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1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.    Officeholder, Candidate Controlled Committee   Primarity Formed Ballot Measure Committee   Controlled   Special Odd-Year Report   Primarity Statement   Semi-annual	
Officeholder, Candidate Controlled Committee State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Sponsored (Also Complete Part 6) Primarily Formed Ballot Measure Committee Sponsored (Also Complete Part 6) General Purpose Committee Sponsored Sponsored (Also Complete Part 7)  Primarily Formed Ballot Measure Committee (Controlled Sponsored (Also General Purpose Committee (Also Complete Part 6) Primarily Formed Ballot Measure Committee (Also Complete Part 6) Primarily Formed Ballot Measure (Also General Purpose Committee (Also General Purpose Committee (Also file a Form 410 Termination) Amendment (Explain below)  Treasurer(s)  NAME Of TREASURER Carolyn Castillo MalLing Address  STREET ADDRESS (NO P.O. BOX)  CITY STATE ZIP CODE AREA CODE/PHONE Primarily Formed Ballot Measure Committee (Also file a Form 410 Termination) (Also file a For	
Treasurer(s)  COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  Re-Elect Carolyn Castillo for ERUSD School Board 2022  STREET ADDRESS (NO P.O. BOX)  CITY STATE ZIP CODE AREA CODE/PHONE  Pico Rivera Ca 90660 (562) 928-0187  Treasurer(s)  NAME OF TREASURER  Carolyn Castillo  MAILING ADDRESS  CITY STATE ZIP CODE AREA CODE/PHONE  NAME OF ASSISTANT TREASURER, IF ANY  Pico Rivera Ca 90660 (562) 928-0187	- - -
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  Re-Elect Carolyn Castillo for ERUSD School Board 2022  STREET ADDRESS (NO P.O. BOX)  CITY STATE ZIP CODE AREA CODE/PHONE  Pico Rivera Ca 90660 (562) 928-0187  NAME OF TREASURER  Carolyn Castillo  MAILING ADDRESS  CITY STATE ZIP CODE AREA CODE/PHONE  NAME OF TREASURER  Carolyn Castillo  MAILING ADDRESS  CITY STATE ZIP CODE AREA CODE/PHONE  NAME OF ASSISTANT TREASURER, IF ANY  NAME OF ASSISTANT TREASURER, IF ANY	
STREET ADDRESS (NO P.O. BOX)   CITY   STATE   ZIP CODE   AREA CODE/PHONE   NAME OF ASSISTANT TREASURER, IF ANY	
Pico Rivera Ca 90660 (562) 928-0  CITY STATE ZIP CODE AREA CODE/PHONE NAME OF ASSISTANT TREASURER, IF ANY  Pico Rivera Ca 90660 (562) 928-0187	
CITY STATE ZIP CODE AREA CODE/PHONE NAME OF ASSISTANT TREASURER, IF ANY Pico Rivera Ca 90660 (562) 928-0187	ONE
Pico Rivera Ca 90660 (562) 928-0187	187
MAILING ADDRESS (IF DIFFERENT) NO AND STREET OF PO BOX	
WALING ADDRESS (II DIT ENERT) NO. AND STREET OF TO. SOA	
CITY STATE ZIP CODE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PH	ONE
Pico Rivera Ca 90660 (62) 928-01	37
OPTIONAL: FAX / E-MAIL ADDRESS  OPTIONAL: FAX / E-MAIL ADDRESS	
ccarolynwin@aol.com	
4. Verification	

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the forego

Executed on 9/26/22  Executed on 9/26/22  Date	By Signature of Conffolling Officeholder, Candidate, State Measure Prop	lasurer
Executed on	BySignature of Controlling Officeholder, Candidate, Sta	
Executed on	By Signature of Controlling Officeholder, Candidate, Sta	ite Measure Proponent

FPPC Form 460 (Jan/2016))

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

## Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SUMMARY PAGE

from 07/01/22	CALIFORNIA 460
7/24/22 through <del>-09/31/22</del>	Page _2 of _7
	I.D. NUMBER
	1410437

Re-Elect Carolyn Castillo for ERUSD School Board 2022	``		1410437
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 2. Loans Received Schedule B, Line 3 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 4. Nonmonetary Contributions Schedule C, Line 3 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$\frac{2004.00}{2000.00}\$ \$\frac{4004.00}{0.00}\$ \$\$	\$\frac{2004.00}{14,925.00}\$ \$\frac{16,929.00}{0.00}\$ \$\frac{16,929.00}{0.00}\$	1/1 through 6/30 7/1 to Date  20. Contributions Received \$\$  21. Expenditures Made \$\$
7. Loans Made	\$\frac{2484.00}{0}\$ \$\frac{2484.00}{0.00}\$ \$\frac{0.00}{2484.00}\$	\$\frac{2484.00}{0}\$ \$\frac{2484.00}{0.00}\$ \$\frac{0.00}{2484.00}\$	Expenditure Limit Summary for State Candidates  22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)  Date of Election Total to Date (mm/dd/yy)
13. Cash Receipts	\$\frac{0.00}{4004.00} \\ \[ \frac{0.00}{2484.00} \\ \( \frac{1}{520.00} \) \[ \frac{0.00}{0.00} \\ \( \frac{0.00}{0.00} \)	To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).	*Amounts in this section may be different from amounts reported in Column B.
18. Cash Equivalents	\$ 16,925.00		FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772 www.fppc.ca.go

## Schedule A

Amounts may be rounded to whole dollars.

SCHEDULE A

Monetary Contributions Received  SEE INSTRUCTIONS ON REVERSE		to	from <u>07/0</u>		Statement covers period om $\frac{07/01/22}{9/34/22}$ rough $\frac{9/31/22}{9/34/22}$		CALIFORNIA 460 FORM Page 3 of 7	
NAME OF FILER	rolyn Castillo for ERUSD School Board 2022			<del></del>		I.D. NUI 141043		
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 CALENDAR YI (JAN. 1 - DEC.	DATE EAR	PER ELECTION TO DATE (IF REQUIRED)	
9/23/22	Robert Colvin Whittier, Ca 90605	☑IND □COM □OTH □PTY □SCC	Retired	\$100.00			,	
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC			-			
		□IND □COM □OTH □PTY □SCC						
)		□IND □COM □OTH □PTY □SCC						
			SUBTOTAL S	1,100.00				
1. Amount re (Include a	A Summary ecceived this period – itemized monetary contributional Schedule A subtotals.)		\$	0.00	IND - COM OTH - PTY -	other ti Other (e Political	al ent Committee han 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, C	column A, Line 1	.)TOTAL \$ <sup>20</sup>	04.00	PPC Advice: advic		Form 460 (Jan/2016))	

www.fppc.ca.gov

Schedule B – Part 1 Loans Received	Amounts may be rounded to whole dollars.  Statement covers period from $\frac{07/01/22}{9/24/22}$			CALIFORNIA 460				
EE INSTRUCTIONS ON REVERSE					through <u>99/31/2</u>	2/20	Page 4	of_7
AME OF FILER Re-Elect Carolyn Castillo for ERUSD School B	oard 2022						I.D. NUMBER 1410437	
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 PAII OR FORGIVE THIS PERIOD	N BALANCE AT	(e) INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIV CONTRIBUTIO TO DATE
Carolyn Castillo	Retired			PAID \$	. \$	0%	\$_200.00	\$ 200.00
Pico Rivera, Ca 90660		\$	ş <u>0</u>	FORGIVEN	DATE DUE	s	01/12/22 DATE INCURRED	PER ELECTIO
☑ IND □ COM □ OTH □ PTY □ SCC  Carolyn Castillo	Retired			PAID	. \$	% RATE	\$ 1,000.00	\$ 1200.00
Pico Rivera, Ca 90660		s	1,000.00	FORGIVEN \$	DATE DUE	\$	08/08/22	PER ELECTION
☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC  Carolyn Castillo	Retired			PAID	. \$	%	DATE INCURRED	CALENDAR YEAR
Pico Rivera, Ca 90660			500.00	FORGIVEN		RATE	08/15/22	PER ELECTION
☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		•	*		DATE DUE		DATE INCURRED	
Schedule B Summary	S	SUBTOTALS \$	1500.00	\$ 0.00	\$ 0.00	\$ 0.00 (Enter (e) on Sched	Jule E, Line 3)	

1.	Loans received this period\$	0.00
	(Total Column (b) plus unitemized loans of less than \$100.)	
2.	Loans paid or forgiven this period\$	0.00
	(Total Column (c) plus loans under \$100 paid or forgiven.)	
	(Include loans paid by a third party that are also itemized on Schedule A.)	0.00

(May be a negative number)

†Contributor Codes IND – Individual

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))
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Schedule B – Part 1 Loans Received			CALIFORNIA 460					
SEE INSTRUCTIONS ON REVERSE					through <u>09/31/2</u>	2	Page 5	of_7
NAME OF FILER  Re-Elect Carolyn Castillo for ERUSD School	Board 2022				17		I.D. NUMBER 1410437	
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 PAI OR FORGIVE THIS PERIOI	N BALANCE AT	(e) INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTION TO DATE
Carolyn Castillo	Retired			□ PAID .	. \$	% RATE	\$_500.00	\$ 2,200
Pico Rivera, Ca 90660 <sup>†</sup> ☑ IND □ COM □ OTH □ PTY □ SCC		\$	\$_500.00	FORGIVEN	DATE DUE	\$	09/12/22 DATE INCURRED	\$ 11/8/22
				PAID \$	\$	RATE	\$	\$PER ELECTION
IND COM OTH PTY SCC		\$	s	\$PÁID	DATE DUE	\$	DATE INCURRED	\$CALENDAR YEAR
				\$	s	% RATE	\$	\$PER ELECTION
TO IND COM OTH PTY SCC		\$	s	\$	DATE DUE	\$	DATE INCURRED	\$
		SUBTOTALS \$	500	\$ 0	\$ 0	\$ 0 (Enter (e) on Sched	ule E. Line 3)	
Schedule B Summary  1. Loans received this period				\$ _2,	00.00			

(Total Column (b) plus unitemized loans of less than \$100.) 2. Loans paid or forgiven this period.....\$

(Total Column (c) plus loans under \$100 paid or forgiven.)

(Include loans paid by a third party that are also itemized on Schedule A.)

2,000.00

Enter the net here and on the Summary Page, Column A, Line 2.

(May be a negative number)

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

**†Contributor Codes** 

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) www.fppc.ca.gov

Schedule	E
<b>Payments</b>	Made

Amounts may be rounded to whole dollars.

	SCHEDULE E
Statement covers period	CALIFORNIA 160
from 07/01/22	FORM 400
9/24/22 ce	
through	Page of
	I D NUMBER

SEE INSTRUCTIONS ON REVERSE	through 09/31/22	Page of
NAME OF FILER		I.D. NUMBER
Pa-Flect Carolyn Castillo for FPLISD School Roard 2022		1410427

1410437 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS 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 fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)\* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense PRO professional services (legal, accounting) VOT voter registration PRT print ads campaign literature and mailings WEB information technology costs (internet, e-mail) NAME AND ADDRESS OF PAYEE

(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Bank of America , Wilmington, DE 19850	PRO	Monthly Checking fees (7/13/22)	12.00
Los Angeles County Registrar-Recorders/County Clerk Norwalk, Ca 90650	FIL	Campaign Statement	800.00
California Latino Voter Guide Los Angeles, Ca 90041	LIT	California Latino Voters Guide	550.00

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

SUBTOTAL \$ 1362.00

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ _	2404.41
2. Unitemized payments made this period of under \$100	\$_	0
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	·	2484.41

2404 41

SCHEDULE E	(CONT.)

Schedule	E	
(Continua	tion S	heet)
<b>Payments</b>	Made	,

Amounts may be rounded to whole dollars.

	SCHEDULE E (CONT.)	
Statement covers period	CALIFORNIA 460 FORM	
from		
through <u>09/31/22</u>	Page of	
	I.D. NUMBER	
	1410437	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Re-Elect Carolyn Castillo for ERUSD School Board 2022

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

CMP campaign paraphernalia/misc. MBR
CNS campaign consultants MTG
CTB contribution (explain nonmonetary)\* OFC
CVC civic donations PET
FIL candidate filing/ballot fees PHO

FND fundraising events independent expenditure supporting/opposing others (explain)\*

LEG legal defense

LIT campaign literature and mailings

MBR member communications MTG meetings and appearances

OFC office expenses PET petition circulating

PHO phone banks POL polling and survey research

POS 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 airlime 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)

LIT campaign literature and mailings PRT print ads		WEB information technology costs (internet, e-mail)	
	CODE -	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
	LIT	Senior Advocate Voters Guide	540.00
	FND	Meals	333.39
	OFC	Printer Ink	249.02
	,	LIT	LIT Senior Advocate Voters Guide  FND Meals  OFC Printer Ink

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 1122.41