De double at Committee				405	ンルフ COVER PAGE
Rediplent Committee Campaign Statement Cover Page			NECEIVED BY	FOR	RNIA 460
	Statement covers period from 07-01-2022	Date of election if applicable: (Month, Day, Year)	.03 ANGELES COI	For (of 2
SEE INSTRUCTIONS ON REVERSE	through 12-31-2022		CAMPAIGN FINA	HOE G	10032
1. Type of Recipient Committee: All Committees - Committe	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:	reelections and	TOR	
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored Uso Complete Part 6) Primarily Formed Candidate/ Officeholder Committee Uso Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te Amendment (Explain be page 2 Column B line	ermination)	Quarterly Stateme Special Odd-Year n A lines 12 an	Report
3 Committee intormation	324265	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)	021200	NAME OF TREASURER			
Glendale Teachers Public Eduction Improvement Fu	nd	Greta Sukazian MAILING ADDRESS			
STREET ADDRESS (NO P.O. BOX)		CITY	STATE	ZIP CODE	AREA CODE/PHONE
		Glendale	CA	91208	818-240-3924
CITY STATE ZIP CO	DE AREA CODE/PHONE	NAME OF ASSISTANT TREASUR	ER, IF ANY		
Glendale CA 9120 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX		MAILING ADDRESS			
CITY STATE ZIP CO	DE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRE	ESS .		
Verification I have used all reasonable diligence in preparing and reviewi certify under penalty of perjury under the laws of the State of Executed on	California that the foregoing is true and				e and complete. I
Executed onDate		Signature of Controlling Officeholder, Candidate,	State Measure Proponent		
Executed onDate	Ву	Signature of Controlling Officeholder, Candidate,	State Measure Proponent		

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

ummary Page	to whole dollars.		Statement covers period 07-01-2022	FORM 460
EE INSTRUCTIONS ON REVERSE		thro	ugh 12-31-2022	Page 2 of 2
ME OF FILER				I.D. NUMBER
lendale Teachers Public Education Improvement Fund				1324265
ontributions Received	Column A TOTAL THIS PERIOD (EROM ATTACHED SCHEDURES)	Column B CALENDAR YEAR	•	nmary for Candidates

1. Monetary Contributions	0	* 32.865 0 32.865 0 32.865	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections 1/1 through 6/30 7/1 to Date 20. Contributions Received \$ \$	
Expenditures Made 6. Payments Made	0	\$\frac{136.544}{0}\$ \$\frac{136.544}{0}\$ 0 0 136.544	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 Beginning Cash Balance	\$ 59.372 12.915 0 1.665 \$ 70.622	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, and corrections.	*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	\$ <u>0</u>	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	