497	Contribution	Report
-----	--------------	--------

Type or print in ink.

Amounts may be rounded to whole dollars.

				RELEIVED BY	497 CONTRIBUTION REPORT
NAME OF FILER			Date of	135 A Date Stamp	CALIFORNIA 407
SVONKIN FOR COMMUNITY COLLEGE BOARD	2015		This Filing 10/22/2014	0011 007 00	FORM 43/
AREA CODE/PHONE NUMBER	I.D. NUMBER (# applicable)		2014 OCT 22 PM 4:	JU For Official Use Only
	1319629	•	Report No. 1	10122/14 FAIX	
STREET ADDRESS			☐ Amendment	CAMPAIGN FINANCE DISCLOSURE SECTI	5 114.1
			to Report No.		013806
CHY	STATE	ZIP CODE	(explain below)		CANTER
			No. of Pages		(08554

2. Contribution(s) Made

DATE MADE	FUEL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (F COMMITTEE, ALSO ENTERED, NUMBER)	CANDIDATE AND OFFICE OR IMEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
10/21/2014	EPENSTEIN FOR WATER BOARD 2014 (ID# 1368130)	Jeffrey Rhenstein Water Board: West Basin Water Dist	10,000.00	
OAN	No.			
			f	
			ļ	į.
				_

27

Reason for Amendment:

FPPC Form 497 (March/2011)

_
r~-
٠.
O
٠.
83
\sim
_
4
~
_
_
∇
_
\sim
***·
_
ന
σ.
8.
Ø.
ğ

	5115
Type or print in ink.	
Amounts may be rounded to whole dollars.	

5115 - 4	- LCO
----------	-------

						497 CONTRIBU	TION REPORT
NAME OF FILER			Date of	RECE	Oate Stamp	CALIFORNIA	407
SWONKIN FOR COMMUNITY COLLEGE	BOARD 2015		This Filing1	2/09/2014	ES COUNTY	FORM	497
AREA CODE/PHONE NUMBER	I.D. NUMBER (if explicable	2)		200	9 PM 3:10	For Official Us	se Only
	1319629		Report No. 1	2014 DEC -	12/9/14 Fax		
STREET ADDRESS			☐ Amendment	CAMPAI	MENABLE		
			to Report No	- DISCLOS	ing section	013806	,
CITY	STATE	ZIPCODE	(explain below)	0100		(0855	
			No. of Pages _	1		(0022	4
						1	

1. Contribution(s) Received

497 Contribution Report

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (FCOMMITTEE, ALSO EMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
12/03/2014	AFT Staff Guild Local 1521-A Cope Fund	☐ IND☐ COM☐ SOTH☐ PTY☐ SCC		4,000.00
12/03/2014	Friends Of Jimmy Gomez For Assembly 2014 Committee 1D # 1354022	IND COM OTH PTY SCC		Provide interest rate 1,000.00 Chack if Loan Provide interest rate
12/03/2014	Joseph Valdes	IND COM OTH PTY SCC	Parking Trains Parking Co. of America	1,000.00 Check if Loan % Provide interest rate

Reason for Amendment:		 	

*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



497 Contribution Report

Type or print in ink. Amounts may be rounded to whole dollars.

407.001.00	DID LEDO	
497 CONT	KIBUTA	NREPORT

					497 CONTRI	BUTTON REPOR
NAME OF FILER		Date of		Date Stamp	CALIFORNIA	497
SVONKIN FOR COMMUNI	TTY COLLEGE ROARD 2015	This Filing01/07/2015		FORM 49		
AREA CODE/PHONE NUMBER I.D. NUMBER (# expecceble) 1319629		Report No. 1		2015 JAH - 7 AM II: 35 116/15 Fax CAMPAIGN FINANCE DISCLOSUR SECTION		
STREET ADDRESS		Amendment to Report No.	nt	CAMPAIGN DISCLOSUR	FIMARUE SECTION	
CITY	STATE ZIPCODE	(explain below) No. of Pages	1		0(380	26
1. Contribution(s	s) Received					
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIL	BUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPI IF SELF-EUPLGYED, ENTER PAME OF FU		AMOUNT RECEIVED
12/31/2014 50	outhwest Regional Council of Carpenters Political Ac	tion: Fund	IND COM OTH PTY SCC		L3 c	3,000.c
	-		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		_ c	theck if Loan
			☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			heck if Loan % de interest rate
Reason for Amendmen	ent:			*Contributor Codes IND - Individual COM - Recipient Comm OTH - Other (e.g., bus) PTY - Political Party SCC - Small Contributor	iness entity)	PTY or SCC)



497	Contribution	Report
-----	--------------	--------

Type or print in ink.

497 Contribi	JUON REPOR Amounts may	y be rounded to w	hole dollars.		497 C	ONTRIBUTION REPORT
AREA CODE/PHONE N	MADNITY COLLEGE 50ARD 2015 RIMBER LD. NUMBER (Facelizable) 1319629 STATE ZIP CODE on(s) Received	Date of This Filing Report No. 1 Amendme to Report No. (explainbelow) No. of Pages	nt .	CAMPAIGN STHA	111.11	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER LD. NUMBER)	TOR	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPI (IF SELF-EMPLOYED, ENTER MAKE OF BI		AMDUNT RECEIVED
12/09/20:4	Coslition For LA Comm College Excellence in Support of Vega, Mike Forg, Scott Svonkin Sydney Kamlager Truscee Committee ID \$ 1315215	Francesca '15	IND SCC SCC IND COM			1, 235.3: Check if Loan Provide interest rate Check if Loan ** Provide interest rate
			IND COM OTH PTY SCC			Check if Loan Check if Loan Provide interest rate
Reason for Ame	ndment:			'Contributor Codes IND - Individual COM - Recipient Comm OTH - Other (e.g., bus PTY - Political Party SCC - Small Contributo	siness entil	ity)

497	Contri	bution	Report

Type or print in ink.

451 CORUIDO	Amounts may be	e rounded to wh	ole dollars.	RECEIVED B	√ 497 C	ONTRIBUTION REPORT
AREA CODE/PHONE N	MMUNITY COLLEGE BOARD 2015 *UMBER I.D. NUMBER (* applicable) 1329629 STATE ZIP CODE	Date of This Fifting Report No. 2 Amendmento Report No. explain below) No. of Pages	t	UT (5 FOX 2015 JAN -8 AM I CAMPAIGN FINA DISCLUSURE SEE	CALIFO FOR BY JUPON	RM 49/
DATE	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR	R	CONTRIBUTOR	IF AN INDIVIDUAL. ENTER OCCUPATION AND EMP	PLOYER	AMDUNT
12/12/2014	Coalition For LA Comm College Excellence in Support of Fr Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee ' Committee ID # 1315215		CODE * IND COM OTH STY SCC IND COM OTH PTY SCC	JIF SELF-EMPLOYEO, ENTER NAME OF I	EUSINESS)	Provide interest rate Check if Loan Provide interest rate Check if Loan
Reason for Amer	ndment:		scc	*Contributor Codes IND – Individual COM – Recipient Com OTH – Other (e.g., bu PTY – Political Parly SCC – Small Contributo	rsiness enlis	ly)

497	Cont	ribution	Report
-----	------	----------	--------

Type or print in ink. Amounts may be rounded to whole dollars.

457 001111150	Amounts may	A pe conuged to M	hôle dollars.	REPUBLICA	-, 497 C	ONTRIBUTION REPOR
NAME OF FILER		Date of	01/07/2015	Date Stamp	CALIFO	
SVONKIN FOR COMMUNITY COLLEGE BOARD 2015 AREA CODE/PHONE NUMBER I.D. NUMBER (* applicable)		Report No. 3		17(15 FAX 2015 JAN -8 AI	601 10: 54	Official Use Only
STREET ADDRESS	1319629 STATE ZIP CODE	Amendment to Report No. (explain below)		CAMPAIGN FIS DISCLUSURE S		13806 (08554
1. Contributi	on(s) Received					
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUT	TOR	CONTRIBUTOR CODE *	(F AN INDIVIOUAL, ENTER OCCUPATION AND EMP IF SELF-EMPLOYED, ENTER NAME OF B		AMOUNT RECEIVED
22/17/2014	Coalition For LA Comm College Excellence in Support of Weos, Mike Fong, Scott Svonkin Sydney Kaclager Trustee Committee ID # 1315215		☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC			3,000.0
			IND COM OTH PTY SCC			Check if Loan
			IND COM OTH PTY SCC			Check if Loan
Reason for Amer	ndment;			*Contributor Codes (ND - Individual COM - Recipient Com OTH - Other (e.g., bu PTY - Political Party SCC - Small Contribute	siness enti	er than PTY or SCC) ly)

Type or print in ink. Amounts may be rounded to whole dol

2142-4-404

	Amounts in	ray be rounded to	whole dollars.	Province of the Later Co. To	497 CONTRIBUTION REPORT
NAME OF FILER		Date of		D. 4 DV Constitution	
SVONKIN FOR CO	MMUNITY COLLEGE BOARD 2025 NUMBER I.D. NUMBER (Variable)	This Filing _	01/07/2015	1/7/15 Fax	FORM 431
THE TOOLS HOME		Report No. 4		2015 JAN -8 AH	Eof Official Use Only
STREET ADDRESS	1319629			CAMPAICH SUL	
		☐ Amendm to Report No		CAMPAIGN FINA DISCLOSUNE SE	4.000
CITY	STATE ZIP CODE	(explsis below)	_		0(3806
		No. of Page	S		08554
1. Contributi	on(s) Received				
DATE RECEIVED	FALL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIE (# COMMITTEE, ALSO ENTER LO. NUMBER)	BUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOY (IF SELF-ENPLOYED, ENTER NAME OF BUSING	YER AMOUNT RECEIVED
12/23/2014	Coalition For LA Comm College Excellence in Support of Vega, Mike Forg, Scott Svonkin Sydney Kamlager Trust	f Prançesca ee '15	☐ IND		250.00
			⊠ COM		
	Committee ID # 1325215		□ отн		Check if Loan
	IN-YIND-PROTOGRAPHY		YIA		
			scc		Provide interest rate
			☐ IND		[
			COM		
			OTH		☐ Check if Loan
			☐ PTY ☐ SCC		
			1 300		Provide Interest rate
			☐ IND		
			COM		
			ОТН		☐ Check if Loan
			PTY		
			SCC		Provide interest rate
				*Contributor Codes	
				#ND - Individuat COM - Recipient Committee	e (other than PTY or SCC)
				OTH - Other (e.g., busines	es entity)
Reason for Amen	dineni:			PTY – Political Party SCC – Small Contributor Co	emmittee

6
ū
85
Ŋ
201
`

FOR	COMM
PHO	NE NUN
DRES	S
ribı	utior
	DRES.

Туре	or print in ink.
Amounts may be	rounded to whole dollars

2142-	4 - L	(0)
-------	-------	-----

497 Contribu	IION REPORT Amounts may be	rounded to who	ole dollars.		497 C	ONTRIBUTION REPOR
NAME OF FILER SVOKKIN FOR COM AREA CODE/PHONE NO STREET ADDRESS CITY	ID. NUMBER (F explosible) 1219629 STATE ZIPCODE	Oale of This Filing Report No. 5 Amendment Report No. 5 Report No. 5 Replain below; No. of Pages		2015 JAN -8 AM 10: CAMPAICH FINAND DISCLOSONS ALCO	1	
1. Contributio	on(s) Received					
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (#CDMMITTEL ALSO ENTER ID. NAMBER)	3	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EM (IF SELF-EMPLOYED, DYYER KAME OF		AMOUNT RECEIVED
01/07/2015	Coalition For LA Comm College Excellence in Support of Fr. Wega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee 'Committee ID # 1315215 N-ENND-SLATE MARKET		IND SCC IND COM SCC IND COM OTH PTY SCC			29,537.50 Check if Loan Provide interest rate Check if Loan
			IND COM OTH PTY SCC			Check if Loan Provide interest rate
Reason for Amen	dment:			*Contributor Codes IND - Individual COM - Recipient Con OTH - Other (e.g., br PTY - Political Party SCC - Small Contribut	usiness enti	by)

497 Contribution Report

Type or print in ink.

214	Z	-4	-	Lco
-----	---	----	---	-----

-01 - 01(11000	Amounts	s may be rounded to w	nole dollars.	OPACH LOS AS	4970	ONTRIBUTION REPOR
NAME OF FILER		Date of	01/09/2015	Date Stamp	CALIF	
SVONKTN FOR COMMUNITY COLLEGE BOARD 2015 AREA CODE/PHONE NUMBER [1.D. NUMBER (if equilosoble)]		This Filing Report No. 1	01709/2015	1/9/15 PAX 2015 JAN 12 AM 8:	FOI Por	Official Use Only
STREET ADDRESS	STATE ZIP CODE	Amendme to Report No. (explain below) No. of Pages		CAMPAICH FIMARE DISCLOSURE SECTI	0(3	806 8554
1. Contribution	n(s) Received	W				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTR (# COMMITTEE ALSO ENTERED NAMES)	RIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMP (IF SELF-EMPLOYED, ENTER NAME OF I		AMOUNT RECEIVED
01/08/2015	Pacifica Services Inc.		☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC			4,000.0
01/08/2015	Rick Taylor And Associates		☐ IND☐ COM☐ OTH☐ PTY☐ SCC			1, 000.0 Check if Laan Provide interest rate
			☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			Check if Loan Check if Loan % Provide interest rate
Reason for Amendi	ment;			'Contributor Codes IND - Individual COM - Recipient Com OTH - Other (e.g., bu PTY - Political Party SCC - Small Contribute	siness enti	er than PTY or SCC) iy)



Type or print in ink.

497 Contribu	Ition Report Amoun	nts may be rounded to w	hole dollars.	497 COI	VTRIBUTION REPORT
NAME OF FILER		Date of	01/14/2015	Date Stamp	
SVONKIN FOR CO	MMUNITY COLLEGE BOARD 2015	This Filing _	02/24/2025	FOR	
AREA CODEPHONE N	NUMBER (ii appforble)	Report No. 1		2015 AN 14	fiidal Use Only
	1319629	Kepon No. =		JAN 14	PM 5: 00
STREET ADDRESS		Amendme	ent	CAMPAICH	PM 5: 29
		to Report No		DISCLANIA E	ant
CITY	STATE ZIP CODE	(explain below)	_	0.012	000
		No. of Pages	1	S C C	0554
1. Contributi	on(s) Received				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF COI (FCOMMITTE, ALSO ENTERLO, NAMBER)	NTRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
01/13/2015	Coalition For LA Corm College Excellence in Support	rt of Francèsca rustee '15	☐ #ND		4,900.DO

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (#FORMATTEE ALSO ENTERLD, M.#48ER)	CODE *	ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED
01/13/2015	Coalition For LA Comm College Excellence in Support of Francesca Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee '15	☐ IND		4,960.00
	Committee ID # 1315215 DN-EIMD-Share Mailer	X COM OTH PTY SCC		Check if Loan
		☐ IND☐ COM☐ OTH☐ PTY☐ SCC		Check if Loan Second interest rate
		IND COM OTH PTY SCC		Check if Loan

Reason for Amendment: ______

*Contributor Codes

IND - Individual

COM -- Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity) PTY - Political Party

2142-.4-601

SCC - Small Contributor Committee



Ď	'	
7	l	
V	i	
ò	ر	
j	ı	

Type or print in lok. Amounts may be rounded to whole dolla

I.D. NUMBER (Papolicable)

STATE

ZIP CODE

1319629

	497 CONTRIBUTION REPOR
Date of This Filing 01/16/2015	LOG ANGELES CALIFORNIA 497
Report No. 1	2015 JAN 21 PM 2: 58 Official Use Only
Amendment to Report No (oxylain below)	DISCLOSURE STOTE 013806
No. of Pages1	co8554

1. Contribution(s) Received

SVONKIN FOR COMMUNITY COLLEGE BOARD 2015

NAME OF FILER

STREET ADDRESS

CITY

AREA CODE/PHONE NUMBER

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (FCOMMITTEL ALSO ENTER ID. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER OF SELF-EMPLOYED, ENTER NAME OF BUSINESS	AMOUNT RECEIVED
01/16/2015	Eá Buck	IND COM OTH PTY SCC	Ret.ired None	1,000.00
		☐ com ☐ com ☐ lnd		Check if Loan
		IND COM OTH PTY SCC		Check if Loan Check if Loan Provide interest rate

ļ	COM - Recipient Committee (other than PTY or SCC
	OTH ~ Other (e.g., business entity)
	PTY - Political Party
	SCC Small Contributor Committee

*Contributor Codes IND-Individual

FPPC Form 497 (March/2011) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Reason for Amendment:

2015-01-22 07:22:17 (GMT)

497 Contribution Report

Type or print in ink. Amounts may be rounded to whole dollars.

497 CONTRIBU	TION REPORT
--------------	-------------

NAME OF FILER SVONKIN FOR COMMUNITY COLLEGE BOA	RD 2015		Date of This Filling01/21/2015	Date Stemp	CALIFORNIA 497
AREA CODE/PHONE NUMBER	I.D. NUMBER (# applicable	9)	Report No. 1	122/15 tax	9: (For Official Use Only
STREET ADDRESS	STATE	ZIP CODE	Amendment to Report No	CAMPAICN FIR. DISCLOSURE SE	013906
CITY	SIAIE	ZIF CODE	No. of Pages2		(08554

1. Contribution(s) Received

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
01/20/2015	Coalition For LA Comm College Excellence in Support of Francesca Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee '15 Committee ID # 1315215 IN END-Slate Mailer	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC		42,152.45 Check if Loan Provide Interest rate
01/20/2015	Coalition For LA Comm College Excellence in Support of Francesca Vega. Mike Fong. Scott Svonkin Svdnev Kamlager Trustee '15 Committee ID # 1315215	☐ IND 区OM ☐ OTH ☐ PTY ☐ SCC		31,750.00
01/20/2015	Coalition For LA Comm College Excellence in Support of Francesca Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee '15 Committee ID # 1315215 IN KIND LITERATURE	☐ IND 図 COM ☐ OTH ☐ PTY ☐ SCC		3,259.48 Check if Loan Provide Interest rate

	IND – Individual COM – Recipient Committee (other than PTY or SCC)
Reason for Amendment:	OTH - Other (e.g., business entity) PTY - Political Party SCC - Small Contributor Committee

FPPC Form 497 (March/2011) FPPC Toll-Free Helpline: 886/ASK-FPPC (866/275-3772)

*Contributor Codes

2015-01-22 07:22:17 (GMT)

497 Contribution Report

Type or print In ink. Amounts may be rounded to whole dollars.

407		TION	REPORT

					497 CONTRIBUTION REPORT
NAME OF FILER		Date of		RECEIPED BY	CALIFORNIA 107
SVONKIN FOR COM	MMUNITY COLLEGE BOARD 2015	This Filing	01/21/2015	os angel ex court	FORM 497
AREA CODE/PHONE N	UMBER I.D. NUMBER (# app@cable)			Г	For Official Use Only
	1319629	Report No. 1		015 JAN 22 AM 9: 4	
STREET ADDRESS		Amendme	~	A A CONTINUE	
		to Report No.	· [CAMPAIGN FINANGE NSCLOSURE SECTION	
CITY	STATE ZIP CODE	No. of Pages	2		
		No. of Fages			
1. Contribution	on(s) Received				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP, CODE OF CONTRIBU (IF COMMITTEE, ALSO ENTER I.D. HUMBER)	TOR	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPI OF SELF-EMPLOYED, ENTER NAME OF BU	
01/20/2015	Coalition For LA Comm College Excellence in Support of Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee	Prancèsca			11,759.58
			X COM		
	Committee ID # 1315215		OTH		☐ Check if Losn
	IN KIND-PRINT ADS		☐ PTY ☐ SCC		y
h	THE PROPERTY OF THE PROPERTY O				Provide Interest rate
			[IND		
			☐ COM		
			□ отн		☐ Check if Loan
			☐ PTY ☐ SCC		· ·
			1,000		Provide interest rate
			[] IND		
			□ сом	4	
			☐ OTH	T of the state of	Check if Loan
			PTY SCC		
					Provide Interest rate
Reason for Amen	dment:			*Contributor Codes IND - Individual COM Recipient Com OTH Other (e.g., bu PTY Political Party SCC Small Contributo	

97 Contribution				may be rounded to who				497 CU	WTRIBUTION REPORT
AME OF FILER				Date of	and the	KEULI A MOUL	Vale Stamp	CALIFO	
SVONKIN FOR COMMUNI	TY COLLEGE BOARD 2015			This Filing	1/27/2015	والمراكبة المراكبة	1, 6. 6.2	FOR	
REA CODE/PHONE NUMBE	R I.D. NI	MBER (# applicable	*)	Report No. 27	2015	JAN 27	PM 3:53	For	Official Use Only
	1319	629		Kepon No. :		0	PM 3:53 (27165 FAY		
TREET ADDRESS				Amendmen	+ CA	MPA IS	THAME.		
				to Report No	DIS	CL OSU:	E SECTION	01:	3 906
CITY		\$TATE	ZIPCODE	(explain below)					8554
			<u></u>	No, of Pages	1				100,71
1. Contribution(s	FULL NAME, STRE		ND ZIP CODE OF CONTE	RIBUTOR	CONTRIBUTOR	ENTER	IF AN INDIVIDUAL, OCCUPATION AND EM	PLOYER	AMOUNT
RECEIVED		F COMMITTEE, \$1.50 E	INTERI,D. MUMBER)		CODE *		MPLOYED, ENTERNAME OF		RECEIVED
01/26/2015 Je	ennifer J. Ferguson				X IND	Attorney	Madruga, LLP		2,500.00
					☐ COM		-3,		
					□ отн				☐ Check if Loan
					☐ PTY				
					□ scc				Provide interest rate
					□ 1ND				
-					□ cow				
					☐ OTH				☐ Check if Loan
				1	☐ PTY				
					scc				Provide interest rate
					☐ IND				
					☐ COM				
					□ отн				Check if Loan
					☐ PTY				
					□ scc				Name of the last o
									Provide interest rate
						(*Contributor Codes		
							IND Individual		
						- 1	COM - Recipient Con	-	
D							OTH - Other (e.g., b PTY - Political Party		ny)
Reason for Amendme	enc					-	SCC - Small Contribu	rtor Committ	88

00:13 01/30/2015

497 Contribution Report	497	tribution Re	port
-------------------------	-----	--------------	------

Type or print in ink.

2142	-	4	-	100
------	---	---	---	-----

497 Contribut	ion Report	Amounts may be rounded to w	hole dollars.		497 CONTRIBUTION REPORT
	JUNITY COLLEGE BOARD 2015	Dale of This Filing	01/30/2015	LOS ANGELES M	FORM 497
AREA CODE/PHONE NUMBER (L'applicable) 1319629		Report No. 1		1/30/15 FAX 2015 JAN 30 AM 11:5	For Official Use Only
STREET ADDRESS		☐ Amendme			1
CITY	STATE ZIP CODE	(explain below) No. of Pages	1	CAMPAICH FIRALTS Discuesións for , ; .	:014509 C10167
1. Contributio	n(s) Received				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE (F-COMMTRE, ALSO PATER LD. NAME	OF CONTRIBUTOR CR)	CONTRIBUTOR CODE *	(F AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOY(IF SELF-FIPLOYED, ENTER NAME OF BUSING	
01/29/2015	Lewis Brisbois Bisgaard & Smith LLP		IND COM		1,000.00
			□ PTY □ SCC		Provide inferest rate
			☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	·	Check if Loan Check if Loan Ye Provide interest rate
			IND COM OTH PTY SCC		Check if Loan Check if Loan Provide interest rate
Reason for Amend	dment:			*Contributor Codes IND—Individual COM—Recipient Committe OTH—Other (e.g., busines PTY—Political Party SCC—Small Contributor Co	ee (other than PTY or SCC) ss entity)

497 Contribution Report

Type or print in ink. Amounts may be rounded to whole dollars.

214	7.	- 4	-	100
-----	----	-----	---	-----

Mus as su co			5.1.0	497 CONTRIBUTION REPORT
NAME OF FILER		Date of	Date Stamo	CALIFORNIA AOT
SVONKIN FOR COMMUNITY COLLEGE BO	ARD 2015	This Filing 02/03/2015	「中の機能は特別	FORM 497
AREA CODE/PHONE NUMBER	1.D. NUMBER (# spplicable)		717/10	For Official Use Only
	1319629	Report No. 1	2015 FEB -4 PH 4	27
STREET ADDRESS		7		[37]
		Amendment to Report No.	CAMPAIGN FRANCE DISCLOSUM, CCC1	4.7004
		(explain below)	DISCLOSURE REFE	013806
CETY	STATE ZIP CODE		11 12 14 14 14	(08554
		No. of Pages1		(00)57

2. Contribution(s) Made

DATE. MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (FCOMMTTEE M.SDENTERLD, NAMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (F APPLICABLE)
2/03/2015	Coalition For LA Comm College Excellence in Support of Francesca Vega, Nike Fong, Scott Svonkin Sydney Kamlager Trustee '15 (ID# 1315215)		50,000.00	
2/03 /20 15	LOS ANGELES COUNTY DEMOCRATIC PARTY-ISSUES AND ADVOCACY COMMITTEE (ID# 744554)		10,000.00	

FPPC Form 497 (March/2011)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

497	Contribution	Report
-----	--------------	--------

Typs or print in ink. Amounts may be rounded to whole dollars.

				I by processing the second	497 CONTRIBU	HONREPORT
NAME OF FILER			Date of	Date Stamp	CALIFORNIA	497
SVONKIN FOR COMMUNITY COLLEGE BOARD	2015		This Filing02/04/2015	1991 4 6 5 6 6	FORM	491
AREA CODE/PHONE NUMBER	LO. NUMBER (Fapplicable)	,		2015 FEB -5 AM IO	For Official Us	se Only
	1319629		Report No. 1	2/4/15 Fax	05	
STREET ADDRESS			☐ Amendment	L 423727 783 1.41	_	<u>,</u> ,
			to Report No.	Disciosia	0138	06
CITY	STATE	ZIP CODE	(explain liebovr)	****** 1 3	(081	54
			No. of Pages 1		Con	

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEL ALSO ENTERIO, NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER UF SOLF-EMPLOYER, BYTER KAME OF BUSINESS!	AMOUNT RECEIVED
02/03/2015	Coalition For LA Comm College Excellence in Support of Francesca Vega, Mike Fong, Scott Svonkip Svoney Kamlager Trustee 15 Committee ID # 1315215	UND COM OTH PTY SCC		7,508.¢(Check if Loan Provide Interest rate
02/03/2015	Coalition For LA Comm College Excellence in Support of Francesca Vega, Kike Fong, Scott Svonkin Sydney Kamlager Trustee 15 Committee ID # 1315215	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC		9,533.5
		☐ IND☐ COM☐ OTH☐ PTY☐ SCC		Check if Loan Check if Loan Provide Interest rate

IND—Individual
COM – Recipient Committee (other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

FPPC Form 497 (March/2011) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

*Contributor Codes

2015-02-09 02:26:46 (GMT)

ď
~
Ř
≈
Ľ
တ
Ö
Ш
Ľ
\succ
ς.
\leq
ನ
К
9
٩
7
o
\vdash

07 Contribution Panart	Type or print in ink.
97 Contribution Report	Amounts may be rounded to who

Reason for Amendment:

role dollars.

497 CON	TRIALITI	ON REI	PORT

NAME OF FILER			Date of	;	Data Stamp	CALIFORNIA 497	
SVONKIN FOR COMMUNITY COLLEGE BOARD	2015		This Filing02/08/2015	- 1			
AREA CODE/PHONE NUMBER	I.D. NUMBER (# applicable)		2h	15 FEB -9 PM 12: 35	For Official Use Only	٦
	1319629		Report No. 1	-			İ
STREET ADDRESS		•	- Amandmant	¢,	AMPARON FINATOR		l
			to Report No.	_0	SCLOSUNE SECTION	013600	
CITY	STATE	ZIP CODE	(explain below)			C00554	
			No. of Pages2	-		,	

1. Contribution(s) Received

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
02/06/2015	Leroy D. Baca	☑ IND ☐ COM ☐ OTH	Retired None	1,000.00
		☐ PTY ☐ SCC		% Provide interest rate
02/06/2015	Laborers' Local 300 Small Contributor Committee Committee ID # 950674	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC		1,000.00 Check if Loan % Provide Interest rate
02/06/2015	Orbach Huff Suarez & Henderson LLP	IND COM SOTH PTY SCC		2,500.00 Check if Loan % Provide Interest rate

*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



497 Contrib	ution Report	Amou	Type or print in i unts may be rounded to		Law RECEDIAN 497	'CONTRIBUTION REPORT
NAME OF FILER			Date of		Date Stamp O CALI	FORNIA 407
SVONKIN FOR CO	OMMUNITY COLLEGE BOARD 2015		This Filing	02/08/2015	2015 Ern	ORM 49/
AREA CODE/PHONE	NUMBER I.D. N	NUMBER (# applicable)		-	PATER-9 PAIDED F	or Official Use Only
	131	9629	Report No.	{{1}}	AMPAION	
STREET ADDRESS		State	Amendr	ment No.	AMPAIGN FINGE	
CITY		STATE ZIP CODE	(explain below)			
			No. of Pag	es2		
DATE		REET ADDRESS AND ZIP CODE OF CO	ONTRIBUTOR	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	, AMOUNT
RECEIVED		(IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE *	(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED
02/06/2015	Service Employees Inter	mational Union Local 99 Car	ndidate PAC	☐ IND		4,000.00
				☐ OTH ☐ PTY		☐ Check if Loan
		ANAROMA		⊠ scc		Provide Interest rate
				☐ IND		
				OTH PTY		☐ Check if Loan
				□ scc		Provide interest rate
				☐ IND ☐ COM ☐ OTH		Chack if Loss
				PTY		Check if Loan
						Provide Interest rate
					*Contributor Codes IND - Individual COM - Recipient Committee (
Reason for Amer	indment:				OTH Other (e.g., business PTY Political Party SCC Small Contributor Comi	

N
Θ
◚
_
ഗ
↵
\overline{a}
$\overline{\sim}$
٠.
\geq
α
•
2
=
Š

497 Contribi	ution Report	Amount	Type or print in ink s may be rounded to w		RECEIVE	- 10° 10 √497 C	ONTRIBUTION REPOR
CAME OF FILER			Date of		Date Stamp	CALIFO	
SVONKTN FOR CO	MMUNITY COLLEGE BOARD	2015	This Filing	02/10/2015	2015 555	FO	
AREA CODE/PHONE	NUMBER	LD. NEMBER (# applicable)			2015 FEB 11	P) For	Official Use Only
		1319629	Report No. 1		ZIIO/IS Fax		y Chance See City
STREET ADDRESS					CAMPAISH AND DISCLOSURES		
			☐ Amendme to Report No.		-100 mm - 100 mm		
CITY		STATE ZIP CODE	(explain below)			0(3	3 9 06
			No. of Pages	1			08554
1. Contributi	on(s) Received						
DATE RECEIVED		E, STREET ADDRESS AND ZIP CODE OF CONT (IF COMMITTEE, ALSO ENTER I.D. NUMSER)		CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND E (IF BELF-EUPLOYED, ENTER NAME	EMPLOYER	AMOUNT RECEIVED
02/09/2015	Coalition For LA C	оли College Excellence in Support cott Svonkin Sydney Kamlager Tru	of Francesca	☐ IND			
	vega, mac todg, s	cocc avointh Sydney Railtager 111	mree .T2	☑ COM			
	Committee ID # 131	5215		Потн			☐ Check if Loan
				☐ PTY			- CHEEK II EODIF
	DH KUND CINS			□ scc			Provide interest rate
02/09/2015	Coalition For LA C	omm College Excellence in Support	of Prancesca	+			1,960.5
	Wega, Mike Pong, S	cott Svonkin Sydney Kamlager Tru	atee '15	☐ IND			
	Committee 1D # 131	5215		☑ COM			
	The state of the s			517 011			Check if Loan
	IN KIND I.IT			SCC			
							Provide interest rate
02/09/2015	Vega, Mike Fong, S	omm College Excellence in Support cott Svonkin Sydney Kamlager Tru	of Francesca Stee '15				14,372.4
				⊠ COM			
	Committee ID # 131	5215		⊔то⊓			☐ Check if Loan
				☐ PTY			- Check is Fosh
	IN KIND FOSTAGE			□ scc			Provide Interest rate
					*Confributor Codes	1	
					IND – Individual		

FPPC Form 497 (March/2011) FFPC Tolf-Free Helpline: 866/ASK-FPPC (866/275-3772)

COM-Recipient Committee (other than PTY or SCC)

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

SCC - Small Contributor Committee

PTY - Political Party

214Z-4-LCO1

Reason for Amendment:

NAME OF FL	LER		
SVONKIN	FOR	COMMUNITY	COLLEGE
		NE NUMBER	
ANCH CODE	21 110	RE NOW DEN	

Type or print in ink. Amounts may be rounded to whole dollars.

2142-4-LC01

						497 CONTRIBU	TION REPORT
NAME OF FILER		·· -	Date of	1.75	Date Stamp	CALIFORNIA	497
SVONKIN FOR COMMUNITY COLLEGE BOAR	D 2015		This Filing 02/11/2019	5	ANGELER COLPTY	FORM	491
AREA CODE/PHONE NUMBER	I.D. NUMBER (Faupliosts	lo)		2016	FEB II PM Is OL	For Official U	ise Only
	1319629		Report No. 1	<u></u>			
STREET ADDRESS			Management Amendment	DA	2/11/15 FAX		
			to Report No.		160 18 2507	0(300	4
CITY	STATE	ZIP CODE	(explain below)		100 100 100 100 100 100 100 100 100 100	(0.65	2
			No. of Pages1			CV 103	74

1, Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (BECOMMITTEE, ALSO ENTER ID. NAMBER)	CONTRIBUTOR CODE *	IF AN INDIVIOUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTER RAME OF GUSINESS)	AMDUNT RECEIVED
02/10/2015	Coalition For LA Comm College Excellence in Support of Francesca Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee '15 Committee ID # 1315215	☐ IND © COM ☐ OTH ☐ PTY ☐ SCC		3,985.62 Check if Loan
02/10/2015	Coslition For LA Comm College Excellence in Support of Francesca Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee '15 Committee ID # 1315215 Dr SIND - POSTAGE	IND SOM OTH PTY SCC		11,239.50 Check if Loan Frevioe interest rate
•		☐ IND☐ COM☐ OTH☐ PTY☐ SCC		Check if Loan

Reason for Amendment:	

*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

:

NAME OF FI	LER		
SVGNXIX	Por	COMMUNITY	COLLEG
AREA CODE	PHO	NE NUMBER	
STREET AD	DRES	S	
CITY			

Туре	or print in	ink.	
Amounts may be	rounded t	o whole	dollars

214	2-	4-	LCO	2
-----	----	----	-----	---

497 Continou	Amour Amour	nts may be rounded to wh	ole dollars,	RECEIVED BY	497 CX	ONTRIBUTION REPOR
NAME OF FILER SVONKEN FOR COM AREA CODE/PHONE NI STREET ADDRESS CITY	ELIMBER LD. NUMBER (Famplication) 13319629 STATE ZIPCODE	Date of This Filing Report No. 2 Amendment to Report No. (explainbelow) No. of Pages	nt	2015 FEB 11 PM 4: 2015 FEB 11 PM 4: 2111(15 FAX CAMPAINTERNAL DISCLOSUFO GEOL	o. O	RM 43/
1. Contribution	on(s) Received				<u> </u>	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF COD	ATRIBUTOR	CONTRIBUTOR CODE *	(F AN INDIVIDUAL, ENTER OCCUPATION, AND EM (F SELF-EMPLOYED, ENTER MAKE OF		AMOUNT RECEIVED
02/10/2015	LA League of Conservation Voters LALCV Committee ID # 810317		☐ IND ☐ COM ☐ PTY ☐ SCC ☐ IND ☐ IND ☐ COM			I,000.or
			OTH PTY SCC			Check if Loan
			IND COM OTH PTY SCC			Check if Loan
Reason for Amer	ndment;			*Contributar Codes IND -Individual COM - Recipient Com OTH - Other (e.g., bu PTY - Political Party SCC - Small Contribut	usiness enti	ty)

497	Contribution	Report
-----	--------------	--------

Type or print in ink.

Amounts may be rounded to whole dollars.

		KEULIVED BY	497 CONTRIBUTION REPORT
NAME OF FILER SVONKIN FOR COMMUNITY COLLEGE BOARD 2015		Date of This Filing 02/12/2015 2/12/15 FAY 2015 FEB 12 PM 5: 25	CALIFORNIA 497
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1319629	Report No. 2	For Official Use Only
STREET ADDRESS		CAMPAIGN FINANCE DISCLOSURE SECTION to Report No.	0(3806
CITY	STATE ZIP CODE	No. of Pages1	(08554

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER HANG OF BUSINESS)	AMDUNT RECEIVED
02/11/2015	Clear Channel Outdoor, Inc.	IND COM X OTH PTY		18,402.23
02/11/2015	Committee ID # 1315215	SCC IND SCOM OTH PTY SCC		Provide interest rate 911.50 Check if Loan
02/11/2015	Coalition For LA Comm College Excellence in Support of Francesca Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee '15 Committee ID # 1315215 DK KNND-POS	IND SCC		5,842.00

Resear for Amenoment	IND – Individual COM – Recipient Committee (other than PTY or SCC) OTH – Other (e.g., business entity) PTY – Political Party SCC – Small Contributor Committee
	SCC – Small Contributor Committee

FPPC Form 497 (March/2011) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

*Contributor Codes



97 Contribution Report		Type or print in ink. Amounts may be rounded to whole doll
or community topon	,	Autouths may be routhed to whole do

I.D. NUMBER (if exprisable)

STATE

ZIP CODE

1319629

2142-4-601

		497 CONTRIBUTION REPORT		
Date of This Filing 02/24/2015	Date Stamp EU UT	CALIFORNIA FORM	497	
Report No. 1	2/24/15 FAX 2015 FEB 24 PM 4	57 For Official Us	e Only	
Amendment to Report No	CAMPAIGN FINAS DISCLUCIURE SEC	013806		
No. of Pages1		(0855	4	

1. Contribution(s) Received

SVORKIN FOR COMMUNITY COLLEGE BOARD 2015

NAME OF FILER

STREET ADDRESS

CITY

AREA CODE/PHONE NUMBER

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSID ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
02/23/2015	Amalgamated Transit Union Local 1277 PAC Committee ID # 881678	☐ IND ③ COM ☐ OTH ☐ PTY ☐ SCC		1,000.00
02/23/2015	Cordoba Corparation	IND COM SOTH PTY SCC		5,000.00
		IND COM OTH PTY SCC		Check If Loan

IND - Individual COM - Recipient Committee (other than PTY or SCC)
OTH - Other (e.g., business entity) PTY-Political Party Reason for Amendment: ... SCC - Small Contributor Committee

> FPPC Form 497 (March/2011) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

*Contributor Codes



497 Contribution Report

Type or print in ink. Amounts may be rounded to whole dollars.

2	142	2-	4-	w	7

					497 CONTRIBUT	TORREPORT
NAME OF FILER			Date of RE	Date Stamp	CALIFORNIA	497
SVONKIN FOR COMMUNITY COLLEGE BOARD	2015		This Filing 02/24/2015 AN	GLLES COUNTY	FORM	431
AREA CODE/PHONE NUMBER	LD. NUMBER (if soptoable)		2015 555	2/24/15 FAX 3 24 PM 4: 58	For Official Us	se Only
	1319629		Report No. 1	24 PM 4:58		
STREET ADDRESS			Amendment CAMPA			
			to Report NoDISCLO	SUSE SEATOR	013506)
CITY	STATE	ZIP CODE	(explain below)	MANE STREET	(085	
			No. of Pages1		(00)	フコ

2. Contribution(s) Made

DATE MADE	FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (F-COMMITTEE, ALSO ENTER LD, NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
2/24/2015	Mike Fong for LA Community College Board 2015 [ID# 1366498]	Mike Pong Concursity College Board: LA County	2,145.77	
N KIND POSTAGE				
02/24/2015	Mike Fong for LA Community College Board 2015 (ID# 1366498)	Nike Fong Community College Board: LA County	2,367.50	
ЯЗДІКИ СКІХ-ВІ				
2/24/2015	VEGA FOR COMMUNITY COLLEGE BOARD TRUSTEE 2015 (10# 1363752)	Francesca Vega Community College Board: Los Angeles District 1	2,145.77	
C-KIND POSTAGE				
2/24/2015	VEGA FOR COMMUNITY COLLEGE BOARD TRUSTEE 2015 (ID# 1363752)	Francesca Vega Community College Board: Los Angeles District 1	2,805.00	
(N-XIXD MAILER				

Type or print in ink.

2142-6	f-L60	١
--------	-------	---

497 Contribution Report			Amount	Amounts may be rounded to whole dollars.				497 CONTRIBUTION REPORT	
NAME OF FILER SVORKIN FOR COMMUNITY COLLEGE BOARD 2015 AREA CODE/PHONE NUMBER 1319629 STREET ADDRESS CITY STATE ZIP CODE			Date of This Filing Report No. 1 Amendmento Report No. (explain below) No. of Pages	nt	2015 FEB 26 2/26(15 FAX CAMPAIGN DISCLOSUS	PM Fbc	ORNIA 497		
1. Contributio	on(s) Received								
DATE RECENTED	FULL NAME	STREET ADDRESS AL	ND ZIP CODE OF CONT ENTER I.O. NUMBER()	TRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMI IF SELF-EMPLOYED, ENTER HALLE OF	PLOYER BUSINESS)	AMOUNT RECEIVED	
02/25/2015	Ben Allen For Senat				IND IND OTH PTY SCC			1,000.00	
					IND COM OTH PTY SCC			Check if Loan	
					IND COM OTH PTY SCC			Check if Loan	
Reason for Amend	dment:					"Contributor Codes IND Individual COM Recipient Corr OTH Other (e.g., bu PTY Political Party SCC Small Contribut	usiness enti	er than PTY or SCC) ily)	

97 Contribut	tion Report Amounts	Type or print in ink. may be rounded to wi		RECEIVED BY	497 CC	NTRIBUTION REPO
AME OF FILER	MUNITY COLLEGE BOARD 2015	Date of This Filing	02/27/2015	Date Stamp	CALIFO	
REA CODE/PHONE NU	MBER I.D. NUMBER (* app?cable)	Report No. 1_	201	5 MAR -2 AM 11: 49 5 MAR -2 AM 11: 49	For	Official Use Only
TREET ADDRESS	1319629 STATE ZIP CODE	Amendment to Report No. (explain below) No. of Pages		AMPAIGN FINANCE SCLOSURE SECTION		806 0854
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTR	RIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMP IIF SBLF-EMPLOYED, ENTER NAME OF I		AMOUNT RECEIVED
02/27/2015	Coalition For LA Comm College Excellence in Support Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trus Committee ID # 1315215 In-KIND-CONSULTING	of Francesca Stee '15	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SGC			5,000 Chack if Loar
			IND COM OTH PTY SCC			Check if Loa
			IND COM OTH PTY SCC			Check if Los
Reason for Amen	dment:			*Contributor Codes IND - Individual COM - Recipient Con OTH - Other (e.g., b) PTY - Political Party SCC - Small Contribu	usiness enti	er than PTY or SC

Type or print in ink. 497 Contribution Report Amounts may be rounded to whole dollars. 2142-4-601

497 CON	TRIBLIT	ION REP	ORT

NAME OF FILER		Date of This Filing 03/01/2015 ANGEL TAY	CALIFORNIA 497
SVONKIN FOR COMMUNITY COLLEGE BOARD	2015	This Filing 03/01/2015 3/1/15 FAX.	FORM TO
AREA CODE/PHONE NUMBER	I.D. NUMBER (ff applicable)	This Filing 03/01/2015 3/1/15 Fax Report No. 1 2015 MAR -2 AM 11: 51	For Official Use Only
	1319629		
STREET ADDRESS		☐ Amendment CAMPAIGN FILASUS	
		to Report No. DISCLUSURE SCATTER	013806
CITY	STATE ZIP CODE	(explain below)	c08554
		No. of Pages1	

1. Contribution(s) Received

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
02/28/2015	Seymour I. Amster	IND COM OTH PTY SCC	Attorney Seymour Amster Attorney At Law	1,000.00 Check if Loan ** Provide interest rate
		☐ IND☐ COM☐ OTH☐ PTY☐ SCC		Check if Loan
		☐ IND☐ COM☐ OTH☐ PTY☐ SCC		Check if Loan
			*Contributor Codes IND – Individual	PTV or SOO)

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

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 497 (March/2011) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)



Reason for Amendment: ___

497	Contribution	Repor

Type or print in ink. Amounts may be rounded to whole dollars.

497 Contribution Report		Amounts may be rounded to whole dollars.	TRECEIVED BY 497 CONTRIBUTION RE	PORT
NAME OF FILER SVONKIN FOR COMMUNITY COLLEGE 1	BOARD 2015	Date of This Filing 03/01/2015	2015 MAR - 2 PM	7
AREA CODE/PHONE NUMBER	I.D. NUMBER (#applicable)	Report No. 1	CAMPAIGN FINANCE	
STREET ADDRESS		Amendment to Report No.	DISCE 95 THE SECTION 013806 CO8554	
СІТҮ	STATE ZIPCOD	No. of Pages1	(08554	

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR INFOOMMITTEE, ALSO ENTER ID. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (# SELF-EMPLOYED, ENTER NAME OF BUSINESS)	ALAOUNT RECEIVED
03/01/2015	Andrew Stepansky	□ IND □ COM □ OTH □ PTY □ SCC	Owner MedResponse Inc.	1,000.04 Check if Loan Frovide interest rate
		IND COM OTH PTY SCC		Check if Loan ** Provide interest rate
		IND COM OTH PTY SCC		Check if Loan Check if Loan % Provide interest rate

Reason for Amendment: _

*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



ME OF FILER			Date of		Date Stamp	CALIFO	IRNIA A A -
VONKIN FOR CO	MMUNITY COLLEGE BOARD	2015	This Filing _	03/03/2015	2015 MAR - L PH L	FOF	
REA CODE/PHONE	NUMBER	I.D. NUMBER (Fapp@ceble)			2015 MAR -4 PH 4: 3/3/15 FAX	For	Official Use Only
		1319629	Report No. 3		CAMPAIGN FILIAN DISCLOSURE SECT		
REET ADDRESS			Amendme	nt	DISCLOSURE SLUT	IUN	
			to Report No.	· 		013806 (08554	
ΤΥ		STATE ZIP CODE	(explain below)	_			
			No. of Pages	1			
. Contribut	on(s) Received						,
DATE RECEIVED	FULL NAM	E, STREET ADDRESS AND ZIP CODE OF CONT (1= COMMITTEE, ALSO ENTERLD, NUMBER)	RIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMI (IF SELF-EMPLOYED, ENTER NAME OF		AMOUNT RECEIVED
3/03/2015	Coalition For LA C	comm College Excellence in Support	of Francesca				2,632.
	regar mine rough b	cond promine by and year are		X COM			
	Committee ID # 131	5215		□ отн			Check if Loan
	In-Kind / Voter Data			□ PTY			
	-						Provide interest rat
				☐ IND			1
				□ сом			
				□ отн			☐ Check if Loan
				PTY			Ι.
							Provide interest rat
				☐ IND			
				☐ COM			
				☐ OTH			☐ C>heck if Loan
				SCC			
							Provide interest rat
					*Contributor Codes IND - Individual COM - Recipient Com OTH - Other (e.g., bo	mittee (oth	

2142-4-601

497 Contribution Report

Type or print in ink. Amounts may be rounded to whole dollars.

497 CONTRIB	JTION REPORT
-------------	--------------

NAME OF FILER			Date of	Date Stamp FD BY	CALIFORNIA 497
SVONKIN FOR COMMUNITY COLLEGE BOARD	2015		This Filing03/04/2015	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable	3)		2015 MAR -5 AM 11:	For Official Use Only
	1319629		Report No. 2	RATE:	05
STREET ADDRESS			□ Amondment	CAMPAIGN FMASS	-
			to Report No	DiscLosure Flore	013806
CITY	STATE	ZIP CODE	(explain below)		(08554
			No. of Pages1		(00)

1. Contribution(s) Received

	· · · · · · · · · · · · · · · · · · ·			
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
03/03/2015	AMG & Associates LLC	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		2,500.00
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		Check if Loan Check if Loan Provide interest rate
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		Check if Loan

	<u> </u>
Reason for Amendment:	SCC – Small Contributor Committee
5 £ A	PTY Political Party
	OTH Other (e.g., business entity)
	COM - Recipient Committee (other than PTY

FPPC Form 497 (March/2011) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

*Contributor Codes IND – Individual

or SCC)

	Type or print in ink.
A	mounts may be rounded to whole dollars

497 Contribution Report		Amoun	Type or print in in its may be rounded to i	497 CONTRIBUTION R			
NAME OF FILER SVONKIN FOR CO	MMUNITY COLLEGE BOARD	2015	Date of This Filing	03/13/2015	Date Stamp 20/5//AR 13	CALIFORNIA	
	AREA CODE/PHONE NUMBER 1319529		Report No. 3	3	\$2000 13	For Official Use Only	
STREET ADDRESS			Amendm to Report No		uistin jagan e		
CITY		STATE ZIP CODE	(explain below) No. of Pages	1			
1. Contributi	on(s) Received						
DATE RECEIVED	FULL NAM	E, STREET ADDRESS AND ZIP CODE OF CON (IF COMMITTEE, ALSD ENTER LD. NUMBER)	ITRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EM IF SELF-EMPLOYED, ENTER NAME OF		AMOUNT RECEIVED
03/13/2015	California Laborers Committee	s For Equality And Progress Smal	1 Contributor	☐ IND			5,000.0
	Committee ID # 781:	- ·		☐ OTH ☐ PTY ☒ SCC			Check if Loan
			-	IND COM OTH PTY			Provide interest rate
				□ scc			Provide interest rate
				IND COM OTH PTY			☐ Check if Loan
	1			scc			Provide interest rate
Reason for Amer	ndment:				*Contributor Codes IND – Individual COM – Recipient Com OTH – Other (e.g., bu PTY – Political Party SCC – Small Contribut	isiness enti	ty)

Recipient Committee	Type or print in i	nk. (2.1. 'Date Stamp	COVER PAGE
Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		FORM 460
(Statement covers period from 01/01/2015	Date of election if applicable 15 JAN 22 PM N (Month, Day, Year)	Page 1 of 13 For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through 01/17/2015	03/03/2015)
1. Type of Recipient Committee: All Committees - G	ompleta Parts 1, 2, 3, and 4.	2. Type of Statement:	
 State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee 	Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	☐ Semi-annual Statement ☐ Sp ☐ Termination Statement ☐ Su	erterly Statement ecial Odd-Year Report pplemental Preelection atement - Attach Form 495
3. Committee Information	D. NUMBER 1319629	Treasurer(s)	
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) SVONKIN FOR COMMUNITY COLLEGE BOARD 2015		NAME OF TREASURER DAVID L. GOULD MAILING ADDRESS	
STREET ADDRESS (NO P.O. BOX)		CITY STATE ZIP	CODE AREA CODE/PHONE
CITY STATE ZIP C	ODE AREA CODE/PHONE	NAME OF ASSISTANT TREASURER, IF ANY	
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.	BOX	MAILING ADDRESS	
CITY STATE ZIP C	ODE AREA CODE/PHONE	CITY STATE ZIP	CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRESS	
4. Verification			
I have used all reasonable diligence in preparing and reviewir under penalty of perjury under the laws of the State of Californ			e and complete. I certify
Executed on01/19/2015	Ву		
Executed on	By Signature of Cont	trolling Officeholder, Candelste, State Measure Proponent or Responsible Officer of Spona	or
Executed on	Ву	Signature of Controlling Officeholder, Candidate, State Measure Proponent	
Executed on	Ву	Signature of Controlling Officeholder, Candidate, State Measure Proponent	FPPC Form 460 (January/05)

	COVER	R PAGE	E-PART 2
CALIE	ORNI		
		1	(21)
FÇ	RM	Ç.Ç.	
		•	
Page _	2	of	13
1 2			

Ę	Officeholder or Candidate Controlled Committee			Primarily Formed Ballo	t Measure	Committee		
Ī	NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE				
5	Scott Svonkin							
Ċ	DEFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRIC	CT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIO	NO	☐ SUPPORT	
(Community College Board: Los Angeles Comm.Co	ol District 5					OPPOSE	
İ	RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) C	CITY STATE ZIP		Identify the controlling offi	iceholder, cai	ndidate, or state meas	sure proponent	, if an
				NAME OF OFFICEHOLDER, CAN	DIDATE, OR PR	ROPONENT		
	Related Committees Not Included in this Sta not included in this statement that are controlled by you contributions or make expenditures on behalf of your ca	or are primarily formed to receive		OFFICE SOUGHT OR HELD		DISTRICT	T NO. IF ANY	
Č	COMMITTEE NAME	I.D. NUMBER						
î	NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Cand officeholder(s) or candidate(s)	lidate/Offic) for which thi	ceholder Committe is committee is primarily	e List names o	f
•	COMMITTEE ADDRESS STREET ADDRESS (NO P.O. E			NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT OR H	HELD SUI	
	CITY STATE ZIP (CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR O	ANDIDATE	OFFICE SOUGHT OR H	#ELD SUF	
						ļ <u> </u>		
	COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT OR H	(ELD SUI	
	NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR C		OFFICE SOUGHT OR H	SUI	POSE
	NAME OF TREASURER	CONTROLLED COMMITTEE?					SUI	POSE PPORT
: 1		CONTROLLED COMMITTEE?					HELD SU	POSE PPORT

Campaign Disclosure Statement Summary Page

Type or print in ink. Amounts may be rounded to whole dollars.

SUMMARYPAGE CALIFORNIA Statement covers period FORM 01/01/2015 Page ___ 3 ___ of ___ 13 01/17/2015 through _ I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1319629 SVONKIN FOR COMMUNITY COLLEGE BOARD 2015

SVONATN FOR COMMONITY COBLEGE BOARD 2015				1515025
Contributions Received	Column A TOTALTHIS PERIOD FROMATTACHED SCHEDULES)		COLUMN B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
Monetary Contributions	\$ 13,047.00	s	13,047.00	
2. Loans Received	0.00		25,000.00	1/1 through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1+2	\$ 13,047.00	\$	38,047.00	20. Contributions Received \$ \$
4. Nonmonetary Contributions Schedule C, Line 3	34,437.50		34,437.50	21. Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 47,484.50	\$	72,484.50	Made \$ \$
Expenditures Made				Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4		\$	50,420.00	Candidates
7. Loans Made Schedule H, Line 3			10,000.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 5 + 7	\$ 50,420.00	\$	60,420.00	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)			0.00	Date of Election Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3	34,437.50		34,437.50	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$ 84,857.50	\$	94,857.50	\$
Current Cash Statement				\$
12. Beginning Cash Balance Previous Summary Page, Line 15	\$ 209,968.23	То	calculate Column B, add	
13. Cash Receipts	13,047.00		ounts in Column A to the 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 amounts reported in Column B.
15. Cash Payments	50,420.00		oort. Some amounts in lumn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 172,595.23	fig	ures that should be otracted from previous	
if this is a termination statement, Line 16 must be zero.		pe	riod amounts. If this is	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ 0.00	for ca	this calendar year, only	
Cash Equivalents and Outstanding Debts		fro an	m Lines 2, 7, and 9 (if y).	
18. Cash Equivalents See instructions on reverse	\$ 10,000.00			
19. Outstanding Debts Add Line 2 + Line 9 in Column 8 above	\$ 25,000.00			FPPC Form 460 (January/0 FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-377

Schedule A Monetary Contributions Received

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period

			whole donard,	from01/01/2	015	FORM 40U	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER SYONKIN FOR COMMUNITY COLLEGE BOARD 2015				through01/17/20	015 Pag	Page 4 of 13	
					I.D.		
					131	19629	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	(IF SELF-EMPLOYED, ENTER NAME	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	1	
01/01/2015	Jack H. Hadiinian	XIND COM OTH PTY	OFBUSNESS) City Councilman City of Montebello	100.00	100,0	0	
01/08/2015	Pacifica Services Inc.	□IND □COM ☑OTH □PTY □SCC		4,000.00	4,006.0	0	
01/08/2015	Rick Taylor And Associates	□IND □COM ØJUTH □PTY □SCC		1,000.00	1,000.0	0	
01/16/2015	Ed Buck	⊠IND □COM □OTH □PTY □SCC	Retired None	1,000.00	1,000.0	0	
01/16/2015	ledward L. Chaves	□IND □ COM □ OTH □ PTY □ SCC	Retired None	100.00	100.0	0	
			SUBTOTALS	6,200.00			
Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) \$ 12,750.00 2. Amount received this period – unitemized monetary contributions of less than \$100					*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		
(Add Lines	s 1 and 2. Enter here and on the Summary Page, Colu	mn A, Line 1.))TOTAL \$	13,047.00	FPI	PC Form 460 (January/05	

Schedule A (Continuation Sheet)

Type or print in ink.

SCHEDULE A (CONT.)

Monetary	Contributions Received	Amounts may to whole		Statement cover			ORNIA RM	460
				through01/17/	2015	Page _	_5 of	13
NAME OF FILER				<u> </u>		I.D. NUM	BER	
SVONKIN FOR	COMMUNITY COLLEGE BOARD 2015					131962	ġ	
DATE REÇEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.O. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN, 1 - DEC	EAR	TO	ECTION DATE QUIRED)
01/16/2015	Michael Chegini	XIND COM OTH PTY	Engineer Michael Chegini	250.00	2	50.00		
01/16/2015	Committee To Re Elect Albert Robles (ID# 960246)	☐IND ICOM ☐OTH ☐PTY ☐SCC		500.00	5	500.00		_
01/16/2015	Sauli Danpour	☑IND □COM □OTH □PTY □SCC	Manager Xyvest Holdings Inc.	500.00	5	500.00		
01/16/2015	Tom Flintoff	☑IND □COM □OTH □PTY □SCC	Government Affairs Kindel Gagan	500.00		500.00		
01/16/2015	Andrew Friedman	⊠IND □COM □OTH □PTY □SCC	Attorney Andrew Friedman	500.00	5	500.00		
			SUBTOTAL	\$ 2,250.00			-	

*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

Schedule A (Continuation Sheet)

Type or print in ink.

SCHEDULE A (CONT.)

Monetary	Contributions Received	Amounts may to whole o		Statement coverage from 01/01/		CALIFO FO		460
				through 01/17	2015	Pagė	_6 of_	13
NAME OF FILER						I.D. NUMI	BER	
SVONKIN FOR	COMMUNITY COLLEGE BOARD 2015					131962	9	
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 YE (JAN. 1 - DEC.	AR	PER ELE TO D (IF REQ	ATE
01/16/2015	LA Taxi Cooperative. Inc.	☐IND ☐COM ※OTH ☐PTY ☐SCC		500.60	50	0.00		
01/16/2015	Laborers International Union Of North American Local 1309	DONI MOD MOD HTO PTY SOC		500.00	50	0.00		
01/16/2015	Kevin Peterson	IND COM OTH PTY SCC	Engineer F2S Engineering	500.00	Sc	00.00		
01/16/2015	Thomas Safran	☑IND ☐COM ☐CTH ☐PTY ☐SCC	President Safran & Associates	500.00	50	0.00		
01/16/2015	Jeffrev A. Sevmour	⊠IND □COM □OTH □PTY □SCC	Governmental Consultant Seymour Consulting Group	500.00	50	0.00		
			SUBTOTAL	\$ 2,500.00				

*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

Type or print in ink. Amounts may be rounded

SCH	EDUL	_E A	(CONT.)

Monetary	Contributions Received	Amounts may to whole o		Statement cove	2013	FORM 460	
				through01/17/	²⁰¹⁵ P	age 7 of 13	
NAME OF FILER					I	.D. NUMBER	
SVONKIN FOR	COMMUNITY COLLEGE BOARD 2015					319629	
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 DO CALENDAR YEA (JAN. 1 - DEC. 3)	R TO DATE	
01/16/2015	Parshid Shooshani	IND COM OTH PTY SCC	Metal Distribution Bobco Metal	300.00	300	.00	
01/16/2015	Sheldon H. Sloan	⊠IND □COM □OTH □PTY □SCC	Attorney Sheldon H. Sloan	250.00	250	.00	
01/16/2015	Howard Sunkin	⊠IND □COM □OTH □PTY □SCC	Sports MCCourt Group	250.00	250	.00	
01/16/2015	The 'G' Crew	□IND □COM ⊠OTH □PTY □SCC		250.00	250	.00	
01/16/2015	Urban Concepts	□IND □COM ☑OTH □PTY □SCC		250.00	250	.00	
			SUBTOTAL	1,300.00			

*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

Schedule A (Continuation Sheet)

Type or print in ink.

SCH	EDHI	$\vdash \Delta$	(CONT.)

Monetary Contributions Received		Amounts may to whole		Statement covers period from 01/01/2015 through 01/17/2015		CALIFORNIA 460 FORM of 13		
NAME OF FILER						I.D. NUME		
	COMMUNITY COLLEGE BOARD 2015					1319629		
DATÉ RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME) OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR \ (JAN. 1 - DEC	YEAR	PER ELECTION TO DATE (IF REQUIRED)	
01/16/2015	Dan Weinstein	XIND COM OTH PTY SCC	Sales Developer Grid Partners	500.00		500.00		
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
			SUBTOTAL	\$ 500.00		<u>-</u>		

*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

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Sched	ule	В-	Part	1
Loans	Red	eiv	ed	

Type or print in ink.
Amounts may be rounded

SCHED	ULEB	-PART	

Schedule B – Part 1		ounts may be re	ounded		Statement cov	ers period	CALIFORN	AARN
Loans Received		to whole dollar	rs.		from01/0:	1/2015	FORM	400
SEE INSTRUCTIONS ON REVERSE					through01/1	7/2015	Page9	of <u>13</u>
NAME OF FILER							I.D. NUMBER	
SVONKIN FOR COMMUNITY COLLEGE BOARD 20	15						1319629	
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 PA OR FORGIV THIS PERIO	EN CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(1) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Pamela Dubin	Social Worker LA County Dept of Children Services			\$ 0.0	25,000.00	0.00% RATE	\$ 25,000.00	\$ 0.00 PER ELECTION**
TEX IND COM OTH PTY SEC		\$ 25,000.00	\$0.00	\$0.0	DATE DUE	s0.00	12/29/2009 DATE INCURRED	\$ [32011 -25,000.00
Pamela Dubin	Social Worker LA County Dept of Children Services			\$0.0	_ -	% RATE	g 25,000.00	CALENDAR YEAR 5 0.00 PER ELECTION **
[†] ☑ IND □ COM □ OTH □ PTY □ SCC	1	\$25,000.00	\$0.00	\$0.0	DATE DUE	\$0.00	06/30/2014 DATE INCURRED	\$ 92011 -25,000.00
To up. Soon Son Son Son Son		\$	5	\$ FORGIVEN	S		\$DATE INCURRED	S PERELECTION**
TO IND COM OTH PTY SCC			<u> </u>	<u> </u>	DATEBUE	nevro -	DATE INCORRED	<u> </u>
Colondalo D. Communication		SUBTOTALS	0.00	\$ 0	.00\$ 50,000.00	(Enter (e) on Schedule E, Line 3)		
Schedule B Summary								
Loans received this period (Total Column (b) plus unitemized loan		***************************************	••••••	\$ _	0.00	(tc	Contributor Codes	;
Loans paid or forgiven this period (Total Column (c) plus loans under \$10 (Include loans paid by a third party that	0 paid or forgiven.) it are also itemized on Scheo	dule A.)				O P	D – Individual OM – Recipient Co (other than TH – Other (e.g., TY – Political Part CC – Small Contril	PTY or SCC) business entity)
Net change this period. (Subtract Lin Enter the net here and on the Summa	e 2 from Line 1.)ry Page, Column A, Line 2.		······································	. NET \$	(May be a negative number)	<u></u>		
*Amounts forgiven or paid by another party also	must be reported on Schedule A.	. [

** If required.

Schedule C Nonmonetary Contributions Received

Type or print in ink. Amounts may be rounded to whole dollars.

_			SCHEDULE C
	Staten	nent covers period	CALIFORNIA AGO
	from	01/01/2015	FORM 400
	through_	01/17/2015	Page 10 of 13
	_		I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER SVONKIN FOR COMMUNITY COLLEGE BOARD 2015 1319629 CUMULATIVE TO IF AN INDIVIDUAL, ENTER AMOUNT/ PER ELECTION FULL NAME, STREET ADDRESS AND CONTRIBUTOR **DESCRIPTION OF** DATE DATE OCCUPATION AND EMPLOYER FAIR MARKET TODATE ZIP CODE OF CONTRIBUTOR CODE * GOODS OR SERVICES CALENDAR YEAR RECEIVED (IF SELF-EMPLOYED, ENTER VALUE (IF REQUIRED) (IF COMMITTEE, ALSO ENTER LD. NUMBER). NAME OF BUSINESS) (JAN 1 - DEC 31) 01/07/2015 Coalition For LA Comm College IN-KIND-SLATE 29,537.50 34,437.50 IND Excellence in Support of Francesca MAILER x COM Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee '15 (ID# 1315215) □ PTY SCC 01/13/2015 Coalition For LA Comm College IN-KIND-Slate 4.900.00 34,437,50 Excellence in Support of Francesca Mailer x COM Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee '15 (ID# 1315215) □ OTH □ PTY SCC **⊟СОМ** □ OTH []PTY SCC □IND □ COM □ OTH □ PTY □SCC SUBTOTAL \$ Attach additional information on appropriately labeled continuation sheets. 34,437.50

Schedule C Summary *Contributor Codes

1. Amount received this period – itemized nonmonetary contributions. 34,437.50 (Include all Schedule C subtotals.) \$ _ 2. Amount received this period – unitemized nonmonetary contributions of less than \$100 ______\$

IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other (e.g., business entity) PTY - Political Party SCC - Small Contributor Committee

3. Total nonmonetary contributions received this period. 34,437.50

Schedule D SCHEDULE D Summary of Expenditures Type or print in ink. Statement covers period CALIFORNIA Amounts may be rounded Supporting/Opposing Other to whole dollars. **FORM** 01/01/2015 Candidates, Measures and Committees through __01/17/2015 SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER SVONKIN FOR COMMUNITY COLLEGE BOARD 2015 1319629 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 01/13/2015 Coalition For LA Comm College Excellence in 50,000.00 50,000.00 X Monetary Support of Francesca Vega, Mike Fong, Scott Contribution Svonkin Sydney Kamlager Trustee '15 ☐ Nonmonetary Contribution Independent X Support Expenditure Oppose Monetary Contribution Nonmonetary Contribution Independent Expenditure Support Oppose Contribution Nonmonetary Contribution Independent Expenditure Support Oppose SUBTOTAL \$ 50,000.00

Schedule D Summary

1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)	\$	50,000.00
Unitemized contributions and independent expenditures made this period of under \$100	\$	0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	TOTAL \$	50,000.00

Schedule E Payments Made

Type or print in ink. Amounts may be rounded

Statement covers period	CALIFORNIA NED
from01/01/2015	FORM TOU
through01/17/2015	Page12 of13
	I.D. NUMBER

COLUEDUUE E

to whole dollars. SEE INSTRUCTIONS ON REVERSE NAME OF FILER SVONKIN FOR COMMUNITY COLLEGE BOARD 2015 1319629

CMP campaign paraphemalia/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	OFC office exper PET petition circu PHO phone banks POL polling and s POS postage, del	d appearances ases lating	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 candidat VOT voter registration WEB information technology costs (internet, e-mail)		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID	
David L. Gould Company		PRO		250.00	

50,000,00 Coalition For LA Comm College Excellence in Support of Francesca Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee '15 (ID# 1315215) CTB

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 50,250.00 Schedule E Summary 50,250.00 170.00 3. Total interest paid this period on loans, (Enter amount from Schedule B, Part 1, Column (e).)......\$ 0.00

								SCHEDULE	
Schedule H			print in ink.		Statement cov	rers period	CALIFORN	^{IA} 460	
Loans Made to Others*			nay be rounded nie dollars.		from01/0	1/2015	FORM TOU		
SEE INSTRUCTIONS ON REVERSE					through 01/1	7/2015	Page13	of <u>13</u>	
NAME OF FILER							I.D. NUMBER		
, SVONKIN FOR COMMUNITY COLLEGE BOARD 20	115						1319629		
	IF AN INDIVIDUAL, ENTER	(a)	(b)	(c)	OUTSTANDING	(e)	In)	(g)	
FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER LD. NUMBER)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT LOANED THIS PERIOD	REPAYMENT FORGIVENES THIS PERIO	SS CLOSE OF THIS	INTEREST RECEIVED	ORIGINAL AMOUNT OF LOAN	CUMULATIVE LOANS TO DATE	
EBENSTEIN FOR WATER BOARD 2014 (ID# 1368130)				PAID				CALENDAR YEAR	
				g D.(00 8 10,000.00		s_10,000.00	g 0.00	
LOAN				FORGIVEN		RATE	*	PER ELECTION*	
		g 10,000.00	0.00	s D.0	10	. 0.00	10/21/2014		
		3	\$	\$	DATE DUE	\$	DATE INCURRED	, , , , , , , , , , , , , , , , , , , ,	
				□ PAID				CALENDAR YEAR	
				s	s	%	s	s	
			1	FORGIVEN		RATE		PER ELECTION*	
		s	s	s	_	s		\$	
				ļ	DATE DUE		DATE INCURRED		
*Loans that are contributions to another candid	late or committee								
must also be summarized on Schedule D. Loar also be reported on Schedule E.	s forgiven must	SUBTOTALS	\$ 0.00	\$ 0	.00 \$ 10,000.00	\$ 0.00			
			· · · · · · · · · · · · · · · · · · ·			(Enter (a) on Schedule 1, Line 3)			
Schedule H Summary									
Loans made this period					S	0.0	0	**** 5	
(Total Column (b) plus unitemized loans								**If Required	
Payments received on loans (Total Column (c) plus unitemized payments)				••••••	\$	0.0	10		
3. Net change this period. (Subtract Line (Enter the net here and on the Summa	2 from Line 1.)ry Page, Column A. Line 7.)				NET \$	0 . 0	0		

SEE INSTRUCTIONS ON REVERSE Through 02/14/2015 See Instructions on Reverse Through 02/14/2015 Through	CALIFORNIA 460		
☑ Officeholder, Candidate Controlled Committee ☐ Primarily Formed Ballot Measure ☐ State Candidate Election Committee ☐ Committee ☐ Committee ☐ Controlled ☐ Sponsored ☐ Amendment (Explain below) ☐ Amendment (Explain below) ☐ Amendment (Explain below) ☐ Treasurer(s) ☐ Treasurer(s) ☐ Treasurer(s) ☐ NAME OF TREASURER ☐ DAVID I. GOULD ☐ DAVID	202_		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) SVONKIN FOR COMMUNITY COLLEGE BOARD 2015 STREET ADDRESS (NO P.O. BOX) ITERASURER DAVID L. GOULD MAILING ADDRESS CITY STATE ZIP CODE AREA COD	15		
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX MAILING ADDRESS	ODE/PHONE		
CITY STATE ZIP CODE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS	ODE/PHONE		
4. Verification I have used all reasonable diligence in preparing and reviewing this statement and under penalty of perjury under the laws of the State of California that the foregoing Executed on	e. I certify		

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
State of California

Officeholder or Candidate Controlled Committee			6.	6. Primarily Formed Ballot Measure Committee						
NAME OF OFFICEHOLDER OR CA	NDIDATE			NAME OF BALLOT MEASURE						
Scott Svonkin										
OFFICE SOUGHT OR HELD (INCLU	UDE LOCATION AND DISTRICT	NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIO	N		SUPPORT		
Community College Board:	: Los Angeles Comm.Col	District 5						OPPOSE		
RESIDENTIAL/BUSINESS ADDRES	SS (NO. AND STREET) CIT	Y STATE ZIP		Identify the controlling off	iceholder, car	ndidate, or st	tate measure	proponent, if any		
				NAME OF OFFICEHOLDER, CAN	IDIDATE, OR PR	OPONENT				
not included in this statement t	ated Committees Not Included in this Statement: List any committees included in this statement that are controlled by you or are primarily formed to receive tributions or make expenditures on behalf of your candidacy.			OFFICE SOUGHT OR HELD			IF ANY			
COMMITTEE NAME		I.D. NUMBER		· · · · · · · · · · · · · · · · · · ·			<u> </u>			
NAME OF TREASURER CONTROLLED COMMITTEE? YES NO		7.	ommittee L s primarily form							
COMMITTEE ADDRESS S	TREET ADDRESS (NO P.O. BOX	()		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE		
CITY	STATE ZIP CO	DE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR (CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE		
COMMITTEE NAME		I.D. NUMBER		NAME OF OFFICEHOLDER OR O	CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE		
NAME OF TREASURER		CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR (CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE		
COMMITTEE ADDRESS S'	TREET ADDRESS (NO P.O. BO) STATE ZIP CO			Atta	ch continuatio	on sheets if i	necessary			

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
State of California

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Type or print in ink.

Amounts may be rounded to whole dollars.

SUMMARY PAGE

hrough 02/14/2015 Page 3 of 22

I.D. NUMBER

SVONKIN FOR COMMUNITY COLLEGE BOARD 2015 1319629 Column A Column B Calendar Year Summary for Candidates Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE **General Elections** 42,783.00 1/1 through 6/30 7/1 to Date 25,000.00 20. Contributions 67,783.00 29,736.00 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ _____ Received 4. Nonmonetary Contributions Schedule C, Line 3 166,221.71 200,659.21 21. Expenditures 268,442.21 Expenditures Made **Expenditure Limit Summary for State** Candidates 10,000.00 22. Cumulative Expenditures Made* 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ _____ 71,892.48 \$ _____ 132,312.48 (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 (mm/dd/yy) ____166,221.71 200,659.21 332,971.69 Current Cash Statement 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 172,595.23 To calculate Column B, add amounts in Column A to the 29,736.00 13. Cash Receipts Column A, Line 3 above corresponding amounts *Amounts in this section may be different from amounts 14. Miscellaneous Increases to Cash Schedule I, Line 4 from Column B of your last reported in Column B. report. Some amounts in 71,892.48 Column A may be negative 130,438.75 figures that should be 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 0.00 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ _____ carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). 18. Cash Equivalents See instructions on reverse \$ _____10,000.00 FPPC Form 460 (January/05) 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ 25,000.00 FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A

Type or print in ink.

SCHEDULE A

Monetary Contributions Received			ts may be rounded whole dollars.	from01/18/2		ALIFORNIA 460 FORM
SEE INSTRUCTIO	DNS ON REVERSE			through 02/14/2	015 P	age4 of22
NAME OF FILER	ON REVERSE				1.0). NUMBER
SVONKIN FOR	COMMUNITY COLLEGE BOARD 2015				1:	319629
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 DAT CALENDAR YEAR (JAN. 1 - DEC. 31)	TO DATE
01/18/2015	Thomas Safran	IND COM OTH PTY SCC	President Safran & Associates	250.00 Received through inter ACTBLUE 14 Arrow St Suite 11 Cambridge, MA 02138-		.00
01/18/2015	Howard Welinsky	IND COM OTH PTY SCC	Senior Vice President Warner Bros.	500.00 Received through inter ACTBLUE 14 Arrow St Suite 11 Cambridge, MA 02138-		00
01/21/2015	Richard Katz	IND □ COM □ OTH □ PTY □ SCC	Consultant Richard Katz	250.00 Received through inter ACTBLUE 14 Arrow St Suite 11 Cambridge, MA 02138-		00
01/23/2015	Bradley Cox	⊠IND □COM □OTH □PTY □SCC	Real Estate Trammell Crow Company	250.00	250	.00
01/23/2015	Wendy-Sue Rosen	⊠IND □COM □OTH □PTY □SCC	Community Advocate Volunteer	250.00	250	. 0 0
			SUBTOTAL	\$ 1,500.00		
Amount re (Include a Amount re	A Summary ecceived this period – itemized monetary contributions. Ill Schedule A subtotals.)				IND – Ind COM – R ((OTH – O PTY – Po	ividual ecipient Committee other than PTY or SCC) ther (e.g., business entity) littical Party nall Contributor Committee
	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colu	ımn A, Line 1.)TOTAL \$	29,736.00		PPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may to whole o		Statement cove from01/18/ through02/14/	2015	CALIFORNIA 460 Page 5 of 22		
NAME OF FILER				-		I.D. NUI	MBER	
SVONKIN FOR	COMMUNITY COLLEGE BOARD 2015					13196	29	
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	PER ELECTION TO DATE (IF REQUIRED)	
01/26/2015	Jennifer J. Ferguson	IND COM OTH PTY SCC	Attorney Olivarez Madruga, LLP	2,500.00	2,500.00			
01/29/2015	Rob Horowitz	XIND □COM □OTH □PTY □SCC	Consultant Rob Horowitz	750.00	7	50.00		
01/29/2015	Lewis Brisbois Bisgaard & Smith LLP	□IND □COM 図OTH □PTY □SCC		1,000.00	1,0	00.00		
02/04/2015	Jorge Morales For City Council 2011 (ID# 1329552)	□IND □COM □OTH □PTY □SCC		1,000.00	1,0	00.00		
02/06/2015	ACEA Local 3090 AFSCME Political Action Fund (ID# 850335)	☐IND IX COM ☐ OTH ☐ PTY ☐ SCC		500.00	5	00.00		
			SUBTOTALS	5,750.00	and the second second	2		

*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

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A	CONT.)

Statement covers period

from.

01/18/2015

				through 02/14/	2015	Page	6 of_	22
NAME OF FILER SVONKIN FOR (COMMUNITY COLLEGE BOARD 2015					I.D. NUM 131962		
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 CALENDAR Y (JAN. 1 - DEC	EAR	PER ELE TO D (IF REQ	ATE
02/06/2015	Leroy D. Baca	⊠IND □COM □OTH □PTY □SCC	Retired None	1,000.00	1,000.00			
02/06/2015	Stanley Black	⊠IND □COM □OTH □PTY □SCC	Real Estate Investor Black Equities	100.00	1	.00.00		
02/06/2015	Paul Bock	⊠IND □COM □OTH □PTY □SCC	Attorney Holland & Knight	250.00 Received through interaction ACTBLUE 14 Arrow St Suite 11 Cambridge, MA 02138-		50.00		
02/06/2015	Jake Farber	⊠IND □COM □OTH □PTY □SCC	Metal Business Alpert + Alpert Iron & Metal, Inc.	500.00		500.00		
02/06/2015	Laborers' Local 300 Small Contributor Committee (ID# 950674)	□IND □COM □OTH □PTY □SCC		1,000.00	1,0	000.00		
			SUBTOTAL	\$ 2,850.00				

*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

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

from

01/18/2015

				through 02/14/	2015	Page	o	f 22
NAME OF FILER						I.D. NUM	BER	
SVONKIN FOR C	COMMUNITY COLLEGE BOARD 2015			,		131962	9	
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 YI (JAN. 1 - DEC.	EAR . 31)	TO	LECTION DATE QUIRED)
02/06/2015	Los Angeles/Orange Counties Building And Construction Trades Council PAC (ID# 822029)	□IND □COM □OTH □PTY □SCC		500.00	5	00.00		
02/06/2015	Medical Buildings Of America LLC	□IND □COM ②OTH □PTY □SCC		500.00	5	00.00		
02/06/2015	Orbach Huff Suarez & Henderson LLP	□IND □COM 図OTH □PTY □SCC		2,500.00	2,5	00.00		
02/06/2015	Leslie Pollner	☑IND □COM □OTH □PTY □SCC	Lobbyist Holland & Knight	500.00 Received through inter ACTBLUE 14 Arrow St Suite 11 Cambridge, MA 02138-	mediary:	00.00		
02/06/2015	Service Employees International Union Local 99 Candidate PAC (ID# 980422)	□IND □COM □OTH □PTY ☑SCC		4,000.00	4,0	00.00		
			SUBTOTAL	\$ 8,000.00				(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)

*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

Schedule A (Continuation Sheet)

Type or print in ink.

SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may to whole o		Statement cove		CALIFORNIA 460		
				through 02/14/	2015	Page_	8 of22	
NAME OF FILER						I.D. NU	MBER	
SVONKIN FOR	COMMUNITY COLLEGE BOARD 2015					13196	29	
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	PER ELECTION TO DATE (IF REQUIRED)	
02/10/2015	LA League of Conservation Voters LALCV (ID# 810317)	□IND □COM □OTH □PTY □SCC		1,000.00	1,0	00.00		
02/12/2015	Daniel C. Maldonado	⊠IND □COM □OTH □PTY □SCC	Senior Policy Advisor Holland & Knight	500.00 Received through inter ACTBLUE 14 Arrow St Suite 11 Cambridge, MA 02138-		00.00		
02/12/2015	Daniel C. Maldonado	⊠IND □COM □OTH □PTY □SCC	Senior Policy Advisor Holland & Knight	Received through inte ACTBLUE 14 Arrow St Suite 11 Cambridge, MA 02138-		00.00		
02/13/2015	AECOM Technology Corporation	□IND □COM ☑OTH □PTY □SCC		5,000.00	5,0	000.00		
02/13/2015	Gaines & Stacey, LLP	□IND □COM ☑OTH □PTY □SCC		250.00	2	50.00		
			SUBTOTAL	\$ 7,250.00			医克里斯氏 医肾	

*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

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

from_

01/18/2015

NAME OF FILER SVONKIN FOR	COMMUNITY COLLEGE BOARD 2015		through <u>02/14/</u>	2015	Page 9 of 22 i.D. NUMBER 1319629		
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	PER ELECTION TO DATE (IF REQUIRED)
02/13/2015	International Union Of Operating Engineers Local No. 12 (ID# 743030)	□IND □COM □OTH □PTY □SCC		1,500.00	1,5	00.00	
02/14/2015	Ladie Ella Daya	XIND ☐COM ☐OTH ☐PTY ☐SCC	VP The 'G' Grew	500.00	5	00.00	
02/14/2015	Holland & Knight LLP California Committee For Effective Gov., Inc	□IND □COM 図OTH □PTY □SCC		1,500.00	1,5	00.00	
02/14/2015	Gary Toebben	⊠IND □COM □OTH □PTY □SCC	President LA Area Chamber Of Commerce	250.00	2	50.00	
02/14/2015	Edgar Zelaya	XIND □COM □OTH □PTY □SCC	VP Kal Krishman Consulting Services	500.00	5	00.00	
*****			SUBTOTAL	\$ 4,250.00			

*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

•							SCHE	DULE B - PART 1
Schedule B – Part 1 Loans Received	Amo	Type or print in ink. Amounts may be rounded to whole dollars.				ers period 3/2015	CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER SVONKIN FOR COMMUNITY COLLEGE BOARD 20	15				through02/14	1/2015	I.D. NUMBER	of
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		(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Pamela Dubin	Social Worker LA County Dept of Children Services			S 0.00	\$25,000.00	%	\$ 25,000.00	\$0.00 PER ELECTION**
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$ - 25,000.00	\$0.00	\$0.00	DATE DUE	\$0.00	06/30/2014 DATE INCURRED	\$
		s	s	PAID S	s	RATE %	\$	\$PER ELECTION*
† IND COM OTH PTY SCC				PAID	DATE DUE		DATE INCURRED	CALENDAR YEAR
				\$FORGIVEN	s	RATE	\$	\$PER ELECTION**

SUBTOTALS \$

Schedule B Summary

†□ IND □ COM □ OTH □ PTY □ SCC

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

0.00

DATE DUE

25,000.00\$

0.00\$

0.00\$

	Loans received this period	\$.	0.00
2.	Loans paid or forgiven this period	\$	0.00
3.	Net change this period. (Subtract Line 2 from Line 1.)	\$	0 . 0 0 (May be a negative number)

†Contributor Codes

DATE INCURRED

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

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

PER ELECTION **

PTY - Political Party

SCC - Small Contributor Committee

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

Schedule C Nonmonetary Contributions Received

Type or print in ink. Amounts may be rounded to whole dollars.

		SCHEDULE C
State	ment covers period	CALIFORNIA 160
from	01/18/2015	FORM 40U
through	02/14/2015	Page11 of22
		I.D. NUMBER
		1

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

SVONKIN FO	OR COMMUNITY COLLEGE BOARD 2015					1319629	
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 OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
01/20/2015	Coalition For LA Comm College Excellence in Support of Francesca Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee '15 (ID# 1315215)	□IND IND IND IND IND IND IND IND		IN KIND-Slate Mailer	42,152.45	182,256.98	
01/20/2015	Coalition For LA Comm College Excellence in Support of Francesca Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee '15 (ID# 1315215)	□IND ☑COM □OTH □PTY □SCC		IN KIND-POSTAGE	31,750.00	182,256.98	
01/20/2015	Coalition For IA Comm College Excellence in Support of Francesca Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee '15 (ID# 1315215)	□IND IND IND IND IND IND IND IND	,	IN KIND LITERATURE	3,269.48	182,256.98	-
01/20/2015	Coalition For LA Comm College Excellence in Support of Francesca Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee '15 (ID# 1315215)	□IND IND IND IND IND IND IND IND		IN KIND-PRINT ADS	11,759.58	182,256.98	
Attach ad	ditional information on appropriately label	ed continuati	ion sheets.	SUBTOTAL \$	88,931.51		

Attach additional information on appropriately labeled continuation sheets.

Schedule C Summary

1.	. Amount received this period – itemized nonmonetary contributions.		
	(Include all Schedule C subtotals.)	. \$ _	166,221.71
	,		
2.	. Amount received this period – unitemized nonmonetary contributions of less than \$100	, \$ _	0.00
3.	. Total nonmonetary contributions received this period.		

IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other (e.g., business entity) PTY - Political Party SCC - Small Contributor Committee

166,221.71

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

*Contributor Codes

Type or print in ink.
Amounts may be rounded to whole dollars.

CCUI	II E	~	(CON	Г١

CALIFORNIA ACO

Statement covers period

	,		to whole donars.		from_	01/18/201	.5	FOR	6M 46U				
SEE INSTRUCTION	NS ON REVERSE				throug	h02/14/201	.5	Page	12 of22				
NAME OF FILER	THE VENUE							I.D. NUMBE	ER				
SVONKIN FOR	COMMUNITY COLLEGE BOARD 2015							1319629					
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 OF FAIR						AMOUNT/ FAIR MARKET VALUE	CUMULATIV DATE CALENDAR (JAN 1 - DE	YEAR	PER ELECTION TO DATE (IF REQUIRED)
Ex Ve	calition For LA Comm College kcellence in Support of Francesca ega, Mike Fong, Scott Svonkin Sydney amlager Trustee '15 (ID# 1315215)	□IND IND IND IND IND IND IND IND		IN KIND-CNS		7,500.00		7,500.00 1		256.98			
Ex Ve	coalition For LA Comm College excellence in Support of Francesca ega, Mike Fong, Scott Svonkin Sydney amlager Trustee '15 (ID# 1315215)	□IND ICOM □OTH □PTY □SCC		IN KIND-LIT		8,533.59	182,	256.98					
Ex	oalition For LA Comm College xcellence in Support of Francesca ega, Mike Fong, Scott Svonkin Sydney amlager Trustee '15 (ID# 1315215)	□IND ICOM □OTH □PTY □SCC		CNS		15.62	182,	256,98					
Ex	oalition For LA Comm College xcellence in Support of Francesca ega, Mike Fong, Scott Svonkin Sydney amlager Trustee '15 (ID# 1315215)	□IND ☑COM □OTH □PTY □SCC		MAILER 1,960.50 18		182,	,256.98						
Ex Ve	oalition For LA Comm College xcellence in Support of Francesca ega, Mike Fong, Scott Svonkin Sydney amlager Trustee '15 (ID# 1315215)	□IND ICOM □OTH □PTY □SCC		POSTAGE		14,372.43	182,	, 256.98					
Attach addit	tional information on appropriately label	ed continuati	ion sheets.	SUBTO	STAL \$	32,382.14							

Type or print in ink.

Amounts may be rounded to whole dollars

SCH	9 14	\sim	100	NIT \

Nonmonetary Contributions Received		to whole dollars.		from01/1	8/2015		FORM 460		
SEE INSTRUCTIONS ON REVERSE				through 02/1	4/2015	Page	13 of		
NAME OF FILER						I.D. NUMB	ER		
SVONKIN FOR COMMUNITY COLLEGE BOARD 2015						1319629			
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 SERV	NOF FAIR MARKET CALENDA		ULATIVE TO DATE NDAR YEAR I 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)		
02/10/2015 Coalition For LA Comm College Excellence in Support of Francesca Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee '15 (ID# 1315215)	□IND □COM □OTH □PTY □SCC		IN KIND - LIT	3,985.82		182,256.98			
02/10/2015 Coalition For LA Comm College Excellence in Support of Francesca Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee '15 (ID# 1315215)	□IND ⊠COM □OTH □PTY □SCC		IN KIND - POST	TAGE 11,23	11,239.50 182,256.9				
02/11/2015 Clear Channel Outdoor, Inc. IN KIND-BOARDS	☐IND ☐COM ☑OTH ☐PTY ☐SCC		IN KIND-BOARDS	5 18,40	02.23	18,402.23			
02/11/2015 Coalition For LA Comm College Excellence in Support of Francesca Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee '15 (ID# 1315215)	□IND ☑COM □OTH □PTY □SCC		IN KIND-LIT	93	11.50	182,256.98			
02/11/2015 Coalition For LA Comm College Excellence in Support of Francesca Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee '15 (ID# 1315215)	□IND IXCOM □OTH □PTY □SCC		IN KIND-POS	5,84	12.00	182,256.98			
Attach additional information on appropriately labe	led continuat	ion sheets.	SUBTO	OTAL \$ 40,38	1.05				

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE C (CONT.)

CALIFORNIA 4 CO

Statement covers period

				from	01/18/201	5	FOR	_M 460					
SEE INSTRUCTIONS ON REVERSE				thro	ugh 02/14/201	5	Page	4 of22					
NAME OF FILER							I.D. NUMBE	R					
SVONKIN FOR COMMUNITY COLLEGE BOARD 2015							1319629						
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 OF GOODS OR SERVICES VALUE CALE								CUMULAT DAT CALENDAF (JAN 1 - D	E R YEAR	PER ELECTION TO DATE (IF REQUIRED)
O2/12/2015 Coalition For LA Comm College Excellence in Support of Francesca Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee '15 (ID# 1315215)	□IND IND IND IND IND IND IND IND		IN KIND-LIT		437.50 18		,256.98						
02/13/2015 Coalition For LA Comm College Excellence in Support of Francesca Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee '15 (ID# 1315215)	□IND IND IND IND IND IND IND IND		IN KIND-LIT		4,089.51	182	,256.98						
	□IND □COM □OTH □PTY □SCC												
	☐IND ☐COM ☐OTH ☐PTY ☐SCC												
	□IND □COM □OTH □PTY □SCC												
Attach additional information on appropriately label	led continuat	ion sheets.	SUBTO	OTAL \$	4,527.01			2 (19 μμ.) 1 (19 μμ.)					

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

Type or print in ink.
Amounts may be rounded
to whole dollars.

		SCHEDULE D
State	ment covers period	CALIFORNIA 460
from	01/18/2015	FORM TOO
through	02/14/2015	Page15 of22
		I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1319629 SVONKIN FOR COMMUNITY COLLEGE BOARD 2015 CUMULATIVE TO DATE PER ELECTION NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR DESCRIPTION DATE AMOUNT THIS CALENDAR YEAR TO DATE TYPE OF PAYMENT MEASURE NUMBER OR LETTER AND JURISDICTION. (IF REQUIRED) PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OR COMMITTEE 01/30/2015 IN-KIND-MAILER 292.00 826.00 Francesca Vega Community College Board Contribution Los Angeles District: 1 X Nonmonetary IN-KIND-MAILER Contribution Independent Expenditure X Support Oppose 01/30/2015 IN-KIND-MAILER 484.00 826.00 Francesca Vega Monetary Community College Board Contribution Los Angeles District: 1 Nonmonetary IN-KIND-MAILER Contribution Independent Expenditure X Support Oppose 01/30/2015 826.00 Francesca Vega IN-KIND-MAILER 50.00 Monetary Community College Board Contribution Los Angeles District: 1 Nonmonetary IN-KIND-MAILER Contribution Independent Expenditure X Support Oppose 826.00 SUBTOTAL \$

Schedule D Summary

1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)	. \$	61,326.00
2. Unitemized contributions and independent expenditures made this period of under \$100	. \$	0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	. \$	61,326.00

Schedule D (Continuation Sheet) SCHEDULE D (CONT.) Type or print in ink. Summary of Expenditures Amounts may be rounded Statement covers period CALIFORNIA to whole dollars. Supporting/Opposing Other FORM 01/18/2015 from. Candidates, Measures and Committees 02/14/2015 through_ Page 16 of 22 NAME OF FILER I.D. NUMBER SVONKIN FOR COMMUNITY COLLEGE BOARD 2015 1319629 CUMULATIVE TO DATE PER ELECTION NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR DESCRIPTION DATE AMOUNT THIS TYPE OF PAYMENT CALENDAR YEAR TO DATE MEASURE NUMBER OR LETTER AND JURISDICTION. (IF REQUIRED) PERIOD (IF REQUIRED) (JAN. 1 - DEC. 31) OR COMMITTEE 02/03/2015 Coalition For LA Comm College Excellence in 50,000.00 100,000.00 X Monetary Support of Francesca Vega, Mike Fong, Scott Svonkin Sydney Kamlager Trustee '15 Contribution □ Nonmonetary Contribution Independent Expenditure X Support Oppose 02/03/2015 LOS ANGELES COUNTY DEMOCRATIC PARTY-ISSUES 10,000.00 10,000.00 x Monetary AND ADVOCACY COMMITTEE Contribution Nonmonetary Contribution Independent Expenditure X Support Oppose 02/13/2015 Jhonny Pineda Contribution 500.00 500.00 X Monetary City Council Member Huntington Park Contribution □ Nonmonetary Contribution Independent Expenditure X Support Oppose ■ Monetary Contribution □ Nonmonetary Contribution ☐ Independent Expenditure ☐ Support □ Oppose SUBTOTAL \$ 60,500.00

Schedule E Payments Made

Type or print in ink.
Amounts may be rounded to whole dollars.

	SCHEDULE E
Statement covers period	CALIFORNIA 460
from01/18/2015	FORM TOU
through02/14/2015	Page17 of22
	I.D. NUMBER
	1310629

SEE INSTRUCTIONS ON REVERSE			through	Page1	of
NAME OF FILER				I.D. NUME	BER
SVONKIN FOR COMMUNITY COLLEGE BOARD 2015				1319629	
CODES: If one of the following codes accurately describes the payment, yo	ou may ent	ter the code. Otherw	ise, 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)* MBR member commended meetings and office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain nonmonetary)* OFC office expendence of the contribution (explain non	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)		RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries t.v. or cable airtime and production recurrence candidate travel, lodging, and transfer between committees voter registration	radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor voter registration	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESC	RIPTION OF PAYMENT		AMOUNT PAID
David L. Gould Company Merchant Account	OFC	Credit Card Mercha	unt fee & expenses		26.98
Kegeyan-Pappas Consulting	OFC	Reimbursement for	Exps.		139.88
Kegeyan-Pappas Consulting	CNS	Fundraising Service	ces		2,895.20
* Payments that are contributions or Independent expenditures must also be summ	narized on S	Schedule D.	su	BTOTAL\$	3,062.06
Schedule E Summary	11.1.1.2.2.11				
1. Itemized payments made this period. (Include all Schedule E subtotals.)				\$	71,758.44
Unitemized payments made this period of under \$100				\$	134.04
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.)					

Schedule E (Continuation Sheet) **Payments Made**

SEE INSTRUCTIONS ON REVERSE

SVONKIN FOR COMMUNITY COLLEGE BOARD 2015

NAME OF FILER

Type or print in ink. Amounts may be rounded to whole dollars.

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

SCHEDULE E (CONT.)

CALIFORNIA

Page ___18__ of __22__

FORM

I.D. NUMBER

1319629

Statement covers period

through 02/14/2015

from_

01/18/2015

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		d appearance ses ating survey resear very and me	es RFD SAL TEL TRC	radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the same voter registration information technology costs (internet, e-r	,
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DESCRIPTION	ON OF PAYMENT	AMOUNT PAID
David L. Gould Company		OFC			665.84
David L. Gould Company Merchant Account		OFC	Credit Card Merchant F	ee & Expenses	166.36
David L. Gould Company Merchant Account		OFC	Credit Card Merchant F	ee & Expenses	141.46
AMAC		LIT	Polyboards		4,005.75
CA Law Enforcement Voter Guide (ID# 598005)		LIT	Slate Mailer		50.00
* Payments that are contributions or independent expenditures mus	st also be summarized on	Schedule D.		SUBTOTAL \$	5,029.41
FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)					

Schedule E (Continuation Sheet) Payments Made

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Type or print in ink. Amounts may be rounded to whole dollars.

State	ement covers period	CALIFORNIA 460
	01/18/2015	FORM TOU

SCHEDULE E (CONT.)

from through 02/14/2015 Page 19 of 22 I.D. NUMBER 1319629

SVONKIN FOR COMMUNITY COLLEGE BOARD 2015

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 CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses CVC civic donations PET petition circulating FIL candidate filing/ballot fees PHO phone banks FND fundraising events POL polling and survey research

ND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services LEG legal defense

professional services (legal, accounting) campaign literature and mailings PRT print ads

RAD radio airtime and production costs

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)

Err Sampaign interactive and mainings	FIXT print aus		VVED Illionnation technology costs (i	memer, e-many
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
CA Law Enforcement Voter Guide (ID# 598005)		LIT	Slate Mailer	50.00
Independent Voters Leage (ID# 588034)		LIT	Slate Mailer	292.00
Independent Voters Leage (ID# 588034)		LIT	Slate Mailer	292.00
John F. Kennedy Alliance (ID# 590011)		LIT	Slate Mailer	484.00
John F. Kennedy Alliance (ID# 590011)		LIT	Slate Mailer	484.00
* Payments that are contributions or independent expenditures my	est also be summerized on	Sahadula D	SIIR	TOTAL \$ 1.602.00

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

SUBTOTAL \$

1,602.00

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE E	

CALIFORNIA 460

Statement covers period

Payments Made	to whole dollars.		from01/18/2015	FORM TOO	
SEE INSTRUCTIONS ON REVERSE			through02/14/2015	Page 20 of 22	
NAME OF FILER				I.D. NUMBER	
SVONKIN FOR COMMUNITY COLLEGE BOARD 2015				1319629	
CODES: If one of the following codes accurately describes the pay	yment, you ma	y enter the code. Oth	erwise, describe the payment.		
CMP campaign paraphernalia/misc. MBR me CNS campaign consultants MTG me CTB contribution (explain nonmonetary)* OFC off CVC civic donations PET pe FIL candidate filing/ballot fees PHO ph FND fundraising events POL po IND independent expenditure supporting/opposing others (explain)* POS po LEG legal defense PRO pro-	R member communications G meetings and appearances C office expenses petition circulating phone banks L polling and survey research postage, delivery and messenger services D professional services (legal, accounting)		RAD radio airtime and production returned contributions SAL campaign workers' salaries t.v. or cable airtime and procandidate travel, lodging, and TRS staff/spouse travel, lodging, TSF transfer between committee VOT voter registration	o radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponse voter registration	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DE	SCRIPTION OF PAYMENT	AMOUNT PAID	
Basil Kimbrew	LIT	Absentee Program	, Social Media	1,000.00	
David L. Gould Company	PRO		,	250.00	
Clear Channel Outdoor, Inc.	LIT	Bulletin Product	ion	314.97	
Coalition For LA Comm College Excellence in Support of Francesca Mike Fong, Scott Svonkin Sydney Kamlager Trustee '15 (ID# 13152:	Vega, CTB			50,000.00	
LOS ANGELES COUNTY DEMOCRATIC PARTY-ISSUES AND ADVOCACY COMMITTED 744554)	E (ID# CTB			10,000.00	
* Payments that are contributions or independent expenditures must also be summ	narized on Schedu	le D.	su	JBTOTAL \$ 61,564.97	

Schedule E (Continuation Sheet)

Type or print in ink. Amounts may be rounded

	SCHEDULE E (CONT.
Statement covers period	CALIFORNIA 160
rom01/18/2015	FORM 400
through 02/14/2015	Page21 of22
	I D NUMBER

to whole dollars. Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER SVONKIN FOR COMMUNITY COLLEGE BOARD 2015 1319629 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 candidate travel, lodging, and meals PHO phone banks FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals IND independent expenditure supporting/opposing others (explain)* 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 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) AMOUNT PAID CODE OR DESCRIPTION OF PAYMENT Jhonny Pineda For Huntington Park City Council 2015 (ID# 1368145) CTB Contribution 500.00

SUBTOTAL \$

500.00

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

SCHEDULE H Statement covers period Type or print in ink. Schedule H **CALIFORNIA** Amounts may be rounded Loans Made to Others* **FORM** 01/18/2015 to whole dollars. 02/14/2015 of ___22 Page __22 through SEE INSTRUCTIONS ON REVERSE I.D. NUMBER NAME OF FILER 1319629 SVONKIN FOR COMMUNITY COLLEGE BOARD 2015 (g) (a) OUTSTANDING (c) OUTSTANDING IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE AMOUNT INTEREST ORIGINAL CUMULATIVE REPAYMENT OR OCCUPATION AND EMPLOYER BALANCE AT BALANCE OF RECIPIENT OANED THIS RECEIVED AMOUNT OF LOANS BEGINNING THIS PERIOD **FORGIVENESS** (IF SELF-EMPLOYED, ENTER CLOSE OF THIS (IF COMMITTEE, ALSO ENTER I.D. NUMBER) TO DATE PERIOD LOAN NAME OF BUSINESS) THIS PERIOD* PERIOD EBENSTEIN FOR WATER BOARD 2014 (ID# CALENDAR YEAR ☐ PAID 1368130) \$ 10,000.00 0.00 10,000.00 RATE LOAN FORGIVEN PER ELECTION** s __10,000.00 10/21/2014 DATE DUE DATE INCURRED CALENDAR YEAR ☐ PAID RATE ☐ FORGIVEN PER ELECTION** DATE INCURRED DATE DUE *Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must 0.00 \$ 10,000.00 \$ 0.00 SUBTOTALS also be reported on Schedule E. (Enter (e) on Schedule I, Line 3) Schedule H Summary 0.00 1. Loans made this period\$ **If Required (Total Column (b) plus unitemized loans of less than \$100.) 2. Payments received on loans\$ (Total Column (c) plus unitemized payments of less than \$100.) 3. Net change this period. (Subtract Line 2 from Line 1.) NET \$\frac{0.00}{\text{(May be a negative number)}}\$

> FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

(Enter the net here and on the Summary Page, Column A, Line 7.)