Recipient Con	
Campaign Sta	tement
Cover Page	

Cover Page		, as Alightes	700M1.	FORW
EE INSTRUCTIONS ON REVERSE	Statement covers period 8/2/2023 through 12/31/2023	Date of election if applicable: (Month, Day, Year)  12/5/2024  APPLICATION  12/5/2024	H12: 15	For Official Use Only
. Type of Recipient Committee: All Committees - Cor	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:		
State Candidate Election Committee  Recali (Also Complete Part 5)  General Purpose Committee  Sponsored Small Contributor Committee Political Party/Central Committee	Primarily Formed Ballot Measure Committee Committee Controlled Complete Part 6) Complete Part 6) Complete Part 7)	☐ Preelection Statement ☐ Semi-annual Statement ☐ Termination Statement (Also file a Form 410 Termination) ☐ Amendment (Explain below)		rly Statement Il Odd-Year Report
	D. NUMBER 1462496	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  Drew Mercy for AVEK Water Board 2024		NAME OF TREASURER Drew Mercy		
STREET ADDRESS (NO P.O. BOX)		Lancaster	STATE ZIP CODE	
CITY STATE ZIP CO Lancaster CA 9353		NAME OF ASSISTANT TREASURER, IF ANY		
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX	4 001-402-3333	MAILING ADDRESS		
CITY STATE ZIP CO	DE AREA CODE/PHONE	CITY	STATE ZIP COD	E AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS	<del></del>	OPTIONAL: FAX / E-MAIL ADDRESS		
I. Verification I have used all reasonable diligence in preparing and reviewi certify under penalty of perjury under the laws of the State of	ng this state California th		n the attached sche	edules is true and complete. I
Executed on				<del></del>
Executed onDate		espo	onsible Officer of Sponsor	<del></del>
Executed onDate		e Pr	oponent	<u> </u>
Executed on	Ву	Signature of Controlling Officeholder Candidate State Measure Pr	oponent	

	COVE	R PAGI	- PART	2
CALII F(	FORN DRM	IA Z	160	
Page	2	_ of _	9	

. Officeholder or Candidate Controlled Commit	tee	6.	Primarily Formed Ballot	Measure C	ommittee		
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE	<del></del>			
Drew Mercy							
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT	NUMBER IF APPLICABLE)	'	BALLOT NO. OR LETTER	JURISDICTION		1	SUPPORT
Antelope Valley-East Kern Water Agency, Division	on 1						OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CIT	y STATE ZIP er, CA 93534		Identify the controlling office			measure prop	oonent, if any.
			NAME OF OFFICEHOLDER, CAND	DIDATE, OR PROF	PONENT		
Related Committees Not Included in this State not included in this statement that are controlled by you or a contributions or make expenditures on behalf of your candid	re primarily formed to receive	:	OFFICE SOUGHT OR HELD			DISTRICT NO.	IF ANY
COMMITTEE NAME	I.D. NUMBER						
NAME OF TREASURER	CONTROLLED COMMITTEE?	<b>7.</b>	Primarily Formed Cand officeholder(s) or candidate(s)	idate/Office for which this c	holder Co ommittee is p	mmittee Li primarily form	ist names of ed.
	YES NO	,	NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOU	GHT OR HELD	1
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BO	×)	,					☐ SUPPORT ☐ OPPOSE
CITY STATE ZIP CO			NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER	,	NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER  COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BO	CONTROLLED COMMITTEE?  YES NO	,	NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP CO			Atta	ch continuatio	n sheets if n	ecessary	

## Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Drew Mercy for AVEK Water Board 2024 1462496 Column A Column B Calendar Year Summary for Candidates Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE **General Elections** 7500 1. Monetary Contributions ...... Schedule A, Line 3 1/1 through 6/30 7/1 to Date 2. Loans Received...... Schedule B, Line 3 7500 7500 20. Contributions 3. SUBTOTAL CASH CONTRIBUTIONS...... Add Lines 1 + 2 Received 0 Nonmonetary Contributions...... Schedule C. Line 3 21. Expenditures 7500 7500 Made TOTAL CONTRIBUTIONS RECEIVED......Add Lines 3 + 4 **Expenditures Made Expenditure Limit Summary for State** 6881 6881 6. Payments Made...... Schedule E, Line 4 \$ **Candidates** 0 0 7. Loans Made...... Schedule H. Line 3 22. Cumulative Expenditures Made\* 6881 6881 8. SUBTOTAL CASH PAYMENTS...... Add Lines 6 + 7 \$ (If Subject to Voluntary Expenditure Limit) 0 Date of Election Total to Date 0 0 (mm/dd/yy) 10. Nonmonetary Adjustment......Schedule C, Line 3 6881 6881 **Current Cash Statement** 12. Beginning Cash Balance ...... Previous Summary Page, Line 16 \$ To calculate Column B. 7500 add amounts in Column 13. Cash Receipts ...... Column A, Line 3 above A to the corresponding 5833 \*Amounts in this section may be different from amounts 14. Miscellaneous Increases to Cash ...... Schedule I. Line 4 amounts from Column B reported in Column B. 6881 of your last report. Some 15. Cash Payments ...... Column A, Line 8 above amounts in Column A may 6452 be negative figures that should be subtracted from If this is a termination statement, Line 16 must be zero. previous period amounts. If this is the first report being filed for this calendar year. 17. LOAN GUARANTEES RECEIVED...... Schedule B, Part 2 \$ \_\_\_\_\_ only carry over the amounts from Lines 2, 7, and 9 (if **Cash Equivalents and Outstanding Debts** any). 18. Cash Equivalents See instructions on reverse \$

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

Schedule Monetary	A Contributions Received		ats may be rounded whole dollars.	trom	2023		SCHEDULE FORNIA 460 ORM
SEE INSTRUCTIO	NS ON REVERSE			through12/3	31/2023	Page	of9
Drew Merc	cy for AVEK Water Board 2024					1.D. NU	IMBER 196
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. 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	'EAR	PER ELECTION TO DATE (IF REQUIRED)
11/1/2023	Gabriele Giuntoni Palmdale, CA 93551	IND COM OTH PTY	Self-Employed, MG Electric	2500	25	500	,
11/1/2023	Christopher Smith Lancaster, CA 93536	☑IND □COM □OTH □PTY □SCC	Self-Employed, Gene Wheeler Farms	2500	25	500	
11/1/2023	Grant Stark Lancaster, CA 93536	IND COM OTH PTY	Self-Employed, Repair Concepts	2500	25	500	
		IND COM OTH PTY					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC	į			2	
			SUBTOTAL	\$ 7500	100		
1. Amount re	A Summary eceived this period – itemized monetary contributions.  Il Schedule A subtotals.)		'; \$_	7500	IND		

2. Amount received this period – unitemized monetary contributions of less than \$100 ......\$

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.).....TOTAL \$ \_\_

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

PTY - Political Party

(other than PTY or SCC) OTH - Other (e.g., business entity)

SCC - Small Contributor Committee

7500

Supportir	D of Expenditures ng/Opposing Other es, Measures and Committees	Amounts may be to whole do		Statement covers		CALIFO FOI	SCHEDULE I
NAME OF FILER	y for AVEK Water Board 2024			through 12/31/	2023	Page	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE CALENDAR (JAN. 1 - DE	YEAR	PER ELECTION TO DATE (IF REQUIRED)
12/1/2023	Kathryn Barger for Supervisor 2024, ID Los Angeles, CA 90071  ✓ Support □ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure		1500		1500	1500
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
			SUBTOTAL	\$			
Itemized of the state of t	D Summary contributions and independent expenditures made and contributions and independent expenditures made tributions and independent expenditures made the	ade this period of u	inder \$100			\$_	1500 - 1500

								SCHEDULE I
Schedule E	Amounts may be rounded to whole dollars.				Stateme	nt covers period	CALIFO	
Payments Made				fro	m	8/2/2023	FOR	RM TOO
OSE INGTOLICATIONS ON DEVERSE				thr	ough	12/31/2023	Page	6 of 9
SEE INSTRUCTIONS ON REVERSE NAME OF FILER							I.D. NUME	
Drew Mercy for AVEK Water Board 2024							146249	6
CODES: If one of the following codes accurately describes	the payment, yo	ou may er	nter the code. (	Otherwise,	describ	e the paymer	nt.	
CMP campaign paraphernalia/misc.	MBR member com	munications			radio a	irtime and produc		
CNS campaign consultants CTB contribution (explain nonmonetary)*	MTG meetings and OFC office expens		es	RFD SAL		ed contributions ign workers' salar	ios	
CVC civic donations	PET petition circul					cable airtime and		
FIL candidate filing/ballot fees	PHO phone banks			TRO	candid	ate travel, lodging	, and meals	
FND fundraising events IND independent expenditure supporting/opposing others (explain)*	POL polling and si POS postage, deli		ch ssenger services	TRS		ouse travel, lodgi		candidate/sponsor
LEG legal defense			al, accounting)	VOT		egistration	tiees of the same	candidate/sponsor
LIT campaign literature and mailings	PRT print ads			WEE	3 inform	ation technology o	costs (internet, e-	mail)
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION	ON OF PA	YMENT		AMOUNT PAID
Chase Card Services			credit card p	ayment. It	temized	payments on	Sched G	
Wilmington, DE 19801								6831
		<u> </u>				100	· .	
* Payments that are contributions or independent expenditures must also be	summarized on Sche	edule D.					SUBTOTAL \$	6831
Schedule E Summary						***		
Itemized payments made this period. (Include all Schedule)	e E subtotals.)						\$	6831
Unitemized payments made this period of under \$100								50
3. Total interest paid this period on loans. (Enter amount from	n Schedule B, Pa	rt 1, Colur	nn (e).)				\$	0

Schedule G			
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)	Amounts may be rounded to whole dollars.	Statement covers period 8/2/2023	C
		12/31/2023	

	SCHEDULE G
Statement covers period 8/2/2023 from	CALIFORNIA 460
through12/31/2023	Page 7 of 9
	I.D. NUMBER
	1462496

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Drew Mercy for AVEK Water Board 2024

Chase Card Services

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

COL	DES: If one of the following codes accurately describes	the	payment, you may enter the code.	Otherwise,	describe the payment.
CMP	campaign paraphernalia/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
	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	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 ads	WEB	information technology costs (internet, e-mail)

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Anaheim Marriott Anaheim, CA 92802	TRC	Political Convention	29 <b>%</b> -292.41
Antelope Valley Fair Jr Livestock Program Lancaster, CA 93030	cvc	Donation	1650
SP Spirits, Paraclete High School Lancaster, CA 93536	cvc	Donation	1100
Lancaster Performing Arts Center Lancaster, CA 93534	cvc	Donation	1322

Attach additional information on appropriately labeled continuation sheets.

TOTAL\* \$ 4364

<sup>\*</sup> Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Sched	lule	G
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"Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

	SCHEDULE G			
Statement covers period 8/2/2023	CALIFORNIA 460			
through12/31/2023	Page 6 9			
	I.D. NUMBER			

1462496

SCHEDI II E G

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Drew Mercy for AVEK Water Board 2024

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Chase Card Services

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

CMP campaign paraphernalia/misc.

CNS campaign consultants

CNS contribution (explain nonmonetary)\*

CVC civic donations

MBR member communications

MBR member communications

MBR member communications

MFD meetings and appearances

OFC office expenses

OFC office expenses

SAL campaign workers' salaries

t.v. or cable airtime and production costs

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 TRS staff/spouse travel, lodging, and meals

FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals

IND independent expenditure supporting/opposing others (explain)\* POS postage, delivery and messenger services

LEG legal defense PRO professional services (legal, accounting) VOT voter registration

IT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Assistance League of Antelope Valley Lancaster, CA 93534	cvc	Donation	175
Mom's House Lancaster, CA 93539	cvc	Donation	103
Kathrvn Barger for Supervisor 2024, ID 1456528 Los Angeles, CA 90071	Con	Contribution	1500

Attach additional information on appropriately labeled continuation sheets.

TOTAL\* \$

1778

<sup>\*</sup> Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule I Miscellaneous Increases to Cash  SEE INSTRUCTIONS ON REVERSE NAME OF FILER		Amounts may be rounded to whole dollars.			8/2/2023 12/31/2023	CALIFORNIA 460 FORM  Page 9 of 9  I.D. NUMBER
Drew Mercy	for AVEK Water Board 2024	<del></del>				1462496
RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER LD. NUMBER)	DESCRIPTION OF RECEIPT				AMOUNT OF INCREASE TO CASH
8/2/2023	Drew Mercy for Water Board 2026 ID 1440988 8/2/2023 Lancaster, CA 93534		rom clos	sed out co	mmittee	5833
Attach add	ditional information on appropriately labeled continuation sheets.				SUBTOTAL	.\$ 5833
<ol> <li>Itemized i</li> <li>Unitemize</li> <li>Total of al</li> </ol>	I Summary  Increases to cash this period	H, Column (e).)			\$	