Recipient Committee **Campaign Statement Cover Page**

CITY

CITY

Executed on -

Date Stamp CALIFORNIA **FORM** ANGELES COUNTY Page _1 Date of election if applicable: (Month, Day, Year) 2022 Statement covers period For Official Use Only from 01/01/2022 CAMPAIGN FINANCE through 06/30/2022 SEE INSTRUCTIONS ON REVERSE 2. Type of Statement: 1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. ✓ Officeholder, Candidate Controlled Committee Preelection Statement ☐ Primarily Formed Ballot Measure Quarterly Statement Semi-annual Statement State Candidate Election Committee Special Odd-Year Report Committee Termination Statement Recall Controlled (Also file a Form 410 Termination) Sponsored (Also Complete Part 5) Amendment (Explain below) (Also Complete Part 6) General Purpose Committee Primarily Formed Candidate/ Sponsored Small Contributor Committee Officeholder Committee Political Party/Central Committee (Also Complete Part 7) I.D. NUMBER 3. Committee Information Treasurer(s) 1408888 COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) NAME OF TREASURER Daisha Orta Friends of Leonard Narumi for School Board 2018 MAILING ADDRESS STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE AREA CODE/PHONE Montebello CA 90640 STATE ZIP CODE AREA CODE/PHONE NAME OF ASSISTANT TREASURER, IF ANY CA 90040 323-801-6873 Commerce MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX MAILING ADDRESS CITY ZIP CODE AREA CODE/PHONE ZIP CODE AREA CODE/PHONE OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS daishs42580@gmail.com friendsofnarumi2018@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 the foregoing is true and Executed on 8-24-22 8-24-22 Executed on _

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (Jan/2016))

FPPC Advice: advice@fppc.ca.gov (866/275-3772)

COVER PAGE

Recipient Committee Campaign Statement Cover Page — Part 2

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CALIFORNI	⁴ 460				
FORM					
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Officeholder or Candidate Controlled Committee		6.	Primarily Formed Ballot Measure Committee						
NAME OF OFFICEHOLDER OR CANDIDATE				NAME OF BALLOT MEASURE					
Leonard M. Narumi									
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND	DISTRICT NUMB	ER IF APPLIC	ABLE)		BALLOT NO. OR LETTER	JURISDICTI	ION		SUPPORT
Montebello Unified School Board Member (M	ontebello 19-6	4808)		I -		-	OPPOSE		
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREE	T) CITY	STATE	ZIP						
	Montebel	lo CA	90640		Identify the controlling officeholder, candidate, or state measure proponent, if a			nent, if any.	
					NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT				
Related Committees Not Included in this	Statement	l iet anv cou	nmittage						
not included in this statement that are controlled by y	ou or are primai				OFFICE SOUGHT OR HELD		DIST	RICT NO. IF	ANY
contributions or make expenditures on behalf of your	candidacy.						- 1		
COMMITTEE NAME	I.D. NUM	BER							
NAME OF TREASURER	CONTRO	LLED COMM	ITTEEO	7.	Primarily Formed Cand	didate/Offic	eholder Comm	ittee List	names of
NAME OF TREASURER	□ YE				officeholder(s) or candidate(s,	for which this	committee is prima	rily formed.	
COMMITTEE ADDRESS STREET ADDRESS (NO		8 NC			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT	OR HELD	T
,									☐ SUPPORT☐ OPPOSE
CITY STATE	ZIP CODE	AREA CO	DE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT	OR HELD	☐ OPPOSE
					TO THE OF THE PERSON OF	O/MOID/IIL	OFFICE SOUGHT	OK HELD	SUPPORT
COMMITTEE NAME	I.D. NUM	RER	:::=						☐ OPPOSE
	I.D. Now	DEN.			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT
									OPPOSE
NAME OF TREASURER	CONTRO	LLED COMM	ITTEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT	OR HELD	
	☐ YE	s 🗌 NO							☐ SUPPORT ☐ OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO	P.O. BOX)								- OPPOSE
CITY STATE	ZIP CODE	AREA CO	DE/PHONE		Atta	ch continuati	on sheets if necess	sary	

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

Statement covers period	CALIFORNIA	160
from	FORM	400
		

SUMMARY PAGE

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Page _3 06/30/2022 through SEE INSTRUCTIONS ON REVERSE I.D. NUMBER NAME OF FILER Friends of Leonard Narumi for School Board 2018 1408888 Calendar Year Summary for Candidates Column A Column B **Contributions Received** TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) CALENDAR YEAR TOTAL TO DATE Running in Both the State Primary and General Elections 1/1 through 6/30 7/1 to Date 0 20. Contributions Received 21. Expenditures Made 0 5. TOTAL CONTRIBUTIONS RECEIVED......Add Lines 3 + 4 **Expenditures Made Expenditure Limit Summary for State** 16,658.76 Candidates 0 7. Loans Made...... Schedule H. Line 3 22. Cumulative Expenditures Made* 16,658.76 0 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ (If Subject to Voluntary Expenditure Limit) 0 Date of Election Total to Date 0 (mm/dd/yy) 16,658.76 **Current Cash Statement** 16,658.76 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 0 *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 16,658.76 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 \$ $\frac{0}{2}$ only carry over the amounts from Lines 2, 7, and 9 (if **Cash Equivalents and Outstanding Debts** anv). 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)

chedule E ayments Made Amounts may be rounded to whole dollars.			Statement covers period from 01/01/2022		FORNIA 460	
NAME OF FILER Friends of Leonard Narumi for School Board 2018					1.D. NUI 14088	
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member con MTG meetings an OFC office expen PET petition circt PHO phone banks POL polling and s POS postage, del	nmunications d appearance ses ulating s survey researc livery and mes	s	wise, describe the payment. RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and prod TRC candidate travel, lodging, an TRS staff/spouse travel, lodging, TSF transfer between committee: VOT voter registration WEB information technology costs	duction costs nd meals and meals as of the sam	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	DR DESC	CRIPTION OF PAYMENT		AMOUNT PAID
Friends of MUSD Foundation Montebello, CA 90640		CVC	Donation to non-p	profit organization		6,817.52
Rotary Club of Montebello Montebello, CA 90640		CVC	Donation to non-p	rofit organization		3,408.76
Montebello Womans Club Montebello, CA 90640		cvc	Donation to non-p	profit organization		3,408.75
* Payments that are contributions or independent expenditures must also to	be summarized on Scho	edule D.		SU	JBTOTAL :	\$ 16,635.03
Schedule E Summary						
1. Itemized payments made this period. (Include all Schedu	le E subtotals.)				\$	16,635.03

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