Recipient Committee Campaign Statement

Recipient Committee Campaign Statement Cover Page			LOS ANGELE	ED CALI	ornia 460
	Statement covers period from July 1, 2021	Date of election if applicable: (Month, Day, Year)	2022 JAN 24 CAMPAIGN F	PM 2:52F	of 5
SEE INSTRUCTIONS ON REVERSE	through December 31, 2021		244	MANUE	
1. Type of Recipient Committee: All Committees -	Complete Parts 1, 2, 3, and 4.	2. Type of Statement:			
Officeholder, Candidate Controlled Committee State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Ten Amendment (Explain bel		Quarterly State Special Odd-Yo	
3. Committee Information	I.D. NUMBER 782214	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTE		NAME OF TREASURER			
El Camino College Federation of Teachers C Education	ommittee on Political	John Baranski Mailing Address			
STREET ADDRESS (NO P.O. BOX)		CITY	STATE	ZIP CODE	AREA CODE/PHONE
		Gardena	CA	90249	3017100829
	CODE AREA CODE/PHONE	NAME OF ASSISTANT TREASURE	R, IFANY		
Torrance CA 9 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.	0506 3106603593 BOX	MAILING ADDRESS	, , , , , , , , , , , , , , , , , , ,	-	
CITY STATE ZIF	CODE AREA CODE/PHONE	СІТУ	STATE	ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX/E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRES	SS		
s. Verification					
I have used all reasonable diligence in preparing and revi certify under penalty of perjury under the laws of the State	The state of the s	knowledge the information contained h	namin and in the attach	ed echadules is	true and complete. I
	of California that the foregoing is the t				
Executed on 1/20/22	Ву			-	
Executed on	BySignature of Cont	rolling Officeholder, Candidate, State Measure Prop	ponent or Responsible Officer of	of Sponsor	
Executed on	Ву	Signature of Controlling Officeholder, Candidate, St	ate Measure Proponent		
Executed on	Ву	Signature of Controlling Officeholder, Candidate, St	ate Measure Proponent		

FPPC Form 460 (Jan/2016))

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

www.fppc.ca.gov

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

SUMMARY PAGE

	Statement covers period from July 1, 2021	FORM 460		
	through December 31, 2021	Page 2 of 5		
_		I.D. NUMBER		
		782214		

NAME OF FILER El Camino College Federation of Teachers Committee on Political Education Column A Column B **Calendar Year Summary for Candidates** Contributions Received TOTAL THIS PERIOD
(FROM ATTACHED SCHEDULES) Running in Both the State Primary and TOTAL TO DATE **General Elections** 5764 10682 1/1 through 6/30 7/1 to Date 0 0 20. Contributions 5764 10682 SUBTOTAL CASH CONTRIBUTIONS...... Add Lines 1 + 2 \$ Received 0 Nonmonetary Contributions..... Schedule C, Line 3 21. Expenditures 5764 Made 10682 TOTAL CONTRIBUTIONS RECEIVED..... **Expenditures Made Expenditure Limit Summary for State** 223.63 229.68 6. Payments Made...... Schedule E. Line 4 Candidates 0 0 7. Loans Made Schedule H. Line 3 22. Cumulative Expenditures Made* 223.63 229.68 SUBTOTAL CASH PAYMENTS...... Add Lines 6 + 7 (If Subject to Voluntary Expenditure Limit) 0 0 Date of Election Total to Date 0 0 (mm/dd/yy) 10. Nonmonetary AdjustmentSchedule C. Line 3 223.63 229.68 **Current Cash Statement** 41566.56 12. Beginning Cash Balance Previous Summary Page, Line 16 To calculate Column B. 5764.00 add amounts in Column A to the corresponding *Amounts in this section may be different from amounts 0 amounts from Column B reported in Column B. 223.63 of your last report. Some 15. Cash Payments Column A, Line 8 above amounts in Column A may 47106.93 be negative figures that 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...... Schedula B. Part 2 \$ 0 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) www.fppc.ca.gov

Schedule A		Amounts may be rounded		SCHEDULE A				
Monetary Contributions Received SEE INSTRUCTIONS ON REVERSE		to	whole dollars.	Statement confrom 7/1/2021	CALIFORNIA 460			
			thros		through 12/31/2021		3 of 5	
NAME OF FILER						I.D. NUI	MBER	
	College Federation of Teachers Committee on Politic	al Education						
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 CALENDAR (JAN. 1 - DE	YEAR	PER ELECTI TO DATE (IF REQUIRE	
Phromp	PLEASE SEE ATTACHED EXCEL SHEET WITH INDIVIDUAL CONTRIBUTORS WHO CONTRIBUTE THE SAME AMOUNT EVERY MONTH.	□IND □COM □OTH □PTY □SCC						
		OTH PTY						
		OTH PTY SCC						
		□IND □COM □OTH □PTY □SCC						
		OTH PTY SCC						
			SUBTOTAL	\$				
Schedule	A Summary				(*Ca	ontributor C	odes	
1. Amount re	eceived this period – itemized monetary contributions		\$	370	INC	D – Individua M – Recipio		C)
2. Amount re	eceived this period – unitemized monetary contributio	ns of less than	\$100\$ <u>1</u>	394	PT	H – Other (Y – Politica	e.g., business e	ntity)
3. Total mone (Add Lines	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Co	lumn A, Line 1	.)TOTAL \$ 5	764.00		FPP	C Form 460 (Jan	/2016)

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Schedule C Nonmonetary Contributions Received

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

12/31/2021

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)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
		□IND □COM □OTH □PTY □SCC					
		OTH PTY SCC					
		□IND □COM □OTH □PTY □SCC					
		OTH PTY SCC					
Attach addit	tional information on appropriately labele	ed continuation	sheets.	SUBTOTAL S	3		
Schedule C Summary 1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.)						*Contributor Codes IND – Individual COM – Recipient Committee (other than PTY or SCC) OTH – Other (e.g., business entity)	
	eceived this period – unitemized nonmor monetary contributions received this peri		ions of less than \$100		n	PTY - Political	

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Schedule E Payments Made

Amounts may be rounded to whole dollars.

Statement covers period from 7/1/2021 CALIFORNIA 460 FORM Through 12/31/2021 Page 5 of 5

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

through 12/31/2021 Page 5 of 5

I.D. NUMBER

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications RAD radio airtime and production costs CMP campaign paraphernalia/misc. RFD returned contributions campaign consultants MTG meetings and appearances contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries TEL t.v. or cable airtime and production costs petition circulating CVC civic donations PET candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals FIL fundraising events polling and survey research TRS staff/spouse travel, lodging, and meals **FND** TSF transfer between committees of the same candidate/sponsor IND independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services professional services (legal, accounting) VOT voter registration LEG legal defense 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	
Zoom Video Communications San Jose, CA 95113	OFC	Zoom video calls for COPE meetings.	156.00	

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

SUBTOTAL \$ 156.00

Schedule E Summary

FPPC Form 460 (Jan/2016))
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Contributor Code

Occupation & Employer

	Am ount	Amount received	
Name	period	2021	Address
ALAMILLO,LUCY	60	ı	
BARANSKI, JOHN F	60	•	
BERNEY, DANIEL EDWARD	90)	
BOSTICK,JASON	60	ı	
BRITTON, ALBERT JOHN	60)	
CABRAL, MARCELO	60)	
CAREY,BRYAN	60)	
CASPER, JOSHUA J	90)	
CASTRO,GRISELDA	60)	
DONNELL, SEAN	120	24	
ELDANAF, DIAA SAMIR	90)	
ESCOBAR, NANCY	60)	
FARIAS III,JULIO GOMEZ	60)	
FIRESTONE, RANDALL	60)	
FUJIWARA, MELISSA	60)	
GALLAGHER,JENNIFER	60)	
GARCIA, MARIA A.	60)	
GOLDMANN,EYAL	60)	
GONZALEZ,OMAR	60)	
HURD, CHRISTOPHER M	60)	
JEFFRIES, CHRISTINE M	60)	
JOSEPHIDES, ANALU	60)	
JUCKETT, BRIAN K	60)	
KJESETH,LARS J.	60)	
KOLKODA T.	150)	
LA COE,AMY	60)	
LACKPOUR, MATIN	150)	
LEON, FELIPE EDWIN	60)	
LOKENI,KARE'L	60)	
LOPEZ ARELLANO, YADIRA	150)	
LU,KHAI H.	150)	
MANNEN, ANGELA	60)	
MARTINEZ-WEITZEL, VICTOR	I/ 60)	
MATTHEWS III, WALKER	90)	
MEREDITH, DONALD	60)	
MOON,MARY KYUNG	60)	
MOSQUEDA,CYNTHIA	60)	
MURDOCK,ADAM E.	60)	
OTERO,RODOLFO	60)	
PALMER,GRANT	60)	
PINEDA,SERGIO	60)	
REED,DAVID L	90)	
RUSSELL, SOLOMON	60)	
SALDARRIAGA, LAURA	60)	
SIMON,ANGELA C	150)	

STEVENS, CHRISTOPHER M	60	
STOLOVY,SUSAN	60	
STRUBLE, LUCA	60	
TONTCHEVA, ANA	60	
VILLATORO,KARLA	60	
WINFREE,MERRIEL	60	
WU,XIAOWEN	90	
WYNNE,MICHAEL	60	
	3870 \$	7,740.00