Recipient	Committee
Campaign	Statement
Cover Pag	le

AMENDMENT

(A) 11/06/2023	COVER PA
RECEIVED BY ANGELES COUNTY	CALIFORNIA 460
	Done \ at (a

Cover Page	·	LOS ANGELES COUNTY FORM
	Statement covers period from 912512022	Date of election if applicable 2023 NOV -9 PH 12: 05 Page 1 of 9 For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through 10/22/2022	November 8, 2022 GAMPAIGH FIHANCE November 8, 2022 GAMPAIGH FIHANCE
1. Type of Recipient Committee: All Committees - Con	nplete Parts 1, 2, 3, and 4.	2. Type of Statement:
State Candidate Election Committee Recall (Also Complete Part 5)	rimarily Formed Ballot Measure ommittee Controlled Sponsored to Complete Part 6)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination) Amendment (Explain below) Quarterly Statement Special Odd-Year Report
Small Contributor Committee	rimarily Formed Candidate/ fficeholder Committee so Complete Part 7)	
3. Committee Information	NUMBER 1469	Treasurer(s)
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)	À	Marisol RamiceZ Malling Address
STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP COL CA 91	DE AREA CODE/PHONE 144 409 1994-8688	Pomona CA 91744 904/8/4-2930
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX		MAILING ADDRESS
CITY STATE ZIP CO	DE AREA CODE/PHONE	CITY STATE ZIP CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS	- Control of Control	OPTIONAL: FAX / E-MAIL ADDRESS
certify under penalty of perjury under the laws of the State of		knowledge the information contained herein and in the attached schedules is true and complete. 1
Executed on 11164 2023	Ву	er of Sponsor
Executed on	By	signature of Controlling Officeholder, Candidate, State Measure Proponent
Executed on	Ву	ignature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (Jan/2016))

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Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statement covers period from 9 25 202 2	CALIFORNIA 460				
through 10/22/2022	Page 3 of 6				
	I.D. NUMBER				

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

2027 4 water roard 1407489 **Calendar Year Summary for Candidates** Column A Column B **Contributions Received** TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE **General Elections** 1/1 through 6/30 7/1 to Date 2. Loans Received...... Schedule B, Line 3 20. Contributions 3. SUBTOTAL CASH CONTRIBUTIONS...... Add Lines 1 + 2 Received 21. Expenditures Made 5. TOTAL CONTRIBUTIONS RECEIVED......Add Lines 3 + 4 **Expenditures Made Expenditure Limit Summary for State** 6. Payments Made...... Schedule E, Line 4 **Candidates** 7. Loans Made...... Schedule H, Line 3 22. Cumulative Expenditures Made* 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 (If Subject to Voluntary Expenditure Limit) 9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 Date of Flection Total to Date (mm/dd/yy) **Current Cash Statement** 12. Beginning Cash Balance Previous Summary Page, Line 16 To calculate Column B. add amounts in Column 13. Cash Receipts Column A, Line 3 above A to the corresponding *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. of your last report. Some 15. Cash Payments Column A, Line 8 above amounts in Column A may be negative figures that 16. ENDING CASH BALANCEAdd Lines 12 + 13 + 14, then subtract Line 15 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 \$ __ 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)

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Schedule A Monetary Contributions Received		Amounts may be rounded to whole dollars.		Statement covers period from 91251 2022		CALIFORNIA 460	
SEE INSTRUCTIO	INS ON REVERSE .		1	through 10[22	12022	Page	4_ of _4_
NAME OF FILER	g 4 Water Boast 2022		Ĺ				_{ЈМВЕР}
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	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE T CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
412612022	Carlos Gatia Pomona, lA 91764	DMND COM OTH PTY SCC	Septor Groundsman Pomona Unifiet School District	314	314		
912912022	Sonta Monsia, (A 90405) Los Angeles League of Construction voles	DYIND COM OTH PTY SCC	Retiret	250	250		
161412022		☐IND ☐COM ☐OTH ☐PTY ☐SCC		500	500		
1011412022	Hiller Solis	DIND COM OTH PTY Scc	Supervisor, Frist Districti Los Angeles County	500	500		
16 22 2622	Demelle Soto	□MND □ COM □ OTH □ PTY □ SCC	Public Affirs Manager Suth Court ABMD	250	250		
			SUBTOTAL S	1,814			
Amount re (Include al	A Summary ceived this period – itemized monetary contributions. I Schedule A subtotals.) ceived this period – unitemized monetary contribution		1	•	IND COM OTH PTY	other Other – Politic	ual vient Committee than PTY or SCC) (e.g., business entity)

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Schedule I			
Miscellaneous	Increases	to	Cash

Amounts may be rounded to whole dollars.

Statement covers period CALIFORNIA 160

wiscellane	eous increases to Cash	miple do	, a	from 91251	2022	FORM 460	
SEE INSTRUCTION	NS ON REVERSE	(through 1017	27/2022	Page (of (
NAME OF FILER		.				I.D. NUMBER	
Coyt:	ia 4 Water Board 2022	_				1409489	
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER LD. NUMBER)	1	DES	CRIPTION OF RECE	EIPT	AMOUNT OF INCREASE TO CASH	
1013/2012	Nosa Gascia for City Council 2022 Pornora, CA 91766 Committee ID: 1407655		Reimbusement for portion of costs for pointing and distribution of shares campaign literature			1585.05	
\013 2022	Victor Preciado for City (chancil 2022 , Pomon, LA 91744 Committee ID; 140-3059		Reimburser costs for pr of smret	inting and	51211 pollion	1585,65	
1013/2022	Committee ID: 144 4008	1	Reimbursem for printing of Sharel			1585.05	
		<u>.</u>					
Attach additional information on appropriately labeled continuation sheets.			SUBTOTAL \$ 4,755.15				
Schedule I Summary 1. Itemized increases to cash this period			Ly are 1 C				
2. Unitemized	increases to cash of under \$100 this period			\$_	0		
3. Total of all interest received this period on loans made to others. (Schedule H, C		Column	ı (e).)	\$ _	0		
4 Total missa	ellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter Page, Line 14.)	or hore s	and on the		4,755.15	FPPC Form 460 (Jan/2016))	

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