D. I. Inst Committee						COVER PAGE
Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)				Date Stamp	C	ALIFORNIA 460 FORM
(Government Code Sacions 64200-64216.5)		Statement covers period n09/25/2022 10/22/2022	Date of election if applicable: (Month, Day, Year)		Pa	For Official Use Only
SEE INSTRUCTIONS ON REVERSE		ougn				
1. Type of Recipient Committee: All Sofficeholder, Candidate Controlled Common Committee State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee	mittee Primari Commit Con Spo (Also Com Primari Officeho	ly Formed Ballot Measure tee trolled	2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termi Amendment (Explain below	-	Special O Suppleme	Statement dd-Year Report ental Preelection - Attach Form 495
3. Committee Information	I.D. NUM 13792		Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF Julia Ruedas for El Monte City S	NO COMMITTEE)		NAME OF TREASURER Yolanda Miranda MAILING ADDRESS			
STREET ADDRESS (NO P.O. BOX)			CITY	STATE CA	ZIP CODE 91722	AREA CODE/PHONE (626) 915-7635
El Monte	STATE ZIP CODE CA 91731	AREA CODE/PHONE (626) 235-8411	NAME OF ASSISTANT TREASURER,			
MAILING ADDRESS (IF DIFFERENT) NO. AND S	STREET OR P.O. BOX		MAILING ADDRESS			
	STATE ZIP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS ruedas4schoolboard@gmail.com			OPTIONAL: FAX / E-MAIL ADDRESS			
4. Verification I have used all reasonable diligence in prepare under penalty of perjury under the laws of the Executed on	State of California that the	atemer ne foreț				ue and complete. I certify
Executed on		Ву	Signature of Controlling Officeholder, Candidate, State M	easure Proponent		
Date		,	Signature of Controlling Officeholder, Candidate, State M	easure Proponent		

Recipient Committee Campaign Statement Cover Page — Part 2

	COVE	R PAGI	E-PA	RT2
CALIF	ORNI	A 4	16	0
Page _	2	of_	8	_

NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
Julia Ruedas						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	RICT NUMBER IF APPLICABL	.E)	BALLOT NO. OR LETTER	JURISDICTION	I	SUPPORT
Board of Education El Monte City School						OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE	ZIP	Identify the controlling o	fficeholder, candi	date, or state measure	proponent, if an
	El Monte CA	91731	NAME OF OFFICEHOLDER, CA			
Related Committees Not Included in this S	tatement: List any con	nmittees				
not included in this statement that are controlled by yo contributions or make expenditures on behalf of your o	u or are primarily formed t		OFFICE SOUGHT OR HELD		DISTRICT NO	. IF ANY
COMMITTEE NAME	I.D. NUMBER					
NAME OF TREASURER	CONTROLLED COMMITT	EE?	7. Primarily Formed Ca			
NAME OF TREASURER	CONTROLLED COMMITT		7. Primarily Formed Ca officeholder(s) or candidate			
	YES NO			(s) for which this o		
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	YES NO		officehoider(s) or candidate	(s) for which this of CANDIDATE	ommittee is primarily for	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	YES NO		officeholder(s) or candidate	CANDIDATE CANDIDATE	ommittee is primarily for	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT
	BOX) CODE AREA COD	DE/PHONE	NAME OF OFFICEHOLDER OF	CANDIDATE CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGHT OR HELD OFFICE SOUGHT OR HELD OFFICE SOUGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. CITY STATE ZIP COMMITTEE NAME NAME OF TREASURER	I.D. NUMBER CONTROLLED COMMITT YES NO	DE/PHONE	NAME OF OFFICEHOLDER OF	CANDIDATE CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGHT OR HELD OFFICE SOUGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. CITY STATE ZIP COMMITTEE NAME	I.D. NUMBER CONTROLLED COMMITT YES NO	DE/PHONE	NAME OF OFFICEHOLDER OF	CANDIDATE CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGHT OR HELD OFFICE SOUGHT OR HELD OFFICE SOUGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period **CALIFORNIA FORM** 09/25/2022

10/22/2022 through _ I.D. NUMBER 1379206

NAME OF FILER

Julia Ruedas for El Monte City School District 2018

Contributions Received		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 General Elections
1. Monetary Contributions Schedule A, Line 3	\$	0.00	\$	844.00	
2. Loans Received Schedule B, Line 3		0.00		20,084.00	1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	0.00	\$	20,928.00	20. Contributions Received \$\$
4. Nonmonetary Contributions Schedule C, Line 3		0.00		0.00	21 Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	0.00	\$	20,928.00	Made \$ \$
Expenditures Made					Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$	10.00	\$	844.00	Candidates
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	10.00	\$	844.00	(if Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)		0.00		0.00	Date of Election Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3		0.00		0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$	10.00	\$	844.00	\$
Current Cash Statement					 \$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	11.02	То	calculate Column B, add	
13. Cash Receipts Column A, Line 3 above		0.00	an	nounts in Column A to the	
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	rresponding amounts 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		10.00		oort. Some amounts in olumn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	1.02	fig	ures that should be	
If this is a termination statement, Line 16 must be zero.			pe	btracted from previous riod amounts. If this is	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for	e first report being filed 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	\$	20,084.00			
					FPPC Form 460 (Jan/

Schedule B – Part 1 Loans Received

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Julia Ruedas for El Monte City School District 201

1379206

Julia Ruedas for El Monte City School	District 2018						1379206	
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 PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Julia Ruedas El Monte, CA 91731 †☑ IND □ COM □ OTH □ PTY □ SCC	Teacher Botello Family Child Care	\$204_00	\$0_00	PAID \$0_0 FORGIVEN \$0_0	\$20400	0_00% RATE	\$204_00 07/09/2018 DATE INCURRED	\$84400 PER ELECTION*** \$ G2018 25,918_5
Julia Ruedas El Monte, CA 91731 This is a loan TM IND COM OTH PTY SCC	Teacher Botello Family Child Care	\$_2,500.00	\$0.00	PAID \$	\$		\$ 2,500.00 08/10/2018 DATE INCURRED	\$844_00 PER ELECTION *** \$ G2018 25,918.5
Julia Ruedas El Monte, CA 91731 †☑ IND □ COM □ OTH □ PTY □ SCC	Teacher Botello Family Child Care	\$_7,200_00	\$0.00	PAID \$	\$		\$_7,200_00 09/19/2018 DATE INCURRED	\$84400 PER ELECTION*** \$ G2018 25,918.

Schedule B Summary

(Enter (e) on Schedule E, Line 3)

1.	Loans received this period	•••••	\$ 0.00
2.	Loans paid or forgiven this period	•••••	\$ 0.00
3.	Net change this period. (Subtract Line 2 from Line 1.)	IET	\$ 0.00 (May be a negative number)

tContributor 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 forgiven or paid by another party also must be reported on Schedule A. ** If required.

Schedule B – Part 1 (Continuation Sheet) Loans Received

Amounts may be rounded to whole dollars.

SCHEDULE B - PART 1 (CONT.)

CALIFORNIA

FORM

Statement covers period

from

09/25/2022

SEE INSTRUCTIONS ON REVERSE				ti	hrough10/22	2/2022	Page5	of8
NAME OF FILER							I.D. NUMBER	
Julia Ruedas for El Monte City School	District 2018						1379206	
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 PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Julia Ruedas El Monte, CA 91731 Loan T IND □ COM □ OTH □ PTY □ SCC	Teacher Botello Family Child Care	\$_6,500.00	\$0.00	\$ FORGIVEN	\$6,500_00 DATE DUE	0_0% RATE	\$_6,500_00 10/09/2018 DATE INCURRED	\$84400 PER ELECTION*** \$ G2018 25,918.50
Julia Ruedas El Monte, CA 91731 ↑ IND □ COM □ OTH □ PTY □ SCC	Teacher Botello Family Child Care	\$530_00	\$0_00	\$ PAID \$ O O FORGIVEN \$ O O	\$530.00		\$530_00 07/29/2019 DATE INCURRED	\$84400 PER ELECTION** \$ G2018 25,918.50
Julia Ruedas El Monte, CA 91731 Toldania Ruedas Toldania Ruedas	Teacher Botello Family Child Care	\$280_00	\$0_00	PAID \$	\$280_00		\$280_00 11/07/2019 DATE INCURRED	\$
Julia Ruedas El Monte, CA 91731 TIND COM OTH PTY SCC	Teacher Botello Family Child Care	\$6000	s0_00	PAID \$	\$60_00		\$60_00 01/07/2020 DATE INCURRED	\$

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

PTY - Political Party

SCC - Small Contributor Committee

*Amounts forgiven or paid by another party also must be reported on Schedule A. ** If required.

FPPC Form 460 (Jan/2016)

Schedule B - Part 1 (Continuation Sheet) Loans Received

Amounts may be rounded to whole dollars.

SCHEDULE B - PART 1 (CONT.)

CALIFORNIA

Statement covers period

					from	5/2022	FORIVI	
SEE INSTRUCTIONS ON REVERSE					through10/2	2/2022	Page6	of8
NAME OF FILER	- William Committee	-					I.D. NUMBER	
Julia Ruedas for El Monte City School	District 2018						1379206	
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)	OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAIL OR FORGIVE THIS PERIOR	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Julia Ruedas	Teacher Botello Family Child	, Extoo		PAID	7			CALENDAR YEAR
El Monte, CA 91731	Care			\$0_0	\$_1,530.00	00% RATE	\$_1,530.00	\$844_00 PER ELECTION***
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$_1,530.00	\$0.00	\$0.00	DATE DUE	\$0.00	07/03/2020 DATE INCURRED	\$ G2018 25,918.5
Julia Ruedas	Teacher Botello Family Child			PAID				CALENDAR YEAR
El Monte, CA 91731	Care			\$O_O	\$	0_0% RATE	\$	\$844_00 PER ELECTION ***
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$ 200.00	\$0_00	\$	DATE DUE	\$0.00	07/29/2020 DATE INCURRED	\$G2018 25,918.5
Julia Ruedas El Monte, CA 91731	Teacher Botello Family Child Care			PAID \$0_0 FORGIVEN	\$ 40.00	0_0% RATE	\$40.00	\$ R44 00 PER ELECTION**
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$	s0.00	\$0_0	DATE DUE	\$0.00	11/30/2020 DATE INCURRED	\$G2018_25,918.5
Julia Ruedas El Monte, CA 91731	Teacher Botello Family Child Care			PAID \$ 0.00	\$ 50.00	-0.00%	\$50_00	\$844.00
				FORGIVEN		RATE	,	PER ELECTION**
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$50_00	\$0.00	\$00	DATE DUE	\$0.00	DATE INCURRED	\$ G2018 25,918.5
		SUBTOTALS \$	0.00	\$ 0.0	1,820.00	\$ 0.00		

†Contributor Codes

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

PTY - Political Party

SCC - Small Contributor Committee

*Amounts forgiven or paid by another party also must be reported on Schedule A. ** If required.

Schedule B – Part 1 (Continuation Sheet) Loans Received

Amounts may be rounded to whole dollars.

SCHEDULE B - PART 1 (CONT.)

CALIFORNIA

Statement covers period

Loans Received		to whole donar			from09/2	5/2022	FORM	400
SEE INSTRUCTIONS ON REVERSE					through10/2	2/2022	Page7	of8
NAME OF FILER							I.D. NUMBER	
Julia Ruedas for El Monte City School	District 2018						1379206	
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 FORGIVER THIS PERIOD	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Julia Ruedas	Teacher Botello Family Child			PAID				CALENDAR YEAR
El Monte, CA 91731	Care			\$0_00	\$270.00	00% RATE	\$270_00	\$844_00 PER ELECTION***
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$270_00	\$0.00	\$0.00	DATE DUE	\$0.00	01/28/2021 DATE INCURRED	\$ G2018 25,918.50
Julia Ruedas	Teacher Botello Family Child			PAID				CALENDAR YEAR
El Monte, CA 91731	Care			\$O_OO	\$320.00	0_00% RATE	\$320_00	\$844_00 PER ELECTION ***
†⊠ IND □ COM □ OTH □ PTY □ SCC		\$320.00	\$0_0	\$0.00	DATE DUE	\$0	03/31/2021 DATE INCURRED	\$ G2018 25,918.50
Julia Ruedas	Teacher Botello Family Child			PAID				CALENDAR YEAR
El Monte, CA 91731	Care			\$0_00	\$200.00	0_00% RATE	\$200.00	\$844_00 PER ELECTION***
†⊠ IND □ COM □ OTH □ PTY □ SCC		\$200_00	\$00	\$0.00	DATE DUE	\$0	05/20/2021 DATE INCURRED	\$G2018 25,918.50
Julia Ruedas	Teacher Botello Family Child			PAID				CALENDAR YEAR
El Monte, CA 91731	Care			\$0_00	\$200_00	0_00% RATE	\$	\$844_00 PER ELECTION***
TIND □ COM □ OTH □ PTY □ SCC		\$	\$00	\$0.00	DATE DUE	\$0.00	05/25/2021 DATE INCURRED	\$ G2018 25,918.50
		SUBTOTALS \$	0.00	\$ 0.0	0\$ 990.00	\$ 0.00		

†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 forgiven or paid by another party also must be reported on Schedule A. *** If required.

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

Schedule E Payments Made	Amounts may to whole		Statement covers period from09/25/2022	CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE			through	Page _ 8 _ of _ 8	
NAME OF FILER				I.D. NUMBER	
Julia Ruedas for El Monte City School District 2018				1379206	
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 legal defense LIT campaign literature and mailings	OFC office expe PET petition circ PHO phone bank POL polling and POS postage, de	nd appearances enses ulating	RAD radio airtime and production returned contributions SAL campaign workers' salaries t.v. or cable airtime and procured trace candidate travel, lodging, at Staff/spouse travel, lodging transfer between committee voter registration WEB information technology cost	s oduction costs nd meals , and meals es of the same candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	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		
Itemized payments made this period. (Include all Schedule E subtotals.)	\$	0.00
2. Unitemized payments made this period of under \$100	\$	10.00
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.)	TOTAL \$	10.00