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COVER PAGE

Recipient Committee		COVER PAGE
Campaign Statement	,	Date Stamp CALIFORNIA 460
Cover Page	•	OF SETALD DE
Ouver i age		LUS ANGELES COUNTY
	Statement covers period	Date of election if applicable: (Email 1/25/23 Page of
	from 10/23/2022	(Month, Day, Year) 2023 LAN 30 PM 2: 48 For Official Use Only
• • • •	trom	1 1071311 1
SEE INSTRUCTIONS ON REVERSE	through 12/31/2022	
		C11836
1. Type of Recipient Committee: All Committees	- Complete Parts 1, 2, 3, and 4.	2. Type of Statement:
✓ Officeholder, Candidate Controlled Committee	☐ Primarily Formed Ballot Measure	Preelection Statement Quarterly Statement
State Candidate Election Committee     Recall	Committee O Controlled	Semi-annual Statement Special Odd-Year Report Termination Statement
(Also Complete Part 5)	Sponsored	(Also file a Form 410 Termination)
	(Also Complete Part 6)	☐ Amendment (Explain below)
General Purpose Committee Sponsored	☐ Primarily Formed Candidate/	
Small Contributor Committee	Officeholder Committee	!
O Political Party/Central Committee	(Also Complete Part 7)	·
3. Committee Information	I.D. NUMBER	Treasurer(s)
	1446011	
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITT	TEE)	NAME OF TREASURER
Menthe for Culver City School Board 2022		Maren Neufeld
		MAILING ADDRESS
STREET ADDRESS (NO P.O. BOX)		CITY STATE ZIP CODE AREA CODE/PHONE
STREET ADDRESS (NO P.O. BOX)		
CITY STATE ZI	IP CODE AREA CODE/PHONE	Culver City CA 90232 (310)388-4870  NAME OF ASSISTANT TREASURER, IF ANY
		MANUE OF AGGISTANT FREADUREN, IT AND
Culver City CA 9 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O	90232 (310) 770-2830 D. BOX	MAILING ADDRESS
······································		
CITY STATE ZI	IP CODE AREA CODE/PHONE	CITY STATE ZIP CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRESS
4. Verification		
		nowledge the information contained herein and in the attached schedules is true and complete. I
certify under penalty of perjury under the laws of the Stat	te of California that the for	
Executed on 175   2023	. В	
Date Date		ırer .
Executed on 127 2027	By	it or Responsible Officer of Sponsor
Everyted on	Ph.	. a Newpolisial Giner of Operation
Executed onDate	SigSig	gnature of Controlling Officeholder, Candidate, State Measure Proponent
Executed on	Ву	
Date	Sig	nature of Controlling Officeholder, Candidate, State Measure Proponent

## Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2							
CALIFORNIA 460							
FORM <b>400</b>							
Page _2 of _8							
Page of							

i. Officeholder or Candidate Controlled Comm	ittee	6.	Primarily Formed Ballot	Measure Committe	е	
NAME OF OFFICEHOLDER OR CANDIDATE		-	NAME OF BALLOT MEASURE			
Darrel Menthe						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	ICT NUMBER IF APPLICABLE)	-	BALLOT NO. OR LETTER	JURISDICTION	П	SUPPORT
Culver City Unified - School Board Member						OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CI	TY STATE ZIP Culver City CA 90232	-	Identify the controlling officeh	nolder, candidate, or state	e measure propo	enent, if any.
		-	NAME OF OFFICEHOLDER, CAN	IDIDATE, OR PROPONENT		
Related Committees Not Included in this Sta not included in this statement that are controlled by you or contributions or make expenditures on behalf of your cand	are primarily formed to receive		OFFICE SOUGHT OR HELD		DISTRICT NO. I	FANY
COMMITTEE-NAME	I.D. NUMBER					
NAME OF TREASURER	CONTROLLED COMMITTEE?	- 7.	Primarily Formed Candi officeholder(s) or candidate(s) f	idate/Officeholder C	ommittee List	t names of
	☐ YES ☐ NO					
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. B	30X)	•	NAME OF OFFICEHOLDER OR C	CANDIDATE OFFICE SO	UGHT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP C		=	NAME OF OFFICEHOLDER OR C	CANDIDATE OFFICE SO	OUGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER	_	NAME OF OFFICEHOLDER OR C	CANDIDATE OFFICE SC	OUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR C	CANDIDATE OFFICE SO	UGHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. I						
CITY STATE ZIP C	ODE AREA CODE/PHONE		Attac	ch continuation sheets if	necessary	

## Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

CALIFORNIA 460

Statement covers period

Summary rage		from 10/2.			3/2022	FORM 40U		
SEE INSTRUCTIONS ON REVERSE		,		thro	rough _	2/31/2022	Page _3 of _8	
NAME OF FILER Menthe for Culver City School Board 2022							I.D. NUMBER 1446011	
Contributions Received	(	Column A TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTAL TO DATE			mary for Candidates e State Primary and	
<ol> <li>Monetary Contributions</li></ol>	\$	1,627.00 0 1,627.00 525.00	\$	18,463.13 4308.00 22,771.13 825.00	_ _ _	20. Contributions Received \$	7/1 to Date	
5. TOTAL CONTRIBUTIONS RECEIVEDAdd Lines 3 + 4	\$	2,152.00	\$	23,596.13			•	
Expenditures Made         Schedule E, Line 4           6. Payments Made         Schedule E, Line 4           7. Loans Made         Schedule H, Line 3           8. SUBTOTAL CASH PAYMENTS         Add Lines 6 + 7           9. Accrued Expenses (Unpaid Bills)         Schedule F, Line 3           10. Nonmonetary Adjustment         Schedule C, Line 3           11. TOTAL EXPENDITURES MADE         Add Lines 8 + 9 + 10	\$	5,036.89 0 5,036.89 0 525.00 5,561.89	\$ \$	22,601.80 0 22,601.80 0 825 23,426.80			ve Expenditures Made* Voluntary Expenditure Limit) Total to Date	
Current Cash Statement  12. Beginning Cash Balance Previous Summary Page, Line 16  13. Cash Receipts Column A, Line 3 above  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  If this is a termination statement, Line 16 must be zero.  17. LOAN GUARANTEES RECEIVED Schedule B, Part 2  Cash Equivalents and Outstanding Debts  18. Cash Equivalents See instructions on reverse	\$ \$	3,579.22 1,627.00 0 5,036.89 169.33	ac A ar of ar be sh pr th file or	o calculate Column B, and amounts in Column to the corresponding mounts from Column I your last report. Son mounts in Column A me negative figures that enegative period amount is is the first report be ed for this calendar yearly carry over the amount Lines 2, 7, and 9 (ny).	n B me may at rom ots. If eing rear, ounts	*Amounts in this section r reported in Column B.	\$	
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	0				FPPC Advice: adv	FPPC Form 460 (Jan/2016)) rice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov	

Schedule Monetary	e A v Contributions Received		nts may be rounded whole dollars.	Statement covers period from 10/23/2022			CALIFORNIA 460		
SEE INSTRUCTI	ONS ON REVERSE			through 12/31/20	)22	Page	4of_8		
NAME OF FILER Menthe for C	Culver City School Board 2022					I.D. NU 144603	UMBER 11		
DATE	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	YEAR	PER ELECTION TO DATE (IF REQUIRED)		
10/23/22	Darrel Menthe Culver City, CA 90232	IND COM OTH SCC	Attorney, Self	100	125				
10/25/2022	Behram Parekh Culver City, CA 90232	☑IND □COM □OTH □PTY □SCC	Attorney, Dalimonte Rueb Stoller	150	150				
10/25/22	Laura Dickenson Fullerton, CA 92831	COM COM OTH PTY	Not Employed	100	100				
10/25/22	Daniel Dickenson Seattle, WA 98199	☑ IND □ COM □ OTH □ PTY □ SCC	Manger, Reboot Corporation	500	1,500				
10/26/22	Charles Perelman Culver City, CA 90230	☑ IND □ COM □ OTH □ PTY □ SCC	Not Employed	100	200				
		1 000	SUBTOTAL	\$ 950.00					
Amount re (Include al	A Summary eceived this period – itemized monetary contribution III Schedule A subtotals.)		\$ 97 n \$100\$ 65	75.00 52.00	IND- COM OTH PTY	(other H – Other I – Politica	ual pient Committee r than PTY or SCC) (e.g., business entity)		

3. Total monetary contributions received this period.

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 to whole o	be rounded dollars.	Statement cov	ers period	SCHEDULE A (CONT		
-				from 10/23/22		F	orm 460	
				through 12/31/22		Page.		
Menthe for (	Culver City School Board 2022					1.D. NI 14460	UMBER )I1	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME) OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR N (JAN. 1 - DEC	/EAR	PER ELECTION TO DATE (IF REQUIRED)	
10/26/22	Carolyn DeVinny Culver City, CA 90232	COM COM OTH PTY	Not Employed	25	125			
		IND   COM   OTH   PTY   SCC						
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY						

**SUBTOTAL \$ 25.00** 

□scc

\*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

	Am	ounts may be ro	unded	SCHEDULE B -						
Schedule B – Part 1			Statement cov	ers period	CALIFORNIA 460					
Loans Received					from 10/23/22		FORM	400		
CEE INICITIONS ON DEVELOR					through 12/31/2	2	Page _6	of _8		
SEE INSTRUCTIONS ON REVERSE							I.D. NUMBER	<u> </u>		
Menthe for Culver City School Board 2022							144601			
Wientile for Curver City School Board 2022										
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)	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT RECEIVED THIS PERIOD	THIS PERIOD	BALANCE AT	INTEREST PAID THIS PERIOD		CUMULATIVE CONTRIBUTION TO DATE		
Darrel Menthe	A 44			PAID			4.000	CALENDAR YEAR		
Darrel Menthe	Attorney Self			\$	\$ <u>0</u>	0 RATE	s_4,808	\$		
Culver City, CA 90232	Sen			FORGIVEN		RAIL		PER ELECTION*		
Guiver City, Cri 70232		4,308	s_0	\$ 4,308		\$	2/24/22	s		
☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					DATE DUE		DATE INCURRED			
				PAID		}		CALENDAR YEAR		
				\$	\$	% RATE	\$	\$		
				FORGIVEN		· · · ·		PER ELECTION*		
				\$		s	_	s		
□ IND □ COM □ OTH □ PTY □ SCC		,	\$		DATE DUE		DATE INCURRED			
				☐ PAID				CALENDAR YEAR		
				\$	s	RATE	\$	\$		
				FORGIVEN		NAIL		PER ELECTION		
		\$	\$	\$		\$		s		
□ IND □ COM □ OTH □ PTY □ SCC	<u> </u>				DATE DUE		DATE INCURRED			
	S	SUBTOTALS \$	0 9	4,308.00	\$ 0	<b>\$</b> 0				
Schedule B Summary						(Enter (e) on Sch	edule E, Line 3)			
Loans received this period				\$ 0.0	0					
(Total Column (b) plus unitemized loar										
2. Loans paid or forgiven this period				\$ 4,3	08.00		†Contributor Codes IND – Individual	3		
(Total Column (c) plus loans under \$10							COM Recipient C			
(Include loans paid by a third party that 3. Net change this period. (Subtract Lin	it are also itemized on Sche	dule A.)		NET & -4,	308.00		other than OTH – Other (e.g.,	PTY or SCC)		
Enter the net here and on the Summa	ry Page, Column A. Line 2		••••••	. ME1 9		i	PTY - Political Part	ty		
Elisa di	.,					l	SCC – Small Contri	ibutor Committee		
				(M	ay be a negative number)	_				

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

\*\* If required.

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www.fppc.ca.gov

Schedu	ie C		Amounts may be rounded						SCHEDULE C
Nonmo	netary Contributions Received		to whole dollars.	·		Statement covers pm 10/23/22	period	CALIF	ORNIA 460
	CTIONS ON REVERSE					ough 12/31/22		Page 7	of _8
Menthe for	Culver City School Board 2022							I.D. NUM 144601	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION GOODS OR SERV		AMOUNT/ FAIR MARKET VALUE	CALEN	ATIVE TO ATE DAR YEAR - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/28/22	California Federation of Teachers COPE  Burbank, CA 91505 I.D. #741857	☐IND  ☐COM ☐OTH ☐PTY ☐SCC		Digital Ads and Design	d	525.00	525.00		
		□IND □COM □OTH □PTY □SCC							
		□IND □COM □OTH □PTY □SCC					٠.		
		□IND □COM □OTH □PTY □SCC							
Attach add	ditional information on appropriately labeled	continuation	sheets.	SUBTO	DTAL	\$ 525.00			
1. Amount	e C Summary received this period – itemized nonmonetar all Schedule C subtotals.)				\$ _	525.00	IN		
	received this period – unitemized nonmone		ions of less than \$100		\$ _	0	РТ	H – Other (e Y – Political	.g., business entity)
	nmonetary contributions received this period les 1 and 2. Enter here and on the Summar		nn A, Lines 4 and 10.)	ТОТА	L\$_	525.00			

Schedule E Payments Made	Amounts may t to whole d		Statement covers period from 10/23/22	FORM 46U
SEE INSTRUCTIONS ON REVERSE			through 12/31/22	— Page 8 of 8
Menthe for Culver City School Board 2022				1446011 <sup>i</sup>
CODES: If one of the following codes accurately described campaign paraphernalia/misc.  CTB 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	MBR member com MTG meetings and OFC office expens PET petition circu PHO phone banks POL polling and s POS postage, deli	nmunications d appearances ses lating	RAD radio airtime and product RFD returned contributions SAL campaign workers' salari TEL t.v. or cable airtime and p TRC candidate travel, lodging TRS staff/spouse travel, lodging transfer between commit	ies production costs , and meals ng, and meals tees of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Press Print, Inc. , Banning, CA 92220		СМР		4,134.92
Maren Neufeld , Culver City, Ca 90232		PRO		800.00
* Payments that are contributions or independent expenditures must also	be summarized on Sche	edule D.		SUBTOTAL \$ 4,934.92
Schedule E Summary  1. Itemized payments made this period. (Include all Schedu	ule F subtotals \			\$ <sup>4,934.92</sup>
Unitemized payments made this period of under \$100				
Total interest paid this period on loans. (Enter amount from				
4 Total payments made this period (Add Lines 1, 2, and 3				TOTAL \$ 5,036.89

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