Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Statement covers period from19/18/2929	RECEIVED BY ANGEL ES COUNTY	COVER PAGE ALIFORNIA 460 FORM ge _1
SEE INSTRUCTIONS ON REVERSE	through12/31/2020	11/03/2020 ZAMPAIGN FINANCE	118466
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 Uso Complete Part 6) rimarily Formed Candidate/ officeholder Committee Uso Complete Part 7)	2. Type of Statement: Preelection Statement Quarterly S Semi-annual Statement Special Oct Termination Statement Supplement	Statement Id-Year Report Idal Preelection - Attach Form 495
3. Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Cecilia Perez for School Board 2920 STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP COMMITTEE Whittier CA 9060 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. B	1 (323)893-8007	Treasurer(s) NAME OF TREASURER Sarah Daniels MAILING ADDRESS CITY STATE ZIP CODE Ontario CA 91761 NAME OF ASSISTANT TREASURER, IF ANY MAILING ADDRESS	AREA CODE/PHONE (909)680-0294
OPTIONAL: FAX / E-MAIL ADDRESS cecilia6223@yahoo.com	DE AREA CODE/PHONE	OPTIONAL: FAX / E-MAIL ADDRESS	AREA CODE/PHONE
4. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California Executed on			e and complete. I certify
Executed on	Ву	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) www.fppc.ca.gov

Recipient Committee Campaign Statement Cover Page — Part 2

CALIFORNIA FORM 460

Page 2 of 15

NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE				
Cecilia Perez							
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIS	STRICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTI	ON		SUPPORT
Board of Education Whittier City School	District 2						OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)		IP 601	Identify the controlling of	fficeholder, ca	ndidate, or s	tate measure p	proponent, if an
	Whittier CA 9	601	NAME OF OFFICEHOLDER, CA	ANDIDATE, OR PI	ROPONENT		
Related Committees Not Included in this not included in this statement that are controlled by contributions or make expenditures on behalf of you	you or are primarily formed to re		OFFICE SOUGHT OR HELD	-		DISTRICT NO. I	F ANY
COMMITTEE NAME	I.D. NUMBER						
COMMITTEE NAME	I.D. NUMBER	7	Primarily Formed Car	ndidate/Offi	cebolder C	ommittee //	of names of
	I.D. NUMBER CONTROLLED COMMITTEE?	7.	Primarily Formed Car				
		7.	officeholder(s) or candidate	(s) for which th	is committee i	s primarily form	
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO F	CONTROLLED COMMITTEE?	7. 		(s) for which th	is committee i		
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO F	CONTROLLED COMMITTEE?	_	officeholder(s) or candidate	(s) for which the	OFFICE SOL	s primarily form	ed.
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO F	CONTROLLED COMMITTEE? YES NO P.O. BOX)	_	NAME OF OFFICEHOLDER OR	(s) for which the CANDIDATE	OFFICE SOL	s primarily form	SUPPORT OPPOSE SUPPORT OPPOSE
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO F	CONTROLLED COMMITTEE? YES NO O.O. BOX) ZIP CODE AREA CODE/PI	_	NAME OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE	OFFICE SOL	S primarily form JGHT OR HELD JGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT

Campaign Disclosure Statement Summary Page

Cecilia Perez for School Board 2020

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SUMMARY PAGE

| Statement covers period | CALIFORNIA | 460 | FORM | 10/18/2020 | Page 3 of 15 | I.D. NUMBER | 1427882

Contributions Received	(Column A TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)		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	\$	5,250.00	\$	21,104.00	1/1 through 6/30 7/1 to Date
2. Loans Received Schedule B, Line 3		-1,500.00		0.00	
SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	3,750.00	\$	21,104.00	20. Contributions Received \$ \$
4. Nonmonetary Contributions Schedule C, Line 3		0.00		0.00	21. Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	3,750.00	\$	21,104.00	Made \$ \$
Expenditures Made					Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$	7,002.51	\$	15,650.64	Candidates
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	7,002.51	\$	15,650.64	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3		-500.00		0.00	Date of Election Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3		0.00		0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$	6,502.51	\$	15,650.64	\$
Current Cash Statement			Г		\$
2. Beginning Cash Balance Previous Summary Page, Line 16	\$	8,705.87	То	calculate Column B, add	
13. Cash Receipts Column A, Line 3 above		3,750.00		ounts in Column A to the responding amounts	
14. Miscellaneous Increases to Cash Schedule I, Line 4		900.00	from	m Column B of your last	*Amounts in this section may be different from amounts reported in Column B.
15. Cash Payments		7,002.51		ort. Some amounts in umn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	6,353.36	figu	res that should be stracted from previous	
If this is a termination statement, Line 16 must be zero.			per	iod amounts. If this is first report being filed	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for car	this calendar year, only ry over the amounts	·
Cash Equivalents and Outstanding Debts			from any	n Lines 2, 7, and 9 (if	
18. Cash Equivalents					
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	0.00			FPPC Form 460 (Jan)
			-		- FPPC Form 460 (Jan/

Schedule	A	
Monetary	Contributions	Received

3. Total monetary contributions received this period.

Amounts may be rounded to whole dollars.

SCHEDULE A

CALIFORNIA

FORM

Statement covers period

10/18/2020

50.00

5,250.00

SEE INSTRUCTION	ONS ON REVERSE			through12/31/2	D20 Page	4	of15
NAME OF FILER	ez for School Board 2020				I.D. N 142	UMBER 1882	
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 TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	T	ELECTION TO DATE REQUIRED)
10/24/2020	District Council of Iron Workers Political Action League (ID# 831693) Pinole, CA 94564	□IND □COM □OTH □PTY □SCC		500.00	500.00	G2020	\$500.00
11/03/2020	DRIVE Committee (ID# C00032979) Washington, DC 20001	□IND ☑COM □OTH □PTY □SCC		1,000.00	1,000.00	G2020	\$1,000.00
11/06/2020	IUPAT Political Action Together Legislative Education Committee (ID# 1242103) Hanover, MD 21076	□IND IS COM □OTH □PTY □SCC		500.00	500.00	G2020	\$500.00
10/25/2020	Angie Medina Whittier, CA 90606	☑IND □COM □OTH □PTY □SCC	Retired N/A	100.00	100.00	G2020	\$100.00
0/23/2020	Sheet Metal, Air, Rail, Transportation Workers Local Union 105 Political Education Fund (ID# 962809) Glendora, CA 91740-6720	□IND ⊠COM □OTH □PTY □SCC		500.00	500.00	G2020	\$500.00
			SUBTOTAL	2,600.00			V11 A
1. Amount re	A Summary eceived this period – itemized monetary contributions. Il Schedule A subtotals.)		\$	5,200.00	*Contributor IND – Individ COM – Recip	ual	72-3-11224

2. Amount received this period – unitemized monetary contributions of less than \$100\$

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

(other than PTY or SCC)
OTH – Other (e.g., business entity)

SCC - Small Contributor Committee

PTY - Political Party

www.fppc.ca.gov

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

10/18/2020

NAME OF FILER Cecilia Perez for School Board 2020							Page 5 of 15 I.D. NUMBER 1427882		
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 TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	1	ELECTION TO DATE REQUIRED)		
11/04/2020	Southern CA District Council of Laborers PAC (ID# 1358150) Long Beach, CA 90802	☐IND ☐COM ☐OTH ☐PTY ☑SCC		2,500.00	2,500.0	0 G2020	\$2,500.00		
10/24/2020	Polly Vigil Whittier, CA 90601-3254	COM	Board Member Whittier City School District	100.00	100.0	0 G2020	\$100.00		
	*	□IND □COM □OTH □PTY □SCC)					
		□IND □COM □OTH □PTY □SCC							
		□IND □COM □OTH □PTY □SCC							

*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

SCH	EOI	11	-	2	DA	DT.	•
SUL	ヒいし	JL		5 - 1	M	KI.	

Amounts may be rounded

State	ment covers period	CALIFORNIA	460
rom	10/18/2020	FORM	400
		The same of the sa	

Loans Received	to whole dollars.				from10/18	3/2020	FORM	700
SEE INSTRUCTIONS ON REVERSE					through12/3:	1/2020	Page6	of15
NAME OF FILER Cecilia Perez for School Board 2020							1.D. NUMBER	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD		(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Cecilia Perez Whittier, CA 90601	Homemaker N/A	\$500.00	\$0.00	■ PAID \$	\$0_00	000% RATE	\$500_00 07/06/2020 DATE INCURRED	CALENDAR YEAR \$O_OO PER ELECTION** \$ G2020 0.00
Cecilia Perez Whittier, CA 90601 To IND COM OTH PTY SCC	Homemaker N/A	\$_1,000.00	\$0.00	■ PAID \$ 1,000.00 □ FORGIVEN \$ 0.00	\$0_00		\$ 1,000 00 08/01/2020 DATE INCURRED	\$0_00 PER ELECTION *
† IND COM OTH PTY SCC		\$	5	PAID S FORGIVEN \$	\$DATE DUE	%	\$DATE INCURRED	CALENDAR YEAR \$ PER ELECTION*
		SUBTOTALS S	0.00	\$ 1,500.00	0.00	\$ 0.00 (Enter (e) on		
Schedule B Summary						Schedule E, Line 3)		
Loans received this period (Total Column (b) plus unitemized loan	ns of less than \$100.)			\$	0.00	(to	Contributor Codes	S

2. Loans paid or forgiven this period\$ _____\$ (Total Column (c) plus loans under \$100 paid or forgiven.) (Include loans paid by a third party that are also itemized on Schedule A.)

COM - Recipient Committee

(other than PTY or SCC)

OTH - Other (e.g., business entity) PTY - Political Party

-1,500.00 (May be a negative number)

SCC - Small Contributor Committee

*Amounts forgiven or paid by another party also must be reported on Schedule A. ** If required.

Enter the net here and on the Summary Page, Column A, Line 2.

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

Schedule E
Payments Made

		SCHEDULE
Stateme	ent covers period	CALIFORNIA 160
from	10/18/2020	FORM 400
through _	12/31/2020	Page7 of15
		I.D. NUMBER
		1427882

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Cecilia Perez for School Board 2020

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

RAD radio airtime and production costs campaign paraphernalia/misc. MBR member communications campaign consultants RFD returned contributions MTG meetings and appearances contribution (explain nonmonetary)* SAL campaign workers' salaries office expenses CVC civic donations petition circulating t.v. or cable airtime and production costs candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals fundraising events polling and survey research staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services transfer between committees of the same candidate/sponsor legal defense professional services (legal, accounting) voter registration campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYER CODE AMOUNT PAID DESCRIPTION OF PAYMENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Signs and frames AMAC LLC CMP 684.92 Torrance, CA 90505 Sarah Daniels Reimbursement for Netfile reporting system payment 250.00 Ontario, CA 91761 Sarah Daniels PRO Campaign reporting services 250.00 ntario, CA 91761

* Payments that are contributions or Independent expenditures must also be summarized on Schedule D. SUBTOTAL\$ 1,184.92

Schedule E Summary

Schedule E

Ontario, CA 91761

Cecilia Perez

SCHEDULE E (CONT.)

Continuation Sheet) ayments Made	Amounts may be rounded to whole dollars.	Statement covers period from 10/18/2020	CALIFORNIA 460
E INSTRUCTIONS ON REVERSE		through 12/31/2020	Page 8 of 15
ME OF FILER			I.D. NUMBER
cilia Perez for School Board 2020			1427882

Ce CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs RFD returned contributions CNS campaign consultants MTG meetings and appearances contribution (explain nonmonetary)* office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating t.v. or cable airtime and production costs candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals staff/spouse travel, lodging, and meals fundraising events polling and survey research independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services transfer between committees of the same candidate/sponsor legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail) NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) 200.00 Sarah Daniels PRO Bookkeeping and treasurer services Ontario, CA 91761 Sarah Daniels PRO Bookkeeping and treasurer services 50.00

MailChimp WEB Emails 51.99 Atlanta, GA 30308

Whittier, CA 90601

Reimbursement for ballot statement fee

Press Print Inc. LIT Mailer & Postage 1,809.82 Banning, CA 92220

SUBTOTAL \$

2,711.81

600.00

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

| CALIFORNIA | 460 | FORM | 10/18/2020 | Through | 12/31/2020 | Page | 9 | of | 15 | 1.D. NUMBER | 1427882

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Cecilia Perez for School Board 2020

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

CMP campaign paraphernalia/misc.

CNS campaign consultants

CNS campaign consultants

CTB contribution (explain nonmonetary)*

CVC civic donations

MBR member communications

meetings and appearances

MFD radio airtime and production costs

meetings and appearances

OFC office expenses

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

candidate filing/ballot fees

PHO phone banks

TRC candidate travel, lodging, and meals

polling and survey research

TRS staff/spouse travel, lodging, and meals

ND fundraising events
POL polling and survey research
TRS staff/spouse travel, lodging, and meals

LEG legal defense PRO professional services (legal, accounting) VOT voter registration
LIT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Ana Rodriguez	SAL	Telebanking and texting	150.00
Whittier, CA 90602			
		·	
Mary Carmen Rodriguez	SAL	Telebanking and texting	225.00
Whittier, CA 90602			
Mary Carmen Rodriguez	SAL	Walker and phone banking	179.00
Whittier, CA 90602			
Secretary of State	FIL	2021 yearly fee	50.00
Sacramento, CA 95814			
Squarespace Inc.	WEB		32.00
Palm Dessert, CA 92260			
* Payments that are contributions or independent expanditures must also be su			OTAL \$ 636.00

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

| SCHEDULE E (CONT.)
| Statement covers period | CALIFORNIA | FORM | 460 |
| through | 12/31/2020 | Page | 10 | of | 15 |
| LD, NUMBER

VOT voter registration

1427882

SEE INSTRUCTIONS ON REVERSE

legal defense

NAME OF FILER

Cecilia Perez for School Board 2020

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

PRO

CMP campaign paraphernalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)*

MBR member communications

MTG meetings and appearances

MTG meetings and appearances

OFC office expenses

RAD radio airtime and production costs

RFD returned contributions

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

fundralising events POL polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor

professional services (legal, accounting)

LIT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) 103.23 UpWard Solutions Reimbursement for Facebook ads Los Angeles, CA 90017 UpWard Solutions CNS Campaign Consulting Services 2,000.00 Los Angeles, CA 90017 POS 7.75 US Postal Postage Banning, CA 92220

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

2,110.98

Schedule F		
Accrued Expenses	(Unpaid	Bills)

Statement covers period **CALIFORNIA FORM** 10/18/2020 through 12/31/2020 Page 11 of 15 I.D. NUMBER

1427882

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Cecilia Perez for School Board 2020

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

member communications radio airtime and production costs campaign paraphernalia/misc. campaign consultants meetings and appearances returned contributions contribution (explain nonmonetary)* office expenses SAL campaign workers' salaries

petition circulating t.v. or cable airtime and production costs civic donations PET FIL candidate filing/ballot fees phone banks candidate travel, lodging, and meals

fundraising events polling and survey research staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF

professional services (legal, accounting) voter registration legal defense VOT

campaign literature and mailings PRT print ads

information technology costs (internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Netfile Mariposa, CA 95338	WEB Campaign reporting system	250.00	-250.00	0,00	0.0
Sarah Daniels Ontario, CA 91761	PRO Campaign reporting services	250.00	0.00	250.00	0.0
Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	500.00	-250.00\$	250.00\$	0.00

Schedule F Summary

- 1. Total accrued expenses incurred this period. (Include all Schedule F. Column (b) subtotals for -250.00
- 2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on 250.00
- 3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)

 NET \$ __500.00

 May be a negative number

Schedule G	
Payments N	Made by an Agent or Independent
Contractor	(on Behalf of This Committee)

			SCHEDULE G
Statement covers period		ment covers period	CALIFORNIA AGO
	from	10/18/2020	FORM 400
through	12/31/2020	Page 12 of 15	
_			I.D. NUMBER
			1427882

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Cecilia Perez for School Board 2020

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Sarah Daniels

COI	DES: If one of the following codes accurately	describes the payment, you may enter t	he code. Otherwise, describe the payment.
CMP	campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNIC	commoian consultants	MTC mastings and appearances	DED returned contributions

CNS campaign consultants

MTG meetings and appearances

OFC office expenses

OFC office expenses

VC civic donations

PET petition circulating

PHO phone banks

RFD returned contributions

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals

ND fundraising events POL polling survey research TRS staff/spouse travel, lodging, and meals staff/spouse travel, lodging, and meals postage, delivery and messenger services TSF postage, delivery and messenger services TSF postage, delivery and messenger services TSF postage, delivery and messenger services postage, delivery and messenger services postage.

LEG legal defense PRO professional services (legal, accounting) VOT voter registration UT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Netfile	WEB	Campaign reporting system	250.0
Mariposa, CA 95338			
			,

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

250.00

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule (3
Payments	Made by an Agent or Independent
Contracto	r (on Behalf of This Committee)

		SCHEDULE G
Statement covers period		CALIFORNIA 160
from	10/18/2020	FORM 400
through_	through 12/31/2020	Page 13 of 15
		I.D. NUMBER
		1427882

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Cecilia Perez for School Board 2020

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Press Print Inc.

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

CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs MTG meetings and appearances campaign consultants RFD returned contributions contribution (explain nonmonetary)* CTB OFC office expenses SAL campaign workers' salaries civic donations PET petition circulating TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals candidate filing/ballot fees PHO phone banks staff/spouse travel, lodging, and meals fundraising events POL polling and survey research independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor

EG legal defense PRO professional services (legal, accounting) VOT voter registration

PRT print ads

WEB information technology costs (internet, e-mail)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT		AMOUNT PAID
US Postal	POS	Postage			1,130.9
Banning, CA 92220					No. of the contract of the con
				An order Administra	

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

1,130.92

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G	
Payments N	lade by an Agent or Independent
Contractor	on Behalf of This Committee)

Statement covers period		CALIFORNIA	400
from	10/18/2020	FORM 4	460
through 12/	12/31/2020	Page 14 of	15
		I.D. NUMBER	

1427882

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Cecilia Perez for School Board 2020

NAME OF AGENT OR INDEPENDENT CONTRACTOR

UpWard Solutions

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

CMP	campaign paraphernalia/misc.	MRK	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
VC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Facebook	WEB	Facebook ads	103.2
Menlo Park, CA 94025			
•			

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

103.23

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule	The Control of the Co			SCHEDULE
Miscellaneous Increases to Cash		Amounts may be rounded to whole dollars.	Statement covers period from 10/18/2020	CALIFORNIA 460
			through 12/31/2020	Page 15 of 15
NAME OF FILER	NS ON REVERSE	CHAMBINGS .		I.D. NUMBER
Conilia Pere	ez for School Board 2020			1427882
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DE	ESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
11/17/2020	UpWard Solutions	Reimbursement f	or erroneous Facebook charge	900.00
	Los Angeles, CA 90017			
				10.000
Attach add	\$ 900.00			
Schedule	I Summary			
1. Itemized	<u>)</u>			
2. Unitemize	<u>0</u>			
3. Total of a	ll interest received this period on loans made to others. (Sc	hedule H, Column (e).)	\$\$	2
	cellaneous increases to cash this period. (Add Lines 1, 2, a Page, Line 14.)		TOTAL \$ 900.00	