Recipient Committee CALIFORNIA Campaign Statement **FORM Cover Page** (Government Code Sections 84200-84216.5) Date of election if applicable Statement covers period (Month, Day, Year) 10/18/2020 from AMPAIGN FINANCE 11/03/2020 12/31/2020 SEE INSTRUCTIONS ON REVERSE through _ 1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. 2. Type of Statement: Preelection Statement X Officeholder, Candidate Controlled Committee Primarily Formed Ballot Measure Quarterly Statement State Candidate Election Committee Committee X Semi-annual Statement Special Odd-Year Report O Recall Controlled Termination Statement Supplemental Preelection (Also Complete Part 5) Sponsored (Also file a Form 410 Termination) Statement - Attach Form 495 (Also Complete Part 6) X Amendment (Explain below) General Purpose Committee Primarily Formed Candidate/ Sponsored Ammending Beginning & Ending Cash Officeholder Committee O Small Contributor Committee (Also Complete Part 7) O Political Party/Central Committee I.D. NUMBER 3. Committee Information Treasurer(s) 1427595 COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) NAME OF TREASURER Mazen Nabulsi for Cerritos College Board 2020 Gary Crummitt MAILING ADDRESS STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE AREA CODE/PHONE CA 90802 (562) 983-0815 Long Beach CITY STATE ZIP CODE AREA CODE/PHONE NAME OF ASSISTANT TREASURER, IF ANY Long Beach CA 90802 (562) 983-0815 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX MAILING ADDRESS CITY STATE ZIP CODE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS gary@crummittandassociates.com Verification I have used all reasonable diligence in preparing and reviewing this statement and to the b tained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true a 07/16/2021 Executed on . or Assistant Treasurer 07/16/2021 Executed on . Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor Executed on Signature of Controlling Officeholder, Candidate, State Measure Proponent

Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (Jan/2016)
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Executed on _

Recipient Committee Campaign Statement Cover Page — Part 2

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			100000000000000000000000000000000000000		Primarily Formed Ball				
NAME OF OFFICEHOLDER OR CANDIDATE					NAME OF BALLOT MEASURE	W			
Mazen Nabulsi									
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIST	RICT NUMBER IF	APPLICABL	-E)		BALLOT NO. OR LETTER	JURISDICT	ION		SUPPORT
Community College Board Cerritos College I	District 1								OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP						
	Long Beach	CA	90802		Identify the controlling of	ficeholder, ca	andidate, or st	tate measure	proponent, if a
	bong beating		30002		NAME OF OFFICEHOLDER, CA	NDIDATE, OR P	ROPONENT		
Related Committees Not Included in this S	Statement: 12	et any cor	nmittane						
not included in this statement that are controlled by yo					OFFICE SOUGHT OR HELD			DISTRICT NO.	IF ANY
contributions or make expenditures on behalf of your	candidacy.								
COMMITTEE NAME	I.D. NUMBER								
	E-market control of the sar								
				7	Primarily Formed Can	didate/Offi	aabaldar Cr	ammittan /	· · · · · · · · · · · · · · · · · · ·
NAME OF TREASURER	CONTROLLED	COMMITT	EE?	7.	officeholder(s) or candidate(
	☐ YES	☐ NO							
COMMITTEE ADDRESS STREET ADDRESS (NO P.O	. BOX)				NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
CITY STATE ZIF	CODE	AREA COD	E/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	
									SUPPORT
COMMITTEE NAME	I.D. NUMBER								_ COPPOSE
The state of the s	I.D. NOMBER				NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	☐ SUPPORT
									OPPOSE
					NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	
NAME OF TREASURER	CONTROLLED	COMMITT	EE?				211102 000		_
NAME OF TREASURER	CONTROLLED YES	COMMITT NO			THE OF OFFICE HOLDER OF			OITI OITIEED	SUPPOR
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO P.O	☐ YES							OH OKTIEED	
	☐ YES							OH OKTILLO	SUPPOR OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O	YES						ion sheets if i		

Campaign Disclosure Statement **Summary Page**

Amounts may be rounded to whole dollars.

		SUMMARY PA	AGE
Statem	ent covers period	CALIFORNIA 16	n
from	10/18/2020	FORM TO	_
through _	12/31/2020	Page3 of6	-
		I.D. NUMBER	

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Mazen Nabulsi for Cerritos College Board 2020 1427595

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	\$	150.00	\$	1,970.00	1/1 through 6/30 7/1 to Date
2. Loans Received Schedule B, Line 3		0.00		40,000.00	**************************************
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	150.00	\$	41,970.00	20. Contributions Received \$ \$
4. Nonmonetary Contributions Schedule C, Line 3		0.00		0.00	21 Evpanditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	150.00	\$	41,970.00	Made \$ \$
Expenditures Made					Expenditure Limit Summary for State
S. Payments Made Schedule E, Line 4	\$	3,448.20	\$	41,356.28	Candidates
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulative Expenditures Made*
B. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	3,448.20	\$	41,356.28	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3		0.00		0.00	Date of Election Total to Date
10. Nonmonetary Adjustment		0.00		0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$	3,448.20	\$	41,356.28	\$
Current Cash Statement					\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	3,911.92	То	calculate Column B, add	
3. Cash Receipts Column A, Line 3 above		150.00		nounts in Column A to the rresponding amounts	
4. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	m Column B of your last	*Amounts in this section may be different from amounts reported in Column B.
5. Cash Payments Column A, Line 8 above		3,448.20		oort. Some amounts in slumn A may be negative	
6. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	613.72	fig	ures that should be	
If this is a termination statement, Line 16 must be zero.			ре	btracted from previous riod amounts. If this is a first report being filed	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2		0.00	for	this calendar year, only rry over the amounts	
Cash Equivalents and Outstanding Debts				m Lines 2, 7, and 9 (if y).	
18. Cash Equivalents See instructions on reverse	\$	0.00	ai	,,,	
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	40,000.00	ı		
			ı		FPPC Form 460 (Jai FPPC Advice: advice@fppc.ca.gov (866/27)

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Schedule A Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period	CALIFORNIA 460
from10/18/2020	FORM TOO
through _12/31/2020	Page4 of6
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	1427595

NAME OF FILER

SEE INSTRUCTIONS ON REVERSE

Mason Wabulsi for Corritor College Board 2020

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/24/2020	Mike Karim San Diego, CA 92103	⊠IND □COM □OTH □PTY □SCC	Retired N/A	100.00	280.00	
		IND COM OTH PTY SCC				
		IND COM OTH PTY SCC				
		□IND □COM □OTH □PTY □SCC				
		□IND □COM □OTH □PTY □SCC				

Schedule A Summary

- 1. Amount received this period itemized monetary contributions. 100.00 (Include all Schedule A subtotals.)\$
- 2. Amount received this period unitemized monetary contributions of less than \$100\$ 50.00
- 3. Total monetary contributions received this period. 150.00

*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

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Schedule B – Part 1 Loans Received	Am	to whole dollar			Statement cov	vers period 8/2020	CALIFORN FORM	IIA 460
SEE INSTRUCTIONS ON REVERSE					through12/3	1/2020	Page5	of6
NAME OF FILER							I.D. NUMBER	
Mazen Nabulsi for Cerritos College Box	ard 2020						1427595	
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)	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT RECEIVED THIS PERIOD	AMOUNT PAIL OR FORGIVE THIS PERIOD	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Mazen Nabulsi	Realtor 24hr. Real Estate			PAID				CALENDAR YEAR
Long Beach, CA 90802				\$ FORGIVEN	n \$_15,000.00	0_00% RATE	\$ 15.000.00	\$ 40,000.00 PER ELECTION**
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$ 15,000.00	\$0.00	\$ 0.00	0 12/31/2021 DATE DUE	\$ 0.00	07/03/2020 DATE INCURRED	s
Mazen Nabulsi	Realtor 24hr. Real Estate			PAID				CALENDAR YEAR
Long Beach, CA 90802 LOAN				\$ 0_00	0 \$ _25,000.00	0_00% RATE	\$ 25,000.00	\$ _40,000.00 PER ELECTION ***
TIND □ COM □ OTH □ PTY □ SCC		\$ 25,000.00	\$0.00	\$0.00	0 12/31/2021 DATE DUE	\$0_0	08/12/2020 DATE INCURRED	s
				PAID				CALENDAR YEAR
				\$ FORGIVEN	- \$	RATE %	s	\$ PER ELECTION ***
† IND COM OTH PTY SCC		s	s	s	DATE DUE	s	DATE INCURRED	s
		SUBTOTALS \$	\$ 0.00\$	\$ 0.0	00\$ 40,000.00	\$ 0.00		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
1. Loans received this period				\$	0.00	_		
(Total Column (b) plus unitemized loan	ns of less than \$100.)					to	Contributor Codes	į.

1.	Loans received this period	\$.	0.00
	(Total Column (b) plus unitemized loans of less than \$100.)		
2.	Loans paid or forgiven this period	\$	0.00
	(Total Column (c) plus loans under \$100 paid or forgiven.)		
	(Include loans paid by a third party that are also itemized on Schedule A.)		
3.	Net change this period. (Subtract Line 2 from Line 1.)	\$.	0 . 00
	Enter the net here and on the Summary Page, Column A, Line 2.		(may as a negative names)

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.

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Schedule E Payments Made

Amounts may be rounded to whole dollars.

Stateme	ent covers period	CALIFORNIA 460
from	10/18/2020	FORM TO
through _	12/31/2020	Page _ 6 _ of _ 6 _
		I.D. NUMBER

COLUEDIUE E

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Mazen Nabulsi for Cerritos College Board 2020 1427595 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 campaign consultants CNS MTG meetings and appearances returned contributions contribution (explain nonmonetary)* office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* transfer between committees of the same candidate/sponsor ND postage, delivery and messenger services TSF legal defense professional services (legal, accounting) voter registration VOT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail) NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID Crummitt & Associates PRO 520.00 Long Beach, CA 90802 Crummitt & Associates PRO 520.00 Long Beach, CA 90802 The Walking Man, Inc. Flyer Distribution 2,400.00 Los Angeles, CA 90021 Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL\$ 3,440.00 Schedule E Summary Itemized payments made this period. (Include all Schedule E subtotals.) 3,440.00 2. Unitemized payments made this period of under \$100

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0.00

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