COVER PAGE **Recipient Committee** Date Stamp CALIFORNIA Campaign Statement RECEIVED BY **FORM** IS ANGELES COUN Cover Page Page. Date of election if applicable: Statement covers period 023 JAN 30 AMII: 0 (Month, Day, Year) For Official Use Only 10/23/22 from CAMPAIGN FINANCE 11/8/22 12/31/22 SEE INSTRUCTIONS ON REVERSE through 1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. 2. Type of Statement: ☑ Officeholder, Candidate Controlled Committee **Preelection Statement** Primarily Formed Ballot Measure Quarterly Statement State Candidate Election Committee
O Recall Semi-annual Statement Special Odd-Year Report Committee Sponsored Termination Statement (Also file a Form 410 Termination) (Also Complete Pert 5) Amendment (Explain below) (Also Complete Pert 6) General Purpose Committee Primarily Formed Candidate/ Sponsored Officeholder Committee Small Contributor Committee Political Party/Central Committee (Also Complete Part 7) 1.D. NUMBER Committee Information Treasurer(s) 1451160 COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) NAME OF TREASURER Committee to Elect Brad Crihfield to Bellflower Unified School Board 2022 Amanda Crihfield MAILING ADDRESS STREET ADDRESS (NO P.O. BOX) CITY ZIP CODE AREA CODE/PHONE Lakewood Ca. 90713 562,400,1867 CITY STATE ZIP CODE AREA CODE/PHONE NAME OF ASSISTANT TREASURER, IF ANY Lakewood Ca. 90713 562.673.7641 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX MAILING ADDRESS CITY AREA CODE/PHONE STATE ZIP CODE ZIP CODE AREA CODE/PHONE OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS votebrad2022@gmail.com mandykins23@gmail.com Verification 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. I certify under penalty of perjury under the laws of the State of California that th 1/30/23 Executed on. Date 1/30/23 Executed on. Date ponsible Officer of Sponsor Executed on. Date Signature of Controlling Officeholder, Candidate, State Measure Proponent Executed on. Date Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (Jan/2016))

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#### Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2
CALIFORNIA 460
Page 1 of 10

. Officeholder or Candidate Controlled Commi	ttee	6.	Primarily Formed Ballo	t Measure (	Committee	,
NAME OF OFFICEHOLDER OR CANDIDATE Brad Crihfield			NAME OF BALLOT MEASURE			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR Bellflower Unified School District Board	CT NUMBER IF APPLICABLE)	•	BALLOT NO. OR LETTER	JURISDICTIO		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CI	ry STATE ZIP akewood Ca. 90713		Identify the controlling office			ponent, if any.
Related Committees Not Included in this State not included in this statement that are controlled by you or contributions or make expenditures on behalf of your candi	are primarily formed to receive		NAME OF OFFICEHOLDER, CAN	NDIDATE, OR P	PROPONENT	D. IF ANY
COMMITTEE NAME	I.D. NUMBER			<del></del>		
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Cand officeholder(s) or candidate(s)	idate/Office for which this	eholder Committee committee is primarily form	list names of ned.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. B			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEL	SUPPORT OPPOSE
COMMITTEE NAME	DDE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR (	CANDIDATE	OFFICE SOUGHT OR HEL	SUPPORT OPPOSE
,			NAME OF OFFICEHOLDER OR (	CANDIDATE	OFFICE SOUGHT OR HEL	SUPPORT OPPOSE
NAME OF TREASURER  COMMITTEE ADDRESS STREET ADDRESS (NO P.O. B	CONTROLLED COMMITTEE?  YES NO		NAME OF OFFICEHOLDER OR (	CANDIDATE	OFFICE SOUGHT OR HEL	SUPPORT OPPOSE
CITY STATE ZIP CO			Attac	ch continuatio	on sheets if necessary	

## Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period CALIFORNIA 460 10/23/22 from\_ 12/31/22 Page \_\_ through \_ I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Committee to Elect Brad Crihfield to Bellflower Unified School Board 2022 1451160

Contributions Received  1. Monetary Contributions	0	**Example 1.5 Column B CALENDAR YEAR TOTAL TO DATE  ***********************************	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections  1/1 through 6/30 7/1 to Date  20. Contributions Received \$\$  21. Expenditures Made \$\$
Expenditures Made  6. Payments Made	\$\frac{21,293}{0}\$ \$\frac{21,293}{0}\$ \$\frac{0}{1,686}\$ \$\frac{21,293}{3}\$	\$\frac{36,781}{0}\$ \$\frac{36,781}{0}\$ \$\frac{0}{2,461}\$ \$\frac{37,556}{3}\$	Expenditure Limit Summary for State Candidates  22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)  Date of Election (mm/dd/yy)
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	10,199 0 21,293 6,766	To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).	*Amounts in this section may be different from amounts reported in Column B.
18. Cash Equivalents See instructions on reverse  19. Outstanding Debts	\$ <u>0</u>		FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772

#### Schedule A Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period

Monetary	Commissions Received			from		FO	ORM 460
SEE INSTRUCTI	IONS ON REVERSE	through12/31/22		Page			
NAME OF FILER Committee to	o Elect Brad Crihfield to Bellflower Unified School Board	i 2022	·			1.D. NUN 1451160	
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 Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
10/23/22	Ariel Pe Lakewood, Ča. 90713	ZIND COM OTH PTY SCC	Business Advisor/SBDC	250	250		
10/26/22	Blanca Pacheco for Assembly 2022 ID#1443511  Long Beach, Ca. 90802	IND COM OTH PTY SCC		1000	1000		
10/28/22	Nicki Waldorf Tustin, Ca. 92780	IND COM OTH PTY SCC	Executive Asst./Meggitt	100	100		
10.28/22	Matt Cullen Long Beach, Ca. 90808	IND COM	Owner/Dion & Sons Marine Fuels	1000	1000		
11/2/22	Mark Dameron Lakewood, Ca. 90/13	IND COM OTH PTY SCC	Self Employed/Local Political Activist	2000	2000		
			SUBTOTAL	4350			4.5 18 20
1. Amount re (Include a	A Summary eceived this period – itemized monetary contribution Il Schedule A subtotals.)		\$	9	IND- COM OTH PTY	(other the Other (e Political	nt Committee nan PTY or SCC) .g., business entity)
	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, C	olumn A, Line 1	.)TOTAL \$	,199	FPPC Advice: advi		Form 460 (Jan/2016)) a.gov (866/275-3772) www.fppc.ca.gov

### Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT)

Wonetary	Contributions Received			from	ers period	CALI F	orm 460
	•			through12/31/22		Page_	
Committee to	o Elect Brad Crihfield to Bellflower Unified School Board	2022				1.D. NU 14511	
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 Y (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)
11/2/22	Mavra Garza Bellitlower, Ca. 90706	IND COM OTH SCC	Teacher/LBUSD	1000	1250		,
11/4/22	CSEA Fed ID#C00480830 State ID#1325942  Sacramento, Ca. 95814	IND COM OTH PTY SCC	٠.	2000	2000		
11/12/22	Lakewood, Ca. 90713	IND COM OTH PTY	Unemployed	100	1000		
12/8/22	Marco Soto Gardena, Ca. 90248	IND COM OTH PTY	Director of Operations/Ride Yellow	500	1000		
12/8/22	Casanova for City Council 2022 ID#1444226 Norwalk, Ca. 90650	IND COM OTH PTY SCC		500	500		
SUBTOTAL \$ 4100							

*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

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# Schedule A (Continuation Sheet) Monetary Contributions Received

NAME OF FILER

Amounts may be rounded to whole dollars.

	SCHEDULE A (CONT)
Statement covers period from 10/23/22	CALIFORNIA 460
through	
	I.D. NUMBER

Committee to	o Elect Brad Crihfield to Bellflower Unified School Board 2	2022			14511	60
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 TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/8/22	Gabriela Camacho Lynwood for City Council 2022 ID#1452266	☐ IND  ☑ COM ☐ OTH ☐ PTY. ☐ SCC	Lynnwood High School/ Teacher	250	250	
12/8/22	Arnold Glasman  Industry Ca. 91746	ZIND COM OTH PTY SCC	Attorney at Law/Alvares- Glasman & Colvin	1000	3500	
12/8/22	Vasnington DC 20002	IND COM	Self Employed/Attorney	100	100	
12/12/22	Pandon for Accembly 2022 #1435367  Sacramento, Ca. 95815	□ IND  COM □ OTH □ PTY □ SCC		250	250	-
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
			SUBTOTAL	1600		

*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

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Schedu Nonmo	le C netary Contributions Received		Amounts may be rounded to whole dollars.		S	tatement covers 10/23/22	period	CALIF	SCHEDULEC ORNIA 460 RM
SEE INSTRUC	TIONS ON REVERSE				thro	12/31/22 ugh		Page	7 or 10
NAME OF FIL		ool Board 2022	2					I.D. NUM 145116	
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)	DESCRIPTION GOODS OR SERV		AMOUNT/ FAIR MARKET VALUE	CAL	MULATIVE TO DATE ENDAR YEAR IN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/26/22	Travis Iackson  Long Beach, Ca. 90807	☑ IND □ COM □ OTH □ PTY □ SCC	WERE Real Estate/ Realtor	Ad Space	-	186	186	,	
11/7/22	Bellflower Association Fund for Quality Schools ID#1236020 Cerritos, Ca. 90703	□IND  COM □OTH □PTY □SCC		Lit Drop		1500	150	0	
		□IND □COM □OTH □PTY □SCC							
		IND COM OTH PTY SCC							
Attach ad	ditional information on appropriately labeled	continuation	sheets.	SUBTO	TAL \$	1686			
1. Amount	e C Summary received this period – itemized nonmonetary all Schedule C subtotals.)	•				686		*Contributor Co IND - Individua COM - Reciple	l nt Committee
•	received this period – unitemized nonmonet				0		_	OTH - Other (e PTY - Political	nan PTY or SCC) .g., business entity) Party ontributor Committee
	nmonetary contributions received this period les 1 and 2. Enter here and on the Summary		mn A, Lines 4 and 10.)	ТОТА	L \$	686	_ `		<i></i>
			•			FPPC A	dvice:		form 460 (Jan/2016)) a.gov (866/275-3772) www.fppc.ca.gov

SCH	EDUI	-E E (	CONT.
			CONTRACTOR

Schedule !	E
(Continuat	ion Sheet)
<b>Payments</b>	Made

Committee to Elect Brad Crihfield to Bellflower Unified School Board 2022

Amounts may be rounded to whole dollars.

	00112022 2 (00143)
Statement covers period 10/23/22 from	california 460
through	Page of 1
	I.D. NUMBER 1451160

CODES: 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 MTG meetings and appearances RFD returned contributions CNS campaign consultants OFC office expenses CTB contribution (explain nonmonetary)\* SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees phone banks TRC candidate travel, lodging, and meals FIL PHO FND fundraising events POL polling and survey research staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)\* postage, delivery and messenger services transfer between committees of the same candidate/sponsor POS TSF IND LEG legal defense professional services (legal, accounting) voter registration PRO VOT WEB information technology costs (internet, e-mail) campaign literature and mailings PRT print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE C	DESCRIPTION OF PAYMENT	AMOUNT PAID
GetThru		Text messaging	888
Beaverton, Or. 97008			
Anaya Apparel	СМР		199
Long Beach, Ca. 90805			
Facebook	WEB	Advertising	120
Menlo Park, Ca. 94025			
Stripe		Fundraiser site fees	116
San Francisco, Ca. 94080			
GoFundMe	СТВ		100
Redwood City, Ca. 94063			
			1423

									e sum						

SUBTOTAL \$ 1423

						SCHEDWILE		
Schedule E	Amounts may be to whole do			Statement covers period	CALIF	ORNIA 160		
Payments Made				from	FC	DRM 400		
SEE INSTRUCTIONS ON REVERSE				through	Page_	9. of 10		
NAME OF FILER  Committee to Elect Brad Crihfield to Bellflower Unified School Box			<u>`</u>		I.D. NUI			
Committee to Elect brad Crimied to Belliower Onlined School Box	ara 2022				14511	160		
CODES: If one of the following codes accurately describes	the payment, y	ou may en	ter the code. Other	wise, describe the payment.				
CMP campalgn paraphernalia/misc. CNS campalgn 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 mallings	MBR member com MTG meetings and OFC office expens petition circu phone banks POL polling and s POS postage, dell	munications I appearances es ating urvey research	n Benger services	RAD RFD RFD RFD RFD RFD RFD RFD RFD RFD RF	uction cost d meals and meals s of the san	ne candidate/sp <b>onsor</b>		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE C	R DESC	CRIPTION OF PAYMENT		AMOUNT PAID		
Lux Marketing		LIT				16,755		
Torrance Ca. 90501			-					
Alina Nae			Design work			1000		
Lakewood, Ca. 90712								
Fronk's			Election night ever	nt		973		
Belltlower, CA. 90706	,							
* Payments that are contributions or independent expenditures must also be s	summarized on Sche	dule D.		`SU	BTOTAL	\$ <sup>18,728</sup>		
Schedule E Summary			\			20,678		
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, Par	t 1, Column	(e).)	, 	\$_	0		

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Schedule E (Continuation Sheet) Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER Committee to Elect Brad Crihfield to Bellflower U	Amounts may be to whole do who			Statement covers period 10/23/22 from through 12/31/22	CALIFORNIA 460 FORM  Page 10 of 10  I.D. NUMBER 1451160
CODES: If one of the following codes accurately campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  civic donations  CIL campaign events  FIL candidate filing/ballot fees  fundraleing events  ND independent expenditure supporting/opposing other  EG legal defense  campaign literature and mailings	MBR member con MTG meetings an OFC office expeni PET petition circu PHO phone banks POL polling and s postage, del PRO professional PRT print ads	nmunications d appearances ses lating s urvey researci	n Benger services	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries t.v. or cable airtime and production TRC candidate travel, lodging, an staff/spouse travel, lodging,	luction costs d meals and meals s of the same candidate/sp <b>onsor</b>
NAME AND ADDRESS OF (IF COMMITTEE, ALSO ENTER I.I		CODE	DR DES	CRIPTION OF PAYMENT	AMOUNT PAID
Google LLC  Mountainview, Ca. 94043	,	-	Advertising	·	303
Shutterfly Redwood City, Ca. 94065		CMP			122
Wix		WEB			102
San Francisco, Ca. 94158			,		

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

SUBTOTAL \$ 527