Date Stamp

Recipient Committee	
Campaign Statement	
Cover Page	

Recipient Committee Campaign Statement Cover Page		RECEIV LOS ARGELA	ED BY	FOR	
	Statement covers period from 7 / 1 / 2022	Date of election if applicable: (Month, Day, Year)[]] AUG 30	PM 1: 33	Page	of Official Use Only
SEE INSTRUCTIONS ON REVERSE	through 12/31/2022	N/A CAMPAIGN BISCL DSURE	FINANCE SECTION		
1. Type of Recipient Committee: All Committees - Com	nplete Parts 1, 2, 3, and 4.	2. Type of Statement:		-	
State Candidate Election Committee Recall (Also Complete Part 5)	rimarily Formed Ballot Measure committee Controlled Sponsored lso Complete Part 6)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination Management (Explain below)	□s	Quarterly Stateme pecial Odd-Year	nt Report
Small Contributor Committee Committee Political Party/Central Committee	rimarily Formed Candidate/ officeholder Committee uso Complete Part 7)				
3. Committee Information	NUMBER 133970	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) RUSSELL CASTANEDA CALLERUS FOR W	UHSD BOARD 2022	MARIA CASTANEDA CA	LLEROS		
STREET ADDRESS (NO P.O. BOX)		WHITTIER		O601	AREA CODE/PHONE
WHITTIER CA 904 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX	601 (562)305-0190	NAME OF ASSISTANT TREASURER, IF AN MAILING ADDRESS	NY		
N/A	· ·	NA	•		
STATE ZIP CO	DE AREA CODE/PHONE	N/A	STATE ZI	PCODE	AREA CODE/PHONE
OPTIONAL: FAX/E-MAIL ADDRESS		OPTIONAL: FAX/E-MAIL ADDRESS			
4. Verification I have used all reasonable diligence in preparing and reviewing certify under penalty of perjury under the laws of the State of Executed on 8/2/2033 Executed on 8/30/23		nowledge the information contained herein	and in the attached	schedules is true	and complete. I
Executed on	ઝ	griature oi Contronnig Onicentiquei, Çandidate, State meas	suie Fiopoleiit	nsor	
Executed onDate	By Si	gnature of Controlling Officeholder, Candidate, State Meas	sure Proponent	FPPC F	form 460 (Jan/2016))

Recipient Committee Campaign Statement Cover Page — Part 2

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CALIFORN FORM	^{IA} 460

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5. Officeholder or Candidate Controlled Commi	ttee	6.	Primarily Formed Ballot	Measure C	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE				
RUSSELL CASTANIEDA CALLEROS			N/A				
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR			BALLOT NO. OR LETTER	JURISDICTIO	N	Ιп	SUPPORT
WHITTIER UNION HIGH SCHOOL DISTRICT	-TRUSTEE AREA 1					_	OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CI	TY STATE ZIP						
WHI	TTIER CA 90605		Identify the controlling officeh			ropo	nent, if any.
			NAME OF OFFICEHOLDER, CAN	DIDATE, OR PI	ROPONENT		
Related Committees Not Included in this State not included in this statement that are controlled by you or contributions or make expenditures on behalf of your cand	are primarily formed to receive		OFFICE SOUGHT OR HELD		DISTRICT	NO. I	FANY
COMMITTEE NAME	I.D. NUMBER						1
NI /A							
10 (7		7.	Primarily Formed Candi	idate/Office	holder Committee	List	names of
NAME OF TREASURER	CONTROLLED COMMITTEE?		officeholder(s) or candidate(s) i	for which this	committee is primarily fo	rmed	1
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. E	YES NO		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT OR H	ELD	1-
COMMITTEE ADDRESS STREET ADDRESS (NO F.O. E	,		N/A				SUPPORT OPPOSE
CITY STATE ZIP C	ODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT OR H	ELD	SUPPORT
							OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR O	ANDIDATE	OFFICE SOUGHT OR H	EI D	
			NAME OF OFFICEROLDER OR C	ANDIDATE	OFFICE SOUGHT ON H	ELD	SUPPORT
NAME OF TREASURER	CONTROLLED COMMITTEE?						OPPOSE
NAME OF TREASURER			NAME OF OFFICEHOLDER OR O	ANDIDATE	OFFICE SOUGHT OR H	ELD	☐ SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. I	YES NO						☐ OPPOSE
OTHER PORTEON (NO FIG.)	,						1
CITY STATE ZIP C	ODE AREA CODE/PHONE		Attac	ch continuatio	on sheets if necessary		

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statement covers period from 7/1/2022	CALIFORNIA 460
through 12/31/2022	Page 3 of 8
	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

RUSSIELL CASTANIEDA CALLEROS FOR WUHSD BOARD 2022 1001900 Calendar Year Summary for Candidates Column A Column B Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE **General Elections** 1. Monetary Contributions...... Schedule A, Line 3 1/1 through 6/30 7/1 to Date 2. Loans Received Schedule B. Line 3 20. Contributions SUBTOTAL CASH CONTRIBUTIONS...... Add Lines 1 + 2 \$ Received Nonmonetary Contributions..... Schedule C, Line 3 21. Expenditures Made TOTAL CONTRIBUTIONS RECEIVEDAdd Lines 3 + 4 **Expenditures Made Expenditure Limit Summary for State** 1530.00 6. Payments Made..... Schedule E, Line 4 **Candidates** Loans Made Schedule H. Line 3 629.99 22. Cumulative Expenditures Made* 1530.00 8. SUBTOTAL CASH PAYMENTS...... Add Lines 6 + 7 (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy) 10. Nonmonetary Adjustment...... Schedule C, Line 3 1,530,00 ,629,99 11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10 \$ **Current Cash Statement** 466.60 12. Beginning Cash Balance Previous Summary Page, Line 16 To calculate Column B, add amounts in Column 13. Cash Receipts Column A, Line 3 above A to the corresponding 200,00 *Amounts in this section may be different from amounts 14. Miscellaneous Increases to Cash Schedule I. Line 4 amounts from Column B reported in Column B. of your last report. Some 15. Cash Payments Column A, Line 8 above amounts in Column A may 136.60 be negative figures that should be subtracted from If this is a termination statement, Line 16 must be zero. previous period amounts. If this is the first report being filed for this calendar year, 17. LOAN GUARANTEES RECEIVED...... Schedule B, Part 2 \$ only carry over the amounts from Lines 2, 7, and 9 (if **Cash Equivalents and Outstanding Debts** any). 18. Cash Equivalents...... See instructions on reverse \$ FPPC Form 460 (Jan/2016)) 19. Outstanding Debts...... Add Line 2 + Line 9 in Column B above

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

www.fppc.ca.gov

Schedule B - Part 1 Loans Received

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

	SCHEDULE B - PART 1
Statement covers period from 7/1/2022	CALIFORNIA 460
through 12/31/2022	Page 4 of 8
	I.D. NUMBER
	1339730

NAME OF FILER CASTANEDA CALLEROS FOR WUHSD BOARD 2022 RUSSELL

(c) AMOUNT PAID (e) INTEREST IF AN INDIVIDUAL, ENTER OUTSTANDING **AMOUNT** OUTSTANDING ORIĞİNAL CUMULATIVE FULL NAME, STREET ADDRESS AND ZIP CODE OCCUPATION AND EMPLOYER BALANCE OR FORGIVEN BALANCE AT PAID THIS AMOUNT OF OF LENDER RECEIVED THIS CONTRIBUTIONS (IF SELF-EMPLOYED, ENTER BEGINNING THIS CLOSE OF THIS PERIOD (IF COMMITTEE, ALSO ENTER I.D. NUMBER) PERIOD THIS PERIOD . LOAN TO DATE NAME OF BUSINESS) PERIOD PERIOD CALENDAR YEAR PAID \$ 1,200.00 RUSSELL CASTANEDA CALLEROS ADMINISTRATOR RATE ☐ FORGIVEN PER ELECTION* 1,200,00 RÍO HONDO WHITTIER, CA 90601 COLLEGE TIND □ COM □ OTH □ PTY □ SCC DATE DUE PAID CALENDAR YEAR RATE ☐ FORGIVEN PER ELECTION** DATE DUE DATE INCURRED ☐ COM ☐ OTH ☐ PTY ☐ SCC ☐ PAID CALENDAR YEAR RATE ☐ FORGIVEN PER ELECTION* DATE DUE DATE INCURRED □ COM □ OTH □ PTY □ SCC SUBTOTALS \$ 1,200 .00 \$1,200.00 \$

(Enter (e) on Schedule E, Line 3)

Schedule B Summary

1. Loans received this period (Total Column (b) plus unitemized loans of less than \$100.)

 Loans paid or forgiven this period...... (Total Column (c) plus loans under \$100 paid or forgiven.) (Include loans paid by a third party that are also itemized on Schedule A.)

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

(May be a negative number)

†Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

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

Schedule D	
Summary of Expenditures	
Supporting/Opposing Other	
Candidates, Measures and Committe	es

Amounts may be rounded to whole dollars.

Statement covers period from $\frac{7}{1/2022}$ CALIFORNIA 460 FORM

through $\frac{12}{31/2022}$ Page 5 of 8

SEE INSTRUCTION	ONS ON REVERSE			through ()		Page	of _
RUSSELL	N	WUHSD B	DARD 2022			1339	1730
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	CUMULATIVI CALENDA (JAN. 1 - E	RYEAR	PER ELECTION TO DATE (IF REQUIRED)
9/8/22	IRMA RODRIGUEZ MOISA FOR WUHSD BOARD-AREA 4 TRUSTEE 2022 ID#1453466 V Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure		\$100.00			
9/27/22	IRMA RODRIGUEZ MOISA FOR WUHSD BOARD-AREA 4 TRUSTEE 2022 ID# 1453466 Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure		\$100.00			
0/20/22	IRMA RODRIGUEZ MOISA FOR WUHSD BOARD-AREA4 TRUSTEE 2022 ID#1453466 Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure		\$100.00			
			SUBTOTAL	\$300.00			

Schedule D Summary	O a	-A)	00
1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)	<u>\$ 30</u>	0-	
2. Unitemized contributions and independent expenditures made this period of under \$100	\$	Ø	

FPPC Form 460 (Jan/2016))

Schedule	E
Payments	Made

Amounts may be rounded to whole dollars.

Statement covers period from 7/1/2022 CALIFORNIA 460 FORM

SEE INSTRUCTIONS ON REVERSE	through 12/31/2022	Page 6	_ of _8'_
NAME OF FILER RUSSELL CASTANEDA CALLEROS FOR WUHSD BOARD 2022		1.D. NUMBER 1339°	
CODES: If one of the following codes accurately describes the payment, you may enter the compaign paraphernalia/misc. CMP campaign paraphernalia/misc. CMS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations candidate filing/ballot fees FIL candidate filing/ballot fees fundraising events IND independent expenditure supporting/opposing others (explain)* legal defense LTC campaign literature and mailings MBR member communications meetings and appearances office expenses PET petition circulating phone banks POL polling and survey research postage, delivery and messenger se professional services (legal, account print ads	RAD radio airtime and production con returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and product TRC candidate travel, lodging, and no staff/spouse travel, lodging, and returned transfer between committees of	ion costs neals . I meals the same ca	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE OR	DESCRIPTION OF PAYMENT		AMOUNT PAID
NORWALK CA 90650	DIDATE BALLOT STATEMENT A	TE /	200.
TRMA RODRIGUEZ-MOISA FOR WUHSD BOARD AREA 4 TRUSTEE - 2022 CTB CAMP 10 # 1453466	PAIGN CONTRIBUTION		100-0
IRMA RODRIGUEZ MOISA FOR WUHSD BOARD-AREA 4 TRUSTEE	IPAIGN CONTRIBUTION		100.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUB	TOTAL\$ /	400 00
Schedule E Summary 1. Itemized payments made this period. (Include all Schedule E subtotals.)		\$	30.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Pag	ge, Column A, Lìne 6.)TOTA	AL \$ 1,2	30.00

Schedule E
Continuation Sheet)
Payments Made

Amounts may be rounded to whole dollars.

Statement covers period from $\frac{7/1/2022}{1/2022}$

CALIFORNIA 460

SCHEDULE E (CONT.)

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

RUSSELL CASTANEDA, CALLEROS FOR WUHSD BOARD 2022

1.D. NUMBER 1339780

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

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 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		AMO	UNT PAID
IRMA RODRIGUEZ-MOISA FOR WUHSD BOARD AREA 4 TRUSTEE 2022	CTB	CAMPAIGN	CONTRIBUTION	10	00
WHITTIER, CA 90603 D# 1453466					
					<u> </u>
	 				
					00

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

SUBTOTAL \$ / OO .

		Amounts may be to whole doll:		Statement covers period from $\frac{7/1/2022}{1/2022}$	GALIFORM FORM	-104	
EE INSTRUCTIONS ON REVERSE						of	_
AME OF FILER RUSSELL CASTANEDA CALLEROS FOR WUHSD BOARD 2022							
DATE RECEIVED	FULL NAME AND ADDRESS OF SOU (IF COMMITTEE, ALSO ENTER I.D. NUMBE		DES	CRIPTION OF RECEIPT	1 1	UNT OF SE TO CASH	
10/14/22	LOS ANGELES COUNTY REGISTI	RAR RECORDER/ CLERK	1	MENT OF STATEMENT EING UNOPPOSED)	1,20	0,00	Ì
	NORWALK, CA 90650						
	tional information on appropriately labeled continuation	sheets.		SUBTOTAL	\$ 1,20	00.0	10
Schedule I Summary 1. Itemized increases to cash this period					0		
	increases to cash of under \$100 this period			O	_		

3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)\$___