Recipient Committee Campaign Statement Cover Page				Date Stamp	CALIFORNIA 460
,		Statement covers period 01-01-2022	Date of election if applicable: (Month, Day, Year)	LOS ANGELES (ByPage 1 of 17 COUNTYFor Official Use Only
SEE INSTRUCTIONS ON REVERSE	throug	gh <u>06-30-2022</u>	11-06-2018	CAND. PH	2 09
1. Type of Recipient Committee: All Committee	ees – Complete Pa	orts 1, 2, 3, and 4.	2. Type of Statement:	DISCLUSURE SEC	TION
 ✓ Officeholder, Candidate Controlled Committee ○ State Candidate Election Committee ○ Recall (Also Complete Part 5) ☐ General Purpose Committee ○ Sponsored ○ Small Contributor Committee ○ Political Party/Central Committee 	Committe Control Spons (Also Complete	olled sored Part 6) Formed Candidate/ der Committee	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 T	nt Qu t fermination)	uarterly Statement pecial Odd-Year Report
3. Committee Information	I.D. NUMBE 1409499	R	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COM			NAME OF TREASURER		
Donna Georgino for TC School Board 2018			Donna Georgino MAILING ADDRESS		
STREET ADDRESS (NO P.O. BOX)			CITY	STATE ZIP	CODE AREA CODE/PHONE
			Temple City	CA 91	780 6262868637
CITY STATE	ZIP CODE	AREA CODE/PHONE	NAME OF ASSISTANT TREASUR	RER, IF ANY	
Temple City CA	91780	6262868637	Christopher Mitzel		
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OF	R.P.O. BOX		MAILING ADDRESS		
CITY STATE	ZIP CODE	AREA CODE/PHONE	CITY	STATE ZIP	CODE AREA CODE/PHONE
			Temple City	CA 91	780 6262868637
OPTIONAL: FAX / E-MAIL ADDRESS			OPTIONAL: FAX / E-MAIL ADDR		
donnageorgino@sbcglobal.net					
4. Verification					
I have used all reasonable diligence in preparing and	-		y knowledge the information contained	d herein and in the attached s	schedules is true and complete. I
certify under penalty of perjury under the laws of the	`	a that the fore			
Executed on U1-20-2022 Date	23	Ву	r or Assistar	nt Treasurer	
Executed on 07-20-2022 T- 20-2		Ву	Manuero P	Proponent or Responsible Officer of Spo	OBSOT
Executed on		Ву	Signature of Controlling Officeholder, Candidate,		Aleui
Executed on		Ву			·
Date		-	Signature of Controlling Officeholder, Candidate,	State Measure Proponent	EDDC F 460 (lon/2016)

5722 COVER PAGE

Campaign Disclosure Statement Summary Page

Donna Georgino for TC School Board 2018

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statement covers period from 01-01-2022	california 460	
through <u>06-30-2022</u>	Page 3 of17	
	I.D. NUMBER	
	1409499	

Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions	\$\frac{0}{0}\$ \$\frac{0}{0}\$ \$\frac{0}{0}\$ \$\frac{0}{0}\$	\$\frac{0}{0}\$ \$\frac{0}{0}\$ \$\frac{0}{0}\$	20. Contributions Received \$ \$ 21. Expenditures Made \$ \$
Expenditures Made 6. Payments Made	\$\frac{50}{0}\$ \$\frac{50}{0}\$ \$\frac{50}{0}\$ \$\frac{0}{0}\$ \$\frac{0}{50}\$ \$\$	\$\frac{50}{0}\$ \$\frac{50}{0}\$ \$\frac{50}{0}\$ \$\frac{0}{50}\$ \$\frac{5}{50}\$	Expenditure Limit Summary for State Candidates 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy)
Current Cash Statement 12. Beginning Cash Balance	\$ 446.36 0 0 50 \$ 396.36	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	*Amounts in this section may be different from amounts reported in Column B.
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 Cash Equivalents and Outstanding Debts	0	filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).	
18. Cash Equivalents	\$ <u>0</u>		FPPC Form 460 (Jan/2016 FPPC Advice: advice@fppc.ca.gov (866/275-3772