2			6	S12Z
			(4) OC	COVER PAGE
Recipient Committee Campaign Statement Cover Page		LOS	PARCEIVED BY ANGELES COUN	CALIFORNIA 460
	Statement covers period from 10-17-2021	Date of election if applicable:	JAN -4 PM 4:5	Page 1 of 2 For Official Use Only
EE INSTRUCTIONS ON REVERSE	through 12-31-2021	(A)	MPAIGN FINANC	G07219
. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.		2. Type of Statement:		
State Candidate Election Committee Recall (Also Complete Part 5)  General Purpose Committee Sponsored Small Contributor Committee	rimarily Formed Ballot Measure committee Controlled Sponsored So Complete Part 6) rimarily Formed Candidate/ officeholder Committee So Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination) Amendment (Explain below	☐ Specination)	terly Statement sial Odd-Year Report
5. Committee information	. NUMBER 238887	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  Little Lake Education Association		NAME OF TREASURER		
Political Action Committee		Miguel Vancini Jr.		
CTDEET ABBRERS AIG BA BOVI		CITY	STATE ZIP CO	DDE AREA CODE/PHONE
		La Mirada	CA 906	
CITY STATE ZIP COL		NAME OF ASSISTANT TREASURER,	IF ANY	
Santa Fe Springs CA 9067 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX		MAILING ADDRESS		
CITY STATE ZIP CO	DE AREA CODE/PHONE	CITY	STATE ZIP CO	DDE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS	·	OPTIONAL: FAX / E-MAIL ADDRESS		-
<ul> <li>Verification         I have used all reasonable diligence in preparing and reviewing     </li> </ul>	ng this statement and to the best of my k	nowledge the information contained her	ein and in the attached sch	redules is true and complete. I
certify under penalty of perjury under the laws of the State of				,
Executed on January 4, 2022	Ву 🚤			— Gaa
Executed on	BySignature of Contro	olling Officeholder, Candidate, State Measure Propone	ent or Responsible Officer of Spons	or —
Executed on	Bys	gnature of Controlling Officeholder, Candidate, State	Measure Proponent	<del></del>

Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on \_\_\_\_\_

Date

FPPC Form 460 (Jan/2016))

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

## Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statement covers period from 10 - 17 - 2021	CALIFORNIA 460		
through 12 - 31 -2021	Page 2 of 2		
	I.D. NUMBER		
4.1	1238887		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Little Lake Education Association Political Action Committee

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{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$	\$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$	20. Contributions Received \$ 0.00 \$ 0.00  21. Expenditures Made \$ 0.00 \$ 0.00	
Expenditures Made  6. Payments Made	\$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$	\$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$ \$\frac{0.00}{0.00}\$	Expenditure Limit Summary for State Candidates  22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)  Date of Election (mm//dd/yy)	
Current Cash Statement  12. Beginning Cash Balance	0.00 0.00 0.00 7616.18	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,	*Amounts in this section may be different from amounts reported in Column B.	
17. LOAN GUARANTEES RECEIVED	\$ 0.00 \$ 0.00 \$ 0.00	only carry over the amounts from Lines 2, 7, and 9 (if any).	FPPC Form 460 (Jan/2016 FPPC Advice: advice@fppc.ca.gov (866/275-377 www.fppc.ca.go	