_				9	129/22	PROVER PAGE
C	ecipient Committee ampaign Statement over Page			Date Stamp	CALIF FO	ORNIA 460
		Statement covers period from 07/01/2022	Date of election if applicable (Month, Day, Year)	RECEIVED B S ANGELES CO	UNTY FO	of 6
SE	E INSTRUCTIONS ON REVERSE	through <u>09/24/2022</u>	1107 0, 2022	2 SEP 30 PM :	~ `	9677
1.	Type of Recipient Committee: All Committees	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:	m ir miga i me	HOL OF	1741
	O State Candidate Election Committee O Recall (Also Complete Part 5) General Purpose Committee O Sponsored O Small Contributor Committee	Primarily Formed Ballot Measure Committee Controlled Consored 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 T Amendment (Explain b	nt t Termination)	Quarterly Stater Special Odd-Yea	nent ar Report
3.	Committee Information I.E	NUMBER 1454712	Treasurer(s)			
	COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)	7.12	NAME OF TREASURER			
	Vladimir Gomez for Antelope Valley High School Bo	ard of Trustee Area #5 2022	Mayra Vincent MAILING ADDRESS	July 18 mg		
	STREET ADDRESS (NO P.O. BOX)		CITY	STATE	ZIP CODE	AREA CODE/PHONE
			Palmdale	CA	93550	(661- 305-3468
	CITY STATE ZIP CO		NAME OF ASSISTANT TREASU	RER, IF ANY		
	Palmdale CA 9359 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX		MAILING ADDRESS			
	CITY STATE ZIP CO	DE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
	OPTIONAL: FAX/E-MAIL ADDRESS		OPTIONAL: FAX/E-MAIL ADDR	RESS		
1 .	Verification					
	I have used all reasonable diligence in preparing and reviewin				ules is to	ue and complete. I
•	certify under penalty of perjury under the laws of the State of	California th				
	Executed on 9/25/2022 Date				_	
	Executed on 9/25/2022 Date				-	
	Executed onDate				_	
	Executed on	BySi	gnature of Controlling Officeholder, Candidate,	State Measure Proponent		

FPPC Form 460 (Jan/2016))

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2						
CALIFOR FORM	NIA 460					
Page 2	of 6					

Valdimir Gomez OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER AVUHSD Trustee Board Member Area #5 ESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY Palmdale Related Committees Not Included in this Statement: of included in this statement that are controlled by you or are primal contributions or make expenditures on behalf of your candidacy.	STATE ZIP CA 93591 List any committees		NAME OF BALLOT MEASURE N/A BALLOT NO. OR LETTER Identify the controlling office NAME OF OFFICEHOLDER, CA	JURISDICTIO		- 1 -	SUPPORT
AVUHSD Trustee Board Member Area #5 ESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY Palmdale Related Committees Not Included in this Statement: of included in this statement that are controlled by you or are prima.	STATE ZIP CA 93591 List any committees		BALLOT NO. OR LETTER Identify the controlling office			- 1 -	
AVUHSD Trustee Board Member Area #5 ESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY Palmdale Related Committees Not Included in this Statement: of included in this statement that are controlled by you or are prima.	STATE ZIP CA 93591 List any committees		Identify the controlling offic			- 1 -	
Palmdale Related Committees Not Included in this Statement: of included in this statement that are controlled by you or are primary.	CA 93591			eholder, candi	data or state r		OPPOSE
Palmdale Related Committees Not Included in this Statement: of included in this statement that are controlled by you or are prima	CA 93591			eholder, candi	data or state r		
Related Committees Not Included in this Statement: of included in this statement that are controlled by you or are prima	List any committees			eholder, candi	dato oretator		
ot included in this statement that are controlled by you or are prima			NAME OF OFFICEHOLDER, CA			neasure propo	nent, if any.
ot included in this statement that are controlled by you or are prima				ANDIDATE, OR P	ROPONENT		
ot included in this statement that are controlled by you or are prima							
			OFFICE SOUGHT OR HELD			DISTRICT NO. IF	ANY
OMMITTEE NAME I.D. NUM	BER						
N/A							
AME OF TREASURER CONTRO	DLLED COMMITTEE?	7.	Primarily Formed Can	didate/Offic	eholder Cor	mmittee List	names of
YE YE			officeholder(s) or candidate(s) tor wnich this	committee is p	rimarily tormed.	I .
OMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	<u> </u>		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT
			N/A				OPPOSE
TY STATE ZIP CODE	AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	
							SUPPORT
OMMITTEE NAME I.D. NUM	BER						OPPOSE
			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT
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	DLLED COMMITTEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT
YE	s 🗆 NO						OPPOSE
OMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)							1 = 3 332
ITY STATE ZIP CODE	AREA CODE/PHONE						
STATE ZIP CODE	AREA CODE/PHONE		Att	ach continuation			

Campaign Disclosure Statement -Summary Page

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statement covers period from 7/01/2022	CALIFORNIA 460
through 9/24/2022	Page _3 of _6
	I.D. NUMBER

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

www.fppc.ca.gov

NAME OF FILER Vladimir Gomez for Antelope Valley High School Board of Trustee Area #5 2022 Column B Calendar Year Summary for Candidates Column A **Contributions Received** CALENDAR YEAR TOTAL TO DATE TOTAL THIS PERIOD Running in Both the State Primary and (FROM ATTACHED SCHEDULES) General Elections 10000 10000 1/1 through 6/30 7/1 to Date 0 0 20. Contributions 10000 10000 Received 0 Nonmonetary Contributions...... Schedule C, Line 3 21. Expenditures 10000 10000 Made TOTAL CONTRIBUTIONS RECEIVED......Add Lines 3 + 4 **Expenditures Made Expenditure Limit Summary for State** 5095.60 5095.60 6. Payments Made...... Schedule E, Line 4 **Candidates** 7. Loans Made...... Schedule H. Line 3 22. Cumulative Expenditures Made* 5095.60 5095.60 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 0 (mm/dd/yy) 5095.60 5095.60 **Current Cash Statement** 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ To calculate Column B. 10000 add amounts in Column 13. Cash Receipts Column A, Line 3 above A to the corresponding *Amounts in this section may be different from amounts amounts from Column B reported in Column B. of your last report. Some 5095.60 15. Cash Payments Column A, Line 8 above amounts in Column A may 4904.40 be negative figures that 16. ENDING CASH BALANCEAdd Lines 12 + 13 + 14, then subtract Line 15 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))

Schedule A		Amounts may be rounded to whole dollars.					SCHEDULE A		
Monetary	Contributions Received	to	wnoie dollars.		Statement cov from <u>7/01/2022</u>	ers period	CALI F	FORNIA 460 ORM	
SEE INSTRUCTI	ONS ON REVERSE				through 9/24/202	2	Page	4of_6	
NAME OF FILER Vladimir Go	mez for Antelope Valley High School Board of Trustee Ar	ea #5 2022					I.D. NI 14529	UMBER 61	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.O. NUMBER)	CONTRIBUTOR	OCCUPATION (IF SELF-EMPL	VIDUAL, ENTER N AND EMPLOYER LOYED, ENTER NAME BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE T CALENDAR \ (JAN. 1 - DEC	YEAR	PER ELECTION TO DATE (IF REQUIRED)	
9/11/2022	Antelope Valley Teachers Association PAC #1230947 Lancaster, CA 93534	□IND COM □OTH □PTY □SCC	UNION	PAC	10000	10000		10000	
		☐IND ☐COM ☐OTH ☐PTY ☐SCC							
		☐IND ☐COM ☐OTH ☐PTY ☐SCC							
		□IND □COM □OTH □PTY □SCC							
		□IND □COM □OTH □PTY □SCC							
				SUBTOTAL	\$	7 5			
1. Amount re (Include al	A Summary ceived this period – itemized monetary contributions I Schedule A subtotals.) ceived this period – unitemized monetary contributio					IND COM OTH PTY	(other d – Other d – Politic	ual pient Committee r than PTY or SCC) (e.g., business entity)	
3. Total mone (Add Lines	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Co	lumn A, Line 1	.)	TOTAL \$ 10	000 F	PPC Advice: adv		PC Form 460 (Jan/2016)) c.ca.gov (866/275-3772)	

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Schedule	E
Payments	Made

Amounts may be rounded to whole dollars.

	SCHEDULE E
Statement covers period	CALIFORNIA 160
from	FORM 400
through <u>9/24/2022</u>	Page of
	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Vladimir Gomez for Antelope Valley High School Board of Trustee Area #5 2022

COL	Es: If one of the following codes accurately	describes the	payment, you may enter t	the code. Otherwise,	describe the payment.
CMP	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
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research		staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain	ain)* POS	postage, delivery and messeng	er services TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, acc		voter registration
LIT	campaign literature and mailings	PRT	print ads	WER	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE (DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Registrar Recorder County Clerk		Candidate Statements in English & Spanish	1800
Norwalk, California 90650			
California Teachers Association (CTA) , Burlingame, CA 94010		Joint Mailers w/CTA & Candidate	2000
Banners on the Cheap	CMP	Campaign Banners	528.51
Austin, TX 78758			

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

SUBTOTAL \$ 4328.51

Schedule E Summary

Itemized payments made this period. (Include all Schedule E subtotals.)	. \$ _	4816.23
2. Unitemized payments made this period of under \$100	.\$_	279.37
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	. \$ _	0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A. Line 6.)	. \$ _	5095.60

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE (OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Gotprint	CMP	Yard signs	487.72
Burbank, CA 91505			
	,		

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