

Recipi	ient	Committee
	_	Statement
Cover	_	

Executed on _

RECTIVED Bate Stamp
LOS ANGELES COUNTY

on if applicable 1 21 PM 4: 50
Day, Yang) JAN 21 PM 4: 50

For Official Use Only

SEE INSTRUCTIONS ON REVERSE		from	Oct. 18,2020 Dec. 31,2020	(IVIOIIUI, Day, Estable	21 PM 4: 50 IGN FINANCE		For Official Use Only 020 80 8 C11 4 6 9		
1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. Ø Officeholder, Candidate Controlled Committee State Candidate Election Committee Recall (Alzo Complete Parts 1, 2, 3, and 4. Primarily Formed Ballot Measure Committee Committee Sponsored			2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination)						
General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Commit	tee		Formed Candidate/ der Committee	Amendment (Explain below)					
3. Committee Information		1.D. NUMBI 1430964		Treasurer(s)					
Qinglan JIang For Walnut Valley STREET ADDRESS (NO P.O. BOX)			ard Member 2020	Qinglan Jiang MAILING ADDRESS CITY Diamond Bar	STATE CA	ZIP CODE 91765	AREA CODE/PHONE 858-284-9999		
CITY	STATE Z	IP CODE	AREA CODE/PHONE	NAME OF ASSISTANT TREASURER, IF AN		51705	030 201 3333		
Diamond Bar MAILING ADDRESS (IF DIFFERENT) NO.		91765 D. BOX	858-284-9999	MAILING ADDRESS					
CITY	STATE Z	IP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE		
Diamond Bar	CA !	91765	858-284-9999						
OPTIONAL: FAX / E-MAIL ADDRESS				OPTIONAL: FAX / E-MAIL ADDRESS					
melodypianosc@gmail.com				melodypianosc@gmail.com					
4. Verification I have used all reasonable diligence in certify under penalty of perjury under Executed on Dec.31,2020 Executed on Dec.31,2020 Date	어릴 경영하다 하다 하를 하는데 되었다.			knowledge the information contained herein a	nd in the attac		true and complete. I		
Executed onDate			Ву	Signature of Controlling Officeholder, Candidate, State Measu	re Proponent				

Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (Jan/2016))

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

COVER PAGE - PART 2

Recipient Committee Campaign Statement Cover Page — Part 2

CALIFORNIA 460

	Officeholder or Candidate Controlled Committee			6. Primarily Formed Ballot Measure Committee					
NAME OF OFFICEHOLDER OR CANDIDATE	NAME OF BALLOT MEASURE								
Qinglan Jiang For Walnut Valley US	D Board Member 2020		1000						
OFFICE SOUGHT OR HELD (INCLUDE LOCA	BALLOT NO. OR LETTER	JURISDICTIO	JURISDICTION						
RESIDENTIAL/BUSINESS ADDRESS (NO. A	AND STREET) CITY STATE ZIP Diamond Ba CA 91765	Identify the controlling office	ceholder, candid	ate, or state measure pr	oponent, if any.				
	Diamond ba CA 31703	NAME OF OFFICEHOLDER, C	CANDIDATE, OR PR	ROPONENT					
not included in this statement that are con	ed in this Statement: List any committees trolled by you or are primarily formed to receive half of your candidacy.	OFFICE SOUGHT OR HELD		DISTRICT	O. IF ANY				
contributions or make expenditures on be									
	I.D. NUMBER								
COMMITTEE NAME NAME OF TREASURER		7. Primarily Formed Car	ndidate/Office	eholder Committee	List names of				
COMMITTEE NAME	I.D. NUMBER CONTROLLED COMMITTEE?	7. Primarily Formed Car officeholder(s) or candidate(ndidate/Office	cholder Committee	List names of med.				
COMMITTEE NAME	I.D. NUMBER	7. Primarily Formed Car officeholder(s) or candidate((s) for which this o	cholder Committee committee is primarily for OFFICE SOUGHT OR HE	ned.				
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS	CONTROLLED COMMITTEE? YES NO DRESS (NO P.O. BOX) STATE ZIP CODE AREA CODE/PHONE	officeholder(s) or candidate(R CANDIDATE	committee is primarily for	D SUPPOR OPPOSE				
COMMITTEE NAME NAME OF TREASURER COMMITTEE ADDRESS STREET ADD	CONTROLLED COMMITTEE? YES NO DRESS (NO P.O. BOX)	officeholder(s) or candidate(R CANDIDATE	OFFICE SOUGHT OR HE	D SUPPOR OPPOSE D SUPPOR OPPOSE				

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Qinglan Jiang Amounts may be rounded to whole dollars.

SUMMARY PAGE

 to whole dollars.	Statement covers period from Oct.18,2020	FORM 460		
	through Dec.31,2020	Page of		
		1.D. NUMBER 1430964		
Onlywo A	Column B. Louis I. V C.	6 0 1114		

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		\$	1/1 through 6/30 7/1 to Date
2. Loans Received	1263.00	1263.00	
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 1263.00	\$ 1263.00	20. Contributions Received \$\$
4. Nonmonetary Contributions Schedule C, Line 3			21. Expenditures
5. TOTAL CONTRIBUTIONS RECEIVEDAdd Lines 3 + 4	\$ 1263.00	\$ 1263.00	Made \$ \$
Expenditures Made			Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$	\$	Candidates
7. Loans Made Schedule H, Line 3	0.00	0.00	200
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 0.00	\$ 0.00	22. Cumulative Expenditures Made* (# Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3			Date of Election Total to Date
10. Nonmonetary AdjustmentSchedule C, Line 3			(mm/dd/yy)
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 0.00	\$ 0.00	\$
Current Cash Statement			/\$
12. Beginning Cash Balance Previous Summery Page, Line 16	\$ 0.00	To calculate Column B.	
13. Cash Receipts Column A, Line 3 above	1263.00	add amounts in Column	
14. Miscellaneous Increases to Cash Schedule I, Line 4		A to the corresponding amounts from Column B	*Amounts in this section may be different from amounts
15. Cash Payments Column A, Line 8 above	0.00	of your last report. Some	reported in Column B.
16. ENDING CASH BALANCEAdd Lines 12 + 13 + 14, then subtract Line 15	s 1263.00	amounts in Column A may be negative figures that	
If this is a termination statement, Line 16 must be zero.	-	should be subtracted from	
II this is a termination statement, Line to must be 2010.		previous period amounts. If this is the first report being	1
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	filed for this calendar year, only carry over the amounts	
Cash Equivalents and Outstanding Debts		from Lines 2, 7, and 9 (if any).	
18. Cash Equivalents See instructions on reverse	\$		
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ 1263.00		FPPC Form 460 (Jan/2016))
		1	FPPC Advice: advice@fppc.ca.gov (866/275-3772)

Schedule B – Part 1 Loans Received	All	to whole dollars			from Oct.18,2020 CALIFORNIA FORM			
SEE INSTRUCTIONS ON REVERSE			through Dec.31,2	2020	Page 4	Page 4 of 4		
NAME OF FILER	I.D. NUMBER							
Qinglan Jiang							1430964	
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	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE
Qinglan Jiang Diamond Bar,CA91765	Piano teacher Melody Piano School	s_1263.00	s_0.00	PAID S——— FORGIVEN S———	s	RATE	\$	\$PER ELECTION**
TØ IND □ COM □ OTH □ PTY □ SCC				PAID	DATE DUE		DATE INCURRED	CALENDAR YEAR
TO IND COM OTH PTY SCC		\$	\$	\$ FORGIVEN \$ PAID FORGIVEN \$ FORGIVEN	DATE DUE	RATE \$% RATE	\$ DATE INCURRED \$ DATE INCURRED	\$ PER ELECTION** \$ CALENDAR YEAR \$ PER ELECTION**
	\$	SUBTOTALS \$	0.00	0.00	\$ 0.00	\$ 0.00		
Schedule B Summary 1. Loans received this period	ns of less than \$100.) 00 paid or forgiven.) t are also itemized on Sche e 2 from Line 1.)	edule A.)	•••••	\$ 0.00	3.00 3.00 sy be a negative number)		†Contributor Codes IND – Individual COM – Recipient C	ommittee PTY or SCC) business entity)
*Amounts forgiven or paid by another party also m	nust be reported on Schedule A.)		(100	e, es a magazira munical)			

** If required.

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SCHEDULE B - PART 1