Recipient Committee Campaign Statement Cover Page			Date Stamp	CALIFORNIA 460
	Statement covers period from 10-23-27	Date of election if applicable: (Month, Day, Year)	2023 JAN -5 PM-2: 1	Page of
SEE INSTRUCTIONS ON REVERSE	through 12-31-22	11-8-22	CAMPAIGN FINANC	E
1. Type of Recipient Committee: All Committees - Con	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:		
State Candidate Election Committee Recall (Also Complete Part 5)	Primarily Formed Ballot Measure Committee Controlled Copyright Sponsored Also Camplely Part 6)	Preelection Statement Semi-annual Statement Termination Statemen (Also file a Form 410 Amendment (Explain	nt Spec t Termination)	terly Statement ial Odd-Year Report
General Purpose Committee Sponsored Small Contributor Committee	Primarily Formed Candidate/ Officeholder Committee Also Complete Part 7)			
3. Committee Information	D. NUMBER 891814	Treasurer(s)		
Mountain View Teachers Ass	. :	NAME OF TREASURER LAWFA Gaber MAILING ADDRESS	_	
STREET ADDRESS (NO P.O. BOX)		Whittier	STATE ZIP CO	
Whitter CA 906  MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO	04 562-822-8400	NAME OF ASSISTANT TREASU	RER, IF ANY	· · · · · · · · · · · · · · · · · · ·
CITY STATE ZIP CO	ODE AREA CODE/PHONE	CITY	STATE ZIP C	ODE AREA CODE/PHONE
OPTIONAL: FAX/E-MAIL ADDRESS Lgabernvta	@ gmmil.com	OPTIONAL: FAX / E-MAIL ADD	ress Lgabermute	a @gmail.com
4. Verification I have used all reasonable diligence in preparing and review certify under penalty of perjury under the laws of the State of Executed on 12/31/2022  Executed on Date  Executed on Date	For the foregoin  By  By  Signature of Contact  Positions   Position   Positi	knowledge the information contains rolling Officeholder, Cendidate, State Measure	rer Proponent or Responsible Officer of Spon	· .
Executed on	Ву	Signature of Controlling Officeholder, Candidat		FPPC Form 460 (Jan/2016)) vice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

COVER PAGE

## Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

Statement covers period from 10-23-2022 CALIFORNIA 460

SEE INSTRUCTIONS ON REVERSE		through_	12-31-2022	Page of3
NAME OF FILER Mountain View Teachers Associ	ation PAC		3	1.D. NUMBER 891814
Contributions Received  Contributions Received  Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDL		COLUMN B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and	
1. Monetary Contributions Schedule A, Line 3 2. Loans Received Schedule B, Line 3 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 4. Nonmonetary Contributions Schedule C, Line 3 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	<del></del>	\$ 5,200 \$ 5,200 \$ 5,200	20. Contributions Received \$  21. Expenditures Made \$	nrough 6/30 7/1 to Date
Expenditures Made  6. Payments Made	<del>0</del>	\$\frac{12,220.38}{\Omega}\$ \$\frac{12,220.38}{\Omega}\$ \$\frac{\Omega}{\Omega}\$ \$\frac{12,220.38}{\Omega}\$	•	Summary for State  ve Expenditures Made* voluntary Expenditure Limit)  Total to Date
Current Cash Statement  12. Beginning Cash Balance	\$ 10,627.56 <del>0</del> 822.47 \$ 9,805.09	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	*Amounts in this section may be different from amounts reported in Column B.	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	filed for this calendar year, only carry over the amounts		
Cash Equivalents and Outstanding Debts  18. Cash Equivalents	s <del>0</del> s <del>0</del>	from Lines 2, 7, and 9 (if any).	FPPC Advice: ad	FPPC Form 460 (Jan/2016) vice@fppc.ca.gov (866/275-3772 www.fppc.ca.go

Schedule E '	Amounts may be rounded to whole dollars.		Statement covers period from (0-23-2022	CALIFORNIA 460			
see instructions on reverse NAME OF FILER Mountain View Tea	achers Assoc	iation PAC	through 12-31-2022	Page 3 of 3  I.D. NUMBER  891814			
CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.  CMP campaign paraphemalia/misc.  CMS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  CTC civic donations  CTD candidate filing/ballot fees  FIL candidate filing/ballot fees  FIND fundraising events  IND independent expenditure supporting/opposing others (explain)*  IND LEG legal defense  LEG legal defense  LIT campaign literature and mailings  MBR member communications  MBR member communications  meetings and appearances  OFC office expenses  petition circulating  phone banks  petition circulating  phone banks  polling and survey research  postage, delivery and appearances  returned contributions  campaign workers' salaries  t.v. or cable airtime and production costs  t.v. or cable airtime and production costs  candidate travel, lodging, and meals  TRS  staff/spouse travel, lodging, and meals  TRS  votar registration  information technology costs (internet, e-mail)							
NAME AND ADDRESS OF PA (IF COMMITTEE, ALSO ENTER I.D. NU		CODE OR DES	CRIPTION OF PAYMENT	AMOUNT PAID			
Silvia Chandler Bra, CA 92821		Coffee a	cks 120-				
Leticia Urias Claremont, CA 91711 Laura Gabes		Starbnek raffler.	s gift cards for Our walking of postcar	ing 100-			
Laure Gabes Whittier CA 90604		Rips Pizza Food for events	post card writin	33720			
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.  * SUBTOTAL \$							
Schedule E Summary  1. Itemized payments made this period. (Include 2. Unitemized payments made this period of und 3. Total interest paid this period on loans. (Enter 4. Total payments made this period. (Add Lines	er \$100amount from Schedule B. Pari	1. Column (e).)		\$ <u></u>			
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)							