10/24/223) CALIFORNIA 460

t Committee n Statement ge

Recipient Committee Campaign Statement Cover Page		LIVED BY CALIFORNIA 460
	Statement covers period from 9/25/2022	Date of election if applicable: (Month, Day, Year 200 26 PM 3: 00 For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through 10/22/2022	11/8/2022 CAMPAIGN FINANCE C/1843
1. Type of Recipient Committee: All Committees	- Complete Parts 1, 2, 3, and 4.	2. Type of Statement:
Officeholder, Candidate Controlled Committee State Candidate Election Committee Recall (Also Complete Part 6) General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination) Amendment (Explain below)
3. Committee Information	I.D. NUMBER 1452157	Treasurer(s)
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMIT		NAME OF TREASURER
Committee to Elect Teresa Todd for Hart Scho	ool Board 2022	Cheryl Gray MAILING ADDRESS
STREET ADDRESS (NO P.O. BOX)		CITY STATE ZIP CODE AREA CODE/PHONE
		Valencia CA 91355 (661803-8097
	IP CODE AREA CODE/PHONE	NAME OF ASSISTANT TREASURER, IF ANY
Santa Clarita CA MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.	91321 (661)510-1908 5. BOX	MAILING ADDRESS
	IP CODE AREA CODE/PHONE	CITY STATE ZIP CODE AREA CODE/PHONE mzgray@hotmail.com
Ttodd@poypr.com_ OPTIONAL: FAX/E-MAIL ADDRESS		OPTIONAL: FAX/E-MAIL ADDRESS
4. Verification I have used all reasonable diligence in preparing and recertify under penalty of perjury under the laws of the State Executed on 10/24/2022 Executed on 10/24/2022		y knowledge the information contained herein and in the attached schedules is true and complete. I d correct.
Executed on	Ву	Signature of Controlling Officeholder, Candidate, State Messure Proponent
Executed on	Ву	Signature of Controlling Officeholder, Candidate, State Measure Proponent FPPC Form 460 (Jan/2016))

Recipient Committee Campaign Statement Cover Page — Part 2

CALIFORNIA 460
FORM
Page 2 of 8

ficeholder or Candidate Controlled Committee				ot Measure		
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
Teresa Todd						
OFFICE SOUGHT OR HELD (INCLUDE LOCATIO	N AND DISTRICT NUMBER IF APPLICAB	BLE)	BALLOT NO. OR LETTER	JURISDICTI	ON	SUPPORT
Hart School Board - District No. 3						☐ OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND		ZIP 91321	Identify the controlling office	eholder, candi	date, or state measure pr	oponent, if any.
			NAME OF OFFICEHOLDER, CA	NDIDATE, OR F	PROPONENT	
Related Committees Not Included in not included in this statement that are controll contributions or make expenditures on behalf	ed by you or are primarily formed to re-		OFFICE SOUGHT OR HELD		DISTRICT	O. IF ANY
COMMITTEE NAME	I.D. NUMBER					
The state of the s		-	Deleganths Francisco de Oran	11 4 - 4 - 1000 -	- la - lal- u O 144	
NAME OF TREASURER	CONTROLLED COMMITTE	TEE? 7.	Primarily Formed Cana officeholder(s) or candidate(s)	didate/Offic for which this	eholder Committee committee is primarily for	List names of med.
	YES NO	7.	officeholder(s) or candidate(s,) for which this	committee is primarily for	ned.
		7.	Primarily Formed Cand officeholder(s) or candidate(s) NAME OF OFFICEHOLDER OR) for which this	eholder Committee committee is primarily for OFFICE SOUGHT OR HE	ned.
COMMITTEE ADDRESS STREET ADDRESS	YES NO SS (NO P.O. BOX) TE ZIP CODE AREA CODE/	EE?	officeholder(s) or candidate(s,	for which this	committee is primarily for	D SUPPORT
COMMITTEE ADDRESS STREET ADDRES	YES NO SS (NO P.O. BOX) E ZIP CODE AREA CODE I.D. NUMBER	/PHONE	officeholder(s) or candidate(s) NAME OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGHT OR HE	D SUPPORT OPPOSE Support OPPOSE
COMMITTEE ADDRESS STREET ADDRESS	YES NO SS (NO P.O. BOX) TE ZIP CODE AREA CODE/	/PHONE	NAME OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGHT OR HE	D SUPPORT OPPOSE D SUPPORT OPPOSE D SUPPORT OPPOSE OPPOSE

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SUMMARY PAGE

from 9/25/2022	FORM 460
through 10/22/2022	Page 3 of 8
	I.D. NUMBER 1452157

Committee to Elect Teresa Todd for Hart School Board 2022 Column A Column B Calendar Year Summary for Candidates Contributions Received TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) Running in Both the State Primary and TOTAL TO DATE General Elections 5,959.00 8,408.00 1/1 through 6/30 7/1 to Date 363.00 6.863.00 20. Contributions 6,322.00 15,271.00 Received -0-4. Nonmonetary Contributions...... Schedule C, Line 3 21. Expenditures 15,271.00 6,322.00 Made **Expenditures Made Expenditure Limit Summary for State** 2,889.98 6.318.43 Candidates -0-22. Cumulative Expenditures Made* 2,889.98 6,318.43 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ (If Subject to Voluntary Expenditure Limit) -0--0-Date of Election Total to Date -0--0-(mm/dd/yy) 2,889.98 6,318.43 **Current Cash Statement** 5,520.55 12. Beginning Cash Balance Previous Summery Page, Line 16 \$ To calculate Column B. 6,322.00 add amounts in Column A to the corresponding *Amounts in this section may be different from amounts -0-amounts from Column B reported in Column B. 2,889,98 of your last report. Some 15. Cash Payments Column A, Line 8 above amounts in Column A may 11,842.55 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. Pert 2 \$ -0only carry over the amounts from Lines 2, 7, and 9 (If Cash Equivalents and Outstanding Debts any). 18. Cash Equivalents...... See instructions on reverse 6,863.00 19. Outstanding Debts Add Line 2 + Line 9 in Column B above FPPC Form 460 (Jan/2016)) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

Schedule	cnedule A		nts may be rounded				SCHEDULE A		
Monetary	Monetary Contributions Received		whole dollars.	Statement covers period from 9/25/2022		california 460			
SEE INSTRUCTI	IONS ON REVERSE			through 10/22/20	022	Page	4 of 8		
NAME OF FILER						I.D. NU	MBER		
Committe	ee to Elect Teresa Todd for Hart School Board					145215	7		
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 CALENDA (JAN. 1 - D	RYEAR	PER ELECTION TO DATE (IF REQUIRED)		
9/25/22	Patti Rasmussen Santa Clarita, CA 91321	☑ IND □ COM □ OTH □ PTY □ SCC	Retired	500.00					
9/25/22`	Robert C. Lee Highland, UT 84003	☑ IND □ COM □ OTH □ PTY □ SCC	Retired	100.00					
9/25/22	Lona Seidenglanz Santa Clarita, CA 91387	☑ IND □ COM □ OTH □ PTY □ SCC	Retired	500.00					
9/25/22	Pauline Harte Santa Clarita, CA 91350	IND COM OTH PTY	Retired	300.00					
9/25/22	Marcus Hershey Santa Clarita, CA 91350	☑ IND □ COM □ OTH □ PTY □ SCC	Retired	100.00					
			SUBTOTAL	1,500.00					
Schedule	A Summary		•		(*0	Contributor Co	odes		
Amount re (Include al	ceived this period – itemized monetary contribution	15.	\$ <u>5,6</u>	50.00	co	(other t	ent Committee han PTY or SCC)		
2. Amount re	ceived this period – unitemized monetary contribut	ions of less than	\$100\$ <u>30</u>	9.00	PT	TY - Political	e.g., business entity) Party contributor Committee		
Total mone (Add Lines	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, C	Column A, Line 1	. <u>)</u> TOTAL \$ ^{5,9}	59.00	_	FPPC	Form 460 (Jan/2016))		

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 be rounded to whole dollars,

SCHEDULE A (CONT.)

CALIFORNIA 460

FORM

Statement covers period

from 9/25/2022

ee to Elect Teresa Todd for Hart School Board			through 10/22/20	022	I.D. NUM	MBER
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	CALENDAR Y	EAR	PER ELECTION TO DATE (IF REQUIRED)
Moira Hammel Santa Clarita, CA 91354	IND COM OTH PTY SCC	Retired	100.00			
Santa Clarita, CA 91390	□IND □COM ☑OTH □PTY □SCC		2,500.00			
Jason Gibbs Santa Clarita, CA 91350	IND COM OTH PTY SCC	Engineer GP Strategies Corp. 21301 Itasca St. Chateworth CA 91311	250.00			
Julie Benson-Krumrine Santa Clarita, CA 91321	Ø IND □ COM □ OTH □ PTY □ SCC	Self Employed Public Relations Consultant	200.00			
Nancy Fairbanks Valencia, CA 91381	IND COM	Homemaker	100.00			
	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Moira Hammel Santa Clarita, CA 91354 Santa Clarita Concrete Santa Clarita, CA 91390 Jason Gibbs Santa Clarita, CA 91350 Julie Benson-Krumrine Santa Clarita, CA 91321 Nancy Fairbanks	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Moira Hammel Santa Clarita, CA 91354 Santa Clarita, CA 91354 Santa Clarita Concrete Santa Clarita, CA 91390 Jason Gibbs Santa Clarita, CA 91350 Jason Gibbs Santa Clarita, CA 91350 Julie Benson-Krumrine Santa Clarita, CA 91321 Santa Clarita, CA 91381 Valencia, CA 91381	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Moira Hammel Santa Clarita, CA 91354 Santa Clarita Concrete Santa Clarita, CA 91390 Jason Gibbs Santa Clarita, CA 91350 Jason Gibbs Ja	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Moira Hammel Santa Clarita, CA 91354 Santa Clarita, CA 91350 Jason Gibbs Santa Clarita, CA 91350 Julie Benson-Krumrine Santa Clarita, CA 91321 Julie Benson-Krumrine Santa Clarita, CA 91381 PTY Santa Clarita, CA 91381 Julie Benson-Krumrine Santa Clarita, CA 91381 PTY Santa Clarita, CA 91381 Julie Benson-Krumrine Santa Clarita, CA 91381 Julie Benson-Krumrine Santa Clarita, CA 91381 Julie Benson-Krumrine Julie Ben	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (F COMMITTEE, ALBO ENTER I.D. NUMBER) Moira Hammel Santa Clarita, CA 91354 Santa Clarita, CA 91350 Jason Gibbs Santa Clarita, CA 91350 Julie Benson-Krumrine Santa Clarita, CA 91321 Julie Benson-Krumrine Santa Clarita, CA 91381 Julie Denson-Krumrine Santa Clarita, CA 91381 Julio Homemaker Valencia, CA 91381 Julio Com Coom Coom Coom Coom Coom Coom Coo	E DE Elect Teresa Todd for Hart School Board Identification Identific

*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

chedule A (Continuation Sheet)

Amounts may be rounded

SCHEDULE A (CONT.)

to whole dollars.	Statement covers period 9/25/2022	FORM 460
	through 10/22/2022	Page of8
		I.D. NUMBER 1452157
	to whole dollars.	from 9/25/2022

DATE	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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/7/22	Glenn Adamick Santa Clarita, CA 91355	IND COM OTH PTY SCC	President R.T. Real Estate Corp. 26917 Beverly Glen Ct. Sanita Clarita CA 91855	150.00		
10/7/22	Jeff Brown Santa Clarita, CA 91355	IND COM OTH PTY	CEO Learn4Life 26650 The Old Road Santa Clarita CA 91381	250.00		
10/8/22	Todd Stevens Santa Clarita, CA 91350	IND COM	Energy Executive Black Knight Energy 27200 Tourney Road, #275 Sente Clarite CA 91255	250.00		
10/11/22	Richard Sandes Santa Clarita, CA 91387	ZIND COM OTH PTY SCC	Retired	100.00		
10/21/22	Evan Faucette Santa Clarita, CA 91350	ZIND COM OTH PTY	CPA KKAJ 27200 Tourney Road #475 Santa Clarita CA 91355	250.00		
			SUBTOTAL	\$ 1.000.00		

Contributor Codes

VD - Individual

:OM - Recipient Committee (other than PTY or SCC)
TH - Other (e.g., business entity)

TY - Political Party

CC - Small Contributor Committee

	A	nounts may be ro					SCHE	DULE B - PART 1
Schedule B – Part 1 Loans Received	Ar		Statement cov from 9/25/2022	ers period	CALIFORM FORM	460 Ala		
SEE INSTRUCTIONS ON REVERSE					through 10/22/20	022	Page 7	of 8
NAME OF FILER							I.D. NUMBER	
Committee to Elect Teresa Todd for Hart S	chool Board 2022						1452157	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER LD. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT RECEIVED THIS PERIOD	AMOUNT PAID OR FORGIVEN THIS PERIOD	BALANCE AT	INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE
Teresa Todd Santa Clarita, CA 91321 † IND COM OTH PTY SCC	Self Employed Point of View Communications	8 6,500.00	363.00	\$ FORGIVEN	\$ 6,863.00	-O- RATE	\$_6,863.00 9/27/22 DATE INCURRED	\$ 6,863.00 PER ELECTION**
† IND COM OTH PTY SCC			*	\$ PAID \$ FORGIVEN	\$DATE DUE	RATE	8DATE INCURRED	REPORT SERVICE
†□IND □ COM □ OTH □ PTY □ SCC		\$	ŧ	\$ FORGIVEN	S	RATE \$	\$ DATE INCURRED	\$PER ELECTION**
	S	SUBTOTALS \$	363.00	-0-	\$ 6,863.00	\$ -0-		
Schedule B Summary 1. Loans received this period	44 84 5 84 49844 6 8 8 8 8 4 8 8 8 8 8 8 8 8 8 8 8 8	boadbearg884104006000000		363	.00	(Enter (e) on Scheo	dule E, Line 3)	
(Total Column (b) plus unitemized loar 2. Loans paid or forgiven this period (Total Column (c) plus loans under \$1(lnclude loans paid by a third party tha 3. Net change this period. (Subtract Lin Enter the net here and on the Summan	ns of less than \$100.) O paid or forgiven.) It are also itemized on Sche e 2 from Line 1.) ry Page, Column A, Line 2.	edule A.)		NET \$ 363	.00	00 00 00 00 00 00 00 00 00 00 00 00 00	Contributor Codes ND – Individual COM – Recipient C (other than NTH – Other (e.g., TY – Political Part CC – Small Contri	ommittee PTY or SCC) business entity)
*Amounts forgiven or paid by another party also m	rust be reported on Schedule A.							

** If required.

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

	Amounts was be sounded						SCHEDULE		
Schedule E Payments Made	Amounts may be rounded to whole dollars.				from 9/25/2022 through 10/22/2022		FORM 460		
SEE INSTRUCTIONS ON REVERSE							8 of 8		
NAME OF FILER						Page			
Committee to Elect Teresa Todd for Hart School Board 2022						14521	57		
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations CTB candidate filing/bailot fees FND fundralising events IND Independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member co MTG meetings an OFC office exper PET petition circ PHO phone bank POL polling and POS postage, de	mmunication appearance ases ulating as survey resea ultivery and m	s ces	R R SJ Ti Ti Ti V	radio airtime and productive returned contributions campaign workers' salaries t.v. or cable airtime and productive candidate travel, lodging, staff/spouse travel, lodging transfer between committed voter registration information technology co	on costs ss roduction cost and meals g, and meals ees of the san	ne candidate/sponsor		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIP	PTION OF PAYMENT		AMOUNT PAID		
Voter Newsletter Sherman Oaks, CA 91403		LIT					\$580.00		
The Signal Santa Clarita, CA 91355		PRT					\$795.00		
Families First Voter Guides Norwalk, CA 90650		LIT				•	1,249.60		
* Payments that are contributions or independent expenditures must also be	summarized on Sch	edule D.				SUBTOTAL	\$ 2,624.60		
Schedule E Summary									
1. Itemized payments made this period. (Include all Schedule	E subtotals.)	***********				\$ 2	,624.60		
2. Unitemized payments made this period of under \$100							65.38		
3. Total interest paid this period on loans. (Enter amount from							0-		
4. Total payments made this period. (Add Lines 1, 2, and 3. E									