ent Committee ign Statemen Page

Statement covers period 07/01/2022

ugh 12/31/2022

COVER PAGE

CALIFORNIA 460

FORM

CALIFORNIA 460

CAMPAIGN FINA CE

		from <u>07/01/2022</u>	(Month, Day, Year)	ZEZJ JAN JE V.	•		
Ε	E'INSTRUCTIONS ON REVERSE	through 12/31/2022		CAMPAIGNIFIN	TO HEE		
. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.			2. Type of Statement:				
	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 Iso Complete Part 6) rimarily Formed Candidate/ officeholder Committee Iso Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te Amendment (Explain be	t □ S ermination)	uarterly Statement pecial Odd-Year Report		
ι.	Committee information	. NUMBER 238887	Treasurer(s)				
	COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)		NAME OF TREASURER				
	Little Lake Education Association		Nancy Magana				
	Political Action Committee		MAILING ADDRESS				
	STREET ADDRESS (NO P.O. BOX)		CITY		CODE AREA CODE/PHONE		
	CITY STATE ZIP COL	DE AREA CODE/PHONE	Santa Fe Springs NAME OF ASSISTANT TREASUR		0670 (562) 500-2391		
	Santa Fe Springs CA 90670		Nicky McLean				
	MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX		MAILING ADDRESS				
	•						
	CITY STATE ZIP COL	DE AREA CODE/PHONE	CITY	STATE ZIF	CODE AREA CODE/PHONE		
			Santa Fe Springs		0670		
	OPTIONAL: FAX/E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRE	ESS			
	LLEAPres@icloud.com	· · · · · · · · · · · · · · · · · · ·	LLEAPres@icloud.com		·····		
•	Verification I have used all reasonable diligence in preparing and reviewin	og this statement ar	wiedge 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 0	_	rect.	nerem and in the attached	solicules is true and complete.		
	Executed on January 30, 2023						
Executed on Date			Signature of Treasurer or Assistant Treasurer				
	Executed on	By Signature of Control	ling Officeholder, Candidate, State Measure Pro	oponent or Responsible Officer of Sp	ionsor		
	Executed on	Bysig	nature of Controlling Officeholder, Candidate, S	State Measure Proponent			
	Executed on	Bysig	nature of Controlling Officeholder, Candidate, S	State Measure Proponent			

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period CALIFORNIA FORM from $\frac{07/01/2022}{}$ I.D. NUMBER

through <u>12/31/2022</u> SEE INSTRUCTIONS ON REVERSE NAME OF FILER Little Lake Education Association Political Action Committee 1238887

Contributions Received 1. Monetary Contributions	0.00	### Column B	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections 1/1 through 6/30 7/1 to Date 20. Contributions Received \$ 0.00 \$ 0.00 21. Expenditures Made \$ 0.00 \$ 0.00	
Expenditures Made 6. Payments Made	\$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$	\$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$	Expenditure Limit Summary for State Candidates 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy)	
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.	\$\frac{7416.18}{0.00} \frac{0.00}{0.00} \frac{0.00}{7416.18}	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	*Amounts in this section may be different from amounts reported in Column B.	
17. LOAN GUARANTEES RECEIVED	0.00	this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).	FPPC Form 460 (Jan/2010 FPPC Advice: advice@fppc.ca.gov (866/275-377 www.fppc.ca.g	