D	asiniant Committee		_		COVER PAGE
C	ecipient Committee ampaign Statement over Page overnment Code Sections 84200-84216.5)			Date Stamp	CALIFORNIA 460 FORM
	E INSTRUCTIONS ON REVERSE	Statement covers period	Date of election if applicable: (Month, Day, Year)	04/28/2023 12:59:39 Filing ID: 207827955	Page 1 of 8 For Official Use Only
1.	Type of Recipient Committee: All Committees - Committees	Complete Parts 1, 2, 3, and 4.	2. Type of Statement:	<u>'</u>	
	 State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored 	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 Te Amendment (Explain be	Specia Supple ermination) Statem	erly Statement il Odd-Year Report emental Preelection nent - Attach Form 495
3.	Committee Information	.D. NUMBER	Treasurer(s)		
	COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE	1459148	NAME OF TREASURER		
	No Recall, Parents Protecting our Kids Agai Boardmembers Ledesma, Ortega, Miner and Rum	Jen Slater MAILING ADDRESS			
	STREET ADDRESS (NO P.O. BOX)		CITY	STATE ZIP COL	DE AREA CODE/PHONE
	CITY STATE ZIP C	CODE AREA CODE/PHONE	NAME OF ASSISTANT TREASUR	RER, IF ANY	
	MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.	ВОХ	MAILING ADDRESS		
	CITY STATE ZIP C	CODE AREA CODE/PHONE	СІТҮ	STATE ZIP COL	DE AREA CODE/PHONE
	OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDR	ESS	
4.	Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of Californ Executed on04/25/2023	ng this statement and to the best of my kn nia that the foregoing is true and correct.		rein and in the attached schedule	s is true and complete. I certify
	Date	Бу	Signature of Treasurer or Assistant T	Freasurer	_
	Executed on	By Anthony Rai Signature of Co	mirez ontrolling Officeholder, Candidate, State Measure Prop	ponent or Responsible Officer of Sponsor	_
	Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, Sta	ate Measure Proponent	_
	Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, Sta	ate Measure Proponent	 FPPC Form 460 (Jan/2016)

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2									
	ORNIA ORM	4	460						
Page _	2	of _	8						

Officeholder or Candidate Controlled Committee		6.	6. Primarily Formed Ballot Measure Committee					
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumso					
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIS	TRICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTI Orange Un	ON ified: Orang		SUPPORT OPPOSE	
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP		Identify the controlling of	•		•	roponent, if any.	
			NAME OF OFFICEHOLDER, CA	NDIDATE, 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 your	ou or are primarily formed to receive		OFFICE SOUGHT OR HELD			DISTRICT NO. IF	ANY	
COMMITTEE NAME	I.D. NUMBER				l			
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Car officeholder(s) or candidate					
COMMITTEE ADDRESS STREET ADDRESS (NO P.	D. BOX)		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	HT OR HELD	SUPPORT OPPOSE	
CITY STATE Z	IP CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	GHT OR HELD	SUPPORT OPPOSE	
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	GHT OR HELD	SUPPORT OPPOSE	
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO P.	CONTROLLED COMMITTEE? YES NO		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	GHT OR HELD	SUPPORT OPPOSE	
	IP CODE AREA CODE/PHONE		Atta	ach continuati	ion sheets if n	ecessary	•	

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Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

		SUMMARY PAGE
Statem	ent covers period	CALIFORNIA 460
from	01/01/2023	FORM TOO
through _	03/31/2023	Page3 of8
		LD NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

1459148

No Recall, Parents Protecting our Kids Against the Recall of (UUS.) Boardmembers Lede	sma,	Ortega, Miner and R	umsey 1459148
Contributions Received		Column A TOTALTHIS PERIOD FROMATTACHED 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	\$	2,754.00	\$	2,754.00	
2. Loans Received Schedule B, Line 3		0.00		0.00	1/1 through 6/30 7/1 to Dat
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	2,754.00	\$	2,754.00	20. Contributions Received \$ \$
4. Nonmonetary Contributions Schedule C, Line 3		0.00		0.00	21. Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	2,754.00	\$	2,754.00	Made \$ \$
Expenditures Made					Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$	120.95	\$	120.95	Candidates
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	120.95	\$	120.95	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)		1,035.00		1,035.00	Date of Election Total to Da
10. Nonmonetary Adjustment Schedule C, Line 3		0.00		0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$	1,155.95	\$	1,155.95	/\$
Current Cash Statement					\$
12. Beginning Cash Balance	\$	0.00	То	calculate Column B, add	
13. Cash Receipts		2,754.00		nounts in Column A to the rresponding amounts	
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	m Column B of your last	*Amounts in this section may be different from amoun reported in Column B.
15. Cash Payments		120.95		oort. Some amounts in lumn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	2,633.05	fig	ures that should be	
If this is a termination statement, Line 16 must be zero.			ре	btracted from previous riod amounts. If this is a first report being filed	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for	this calendar year, only rry over the amounts	
Cash Equivalents and Outstanding Debts				m Lines 2, 7, and 9 (if y).	
18. Cash Equivalents See instructions on reverse	\$	0.00		. ,	
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	1,035.00			
			I		FPPC Advice: advice@fppc ca.gov (866/

Schedule A Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A

Monetary Contributions Received		to	whole dollars.	from01/01/2	·	FORM 460		
SEE INSTRUCTION	DNS ON REVERSE			through	023	Page4	of8	
NAME OF FILER						I.D. NUMBER		
No Recall,	Parents Protecting our Kids Against the Recall of	OUSD Boardm	embers Ledesma, Ortega, Min	er and Rumsey		1459148		
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 CALENDAR YE (JAN. 1 - DEC.	AR	ER ELECTION TO DATE F REQUIRED)	
03/23/2023	Chris Winn		Sales Sales and Service Inc	1,000.00	1,0	00.00		
03/26/2023	Rosa Otero		Retired Retired	5.00	(1	05.00		
03/27/2023	Rosa Otero		Retired Retired	500.00	5	05.00		
03/31/2023	Bethany Herms		Pink Laundry Clothing Retail Boutique	150.00	1	50.00		
03/31/2023	Kristin Jackson	⊠IND □COM □OTH □PTY □SCC	Retired Retired	250.00	2	50.00		
			SUBTOTAL\$	1,905.00				
1. Amount re	A Summary eceived this period – itemized monetary contributions. Il Schedule A subtotals.)		\$	2,655.00	IND-	ributor Codes Individual – Recipient Cor (other than F		
2. Amount re	eceived this period – unitemized monetary contributions	s of less than	\$100 \$	99.00		- Other (e.g., l Political Party	ousiness entity)	
	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colu	mn A, Line 1.) TOTAL \$	2,754.00			utor Committee	

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

Amounts may be rounded to whole dollars.

State	ment covers period	CALIFO	DRN	IA	AC	<u> </u>
om	01/01/2023	FORM 40				J
hrough _	03/31/2023	Page	5	_ of _	8	_

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

1459148

I.D. NUMBER

SCHEDULE A (CONT.)

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)	PER ELECTION TO DATE (IF REQUIRED)
03/31/2023	Leissa Nazzareno		Owner/CFO Nazzareno Electric Co., Inc	250.00	250.00	
03/31/2023	Noriel Zuazo		Accountant Zuazo & Associates Inc	500.00	500.00	
		☐IND ☐COM ☐OTH ☐ PTY ☐SCC				
		□IND □COM □OTH □PTY □SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
			SUBTOTALS	750.00		

*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

Schedule E	
Payments Made	

	301 ILDULL L
Statement covers period	CALIFORNIA 460
from01/01/2023	FORM TOO
through03/31/2023	Page6 of8
	I.D. NUMBER
r and Rumsey	1459148

SCHEDITIE E

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

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
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	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
FND	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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OF	२	DESCRIPTION OF PAYMENT	AMOUNT PAID
					_

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL\$ 0.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)\$	0.00
2. Unitemized payments made this period of under \$100\$	120.95
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)\$	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	120.95

Schedule F	
Accrued Expenses	(Unpaid Bills)

 $\begin{array}{c} \text{Statement covers period} \\ \text{from} & \frac{01/01/2023}{} \\ \text{through} & \frac{03/31/2023}{} \\ \end{array} \begin{array}{c} \text{CALIFORNIA} \\ \text{FORM} \end{array} \begin{array}{c} \textbf{460} \\ \\ \text{Page} & \frac{7}{} \end{array} \text{ of } \underline{8} \\ \\ \text{I.D. NUMBER} \end{array}$

1459148

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

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

campaign paraphernalia/misc. MBR 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 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 fundraising events polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* transfer between committees of the same candidate/sponsor IND postage, delivery and messenger services TSF LEG 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 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
Campaign Compliance Group	PRO	0.00	500.00	0.00	500.00
Verde Consulting Group LLC	OFC	0.00	535.00	0.00	535.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS S	0.00	1,035.00	0.00	1,035.00

Schedule F Summary

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

Amounts may be rounded to whole dollars.

	SCHEDULE G
Statement covers period	CALIFORNIA 460
from01/01/2023	FORM 40U
through03/31/2023	Page8 of8
	I.D. NUMBER
ner and Rumsey	1459148

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Verde Consulting Group LLC

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		
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions		
CTB	contribution (explain nonmonetary)*	OFC	office expenses	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		
FND	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 campaign literature and mailings print ads

^{*} 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
The UPS Store	OFC		535.0

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

535.00

WEB information technology costs (internet, e-mail)

^{*} 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.

D	asiniant Committee		_		COVER PAGE
C	ecipient Committee ampaign Statement over Page overnment Code Sections 84200-84216.5)			Date Stamp	CALIFORNIA 460 FORM
	E INSTRUCTIONS ON REVERSE	Statement covers period	Date of election if applicable: (Month, Day, Year)	07/31/2023 11:37:58 Filing ID: 208369815	Page 1 of 20 For Official Use Only
1.	Type of Recipient Committee: All Committees - Committees	Complete Parts 1, 2, 3, and 4.	2. Type of Statement:	<u> </u>	
	 State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored 	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 Te	Specia Supple Statem	rly Statement I Odd-Year Report emental Preelection ent - Attach Form 495
3.	Committee Information	.D. NUMBER 1459148	Treasurer(s)		
	COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE		NAME OF TREASURER		
	No Recall, Parents Protecting our Kids Agai Boardmembers Ledesma, Ortega, Miner and Rum		Jen Slater MAILING ADDRESS		
	STREET ADDRESS (NO P.O. BOX)		CITY	STATE ZIP COD	DE AREA CODE/PHONE
	CITY STATE ZIP C	CODE AREA CODE/PHONE	NAME OF ASSISTANT TREASUR	RER, IF ANY	
	MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.	вох	MAILING ADDRESS		
	CITY STATE ZIP C	CODE AREA CODE/PHONE	CITY	STATE ZIP COL	DE AREA CODE/PHONE
	OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRI	ESS	
4.	Verification I have used all reasonable diligence in preparing and reviewir under penalty of perjury under the laws of the State of Californ Executed on 07/24/2023 Date	ng this statement and to the best of my kn nia that the foregoing is true and correct. ByJen_Slater	owledge the information contained here Signature of Treasurer or Assistant T		s is true and complete. I certify
	Executed on	By Anthony Rai Signature of Co	mirez ntrolling Officeholder, Candidate, State Measure Prop	ponent or Responsible Officer of Sponsor	
	Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, Sta	ate Measure Proponent	_
	Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, Sta	ate Measure Proponent	 FPPC Form 460 (Jan/2016)

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2						
CALIFORNIA 460						
Page _	2	of _	20			

Officeholder or Candidate Controlled Committee)	6.	Primarily Formed Ball	ot Measure	Committee	9	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE Recall of OUSD Boardm	embers Lede	sma, Ortega	, Miner and	Rumsey
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NU	MBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTI Orange Un	ON nified: Oran	Inge County	SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY	STATE ZIP		Identify the controlling of	ficeholder, ca	ndidate, or s	tate measure p	proponent, if any
			NAME OF OFFICEHOLDER, CA	NDIDATE, OR PI	ROPONENT		
Related Committees Not Included in this Statem not included in this statement that are controlled by you or are contributions or make expenditures on behalf of your candidate.	primarily formed to receive		OFFICE SOUGHT OR HELD			DISTRICT NO. I	F ANY
COMMITTEE NAME I.D.	NUMBER						
	NTROLLED COMMITTEE?	7.	Primarily Formed Car officeholder(s) or candidate				
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP CODE	AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME I.D.	NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT OPPOSE
	NTROLLED COMMITTEE? YES NO		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)							
CITY STATE ZIP CODE	AREA CODE/PHONE		Atta	ach continuati	ion sheets if	necessary	

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Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

		SUMMARY	PAGE	
Statem	ent covers period	CALIFORNIA 46	N	
from	04/01/2023	FORM 40	1 00	
through _	06/30/2023	Page3 of20		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

1459148

Contributions Received	(1	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
1. Monetary Contributions Schedule A, Line 3	\$	15,713.42	\$	18,467.42	General Elections
2. Loans Received Schedule B, Line 3		0.00		0.00	1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	15,713.42	\$	18,467.42	20. Contributions Received \$ \$
4. Nonmonetary Contributions Schedule C, Line 3		0.00		0.00	24 Evpandituras
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	15,713.42	\$	18,467.42	Made \$ \$
Expenditures Made					Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4		·	\$	16,736.18	Candidates
7. Loans Made Schedule H, Line 3				0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	16,615.23	\$	16,736.18	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)		8,965.00		10,000.00	Date of Election Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3		0.00		0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$	25,580.23	\$	26,736.18	/\$
Current Cash Statement					/ \$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	2,633.05	То	calculate Column B, add	
13. Cash Receipts		15,713.42		nounts in Column A to the rresponding amounts	
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	m Column B of your last	*Amounts in this section may be different from amounts reported in Column B.
15. Cash Payments		16,615.23		oort. Some amounts in lumn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	1,731.24	figu	ures that should be otracted from previous	
If this is a termination statement, Line 16 must be zero.			pei	riod amounts. If this is	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for	this calendar year, only ry over the amounts	
Cash Equivalents and Outstanding Debts			from an	m Lines 2, 7, and 9 (if y).	
18. Cash Equivalents					

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

Schedule A **Monetary Contributions Received**

Amounts may be rounded to whole dollars.

Sta	tement covers period	CALIFORNIA	460
from _	04/01/2023	FORM	TUU

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

through <u>06/30/2023</u> Page ___ _4___ of ___20_

I.D. NUMBER

SCHEDULE A

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

1459148

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)	PER ELECTION TO DATE (IF REQUIRED)
04/10/2023	Pamela Battaglia	⊠IND □COM □OTH □PTY □SCC	Registered Nurse Pamela Battaglia	100.00	100.00	
04/10/2023	Linda Cone	⊠IND □COM □OTH □PTY □SCC	Retired Retired	99.00	199.33	
04/10/2023	Kelly A. Felton	⊠IND □COM □OTH □PTY □SCC	Adjunct Faculty National University	600.00	699.00	
04/10/2023	Matthew Parisi	IND COM OTH PTY SCC	CEO A Million Thanks	400.00	400.00	
04/19/2023	Chris Winn	☑IND □COM □OTH □PTY □SCC	Sales Sales and Service Inc	2,000.00	3,500.00	
			SUBTOTAL\$	3,199.00		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.)\$ ____ 14,842.36 2. Amount received this period – unitemized monetary contributions of less than \$100\$

3. Total monetary contributions received this period.

15,713.42 *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

Amounts may be rounded to whole dollars.

SCHEDU	LE A (CONT.)
CALIFORNIA FORM	460

Statement covers period

from

04/01/2023

NAME OF FILER To Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner						Page _ I.D. NUI 14591	
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 CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
04/24/2023	Erin Flynn		Owner VIP Pools	250.00	25	50.00	
04/25/2023	Colleen Faris	⊠IND □COM □OTH □PTY □SCC	Teacher Colleen Faris	100.00	10	00.00	
04/25/2023	Samantha McClellan		Medical Sales Samantha McClellan	100.00	10	00.00	
04/26/2023	Leann Luchinger		Retired Retired	500.00	50	00.00	
04/26/2023	Danielle Reindl		Homemaker None	100.00	10	00.00	
			SUBTOTAL	1,050.00			

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.) CALIFORNIA 460

Statement covers period

04/01/2023

				from04/01/	2023	FO	RM TOO
				through06/30/	2023	Page	6 of <u>20</u>
NAME OF FILER		I.D. NUM	BER				
No Recall, Pa	arents Protecting our Kids Against the Recall of	OUSD Boardme	mbers Ledesma, Ortega, Mine	er and Rumsey		145914	8
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 CALENDAR Y (JAN. 1 - DEC	EAR . 31)	PER ELECTION TO DATE (IF REQUIRED)
04/28/2023	Matt Wagner		Real Estate GM Properties	250.00	2	50.00	
05/06/2023	Aubrey Yakel		Retired Retired	500.00	5	00.00	
05/07/2023	Leigh McDonough		Insurance Alliant	100.00	1	00.00	
05/10/2023	Oxford Property Investments LLC(Dmitriy Chebotarev)	☐IND ☐COM ☑OTH ☐PTY ☐SCC		1,000.00		00.00	
05/11/2023	Matt Barone	⊠IND □ COM □ OTH □ PTY □ SCC	Engineer South Coast Automation Systems	250.00	2	50.00	
			SUBTOTAL\$	2,100.00			
			_				

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

State	CALIF	ORN	IIA	160	
from	04/01/2023	FORM 40			40U
through_	06/30/2023	Page _	7	_ of _	20

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

1459148

I.D. NUMBER

SCHEDULE A (CONT.)

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)	PER ELECTION TO DATE (IF REQUIRED)
05/15/2023	Todd Rustman		Managing Partner Clarity Capital Partners	250.00	250.00	
05/17/2023	Linda Cone		Retired Retired	100.33	199.33	
05/17/2023	Edward Gunderson		Sales-Project Management Hill Brothers	1,004.04	1,004.04	
05/18/2023	Kate Doti		Business Owner J.L. Childress	100.00	100.00	
05/18/2023	Chris Winn		Sales Sales and Service Inc	500.00	3,500.00	

*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

Amounts may be rounded to whole dollars.

SCHEDU	LE A (CONT.)
CALIFORNIA FORM	460

Statement covers period

from

04/01/2023

				through 06/30/	2023	Page _	8 of <u>20</u>
NAME OF FILER						I.D. NU	MBER
No Recall, Pa	14591	48					
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 CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
05/19/2023	Michele Markel	IND COM OTH PTY SCC	Retired Retired	103.33	1	03.33	
05/19/2023	Temescal Canyon LLC - Scott Felix(Scott Felix)	□IND □COM ☑OTH □PTY □SCC		2,200.00	2,2	00.00	
05/20/2023	Florita Sheldon		Analyst Union Bank	103.33	1	03.33	
05/23/2023	Pearl Boelter	☑IND □COM □OTH □PTY □SCC	Retired Retired	103.33	1	03.33	
05/24/2023	Todd Martin	☑IND □COM □OTH □PTY □SCC	Construction General Contractor Todd Martin	100.00	1	00.00	
			SUBTOTALS	2,609.99			

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may be rounded to whole dollars.		Statement covers period from04/01/2023		FORM 460	
				through06/30/	2023	Page9 of	20
NAME OF FILER			<u> </u>			I.D. NUMBER	
No Recall, Pa	arents Protecting our Kids Against the Recall of	OUSD Boardme	mbers Ledesma, Ortega, Mine	er and Rumsey		1459148	
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 D CALENDAR YEA (JAN. 1 - DEC. 3	AR TO	LECTION DATE QUIRED)
05/25/2023	Sonya Green		Director Patriots for Freedom	100.00	100	0.00	
05/25/2023	Nancy Kerr		Cashier Water Market	100.00	100	0.00	
06/09/2023	Shawn Steel Law Firm Inc	□IND □COM ☑OTH □PTY □SCC		1,000.00	1,000	0.00	
06/11/2023	Leyda Bequer		Retired Retired	1,000.00	1,000		
06/20/2023	Stephanie M. Dunnam		Executive Liberty Surfboards LLC	200.00	200	0.00	
			SUBTOTAL \$	2,400.00			

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A	(CONT.)
IEODNIA 4	

Statement covers period	CALIFORNIA 160
from04/01/2023	FORM 400
through06/30/2023	Page10 of20
	I.D. NUMBER

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

1459148

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IE AN INDIVIDUAL ENTER	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
06/20/2023	Wendy Grose	IND COM OTH PTY SCC	Nurse Practitioner Optum Care Partners	100.00	100.00	
06/20/2023	Michelle A. O'Brien	IND COM OTH PTY SCC	Retired Retired	125.00	125.00	
06/21/2023	John Park		President Eight Horses	100.00	100.00	
06/22/2023	Martha Porter		Retired Retired	500.00	500.00	
06/22/2023	Ken Williams	☑IND □COM □OTH □PTY □SCC	Physician Orange Coat Family Medical Group	500.00	500.00	
			SUBTOTAL\$	1,325.00		

*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

Amounts may be rounded to whole dollars.

State	CALIF	ORN	IA	160	
from	04/01/2023	FORM 40		40U	
through_	06/30/2023	Page _	11	_ of _	20

from

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

1459148

I.D. NUMBER

SCHEDULE A (CONT.)

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)	PER ELECTION TO DATE (IF REQUIRED)
06/30/2023	Yorba Linda Taxpayers Association (ID# 1378216)	□IND ☑ COM □ OTH □ PTY □ SCC		204.00	204.00	
		□IND □COM □OTH □PTY □SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
			SUBTOTALS	204.00		

*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

Schedule E
Payments Made

	301 ILDULL L
Statement covers period	CALIFORNIA 460
from04/01/2023	FORM TOO
through06/30/2023	Page 12 of 20
	I.D. NUMBER
er and Rumsey	1459148

SCHEDITIE E

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

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
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	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
FND	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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Campaign Compliance Group	PRO			500.00
Verde Consulting Group LLC	OFC			535.00
Bank of America	OFC			125.08

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTAL\$	1,160.08
------------------------------------------------------------------------------------------------------	------------	----------

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)\$ _	16,615.23
2. Unitemized payments made this period of under \$100\$_	0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)\$_	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	16,615.23

Schedule E	
(Continuation Sheet)	
Payments Made	

Statement covers period	CALIFORNIA 160
from04/01/2023	FORM 400
through06/30/2023	Page 13 of 20
	I.D. NUMBER
er and Rumsev	1459148

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

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

campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs campaign consultants returned contributions meetings and appearances CNS CTB contribution (explain nonmonetary)* office expenses 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 polling and survey research staff/spouse travel, lodging, and meals fundraising events TRS POL independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor POS LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT WEB information technology costs (internet, e-mail) LIT print ads

NAME AND ADDRESS OF PAYEE
(IF COMMITTEE, ALSO ENTER I.D. NUMBER)

Capitol Tech Solutions

Capitol Tech Solutions

CODE OR DESCRIPTION OF PAYMENT

AMOUNT PAID

202.70

Verde Consulting Group LLC

CNS

250.00

Verde Consulting Group LLC

LIT

745.64

Capitol Tech Solutions

OFC

98.65

Saddleback Signs

CMP
Outdoor Sign Printing

310.32

*Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 1,607.31

Schedule E	
(Continuation Sheet))
Payments Made	

Statement covers period	CALIFORNIA 460
from04/01/2023	FORM TOO
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er and Rumsey	1459148

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

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 CNS CTB contribution (explain nonmonetary)* OFC office expenses 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 staff/spouse travel, lodging, and meals polling and survey research fundraising events 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

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
Verde Consulting Group LLC	CNS		50.00
Verde Consulting Group LLC	LIT		469.79
Verde Consulting Group LLC	CNS		1,000.00
Verde Consulting Group LLC	WEB		2,500.00
Verde Consulting Group LLC	CNS		150.00

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 4,169.79

Schedule E	
(Continuation Sheet))
Payments Made	

Statement covers period	CALIFORNIA 160			
from04/01/2023	FORM TOU			
through06/30/2023	Page15 of20			
	I.D. NUMBER			
er and Rumsev	1459148			

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

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 CNS CTB contribution (explain nonmonetary)* OFC office expenses 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 polling and survey research staff/spouse travel, lodging, and meals fundraising events POL independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor POS legal defense professional services (legal, accounting) VOT voter registration WEB information technology costs (internet, e-mail) campaign literature and mailings PRT print ads LIT

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Verde Consulting Group LLC	POL	Data Purchase	104.17
Verde Consulting Group LLC	CNS		5,000.00
Capitol Tech Solutions	OFC		380.88
Bank of America	OFC		16.00
Verde Consulting Group LLC	CNS		425.00

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 5,926.05

Schedule E	
(Continuation Sheet)
Payments Made	-

Statement covers period	CALIFORNIA 460			
from04/01/2023	FORM 400			
through06/30/2023	Page 16 of 20			
	I.D. NUMBER			
er and Rumsev	1459148			

transfer between committees of the same candidate/sponsor

SEE INSTRUCTIONS ON REVERSE

independent expenditure supporting/opposing others (explain)*

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

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 RFD returned contributions campaign consultants CNS CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries PET petition circulating CVC civic donations TEL t.v. or cable airtime and production costs candidate filing/ballot fees FIL PHO phone banks TRC candidate travel, lodging, and meals polling and survey research staff/spouse travel, lodging, and meals fundraising events

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

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

POS postage, delivery and messenger services

TSF

450.00
152.00
3,150.00

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

SUBTOTAL \$

3,752.00

Schedule F **Accrued Expenses (Unpaid Bills)**

Amounts may be rounded to whole dollars.

Statement covers period **CALIFORNIA FORM** 04/01/2023 through $\frac{06/30/2023}{}$ Page $\frac{17}{}$ of $\frac{20}{}$ I.D. NUMBER

1459148

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

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

print ads

campaign consultants CTB contribution (explain nonmonetary)* OFC office expenses

CVC civic donations candidate filing/ballot fees fundraising events

independent expenditure supporting/opposing others (explain)*

LEG legal defense

campaign literature and mailings

MBR member communications RAD radio airtime and production costs

MTG meetings and appearances RFD returned contributions SAL campaign workers' salaries

PET petition circulating TEL t.v. or cable airtime and production costs phone banks TRC candidate travel, lodging, and meals

polling and survey research TRS staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor postage, delivery and messenger services

VOT voter registration

WEB 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
Campaign Compliance Group	PRO	500.00	0.00	500.00	0.00
Verde Consulting Group LLC	OFC	535.00	0.00	535.00	0.00
Verde Consulting Group LLC	WEB Digital Advertising Costs	0.00	10,000.00	0.00	10,000.0
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS S	1,035.00	10,000.00	1,035.00	10,000.00

professional services (legal, accounting)

Schedule F Summary

- 1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for
- 2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on
- 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 \$
 8,965.00

 May be a negative number

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

Amounts may be rounded to whole dollars.

	SCHEDULE G		
Statement covers period	CALIFORNIA 460		
from04/01/2023	FORM 400		
through06/30/2023	Page 18 of 20		
	I.D. NUMBER		
ner and Rumsev	1459148		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Mir.

NAME OF AGENT OR INDEPENDENT CONTRACTOR

campaign literature and mailings

Venture Strategic Inc.

	9 ,		1 - 9 - 9 - 9 - 9 - 9 - 9 - 9 - 9 - 9 -		· · · · · · · · · · · · · · · · · · ·
CMP	campaign paraphernalia/misc.	MBR	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
CVC	civic donations	DET	notition circulating	TEI	ty or cable airtime and production costs

CVC civic donations petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals

print ads

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

IND independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) VOT voter registration PRT

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
Meta Inc	WEB	Digital Ads		10,000.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

10,000.00

^{*} 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 G Payments Made by an Agent or Independent **Contractor (on Behalf of This Committee)**

Amounts may be rounded to whole dollars.

	SCHEDULE G			
Statement covers period	CALIFORNIA ACC			
from04/01/2023	FORM 40U			
through06/30/2023	Page 19 of 20			
	I.D. NUMBER			
er and Rumsey	1459148			

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Min

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Verde Consulting Group LLC

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
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	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
FND	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
Smart Levels Media	LIT		372.82
Smart Levels Media	LIT		372.82
Smart Levels Media	LIT		469.79
Venture Strategic Inc.	WEB		2,500.00

Attach additional information on appropriately labeled continuation sheets.

3,715.43

TOTAL* \$

^{*} 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 (Continuation Sheet) Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

	SCHEDULE G (CONT.
Statement covers period	CALIFORNIA 460
from04/01/2023	FORM 40U
through06/30/2023	Page of
	I.D. NUMBER
1 5	1450140

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LEG

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

1459148

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Verde Consulting Group LLC

legal defense

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

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

PRO professional services (legal, accounting) VOT voter registration

^{*} 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
Orange County Registrar of Voters	CMP	Voter Data	104.17
Venture Strategic Inc.	WEB		10,000.00
LT&T Print Corp	LIT		2,900.00

* 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.

Attach additional information on appropriately labeled continuation sheets.

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

TOTAL* \$

13,004.17

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

D	asiniant Committee		_		COVER PAGE
C	ecipient Committee ampaign Statement over Page overnment Code Sections 84200-84216.5)			Date Stamp E-Filed	CALIFORNIA 460 FORM
	E INSTRUCTIONS ON REVERSE	Statement covers period	Date of election if applicable: (Month, Day, Year)	10/27/2023 13:20:15 Filing ID: 208715570	Page 1 of 16 For Official Use Only
1.	Type of Recipient Committee: All Committees - Committees	complete Parts 1, 2, 3, and 4.	2. Type of Statement:		
	 State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored 	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 Te Amendment (Explain be	Special Supple Statem	rly Statement I Odd-Year Report mental Preelection ent - Attach Form 495
3.	Committee Information	.D. NUMBER 1459148	Treasurer(s)		
	COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE		NAME OF TREASURER		
	No Recall, Parents Protecting our Kids Agai Boardmembers Ledesma, Ortega, Miner and Rum		Jen Slater MAILING ADDRESS		
	STREET ADDRESS (NO P.O. BOX)		CITY	STATE ZIP COD	DE AREA CODE/PHONE
	CITY STATE ZIP C	ODE AREA CODE/PHONE	NAME OF ASSISTANT TREASUR	RER, IF ANY	
	MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.	вох	MAILING ADDRESS		
	CITY STATE ZIP C	ODE AREA CODE/PHONE	CITY	STATE ZIP COD	DE AREA CODE/PHONE
	OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRI	ESS	
4.	Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of Californ Executed on	ng this statement and to the best of my knia that the foregoing is true and correct. By	owledge the information contained here Signature of Treasurer or Assistant T		s is true and complete. I certify
	10/25/2022	Ry Anthony Ra	-	ıeasurei	
	Executed on	Signature of Co	ntrolling Officeholder, Candidate, State Measure Prop	conent or Responsible Officer of Sponsor	_
	Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, Sta	ate Measure Proponent	
	Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, Sta	ate Measure Proponent	 FPPC Form 460 (Jan/2016)

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2						
	FORNIA DRM	4	160			
Page _	2	of _	16			

Officeholder or Candidate Controlled Committee	6. Primarily Formed Ballot Measure Committee
NAME OF OFFICEHOLDER OR CANDIDATE	NAME OF BALLOT MEASURE Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)	BALLOT NO. OR LETTER JURISDICTION Orange Unified: Orange County OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP	Identify the controlling officeholder, candidate, or state measure proponent, it
	NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT
Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.	OFFICE SOUGHT OR HELD DISTRICT NO. IF ANY
COMMITTEE NAME I.D. NUMBER	I
NAME OF TREASURER CONTROLLED COMMITTEE? YES NO	7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD SUPPO OPPO
CITY STATE ZIP CODE AREA CODE/PHONE	NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD SUPPO
COMMITTEE NAME I.D. NUMBER	NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD SUPPO OPPO
NAME OF TREASURER CONTROLLED COMMITTEE? YES NO	NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD SUPPO OPPO
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	
CITY STATE ZIP CODE AREA CODE/PHONE	Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

		SUMMARY PAGE
Staten	nent covers period	CALIFORNIA 460
from	07/01/2023	FORM 400
through _	09/30/2023	Page3 of16
		I.D. NUMBER

1459148 No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey Calendar Year Summary for Candidates Column A Column B Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROMATTACHED SCHEDULES) TOTALTO DATE **General Elections** 1. Monetary Contributions Schedule A, Line 3 \$ ______19,942.33 38,409.75 1/1 through 6/30 7/1 to Date 0.00 20. Contributions 19,942.33 38,409.75 Received 4. Nonmonetary Contributions Schedule C, Line 3 21. Expenditures Made \$ 38,409.75 **Expenditures Made Expenditure Limit Summary for State** Candidates 7. Loans Made Schedule H, Line 3 0.00 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) _____-5,000.00 5,000.00 Date of Election Total to Date (mm/dd/yy) \$ 41,907.75 **Current Cash Statement** To calculate Column B, add 19,942.33 amounts in Column A to the 13. Cash Receipts Column A, Line 3 above corresponding amounts *Amounts in this section may be different from amounts 0.00 from Column B of your last reported in Column B. report. Some amounts in 20,171.57 Column A may be negative figures that should be subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 0.00 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ _____ 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 \$ 5,000.00 FPPC Form 460 (Jan/2016)

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

Schedule A

SCHEDULE A

Monetary Contributions Received	Amounts may be rounded to whole dollars.	Statement cov	CA	CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE		through	2023 Pag	e <u>4</u> o	f <u>16</u>
IAME OF FILER			I.D. I	NUMBER	
No Recall, Parents Protecting our Kids Against the	Recall of OUSD Boardmembers Ledesma, Ortega	, Miner and Rumsey	145	9148	

No Recall, F	Parents Protecting our Kids Against the Recall of	OUSD Boardme	embers Ledesma, Ortega, Min	ner and Rumsey	1459	148
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)	PER ELECTION TO DATE (IF REQUIRED)
07/07/2023	Heidi Nogy	IND COM OTH PTY SCC	Former Adjunct Professor Saddleback College	503.33	503.33	
08/17/2023	Julie Luckey		Retired Retired	1,600.00	1,600.00	
08/28/2023	Kate Doti	IND COM OTH PTY SCC	Business Owner J.L. Childress	100.00	250.00	
08/30/2023	Service First Inc	□IND □COM ☑OTH □PTY □SCC		10,500.00	15,500.00	
09/01/2023	Hedieh Mirahmadi		Retired Retired	100.00	100.00	
			SUBTOTAL	12,803.33		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.)\$ ____ 19,493.33 2. Amount received this period – unitemized monetary contributions of less than \$100\$ 3. Total monetary contributions received this period.

*Contributor Codes

IND - Individual

19,942.33

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Amounts may be rounded to whole dollars.

SCHEDUI	LE A (CONT.)
CALIFORNIA FORM	460

Statement covers period

from

07/01/2023

NAME OF FILER To Recall, Pa	arents Protecting our Kids Against the Recall of	OUSD Boardme	mbers Ledesma, Ortega, Min	through 09/30/	2023	Page _ I.D. NU 14591	
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 CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
09/05/2023	Service First Inc	□IND □COM ☑OTH □PTY □SCC		5,000.00	15,5	00.00	
09/12/2023	Matt Barone	⊠IND □COM □OTH □PTY □SCC	Engineer South Coast Automation Systems	250.00	5	00.00	
09/12/2023	Pamela Battaglia		Registered Nurse Pamela Battaglia	100.00	2	00.00	
09/12/2023	Kate Doti		Business Owner J.L. Childress	50.00	2	50.00	
09/12/2023	Kimberly Flint	⊠IND □COM □OTH □PTY □SCC	Registered Nurse Kimberly Flint	100.00	1	00.00	
	SUBTOTAL\$ 5,500.00						

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDUL	LE A (CONT.)
CALIFORNIA FORM	460

Statement covers period

from

07/01/2023

		through09/30/	2023	Page6 of16						
NAME OF FILER				I.D. NUN	MBER					
To Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey 1459148										
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 CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)			
09/12/2023	Bethany Herms	IND COM OTH PTY SCC	Boutique Owner Pink Laundry	250.00	40					
09/12/2023	Kristin Jackson	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired Retired	500.00	75	50.00				
09/12/2023	Matthew Parisi		CEO A Million Thanks	40.00	44	40.00				
09/12/2023	Courtney Stilwell	☑IND □COM □OTH □PTY □SCC	Teacher HSBSHE	100.00	10	00.00				
09/12/2023	Matt Wagner	IND COM OTH PTY SCC	Real Estate GM Properties	50.00	30	00.00				
			SUBTOTAL	\$ 940.00						

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may to whole		Statement cove	•	CALIFORNIA 460		
				through09/30/	2023	Page _	7 of <u>16</u>	
NAME OF FILER			<u> </u>			I.D. NUI	MBER	
No Recall, Pa	arents Protecting our Kids Against the Recall of	OUSD Boardme	mbers Ledesma, Ortega, Min	er and Rumsey		14591	48	
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 CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)	
09/12/2023	Noriel Zuazo		Accountant Zuazo & Associates Inc	250.00	7	50.00		
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						
		☐IND ☐COM ☐OTH ☐ PTY ☐SCC						
			SUBTOTAL	\$ 250.00				

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Schedule E
Payments Made

	SCHEDULE E				
Statement covers period	CALIFORNIA 460				
from07/01/2023	FORM TOO				
through09/30/2023	Page8 of16				
	I.D. NUMBER				
r and Rumsey	1459148				

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

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
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	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
FND	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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OF	R DESCRIPTION OF PAYMENT	AMOUNT PAID
Bank of America	OFC			16.00
Verde Consulting Group LLC	OFC	Ę	See Schedule G for Details	210.00
Capitol Tech Solutions	OFC			35.53

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL\$ 261.53

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)\$_	20,171.57
2. Unitemized payments made this period of under \$100\$_	0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)\$	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	20,171.57

Schedule E	
(Continuation Sheet))
Payments Made	

Statement covers period		CALIFORNIA 160
from07/01/20	23	FORM TOU
through09/30/20	23	Page9 of16
		I.D. NUMBER
er and Rumsev		1459148

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

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 CNS CTB contribution (explain nonmonetary)* OFC office expenses 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 staff/spouse travel, lodging, and meals polling and survey research fundraising events 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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Bank of America	OFC		16.00
Campaign Compliance Group	PRO		450.00
Campaign Compliance Group	PRO		450.00
Verde Consulting Group LLC	CNS		135.00
Verde Consulting Group LLC	CMP	See Schedule G for Details	830.00

^{*}Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 1,881.00

Schedule E	
(Continuation Sheet))
Payments Made	

Statement covers period	CALIFORNIA 160
from07/01/2023	FORM 400
through09/30/2023	Page10 of16
	I.D. NUMBER
er and Rumsev	1459148

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

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 RFD returned contributions campaign consultants CNS CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries PET petition circulating CVC civic donations TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals polling and survey research staff/spouse travel, lodging, and meals fundraising events 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

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
Campaign Compliance Group	PRO		450.00
Capitol Tech Solutions	OFC		26.93
capitor rech solutions	OFC		20.93
Bank of America	OFC		16.00
Verde Consulting Group LLC	CNS		510.00
Verde Consulting Group LLC	CNS		7,800.00

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 8,802.93

Schedule E	
(Continuation	on Sheet)
Payments N	lade

Statement covers period	CALIFORNIA 460
from07/01/2023	FORM TOO
through09/30/2023	Page11 of16
	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

1459148

CODES:	if one of the following codes a	ccurately describes the payment, you may enter the coo	de. Otnerwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	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
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
FND	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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Verde Consulting Group LLC	WEB	Digital Advertising Costs	3,650.00
Campaign Compliance Group	PRO		450.00
Verde Consulting Group LLC	WEB	Digital Advertising Costs	1,350.00
Verde Consulting Group LLC	CNS		1,960.00
Verde Consulting Group LLC	FND	See Schedule G for Details	541.91

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 7,951.91

Schedule E	
(Continuation Sheet)
Payments Made	-

Statement covers period	CALII OKNIA 16
from07/01/2023	FORM TOO
through09/30/2023	— Page 12 of 16
	I.D. NUMBER

1459148

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

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

campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs campaign consultants RFD returned contributions CNS meetings and appearances CTB contribution (explain nonmonetary)* office expenses 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 polling and survey research staff/spouse travel, lodging, and meals fundraising events POL TRS

independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services POS LEG legal defense professional services (legal, accounting) VOT voter registration

campaign literature and mailings PRT LIT print ads TSF transfer between committees of the same candidate/sponsor

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 Capitol Tech Solutions OFC 129.20 Verde Consulting Group LLC CNS 660.00 Verde Consulting Group LLC CNS 485.00

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

SUBTOTAL \$

1,274.20

Schedule F **Accrued Expenses (Unpaid Bills)**

Amounts may be rounded to whole dollars.

Statement covers period		CALIFORNIA 460				
from	07/01/2023	FORM TOO				
through	09/30/2023	Page13 of16				
		I.D. NUMBER				

1459148

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

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

campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees phone banks TRC candidate travel, lodging, and meals fundraising events polling and survey research TRS 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

LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings

print ads

WEB 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
Verde Consulting Group LLC	WEB	10,000.00	0.00	5,000.00	5,000.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS \$	10,000.00	0.00	5,000.00	5,000.00

Schedule F Summary

summarized on Schedule D.

- 1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for
- 2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)PAID TOTALS \$ _____
- 3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and

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

Amounts may be rounded to whole dollars.

	SCHEDULE G
Statement covers period	CALIFORNIA 460
from07/01/2023	FORM 40U
through09/30/2023	Page14 of16
	I.D. NUMBER
ner and Rumsey	1459148

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Verde Consulting Group LLC

CODE 2:	if one of the	following codes accurately	describes the payment	t, you may enter the	code. Otherwise, describe the payment.	
O1 4D					545 11 121 1 1 1 1 1	

CMP	campaign paraphernalia/misc.	MBR	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
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
FND	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	AMO	DUNT PAID
Constant Contact	WEB			210.00
Constant Contact	WEB			250.00
Saddleback Signs	СМР	Banner		180.00
Smart Levels Media	СМР	Stickers		350.00
Attach additional information on appropriately labeled continuation sheets.			TOTAL* \$	990.00

* 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 G (Continuation Sheet) Payments Made by an Agent or Independent **Contractor (on Behalf of This Committee)**

Amounts may be rounded to whole dollars.

	SCHEDULE G (CONT.
Statement covers period	CALIFORNIA 460
from07/01/2023	FORM 40U
through09/30/2023	— Page <u>15</u> of <u>16</u>
	I.D. NUMBER
ner and Rumsey	1459148

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Verde Consulting Group LLC

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 MTG meetings and appearances returned contributions contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries petition circulating TEL t.v. or cable airtime and production costs CVC civic donations

candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals fundraising events POL polling and survey research transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF

LEG legal defense professional services (legal, accounting) LIT campaign literature and mailings

VOT voter registration

WEB information technology costs (internet, e-mail)

PRT print ads

^{*} 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
California Business Consultants	CNS		7,800.00
California Business Consultants	CNS		510.00
California Business Consultants	CNS		1,260.00
Constant Contact	WEB		35.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

9,605.00

^{*} 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 G (Continuation Sheet) Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

	SCHEDULE G (CONT.)
Statement covers period	CALIFORNIA 160
from07/01/2023	FORM 40U
through09/30/2023	Page 16 of 16
	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma, Ortega, Miner and Rumsey

1459148

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Verde Consulting Group LLC

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

campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
campaign consultants	MTG	meetings and appearances	RFD	returned contributions
contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
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
independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)
	campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense	campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense MTG OFC	campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense MTG meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting)	campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense MTG meetings and appearances office expenses SAL petition circulating phone banks TRC polling and survey research polling and survey research TRS postage, delivery and messenger services professional services (legal, accounting) VOT

^{*} 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 (DR DESCRIPTION OF PAYMENT	AMOUNT PAID
The Post - Rockwell's Cafe & Bar	FND	9/12 Event Costs - Reception Only	436.91
California Business Consultants	CNS		660.00
Constant Contact	WEB		35.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 1,131.91

^{*} 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.

Desirient Committee				COVER PAGE
Recipient Committee Campaign Statement			Date Stamp	CALIFORNIA 460
Cover Page				FORM TOO
Government Code Sections 84200-84216.5)	Statement covers period	Date of election if applicable: (Month, Day, Year)	E-Filed 01/25/2024 12:33:45	Page1 of17
	from10/01/2023		Filing ID: 209700922	For Official Use Only
EE INSTRUCTIONS ON REVERSE	through12/31/2023			
. Type of Recipient Committee: All Committees - Co	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:		
 State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor 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 Te ☐ Amendment (Explain be	Special Suppler ermination) Stateme	ly Statement Odd-Year Report nental Preelection ent - Attach Form 495
6. Committee Information). NUMBER 1459148	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)	1139110	NAME OF TREASURER		
No Recall, Parents Protecting our Kids Again Boardmembers Ledesma and Miner	st the Recall of OUSD	Jen Slater MAILING ADDRESS		
STREET ADDRESS (NO P.O. BOX)		СІТҮ	STATE ZIP COD	E AREA CODE/PHONE
CITY STATE ZIP CO	DDE AREA CODE/PHONE	NAME OF ASSISTANT TREASUR	RER, IF ANY	
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. B	OX	MAILING ADDRESS		_
CITY STATE ZIP CO	DDE AREA CODE/PHONE	CITY	STATE ZIP COD	E AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDR	ESS	
Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California.	g this statement and to the best of my kn a that the foregoing is true and correct.	nowledge the information contained her	ein and in the attached schedules	is true and complete. I certify
Executed on	By <u>Jen Slater</u>	Signature of Treasurer or Assistant T	Freasurer	_
Executed on	By Chris Winn Signature of Co	ı ontrolling Officeholder, Candidate, State Measure Prop	ponent or Responsible Officer of Sponsor	_
Executed on	Ву	Signature of Controlling Officeholder, Candidate, Sta	ate Measure Proponent	_
Executed on	Ву	Signature of Controlling Officeholder, Candidate, Sta	ate Measure Proponent	 FPPC Form 460 (Jan/2016)

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2						
CALIFORNIA 460 FORM						
Page _	2	of _	17			

Officeholder or Candidate Controlled Committee			6. Primarily Formed Ballot Measure Committee				
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE Recall of OUSD Boards	nembers Lede	esma and Min	er	
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	ICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICT	TION nified: Oran	nge County	SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP		Identify the controlling o	fficeholder, ca	andidate, or st	tate measure	proponent, if any.
			NAME OF OFFICEHOLDER, CA	Andidate, or P	ROPONENT		
Related Committees Not Included in this St not included in this statement that are controlled by you contributions or make expenditures on behalf of your ca	or are primarily formed to receive		OFFICE SOUGHT OR HELD			DISTRICT NO.	IF ANY
COMMITTEE NAME	I.D. NUMBER	-	Deins with Formed Co	1: -1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	a a la a la la m		
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Ca officeholder(s) or candidate				
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. I	BOX)		NAME OF OFFICEHOLDER OF	CANDIDATE	OFFICE SOU	JGHT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP	CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OF	CANDIDATE	OFFICE SOU	JGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OF	CANDIDATE	OFFICE SOU	JGHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE? YES NO		NAME OF OFFICEHOLDER OF	CANDIDATE	OFFICE SOU	JGHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. E	BOX)						
CITY STATE ZIP	CODE AREA CODE/PHONE		Att	ach continuat	ion sheets if i	necessary	

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

 $\begin{array}{c} \text{SUMMARY PAGE} \\ \text{Statement covers period} \\ \text{from} \quad \begin{array}{c} 10/01/2023 \\ \text{through} \quad \begin{array}{c} 12/31/2023 \\ \end{array} \end{array} \begin{array}{c} \text{CALIFORNIA} \\ \text{FORM} \end{array} \begin{array}{c} \textbf{460} \\ \text{I.D. NUMBER} \end{array}$

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma and Miner

1459148

No Recall, Parents Protecting our Kids Against the Recall of	OUS	D Boardmembers Lede	sma	and Miner	1459148
Contributions Received		Column A TOTAL THIS PERIOD (FROMATTACHED 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	\$	26,215.00	\$	64,624.75	1/1 through 6/30 7/1 to Date
2. Loans Received Schedule B, Line 3		0.00		0.00	1/1 through 6/30 //1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	26,215.00	\$	64,624.75	20. Contributions Received \$ \$
4. Nonmonetary Contributions		692.75		692.75	21. Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	26,907.75	\$	65,317.50	Made \$ \$
Expenditures Made					Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$	9,648.90	\$	46,556.65	Candidates
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	9,648.90	\$	46,556.65	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)				16,428.14	Date of Election Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3		692.75		692.75	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$	21,769.79	\$	63,677.54	\$
Current Cash Statement					\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	1,502.00	То	calculate Column B, add	
13. Cash Receipts Column A, Line 3 above		26,215.00		nounts in Column A to the rresponding amounts	
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	m Column B of your last	*Amounts in this section may be different from amounts reported in Column B.
15. Cash Payments Column A, Line 8 above		9,648.90		oort. Some amounts in lumn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	18,068.10	fig	ures that should be btracted from previous	
If this is a termination statement, Line 16 must be zero.			ре	riod amounts. If this is a first report being filed	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for	this calendar year, only rry over the amounts	
Cash Equivalents and Outstanding Debts			fro	m Lines 2, 7, and 9 (if y).	
18. Cash Equivalents See instructions on reverse	\$	0.00			
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	16,428.14			
			I		FPPC Form 460 (Ja

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

Schedule	A	A	de man ha assurdad			SCHEDULE A		
Monetary	Monetary Contributions Received		ts may be rounded whole dollars.	Statement coverage from10/01/20		CALIFORNIA 460 FORM		
SEE INSTRUCTIO	ONS ON REVERSE			through	023 F	Page4 of17		
NAME OF FILER					1.1	D. NUMBER		
No Recall, I	Parents Protecting our Kids Against the Recall of	OUSD Boardm	embers Ledesma and Miner		1	459148		
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 DA CALENDAR YEAR (JAN. 1 - DEC. 31)	TO DATE		
10/12/2023	Matt Barone	⊠IND □COM □OTH □PTY □SCC	Engineer South Coast Automation Systems	250.00	1,250	.00		
10/18/2023	Cynthia R. Thacker		Retired Retired	125.00	125	.00		
11/13/2023	Matt Barone	⊠IND □COM □OTH □PTY □SCC	Engineer South Coast Automation Systems	250.00	1,250	.00		
11/13/2023	John Gyllenhammer		Manager Amazon	100.00	100	.00		
11/17/2023	Jen Backoff	☑IND □COM □OTH □PTY □SCC	Registered Nurse Kaiser Permanente	150.00	150	.00		
			SUBTOTAL\$	875.00				
1. Amount re	A Summary ceived this period – itemized monetary contributions.		Φ.	25 075 00	IND – Ind	ividual ecipient Committee		

(Include all Schedule A subtotals.)\$ ____

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) www.fppc.ca.gov

PTY - Political Party

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

SCC - Small Contributor Committee

25,975.00

26,215.00

3. Total monetary contributions received this period.

Amounts may be rounded

SCHEDULE A	(CONT.)
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Monetary Contributions Received A		Amounts may to whole o		Statement cover 10/01/	2023	FORM 460	
IAME OF FILER				tillough	•	D. NUMBER	
To Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma and Miner 1459148							
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 DA CALENDAR YEAI (JAN. 1 - DEC. 31	R TO DATE	
11/17/2023	Jolynn Mahoney		Insurance Agent Huggins Dreckman	500.00	500	.00	
11/17/2023	Mary Mccarthy		Retired Retired	100.00	100	.00	
11/27/2023	Pamela Battaglia		Registered Nurse Pamela Battaglia	100.00	300	.00	
11/27/2023	Denise L. Bittel		Retired Retired	2,500.00	2,500	.00	
11/27/2023	Michelle J. Stephens		Reception The Darling Center	100.00	100	.00	
	SUBTOTAL\$ 3,300.00						

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A	(CONT.)
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CALIFORNIA ACO

Statement covers period

		from10/01/	2023	FORM 400		
				through12/31/	²⁰²³ Page	e6 of17
NAME OF FILER					I.D.1	IUMBER
No Recall, Pa	arents Protecting our Kids Against the Recall of	OUSD Boardme	mbers Ledesma and Miner		145	9148
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)	PER ELECTION TO DATE (IF REQUIRED)
11/27/2023	Cyndi Tran	☑IND □COM □OTH □PTY □SCC	Homemaker None	100.00	100.00	
11/28/2023	Wayne Lindholm	IND COM OTH PTY SCC	Retired Retired	500.00	500.00	
11/28/2023	Robert Loewen		Retired Retired	500.00	500.00	
11/28/2023	Glenn Woody	☑IND □COM □OTH □PTY □SCC	Retired Retired	1,000.00	1,000.00	
11/28/2023	Charlie Zhang	☑IND □COM □OTH □PTY □SCC	CEO Zion Enterprises	1,000.00	1,000.00	
			SUBTOTAL \$	3,100.00		

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

	SCHEDULE A (CONT.)
Statement covers period	CALIFORNIA 460
n10/01/2023	FORM TOO

through_	12/31/2023	Page _	7	_ of _	17
		I.D. NUN	/IBER		

from

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma and Miner

1459148

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)	PER ELECTION TO DATE (IF REQUIRED)
11/29/2023	David Bolog		Contros Mechanic Los Angeles Department Of Water And Power	200.00	200.00	
11/29/2023	Laura Felix		Retired None	500.00	500.00	
11/29/2023	Courtney Stilwell		Teacher Orange Unified School District	500.00	600.00	
12/04/2023	David Bahnsen		Wealth Advisor The Bahnsen Group	500.00	500.00	
12/05/2023	Darren Gallaway		Insurance TRC Financial	500.00	500.00	
			SUBTOTAL\$	2,200.00		

*Contributor Codes

IND - Individual

NAME OF FILER

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

PTY - Political Party

SCC – Small Contributor Committee

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.) CALIFORNIA 460

Statement covers period

				from10/01/	2023	FO	RM TO	U
				through12/31/	2023	Page	8 of <u>17</u>	_
NAME OF FILER			<u> </u>			I.D. NUM	BER	
No Recall, Pa	arents Protecting our Kids Against the Recall of	OUSD Boardme	mbers Ledesma and Miner			145914	8	
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 CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)	
12/05/2023	Mesa Management - Steve Mensinger	□IND □COM ☑OTH □PTY □SCC		5,000.00	5,0	00.00		
12/09/2023	Louis A Arcangelo	IND COM OTH PTY SCC	Retired Retired	500.00	5	00.00		
12/12/2023	Matt Barone		Engineer South Coast Automation Systems	250.00	1,2	50.00		
12/13/2023	Orco Block & Hardscape - Rick Muth	□IND □COM ☑OTH □PTY □SCC		2,000.00	2,0	00.00		
12/13/2023	Linda J Shown		Homemaker None	2,000.00	2,0	00.00		
			SUBTOTAL	9,750.00				

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded

Statement covers period

CALIFORNIA 4 CO

		to whole o	dollars.	from10/01/	2023	FORM 460		
				through12/31/	2023	Page _	9 of <u>17</u>	
NAME OF FILER						I.D. NUN	/IBER	
No Recall, Pa	arents Protecting our Kids Against the Recall of	OUSD Boardme	mbers Ledesma and Miner			14591	48	
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 CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)	
12/19/2023	Harriet Harris		Retired Retired	500.00	50	00.00		
12/19/2023	Fred Whitaker		Attorney Cummins White	5,000.00	5,00	00.00		
12/20/2023	Ware Disposal Inc	☐IND ☐COM ☑OTH ☐ PTY ☐SCC		250.00	25	50.00		
12/21/2023	John Carvelli		Retired Retired	500.00		00.00		
12/28/2023	Jeffrey Armour	IND COM OTH PTY SCC	Executive Armour Properties	500.00	50	00.00		
			SUBTOTAL	\$ 6,750.00				

*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

Schedule C **Nonmonetary Contributions Received**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

		SCHEDULE C
State	ment covers period	CALIFORNIA 160
from	10/01/2023	FORM 400
through	12/31/2023	Page10 of17
		I.D. NUMBER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma and Miner

1459148 CUMULATIVE TO IF AN INDIVIDUAL, ENTER AMOUNT/ PER ELECTION FULL NAME, STREET ADDRESS AND CONTRIBUTOR **DESCRIPTION OF** DATE DATE OCCUPATION AND EMPLOYER FAIR MARKET TO DATE ZIP CODE OF CONTRIBUTOR CODE * **GOODS OR SERVICES** CALENDAR YEAR **RECEIVED** (IF SELF-EMPLOYED, ENTER VALUE (IF REQUIRED) (IF COMMITTEE, ALSO ENTER I.D. NUMBER) (JAN 1 - DEC 31) NAME OF BUSINESS) 12/13/2023 Linda Cone Outdoor Signs 692.75 892.08 Retired X IND Retired \Box COM \square OTH □PTY □SCC □ COM OTH □ PTY SCC \square IND COM OTH □PTY □SCC \square OTH □ PTY □SCC

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 692.75

692.75

Schedule C Summary

 Amount received this period – itemized nonmonetary contributions. 	
(Include all Schedule C subtotals.)	\$ 692.75
2. Amount received this period – unitemized nonmonetary contributions of less than \$100	\$ 0.00
3 Total nonmonetary contributions received this period	

IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH – Other (e.g., business entity) PTY - Political Party

SCC - Small Contributor Committee

*Contributor Codes

Schedule E
Payments Made

	SCHEDULE E
Statement covers period	CALIFORNIA 160
from10/01/2023	FORM TOU
through12/31/2023	Page of
	I.D. NUMBER
	1459148

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma and Miner

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
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	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
FND	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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	(OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Capitol Tech Solutions	OFC				226.05
Campaign Compliance Group	PRO				450.00
Bank of America	OFC				16.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL\$ 692.05

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)\$_	9,648.90
2. Unitemized payments made this period of under \$100\$_	0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)\$_	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	9,648.90

Schedule E	
(Continuation Sheet))
Payments Made	

Statement covers peri	CALIFORNIA 16
from10/01/2023	FORM TOU
through12/31/2023	Page12 of17
	I.D. NUMBER
	1459148

WEB information technology costs (internet, e-mail)

SEE INSTRUCTIONS ON REVERSE

campaign literature and mailings

NAME OF FILER

LIT

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma and Miner

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

print ads

PRT

CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs MTG meetings and appearances campaign consultants RFD returned contributions CNS CTB contribution (explain nonmonetary)* OFC office expenses 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 polling and survey research staff/spouse travel, lodging, and meals fundraising events POL independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor POS legal defense professional services (legal, accounting) VOT voter registration

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Campaign Compliance Group	PRO			450.0
Capitol Tech Solutions	OFC			286.7
Verde Consulting Group LLC	CNS			5,000.0
Bank of America	OFC			16.0
Capitol Tech Solutions	OFC			316.2

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 6,068.95

Schedule E	
(Continuation Sheet))
Payments Made	

Statemen	t covers period	CALIFORNIA 160
from1	0/01/2023	FORM 400
through1	2/31/2023	Page13 of17
		I.D. NUMBER
		1459148

SEE INSTRUCTIONS ON REVERSE

campaign literature and mailings

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma and Miner

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 CNS CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries PET petition circulating CVC civic donations TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals polling and survey research staff/spouse travel, lodging, and meals fundraising events

independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services LEG legal defense professional services (legal, accounting) VOT voter registration

> PRT print ads

TSF transfer between committees of the same candidate/sponsor

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
Orange County Registrar of Voters	FIL		1,223.65
Orange County Registrar of Voters	FIL		1,223.65
Capitol Tech Solutions	OFC		440.60

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

SUBTOTAL \$

2,887.90

Schedule F Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

1459148

SEE INSTRUCTIONS ON REVERSE

campaign literature and mailings

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma and Miner

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees phone banks TRC candidate travel, lodging, and meals fundraising events 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 PRO professional services (legal, accounting) VOT voter registration

PRT print ads

TSF transfer between committees of the same candidate/sponsor

WEB 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
Verde Consulting Group LLC	CNS	5,000.00	0.00	5,000.00	0.00
Campaign Compliance Group	PRO	0.00	545.00	0.00	545.00
Sierra Pacific Strategies	CNS	0.00	5,000.00	0.00	5,000.0
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS S	5,000.00	5,545.00	5,000.00	5,545.00

Schedule F Summary

www.fppc.ca.gov

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

	,
ment covers period	CALIFORNIA 460
12/31/2023	Page15 of17
	I.D. NUMBER
	1459148

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma and Miner

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
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	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
FND	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 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
Sierra Pacific Strategies	CMP Reimbursement: See Schedule G for Details	0.00	3,264.70	0.00	3,264.70
Bell, McAndrews & Hiltachk, LLP	PRO	0.00	2,368.44	0.00	2,368.44
Frank Rodriguez	CNS	0.00	2,000.00	0.00	2,000.00
Ryan May	CNS	0.00	3,250.00	0.00	3,250.00
	SUBTOTALS	\$ 0.00	10,883.14	0.00	\$ 10,883.14

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

Amounts may be rounded to whole dollars.

	SCHEDULE G
Statement covers period	CALIFORNIA 160
from10/01/2023	FORM 40U
through	Page16 of17
	I.D. NUMBER
	1459148

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma and Miner

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Linda Cone

CO	DES: If one of the following codes accurately describe	es the	payment, you may enter the code.	Otherwise	e, describe the payment.
CMP	campaign paraphernalia/misc.	MBR	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
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
FND	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.

CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
CMP	Outdoor Signs	692.75

* 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.

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

692.75

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

Amounts may be rounded to whole dollars.

	SCHEDULE G
Statement covers period	CALIFORNIA / CO
from10/01/2023	FORM 40U
through	Page17 of17
-	I.D. NUMBER
	1459148

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma and Miner

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Sierra Pacific Strategies

	,,		p-1,, y,		-,
CMP	campaign paraphernalia/misc.	MBR	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
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

FND fundraising events

POL polling and survey research

TRS staff/spouse travel, lodging, and meals

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

IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between PRO professional services (legal, accounting) VOT voter registration

T campaign literature and mailings PRT print ads WEB information techn

TSF transfer between committees of the same candidate/sponsor

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
DSW Enterprises	CMP	Outdoor Signs	1,896.65
Southwest Airlines	TRS	MKlemin 11/20 SMF-SNA 11/21 SNA-SMF for Campaign Meetings	601.96

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

2,498.61

^{*} 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.

D	asiniant Committee		_		COVER PAGE		
C	ecipient Committee ampaign Statement over Page overnment Code Sections 84200-84216.5)			Date Stamp	CALIFORNIA 460 FORM		
(0,	overnment Gode Gections 04200-04210.3)	Statement covers period from01/01/2024	Date of election if applicable: (Month, Day, Year)	01/25/2024 12:33:53 Filing ID: 209700931	Page1 of14 For Official Use Only		
SE	E INSTRUCTIONS ON REVERSE	through01/20/2024	03/05/2024	2001-00001			
1.	Type of Recipient Committee: All Committees - C	omplete Parts 1, 2, 3, and 4.	2. Type of Statement:				
	 State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee 	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)		Specia Supple ermination) Statem	rly Statement I Odd-Year Report mental Preelection ent - Attach Form 495		
3.	Committee Information	D. NUMBER	Treasurer(s)				
	COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE	1459148	NAME OF TREASURER				
	No Recall, Parents Protecting our Kids Agai Boardmembers Ledesma and Miner	Jen Slater MAILING ADDRESS					
	STREET ADDRESS (NO P.O. BOX)		CITY	STATE ZIP COD	DE AREA CODE/PHONE		
	CITY STATE ZIP C	ODE AREA CODE/PHONE	NAME OF ASSISTANT TREASUR	RER, IF ANY			
	MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.	вох	MAILING ADDRESS				
	CITY STATE ZIP C	ODE AREA CODE/PHONE	CITY	STATE ZIP COD	DE AREA CODE/PHONE		
	OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRI	ESS			
4.	Verification I have used all reasonable diligence in preparing and reviewir under penalty of perjury under the laws of the State of Californ Executed on 01/25/2024 Date	nia that the foregoing is true and correct. By	Signature of Treasurer or Assistant T		s is true and complete. I certify		
	Executed on	By <u>Chris Winn</u> Signature of Co	ntrolling Officeholder, Candidate, State Measure Prop	conent or Responsible Officer of Sponsor	_		
	Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, Sta	ate Measure Proponent	<u> </u>		
	Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, Sta	ate Measure Proponent	— FPPC Form 460 (Jan/2016)		

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2							
CALIF	FORNIA DRM	4	160				
Page _	2	of _	14				

Officeholder or Candidate Controlled Committee			5. Primarily Formed Ballot Measure Committee				
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE Recall of OUSD Boards	nembers Lede	esma and Min	er	
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	ICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICT	TION nified: Oran	nge County	SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP		Identify the controlling o	fficeholder, ca	andidate, or st	tate measure	proponent, if any.
			NAME OF OFFICEHOLDER, CA	Andidate, or P	ROPONENT		
Related Committees Not Included in this St not included in this statement that are controlled by you contributions or make expenditures on behalf of your ca	or are primarily formed to receive		OFFICE SOUGHT OR HELD			DISTRICT NO.	IF ANY
COMMITTEE NAME	I.D. NUMBER	-	Deins with Formed Co	1: -1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	a a la a la la m		
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Ca officeholder(s) or candidate				
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. I	BOX)		NAME OF OFFICEHOLDER OF	CANDIDATE	OFFICE SOU	JGHT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP	CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OF	CANDIDATE	OFFICE SOU	JGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OF	CANDIDATE	OFFICE SOU	JGHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE? YES NO		NAME OF OFFICEHOLDER OF	CANDIDATE	OFFICE SOU	JGHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. E	BOX)						
CITY STATE ZIP	CODE AREA CODE/PHONE		Att	ach continuat	ion sheets if i	necessary	

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma and Miner

1459148

Contributions Received		Column A TOTALTHIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTALTO DATE		Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions Schedule A, Line 3	\$	38,180.00	\$	38,180.00	
2. Loans Received Schedule B, Line 3		0.00		0.00	1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	38,180.00	\$	38,180.00	20. Contributions Received \$ \$
4. Nonmonetary Contributions		0.00		0.00	21 Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	38,180.00	\$	38,180.00	Made \$ \$
Expenditures Made					Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$	46,215.27	\$	46,215.27	Candidates
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	46,215.27	\$	46,215.27	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3		2,740.06		19,168.20	Date of Election Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3		0.00		0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$	48,955.33	\$	65,383.47	\$
Current Cash Statement					/\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	18,068.10	То	calculate Column B, add	
13. Cash Receipts		38,180.00		nounts in Column A to the orresponding amounts	
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	om Column B of your last	*Amounts in this section may be different from amounts reported in Column B.
15. Cash Payments Column A, Line 8 above		46,215.27		port. Some amounts in plumn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	10,032.83	fig	jures that should be ibtracted from previous	
If this is a termination statement, Line 16 must be zero.			ре	eriod amounts. If this is e first report being filed	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for	r this calendar year, only arry over the amounts	
Cash Equivalents and Outstanding Debts			fro	om Lines 2, 7, and 9 (if ny).	
	\$	0.00		• •	
18. Cash Equivalents See instructions on reverse	Ψ				

Schedule :	A				SCHEDULE				
Monetary	Contributions Received		ts may be rounded whole dollars.	Statement cover from01/01/2		CALIFORNIA 460 FORM			
SEE INSTRUCTIO	ONS ON REVERSE			through01/20/2	024	Page4 of14			
NAME OF FILER						I.D. NUMBER			
No Recall, I	Parents Protecting our Kids Against the Recall of	OUSD Boardm	embers Ledesma and Miner			1459148			
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 D CALENDAR YEA (JAN. 1 - DEC. 3	AR TO DATE			
01/03/2024	Lincoln Club of Orange County State PAC (ID# 970861)	□IND □COM □OTH □PTY □SCC		30,500.00	30,50	0.00			
01/06/2024	Mary Dirk		Vice President Troy Group	1,000.00	1,00	0.00			
01/06/2024	Patrick Dirk		CEO Troy Group	1,000.00	1,00	0.00			
01/06/2024	Hedieh Mirahmadi	⊠IND □COM □OTH □PTY □SCC	Retired Retired	250.00	25	0.00			
01/07/2024	David Mooberry	IND COM OTH PTY SCC	Retired Retired	200.00	20	0.00			
			SUBTOTAL	\$ 32,950.00					
	A Summary					butor Codes			

COM – Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

PTY - Political Party

38,180.00

SCC - Small Contributor Committee

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

				from01/01/	2024	FORM	400
				through 01/20/	2024 P	age5	_ of14
NAME OF FILER					1.	D. NUMBER	
No Recall, Pa	rents Protecting our Kids Against the Recall of	OUSD Boardme	mbers Ledesma and Miner		1	459148	
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 DA CALENDAR YEAR (JAN. 1 - DEC. 31	₹	ER ELECTION TO DATE F REQUIRED)
01/08/2024	Jeff Barke	IND COM OTH PTY SCC	Physician Jeff Barke, MD	250.00	250	.00	
01/08/2024	Glen And Brenda Collard	⊠IND □COM □OTH □PTY □SCC	Retired Retired	100.00	100	.00	
01/08/2024	SA Recycling - George Adams	□IND □COM ☑OTH □PTY □SCC		1,000.00	1,000	.00	
01/09/2024	David Horowitz	☑IND □COM □OTH □PTY □SCC	Chairman Horowitz Management Inc	1,000.00	1,000	.00	
01/09/2024	Curt Pringle	☑IND □COM □OTH □PTY □SCC	President Curt Pringle And Associates	500.00	500	.00	
			SUBTOTAL	2,850.00			

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may to whole o		Statement cove	•	california 460 form	
				through01/20/	2024	Page6 of14	_
IAME OF FILER						I.D. NUMBER	
o Recall, Pa	arents Protecting our Kids Against the Recall of	OUSD Boardme	mbers Ledesma and Miner			1459148	
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 I CALENDAR YE (JAN. 1 - DEC.	AR TO DATE	
01/10/2024	William Euell		Retired Retired	100.00	10	00.00	
01/12/2024	James Righeimer	IND COM OTH PTY SCC	CEO Arbor Capital Partners	500.00	50	00.00	
01/16/2024	Carolyn K. Ben	☑IND □COM □OTH □PTY □SCC	Owner Aqua Ben	500.00	50	00.00	
01/16/2024	Angela M Brown		Retired Retired	100.00		00.00	
01/17/2024	Kenneth Chinn	☑IND □COM □OTH □PTY □SCC	Assistant Pastor Calvary Chapel East Anaheim	1,000.00	1,00	00.00	
			SUBTOTALS	2,200.00			

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Schedule A (Continuation Sheet)

SCHEDULE A (CONT.)

Monetary Contributions Received		to whole		from01/01/	2024	FORM 460		
				through01/20/	2024	Page _	7 of14	
NAME OF FILER			L			I.D. NUI	MBER	
No Recall, Pa	arents Protecting our Kids Against the Recall of	OUSD Boardme	mbers Ledesma and Miner			14591	48	
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 CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)	
01/20/2024	David Dimas		Consultant David Dimas	100.00	1	.00.00		
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						
		☐IND ☐COM ☐OTH ☐ PTY ☐SCC						
		□IND □COM □OTH □PTY □SCC						
		☐IND ☐COM ☐OTH ☐ PTY ☐SCC						
			SUBTOTALS	\$ 100.00				

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

Schedule E
Payments Made

		SCHEDULE E
	Statement covers period	CALIFORNIA 460
	from01/01/2024	FORM TOO
	through01/20/2024	Page8 of14
_		I.D. NUMBER
		1459148

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma and Miner

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
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	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
FND	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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Campaign Compliance Group	PRO			545.00
Sierra Pacific Strategies	CNS			5,000.00
Sierra Pacific Strategies	CMP	Reimbursement	: See Schedule G for Details	3,264.70

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTAL\$ 8,	,809.70
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Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)\$	46,165.27
2. Unitemized payments made this period of under \$100\$	50.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)\$	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A. Line 6.)	46,215.27

Schedule E	
(Continuation Sheet))
Payments Made	

Stater	nent covers period	CALIFORNIA 160
from	01/01/2024	FORM 400
through _	01/20/2024	Page9 of14
		I.D. NUMBER
		1459148

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma and Miner

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Hashim Digital	WEB	Digital Advertising Services	10,000.00
Ryan May	CNS		3,250.00
Frank Rodriguez	CNS		2,000.00
JMJ Associates	CNS		3,000.00
The Monaco Group	LIT		402.04

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 18,652.04

Schedule E	
(Continuation Sheet)	
Payments Made	

Stateme	ent covers period	CALIFORNIA 160
from	01/01/2024	FORM 400
through	01/20/2024	Page10 of14
		I.D. NUMBER
		1459148

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma and Miner

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

campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs MTG meetings and appearances campaign consultants RFD returned contributions CNS CTB contribution (explain nonmonetary)* OFC office expenses 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 staff/spouse travel, lodging, and meals polling and survey research fundraising events POL TRS independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor POS LEG legal defense professional services (legal, accounting) VOT voter registration WEB information technology costs (internet, e-mail) campaign literature and mailings PRT LIT print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
The Monaco Group	LIT		598.69
Bell, McAndrews & Hiltachk, LLP	PRO		2,368.44
Cardinal Consult	CMP	Voter Outreach	5,736.40
- Hashim Digital	WEB	Digital Advertising Services	10,000.00

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

SUBTOTAL \$

18,703.53

Schedule F Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma and Miner

1459148

CO	DES: If one of the following codes accurately describe	s the	payment, you may enter the code.	Otherwise	e, describe the payment.
CMP	campaign paraphernalia/misc.	MBR	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
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
FND	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)

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
Campaign Compliance Group	PRO	545.00	0.00	545.00	0.00
Sierra Pacific Strategies	CNS	5,000.00	0.00	5,000.00	0.00
Sierra Pacific Strategies	CMP	3,264.70	0.00	3,264.70	0.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS S	\$ 8,809.70	0.00	8,809.70	0.00

Schedule F Summary

www.fppc.ca.gov

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

	` ,
Statement covers perio	
from01/01/2024	FORM TOO
through	Page 12 of 14
	I.D. NUMBER
	1459148

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma and Miner

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
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	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
FND	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 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
Bell, McAndrews & Hiltachk, LLP	PRO	2,368.44	0.00	2,368.44	0.00
Frank Rodriguez	CNS	2,000.00	0.00	2,000.00	0.00
Ryan May	CNS	3,250.00	0.00	3,250.00	0.00
Cardinal Consult	CMP Voter Outreach	0.00	2,868.20	0.00	2,868.20
	SUBTOTALS	\$ 7,618.44 \$	2,868.20	7,618.44	2,868.20

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

Statement covers period	CALIFORNIA 460
from01/01/2024	FORM TOO
through01/20/2024	Page 13 of 14
	I.D. NUMBER
	1459148

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma and Miner

11071

CODES: If one	of the following	codes accurately	describes the i	pavment, vou mav	enter the code.	Otherwise.	describe the payment.
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CMP	campaign paraphernalia/misc.	MBR	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
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
FND	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 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
Cygnal	POL	0.00 16,300.00		0.00	16,300.00
	\$ 0.00	16,300.00	0.00	\$ 16,300.00	

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

Amounts may be rounded to whole dollars.

	SCHEDULE G
Statement covers period	CALIFORNIA 160
from01/01/2024	FORM 40U
through01/20/2024	Page 14 of 14
	I.D. NUMBER
	1450140

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No Recall, Parents Protecting our Kids Against the Recall of OUSD Boardmembers Ledesma and Miner

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Hashim Digital

•	The first of the following december the payment, you may enter the december the payment.						
CMP	campaign paraphernalia/misc.	MBR	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		
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		
FND	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		

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

^{*} 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
Meta Inc	WEB	Digital Ads	7,500.00
Meta Inc	WEB	Digital Ads	7,500.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

15,000.00

LEG PRO professional services (legal, accounting) legal defense VOT voter registration campaign literature and mailings PRT print ads

WEB information technology costs (internet, e-mail)

^{*} 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.