Recipient Committee Campaign Statement Cover Page			27/22 C Date Stamp VED BY	COVER PAGE CALIFORNIA 460 FORM
oover rage	Statement covers period from 0.7 /61/21	Date of election if applicable: (Month, Day, Year) 2022 SEP 28	ES COUNTY AM IO: 47	Page of
SEE INSTRUCTIONS ON REVERSE	through 12/31/2/	CAMPAIG	H FINANCE	020443
1. Type of Recipient Committee: All Committees - Con	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:		611142
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 Sponsored Use Complete Part 6) Primarily Formed Candidate/ Officeholder Committee Use Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination) Amendment (Explain below)	Special	rly Statement I Odd-Year Report
	NUMBER 413860	Treasurer(s)		
Matthew Brach for Palos Verdes Peninsula Unifi Board Member 2018	ed School District Governir	NAME OF TREASURER Matthew Brach MAILING ADDRESS		
STREET ADDRESS (NO P.O. BOX)	, , , , , , , , , , , , , , , , , , , ,	Rancho Palos Verdes	STATE ZIP CODE CA 90275	
Rancho Palos Verdes CA 9027 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX	75 3124800389	NAME OF ASSISTANT TREASURER, IF ANY	OA 30270	3124000309
CITY STATE ZIP CO		CITY	STATE ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRESS		
I. Verification				
I have used all reasonable diligence in preparing and reviewin certify under penalty of perjury under the laws of the State of		n and	in the attached sched	dules is true and complete. I
Executed on 9/26/22	ī	ēr		_
Executed on 9/26/22	E eigninion or overnous		ponsible Officer of Sponsor	
Executed on	BySig	nature of Controlling Officeholder, Candidate, State Measure I	Proponent	
Executed on	Ву			

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

	RY	

Summary Page	to whole dollars.		Statem	ent covers period	FORM 460
SEE INSTRUCTIONS ON REVERSE			through		Page of
NAME OF FILER Matthew Brach					I.D. NUMBER 1413860
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column CALENDAR Y TOTAL TO D	YEAR DATE		mary for Candidates e State Primary and
1. Monetary Contributions	\$	\$		20. Contributions Received \$	\$\$
Expenditures Made 6. Payments Made	\$	\$			Summary for State re Expenditures Made* Voluntary Expenditure Limit) Total to Date
Current Cash Statement 12. Beginning Cash Balance	\$	To calculate Colunadd amounts in Columbre A to the correspond amounts from Columbre amounts in Columbre negative figures should be subtract previous period and this is the first reputiled for this calend only carry over the from Lines 2, 7, and any).	olumn nding numn B . Some nn A may s that ted from mounts. If ort being dar year, e amounts	Amounts in this section meported in Column B.	ay be different from amounts
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$			FPPC Advice: advi	FPPC Form 460 (Jan/2016)) ce@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

Campaign Disclosure Statement Summary Page

17. LOAN GUARANTEES RECEIVED...... Schedule B, Part 2 \$ 0

18. Cash Equivalents See instructions on reverse

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

Cash Equivalents and Outstanding Debts

Amounts may be rounded to whole dollars.

Statement covers period from 07/01/21 CALIFORNIA 460 through 12/31/21 Page 3 of 3

SEE INSTRUCTIONS ON REVERSE		through.	12/31/21	Page of
NAME OF FILER MATTHEW BRUCH				I.D. NUMBER 1413860
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	0	* O O O O O O O O O O O O O O O O O O O	Running in Both th General Elections	mary for Candidates e State Primary and arough 6/30 7/1 to Date \$\frac{0}{2}\$
Expenditures Made 6. Payments Made 7. Loans Made 8. SUBTOTAL CASH PAYMENTS 9. Accrued Expenses (Unpaid Bills) 10. Nonmonetary Adjustment 8. Schedule F, Line 3 11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 0 0 0 0	\$ \frac{0}{0} \\ \$ \frac{0}{0} \\ 0 \\ 0 \\ 0 \\ 0 \\ 0 \\ 0 \\ 0 \\		Summary for State ve Expenditures Made* Voluntary Expenditure Limit) Total to Date \$ 0
Current Cash Statement 12. Beginning Cash Balance	\$ 0 0 0 0 0	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	*Amounts in this section n reported in Column B.	\$_0 nay be different from amounts

this is the first report being

filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if

any).

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