

# Recipient Committee Campaign Statement Cover Page

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 2022 APR 15 AM 11:20  
**CAMPAIGN FINANCE**

**CALIFORNIA FORM 460**

Page 1 of 6

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609255

**Statement covers period**  
 from 10/18/2020  
 through 12/31/2020

**Date of election if applicable:**  
 (Month, Day, Year)  
11/3/2020

SEE INSTRUCTIONS ON REVERSE

### 1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.

- |   |   |
|---|---|
| <input type="checkbox"/> Officeholder, Candidate Controlled Committee | <input type="checkbox"/> Primarily Formed Ballot Measure Committee  |
| <input type="radio"/> State Candidate Election Committee              | <input type="radio"/> Controlled  |
| <input type="radio"/> Recall<br><i>(Also Complete Part 5)</i>         | <input type="radio"/> Sponsored<br><i>(Also Complete Part 6)</i>  |
| <input checked="" type="checkbox"/> General Purpose Committee         | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee<br><i>(Also Complete Part 7)</i> |
| <input type="radio"/> Sponsored                                       |   |
| <input type="radio"/> Small Contributor Committee                     |   |
| <input type="radio"/> Political Party/Central Committee               |   |

### 2. Type of Statement:

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Preelection Statement                                   | <input type="checkbox"/> Quarterly Statement     |
| <input type="checkbox"/> Semi-annual Statement  | <input type="checkbox"/> Special Odd-Year Report |
| <input type="checkbox"/> Termination Statement<br><i>(Also file a Form 410 Termination)</i> |  |
| <input checked="" type="checkbox"/> Amendment (Explain below)                               |  |
- Missing Sch. A, Sch. D two expensive separated and renumbered  
 pages from 1 to 5 to 1 to 6. Column B correct totals.

### 3. Committee Information

I.D. NUMBER  
0001301474

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Rio Hondo College Faculty Association - CIF

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Whittier</u>	<u>CA</u>	<u>90601</u>	<u>562 463-7358</u>

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS

### Treasurer(s)

NAME OF TREASURER

Jeannie Liu

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Whittier</u>	<u>CA</u>	<u>90601</u>	<u>562 463-7358</u>

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS

### 4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct

attached schedules is true and complete. I

Executed on 3/24/2022  
Date

By \_\_\_\_\_

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

# Campaign Disclosure Statement Summary Page

Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>10/18/2020</u>		CALIFORNIA FORM <b>460</b>
through <u>12/31/2020</u>		
Page <u>2</u> of <u>6</u>		I.D. NUMBER <u>0001301474</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Rio Hondo College Faculty Association - CIF

## Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions..... <i>Schedule A, Line 3</i>	\$ <u>2,000.00</u>	\$ <u>13,500.00</u>
2. Loans Received..... <i>Schedule B, Line 3</i>	\$ <u>-0-</u>	\$ <u>-0-</u>
3. SUBTOTAL CASH CONTRIBUTIONS..... <i>Add Lines 1 + 2</i>	\$ <u>2,000.00</u>	\$ <u>13,500.00</u>
4. Nonmonetary Contributions..... <i>Schedule C, Line 3</i>	\$ <u>-0-</u>	\$ <u>150.00</u>
5. TOTAL CONTRIBUTIONS RECEIVED..... <i>Add Lines 3 + 4</i>	\$ <u>2,000.00</u>	\$ <u>13,650.00</u>

## Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

## Expenditures Made

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made..... <i>Schedule E, Line 4</i>	\$ <u>2,041.07</u>	\$ <u>20,093.00</u>
7. Loans Made..... <i>Schedule H, Line 3</i>	\$ <u>-0-</u>	\$ <u>-0-</u>
8. SUBTOTAL CASH PAYMENTS..... <i>Add Lines 6 + 7</i>	\$ <u>2,041.07</u>	\$ <u>20,093.00</u>
9. Accrued Expenses (Unpaid Bills)..... <i>Schedule F, Line 3</i>	\$ <u>-0-</u>	\$ <u>-0-</u>
10. Nonmonetary Adjustment..... <i>Schedule C, Line 3</i>	\$ <u>-0-</u>	\$ <u>150.00</u>
11. TOTAL EXPENDITURES MADE..... <i>Add Lines 8 + 9 + 10</i>	\$ <u>2,041.07</u>	\$ <u>20,243.00</u>

## Expenditure Limit Summary for State Candidates

**22. Cumulative Expenditures Made\***  
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____

## Current Cash Statement

12. Beginning Cash Balance..... <i>Previous Summary Page, Line 16</i>	\$ <u>36,350.50</u>
13. Cash Receipts..... <i>Column A, Line 3 above</i>	\$ <u>2,000.00</u>
14. Miscellaneous Increases to Cash..... <i>Schedule I, Line 4</i>	\$ <u>9.29</u>
15. Cash Payments..... <i>Column A, Line 8 above</i>	\$ <u>2,041.07</u>
16. ENDING CASH BALANCE..... <i>Add Lines 12 + 13 + 14, then subtract Line 15</i>	\$ <u>36,318.72</u>

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED..... <i>Schedule B, Part 2</i>	\$ <u>-0-</u>
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## Cash Equivalents and Outstanding Debts

18. Cash Equivalents..... <i>See instructions on reverse</i>	\$ <u>-0-</u>
19. Outstanding Debts..... <i>Add Line 2 + Line 9 in Column B above</i>	\$ <u>-0-</u>

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

\*Amounts in this section may be different from amounts reported in Column B.

**Schedule A  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A

Statement covers period from <u>10/18/2020</u> through <u>12/31/2020</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>3</u> of <u>6</u>
I.D. NUMBER <b>0001301474</b>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Rio Hondo College Faculty Association - CIF

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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/18/2020	California Teacher Association Burlingame, CA 94010 F.P.P.C. ID#741941	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,000.00	2,000.00	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				<b>2,000.00</b>		

**Schedule A Summary**

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) .....	\$ <u>2,000.00</u>
2. Amount received this period – unitemized monetary contributions of less than \$100 .....	\$ <u>-0-</u>
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.).....	<b>TOTAL \$ <u>2,000.00</u></b>

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

Amounts may be rounded  
to whole dollars.

SCHEDULE D

Statement covers period from <u>10/18/2020</u> through <u>12/31/2020</u>	<b>CALIFORNIA FORM</b> <b>460</b>
Page <u>4</u> of <u>6</u>	I.D. NUMBER <b>0001301474</b>

SEE INSTRUCTIONS ON REVERSE  
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Rio Hondo College Faculty Association - CIF

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/20/2020	Ana Victoria Santana for Rio Hondo College Board of Trustees, Area 2 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Postage	25.57	18,007.50	
10/26/2020	Ana Victoria Santana for Rio Hondo College Board of Trustees, Area 2 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Campaign Contribution	2,000.00	20,007.50	
10/28/2020	Ana Victoria Santana for Rio Hondo College Board of Trustees, Area 2 <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Postage	15.50	20,023.00	
<b>SUBTOTAL \$</b>				<b>2,041.07</b>		

**Schedule D Summary**

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)..... \$ 2,041.07
- Unitemized contributions and independent expenditures made this period of under \$100..... \$ -0-
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)..... **TOTAL..** \$ 2,041.07

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM <b>460</b>
from	10/18/2020	
through	12/31/2020	Page <u>5</u> of <u>6</u>
NAME OF FILER		I.D. NUMBER
Rio Hondo College Faculty Association - CIF		0001301474

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Rio Hondo College Faculty Association - CIF

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

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Ana Victoria Santana Pico Rivera, CA 90660 FPPC# 1338120		Campaign Contribution For Rio Hondo College Board Trustees Member Area 2	2,000.00

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

**SUBTOTAL \$ 2,000.00**

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$	2,000.00
2. Unitemized payments made this period of under \$100.....	\$	41.07
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$	-0-
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	<b>TOTAL \$</b>	<b>2,041.07</b>

**Schedule I  
Miscellaneous Increases to Cash**

Amounts may be rounded  
to whole dollars.

SCHEDULE I

Statement covers period  
from 10/18/2020  
through 12/31/2020

**CALIFORNIA  
FORM 460**

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SEE INSTRUCTIONS ON REVERSE  
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Rio Hondo College Faculty Association - CIF

I.D. NUMBER  
0001301474

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL \$**

**Schedule I Summary**

1. Itemized increases to cash this period. ....	\$	<u>-0-</u>
2. Unitemized increases to cash of under \$100 this period. ....	\$	<u>9.29</u>
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) .....	\$	<u>-0-</u>
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) .....	<b>TOTAL \$</b>	<u>9.29</u>