		4			Yp	, ל	COVER PAGE
Recipient Committee Campaign Statement Cover Page	1				Date Stamp	FC	DRM 460
(Government Code Sections 8420	00-84216.5)	Str.	01/01/2024	Date of election if applicable:	OS AMSELES 1024 JAN 23 PA	000H   Yage _	or Official Use Only
SEE INSTRUCTIONS ON REVERSE		throug	h01/20/2024	03/05/2024	CAMPAIGHER	l	·
1. Type of Recipient Con	nmittee: All Committees	– Complete Pa	arts 1, 2, 3, and 4.	2. Type of Statement:			
<ul> <li>✓ Officeholder, Candidate Co</li> <li>✓ State Candidate Election</li> <li>✓ Recall</li> <li>(Also Complete Part 5)</li> <li>✓ General Purpose Committ</li> <li>✓ Sponsored</li> <li>✓ Small Contributor Com</li> <li>✓ Political Party/Central Contributor</li> </ul>	on Committee ee mittee	Committee Contro Spons (Also Complet	lled ored e <i>Part6)</i> Formed Candidate/ er Committee	<ul> <li>✓ Preelection Statement</li> <li>✓ Semi-annual Statement</li> <li>✓ Termination Statement</li> <li>(Also file a Form 410</li> <li>✓ Amendment (Explain</li> </ul>	nt [ : : Termination)	Quarterly State Special Odd-Yo Supplemental I Statement - Att	ear Report Preelection
3. Committee Information	n	I.D. NUMBE 1422932		Treasurer(s)			
STREET ADDRESS (NO P.O. BO	X)		<u> </u>	MAILING ADDRESS	STATE	ZIP CODE	AREA CODE/PHONE
CITY	STATE Z	IP CODE	AREA CODE/PHONE	Glendale NAME OF ASSISTANT TREASU	JRER, IF ANY	91204	(310) 871-5871
Norwalk	- CA	90650	(213) 489-4792	David Gould	, , , , , , , , , , , , , , , , , , ,		
MAILING ADDRESS (IF DIFFERE		4	- /	MAILING ADDRESS	·	w	
CITY	STATE Z	IP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
DOTIONAL FIX / FIANL ADDR	The state of the s		1 To 2 to the condition	Norwalk	ÇA.	90650	(213) 489-4792
OPTIONAL: FAX / E-MAIL ADDR (213) 489-4818 / dlgou		m,		OPTIONAL: FAX / E-MAIL ADD	JRESS.	· ·	
under penalty of perjury under				owledge the information contained h	erein and in the attached	d schedules is true - -	and complete. I certify
Executed on	Date	-	Ву	Signature of Controlling Officeholder, Candidate,	State Measure Proponent		DDO F 400 (1 /00.11
						FI	PPC Form 460 (Jan/2016

Officeholder or Candidate Controlled Co							
AME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE				
evan Benlian							
FFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIS	STRICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIO	ON		SUPPORT
ommunity College Board Community Collegistrict 5	e Board of Trustees Glen	dale					OPPOSE
ESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE	ZIP					
	Glendale > CA 9	91204	Identify the controlling of	fficeholder, can	ididate, or sta	ate measure p	roponent, if ar
	, , , ,		NAME OF OFFICEHOLDER, CA	ANDIDATE, OR PR	OPONENT		
Related Committees Not Included in this	Statement: Listania sammi	:					
not included in this statement that are controlled by	•		OFFICE SOUGHT OR HELD			DISTRICT NO. IF	ANY
ontributions or make expenditures on behalf of you					.		
	1.5						
OMMITTEE NAME	IID NUMBER						
OMMITTEE NAME	I.D. NUMBER						
OMMITTEE NAME	I.D. NUMBER						
IAME OF TREASURER	CONTROLLED COMMITTEE	<del></del> 7	7. Primarily Formed Car				
	-	?	7. Primarily Formed Car officeholder(s) or candidate				
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## **Campaign Disclosure Statement Summary Page**

Amounts may be rounded to whole dollars.

		SUMMARY PAGE
Statem	ent covers period	CALIFORNIA / CO
from	. 01/01/2024	FORM 400
through _	01/20/2024	Page3 of8
		I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

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

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Benlian for Glendale Community College Board of Trustees 2024					1422932
Contributions Received	(F	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       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	\$	2,205.00 0.00 2,205.00 0.00 2,205.00	\$ \$	2,205.00 2,050.00 4,255.00 0.00 4,255.00	1/1 through 6/30 7/1 to Date  20. Contributions Received \$\$  21. Expenditures Made \$\$ \$
Expenditures Made 6. Payments Made	\$	2,625.73	\$	2,625.73	Expenditure Limit Summary for State Candidates
7. Loans Made		0.00 2,625.73	\$	2,625.73	22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)		0.00		0.00	Date of Election Total to Date (mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$	2,625.73	\$	2,625.73	\$
Current Cash Statement  12. Beginning Cash Balance Previous Summery Rage, Line 16.  13. Cash Receipts Column A, Line 3 above	Euka,	2,567,-00 2,205,00 0.00	To an co	calculate Column B, add nounts in Column A to the rresponding amounts	\$ *Amounts in this section may be different from amounts
14. Miscellaneous Increases to Cash Schedule I, Line 4  15. Cash Payments Column A, Line 8 above  16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15		2,625.73 2,146.27	rep Co fig	m Column B of your last oort. Some amounts in dumn A may be negative ures that should be	reported in Column B.
17. LOAN GUARANTEES RECEIVED	,	<del></del>	pe the for	btracted from previous riod amounts. If this is a first report being filed this calendar year, only	
Cash Equivalents and Outstanding Debts  18. Cash Equivalents				rry over the amounts m Lines 2, 7, and 9 (if y).	

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FPPC Form 460 (Jan/2016)

## Schedule A Monetary Contributions Received

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Amounts may be rounded

SCH	n	11	E	Δ

Monetary Contributions Received			whole dollars.	from01/01/2	•	CALIFORNIA 460		
SEE INSTRUCTION	S ON REVERSE			through01/20/2	024	Page	4 of8	
NAME OF FILER				-		I.D. NU	MBER	
Benlian for G	Glendale Community College Board of Trustees 202	4 .				14229	932	
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 T CALENDAR ' (JAN. 1 - DEC	YEAR	PER ELECTION TO DATE (IF REQUIRED)	
1	Shoghig Banalian ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	⊠IND □COM □OTH □PTY □SCC	Personal Assistant Adam	Received through inter eFundraising Connectic 2831 G St., #120 Sacramento, CA 95816		200.00		
	Alfred Megrabvan Las Vegas, NV 89113	⊠IND □COM □OTH □PTY □SCC	Retired None	2,000.00  Received through interefundraising Connectic 2831 G St., #120 Sacramento, CA 95816	mediary:	,000.00		
	-	□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC	es Petasen del Men	Town S		2.442年5 初始被		
The second secon		□IND □COM □OTH		a walka			tining in the second	
	La Caracteria de	□ PTY □ SCC	10000000000000000000000000000000000000	10 / 20 / 14 /	ينجه كليد يوين أم الزاء	C	A Comment of the Comm	
· <del>_ · _ · _ · _ · _ · _ · _ · </del>			SUBTOTAL	2,200.00	The second			
Schedule A	Summary		م يومون بدول كالمناسل المؤلفة والرائد المراق المراق المراق المراق المراق المراق المراق المراق المراق	e e e e e e e e e e e e e e e e e e e	+Co	ntributor C	codes	
1. Amount rec	eived this period – itemized monetary contributions. Schedule A subtotals.)		\$		IND		al ent Committee than PTY or SCC)	
	eived this period – unitemized monetary contributions ary contributions received this period.	of less than S	\$100\$	5.00	PTY	H – Other. ∕ – Politica	(e.g., business entity)	
(Add Lines	1 and 2. Enter here and on the Summary Page, Colu						PPC Form 460 (Jan/2016)	

W. A. W. W. A.

•							SCHE	DULEB-PART
Schedule B – Part 1	Amo	Statement cov	ers period	CALIFORN	<sup>A</sup> 460			
Loans Received	Received to whole dollars.					FORM	700	
SEE INSTRUCTIONS ON REVERSE					through01/20	0/2024	Page5	of8
NAME OF FILER							I.D. NUMBER	
Benlian for Glendale Community College	Board of Trustees 2024						1422932	
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 PA OR FORGIV THIS PERIO	EN CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTION TO DATE
Sauran Ranlian	Project Executive KATERRA			PAID				CALENDAR YEAR
Glendale, CA 91204				\$0_C		0_00% RATE	\$250.00	\$O_OO PER ELECTION
<sup>†</sup> ☑ IND □ COM □ OTH □ PTY □ SCC		\$250.00	\$0.00	\$0_0	DATE DUE	\$0.00	01/27/2021 DATE INCURRED	\$
Sevan Benlian	Project Executive KATERRA	<del> </del>		[] PAID	_			CALENDAR YEAR
Glendale, CA 91204	KATERRA			\$0_0		0_0.0% RATE	\$_1,000.00	\$O_OC
<sup>†</sup> ☑ IND □ COM □ OTH □ PTY □ SCC		s_1,000.00	\$0.00	s	DATE DUE	\$0_00	07/29/2021 DATE INCURRED	s
Sevan Benlian	Project Executive KATERRA			PAID				CALENDAR YEAR
Glendale, CA 91204				\$0_0	'	00% RATE	\$250.00	\$0.00
Toth □ PTY □ Scc.	www.eneplific.pgf#	\$ 250.00	s0.00	s0.0	DATE DUE	\$0_00	01/26/2022 DATE INCURRED	\$
					.00\$	\$ 0.00		
Schedule B Summary		Constitution of the second	reserve from a server of	The state of the same	A control of the second of the	(Enter (e) on (C) Schedule E, Line 3)	And the state of t	and the second s
Loans received this period	it i minimum i gradi		· Section 1	•	· · · · · · · · · · · · · · · · · · ·		i de la Maria	The same of the sa
(Total Column (b) plus unitemized loan	s of less than \$100.)	• • • • • • • • • • • • • • • • • • • •		Ψ _		_	Contributor Codes	
Loans paid or forgiven this period (Total Column (c) plus loans under \$10 (Include loans paid by a third party that	0 paid or forgiven.)			\$··	0.00	, .,.   .C.	ID – Individual OM – Recipient Co (other than I TH – Other (e.g., TY – Political Party	PTY or SCC) business entity)
Net change this period. (Subtract Line     Enter the net here and on the Summar					0.00 (May be a negative number)	1	CC - Small Contrib	,

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

7 1 112 1 March 2

FPPC Form 460 (Jan/2016)

SCHEDULE B - PART 1 (CONT.)

Schedule B – Part 1 (Continuation Sheet) Loans Received		Statement cov	ers period	CALIFORNIA 460			
SEE INSTRUCTIONS ON REVERSE				through01/2	0/2024	Page6	of8
NAME OF FILER		`				I.D. NUMBER	,
Benlian for Glendale Community College Board of Trustees	s_2024					1422932	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)  IF AN INDIVIDUAL, OCCUPATION AND EN (IF SELF-EMPLOYED, E NAME OF BUSINES	MPLOYER BALANCE OTER BEGINNING THIS	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAIL OR FORGIVEI THIS PERIOD	N. CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Sevan Benlian Project Executive KATERRA			☐ PAID		1		CALENDAR YEAR
Glendale, CA 91204			\$0_00	\$ 500.00	0_00% RATE	\$500_00	\$0_00 PER ELECTION**
TIND □ COM □ OTH □ PTY □ SCC	\$500.00	\$0.00	\$0.00	DATE DUE	\$0.00	11/30/2023 DATE INCURRED	\$
			PAID		-		CALENDAR YEAR
			\$ FORGIVEN	s	% RATE	\$	\$ PER ELECTION **
† IND COM OTH PTY SCC	\$	\$,	s	DATE DUE	\$	DATE INCURRED	\$
			PAID				CALENDAR YEAR
			\$ FORGIVEN	\$	RATE	\$	\$PERELECTION**
†□ IND □ COM □ OTH □ PTY □ SCC	S	S. Date Onto	\$	DATE DUE	s	DATE INCURRED	\$e
			PAID C	and the state of the state of the state of the	<b>%</b>	The state of the s	CALENDAR YEAR
			FORGIVEN		RATE	. 1	PER ELECTION**
TO IND COM OTH PTY SCC	<b>3</b>	•	\$	DATE DUE	3	DATE INCURRED	*
· La · · · · · · · · · · · · · · · · · ·	SUBTOTALS	\$ 0.00	0.0	500.00	\$ 0.00		
		: "./		1 1 1 4			1

†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

\*Amounts forgiven or paid by another party also must be reported on Schedule A. FPPC Form 460 (Jan/2016)

							SCHEDULE	FF
Schedule E Payments Made	Amounts may be rounded to whole dollars.			State:	ment covers period 01/01/2024	CALIFO	RNIA 160	
SEE INSTRUCTIONS ON REVERSE				through	01/20/2024	Page		
NAME OF FILER						I.D. NUM	BER	
Benlian for Glendale Community College Board of Trustee	s 2024					142293	2	
CODES: If one of the following codes accurately describes  CMP campaign paraphemalia/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 member com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and seponstage, dei	nmunications d appearance uses lating s survey resear livery and me	s	RAD rad RFD retu SAL car TEL t.v. TRC car TRS sta TSF trai VOT vot	cribe the payment. dio airtime and producti urned contributions mpaign workers' salari or cable airtime and pudidate travel, lodging, off/spouse travel, lodging insfer between committer registration or mation technology contributions.	ion costs ies production costs and meals ng, and meals tees of the sam	ne candidate/spons	ior
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE (	DR DESC	RIPTION OF	PAYMENT		AMOUNT PAID	_
eFundraising Connections		CMP	Credit Card Proces	sing Fee	!		9.	.50
Sacramento, CA 95816								
Blue State Consulting	<del>-</del>	CNS					2,500.	.00
Pasadena, CA 91104	_							
Sacramento, CA 95816		CMP	Credit Card Proces	rigore y h Historia		and the second of the second of	90.	50
*Payments that are contributions or independent expenditures	nust also be summ	arized on S	chedule D.			SUBTOTAL\$	2,600	.00
Schedule E Summary					,			=

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

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

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)......\$ 

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

## Amounts may be rounded to whole dollars.

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

	SCHEDULE E (CONT.)
Statement covers period	CALIFORNIA 160
from01/01/2024	FORM TOU
through01/20/2024	Page8 of8
	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1422932 Benlian for Glendale Community College Board of Trustees 2024

CMP CNS CTB CVC FLD END LEG LEG	campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MTG meetings and appearances RFI OFC office expenses SA PET petition circulating TEL PHO phone banks TRO OTHERS (explain)* POS postage, delivery and messenger services PRO professional services (legal, accounting) VO			RFD retu SAL cam TEL t.v. TRC can TRS staf TSF tran VOT vote	RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/			
	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DE	SCRIPTION OF	PAYMENT		AMOUNT PAID	
eFur	ndraising Connections		CMP	Credit Card Proc	essing Fee			0.73	
Sacr	ramento, CA 95816								
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\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

0.73