COVER PAGE

Recipient Committee Campaign Statement Cover Page

C	ecipient Committee ampaign Statement over Page				Date Stamp RECEIV 1.05 ANGELI	T 13 733	ALIFORNIA 460 FORM 14
SEI	E INSTRUCTIONS ON REVERSE		Statement covers period 7/1/2022 through 12/31/2022	Date of election if applicable: (Month, Day, Year) 6/7/2022	2023 FEB - I CAMPAIGN	PM 3: 1	2 For Official Use Only
1.	Type of Recipient Committee: All Commi	ttees – Co	omplete Parts 1, 2, 3, and 4.	2. Type of Statement:			
	✓ Officeholder, Candidate Controlled Committee  State Candidate Election Committee  Recall (Also Complete Part 5)  General Purpose Committee  Sponsored  Small Contributor Committee  Political Party/Central Committee		Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 To Amendment (Explain b	ermination)	_	Statement dd-Year Report
3.	Committee Information		D. NUMBER 1390574	Treasurer(s)			
	COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMM		100007-7	NAME OF TREASURER			
Shant Sahakian for Glendale School Board 2022			22	Shant Sahakian MAILING ADDRESS			
	STREET ADDRESS (NO P.O. BOX)			CITY Glendale	STATE CA	ZIP CODE 91206	AREA CODE/PHONE (818) 482-9858
	CITY STATE Glendale CA MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR	21P CO 9120		NAME OF ASSISTANT TREASURE	R, IF ANY		
	MALING ADDRESS (IF DIFFERENT) NO. AND STREET OR	P.O. BOX		MAILING ADDRESS			
	CITY STATE Glendale CA	ZIP CO 9122		CITY	STATE	ZIP CODE	AREA CODE/PHONE
	OPTIONAL: FAX / E-MAIL ADDRESS		· · · · · · · · · · · · · · · · · · ·	OPTIONAL: FAX / E-MAIL ADDRES	SS	-	
4.	Verification  I have used all reasonable diligence in preparing ar certify under penalty of perjury under the laws of the Executed on		By		ible Offic State Measure Proponent	ched schedul	es is true and complete. 1
	2010		O.g.	Januaring Surestines, Delicitation			

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2									
CALIF FC	ORNIA ORM	4	60						
Page _	20	f	14						

Officeholder or Candidate Controlled Commit	tee	6.	Primarily Formed Ballo	t Measure C	ommittee					
NAME OF OFFICEHOLDER OR CANDIDATE	·		NAME OF BALLOT MEASURE							
Shant Sahakian										
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT	NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTION		SUPPORT				
Glendale School Board District D						OPPOSE				
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CIT	, CA 91206		Identify the controlling officeholder, candidate, or state measure proponent, if any.							
Cicidate	, ON 01200		NAME OF OFFICEHOLDER, CAN	DIDATE, OR PROF	PONENT					
Related Committees Not Included in this State not included in this statement that are controlled by you or a contributions or make expenditures on behalf of your candid	re primarily formed to receive		OFFICE SOUGHT OR HELD		DISTRICT	NO. IFANY				
COMMITTEE NAME	I.D. NUMBER		-		I					
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Cand officeholder(s) or candidate(s)	lidate/Officel	holder Committee ommittee is primarily fo	List names of crimed.				
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX	YES NO		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT OR HE	SUPPORT OPPOSE				
CITY STATE ZIP COL	DE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT OR HE	SUPPORT OPPOSE				
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT OR HE	SUPPORT OPPOSE				
	CONTROLLED COMMITTEE?  YES NO		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT OR HE	SUPPORT OPPOSE				
CITY STATE ZIP COL			Δtta	ch continuation	sheets if necessary					
CHY SIATE ZIPCOL	JE AKEA GODE/PHONE		Atta	ch continuation	sheets if necessary					

## Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

1390574

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Shant Sahakian for Glendale School Board 2022

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
Monetary Contributions	\$ 0.00	\$13,315.00	General Elections  1/1 through 6/30 7/1 to Date
<ol> <li>SUBTOTAL CASH CONTRIBUTIONS</li></ol>	0.00	\$ \( \frac{13,315.00}{0.00} \) \$ \( \frac{13,315.00}{0.00} \)	20. Contributions Received \$\$  21. Expenditures Made \$\$
Expenditures Made  6. Payments Made	\$ 0.00 \$ 942.88 0.00 0.00	\$ 10,872.39 0.00 \$ 10,872.39 0.00 0.00 \$ 10,872.39	Expenditure Limit Summary for State Candidates  22. Cumulative Expenditures Made* (If Subject to Votuntary Expenditure Limit)  Date of Election Total to Date (mm/dd/yy) // \$
Current Cash Statement  12. Beginning Cash Balance	0.00 0.00 942.88 2,442.61	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.
Cash Equivalents and Outstanding Debts  18. Cash Equivalents See instructions on reverse  19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$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 (866/275-3772

<b>Schedule</b>	Schedule A		ts may be rounded		•	SCHEDULE		
	Contributions Received	to	whole dollars.	Statement cov	ers period 2022	CALIFORNIA Z FORM	<b>460</b>	
SEE INSTRUCTION	DNS ON REVERSE			through12/3	31/2022	Page of _	14	
NAME OF FILER						I.D. NUMBER 1390574		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR TO DAT	TE	
	N/A	☐IND ☐COM ☐OTH ☐PTY ☐SCC						
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
			SUBTOTAL \$	0.00	, a , a , a , a , a , a , a , a , a , a			
1. Amount re (Include a	A Summary eceived this period – itemized monetary contributions. Il Schedule A subtotals.)			0.00	IND: COM OTH	tributor Codes  Individual I Recipient Committee (other than PTY or Si Other (e.g., business	CC)	
3. Total mone	etary contributions received this period.			0.00	PTY	<ul> <li>Political Party</li> <li>Small Contributor Con</li> </ul>		

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.).....TOTAL \$

Schedule B – Part 1 Loans Received	to whole dollars.			Statement cov	ers period 2022	CALIFORNIA 460 FORM		
SEE INSTRUCTIONS ON REVERSE					through12/3	31/2022	Page 5	of 14
Shant Sahakian for Glendale School Boa	rd 2022						1390574	
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	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
N/A				PAID  \$	. \$	%	\$	CALENDAR YEAR  \$  PER ELECTION**
□ IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
				PAID  \$ FORGIVEN	\$	RATE	\$	\$PER ELECTION**
□ IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
				PAID  \$  FORGIVEN	.   \$	RATE	\$	\$PER ELECTION**
☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
		SUBTOTALS \$	0.00 \$	0.00	\$ 0.00	\$ 0.0	0	
Schedule B Summary  1. Loans received this period				\$	0.00	(Enter (e) on Schedule E, Line	3)	
(Total Column (b) plus unitemized loan 2. Loans paid or forgiven this period (Total Column (c) plus loans under \$10				\$	0.00		†Contributor Codes IND – Individual COM – Recipient C (other than	

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

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

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

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PTY - Political Party

(May be a negative number)

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

SCC - Small Contributor Committee

		A Secondary and the second second			SC	SCHEDULE B - PART		
Schedule B – Part 2		Amounts may be rounded to whole dollars.		Staten	nent covers period	CALIFO	CALIFORNIA 460	
_oan Guarantors					7/1/2022	FOR		
				through _	12/31/2022	Page	6 of 14	
SEE INSTRUCTIONS ON REVERSE								
						I.D. NUMBE		
Shant Sahakian for Glendale School Board	d 2022					1390574		
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)	LOAN		AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE	
N/A	☐ IND		LENDER			CALENDAR YEAR		
	отн ртү		DATE			PER ELECTION (IF REQUIRED)		
	□scc					\$		
	□IND		LENDER			CALENDAR YEAR		
	□сом					\$		
	□OTH □PTY		DATE			PER ELECTION (IF REQUIRED)		
	□scc					\$		
	□IND		LENDER			CALENDAR YEAR		
	□сом					\$		
	□отн □рту		DATE			PER ELECTION (IF REQUIRED)		
	□scc			•	ļ	\$		
<u> </u>	□IND		LENDER			CALENDAR YEAR		
	□сом					\$		
	□отн		DATE			PER ELECTION (IF REQUIRED)		
	 □PTY					, <u></u> ,		
	□scc					s		

Enter on Summary Page, Line 17 only.

0.00

SUBTOTAL \$

Schedule C			Amounts may be rounded						SCHEDULE		
	netary Contributions Received		to whole dollars.		S	Statement covers	period	CALIF			
•	•				fron	from7/1/2022			ORNIA 460		
SEE INSTRUC	TIONS ON REVERSE				thro	through 12/31/2022		Page7 of14			
NAME OF FILE			<del></del>			-		I.D. NUMI	BER		
Shant Sa	ahakian for Glendale School Board 2022							139057	74		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION GOODS OR SER		AMOUNT/ FAIR MARKET VALUE	CALEND.	ATIVE TO ATE AR YEAR DEC 31)	PER ELECTION TO DATE (IF REQUIRED)		
	N/A	□IND □COM □OTH □PTY □SCC									
		☐IND ☐COM ☐OTH ☐PTY ☐SCC									
		☐IND ☐COM ☐OTH ☐PTY ☐SCC									
		□IND □COM □OTH □PTY □SCC									
Attach add	ditional information on appropriately labeled	continuation	sheets.	SUBT	OTAL \$	0.00					
Schedul	e C Summary										
1. Amount	received this period – itemized nonmonetare all Schedule C subtotals.)				\$_	0.00	IND				
2. Amount	received this period – unitemized nonmone	tary contribut	ions of less than \$100		\$_	0.00		l – Òther (e	e.g., business entity)		
3. Total no	nmonetary contributions received this period	d.		•				' Political I C Small Co	earty ontributor Committee		

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)......TOTAL \$\_\_\_

FPPC Form 460 (Jan/2016)

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

0.00

www.fppc.ca.gov

## Schedule D SCHEDULE D **Summary of Expenditures** Amounts may be rounded Statement covers period **CALIFORNIA** to whole dollars. **Supporting/Opposing Other FORM** 7/1/2022 from **Candidates. Measures and Committees** 12/31/2022 through SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Shant Sahakian for Glendale School Board 2022 1390574 CUMULATIVE TO DATE PER ELECTION NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR DESCRIPTION DATE TYPE OF PAYMENT AMOUNT THIS CALENDAR YEAR TO DATE MEASURE NUMBER OR LETTER AND JURISDICTION. (IF REQUIRED) PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OR COMMITTEE N/A Contribution ■ Nonmonetary Contribution ☐ Independent Expenditure Support ☐ Oppose ☐ Monetary Contribution ■ Nonmonetary Contribution ☐ Independent Expenditure ☐ Support Oppose ☐ Monetary Contribution ■ Nonmonetary Contribution ☐ Independent □ Oppose Expenditure ☐ Support SUBTOTAL \$ 0.00 **Schedule D Summary** 0.00 1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.).....\$ 0.00 2. Unitemized contributions and independent expenditures made this period of under \$100......\$

0.00

Payments Made	to whole d			Statem	7/1/2022	CALIF	ORNIA 460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Shant Sahakian for Glendale School Board 2022				through_	12/31/2022	Page	
CODES: If one of the following codes accurately described campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  cvc civic donations  Fil. candidate filling/ballot fees  FND fundraising events  IND independent expenditure supporting/opposing others (explain)*  LEG legal defense  LIT campaign literature and mailings	MBR member com MTG meetings and OFC office expens PET petition circu PHO phone banks POL polling and s POS postage, deli PRO professional PRT print ads	amunications d appearance ses lating urvey resear very and me	es ch ssenger services	RAD radio RFD return SAL camp TEL t.v. or TRC candi TRS staff/s TSF transi VOT voter	ibe the payment. airtime and production of the contributions align workers' salaries cable airtime and produdate travel, lodging, and spouse travel, lodging, alfer between committees registration nation technology costs	uction costs I meals nd meals of the same	e candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DESC	CRIPTION OF PA	AYMENT		AMOUNT PAID
USPS Glendale, CA 91206		POS					\$258.00
Mailchimp Atlanta, GA 30308	-	WEB					\$225.00
Facebook Menlo Park, CA 94025			Social Media				\$200.00
* Payments that are contributions or independent expenditures must also be	e summarized on Sche	dule D.	· ·		SUE	STOTAL \$	683.00
Schedule E Summary							
1. Itemized payments made this period. (Include all Schedule	e E subtotals.)					\$	834.88
2. Unitemized payments made this period of under \$100						\$	108.00
3. Total interest paid this period on loans. (Enter amount from	n Schedule B, Par	t 1, Colum	ın (e).)			\$	0.00

942.88

SCHEDULE E

SCHEDULE E (CONT.) Schedule E Amounts may be rounded Statement covers period CALIFORNIA (Continuation Sheet) to whole dollars. **FORM** 7/1/2022 **Payments Made** from. 12/31/2022 through SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Shant Sahakian for Glendale School Board 2022 1390574 **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 candidate travel, lodging, and meals TRC staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research TRS IND independent expenditure supporting/opposing others (explain)\* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor PRO professional services (legal, accounting) VOT voter registration LEG legal defense campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail) NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Image Cube LIT \$151.88 Sylmar, CA 91342

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

				SCHE						
Schedule F Accrued Expenses (Unpaid Bills)	Amounts may be round to whole dollars.	ded	Statement co	vers period C	ALIFORI FORM					
				104 10000						
SEE INSTRUCTIONS ON REVERSE			through12/	/31/2022 F	Page11	of				
NAME OF FILER		-		1.1	D. NUMBER	<del> </del>				
Shant Sahakian for Glendale School Board 2022					390574					
CODES: If one of the following codes accurately describes	s the payment, you may	enter the code. Ot	herwise, describe tl	he payment.						
CMP campaign paraphernalia/misc.	MBR member communicatio			and production costs						
CNS campaign consultants	MTG meetings and appeara	nces								
CTB contribution (explain nonmonetary)* CVC civic donations	OFC office expenses PET petition circulating			rkers salaries lirtime and production	costs					
FIL candidate filing/ballot fees	PHO phone banks			vel, lodging, and meal						
FND fundraising events	POL polling and survey rese			ravel, lodging, and me						
IND independent expenditure supporting/opposing others (explain)* LEG legal defense	POS postage, delivery and r PRO professional services (I		TSF transfer betw VOT voter registra	een committees of the	same can	didate/sponsor				
LIT campaign literature and mailings	PRT print ads	egai, accounting)		tion echnology costs (interi	net. e-mail)	<b>1</b>				
	1	1		<del>,</del>	1					
NAME AND ADDRESS OF CREDITOR	CODE OR	(a) OUTSTANDING	(b) AMOUNT INCURRED	(c) AMOUNT PAID		(d) OUTSTANDING				
(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF PAYMENT	BALANCE BEGINNING	THIS PERIOD	THIS PERIOD (ALSO REPORT ON E	BA	LANCE AT CLOSE				
		OF THIS PERIOD		(ALGOTILI GITI GITE	.,	OF THIS PERIOD				
N/A										
		_								
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	0.00	\$ 0.00	\$ 0.0	0 \$	0.00				
Schedule F Summary	<u></u>									
Total accrued expenses incurred this period. (Include all S	chedule F. Column (b) sul	ototals for								
accrued expenses of \$100 or more, plus total unitemized a			INC	URRED TOTALS	\$	0.00				
2. Total accrued expenses paid this period. (Include all Sche				DAID TOTAL O	• •	0.00				
accrued expenses of \$100 or more, plus total unitemized p	•	•	)	PAID TOTALS	φ					
3. Net change this period. (Subtract Line 2 from Line 1. Ent	er the difference here and			<u>.</u>		0.00				
on the Summary Page, Column A, Line 9.)			***************************************	NET	May be a	negative number				

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)	t Amoui to	Amounts may be rounded to whole dollars.			7/1/2022 12/31/2022	CALIFORNIA 460 FORM  12 of 14	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				through		7-3-	
Shant Sahakian for Glendale School Board 2022						1.D. NUMBE	
NAME OF AGENT OR INDEPENDENT CONTRACTOR						1090074	<del></del>
NAME OF AGENT ON INDEEDED CONTINUED IN						_	
CODES: If one of the following codes accurately describes	the payment,	you may enter	the code. Othe	rwise, descr	ibe the payment.	-	
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  * Payments that are contributions or independent expenditures must also be	POS postage, de PRO professiona PRT print ads	nd appearances nses culating ss survey research elivery and messen al services (legal, a		RFD returne SAL campai TEL t.v. or c TRC candida TRS staff/sp TSF transfer VOT voter re	irtime and production of discontributions gn workers' salaries able airtime and producte travel, lodging, and ouse travel, lodging, are between committees egistration technology costs (	ction costs meals nd meals of the same c	•
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESC	RIPTION OF PAY	MENT		AMOUNT PAID
N/A							
							· · · · · ·

Attach additional information on appropriately labeled continuation sheets.

TOTAL\* \$

0.00

<sup>\*</sup> 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
Schedule H Loans Made to Others*			ay be rounded le dollars.		Statement co	vers period /2022	CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE		•			through12/	31/2022	Page 13	of14
NAME OF FILER			· · · · · ·				I.D. NUMBER	
Shant Sahakian for Glendale School Box	ard 2022						1390574	
FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (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 LOANED THIS PERIOD	(c) REPAYMENT O FORGIVENESS THIS PERIOD	S CLOSE OF THIS	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
N/A				☐ PAID				CALENDAR YEAR
				\$  □ FORGIVEN	\$	RATE	\$	\$ PER ELECTION**
		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
				☐ PAID				CALENDAR YEAR
				\$	s	RATE	\$	\$ PER ELECTION**
		\$	\$	s	DATE DUE	\$	DATE INCURRED	\$
*Loans that are contributions to another candidate also be summarized on Schedule D. Loans forgive reported on Schedule E.		SUBTOTALS	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00		
					_!	(Enter (e) on Schedule I, Line 3)	-	
Schedule H Summary								
Loans made this period  (Total Column (b) plus unitemized loans					\$	0.00	- [	**If Required
Payments received on loans  (Total Column (c) plus unitemized payn					\$	0.00	_	
<ol><li>Net change this period. (Subtract Line 2 (Enter the net here and on the Summa)</li></ol>						0.00 ay be a negative number)	-	

Schedule		Amounts may be rounded	SCHEDULE						
Miscellaneous Increases to Cash  SEE INSTRUCTIONS ON REVERSE NAME OF FILER		to whole dollars.	Statement covers period  from 7/1/2022  through 12/31/2022	CALIFORNIA 460 FORM Page 14 of 14  I.D. NUMBER					
					Shant Sahak	kian for Glendale School Board 2022			1390574
					DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER L.D. NUMBER)		DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
						N/A		-	
Attach additional information on appropriately labeled continuation sheets. SUBTOTAL				-\$ 0.00					
		<del></del>							
Schedule I	_		g 0.00	n					
1. Itemized increases to cash this period.			Ψ	<del>-</del>					
Unitemized increases to cash of under \$100 this period				<del>-</del>					
			φφ	<u>-</u>					
	ellaneous increases to cash this period. (Add Lines 1, 2,		TOTAL \$0.00	<u>)</u>					