Ca	ecipient Committee ampaign Statement over Page			1.00	RECEIVEURY ANGELES COUNT	CALIFOR FORM	NIA 460
		Statement covers 09/25/2 from	2022		12 OCT 26 AM II: 3 AMPAIGN FINANC		of 18
1.	Type of Recipient Committee:All Committees	s - Complete Parts 1, 2, 3, and 4		2. Type of Statement:			
-	· ·	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	ө	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination Amendment (Explain Below)	☐ Quarterly S ☐ Special Odd		
3.	Committee Information	I.D. NUMBER 1454308		Treasurer(s)			
	Miguel Bejarano for Whittier Union High S		Area 5, 2022	NAME OF TREASURER Jeff Brauckmann CITY	STATE	ZIP CODE	AREA CODE/PHONE
				Whittier, CA 90602			
		STATE ZIP CODE	AREA CODE/PHONE	NAME OF ASSISTANT TREASURER, IF	FANY		
	Whittier, CA 90605 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OF	R P.O. BOX		MAILING ADDRESS			
	City Whittler, CA 90805	STATE ZIP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
	OPTIONAL: FAX/E-MAIL ADDRESS mabeja7@lcloud.com			OPTIONAL: FAX / E-MAIL ADDRESS jeffbrauckmann@gmail.com			
4.	Verification I have used all reasonable diligence in preparin certify under penalty of perjury under the laws of t	ng and reviewing this stater of the State of California the	ment and to the best of at the fori	,	-	Officer of Sponsor	true and complete. I
	Executed on		Ву	O'control of October 1990 Office had a	to Confident State Manager Business		

COVER PAGE

Recipient Committee Campaign Statement Cover Page - Part 2

			GE - PART 2
CALIF FO	ORNIA RM	4	60
Page _	2	of _	18

						rugo	
5. Officeholder or Candidate Controlled Co	ommittee			6. Primarily Formed I	Ballot Measure Committee		
NAME OF OFFICEHOLDER OR CANDIDATE				NAME OF BALLOT MEASURE			
Miguel Bejarano							
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT	NUMBER IF A	PLICABLE)		BALLOT NO, OR LETTER	JURISDICTION		SUPPORT
Board of Education Whittier Union High	School	5					OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE ZIP		Identify the controlling	g officeholder, candidate, o	or state measure pr	oponent, if
W	hittier, CA 906	05		any.			
				NAME OF OFFICEHOLDER, CAN	DIDATE, OR PROPONENT		
Related Committees Not Included in this Statem not included in this statement that are controlled by you or are make expenditures on behalf of your candidacy	ent: <i>List any</i> primarily forme	committees I to receive contributions or					
make expenditures on behalf of your candidacy				OFFICE SOUGHT OR HELD		DISTRICT NO. IF ANY	
COMMITTEE NAME		I.D. NUMBER					
NAME OF TREASURER		CONTROLLED COMMITTEES		7. Primarily Formed (Candidate/Officeholder Con late(s) for which this committee	mmittee <i>List names</i> Le is primarily formed	of
COMMITTEE ADDRESS STREET ADDRE	ESS (NO P.O. B	OX)		NAME OF OFFICEHOLDER OR C	ANDIDATE OFFICE SOUGH	T OR HELD	SUPPORT
	FATE	ZIP CODE AREA CODI	MUCHE				OPPOSE
CITY	AIE	AREA CODE	PHONE	NAME OF OFFICEHOLDER OR C	ANDIDATE OFFICE SOUGH	F OR HELD	SUPPORT
COMMITTEE NAME		I.D. NUMBER					OPPOSE
COMMITTEE NAME		I.D. NOMBEN		NAME OF OFFICEHOLDER OR C	ANDIDATE OFFICE SOUGH	T OR HELD	SUPPORT
NAME OF TREASURER		CONTROLLED COMMITTEES					OPPOSE
NAME OF TREASURER		YES NO		NAME OF OFFICEHOLDER OR C	ANDIDATE OFFICE SOUGH	LOB HELD	+=
COMMITTEE ADDRESS STREET ADDR	ESS (NO P.O. B	000			AND DATE	CHIELD	SUPPORT OPPOSE
OMMINITEE ADDRESS STREET ADDRESS	L-30 (140 F-30 B	on,					I OPPOSE
CITY	TATE	ZIP CODE AREA					
	_						

Campaign Disclosure Statement Summary Page

1. Monetary Contributions

3. SUBTOTAL CASH CONTRIBUTIONS......

5. TOTAL CONTRIBUTIONS RECEIVED.....

4. Nonmonetary Contributions

Amounts may be rounded to whole dollars.

Column B

CALENDAR YEAR TOTAL TO DATE

21,599.00

21,599.00

21.599.00

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).

0.00

0.00

SUMMARY PAGE

SEE INSTRUCTIONS ON REVERSE

Contributions Received

Current Cash Statement

NAME OF FILER

Miguel Bejarano for Whittier Union High School District, Trustee Area 5, 2022

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

LD. NUMBER

1454308

Expenditures Made Expenditures Limit Summary for State Candidates

Column A

TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)

0.00

0.00

17.599.00

17.599.00

6. Payments Made Schedule E, Line 4 8.792.32 8,900.72 7. Loans Made Schedule H, Line 3 0.00 0.00 8.792.32 8.900.72 8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7 \$ 9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 0.00 0.00 10. Nonmonetary Adjustment Schedule C. Line 3 0.00 0.00 11. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10 8.792.32 8.900.72

Schedule A, Line 3 \$

Schedule B, Line 3

Add Lines 1 + 2 \$

Schedule C, Line 3

Add Lines 3 + 4 \$

22. Cumulative Expenditures Made*
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)

\$______\$

\$_____\$

12. Beginning Cash Balance	Previous Summary Page, Line 16	\$3,891.60_

13. Cash Receipts Column A, Line 3 above 17,599.00

14. Miscellaneous Increases to Cash Schedule I, Line 4 0.00

15. Cash Payments Column A, Line 8 above 8,792.32

16. ENDING CASH BALANCE

Add Lines 12 + 13 + 14, then subtract Line 15 \$ 12,698.28

17. LOAN GUARANTEES RECEIVED...... Schedule B, Line 2 \$ 0.00

Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse \$ 0.00

19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ 0.00

*Amounts in this section may be different from amounts reported in Column B.

Schedule A Monetary Contributions Received		Amounts may be rounded to whole dollars.		Statement covers period from09/25/2022		CALIFORNIA 460			
through 10/22/2022 Page 4									
Miguel Bejarano for Whittier Union High School District, Trustee Area 5, 2022 14543									
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIV CALEND (JAN. 1 -		PER ELECTION TO DATE (IF REQUIRED)		
	Diane Anderson	IND COM	None	500.00	500	.00	500.00 G-2022		
10/18/2022	Whittier, CA 90603	OTH PTY SCC	None						
	Jeffrey Baird	☑ IND □ COM	Retired	2,000.00	6,00	0.00	6,000.00 G-2022		
10/07/2022	Whittier, CA 90605	OTH PTY SCC	Retired .				-,		
	Jeffrey Baird	IND COM	Retired	2,250.00	8,25	0.00	8,250,00 G-2022		
10/13/2022	Whittier, CA 90605	OTH PTY SCC	Retired				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	Virginia Bali	☑ IND	Retired	1,000.00	1,00	0.00	1,000.00 G-2022		
10/07/2022	Whittier, CA 90605	OFF SC	Retired						
	Timothy Carroll	⊠ IND □ COM	Retired	100.00	100	.00	100,00 G-2022		
10/10/2022	Los Angeles, CA 91401	OTH PTY SCC	Retired						

5,850.00

Schedule A Monetary Contributions Received			mounts may be rounded to whole dollars. Statement covers period from			CALIFORNIA 46(FORM 5 of 18		
SEE INSTRUCTION	NS ON REVERSE	····				I.D. NUMBER		
Miguel Beja	rano for Whittier Union High School District, Truste	e Area 5, 202	2				1454308	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALEND	/E TO DATE AR YEAR DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
	David A. Wamer D.D.S., INC	☐ IND		1,000.00	1,00	0.00	1,000.00 G-2022	
10/06/2022	Whittier, CA 90605 Resp. Officer	COM EN OTH SCC					1,000.00 G-2022	
	Dutra for City Council 2022	□ IND		1,000.00	1,00	0.00	1,000.00 G-2022	
10/08/2022	Whittier, CA 90605 ID: 1440999	COM OTH PTY SCC					1,000.00 G-2022	
	Educators for Better Schools Candidates-C O WSEA	☐ IND		6,000.00		0.00	6,000.00 G-2022	
09/26/2022	Whittier, CA 90605 ID: 744843	OTH OTH SCC					S,SOULOS & EGEL	
	Sylvia Macias	IND COM	Board Member	150.00	150	0.00 150.00 G-2022		
10/06/2022	Whittier, CA 90604	OTH PTY SCC	South Whittier School District				130,00 (7-2)22	
	Madeline Shapiro	⊠ IND	Retired	100.00	100	0.00	100.00 G-2022	
10/06/2022	Whittier, CA 90605	COM OTH PTY SCC	Retired				100,00 052022	

8,250.00

	Contributions Received	Amo	ounts may be rounded to whole dollars.	Statement covers from 09/25/ through 10/22/	2022	CALIFORNIA 46 FORM Page 6 of 18			
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Miguel Bejarano for Whittier Union High School District, Trustee Area 5, 2022 1454									
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIV CALENDA (JAN. 1 -	/E TO DATE AR YEAR DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)		
10/18/2022	Studio Plus Architecture Corp. Fort Myers, FL 33913	IND COM STH PTY SCC		1,500.00	1,50	0.00	1,500.00 G-2022		
10/03/2022	Sandra Thorstenson Whittler, CA 90605	IND COM OTH PTY SCC	Retired Retired	1,000.00	1,00	0.00	1,000.00 G-2022		
10/07/2022	Robert Unetic Santa Ana, CA 92706	IND COM	Retired Retired	150.00	150	0.00	150.00 G-2022		
10/13/2022	Aya Vinatleri Whittler, CA 90601	IND COM	Manager Auntie's Bakery & Cafe	500.00	500	0.00	500.00 G-2022		
10/20/2022	Mickie Yuchno Whittier, CA 90602	SIND COM OTH SCC	Retired Retired	100.00	100	0.00	100.00 G-2022		

3,250.00

from		Amounts may be rounded	Amounts may be rounded to whole dollars.				SCHEDULE A		
SEE INSTRUCTIONS ON REVERSE Miguel Bejarano for Whittier Union High School District, Trustee Area 5, 2022 DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CONTRIBUTOR CODE IND COM OTH PTY SCC Schedule A Summary 1. Amount received this period - itemized monetary contributions. (Include all Schedule A subtotals.) 2. Amount received this period - unitemized monetary contributions of less than \$100 3. Total monetary contributions received this period. (add Lines 1 and 2. Enter here and on the Summary Page, Column A. Line 1.)	τr	ibutions Received to whole dollars.		Staten	ent covers	period	CALIFORNIA / 60		
Miguel Bejarano for Whittier Union High School District, Trustee Area 5, 2022 DATE FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR COUPATION AND EMPLOYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) IND COM OTH PTY SCC			from09/2			2022	FO	RM 400	
Miguel Bejarano for Whittier Union High School District, Trustee Area 5, 2022 DATE FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR COUPATION AND EMPLOYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) IND COM OTH PTY SCC					10/22/	2022		7 10	
Miguel Bejarano for Whittier Union High School District, Trustee Area 5, 2022 Date RECEIVED	361	/EBSE		through .	10/22		Page _	7 of 18	
DATE RECEIVED FULL NAME, STREET ADDRIESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER) CONTRIBUTOR CODE CONTRIBUTOR CODE CONTRIBUTOR CODE IND COM OTH PTY SCC Schedule A Summary 1. Amount received this period - itemized monetary contributions. (Include all Schedule A subtotals.) 2. Amount received this period - unitemized monetary contributions of less than \$100 3. Total monetary contributions received this period. (add Lines 1 and 2. Enter here and on the Summary Page, Column A. Line 1.)				·		I.D. NUMBER			
PULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTION CONTRIBUTOR CODE CONTRIBUTOR COM OTH PTY SCC Schedule A Summary 1. Amount received this period - itemized monetary contributions. (Include all Schedule A subtotals.) 2. Amount received this period - unitemized monetary contributions of less than \$100 3. Total monetary contributions received this period. (add Lines 1 and 2. Enter here and on the Summary Page, Column A Line 1.)	fo						<u> </u>	1454308	
Schedule A Summary 1. Amount received this period - itemized monetary contributions. (Include all Schedule A subtotals.) 2. Amount received this period - unitemized monetary contributions of less than \$100 3. Total monetary contributions received this period. (add Lines 1 and 2. Enter here and on the Summary Page, Column A. Line 1)	LL I	NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CONTRIBUTOR (IF SELF- EMPLOYED, EN	MPLOYER ITER NAME OF			CALEN	IVE TO DATE DAR YEAR - DEC, 31)	PER ELECTION TO DATE (IF REQUIRED)	
Schedule A Summary 1. Amount received this period - itemized monetary contributions. (Include all Schedule A subtotals.)		OTH SPTY							
1. Amount received this period - itemized monetary contributions. (Include all Schedule A subtotals.)		COM OTH							
2. Amount received this period - unitemized monetary contributions of less than \$100 3. Total monetary contributions received this period. (add Lines 1 and 2. Enter here and on the Summary Page, Column A. Line 1.)	ın	nmary					* Contributor	Codes	
3. Total monetary contributions received this period. (add Lines 1 and 2. Enter here and on the Summary Page, Column A. Line 1.)	thi: ule	s period - itemized monetary contributions. A subtotals.)	9	17,3	50.00	_	IND - Individual COM - Recipient Committee		
(add Lines 1 and 2. Enter here and on the Summary Page, Column A. Line 1.)	thi	s period - uniternized monetary contributions of less than \$100		24	9.00	(other than F OTH - Other (e.g., b PTY - Political Party		r than PTY or SCC) (e.g., business entity)	
	ont 2. E	Inter here and on the Summary Page, Column A. Line 1.)	TOTAL \$	17,5	99.00		SCC - Small Contributor Committee		
SUBTOTAL \$ 0.00									

Schedule	B -	Part	1
Loans Re	eceiv	ved	

Amounts may be rounded

SCHEDULE B - PART 1 to whole dollars. Statement covers period **CALIFORNIA** FORM 09/25/2022 from 10/22/2022 through SEE INSTRUCTIONS ON REVERSE I.D. NUMBER Miguel Bejarano for Whittier Union High School District, Trustee Area 5, 2022 1454308 (b) AMOUNT (c) AMOUNT PAID OF (d) OUTSTANDING (e) INTEREST (f) ORIGINAL (g) CUMULATIVE IF INDIVIDUAL, ENTER (a) OUTSTANDING FULL NAME, STREET ADDRESS AND CONTRIBUTIONS TO OCCUPATION AND EMPLOYER BALANCE RÉCEIVED THIS FORGIVEN THIS BALANCE AT CLOSE PAID THIS AMOUNT OF ZIP CODE OF LENDER (IF SELF- EMPLOYED, ENTER NAME BEGINNING THIS LOAN PERIOD PERIOD ** OF THIS PERIOD PERIOD DATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) PERIOD OF BUSINESS) CALENDAR YEAR PAID PER ELECTION** RATE FORGIVEN \$ * IND COM OTH PTY SCC DATE DUE DATE INCURRED **Schedule B Summary** 0.00 1. Loans received this period _ _ _ _ (Total Column (b) plus unitemized loans of less than \$100.) * Contributor Codes IND - Individual 0.00 2. Loans paid or forgiven this period COM - Recipient Committee (Total Column (c) plus loans under \$100 paid or forgiven) (other than PTY or SCC) (Include loans paid by a third party that are also itemized on Schedule A.) OTH - Other (e.g., business entity) PTY - Political Party SCC - Small Contributor Committee 0.00 3. Net change this period. (Subtract Line 2 from Line 1.) _ _ _ _ _ Enter the net here and on the Summary Page, Column A, Line 2 (May be a negative number)

SUE	BTOTALS \$	\$ \$	\$
		 	 Because we are a supplied to the supplied of t

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

(Enter (e) on

Schedule B - Part 2 Loan Guarantors SEE INSTRUCTIONS ON REVERSE NAME OF FILER Miguel Bejarano for Whittier Union High School	of District True	Amounts may be roun to whole dollars.	ded		ers period 25/2022 22/2022	CALIFORNI FORM Page 9	40U
FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	1	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	IND COM OTH PTY SCC			LENDER DATE		CALENDAR DATE \$ PER ELECTION (IF REQUIRED)	
		·					

Enter on Summary Page. Line 17 only.

SUBTOTAL \$

Schedule C		Amounts may be rounded				SCHEDULE C		
Nonmone	tary Contributions Received		to whole dollars.		Staten	nent covers period 09/25/2022	CALIFORN FORM	^{IA} 460
					through	10/22/2022	Page10	_ of18
SEE INSTRUCTION	NS ON REVERSE						I.D. NUMBER	
	rano for Whittier Union High School Distric	t, Trustee Ar	ea 5, 2022				1454	308
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)		PTION OF R SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
		IND COM OTH PTY SCC						
		IND COM OTH PTY SCC						
		IND COM OTH PTY SCC						
Schedule	C Summary	•					* Contributor Codes	
1. Amount rec	reived this period - itemized nonmonetary contribution	ons.		:	\$	0.00	IND - Individual COM - Recipient Com (other than PT	
2. Amount rec	eived this period - unitemized nonmonetary contrib	utions of less tha	an \$100		\$	0.00	OTH - Other (e.g., but PTY - Political Party	siness entity)
3. Total nonme (add Lines 1	onetary contributions received this period. I and 2. Enter here and on the Summary Page, Coli	umn A, Lines 4 a	and 10.)	_TOTAL	\$	0.00	SCC - Small Contribut	tor Committee
				- 				
					SUBTOTAL	\$		19.5%

Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures, and Committees		Amounts may be rounded to whole dollars.		Statement covers period from09/25/2022		CALIFORNIA 460		
				throu	gh10/22/202	2	Page	11 of 18
Miguel Beja	rano for Whittier Union High School District, Trustee	Area 5, 2022					1.D. NUMBER 1454308	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)		AMOUNT THIS PERIOD	CALEN	TIVE TO DATE NDAR YEAR 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure			,			
	E D SUMMARY ontributions and independent expenditures made this peri	iod. (Include all Sche	dule D subtotals.) -					0.00
	d contributions and independent expenditures made this particular ibutions and independent expenditures made this period.			·	Page.)			0.00

Schedule E
Payments Made

Amounts may be rounded to whole dollars.

Statement covers period		CALIFORNIA / CO
from	09/25/2022	FORM 400
through _	10/22/2022	Page12 of18
		I.D. NUMBER 1454308

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

CMP campaign paraphemalia/misc. CNS campaign consultants

CTB contribution (explain nonmonetary)*

CVC civic donations

FIL candidate filing/ballot fees

SEE INSTRUCTIONS ON REVERSE

FND fundraising events

IND independent expenditure supporting/opposing others (explain)*

Miguel Bejarano for Whittier Union High School District, Trustee Area 5, 2022

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 airtime 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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT	AMOUNT PAID		
ACRO Printing Whittier, CA 90601	ЦТ		152.15		
ACRO Printing Whittler, CA 90601	LIT		4,967.05		
ACRO Printing Whittier, CA 90601	CMP		753.43		
ACRO Printing Whittler, CA 90601	POS		1,552.00		
* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$					

Schedule I	Ε
Payments	Made

Amounts may be rounded to whole dollars.

Statement covers period from 09/25/2022	CALIFORNIA 460
through10/22/2022	Page 13 of 18
	LD. NUMBER 1454308

Miguel Bejarano for Whittier Union High School District, Trustee Area 5, 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. CNS campaign consultants

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

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

LIT campaign literature and mallings

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 airtime 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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT	AMOUNT PAID	
Continuing the Republican Revolution Newport Beach, CA 92660	ит		150.00	
MNB Group, LLC Pomona, CA 91767	ит		275.00	
MNB Group, LLC Pomona, CA 91767	LIT		325.00	
WJB Consulting Whittler, CA 90602	CNS		200.07	
* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$				

Schedule E	
Payments Made	

Amounts may be rounded to whole dollars.

Statement covers per 09/25/202	ent covers period 09/25/2022	CALIFORNIA 460			
through	10/22/2022	Page 14 of 18			
		I.D. NUMBER 1454308			

CODES: If one of the following	codes accurately de	escribes the navment	you may enter the code	Otherwise de	escribe the navment
CODED. II ONC OF THE TOHOWING	couce accuratory at	occinco ale payment,	you may cine and code.	Cirici Wisc, at	sociate are payment.

CMP campaign paraphernalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)*

CVC civic donations

FIL candidate filing/ballot fees

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

FND fundraising events

IND independent expenditure supporting/opposing others (explain)*

Miguel Bejarano for Whittler Union High School District, Trustee Area 5, 2022

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 airtime 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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUN	IT PAID
WJB Consulting				
Whittier, CA 90602	CNS	•	31	10.00
Schedule E Summary				84.70
1. Itemized payments made this period. (Include ali Schedule E subtotals.)				
2. Unitemized payments made this period of under \$100			\$ 10	7.62
3. Total Interest paid this period on loans. (Enter amount from Schedule B, P		\$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.)			OTAL \$8,79	92.32
				u.
* Payments that are contributions or independent expenditures must also be summarized on Scheduli	e D.	SUBTOTAL	L\$ 31(0.00

Schedule F Accrued Expenses (Unpaid Bills)	Amounts may to whole		Statement covers	period CAL	SCHEDULE I	
			from09/25/		ORM 400	
-			through10/22	/2022 Page	15 of18	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER			,	I.D. NUM	BER	
Miguel Bejarano for Whittier Union High School District, Truste	ee Area 5, 2022				1454308	
CODES: If one of the following codes accurately describes the pay 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 LIT campaign literature and mailings	MBR member communi MTG meetings and app OFC office expenses PET petition circulating PHO phone banks POL polling and survey POS postage, delivery a PRO professional service PRT print ads	cations earances research and messenger services	RAD radio airtin RFD returned of SAL campaign TEL t.v. or cabil TRC candidate TRS staff/spour TSF transfer be VOT voter regis	workers' salaries e airtime and production c travel, lodging, and meals se travel, lodging, and mea etween committees of the	s als same 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	
SCHEDULE F SUMMARY						
 Total accrued expenses incurred this period. (Include all Schedule F, Cole accrued expenses of \$100 or more, plus total unitemized accrued expenses.) 	umn (b) subtotals for ses under \$100.)	. <u>-</u>	II	NCURRED TOTALS	\$ 0.00	
Total accrued expenses paid this period. (Include all Schedule F, Column accrued expenses of \$100 or more, plus total unitemized payments on ac	(c) subtotals for payment ccrued expenses under \$1	s on 00.)		PAID TOTALS	\$0.00	
Net change this period. (Subtract Line 2 from Line 1. Enter the difference on the Summary Page, Column A, Line 9.)				NET	\$ 0.00	

\$

\$

\$

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

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)	Amounts may be rounded to whole dollars.	Statement covers period from09/25/2022	CALIFORNIA 460	
		through10/22/2022	Page 16 of 18	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		1	I.D. NUMBER	
Miguel Bejarano for Whittler Union High School District, Trus	tee Area 5. 2022		1454308	
CODES: If one of the following codes accurately describes the particle 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 LIT campaign literature and mailings	Ayment, you may enter the code. Otherwise, of 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 productio RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and pro TRC candidate travel, lodging, a TRS staff/spouse travel, lodging	duction costs and meals , and meals ss of the same candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DE	SCRIPTION OF PAYMENT	AMOUNT PAID	

TOTAL * \$

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

^{**} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule H		Ame	ounts may be rounde to whole dollars.	ed	SCHEDULE			
Loans Made to Others*		to whole dollars.			Statement covers period		CALIFORNIA 460	
					from09/	25/2022	FORM	400
					through10/	22/2022	Page 17	_ of18
NAME OF FILER							I.D. NUMBER	
Miguel Bejarano for Whittier Union	High School District, Trus	tee Area 5, 202	2				1454	1308
FULL NAME, STREET ADDRESS AND . ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT C FORGIVENESS TH PERIOD *		(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				PAID				CALENDAR YEAR
	1		!			- <u>~</u>		PER ELECTION**

SUBTOTALS

\$

\$

\$

\$

FORGIVEN

*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E

DATE INCURRED

RATE

DATEDUE

Schedule I Miscellaneous Increases to Cash		Amounts may be rounded to whole dollars.	Statement covers period from 09/25/2022	CALIFORNIA 460	
SEE INSTRUCTION	NS ON REVERSE		through10/22/2022	Page18 of18	
NAME OF FILER Miguel Beja	I.D. NUMBER 1454308				
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DES	SCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH	
	I Summary creases to cash this period		\$ 0.00		
2. Unitemized	_				
3. Total of all in	nterest received this period on loans made to others. (Schedule H, Colu	umn (e).)	0.00		
	llaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter he age, Line 14.)	re and on the	_TOTAL \$0.00	·	