

**Recipient Committee  
Campaign Statement  
Cover Page**

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**CAMPAIGN FINANCE**

**CALIFORNIA  
FORM 460**

Page 1 of 1  
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<b>Statement covers period</b>	<b>Date of Election if applicable</b>
from 01/21/2024	03/05/2024
through 02/17/2024	(Month, Day, Year)

**1. Type of Recipient Committee**

- Officeholder, Candidate Controlled Committee
  - State Candidate Election Committee
  - Recall
- General Purpose Committee
  - Sponsored
  - Small Contributor Committee
  - Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
  - Controlled
  - Sponsored
- Primarily Formed Candidate/Officeholder Committee

**2. Type of Statement**

- Pre-election Statement
- Semi-Annual Statement
- Termination Statement
- Amendment
- Quarterly Statement
- Special Odd-Year Statement
- Supplemental Pre-election Statement - Attach Form 495

*To add candidate's Original Signature*

**3. Committee Information**

I.D. Number 1460010

COMMITTEE NAME  
Desiree Rabinov for Glendale College Board 2024

**Treasurer(s)**

NAME OF TREASURER  
Jane Leiderman

STREET ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE  
Encino CA 91436 323/655-4065

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Encino CA 91436 323/655-4065

NAME OF ASSISTANT TREASURER, IF ANY

STREET ADDRESS

CITY STATE ZIP CODE

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

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**4. Verification**

I have used all reasonable diligence in preparing this statement and it is true and complete. I certify under penalty of perjury that the information provided is true and correct.

Executed on 2/26/24

Executed on 2/20/24

Executed on \_\_\_\_\_

Executed on \_\_\_\_\_

By \_\_\_\_\_  
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

By \_\_\_\_\_  
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT