                |              | OPPOSE           |
| COMMITTEE NAME  | I.D. NUMBER       | •          |          |  | NAME OF OFFICEHOLDER OR        | CANDIDATE     | OFFICE SOU     | GHT OR HELD  | SUPPORT OPPOSE   |
| NAME OF TREASURER   | CONTROLLE         | D COMMIT   | TEE?     |  | NAME OF OFFICEHOLDER OR        | CANDIDATE     | OFFICE SOUR    | GHT OR HELD  |                  |
|   | ☐ YES             | □ NO       | )        |  | or or rounded in               |               | 311.02.000     |              | SUPPORT OPPOSE   |
| COMMITTEE ADDRESS STREET ADDRESS (NO P.O  | . BOX)            |            |          |  |                                |               |                |              |                  |
| CITY STATE ZIF  | P CODE            | ABEA CO    | DE/PHONE |  |                                |               |                |              |                  |
| CITY STATE ZIF  | , CODE            | AREA GOL   | DE/PHONE |  | Atta                           | ch continuati | on sheets if n | necessary    |                  |
|   |                   |            |          |  |                                |               |                |              | ,                |

# Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

Statement covers period CALIFORNIA 160

| SEE INSTRUCTIONS | ON REVERSE |
|------------------|------------|
|------------------|------------|

NAME OF FILER

Cerdan 4 School Board 2022

| from      | 09/25/2022 | FORM TOO    |
|-----------|------------|-------------|
| through _ | 10/22/2022 | Page3 of14  |
|           |            | I.D. NUMBER |
|           |            | 1449235     |

SUMMARY PAGE

| ol Board 2022   |  |  | 1449235  |
|---|--|--|--|
|   | COLUMN A TOTALTHIS PERIOD MATTACHED SCHEDULES) | COLUMN B<br>CALENDAR YEAR<br>TOTAL TO DATE                 | Calendar Year Summary for Candidates<br>Running in Both the State Primary and<br>General Elections |
| ontributions Schedule A, Line 3 \$                          | 5,270.00                                       | \$6,630.00   | 1/1 through 6/30 7/1 to Date   |
| eived Schedule B, Line 3                                    | 0.00   | 9,500.00   | 1/1 through 6/30 //1 to Date   |
| CASH CONTRIBUTIONS Add Lines 1 + 2 \$                       | 5,270.00                                       | \$16,130.00  | 20. Contributions Received \$ \$   |
| ry Contributions Schedule C, Line 3                         | 0.00   | 0.00   | 21 Expenditures  |
| ITRIBUTIONS RECEIVED Add Lines 3 + 4 \$                     | 5,270.00                                       | \$16,130.00  | Made \$\$  |
| es Made   |  |  | Expenditure Limit Summary for State  |
| Made Schedule E, Line 4 \$                                  | 8,646.57                                       | \$13,884.80  | Candidates   |
|   | 0.00   | 0.00   | 22. Cumulative Expenditures Made*  |
| CASH PAYMENTS Add Lines 6 + 7 \$                            |  | \$13,884.80  | (If Subject to Voluntary Expenditure Limit)  |
| penses (Unpaid Bills)Schedule F, Line 3                     |  | 5,982.16   | Date of Election Total to Date   |
| ry Adjustment Schedule C, Line 3                            | 0.00   | 0.00   | (mm/dd/yy)   |
| ENDITURES MADEAdd Lines 8 + 9 + 10 \$                       | 11,053.73                                      | \$19,866.96  | \$   |
| sh Statement  |  |  | \$   |
| Cash Balance Previous Summary Page, Line 16 \$              | 5,621.77                                       | To calculate Column B, add                                 |  |
| ipts Column A, Line 3 above                                 | 5,270.00                                       | amounts in Column A to the corresponding amounts           |  |
| ous Increases to Cash Schedule I, Line 4                    | 0.00   | from Column B of your last                                 | *Amounts in this section may be different from amounts reported in Column B.                       |
| nents Column A, Line 8 above                                | 8,646.57                                       | report. Some amounts in<br>Column A may be negative        |  |
| SH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ | 2,245.20                                       | figures that should be subtracted from previous            |  |
| rmination statement, Line 16 must be zero.                  |  | period amounts. If this is<br>the first report being filed |  |
| RANTEES RECEIVED Schedule B, Part 2 \$                      | 0.00   | for this calendar year, only carry over the amounts        |  |
| valents and Outstanding Debts                               |  | from Lines 2, 7, and 9 (if any).                           |  |
| ivalents See instructions on reverse \$                     | 0.00   |  |  |
| ng Debts Add Line 2 + Line 9 in Column B above \$           | 15,482.16                                      |  |  |
|   |  |  | FPPC Form 460 (Ja  |
|   |  |  | F<br>FPPC Advice: advice@fp  |

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

### otony Contributions Bossiyod

Amounts may be rounded

| SCHEDUL | Æ | Α |
|---------|---|---|
|---------|---|---|

| Monetary Contributions Received |  |   | ts may be rounded whole dollars.   | Statement cov                     |  | CALIFORNIA 460  |                                    |  |  |
|---------------------------------|--|---|--|-----------------------------------|--|-----------------|------------------------------------|--|--|
| SEE INSTRUCTIO                  | ONS ON REVERSE   |   |  | through <u>10/22/2</u>            | 022  | Page4           | of <u>14</u>                       |  |  |
| NAME OF FILER                   |  |   |  |                                   | '  | I.D. NUMBER     |                                    |  |  |
| Cerdan 4 Sch                    | hool Board 2022  |   |  |                                   |  | 1449235         |                                    |  |  |
| DATE<br>RECEIVED                | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)   | CONTRIBUTOR<br>CODE *                   | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT<br>RECEIVED THIS<br>PERIOD | CUMULATIVE TO DA<br>CALENDAR YEAR<br>(JAN. 1 - DEC. 31 | R               | R ELECTION<br>TO DATE<br>REQUIRED) |  |  |
| 10/01/2022                      | Building A Stronger CA sponsored by Southwest<br>Regional Council of Carpenters (ID# 870169)<br>Los Angeles, CA 90071                              | ☐IND<br>☐COM<br>☐OTH<br>☐PTY<br>☑SCC    |  | 500.00                            | 500  | 0.00 G2022      | \$500.00                           |  |  |
| 09/28/2022                      | DRIVE Committee (ID# C00032979) Washington, DC 20001-2198  | □IND  IND  IND  IND  IND  IND  IND  IND |  | 1,000.00                          | 1,000  | 0.00 G2022      | \$1,000.00                         |  |  |
| 10/16/2022                      | Mimi Duncanson  Los Angeles, CA 90022  | ⊠IND<br>□COM<br>□OTH<br>□PTY<br>□SCC    | Teacher<br>LAUSD   | 150.00                            | 150  | 0.00 G2022      | \$150.00                           |  |  |
| 10/03/2022                      | Aldo Gallardo<br>Montebello, CA 90640  | IND  COM  OTH  PTY  SCC                 | Not Employed<br>N/A  | 99.00                             | 198  | 3.00 G2022      | \$198.00                           |  |  |
| 10/22/2022                      | Aldo Gallardo<br>Montebello, CA 90640  | ⊠IND<br>□COM<br>□OTH<br>□PTY<br>□SCC    | Not Employed<br>N/A  | 99.00                             | 198  | 3.00 G2022      | \$198.00                           |  |  |
|                                 |  |   | SUBTOTAL \$  | 1,848.00                          |  |                 |                                    |  |  |
| Amount re<br>(Include a         | A Summary eceived this period – itemized monetary contributions. Il Schedule A subtotals.) eceived this period – unitemized monetary contributions |   |  |                                   | *Contrib<br>IND – Inc<br>COM – F<br>(                  | utor Codes      | mittee<br>Y or SCC)                |  |  |
|                                 | etary contributions received this period.<br>s 1 and 2. Enter here and on the Summary Page, Colu   | mn A, Line 1.)                          | ) <b>TOTAL \$</b>  | 5,270.00                          |  | mall Contribute | or Committee                       |  |  |

## Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded to whole dollars. SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

|                  |   |                                      |  | from09/25/                        | 2022  | FORM          |   |
|------------------|---|--------------------------------------|--|-----------------------------------|---|---------------|---|
|                  |   |                                      |  | through 10/22/                    |   |               | of 14                                   |
| NAME OF FILER    |   |                                      |  |                                   | - I.  | D. NUMBER     |   |
| Cerdan 4 Scho    | ool Board 2022  |                                      |  |                                   | 1   | 449235        |   |
| DATE<br>RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER) | CONTRIBUTOR<br>CODE *                | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT<br>RECEIVED THIS<br>PERIOD | CUMULATIVE TO DA<br>CALENDAR YEA<br>(JAN. 1 - DEC. 31 | R             | PER ELECTION<br>TO DATE<br>IF REQUIRED) |
| 10/03/2022       | Angel Gallardo  Montebello, CA 90640  | ⊠IND<br>□COM<br>□OTH<br>□PTY<br>□SCC | School Administor<br>MUSD  | 99.00                             | 198   | .00 G2022     | \$198.00                                |
| 10/22/2022       | Angel Gallardo Montebello, CA 90640   | ⊠IND<br>□COM<br>□OTH<br>□PTY<br>□SCC | School Administor<br>MUSD  | 99.00                             | 198   | .00 G2022     | \$198.00                                |
| 10/13/2022       | Juan Gutierrez<br>Whittier, CA 90606  | ⊠IND<br>□COM<br>□OTH<br>□PTY<br>□SCC | Senior Data Engineer<br>Wells Fargo  | 200.00                            | 200   | .00 G2022     | \$200.00                                |
| 10/14/2022       | Zwaal Jessica<br>Monterey Park, CA 91754  | ☑IND<br>□COM<br>□OTH<br>□PTY<br>□SCC | Teacher<br>Montebello Unified School   | 75.00                             |   | .00 G2022     |   |
| 10/14/2022       | Marisol Madrigal Los Angeles, CA 90022  | ⊠IND<br>□COM<br>□OTH<br>□PTY<br>□SCC | Faculty Los Angeles Community College District   | 200.00                            | 200   | .00 G2022     | \$200.00                                |
|                  |   |                                      | SUBTOTAL   | 673.00                            |   | Arthur Tellin |   |

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

## Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded to whole dollars.

| SCHED | ULEA | (CONT.) |
|-------|------|---------|
|       |      |         |

Statement covers period

| Monetary Contributions Received |  | to whole dollars.                    |  | from09/25/                        |  | FORM 460   |       |                                 |  |
|---------------------------------|--|--------------------------------------|--|-----------------------------------|--|------------|-------|---------------------------------|--|
|                                 |  |                                      |  | through10/22/                     | 2022   | Page _     | 6     | of14                            |  |
| NAME OF FILER                   |  |                                      |  |                                   |  | I.D. NUI   | MBER  |                                 |  |
| Cerdan 4 Scho                   | pol Board 2022   |                                      |  |                                   |  | 14492      | 35    |                                 |  |
| DATE<br>RECEIVED                | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, ALSO ENTER LD. NUMBER) | CONTRIBUTOR<br>CODE *                | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT<br>RECEIVED THIS<br>PERIOD | CUMULATIVE TO<br>CALENDAR YE<br>(JAN. 1 - DEC. | EAR<br>31) | (IF R | ELECTION<br>O DATE<br>(EQUIRED) |  |
| 09/30/2022                      | Francisco Martinez  Hacienda Heights, CA 91745   | IND  COM  OTH  PTY  SCC              | Driver<br>Southland Disposal   | 50.00                             | 1!   | 50.00      | G2022 | \$150.00                        |  |
| 10/14/2022                      | Francisco Martinez  Hacienda Heights, CA 91745   | ⊠IND<br>□COM<br>□OTH<br>□PTY<br>□SCC | Driver<br>Southland Disposal   | 100.00                            | 19   | 50.00      | G2022 | \$150.00                        |  |
| 10/22/2022                      | Diana G. Nakanishi<br>Chino Hills, CA 91709  |                                      | Retired<br>N/A   | 500.00                            | 50   | 00.00      | G2022 | \$500.00                        |  |
| 10/22/2022                      | Paul T. Nakanishi<br>Chino Hills, CA 91709   | ⊠IND<br>□COM<br>□OTH<br>□PTY<br>□SCC | Special Ed Teacher<br>MUSD   | 350.00                            | 35   | 50.00      | G2022 | \$350.00                        |  |
| 10/22/2022                      | Rossana Ortega<br>Whittier, CA 90601   | ⊠IND<br>□COM<br>□OTH<br>□PTY<br>□SCC | Retired<br>N/A   | 100.00                            |  | 00.00      | G2022 | \$100.00                        |  |
|                                 |  |                                      | SUBTOTAL   | \$ 1,100.00                       |  |            |       |                                 |  |

\*Contributor Codes

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(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 A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded

SCHEDULE A (CONT.)

Statement covers period

| Monetary Contributions Received |  | to whole o                           |  | Statement cove                    |  | FORM 460 |       |                            |  |
|---------------------------------|--|--------------------------------------|--|-----------------------------------|--|----------|-------|----------------------------|--|
|                                 |  |                                      |  | through 10/22/                    | 2022   | Page     | o     | f14                        |  |
| NAME OF FILER                   |  |                                      |  |                                   |  | I.D. NUM | IBER  |                            |  |
| Cerdan 4 Scho                   | ool Board 2022   |                                      |  |                                   |  | 144923   | 35    |                            |  |
| DATE<br>RECEIVED                | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR<br>CODE *                | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT<br>RECEIVED THIS<br>PERIOD | CUMULATIVE TO<br>CALENDAR YE<br>(JAN. 1 - DEC. | AR       | TO    | LECTION<br>DATE<br>QUIRED) |  |
| 10/08/2022                      | Montebello, CA 90640   | ⊠IND<br>□COM<br>□OTH<br>□PTY<br>□SCC | Retired<br>N/A   | 200.00                            | 20   | 00.00 G  | 32022 | \$200.00                   |  |
| 10/14/2022                      | Jaim Quintero Montebello, CA 90640   | ⊠IND<br>□COM<br>□OTH<br>□PTY<br>□SCC | Teacher<br>Montebelllo Usd   | 500.00                            | 50   | 00.00 G  | 2022  | \$500.00                   |  |
| 10/14/2022                      | Lucia Quintero<br>West Covina, CA 91791  | ⊠IND<br>□COM<br>□OTH<br>□PTY<br>□SCC | Teacher<br>Montebello Unified  | 200.00                            | 20   | 00.00 G  | 32022 | \$200.00                   |  |
| 10/13/2022                      | Teresa Salasortiz<br>Montebello, CA 90640  | ☑IND □COM □OTH □PTY □SCC             | Teacher<br>MUSD  | 150.00                            | 15   | 0.00 G   | 2022  | \$150.00                   |  |
|                                 |  | □IND □COM □OTH □PTY □SCC             |  |                                   |  |          |       |                            |  |
|                                 | SUBTOTAL\$ 1,050.00  |                                      |  |                                   |  |          |       |                            |  |

\*Contributor Codes

IND-Individual

COM - Recipient Committee

(other than PTY or SCC) OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

of \_\_14\_\_\_

CUMULATIVE CONTRIBUTIONS TO DATE CALENDAR YEAR \$ 9,500.00 PER ELECTION\*\* \$G2022 9,500.00

CALENDAR YEAR \$\_9,500.00

PER ELECTION \*\* \$G2022 9,500.00

CALENDAR YEAR \$\_9,500.00 PER ELECTION \*\* \$G2022\_9,500.00

| •  |  |   |  |  |               |  | SCH   |
|--|--|---|--|--|---------------|--|---|
| Schedule B – Part 1<br>Loans Received  | Amo  | ounts may be re                               |  |  | Statement cov |  | CALIFORN  |
| Loans Neceiveu   |  |   |  |  | from09/2      | 5/2022                                 | FORM  |
| SEE INSTRUCTIONS ON REVERSE  |  |   |  |  | through10/2   | 2/2022                                 | PageB   |
| NAME OF FILER  |  |   |  |  |               |  | I.D. NUMBER   |
| Cerdan 4 School Board 2022   |  |   |  |  |               |  | 1449235   |
| FULL NAME, STREET ADDRESS AND ZIP CODE<br>OF LENDER<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)    | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | (a) OUTSTANDING BALANCE BEGINNING THIS PERIOD | (b)<br>AMOUNT<br>RECEIVED THIS<br>PERIOD | (c)<br>AMOUNT PAID<br>OR FORGIVEN<br>THIS PERIOD |               | (e)<br>INTEREST<br>PAID THIS<br>PERIOD | ORIGINAL<br>AMOUNT OF<br>LOAN                       |
| Carlos Cerdan Jr.  | Teacher<br>MUSD  |   |  | PAID   |               |  |   |
| Montebello, CA 90640   |  |   |  | \$0_0<br>☐ FORGIVEN                              | \$_5,000.00   | 0_00%<br>RATE                          | \$_5,000.00   |
| †⊠ IND □ COM □ OTH □ PTY □ SCC   |  | \$_5,000_00                                   | \$0.00                                   | \$0.00   | DATE DUE      | \$0.0                                  | 06/17/2022<br>DATE INCURRED                         |
| Carlos Cerdan Jr.  | Teacher<br>MUSD  |   |  | PAID   |               |  |   |
| Montebello, CA 90640   |  |   |  | \$0.00<br>☐ FORGIVEN                             | \$2,000.00    | -0.00%<br>RATE                         | \$ 2,000.00   |
| TIND □ COM □ OTH □ PTY □ SCC   |  | \$_2,000_00                                   | \$0.00                                   | \$   | DATE DUE      | \$0.0                                  | 07/21/2022<br>DATE INCURRED                         |
| Carlos Cerdan Jr.  | Teacher<br>MUSD  |   |  | PAID   |               |  |   |
| Montebello, CA 90640   |  |   |  | \$0_0<br>  FORGIVEN                              | \$_2,500.00   | —0_00%<br>RATE                         | \$ -2,500.00  |
| TIND □ COM □ OTH □ PTY □ SCC   |  | \$_2,500.00                                   | \$0.00                                   | \$0.00   | DATE DUE      | \$0.0                                  | 07/21/2022<br>DATE INCURRED                         |
|  |  | SUBTOTALS \$                                  | 0.00\$                                   | 0.00   | \$ 9,500.00   | \$ 0.0                                 | 0   |
| Schedule B Summary   |  | · · · · · · · · · · · · · · · · · · ·         |  |  |               | (Enter (e) on<br>Schedule E, Line 3)   |   |
| 1. Loans received this period  |  |   |  | \$   | 0.00          | _                                      |   |
| (Total Column (b) plus unitemized loan   | s of less than \$100.)   |   |  |  |               |  | Contributor Codes                                   |
| <ol><li>Loans paid or forgiven this period<br/>(Total Column (c) plus loans under \$10</li></ol> |  |   |  | \$   | 0.00          |  | ND – Individual<br>COM – Recipient C<br>(other than |

0.00

(May be a negative number)

ent Committee

(other than PTY or SCC) OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

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

Enter the net here and on the Summary Page, Column A, Line 2.

(Include loans paid by a third party that are also itemized on Schedule A.)

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

#### Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

|         |                    | SCHEDULE L     |
|---------|--------------------|----------------|
| State   | ment covers period | CALIFORNIA 160 |
| from    | 09/25/2022         | FORM +OO       |
| through | 10/22/2022         | Page9 of14     |
|         |                    | I.D. NUMBER    |
|         |                    | 1449225        |

| Conden 4 Co |  |  |                                |                       | 1.D. NO   |               |
|-------------|--|--|--------------------------------|-----------------------|---|---------------|
| DATE        | NAME OF CANDIDATE, OFFICE, AND DISTRICT, O MEASURE NUMBER OR LETTER AND JURISDICTIO OR COMMITTEE |  | DESCRIPTION<br>(IF REQUIRED)   | AMOUNT THIS<br>PERIOD | CUMULATIVE TO DATE<br>CALENDAR YEAR<br>(JAN. 1 - DEC. 31) |               |
| 10/07/2022  | Marisol Uribe Board of Education  X Support Oppose   | Monetary Contribution Nonmonetary Contribution Independent Expenditure |                                | 100.00                | 100.00  | G2022 \$100.0 |
|             | Support Oppose   | Monetary Contribution Nonmonetary Contribution Independent Expenditure |                                |                       |   |               |
|             | Support Oppose   | Monetary Contribution Nonmonetary Contribution Independent Expenditure |                                |                       |   |               |
|             |  |  | SUBTOTAL \$                    | 100.00                |   |               |
|             | e D Summary  tions and independent expenditures made this  | period of \$100 or more.   | Include all Schedule D subtota | als.)                 | \$ _  | 100.00        |

2. Unitemized contributions and independent expenditures made this period of under \$100......\$

www.netfile.com

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

0.00

| •  |                                    |               |                   |             |   |                       | SCHEDULE E       |
|--|------------------------------------|---------------|-------------------|-------------|---|-----------------------|------------------|
| Schedule E   | Amounts may be rounded             |               |                   | Sta         | atement covers period   | CALIFORNI             | <sup>A</sup> 460 |
| Payments Made  | to whole o                         | ioliars.      |                   | from        | 09/25/2022  | FORM                  | 400              |
| SEE INSTRUCTIONS ON REVERSE  |                                    |               |                   | thro        | ugh10/22/2022   | _ Page _ 10           | of14             |
| NAME OF FILER  |                                    |               |                   |             |   | I.D. NUMBER           |                  |
| Cerdan 4 School Board 2022   |                                    |               |                   |             |   | 1449235               |                  |
| CODES: If one of the following codes accurately describes  |                                    | •             | er the code. Oth  |             | , ,   |                       |                  |
| CMP campaign paraphernalia/misc. CNS campaign consultants  | MBR member com<br>MTG meetings an  |               | 26                |             | radio airtime and production<br>returned contributions                              | n costs               |                  |
| CTB contribution (explain nonmonetary)*  | OFC office exper                   | ises          |                   | SAL         | campaign workers' salaries  |                       |                  |
| CVC civic donations  | PET petition circu PHO phone banks |               |                   |             | <ul> <li>t.v. or cable airtime and pro<br/>candidate travel, lodging, ar</li> </ul> |                       |                  |
| FIL candidate filing/ballot fees FND fundraising events  |                                    | survey resea  | rch               |             | staff/spouse travel, lodging, an  |                       |                  |
| IND independent expenditure supporting/opposing others (explain)*  | POS postage, del                   | livery and me | essenger services |             | transfer between committee  | es of the same car    | ndidate/sponsor  |
| LEG legal defense LT campaign literature and mailings  | PRO professional<br>PRT print ads  | services (leg | gal, accounting)  |             | voter registration<br>information technology cost                                   | ts (internet, e-mail) |                  |
| and the state of t |                                    |               |                   |             |   |                       |                  |
| NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)   |                                    | CODE          | OR D              | DESCRIPTION | OF PAYMENT  | Α                     | MOUNT PAID       |
| eFundraising Connections   |                                    | OFC           | Processing Fee    |             |   |                       | 2.75             |
| Sacramento, CA 95816   |                                    |               |                   |             |   |                       |                  |
|  |                                    |               |                   |             |   |                       |                  |
| eFundraising Connections   |                                    | OFC           | Processing Fee    |             |   |                       | 9.50             |
| Sacramento, CA 95816   |                                    |               |                   |             |   |                       |                  |
| eFundraising Connections   | ·                                  | OFC           | Processing Fee    |             |   |                       | 1.63             |
| Sacramento, CA 95816   |                                    |               |                   |             |   |                       |                  |
|  |                                    |               |                   |             |   |                       |                  |
| * Payments that are contributions or independent expenditures m  | nust also be summ                  | arized on S   | chedule D.        |             | SI  | UBTOTAL\$             | 13.88            |

1. Itemized payments made this period. (Include all Schedule E subtotals.) ...... \$ \_\_\_\_\_\_

2. Unitemized payments made this period of under \$100 ......\$ \_\_\_\_\_

Schedule E Summary

8,643.57

8,646.57

3.00

0.00

#### Schedule E (Continuation Sheet) Payments Made

|                         | SCHEDULE E (CONT. |
|-------------------------|-------------------|
| Statement covers period | CALIFORNIA 460    |
| 09/25/2022              | FORM 400          |

S Amounts may be rounded to whole dollars. from through \_\_ 10/22/2022 Page 11 of 14 SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Cerdan 4 School Board 2022 1449235

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 CMP campaign paraphernalia/misc. 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 candidate travel, lodging, and meals FIL candidate filing/ballot fees РНО TRC fundraising events polling and survey research TRS staff/spouse travel, lodging, and meals POL FND independent expenditure supporting/opposing others (explain)\* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor IND professional services (legal, accounting) voter registration LEG legal defense PRO VOT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail) ய

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)                         | CODE | OR DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|---------------------------|-------------|
| eFundraising Connections  | OFC  | Processing Fee            | 2.75        |
| Sacramento, CA 95816  |      |                           |             |
| eFundraising Connections  | OFC  | Processing Fee            | 18.38       |
| Sacramento, CA 95816  |      |                           |             |
| eFundraising Connections  | OFC  | Processing Fee            | 56.38       |
| Sacramento, CA 95816  |      |                           |             |
|   | LIT  |                           | 2,400.00    |
| Pasadena, CA 91101  |      |                           |             |
| HSG Campaigns   | LIT  |                           | 5,752.18    |
| Pasadena, CA 91101  |      |                           |             |
| * Design to that are contributions or independent expenditures must also be summarized on S |      | SURTOTAL                  | \$ 229.69   |

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 8,229.69

#### Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

|                         |            | SCHEDULE E (CONT. |
|-------------------------|------------|-------------------|
| Statement covers period |            | CALIFORNIA 460    |
| rom                     | 09/25/2022 | FORM TOO          |
| hrough.                 | 10/22/2022 | Page 12 of 14     |

COLIED III E E (CONT

| aymonto maao                | 170m               |               |
|-----------------------------|--------------------|---------------|
| SEE INSTRUCTIONS ON REVERSE | through 10/22/2022 | Page 12 of 14 |
| NAME OF FILER               |                    | I.D. NUMBER   |
| Cerdan 4 School Board 2022  |                    | 1449235       |
|                             |                    |               |

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 candidate filing/ballot fees FIL PHO phone banks candidate travel, lodging, and meals FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals postage, delivery and messenger services transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)\* TSF ND POS professional services (legal, accounting) LEG legal defense PRO VOT voter registration campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail) ШΤ

| NAME AND ADDRESS OF PAYEE<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE C | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|--------|----|------------------------|-------------|
| Marisol M Uribe for School Board 2022 (ID# 1447091)                 | СТВ    |    |                        | 100.00      |
| Covina, CA 91722  |        |    |                        |             |
| Yolanda Miranda & Assoc.  | PRO    |    |                        | 300.00      |
| Covina, CA 91722  |        |    |                        |             |
|   |        |    |                        |             |
|   |        |    |                        |             |
|   |        |    |                        |             |
|   |        |    |                        |             |
|   |        |    |                        |             |
|   |        |    |                        |             |
|   |        |    |                        |             |
|   |        |    |                        |             |

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

SUBTOTAL \$

400.00

| Schedule | F               |         |        |
|----------|-----------------|---------|--------|
| Accrued  | <b>Expenses</b> | (Unpaid | Bills) |

Amounts may be rounded to whole dollars.

**CALIFORNIA** Statement covers period **FORM** 09/25/2022 from through \_\_ 10/22/2022 Page 13 of 14 I.D. NUMBER

1449235

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Cerdan 4 School Board 2022

| CO  | DES: If one of the following codes accurately des             | scribes the | payment, you may        | enter the code.    | Otherwise | e, describe t     | he payment.                |                      |
|-----|---|-------------|-------------------------|--------------------|-----------|-------------------|----------------------------|----------------------|
| CMP | campaign paraphernalia/misc.                                  | MBR         | member communication    | ns                 | RAD       | radio airtime a   | nd production costs        |                      |
| CNS | campaign consultants  | MTG         | meetings and appearan   | nces               | RFD       | returned contri   | butions                    |                      |
| CTB | contribution (explain nonmonetary)*                           | OFC         | office expenses         |                    | SAL       | campaign work     | kers' salaries             |                      |
| CVC | civic donations   | PET         | petition circulating    |                    | TEL       | t.v. or cable air | time and production cost   | s                    |
| FIL | candidate filing/ballot fees                                  | PHO         | phone banks             |                    | TRC       | candidate trave   | el, lodging, and meals     |                      |
| FND | fundraising events  | POL         | polling and survey rese | earch              | TRS       | staff/spouse tra  | avel, lodging, and meals   |                      |
| IND | independent expenditure supporting/opposing others (explain)* | POS         | postage, delivery and   | messenger services | TSF       | transfer betwe    | en committees of the sa    | me candidate/sponsor |
| LEG | legal defense   | PRO         | professional services ( | legal, accounting) | VOT       | voter registrati  | on                         |                      |
| LIT | campaign literature and mailings                              | PRT         | print ads               |                    | WEB       | information ted   | hnology costs (internet, o | e-mail)              |
|     |   |             |                         |                    |           |                   |                            |                      |
|     |   | l           |                         | (a)                |           | (b)               | (c)                        | (d)                  |

| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER LD. NUMBER)                                | CODE OR<br>DESCRIPTION OF PAYMENT | (a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD | (b)<br>AMOUNT INCURRED<br>THIS PERIOD | (c)<br>AMOUNT PAID<br>THIS PERIOD<br>(ALSO REPORT ON E) | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD |
|--|-----------------------------------|--|---------------------------------------|---|---|
| Carlos Cerdan Jr.  | FIL                               | 3,000.00   | 0.00                                  | 0.00  | 3,000.00  |
| Montebello, CA 90640   |                                   |  |                                       |   |   |
| UCA Compoiana  | LIT                               | 0.00   | 2,407.16                              | 0.00  | 2,407.16  |
| Pasadena, CA 91101   |                                   |  |                                       |   |   |
| Netfile  | PRO                               | 275.00   | 0.00                                  | 0.00  | 275.00  |
| Mariposa, CA 95338   |                                   |  |                                       |   |   |
| * Payments that are contributions or independent expenditures must also be summarized on Schedule D. | SUBTOTALS                         | 3,275.00   | 2,407.16                              | 0.00  | 5,682.16  |

#### Schedule F Summary

| <ol> <li>Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for</li> </ol> |          |
|--|----------|
| accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) INCURRED TOTALS \$         | 2,707.16 |

- 2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on
- 3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)

  NET \$ 2,407.16 | May be a negative number

#### Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

| Statement covers period | CALIFORNIA 460 |
|-------------------------|----------------|
| from 09/25/2022         | FORM 400       |
| through10/22/2022       | Page 14 of 14  |
|                         | I.D. NUMBER    |
|                         | 1449235        |

NAME OF FILER

Cerdan 4 School Board 2022

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                                    |
| СТВ | 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)           |
|     |   |     |   |     |   |

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

| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR<br>DESCRIPTION OF PAYMENT | (a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD | (b)<br>AMOUNT INCURRED<br>THIS PERIOD | (c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E) | (d)<br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD |
|--|-----------------------------------|--|---------------------------------------|--|--|
| Yolanda Miranda & Assoc.   | PRO                               | 300.00   | 0.00                                  | 300.00   | 0.00   |
| Covina, CA 91722   |                                   |  |                                       |  |  |
| Yolanda Miranda & Assoc.   | PRO                               | 0.00   | 300.00                                | 0.00   | 300.00   |
| Covina, CA 91722   |                                   |  |                                       |  |  |
|  |                                   |  |                                       |  |  |
|  |                                   |  |                                       |  |  |
|  | \$ 300.00                         | 300.00   |                                       |  |  |