|--|

¥		5123	1/23/23	NP
Recipient Committee Campaign Statement Cover Page		5.50	CALIFORM CALIFORM FOR	RM 400
SEE INSTRUCTIONS ON REVERSE	Statement covers period 07/01/2022 12/31/2022	Date of election if applicable: (Month, Day, Year) 2023 JAH	r ago	Official Use Only
, , , , , , , , , , , , , , , , , , , ,	through		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	10+
O State Candidate Election Committee O Recall (Also Complete Part 5)  ✓ General Purpose Committee O Sponsored O Small Contributor Committee	rimarily Formed Ballot Measure committee Controlled Sponsored Leo Complete Part 6) rimarily Formed Candidate/ officeholder Committee Leo Complete Part 7)	2. Type of Statement:  ☐ Preelection Statement ☐ Semi-annual Statement ☐ Termination Statement (Also file a Form 410 Termination) ☐ Amendment (Explain below)	☐ Quarterly Statem☐ Special Odd-Year	
	NUMBER 310937	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) SAN FERNANDO VALLEY REPUBLICAN CLUE	3	NAME OF TREASURER Doris Nova-Volper		
STREET ADDRESS (NO P.O. BOX)		CITY	STATE ZIP CODE	AREA CODE/PHONE
C/O Benning,  CITY STATE ZIP COD  Woodland Hills CA 91367  MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX		Sherman Oaks  NAME OF ASSISTANT TREASURER, IF ANY  MAILING ADDRESS	CA 91403	213-819-2309
CITY STATE ZIP COL	DE AREA CODE/PHONE	CITY	STATE ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRESS		
4. Verification  I have used all reasonable diligence in preparing and reviewin certify under penalty of perjury under the laws of the State of	g this statement and to the best of my k California that the foreg	cnowledge the information contained herein and in	the attached schedules is tru	ue and complete. I
Executed onDate	Ву	_		
Executed onDate	By Signature of Contro	Illing Officeholder, Candidate, State Measure Proponent or Respon	nsible Officer of Sponsor	
Executed onDate	BySi	gnature of Controlling Officeholder, Candidate, State Measure Pro	oponent	
Executed on	BySi	gnature of Controlling Officeholder, Candidate, State Measure Pro	ponent	

## Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period CALIFORNIA FORM 07/01/2022 from. 12/31/2022 Page \_\_\_ through\_

SEE INSTRUCTIONS ON REVERSE I.D. NUMBER 1310937 NAME OF FILER SAN FERNANDO VALLEY REPUBLICAN CLUB

Contributions Received	COlumn A TOTAL THIS PERIOD (FROM ATTACHED SCHEDU	LES)		COLUMN B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions       Schedule A, Line 3         2. Loans Received       Schedule B, Line 3         3. SUBTOTAL CASH CONTRIBUTIONS       Add Lines 1 + 2	\$ 717	.00	\$ _ - \$ _	948.00 0.00 948.00 0.00	1/1 through 6/30 7/1 to Date  20. Contributions Received \$ \$
4. Nonmonetary Contributions	717	.00 .00	\$ _	948.00	21. Expenditures Made \$\$
Expenditures Made  6. Payments Made	\$913	.24	\$	1572.76	Expenditure Limit Summary for State Candidates
8. SUBTOTAL CASH PAYMENTS	\$ 913		\$ _ -	1572.76 0.00 0.00	22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)  Date of Election Total to Date (mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$913	.24_	<b>\$</b> _	1572.76	<i>_</i> \$
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.	717 0 913	.00 .00 .24	add a A to f amou of yo amou be no shou previ	alculate Column B, amounts in Column the corresponding unts from Column B ur last report. Some unts in Column A may egative figures that ld be subtracted from ous period amounts. If is the first report being	*Amounts in this section may be different from amounts reported in Column B.
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$0	.00	filed only	for this calendar year, carry over the amounts	
Cash Equivalents and Outstanding Debts  18. Cash Equivalents See instructions on reverse  19. Outstanding Debts Add Line 2 + Line 9 in Column B above	v	.00	from any).	Lines 2, 7, and 9 (if	FPPC Form 460 (Jan/201 FPPC Advice: advice@fppc.ca.gov (866/275-37) www.fppc.ca.g

	Contributions Received	Amounts may be rounded to whole dollars.			Statement covers period 67/01/2022 67/01/2022 67/01/2022 67/01/2022 67/01/2022			CALIFORNIA 460 FORM  Page 3 of 4		
NAME OF FILER	NANDO VALLEY REPUBLICAN CLUB					1.D. NUI 13109	MBER			
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 ELEC TO DAT (IF REQUI	E		
12/06/2022	David Benning Woodland Hills, CA 91367	☑IND □COM □OTH □PTY □SCC	engineer Alkami Technology	250.00	250	.00				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC								
		OTH  PTY  SCC								
		☐IND ☐COM ☐OTH ☐PTY ☐SCC								
		COM OTH PTY		,						
			SUBTOTAL	\$				· ·		
Schedule A Summary  1. Amount received this period – itemized monetary contributions.  (Include all Schedule A subtotals.)\$					IND	*Contributor Codes IND – Individual COM – Recipient Committee (other than PTY or SCC)				
3. Total mone	ceived this period – unitemized monetary contribution etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Col			717.00	PTY	<ul><li>Other (</li><li>Political</li></ul>	e.g., business	entity)		

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

Schedule	E
<b>Payments</b>	Made

Amounts may be rounded to whole dollars.

SCHEDULE E Statement covers period CALIFORNIA FORM 07/01/2022 from. 12/31/2022 Page \_\_4 through. I.D. NUMBER 1310937

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

campaign literature and mailings

SAN FERNANDO VALLEY REPUBLICAN CLUB

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

CMP campaign paraphernalia/misc. RAD radio airtime and production costs MBR member communications 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 FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor

IND independent expenditure supporting/opposing others (explain)\* POS postage, delivery and messenger services LEG legal defense PRO professional services (legal, accounting)

PRT print ads

VOT voter registration

WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE C	DESCRIPTION OF PAYMENT		AMOUNT PAID
Constant Contact	N/ED	Online database and email service		200.00
Waltham, MA 02451	WEB			300.00
Meetup	W/EB	Online meeting announcements		205.80
New York, NY 10012	WEB			203.00
Susan Shelley	MTG	Speaker honorarium		200.00
Woodland Hills, CA 91367				
* Payments that are contributions or independent expenditures must also be summarized on Sche	edule D.	s	SUBTOTAL \$	705.80
Schedule E Summary				
Itemized payments made this period. (Include all Schedule E subtotals.)			\$	705.80
2. Unitemized payments made this period of under \$100				207.44
Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)				0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)				913.24