Campaign Statement Cover Page Government Code Sections 84200-84216.5) EE INSTRUCTIONS ON REVERSE Type of Recipient Committee: All Committees - Co		Date of election if applicable: (Month, Day, Year) 2. Type of Statement:	Date Stamp And Postmark RECEIVED LOS ANGELES 2024 AUG 29 PH CAMPAIGN FIN	2: 30 Official Use Only
○ State Candidate Election Committee Committee ○ Recall (Also Complete Part 5) ○ General Purpose Committee (Fig. 1) ○ Sponsored □ Fig. 2) ○ Small Contributor Committee (Fig. 2) ○ Political Party/Central Committee (Fig. 2)	Primarily Formed Ballot Measure Committee Controlled Sponsored Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee Also Complete Part 7) DIVIMBER	☐ Preelection Statement ☐ Semi-annual Statement ☐ Termination Statement (Also file a Form 410 Term ☐ Amendment (Explain below	Specification) Specification State	rterly Statement cial Odd-Year Report plemental Preelection ement - Attach Form 495
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Triston Ezidore for Culver City Unified Scho STREET ADDRESS (NO P.O. BOX)	1447002 ol Board 2022	Treasurer(s) NAME OF TREASURER Nancy Barba MAILING ADDRESS CITY Culver City	STATE ZIP C	
CITY STATE ZIP CO CA 9023 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. B CITY STATE ZIP CO	0 (818)277-0617	NAME OF ASSISTANT TREASURER MAILING ADDRESS		· · · · · · · · · · · · · · · · · · ·
OPTIONAL: FAX / E-MAIL ADDRESS Verification		OPTIONAL: FAX / E-MAIL ADDRES	s	
I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California Executed on		itant Trea		ules is true and complete. I certify
Executed on	By	e Propone Signature of Controlling Officeholder, Candidate, State I	ent or Responsible Officer of Sponsor Measure Proponent	
Date	-,	Signature of Controlling Officeholder, Candidate, State	Measure Proponent	EDDA F 100 / 1 100 / 1

COVER PAGE

Recipient Committee Campaign Statement Cover Page — Part 2

	COVER	PAGE-PART 2
	ORNIA RM	460
Page _	2	of6

NAME OF OFFICEHOLDER OR CANDIDATE						NAME OF BALLOT MEASURE				
Triston Ezidore							- T			
OFFICE SOUGHT OR HELD (INCLUDE LOCA	ATION AND DISTR	RICT NUMBER IF	APPLICABI	LE)		BALLOT NO. OR LETTER	JURISDICTIO	ON		SUPPORT OPPOSE
Board of Education										OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. A	ND STREET)	CITY	STATE	ZIP						
	c	Culver City	CA	90230		identify the controlling of			ate measure p	roponent, if any
						NAME OF OFFICEHOLDER, CA	NDIDATE, OR PR	OPONENT		
Related Committees Not Include	ded in this S	tatement: /	ist any coi	mmittees						
not included in this statement that are c			•			OFFICE SOUGHT OR HELD			DISTRICT NO. II	FANY
contributions or make expenditures on	behalf of your c	andidacy.								
COMMITTEE NAME		I.D. NUMBER	R							
		- 1								
					7.	Primarily Formed Can	didate/Offic	eholder Co	mmittee Lis	st names of
NAME OF TREASURER		CONTROLLE	D COMMIT	TEE?		officeholder(s) or candidate(
		1				* *	•			ou.
		☐ YES	□ NO	<u> </u>		NAME OF OFFICEHOLDER OR		OFFICE SOU	GHT OR HELD	1
COMMITTEE ADDRESS STREET AD	DDRESS (NO P.O.		□ NO	<u> </u>		NAME OF OFFICEHOLDER OR		OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET AD	•			DE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE		GHT OR HELD	SUPPORT OPPOSE
	•	BOX)					CANDIDATE			SUPPORT
	•	BOX)	AREA COL			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
СІТУ	•	BOX)	AREA COL				CANDIDATE	OFFICE SOU		SUPPORT OPPOSE SUPPORT SUPPORT
СІТУ	•	BOX)	AREA COL			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE
СІТУ	•	CODE I.D. NUMBER	AREA COL	DE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE NAME NAME OF TREASURER	•	BOX) CODE	AREA COD	DE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE SUPPORT SUPPORT
COMMITTEE NAME NAME OF TREASURER	•	CONTROLLE	AREA COL	DE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT SUPPORT
COMMITTEE NAME NAME OF TREASURER	STATE ZIP	CONTROLLE	AREA COL	DE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT SUPPORT

Campaign Disclosure Statement Summary Page

SUMMARYPAGE

Summary Page	to whole dollars.	State	ement covers period	CALIFORNIA 460
		from	07/01/2023	FORM TOU
EE INSTRUCTIONS ON REVERSE		through	12/31/2023	Page3 of6
AME OF FILER				I.D. NUMBER
riston Ezidore for Culver City Unified School Board 2022				1447002
	O-luma A	0-1 D	0 1 1 2	in a Control of the Control

Triston Ezidore for Culver City Unified School Board 2022				1447002
Contributions Received	Column A TOTAL THIS PERIOD (FROMATTACHED 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	\$ 0.00	\$	0.00	
2. Loans Received Schedule B, Line 3	0.00		0.00	1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 0.00	\$	0.00	20. Contributions Received \$\$
4. Nonmonetary Contributions Schedule C, Line 3	0.00		0.00	21. Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 0.00	\$	0.00	Made \$\$
Expenditures Made				Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$ 2,837.06	\$	2,837.06	Candidates
7. Loans Made Schedule H, Line 3	0.00		0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 2,837.06	\$	2,837.06	(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 Schedule C, Line 3	0.00		. 0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$ 2,837.06	\$	2,837.06	/
Current Cash Statement				/ \$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 11,880.78	То	calculate Column B, add	
13. Cash Receipts Column A, Line 3 above	0.00		responding amounts	
14. 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 amount reported in Column B.
15. Cash Payments Column A, Line 8 above	2,837.06		oort. Some amounts in lumn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 9,043.72	fig	ures that should be otracted from previous	
If this is a termination statement, Line 16 must be zero.	 	ре	riod amounts. If this is	
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	\$			
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ 0.00			
		i		FPPC Advice: advice@fppc ca gov (866)

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

Schedule E	
Payments Made	

Amounts may be rounded to whole dollars.

	SCHEDULE E
Statement covers period	CALIFORNIA 160
from07/01/2023	FORM 400
through	Page4 of6
	I.D. NUMBER
	1447002

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Triston Ezidore for Culver City Unified School Board 2022

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	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
ND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	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
American Airlines	TRC	Congressional	Black Caucus Conference Trip	805.80
Fort Worth, TX 76155				
Asian Democrats of Los Angeles County	CVC			100.00
Beverly Hills, CA 90210				
Black Los Angeles Young Democrats	cvc	Sneaker Ball F	Bronze Sponsorship	500.00
Los Angeles, CA 91364				

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTAL\$	1,405.80
--	------------	----------

Schedule E Summary

Itemized payments made this period. (Include all Schedule E subtotals.)	2,815.06
2. Unitermized payments made this period of under \$100\$	22.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)\$	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A. Line 6.)	2,837.06

Amounts may be rounded to whole dollars.

 Statement covers period
 CALIFORNIA FORM
 460

 from ____07/01/2023
 Page __5 __ of __6

 through ___12/31/2023
 LD. NUMBER

1447002

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Triston Ezidore for Culver City Unified School Board 2022

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

L candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals

ND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals

FND fundraising events

ND independent expenditure supporting/opposing others (explain)*

LEG legal defense

POL polling and survey research
POS postage, delivery and messenger services
PRO postage, de

LIT 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
Hyatt Regency	TRC '	Lodging- Association of CA School Administrators Presentation of Black Student Achievement Plan	708.38
Sacramento, CA 95814			
LA County Young Democrats	cvc		350.00
Oakland, CA 94607			
Mailchimp	OFC		26.50
Atlanta, GA 30308			
Mailchimp	OFC		26.50
Atlanta, GA 30308			
Mailchimp	OFC		26.50
Atlanta, GA 30308			

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

SUBTOTAL \$

1,137.88

Schedule E	
(Continuation Sheet)	
Payments Made	

SCHEDULE E	(CONT.)

(Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA 460
Payments Made	to whote dollars.	from07/01/2023	FORM 400
SEE INSTRUCTIONS ON REVERSE		through 12/31/2023	Page6 of6
NAME OF FILER			I.D. NUMBER
Triston Ezidore for Culver City Unified School	ol Board 2022		1447002

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

candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals fundraising events POL polling and survey research TSF transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services

VOT voter registration professional services (legal, accounting) LEG legal defense PRO campaign literature and mailings PRT print ads

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

WEB information technology costs (internet, e-mail)

	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OF	R DESCRIPTION OF PAYMENT	AMOUNT PAID
Mailchimp		OFC			26.50
Atlanta, GA 30308					
Mailchimp		OFC	-		26.50
Atlanta, GA 30308					:
Mailchimp		OFC	\dashv		26.50
Atlanta, GA 30308					
OR-CODe-Generator		WEB	+		191.88
New York, NY 10001					
			+		

SUBTOTAL \$ * Payments that are contributions or independent expenditures must also be summarized on Schedule D.

271.38