Destate of Committee					COVER PAGE
Recipient Committee Campaign Statement Cover Page			Date Stamp RECEIV P.DS ALGELE	EU B) F	orm 460
	Statement covers period from 1/1/2022	Date of election if applicable: (Month, Day, Year)	2022 AUG -	Page PA 12 13	of17 For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through <u>6/30/2022</u>	11/8/2022	CAMPAIGN	FINANCE	
1. Type of Recipient Committee: All Committees - Co	emplete 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 To Amendment (Explain b	et [Quarterly Stal	tement Year Report
3 Committee Information	D. NUMBER	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)	1447002	NAME OF TREASURER			
Triston Ezidore for Culver City Unified School Boar	d 2022	Nancy Barba			
•		MAILING ADDRESS	•		
STREET ADDRESS (NO P.O. BOX)		CITY	STATE	ZIP CODE	AREA CODE/PHONE
		Culver City	CA	90232	415-420-0992
CITY STATE ZIP CO		NAME OF ASSISTANT TREASUR	RER, IF ANY		
Culver City CA 902: MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO		MAILING ADDRESS			
CITY STATE ZIP CO	ODE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDR	ESS		
triston.ezidore@gmail.com					
4. Verification					
I have used all reasonable diligence in preparing and review	ing this statement and to the best of my	knowledge the information contained	d herein and in the atta	ched schedules is	s true and complete. I
certify under penalty of perjury under the laws of the State of	f California that the foregoing is true and				
Executed on 7/30/2022	Ву	Assistan	t Treasurer		-
Executed on 7/30/2022	By Signature of Con		roponent or Responsible Office	er of Sponsor	
Executed onDate	Ву	Signature of Controlling Officeholder, Candidate,	State Measure Proponent		
Executed on	Ву	Signature of Controlling Officeholder, Candidate	State Measure Proponent		

CLEAR FORM



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

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2	
FORM 460	
Page 2 of 17	

. Officeholder or Candidate Controlled Comm	nittee		6.	. P	rimarily Formed Ballot	Measure (Committee		
NAME OF OFFICEHOLDER OR CANDIDATE				N	AME OF BALLOT MEASURE				
Triston Ezidore									
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIST	RICT NUMBER IF A	PPLICABLE)		B	ALLOT NO. OR LETTER	JURISDICTIO	ON		SUPPORT
Culver City Unified School District Board Member	•								OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP Culver City CA 90230					dentify the controlling office	older, candid	late, or state	measure pro	oponent, if any.
				N	IAME OF OFFICEHOLDER, CAN	DIDATE, OR P	ROPONENT		
Related Committees Not Included in this Sta not included in this statement that are controlled by you o contributions or make expenditures on behalf of your cand	r are primarily form			7	OFFICE SOUGHT OR HELD			DISTRICT N	O. IF ANY
COMMITTEE NAME	I.D. NUMBER			-					
NAME OF TREASURER	CONTROLLED O	COMMITTEE?	7.	. F	Primarily Formed Candi fficeholder(s) or candidate(s) i	date/Office for which this	eholder Co committee is p	mmittee primarily form	List names of ned.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.				N	AME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOU	IGHT OR HEL	D SUPPORT □ OPPOSE
		EA CODE/PHONE		N	IAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOL	JGHT OR HEL	D SUPPORT
COMMITTEE NAME	I.D. NUMBER			N	IAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOL	JGHT OR HEL	D SUPPORT OPPOSE
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO P.O.		NO NO		N	IAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOL	IGHT OR HEL	D SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE AREA CODE/PHONE Attach continuation sheets if necessary									

PRINT FORM

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

	SUMMARY PAGE
Statement covers period from 1/1/2022	CALIFORNIA 460
through <u>6/30/2022</u>	Page 3 of 17
	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Triston Ezidore for Culver City Unified School Board 2022 1447002 Column A Column B Calendar Year Summary for Candidates Contributions Received TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) CALENDAR YEAR TOTAL TO DATE Running in Both the State Primary and **General Elections** 12.111.00 1. Monetary Contributions Schedule A, Line 3 1/1 through 6/30 7/1 to Date 282.50 282.50 2. Loans Received...... Schedule B, Line 3 20. Contributions 12,111.00 Received 2,715.31 4. Nonmonetary Contributions...... Schedule C, Line 3 21. Expenditures n/a 14,826.31 Made **Expenditures Made Expenditure Limit Summary for State** 1.020.07 6. Payments Made...... Schedule E. Line 4 Candidates 0 0 Loans Made...... Schedule H. Line 3 22. Cumulative Expenditures Made* 1,020.07 8. SUBTOTAL CASH PAYMENTS...... Add Lines 6 + 7 (if Subject to Voluntary Expenditure Limit) 9. Accrued Expenses (Unpaid Bills)Schedule F. Line 3 Date of Election Total to Date (mm/dd/yy) 10. Nonmonetary Adjustment......Schedule C. Line 3 **Current Cash Statement** 12. Beginning Cash Balance Previous Summary Page, Line 16 To calculate Column B. 12.111.00 add amounts in Column 13. Cash Receipts Column A, Line 3 above A to the corresponding 100.00 *Amounts in this section may be different from amounts 14. Miscellaneous Increases to Cash Schedule I, Line 4 amounts from Column B reported in Column B. 1,020.07 of your last report. Some amounts in Column A may 11.190.93 16. ENDING CASH BALANCEAdd Lines 12 + 13 + 14, then subtract Line 15 be negative figures that should be subtracted from If this is a termination statement, Line 16 must be zero. previous period amounts. If this is the first report being filed for this calendar year. 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ only carry over the amounts from Lines 2, 7, and 9 (if **Cash Equivalents and Outstanding Debts** any). 19. Outstanding Debts Add Line 2 + Line 9 in Column B above FPPC Form 460 (Jan/2016))

CLEAR FORM

PRINT FORM

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

Schedule A			ts may be rounded			SCHEDULE A		
	Contributions Received	to	whole dollars.	Statement cov	ers period	CALIFORNIA 460		
SEE INSTRUCTION	ONS ON REVERSE			through <u>6/30/202</u>	2	Page	4 of 17	
NAME OF FILER Triston Ezide	ore for Culver City Unified School Board 2022		 			I.D. NU 144700	i	
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)	
	Please see Schedule A Monetary Contributions starting on the following page based on tracking excel sheet.	□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						
			SUBTOTAL	\$	27.12		•	
Amount re (Include al	A Summary ceived this period – itemized monetary contributions il Schedule A subtotals.)		\$		IND- COM OTH PTY	(other – Other – Politica	ial ient Committee than PTY or SCC) (e.g., business entity)	
(Add Lines	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Co	lumn A, Line 1	.) TOTAL \$	2,211.00 F	PPC Advice: advi		C Form 460 (Jan/2016)) .ca.gov (866/275-3772)	

Schedule A **Monetary Contributions Received**

Triston Exidore for Culver City Unified School Board 2022

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period from 1/1/2022	CALIFORNIA 460
through 6/30/2022	Page 5 of 17
	I.D. NUMBER 1447002

DATE FULL NAME, STREET ADDRESS AND ZIP RECEIVED CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NU		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)
Alyssa Mosiander						
5/16/2022 Las Vegas NV 89149		IND	artist, Self	\$100.00	\$100.00	
Danny Roman						
5/17/2022 West hollywood CA 90069		IND	Ceo, Bikes and Hikes LA	\$100.00	\$100.00	
Allen V Huynh	Phoenix		IT Manager, Deloitte			
5/17/2022 AZ 85085		IND	Services LP	\$100.00	\$100.00	
Bronwyn Jamrok (Culver City		Not Employed, Not			
5/17/2022 CA 90232		IND	Employed	\$100.00	\$100.00	
Fatima Harmi e Los	Angeles CA		Executive Assistant, HUM			
5/17/2022 90034		IND	Nutrition	\$100.00	\$100.00	
Les Guthman	New York NY		Director/Producer, XPLR			
5/18/2022 10024		IND	Productions	\$100.00	\$100.00	
Zakeisha Jones	Las		Teacher, Clark County			
5/21/2022 Vegas NV 89117		IND	School District	\$100.00	\$100.00	
Paavo Monkkonen	Culver City					-
5/22/2022 CA 90230		IND	Professor, UCLA	\$100.00	\$100.00	
Patrick Meighan	Culver City		Writer, "Family Guy" /			
5/25/2022 CA 90232		IND	Fox Animation	\$100.00	\$100.00	
			SUBTOTAL \$	\$900.00		

Schedule A Summary

 Amount received this period – itemized monetary contributions. 	
(Include all Schedule A subtotals.)	\$10,177.00
2. Amount received this period – unitemized monetary contributions of less than \$100	\$2,034.00
3. Total monetary contributions received this period.	
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)	\$12,211.00

'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.

SCHEDULE A (CONT.)

Statement covers period from 1/1/2022	CALIFORNIA 460
through 6/30/2022	Page 6 of 17
<u> </u>	I.D. NUMBER

NAME OF FILER

Triston Ezidore for Culver City Unified School Board 2022

1447002

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)
	Megan Goodwin Culver Cit	,	Not Employed, Not			
5/28/2022	CA 90232	IND	Employed	\$100.00	\$100.00	
	Bonnie Hammerschlag		Not Employed, Not			
5/28/2022	Bethesda MD 20817	IND	Employed	\$100.00	\$100.00	
	LaToya Baldwin Clark CULVER					
5/30/2022	CITY CA 90230	IND	Faculty, UCLA	\$100.00	\$100.00	
	prisca GLoor Los Angeles CA		School Psychologist, Vista			
5/31/2022	90066	IND	Del Mar	\$100.00	\$100.00	
6/4/2022	Rick Cole PASADENA CA 911	04 IND	Retired, None	\$100.00	\$100.00	
	Peter Rockwell Culver Ci	ty	Not Employed, Not			
6/4/2022	CA 90230-4526	IND	Employed	\$100.00	\$100.00	
	Evan Smith CULVER CITY CA		Forester, The Conservation			
6/4/2022	90232-3226	IND	Fund	\$100.00	\$100.00	
	Kyle Valentic Culver City CA		Graphic Designer, Siegel and			
6/4/2022	90232	IND	Gale	\$100.00	\$100.00	
	jennifer c chen Culver City	CA	Physician, Los Angeles			
6/9/2022	90232	IND	county	\$100.00	\$100.00	
	Lorna Johnson Beverly Hills (A				
6/12/2022	90210	IND	Ceo, Self	\$100.00	\$100.00	
	C K Hart Culver City C	A	Accountant, LA County NHM			
6/5/2022	90230	IND	Fdn	\$119.00	\$119.00	

*Contributor Codes (ND - Individual

COM - Recipient Committee
(other than FTY or SCC)
OTH - Other (e.g., business entity)
FTY - Political Parry
SCC - Small Contributor Committee

NAME OF FILER

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from 1/1/2022	CALIFORNIA 460			
through 6/30/2022	Page 7 of 17			
	I.D. NUMBER			

Triston E2	dore for Culver City Unified School Board 2022					1447002
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)
	Bubba Fish Culver					
5/15/2022	City CA 90232	IND	Product manager, Pluto TV	\$150.00	\$150.00	
	Brian Reason Burbank CA					
5/31/2022	91504	IND	Cameraman, Self employed	\$150.00	\$150.00	
	Leah Pressman Culver City					
6/4/2022	CA 90232	IND	psychologist, private practice	\$150.00	\$150.00	
	Yasmine-Imani McMorrin		Director of Education Equity,			
6/4/2022	Culver City CA 90230	IND	Children's Defense Fund	\$150.00	\$150.00	
	Drexel Heard Los Angeles					
6/24/2022	CA 91402	IND	Vice President, Strategies360	\$150.00	\$150.00	
	Stephen C Jones Los Angeles					
5/18/2022	CA 90066	IND	Attorney, Praedicat, Inc.	\$200.00	\$200.00	
6/4/2022	Nancy Barba Culver City CA 90232	IND	Director, Frontier Energy	\$200.00	\$200.00	
	Freddy Puza Culver			1		
5/16/2022	City CA 90230	IND	Community Relations, LMU	\$250.00	\$250.00	
	Andrew Leist Culver City CA		University of Southern			
5/22/2022	90232	IND	California	\$250.00	\$250.00	
	Valentina Garza Culver City					
6/4/2022	CA 90230-5502	IND	Writer, Disney	\$250.00	\$250.00	
	ray newton burbank					
5/30/2022	CA 91501	IND	Sales, OPI	\$300.00	\$300.00	

*Contributor Codes IND - Individual

COM - Recipient Committee (other than PTY or SCC)

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

PTY - Political Party SCC - Small Contributor Controller

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from 1/1/2022	CALIFORNIA 460
through 6/30/2022	Page 8 of 17
	I.D. NUMBER

NAME OF FILER

Triston Ezidore for Culver City Unified School Board 2022

1447002

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CONTRIBUTOR	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)
	Kelly Marin	Culver City CA		Consultant, adaptED			
5/30/2022	90232	•	IND	Consultants	\$300.00	\$300.00	
	Joy Kecken	Culver City CA					
6/7/2022	90232		IND	Writer, Self	\$500.00	\$500.00	
	Scott Kecken	CULVER CITY CA		Instructor, West Los Angeles			
6/9/2022	90232		IND	College	\$500.00	\$500.00	
	Disa Lindgren	Culver City CA		Support Coordinator,			
5/23/2022	90232		IND	Insperity	\$1,070.00	\$1,070.00	
	Enoni Harrison	Jonesboro AR					
5/25/2022	72404		IND	Contract, Jostens	\$100.00	\$100.00	
	HAIFAA MOAMMAR	CULVER		Not Employed, Not			
5/26/2022	CITY CA 90230		IND	Employed	\$100.00	\$100.00	
	JARED MORGAN	Culver City		Health Worker, Westside			
6/8/2022	CA 90232		IND	Family Health Center	\$50.00	\$100.00	
	Patricia Bijvoet	Los Angeles		Landscape Architect, UPLA			
6/8/2022	CA 90016		IND	Studio	\$100.00	\$130.00	
	Chris Paine	Culver					
6/8/2022	City CA 90232		IND	Director, PapercutFilms	\$119.00	\$144.00	
	Keila Sanchez Gomez	Santa		Not Employed, Not			
6/8/2022	Monica CA 90404		IND	Employed	\$150.00	\$150.00	
	Chris Paine	Culver					
6/3/2022	City CA 90232		IND	Director, PapercutFilms	\$25.00	\$25.00	

"Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Contriblee

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from 1/1/2022	CALIFORNIA 460
through 6/30/2022	Page 9 of 17
	1.D. NUMBER 1447002

NAME OF FILER

Triston Ezidore for Culver City Unified School Board 2022

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		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)
	Haifaa Moammar Culve	er				
6/3/2022	City CA 90230	IND	Not Employed	\$100.00	\$200.00	
	Enoni Harrison 1 Jonesboro AR					
6/8/2022	72404	IND	Jostens	\$100.00	\$200.00	
6/9/2022	Jen Carter Culver City CA 90.	232 IND	Not Employed	\$200.00	\$230.00	
	Mary Daval Culver City CA					
5/19/2022	90232	IND	P. S Arts	\$250.00	\$250.00	
6/28/2022	Jen Carter City CA 90	232 IND	Not Employed	\$25.00	\$255.00	
	Keila Sanchez Gomez S	anta				
6/8/2022	Monica CA 90404	IND	Not Employed	\$150.00	\$300.00	
5/18/2022	Alex Fisch Culver City CA 902	32 IND	CA Dep't of Justice	\$500.00	\$500.00	
	Michelle Weiner Culver City	y CA				
5/19/2022	90230-4952	IND	self-employed	\$500.00	\$500.00	
	Mary Daval Culver City CA					
6/9/2022	90232	IND	P. S Arts	\$319.00	\$569.00	
	Michelle Weiner Culver City	y CA				
6/8/2022	90230	IND	Not Employed	\$200.00	\$700.00	
5/18/2022	Alex Fisch Culver City CA 902	32 IND	CA Dep't of Justice	\$500.00	\$1,000.00	

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

Cohodula D. Dart 4	Amounts may be rounded						SCHEDULE B - PART 1		
Schedule B – Part 1	to whole dollars.				Statement cov	ers period	CALIFORNIA 46		
Loans Received					from 1/1/2022		FORM	700	
SEE INSTRUCTIONS ON REVERSE					through 6/30/20	22	Page10	of	
NAME OF FILER							I.D. NUMBER		
Triston Ezidore for Culver City Unified School	ol Board 2022		_			_	1447002		
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER LD. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	AMOUNT PAIL OR FORGIVE! THIS PERIOD	N BALANCE AT	INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE	
Triston Ezidore, Culver City CA 90230	Case Manager, City of Los Angeles Housing			\$	ş <u>200</u>	O%	\$_200	\$ 200 \$ PER ELECTION**	
	Authority	0	200	_	9/1/2022	s_0	5/13/2022	PERELECTION	
TO IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$	
E C co C c C c				PAID			 	CALENDAR YEAR	
				\$. \$	%	\$	s	
				FORGIVEN		RATE		PER ELECTION**	
† IND COM OTH PTY SCC		s	s	\$	DATE DUE	\$	DATE INCURRED	\$	
				PAID				CALENDAR YEAR	
				\$	\$	%	\$	\$	
				FORGIVEN		RATE		PER ELECTION**	
†□IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$	
	s	UBTOTALS \$	200	, 0	\$ 200	\$ 0			
Schedule B Summary						(Enter (e) on Sche	dule E, Line 3)		
1. Loans received this period				\$	2.50				
 (Total Column (b) plus uniternized loan Loans paid or forgiven this period (Total Column (c) plus loans under \$10 (Include loans paid by a third party that 	00 paid or forgiven.)						Contributor Codes ND – Individual COM – Recipient Co		
 Net change this period. (Subtract Lin- Enter the net here and on the Summar 	e 2 from Line 1.)			.NET \$	2.50	F	OTH – Other (e.g., I PTY – Political Part	business entity) y	
Enter the field for the duffillia	, r aga, columnia, and a			. 0	May be a negative number)	٤	CC - Small Contri	butor Committee	
*Amounts forgiven or paid by another party also m	ust be reported on Schedule A.)							

** If required.

PRINT FORM

Schedule B – Part 2		Amounts may be rounded to whole dollars.			ment covers period		CALIFORNIA 460		
Loan Guarantors				from $\frac{1/1}{}$	/2022	FORM			
SEE INSTRUCTIONS ON REVERSE				through	6/30/2022	Page	11 of 17		
NAME OF FILER Triston Ezidore for Culver City Unified School Boa	rd 2022					1.D. NUMBE 1447002	₹		
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)	LOAN		AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE		
None to report	□ IND		LENDER			CALENDAR YEAR			
	□OTH □PTY □scc		DATE			PER ELECTION (IF REQUIRED)			
	□IND □COM		LENDER			CALENDAR YEAR			
	□ OTH □ PTY □ SCC		DATE			PER ELECTION (IF REQUIRED)			
			LENDER			CALENDAR YEAR			
	□ COM □ OTH □ PTY □ SCC		DATE			PER ELECTION (IF REQUIRED)			
	□IND		LENDER			CALENDAR YEAR			
	□ COM □ OTH □ PTY □ SCC	à °	DATE			PER ELECTION (IF REQUIRED)			





Enter on Summary Page, Line 17 only.

SUBTOTAL \$ 0

Schedule C		
Nonmonetary	Contributions	Received

Triston Ezidore for Culver City Unified School Board 2022

FULL NAME, STREET ADDRESS AND

ZIP CODE OF CONTRIBUTOR

(IF COMMITTEE, ALSO ENTER I.D. NUMBER)

SEE INSTRUCTIONS ON REVERSE

Evan Smith,

SCLA Print Inc.,

Evan Smith,

90232

Los Angeles, CA 90007

90232

NAME OF FILER

DATE

RECEIVED

5/26/

2022

6/1/2022

6/4/2022

Amounts may be rounded to whole dollars.

IF AN INDIVIDUAL, ENTER

OCCUPATION AND EMPLOYER

(IF SELF-EMPLOYED, ENTER

NAME OF BUSINESS)

Forester, The

Forester, The

Conservation Fund

Conservation Fund

fro	Statement covers 1/1/2022 6/30/2022	period		12 17 — of ———
DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULA DA CALENDA (JAN 1 -	TE IR YEAR	PER ELECTION TO DATE (IF REQUIRED)
Printing Campaign signs, production, shipping	\$940.20	\$940.20		
Triston for School Board Purple Tees	\$613.67	\$613.67		
Rentals, food, beverages, donuts for campaign kick	\$1,012	\$1,952.2	20	
SUBTOTAL	\$			
\$	IND - COM OTH	(other th	nt Committee an PTY or SCC) g., business entity)	

Schedule C Summa	arv
------------------	-----

 Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.).....

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

Total nonmonetary contributions received this period. 2,715.31 (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)......TOTAL \$

CONTRIBUTOR CODE*

IND

□ COM

□ OTH

PTY

□ scc

□ COM

✓ OTH

□ PTY ☐ scc **Z**IND

□ COM

□ OTH

□ PTY

□ scc COM-□отн □ PTY □ scc

Culver City CA

Culver City CA

Attach additional information on appropriately labeled continuation sheets.

SCC - Small Contributor Committee

CLEAR FORM



Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		Amounts may be r to whole dolla		Statement cover from 1/1/2022		CALIFORNIA 460		
SEE INSTRUCT	TIONS ON REVERSE			through <u>6/30/2022</u>		Page	13 17 of	
NAME OF FILE Triston Ezid	R lore for Culver City Unified School Board 2022					1.D. NUM 144700		
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIV CALEND (JAN. 1 -		PER ELECTION TO DATE (IF REQUIRED)	
	None to report	Monetary Contribution Nonmonetary						
		Contribution						
	☐ Support ☐ Oppose	Independent Expenditure						
		Monetary Contribution						
		Nonmonetary Contribution						
	☐ Support ☐ Oppose	Independent Expenditure						
		Monetary Contribution						
		Nonmonetary Contribution						
	Support Dppose	Independent Expenditure						
			SUBTOTAL	\$				
Schedule	D Summary							
1. Itemized	contributions and independent expenditures mad	e this period. (Include	all Schedule D subtotals.)	•••••	\$_	0	
	ed contributions and independent expenditures m						0	
3. Total con	ntributions and independent expenditures made th	is period. (Add Lines	1 and 2. Do not enter on	the Summary Page	e.) TO	OTAL \$_	0	

CLEAR FORM

PRINT FORM

Amounts may be rounded to whole dollars. Statement covers period to whole dollars. 1/1/2022 from 1/1/2022						FORNIA 460
SEE INSTRUCTIONS ON REVERSE				through <u>6/30/2022</u>	- Page .	14 of
NAME OF FILER					I.D. NU	MBER
282.50					14470	002
CODES: If one of the following codes accurately described CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings and OFC office experis PET petition circui PHO phone banks POL polling and s POS postage, deli	munications d appearance ses ating urvey resear very and me	es	Wise, describe the payment. RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and protection TRC candidate travel, lodging, ar Staff/spouse travel, lodging, transfer between committee VOT voter registration WEB information technology cost	duction cost nd meals and meals es of the san	me candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DESC	CRIPTION OF PAYMENT		AMOUNT PAID
Secretary of State, Secretary of State Political Reform Division Sacramento, CA 95814		FIL		,		50.00
SCLA Print Inc., Los Angeles, CA 90007		СМР				493.96
* Payments that are contributions or independent expenditures must also be	e summarized on Sche	dule D.		St	JBTOTAL	\$ 543.96
Schedule E Summary			\$			
1. Itemized payments made this period. (Include all Schedule	e E subtotals.)		·		\$	543.96
2. Unitemized payments made this period of under \$100						476.11
3. Total interest paid this period on loans. (Enter amount from						
4. Total payments made this period. (Add Lines 1, 2, and 3.	Enter here and on	the Sumn	nary Page, Column A	, Line 6.) To	OTAL \$_	1,020.07





2			

Schedule F Accrued Expenses (Unpaid Bills)	to whole dollars.		Statement covers period from		CALIFORNIA 460	
OFF MOTOMOTIONS ON PRIVEDOR			through 6/30/202	22	Page .	15 of 17
SEE INSTRUCTIONS ON REVERSE					I.D. NUM	MBER
NAME OF FILER Triston Ezidore for Culver City Unified School Board 2022					14470	
•					11110	
CODES: If one of the following codes accurately described CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense campaign literature and mailings	MBR member communication MTG meetings and appearan OFC office expenses PET petition circulating PHO phone banks POL polling and survey rese POS postage, delivery and r PRO professional services (I PRT print ads	RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (internet, e-mail)				
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT I THIS PER (ALSO REPOR	HOD	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
None to report						
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$	\$	S	4	
Schedule F Summary						
Total accrued expenses incurred this period. (Include all S accrued expenses of \$100 or more, plus total unitemized and accrued expenses of \$100 or more, plus total unitemized and accrued expenses of \$100 or more, plus total unitemized and accrued expenses of \$100 or more, plus total unitemized and accrued expenses of \$100 or more, plus total unitemized and accrued expenses of \$100 or more, plus total unitemized and accrued expenses of \$100 or more, plus total unitemized and accrued expenses of \$100 or more, plus total unitemized and accrued expenses of \$100 or more, plus total unitemized and accrued expenses of \$100 or more, plus total unitemized and accrued expenses of \$100 or more, plus total unitemized and accrued expenses of \$100 or more, plus total unitemized and accrued expenses of \$100 or more, plus total unitemized and accrued expenses of \$100 or more, plus total unitemized and accrued expenses of \$100 or more, plus total unitemized and accrued expenses of \$100 or more, plus total unitemized and accrued expenses of \$100 or more, plus total unitemized accrued expenses of \$100 or more, plus total unitemized accrued to the plus t	chedule F, Column (b) su accrued expenses under	btotals for \$100.)	INCU	RRED TOTA	ALS\$_)
Total accrued expenses paid this period. (Include all Sche accrued expenses of \$100 or more, plus total unitemized page 1.2).	edule F. Column (c) subto	tals for payments on			()
Net change this period. (Subtract Line 2 from Line 1. Ent on the Summary Page, Column A, Line 9.)	er the difference here and	i		·····	NET \$	ay be a negative number
CLEAR FORM PRINT FORM			FP	PC Advice: adv	FPPC	Form 460 (Jan/2016)) ca.gov (866/275-3772) www.fppc.ca.gov

Schedule	G			
Payments	Made by	an Agent	or Indep	endent
Contracto	r (on Beh	alf of This	Commit	tee)

Amounts may be rounded to whole dollars.

	SCHEDULE C			
Statement covers period from 1/1/2022	california 460			
through 6/30/2022	Page 16 of 17			
	I.D. NUMBER			
	1447002			

NAME OF AGENT OR INDEPENDENT CONTRACTOR

none applicable

NAME OF FILER

SEE INSTRUCTIONS ON REVERSE

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

CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events

Triston Ezidore for Culver City Unified School Board 2022

IND independent expenditure supporting/opposing others (explain)* LEG legal defense

LIT campaign literature and mailings MBR member communications MTG meetings and appearances OFC office expenses petition circulating PET PHO phone banks

POL polling and survey research postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads

RAD radio airtime and production costs RFD returned contributions

SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor VOT voter registration

WEB information technology costs (internet, e-mail)

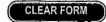
^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

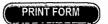
CODE C	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
	·	
	·	
	CODE	

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 0

^{*} 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.





SEE INSTRUCTION	l eous Increases to Cas			Statement covers period from $\frac{1/1/2022}{\text{through}} = \frac{6/30/2022}{\text{through}}$	CALIFORNIA 460 FORM 17 Page 17 of 17 I.D. NUMBER 1447002
DATE RECEIVED	1 DE			SCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
5/12/2022	Bank of America,	Los Angeles, CA 90066	Counter credit		100.00
	itional information on appropriatel	ly labeled continuation sheets.		SUBTOTA	L\$ 100.00
 Itemized in Unitemized 	d increases to cash of under \$	n loans made to others. (Schedule H, Colum		,\$ <u>0</u>	
4. Total misco Summary	Page, Line 14.)	is period. (Add Lines 1, 2, and 3. Enter here	and on the		FPPC Form 460 (Jan/2016)) vice@fppc.ca.gov (866/275-3772)