Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)		Type or print i	n ink.	Date Stamp RECEIVED OS ANGELES C	BY	LIFORNIA FORM 460
(Government Code Sections 64200-64210.5)	fr	Statement covers period om01/01/23	Date of election if applicable: (Month, Day, Year)		411:31	For Official Use Only
SEE INSTRUCTIONS ON REVERSE	tł	nrough06/30/23		CAMPAIGH FIN	ANC	
1. Type of Recipient Committee: All		ete Parts 1, 2, 3, and 4. arily Formed Ballot Measure	2. Type of Statement:	BIDOL SHITLE	Quarterly Si	tatement
State Candidate Election Committee Recall (Also Complete Part 5)	Com	mittee controlled Sponsored	 Semi-annual Statement Termination Statement (Also file a Form 410) 		Special Odd	d-Year Report tal Preelection Attach Form 495
General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee	(Also (Prim Offic	Complete Part 6) anily Formed Candidate/ eholder Committee Complete Part 7)	Amendment (Explain		Statement -	
3. Committee Information		UMBER 2100	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF		2100	NAME OF TREASURER			
Elect Alfred Renteria for School Bo	ard 2011		Alfred Renteria Jr. MAILING ADDRESS	<u></u>		<u> </u>
STREET ADDRESS (NO P.O. BOX)		· · · · · · · · · · · · · · · · · · ·	CITY Pico Rivera	STATE CA	ZIP CODE 90660	AREA CODE/PHONE (562) 755-3622
	CA 90660	AREA CODE/PHONE (562) 755-3622	NAME OF ASSISTANT TREASU	JRER, IF ANY		
MAILING ADDRESS (IF DIFFERENT) NO. AND S	-	(002) 100-0022	MAILING ADDRESS			
CITY	STATE ZIP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS			OPTIONAL: FAX / E-MAIL ADE	DRESS		
(562) 908-6706 / VoteAlfred4Kids@	gmail.com					
4. Verification I have used all reasonable diligence in prepari under penalty of perjury under the laws of the						and complete. I certify
Executed on July 30, 2023						
Executed on July 30, 2023						
Executed on Date			Signature of Contreelling Officeholder, Candidate,	State Measure Proponent		
Executed on		Ву	Signature of Controlling Officeholder, Candidate.	State Maarure Processont		
Date			Charature of Conscioning Officerrorder, Candidate,		I-Free Helpline:	FPPC Form 460 (January/05) 866/ASK-FPPC (866/275-3772)

.

State of California

Type or print in ink.

Recipient Committee Campaign Statement Cover Page — Part 2

CALII FC		-	-PART 2
Page _	2	_ of _	6

5. Officeholder or Candidate Controlled Committee

NAME OF	OFFICEHOL	DER OR	CANDIDATE
---------	-----------	--------	-----------

Alfred Renteria

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

El Rancho Unified School District, Governing Board Member

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Pico Rivera, CA 90660

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.

COMMITTEE NAME		I.D. NUM	BER
NAME OF TREASURER			
COMMITTEE ADDRESS	STREET ADDRESS (N	IO P.O. BOX)	
CITY	STATE	ZIP CODE	AREA CODE/PHONE
COMMITTEE NAME		I.D. NUM	BER
NAME OF TREASURER			
COMMITTEE ADDRESS	STREET ADDRESS (N	IO P.O. BOX)	

CITY STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	
----------------------	--------------	--

Identify the controlling officeholder, candidate, or state measure proponent, if any. NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	

Attach continuation sheets if necessary

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772) State of California

Campaign Disclosure Statement Summary Page		Type or print in ink. ounts may be round to whole dollars.	led	[Stater	nent covers period 01/01/23	CALIFORNIA FORM 460	
SEE INSTRUCTIONS ON REVERSE					through .	06/30/23	Page of6	
NAME OF FILER							I.D. NUMBER	
Alfred Renteria Jr.							1332100	
Contributions Received	(FR	Column A TOTAL THIS PERIOD OMATTACHED SCHEDULES)		Column E CALENDAR YEA TOTAL TO DATE	NR .	Running in Both t	nmary for Candidates he State Primary and	
1. Monetary Contributions Schedule A, Line 3	\$	0.00	\$	\$0.00				
2. Loans Received Schedule B, Line 3	_	0.00		4,70	1.34	1/1	through 6/30 7/1 to Date	
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	0.00	\$.	4,70	1.34	20. Contributions Received \$	S	
4. Nonmonetary Contributions Schedule C, Line 3	_	0.00		2,00	0.00	21. Expenditures		
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	0.00	\$.	6,70	1.34	Made \$	\$\$	
Expenditures Made						Expenditure Limit	Summary for State	
6. Payments Made Schedule E, Line 4	\$		\$		0.00	Candidates		
7. Loans Made Schedule H, Line 3	-	0.00			0.00	22 Cumulati	ive Expenditures Made*	
3. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	0.00	\$		0.00		to Voluntary Expenditure Limit)	
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	_	0.00		4,50		Date of Election	Total to Date	
10. Nonmonetary Adjustment Schedule C, Line 3	_	0.00		2,00		(mm/dd/yy)		
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$	0.00	\$	6,50	0.00	//	\$	
Current Cash Statement		0.00				//	\$	
12. Beginning Cash Balance Previous Summary Page, Line 16	\$_			calculate Column				
13. Cash Receipts Column A, Line 3 above	-	0.00		ounts in Column responding amo		*Amounts in this section	may be different from amounts	
14. Miscellaneous Increases to Cash Schedule I, Line 4	-	0.00	fron	n Column B of yo ort. Some amou	our last	reported in Column B.	may be unerent normaniounts	
15. Cash Payments Column A, Line 8 above	-	0.00	Col	umn A may be n	egative			
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	0.00		res that should tracted from pre				
If this is a termination statement, Line 16 must be zero.			peri	od amounts. If first report being	this is			
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for	this calendar ye y over the amo	ar, only			
Cash Equivalents and Outstanding Debts		0.00		n Lines 2, 7, and				
18. Cash Equivalents See instructions on reverse	\$	0.00						
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	9,201.34					FPPC Form 460 (January/ ine: 866/ASK-FPPC (866/275-37)	

•

ъ

		Type or print in	ink				SCH	EDULE B - PART 1	
Schedule B – Part 1 Amounts may be round to whole dollars. Loans Received to whole dollars.					Statement cov from01/	vers period 01/23	CALIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE					through0	6/30/23	Page4	of6	
NAME OF FILER				I.			1.D. NUMBER		
Alfred Renteria Jr.							1332100		
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAIL OR FORGIVE THIS PERIOD	N. CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTION TO DATE	
Alfred Renteria Jr. Pico Rivera, CA 90660 [†] ZI IND COM CTH PTY SCC	Self Employed R&R Accounting & Tax Service	s_1,001.34	s0.00	PAID S FORGIVEN S	<u>\$1,001.34</u>	0.00 % RATE \$0.00	s 	CALENDAR YEAR	
Alfred Renteria Jr. Pico Rivera, CA 90660 [†] Z IND COM OTH PTY SCC	Self Employed R&R Accounting & Tax Service	s_1,000.00	s0.00	PAID S FORGIVEN S	s_1,000.00	0.00 % RATE \$0.00	s 10/07/11 DATE INCURRED	CALENDAR YEAR	
Alfred Renteria Jr. Pico Rivera, CA 90660 [†] Z IND COM OTH PTY SCC	Self Employed R&R Accounting & Tax Service	\$_2,000.00	s0.00	PAID S FORGIVEN S		0.00 % RATE \$0.00	s 	CALENDAR YEAR SS SS	
	<u>.</u>	SUBTOTALS	6 0.00 s	\$ 0.00	0 \$ 4,001.34	\$ 0.00			
Schedule B Summary 1. Loans received this period				\$	0.00	(Enter (e) on Schedule E, Line 3)	1		
 (Total Column (b) plus unitemized loan Loans paid or forgiven this period	s of less than \$100.) D paid or forgiven.) t are also itemized on Scheo e 2 from Line 1.)	dule A.)		\$	0.00 0.00 May be a negative number)	- C	Contributor Codes ID – Individual OM – Recipient Co (other than TH – Other (e.g., TY – Political Part CC – Small Contri	ommittee PTY or SCC) business entity) y	
*Amounts forgiven or paid by another party also ** If required.					FPPC	Toll-Free Helpl	FPPC Form ne: 866/ASK-FPI	460 (January/05 PC (866/275-3772	

		Trun on anist in	in h				SCH	EDULE B - PART	
Schedule B – Part 1 Loans Received	Type or print in ink. Amounts may be rounded to whole dollars. from01/01/23						CALIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE					through06	6/30/23	Page 5	of6	
NAME OF FILER							I.D. NUMBER		
Alfred Renteria Jr.							1332100		
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (F COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAIL OR FORGIVE THIS PERIOD	N. CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTION TO DATE	
Alfred Renteria Jr. Pico Rivera, CA 90660	Self Employed R&R Accounting & Tax Service			PAID S FORGIVEN	s <u>500.00</u>	0.00 RATE %	s_500.00	CALENDAR YEAR \$_5,500.00 PER ELECTION*	
		s500.00	\$\$	s	DATE DUE	\$0.00	11/10/11 DATE INCURRED	\$	
Alfred Renteria Jr. Pico Rivera, CA 90660 [†] IND COM OTH PTY SCC	Self Employed R&R Accounting & Tax Service	s100.00	s0.00	PAID S FORGIVEN S	s100.00	0.00 RATE \$%	s 100.00 11/01/13 DATE INCURRED	CALENDAR YEAR \$	
Alfred Renteria Jr. Pico Rivera, CA 90660 [†] IND COM OTH PTY SCC	Self Employed R&R Accounting & Tax Service	s100.00	s0.00	PAID S FORGIVEN S		<u>0.00</u> RATE \$\$	s 100.00 06/29/15 DATE INCURRED	CALENDAR YEAR \$	
		SUBTOTALS	5 0.00 s	\$ 0.00	0 \$ 700.00	\$ 0.00			
Schedule B Summary 1. Loans received this period				\$	0.00	(Enter (e) on Schedule E, Line 3)			
 (Total Column (b) plus unitemized loan Loans paid or forgiven this period	s of less than \$100.) D paid or forgiven.) t are also itemized on Scheo 2 from Line 1.)	dule A.)		\$	0.00 0.00 May be a negative number)	- IN CO P	TH – Other (e.g., TY – Political Part	ommittee PTY or SCC) business entity)	
*Amounts forgiven or paid by another party also ** If required.	must be reported on Schedule A.						FPPC Form	1 460 (January/0	

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule F Accrued Expenses (Unpaid Bills)	ded	Statement cover from 01/07 through 06/3		FORNIA 460	
Alfred Renteria Jr.				I.D. NU 1332	
CODES: If one of the following codes accurately describe 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 LT campaign literature and mailings	es the payment, you may MBR member communication MTG meetings and appeara OFC office expenses PET petition circulating PHO phone banks POL polling and survey res POS postage, delivery and PRO professional services PRT print ads	ns ances search messenger services	RAD radio airtime ar RFD returned contril SAL campaign work TEL t.v. or cable airt TRC candidate trave TRS staff/spouse tra TSF transfer betwee VOT voter registratio	nd production costs butions ters' salaries time and production cos I, lodging, and meals avel, lodging, and meals en committees of the sa	ame candidate/sponsor
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
JJ Communications San Juan Bautista, CA 95045		4,500.00	0.00	0.00	4,500.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$ 4,500.00 \$	0.00 \$	0.00	\$ 4,500.00
Schedule F Summary 1. Total accrued expenses incurred this period. (Include all S	Schedule E. Column (b) s	ubtotals for			
accrued expenses of \$100 or more, plus total unitemized			INCU	RRED TOTALS \$ _	0.00
 Total accrued expenses paid this period. (Include all Sche accrued expenses of \$100 or more, plus total uniternized) 				PAID TOTALS \$	0.00
3. Net change this period. (Subtract Line 2 from Line 1. Ent on the Summary Page, Column A, Line 9.)				NET \$ -	0.00 May be a negative number

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)