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## Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2							
CALIF	ORNIA ORM	4	60				
Page	2	of _	5				

NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
Roman Rodrigez						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIST	RICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTION		SUPPORT OPPOSE
Water Board of Directors Upper San Gabriel	District 5					OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)		ZIP 1705	Identify the controlling of	ficeholder, cand	idate, or state measure	proponent, if an
	Baldwill Falk CA 9.	1703	NAME OF OFFICEHOLDER, CA	NDIDATE, OR PRO	PONENT	
Related Committees Not Included in this S	Statement: List and commit					
not included in this statement that are controlled by yo contributions or make expenditures on behalf of your o	u or are primarily formed to re		OFFICE SOUGHT OR HELD		DISTRICT NO	. IF ANY
COMMITTEE NAME	I.D. NUMBER					
		<b></b> 7.	Primarily Formed Can	didate/Office	halder Committee	
NAME OF TREASURER	CONTROLLED COMMITTEE?					liet names of
			officeholder(s) or candidate(s			
	YES NO		officeholder(s) or candidate(s	s) for which this o	committee is primarily for	med.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	YES NO	_		s) for which this o		med.
	YES NO	_	officeholder(s) or candidate(s	candidate	committee is primarily for	SUPPORT OPPOSE
	YES NO	_	NAME OF OFFICEHOLDER OR	CANDIDATE  CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE
CITY STATE ZIP	P CODE AREA CODE/PH	_	officeholder(s) or candidate(s) NAME OF OFFICEHOLDER OR	CANDIDATE  CANDIDATE	committee is primarily for	SUPPORT OPPOSE SUPPORT OPPOSE
CITY STATE ZIP	P CODE AREA CODE/PH	_	NAME OF OFFICEHOLDER OR ON NAME OF OT OT ON NAME OF OT OT ON NAME OF OT	CANDIDATE  CANDIDATE  CANDIDATE  CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
CITY STATE ZIP	YES NO BOX)  P CODE AREA CODE/PH  I.D. NUMBER	_	NAME OF OFFICEHOLDER OR	CANDIDATE  CANDIDATE  CANDIDATE  CANDIDATE	OFFICE SOUGHT OR HELD OFFICE SOUGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT
CITY STATE ZIP	P CODE AREA CODE/PH  I.D. NUMBER  CONTROLLED COMMITTEE?  YES NO	_	NAME OF OFFICEHOLDER OR ON NAME OF OT OT ON NAME OF OT OT ON NAME OF OT	CANDIDATE  CANDIDATE  CANDIDATE  CANDIDATE	OFFICE SOUGHT OR HELD OFFICE SOUGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE NAME  NAME OF TREASURER	P CODE AREA CODE/PH  I.D. NUMBER  CONTROLLED COMMITTEE?  YES NO	_	NAME OF OFFICEHOLDER OR ON NAME OF OT OT ON NAME OF OT OT ON NAME OF OT	CANDIDATE  CANDIDATE  CANDIDATE  CANDIDATE	OFFICE SOUGHT OR HELD OFFICE SOUGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT

## Campaign Disclosure Statement **Summary Page**

Amounts may be rounded to whole dollars.

**SUMMARY PAGE** CALIFORNIA FORM Statement covers period 01/01/2022 from \_\_ Page \_\_3 \_\_ of \_\_5 09/24/2022 through \_ I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

second modfile com

Contributions Received	Column A TOTAL THIS PERIOD (FROMATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTAL TO DATE	CALENDAR YEAR	Calendar Year Summary for Candidate Running in Both the State Primary and General Elections		
Monetary Contributions Schedule A, Line 3	\$	0.00	\$ _	0.00	1/1 through 6/30 7/1 to D		
Loans Received Schedule B, Line 3		1,400.00	-	1,400.00			
SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	1,400.00	\$_	1,400.00	20. Contributions Received \$\$		
Nonmonetary Contributions Schedule C, Line 3		0.00	_	0.00	21. Expenditures		
TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	1,400.00	\$ _	1,400.00	Made \$ \$		
xpenditures Made					Expenditure Limit Summary for State		
Payments Made Schedule E, Line 4	\$	1,075.00	\$_	1,075.00	Candidates		
Loans Made Schedule H, Line 3		0.00	_	0.00	22. Cumulative Expenditures Made*		
SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	1,075.00	\$_	1,075.00	(If Subject to Voluntary Expenditure Limit)		
Accrued Expenses (Unpaid Bills)Schedule F, Line 3		0.00	_	0.00	Date of Election Total to D		
D. Nonmonetary Adjustment Schedule C, Line 3		0.00		0.00	(mm/dd/yy)		
1. TOTAL EXPENDITURES MADE	\$ .	1,075.00	\$_	1,075.00	\$		
urrent Cash Statement					\$		
2. Beginning Cash Balance Previous Summary Page, Line 16	\$ .	0.00	To ca	alculate Column B, add	4 0		
3. Cash Receipts		1,400.00	amounts in Column A to the				
4. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	from	esponding amounts Column B of your last	*Amounts in this section may be different from amou reported in Column B.		
5. Cash Payments		1,075.00		rt. Some amounts in mn A may be negative			
6. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ .	325.00	figure	es that should be			
If this is a termination statement, Line 16 must be zero.			perio	d amounts. If this is			
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2  Cash Equivalents and Outstanding Debts		the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).		nis calendar year, only			
				Lines 2, 7, and 9 (if			
B. Cash Equivalents See instructions on reverse	\$ .	0.00	,				

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Schedule B – Part 1 Loans Received	Am	ounts may be ro to whole dolla			Statement cov	california 46		
SEE INSTRUCTIONS ON REVERSE					through 09/2	4/2022	Page 4	of5
NAME OF FILER							I.D. NUMBER	
Roman Rodriquez for Water Board 2022							1454359	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (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) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAIL OR FORGIVEI THIS PERIOD	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVI CONTRIBUTIO TO DATE
Roman Rodriguez Baldwin Park, CA 91706 (LOAN)	Parks & Recreations Supervisor City of Baldwin Park			PAID  \$O_O  FORGIVEN	\$_1,400.00	0_0% RATE	\$ 1,400.00	\$ 1,400 (
†⊠ IND □ COM □ OTH □ PTY □ SCC		\$0_0	\$_1,400.00	\$0.00	12/31/2022 DATE DUE	\$0.00	09/16/2022 DATE INCURRED	\$
				PAID				CALENDAR YEA
				\$FORGIVEN	\$	RATE %	\$	PER ELECTION
†   IND   COM   OTH   PTY   SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
				PAID				CALENDAR YEA
				FORGIVEN	•	RATE	•	PER ELECTION
†   IND   COM   OTH   PTY   SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
		SUBTOTALS \$	1,400.00	\$ 0.0	0\$ 1,400.00	\$ 0.00		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
Loans received this period		•••••		\$	1,400.00			
<ol> <li>(Total Column (b) plus uniternized loan</li> <li>Loans paid or forgiven this period</li> <li>(Total Column (c) plus loans under \$10</li> </ol>			,	\$	0.00	INI	ontributor Codes  D – Individual  DM – Recipient Co (other than	

1,400.00

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

SCC - Small Contributor Committee

PTY - Political Party

\*\* If required.

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

Enter the net here and on the Summary Page, Column A, Line 2. \*Amounts forgiven or paid by another party also must be reported on Schedule A.

3. Net change this period. (Subtract Line 2 from Line 1.) NET \$ 1,400.00 (May be a negative number)

Schedule E	
Payments Made	

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

Statem	ent covers period	CALIFORNIA 460
from	01/01/2022	FORM TOU
through .	09/24/2022	Page _5 _ of _ 5
		I.D. NUMBER

1454359

NAME OF FILER

Roman Rodriguez for Water Board 2022

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

CMP	campaign paraphemalia/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
ND	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 ade	WER	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Gould & Orellana. LLC Norwalk, CA 90650	PRO		250.00
Gould & Orellana, LLC Norwalk, CA 90650	PRO		500.00
Gould & Orellana. LLC Norwalk, CA 90650	PRO		250.00
Norwalk, CA 90650			

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL\$ 1,000.00

## **Schedule E Summary**

1.	Itemized payments made this period. (Include all Schedule E subtotals.)	\$ _	1,000.00
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
4	Total payments made this period (Add Lines 1, 2, and 3. Enter here and on the Summary Page Column A. Line 6.)	\$	1,075.00

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