C	ecipient Committee ampaign Statement over Page	State from .	01/01/2 h06/30/2	2023	Date of election if applicable: (Month, Day, Year)	(4)35	Page	
1.	Type of Recipient Committee: All com Officeholder, Candidate Controlled Committee State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee	Primarily For Committee Control Spons (Also Com Primarily For Officeholde	ormed Ballot Measure		2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination Amendment (Explain Below)	Ouarle	rly Statement I Odd-Year Report	
3.	Committee Information	I.D. NUMBE	R 1453466		Treasurer(s)			
	COMMITTEE NAME (OR CANDIDATE'S NAME IF NO	COMMITTEE)			NAME OF TREASURER			
	V				Jeff Brauckmann			
	Rodriguez Moisa for Whittier Union	High School A	rea 4 Trustee 2	2022	MAILING ADDRESS			
	STREET ADDRESS (NO P.O. BOX)				CITY Whittier, CA 90602	STATE	ZIP CODE	AREA CODE/PHONE 562 322-7599
	CITY	STATE	ZIP CODE	AREA CODE/PHONE	NAME OF ASSISTANT TREASURER, IF	ANY		
	Whittier, CA 90605			562 822-1991				
	MAILING ADDRESS (IF DIFFERENT) NO. AND STR	EET OR P.O. BOX			MAILING ADDRESS			
	CITY	STATE	ZIP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
	Whittier, CA 90605			Tan Constitutions	-	•		
	OPTIONAL: FAX / E-MAIL ADDRESS				OPTIONAL: FAX / E-MAIL ADDRESS			
	irodmoisa@gmail.com				jeffbrauckmann@gmail.com			
4.	Verification I have used all reasonable diligence in precentify under penalty of perjury under the I Executed on DATE Executed on DATE Executed on DATE	aws of the State		t the foregoing is true By		ate measure ⊬roponent or Hespon	твине Опісег от Бропвог	is true and complete. I
	DATE				Signature of Controlling Officehold	lor Candidata State Measure Pro	voonent	

Recipient Committee Campaign Statement Cover Page - Part 2

	COVE	R PA	GE - PART 2
CALIF		4	60
Page _	2	of _	13

5. Officeholder or Candidate Controlled	Committee	6. Primarily Formed	Ballot Meas	ure Committee	
NAME OF OFFICEHOLDER OF CANDIDATE		NAME OF BALLOT MEASURE			
Irma Rodriguez Moisa OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	RICT NUMBER IF APPLICABLE)	BALLOT NO. OR LETTER	JURISDICTION	·	☐ SUPPOR
Board of Education Whittier Union Hi	igh School 4				SUPPOR OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP Whittier, CA 90602	Identify the controlling	ng officehold	ler, candidate, or state m	neasure proponent, if
Related Committees Not included in this State	ement: List any committees	NAME OF OFFICEHOLDER, CA	NDIDATE, OR PRO	PONENT	
not included in this statement that are controlled by you or a make expendituree on behalf of your candidacy	are primarily formed to receive contributions or	OFFICE SOUGHT OR HELD		DISTRICT	TNO. IF ANY
	I.D. NUMBER				
	LD. NUMBER CONTROLLED COMMITTEE? YES NO	7. Primarily Formed officeholder(s) or cando	Candidate/0	Officeholder Committee is prima.	List names of rily formed.
	CONTROLLED COMMITTEE? YES NO DDRESS (NO P.O. BOX)	7. Primarily Formed officeholder(s) or cando	ldate(s) for wh	Officeholder Committee Ach this committee is prima	List names of crity formed.
NAME OF TREASURER COMMITTEE ADDRESS STREET AD CITY	CONTROLLED COMMITTEE? YES NO DRESS (NO P.O. BOX) STATE ZIP CODE AREA CODE/PHONE	officeholder(s) or cand	CANDIDATE	ich this committee is prima	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE? YES NO DDRESS (NO P.O. BOX)	NAME OF OFFICEHOLDER OR	CANDIDATE CANDIDATE	OFFICE SOUGHT OR HELD	support
NAME OF TREASURER COMMITTEE ADDRESS STREET AD CITY	CONTROLLED COMMITTEE? YES NO DRESS (NO P.O. BOX) STATE ZIP CODE AREA CODE/PHONE	NAME OF OFFICEHOLDER OR	CANDIDATE CANDIDATE	OFFICE SOUGHT OR HELD OFFICE SOUGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Rodriguez Moisa for Whittier Union High School Area 4 Trustee 2022

Rodriguez Moisa for Whittier Union High School Area 4 Trustee 202	2		And the second s	1453466
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	COLUMN B CALENDAR YEAR TOTAL TO DATE	Running in Both th	nmary for Candidates ne State Primary and
1. Monetary Contributions	s0.00	\$ 0.00	General Elections	
2. Loans Received	0.00	0.00	1/1 thr	rough 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 0.00	\$ 0.00	20. Contributions Received	0.00 \$ 0.0
4. Nonmonetary Contributions Schedule C, Line 3	0.00	0.00		
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	0.00	\$ 0.00	21. Expenditures s	0.00 \$ 0.00
Expenditures Made			Expenditures Limi Candidates	it Summary for State
6. Payments Made Schedule E, Line 4	\$ 340.00	\$ 340,00	Candidates	
7. Loans Made Schedule H, Une 3	0.00	0.00		ative Expenditures Made* Voluntary Expenditure Limit)
8. SUBTOTAL CASH PAYMENTS Add Lines 8+7	\$ 340.00	\$340.00	(ii dubject to t	voluntary Experioriture Limits)
9. Accrued Expenses (Unpaid Bills)	0,00	0.00		
10. Nonmonetary Adjustment	0.00	0.00	Date of Election (mm/dd/yy)	Total to Date
11. TOTAL EXPENDITURES MADE	\$ 340.00	\$ 340.00		s
Current Cash Statement		To calculate Column B,		\$
12. Beginning Cash Balance Provious Summary Page, Line 16	\$ 4,871.58	add amounts in Column A to the corresponding		
13. Cash Receipts	0.00	amounts from Column B of your last report. Some		
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00	amounts in Column A may be negative figures that should be subtracted from		\$
15. Cash Payments	340.00	previous period amounts, if this is the first report being		\$
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 4,531.58	filed for this calendar year, only carry over the amounts		
If this is a termination statement, Line 16 must be zero.		from Lines 2, 7, and 9 (if any).		
17. LOAN GUARANTEES RECEIVED. Schedule B, Line 2	\$0.00		*Amounts in this section may reported in Column B.	be different from amounts
Cash Equivalents and Outstanding Debts				
18. Cash Equivalents	4,531.58			
19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$_	0.00	2	EDDC Advis	FPPC Form 460 (Jan/2016 e: advice@fppc.ca.gov (866/275-3772)
Powered by ISPolitical.com			FFFC Advic	www.fppc.ca.gov

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Schedule Monetary	A Contributions Received	Am	to whole dollars.	Statement covers		CALIF FO	ORNIA 460
SEE INSTRUCTION	NO DA PROVINCIO			through06/30	/2023	Page _	4 of 13
NAME OF FILER Rodriguez	Moisa for Whittier Union High School Area 4 Truste	e 2022				I.D. NUMBER	1453466
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALEN	TIVE TO DATE NDAR YEAR 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
		OTH PTY SCC					
Schedule	A Summary		1			* Contributor	Codes
1. Amount received (Include all S	eived this period - itemized monetary contributions.		\$	0.00	_	IND - Individu	al ient Committee
2. Amount rec	eived this period - uniternized monetary contributions of less t	than \$100	\$	0.00		OTH - Other	than PTY or SCC) (e.g., business entity)
	ary contributions received this period. and 2. Enter here and on the Summary Page, Column A, Lin	ne 1.)	TOTAL \$	0.00		PTY - Politice SCC - Small	Contributor Committee

Schedule B - Part 1 Loans Received		Ame	ounts may be round to whole dollars.	Γ	Statement cove	ers period 01/2023	CALIFORN FORM	IA 460
					through06/3	30/2023	Page5	_ of13
NAME OF FILER							I.D. NUMBER	
Rodriguez Moisa for Whittier Union	High School Area 4 Trust	ee 2022					145	3466
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF 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 PAID OF FORGIVEN THIS PERIOD **	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(I) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS DATE
				PAID				CALENDAR YEAR
				\$	\$		% \$	PER ELECTION
				FORGIVEN		RATE		
		\$	\$	\$		\$		
'DIND COM DOTH PTY SCC					DATE DUE		DATE INCURRED	
Schedule B Summary								
1. Loans received this period				\$	0.00			
(Total Column (b) plus unitemized lo	pans of less than \$100.)						* Contributor Code	38
 Loans paid or forgiven this period (Total Column (c) plus loans under solutions) (Include loans paid by a third party total) 		hedule A.)		\$	0.00	_	OTH - Other (e.g.,	PTY or SCC) business entity)
2 Not obange this period (Subtract I	ino 2 from Lino 1)				0.00		PTY - Political Part SCC - Small Contr	

SUBTOTALS \$ \$ \$

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

3. Net change this period. (Subtract Line 2 from Line 1.) _ _ _ _ Enter the net here and on the Summary Page, Column A, Line 2

(Enter (e) on Schedule E, Line 3) FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

0.00 (May be a negative number)

chedule B - Part 2 can Guarantors		Amounts may be rounded to whole dollars.	Statemen	t covers period		HEDULE B - PART 2
			from	01/01/2023	FORM	^A 460
			through	06/30/2023	Page 6	of 13
SEE INSTRUCTIONS ON BEVERSE NAME OF FILER Rodriguez Moisa for Whittier Union High S	chool Area 4 Trust	tee 2022			I.D. NUMBER 1453	466
FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	IND COM		LENDER		Page 6 of 13 I.D. NUMBER 1453466 AMOUNT ANTEED THIS CUMULATIVE TO DATE OUTSTANDING	
	OTH PTY SCC		DATE		(IF REQUIRED)	

SUBTOTAL \$

Enter on Summary Page, Line 17 only.

Schedule C Nonmonetary Contributions Received		Amounts may be rounded to whole dollars.		Statem	ent covers period	CALIFORN	SCHEDULE C
				from	01/01/2023	FORM	~46U
				through _	06/30/2023	Page 7	of13
SEE INSTRUCTIONS ON REVERSE NAME OF FILER						I.D. NUMBER	
Rodriguez Moisa for Whittier Union High School Area	4 Trustee 202	2				1453	3466
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)		PTION OF R SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	IND COM OTH PTY SCC						
	OTH PTY SCC						
	OTH PTY SCC						
Schedule C Summary						* Contributor Codes	
1. Amount received this period - itemized nonmonetary contribution (Include all Schedule C subtotals.) 2. Amount received this period - unitemized nonmonetary contributions. 3. Total nonmonetary contributions received this period. (add Lines 1 and 2. Enter here and on the Summary Page, Col.)	utions of less the		TOTAL	\$.00	IND - Individual COM - Recipient Con (other than P OTH - Other (e.g., bu PTY - Political Party SCC - Small Contribu	TY or SCC) siness entity)
Amount received this period - unitemized nonmonetary contrib Total nonmonetary contributions received this period.	utions of less the		TOTAL	\$.00	OTH - C	Recipient Con (other than P Other (e.g., but olitical Party
		:		SUBTOTAL S			

Schedule D Amounts may be rounded to whole dollars. **Summary of Expenditures** Statement covers period **CALIFORNIA** Supporting/Opposing Other Candidates, Measures, and Committees 01/01/2023 from 06/30/2023 13 through NAME OF FILER I.D. NUMBER Rodriguez Moisa for Whittler Union High School Area 4 Trustee 2022 1453466 NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, CUMULATIVE TO DATE CALENDAR YEAR PER ELECTION TO DATE DATE DESCRIPTION **AMOUNT** (IF REQUIRED) (IF REQUIRED) THIS PERIOD TYPE OF PAYMENT OR COMMITTEE (JAN. 1 - DEC. 31) Monetary Contribution Nonmonetary Contribution Independent Expenditure Oppose Support SCHEDULE D SUMMARY 0.00 1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) 2. Unitemized contributions and independent expenditures made this period of under \$100 0.00 3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) 0.00

SUBTOTAL S

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Schedule	E
Payment	s Made

Amounts may be rounded to whole dollars.

MBR member communications

OFC office expenses

PHO phone banks

PRT print ads

PET petition circulating

MTG meetings and appearances

POL polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

SCHEDULE E Statement covers period CALIFORNIA 01/01/2023 from

06/30/2023 13

I.D. NUMBER

1453466

through

SEE INSTRUCTIONS ON REVERSE

CMP campaign paraphernalia/misc.

LIT campaign literature and mailings

CTB contribution (explain nonmonetary)*

IND Independent expenditure supporting/opposing others (explain)*

CNS campaign consultants

FIL candidate fling/ballot fees

CVC civic donations

LEG legal defense

FND fundraising events

Rodriguez Moisa for Whittier Union High School Area 4 Trustee 2022

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

RAD radio airtime and production costs

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/sponsor

VOT voter registration

WEB information technology costs (Internet, e-mail)

Payments that are contributions or independent expenditures must also be summarized or	n Schedule D.	SUBTOTAL S	340.00
. Total payments made this period. (Add Lines 1, 2, and 3. Enter he	re and on the Summary Page, Col	umn A, Line 6.)	AL \$ 340.00
3. Total interest paid this period on loans. (Enter amount from Sched		lump A Lica ()	\$0.00
2. Unitermized payments made this period of under \$100			-\$
Schedule E Summary 1. Itemized payments made this period. (Include all Schedule E subto	otals.)		_ \$340.00
Moreno Valley, CA 92555	PRO	Bookeeping & Preparing Financial Statements	340.00
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Sarah Daniels	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID

Assured Evenesco (Uppeid Dilla)	Amounts may to whole	be rounded			SCHEDUL
Accrued Expenses (Unpaid Bills)	to whole		Statement covers	CAL	FORNIA 46
			through06/30)/2023 Page	10or13
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				I.D. NUMI	BER
Rodriguez Moisa for Whittier Union High School Area	4 Trustee 2022				1453466
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	PRO professional service	research and messenger services	TEL t.v. or cab TRC candidate TRS staff/spot TSF transfer b VOT voter regi	workers' salaries ile airtime and production or travel, todging, and meals use travel, todging, and mea etween committees of the s istration	als
LTC campaign interactive and mailings	PRT print ads		WEB informati	on technology costs (intern	et, e-mail)
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	WEB informati	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF		(b) AMOUNT INCURRED	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT	(d) OUTSTANDING BALANCE
NAME AND ADDRESS OF CREDITOR	CODE OR DESCRIPTION OF PAYMENT		(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT	(d) OUTSTANDING BALANCE CLOSE OF THIS PERIOD
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) SCHEDULE F SUMMARY 1. Total accrued expenses incurred this period. (Include all Sched	code or description of PAYMENT dule F, Column (b) subtotals for used expenses under \$100.)	BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	OUTSTANDING BALANCE CLOSE OF THIS PERIOD

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. \$ \$

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 CALIFORNIA **FORM** 01/01/2023 from 06/30/2023 11 of 13 through I.D. NUMBER 1453466

SEE INSTRUCTIONS ON REVERSE

Rodriguez Moisa for Whittier Union High School Area 4 Trustee 2022

NAME OF AGENT OR INDEPENDENT CONTRACTOR

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

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 communications

MTG meetings and appearances

OFC office expenses PET petition circulating

PHO phone banks

POL polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

PRT print ads

RAD radio airtime and production costs

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/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAI

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

^{**} 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	ule H	
Loans	Made to	Others*

SEE INSTRUCTIONS ON REVERSE

FULL NAME, STREET ADDRESS AND

ZIP CODE OF RECIPIENT

(IF COMMITTEE, ALSO ENTER I.D. NUMBER)

Amounts may be rounded to whole dollars.

(b) AMOUNT LOANED

THIS PERIOD

PORGIVEN

(a) OUTSTANDING BALANCE

BEGINNING THIS

PERIOD

SCHEDULE H Statement covers period CALIFORNIA **FORM** 01/01/2023 from 06/30/2023 12 of 13 through I.D. NUMBER 1453466 (e) INTEREST (f) ORIGINAL AMOUNT OF (g) CUMULATIVE LOANS TO DATE (c) REPAYMENT OR (d) OUTSTANDING FORGIVENESS THIS BALANCE AT CLOSE RECEIVED PERIOD * OF THIS PERIOD LOAN CALENDAR YEAR PAID PER ELECTION**

RATE

DATE DUE

SUBTOTALS \$ \$ \$

*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E

Rodriguez Moisa for Whittier Union High School Area 4 Trustee 2022

IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER

IF SELF- EMPLOYED, ENTER NAME

OF BUSINESS)

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DATE INCURRED

Schedule I			
Miscellaneous	Increases	to	Cash

Amounts may be rounded to whole dollars. Statement covers period from 01/01/2023 CALIFORNIA 460

I.D. NUMBER

through 06/30/2023

Page 13 of 13

SEE INSTRUCTIONS ON REVERSE

Rodriguez Moisa for Whittier Union High School Area 4 Trustee 2022

1453466

DATE	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Schedule I Summary

1. Itemized increases to cash this period.	\$ 0.00
2. Unitemized increases to cash of under \$100 this period.	
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)	\$ 0.00
 Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) 	