ecipient Committee ampaign Statement over Page	Amenda	nent helye	te Stamp	CALIFORNIA 460		
E INSTRUCTIONS ON REVERSE	Statement covers period from 7/1/2020 through 12/31/2020	Date of election if applicable: TELES C (Month, Day, Year) 2021 AUG -2 PM	5: 26	Page 1 of 5 For Official Use Only 0 (950)		
		2. Type of Statement:	ANUE	C1016le		
Type of Recipient Committee: All Committees - ✓ Officeholder, Candidate Controlled Committee ○ State Candidate Election Committee ○ Recall (Also Complete Part 5) ☐ General Purpose Committee ○ Sponsored ○ Small Contributor Committee ○ Political Party/Central Committee		Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination) Amendment (Explain below) Mistakes corrected	Quart Speci	erly Statement al Odd-Year Report		
Committee Information	I.D. NUMBER 1369862	Treasurer(s)				
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE COMMITTEE TO Elect Sorsabal for AVEK Water Boa	E)	NAME OF TREASURER Shelley Sorsabal MAILING ADDRESS				
STREET ADDRESS (NO P.O. BOX)		CITY	STATE ZIP CO	DE AREA CODE/PHONE		
		Palmdale	CA 9355	1 661-202-8558		
Palmdale CA 93	CODE AREA CODE/PHONE 661-202-8558	NAME OF ASSISTANT TREASURER, IF ANY				
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.	BOX	MAILING ADDRESS				
CITY STATE ZIP	CODE AREA CODE/PHONE	CITY	STATE ZIP CO	DE AREA CODE/PHONE		
	551 661-202-8558					

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 7/21/2021		Ву	
	Date	-,	surer or Assistant Treasurer
Executed on 7/21/2021		By	
Endouted on April	Date	Signature of Controlling Officeholder, Candidate,	State Measure Proponent or Responsible Officer of Sponsor
Executed on		Ву	
Date	Date	Signature of Controlling Officeho	older, Candidate, State Measure Proponent
Executed on		Ву	
	Date	Signature of Controlling Officeho	older, Candidate, State Measure Proponent

Scheduoriginal signature is not considered filed. Please complete and sub Loans Received					from 7/1/2020 through 12/31/2020		FORM 460 Page 4 of 5 LD. NUMBER 1369862	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Committee to Elect Sorsabal for AVEK Water Board 2018								
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	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTION TO DATE
Shelley Sorsabal Imdale, CA 93551 ID IND COM COTH PTY SCC	Amargosa Ridge Vineyard and Bushman LLC Business owner	ş146.43	s_Ø	S PAID S PORGIVEN S PORGIVEN	146.43 MOVI DATE DUE	PRATE S	8/11/14 If there	CALENDAR YEARS PER ELECTION IS NO
Shelley Sorsabal Palmdale, CA 93551 ID IND	Amargosa Ridge Vineyard and Bushman LLC Business owner	s_3900.00	,_Ø_	PAID S FORGIVEN S	\$ 3900.00 YUNI DAYE DUE	RATE S	activity to enter a ze word "non appropriat Never lea	ero or the e" on the e line.
Shelley Sorsabal Palmdale, CA 93551 IND COM OTH PTY SCC	Amargosa Ridge Vineyard and Bushman LLC Business owner	s50.00	s_Ø	S FORGIVEN	\$50.00 WWW DATE DUE	RATE S	blank. \$ 50.00 12/8/14 DATE INCURRED	S PER ELECTION
		SUBTOTALS	Ø	\$ 6	\$4,096.43	\$ 0	34 44	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Schedule B Summary Loans received this period (Total Column (b) plus uniternized loan				\$	0	(Enter (e) on Schedule E, Line		
2. Loans paid or forgiven this period		\$ 0 IND COI		OTH - Other (e.g.,	Committee PTY or SCC) business entity			
 Net change this period. (Subtract Lir Enter the net here and on the Summa 			*****************		O May be a negative number)		PTY - Political Part SCC - Small Contr	

** Ifrequired.

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found on the statement. Any addendum's made directly on this worksheet by the candidate or treasurer without a cover page with ULE B - PART 1 original signature is not considered filed. Please complete and submit the provided form to properly revise the statement. CALIFORNIA Loans Received FORM SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Committee to Elect Sorsabal for AVEK Water Board 2018 1369862 OUTSTANDING AMOUNT IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE OUTSTANDING ORIGINAL CUMULATIVE INTEREST AMOUNT PAID OCCUPATION AND EMPLOYER BALANCE **BALANCE AT** OF LENDER RECEIVED THIS CONTRIBUTIONS OR FORGIVEN PAID THIS AMOUNT OF (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) (IF COMMITTEE, ALSO ENTER I.D. NUMBER) BEGINNING THIS CLOSE OF THIS PERIOD PERIOD LOAN TO DATE THIS PERIOD PERIOD PERIOD Shelley Sorsabal Amargosa Ridge CALENDAR YEAR PAID Vineyard and Bushman 0 100.00 100.00 Imdale, CA 93551 LLC RATE PER ELECTION* FORGIVEN Business owner 100.00 6/11/14 If there DATE DUE no IND COM OTH PTY SCC activity to report Shelley Sorsabal Amargosa Ridge PAID Vineyard and Bushman 1000.00 enter a zero or the LLC Palmdale, CA 93551 word "none" on the FORGIVEN **Business owner** appropriate 1000.00 line. Never leave lines DATE DUE IND COM OTH PTY SCC blank. Shelley Sorsabal Amargosa Ridge ☐ PAID Vineyard and Bushman 54.71 54.71 Palmdale, CA 93551 LLC PER ELECTION T FORGIVEN Business owner none 54.71 8/1/14 DATE DUE DATE INCURRED IND COM OTH PTY SCC s 1154.71 SUBTOTALS (Enter (e) on Schedulo E, Line 3) Schedule B Summary 1. Loans received this period..... (Total Column (b) plus unitemized loans of less than \$100.) †Contributor Codes IND - Individual 2. Loans paid or forgiven this period..... COM - Recipient Committee (Total Column (c) plus loans under \$100 paid or forgiven.) (other than PTY or SCC) (Include loans paid by a third party that are also itemized on Schedule A.) OTH - Other (e.g., business entity) PTY - Political Party SCC -- Small Contributor Committee Enter the net here and on the Summary Page, Column A, Line 2. (May be a regative number) *Amounts forgiven or paid by another party also must be reported on Schedule A.

** If required.

Disclaimer: This worksheet is a photocopy of your actual statement. The intended purpose is to identify discrepancies or errors

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