

**Recipient Committee  
Campaign Statement  
Cover Page**

SEE INSTRUCTIONS ON REVERSE

1/29/22 (1)

COVER PAGE

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CAMPAIGN FINANCE

CALIFORNIA FORM 460  
Page 1 of 7  
For Official Use Only

Statement covers period  
from 1/1/2021  
through 12/31/2021

Date of election if applicable:  
(Month, Day, Year)  
11/08/2022

- 1. Type of Recipient Committee:** All Committees – Complete Parts 1, 2, 3, and 4.
- Officeholder, Candidate Controlled Committee
    - State Candidate Election Committee
    - Recall  
*(Also Complete Part 5)*
  - General Purpose Committee
    - Sponsored
    - Small Contributor Committee
    - Political Party/Central Committee
  - Primarily Formed Ballot Measure Committee
    - Controlled
    - Sponsored  
*(Also Complete Part 6)*
  - Primarily Formed Candidate/Officeholder Committee  
*(Also Complete Part 7)*

- 2. Type of Statement:**
- Preelection Statement
  - Semi-annual Statement
  - Termination Statement  
*(Also file a Form 410 Termination Amendment (Explain below))*
  - Quarterly Statement
  - Special Odd-Year Report

**3. Committee Information**

I.D. NUMBER  
1439969

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
LaVoice for Beverly Hills Unified School District Board 2022

STREET ADDRESS (NO P.O. BOX)

| CITY        | STATE | ZIP CODE | AREA CODE/PHONE |
|-------------|-------|----------|-----------------|
| Los Angeles | CA    | 90025    | 619-698-4333    |

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

| CITY    | STATE | ZIP CODE | AREA CODE/PHONE |
|---------|-------|----------|-----------------|
| La Mesa | CA    | 91942    | 619-698-4333    |

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER  
William Baber

MAILING ADDRESS

| CITY    | STATE | ZIP CODE | AREA CODE/PHONE |
|---------|-------|----------|-----------------|
| La Mesa | CA    | 91942    | 619-698-4333    |

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|------|-------|----------|-----------------|
|------|-------|----------|-----------------|

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 the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 01-28-2022 Date  
By \_\_\_\_\_ Signatu

Executed on 01-28-2022 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

**Recipient Committee  
Campaign Statement  
Cover Page - Part 2**

Type or print in ink

COVER PAGE

CALIFORNIA  
2001/02  
FORM **460**

Page 2 of 7

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE

Janessa Lavoice

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

/ Board Member, Beverly Hills Unified School District

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Beverly Hills CA 90211

**Related Committees Not Included in this Statement:** *List any committees not included in this statement that are controlled buy you or are primarily formed to receive contributions or make expenditures on behalf of*

|                   |   |
|-------------------|---|
| COMMITTEE NAME    | I.D. NUMBER   |
| NAME OF TREASURER | CONTROLLED COMMITTEE?<br><input type="checkbox"/> YES <input type="checkbox"/> NO |
| COMMITTEE ADDRESS | STREET ADDRESS (NO P.O. BOX)  |
| CITY              | STATE ZIP CODE AREA CODE/PHONE  |

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER

JURISDICTION

SUPPORT  
 OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent,

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

**7. Primarily Formed Committee** *List names of officeholder(s) or candidate(s) for which this committee is primarily formed*

|                         |                       |   |
|-------------------------|-----------------------|---|
| NAME OF OFFICEHOLDER OR | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |
| NAME OF OFFICEHOLDER OR | OFFICE SOUGHT OR HELD | <input type="checkbox"/> SUPPORT<br><input type="checkbox"/> OPPOSE |

Attach continuation sheets if necessary

**Campaign Disclosure Statement  
Summary Page**

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

COVER PAGE

|  |                                |
|--|--------------------------------|
| Statement covers period<br>from <u>01/01/2021</u><br>through <u>12/31/2021</u> | <b>CALIFORNIA<br/>FORM 460</b> |
|  | Page <u>3</u> of <u>7</u>      |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER LaVoice for Beverly Hill Unified School District

I.D. NUMBER  
1439969

**Contributions Received**

|   | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|---|--|--|
| 1. Monetary Contributions ..... Schedule A,       | \$ <u>770.00</u>                                 | \$ <u>770.00</u>                           |
| 2. Loans Received ..... Schedule B,               | <u>0.00</u>                                      | <u>0.00</u>                                |
| 3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Line 1   | \$ <u>770.00</u>                                 | \$ <u>770.00</u>                           |
| 4. Nonmonetary Contributions ..... Schedule C,    | <u>0.00</u>                                      | <u>0.00</u>                                |
| 5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 | \$ <u>770.00</u>                                 | \$ <u>770.00</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<br>TOTAL THIS PERIOD<br>(FROM ATTACHED) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|--|--|--|
| 6. Payments Made ..... Schedule E,                   | \$ <u>438.75</u>                                 | \$ <u>438.75</u>                           |
| 7. Loans Made ..... Schedule                         | <u>0.00</u>                                      | <u>0.00</u>                                |
| 8. SUBTOTAL CASH PAYMENTS ..... Add Line 6           | \$ <u>438.75</u>                                 | \$ <u>438.75</u>                           |
| 9. Accrued Expenses (Unpaid Bills) ..... Schedule F, | <u>1,150.00</u>                                  | <u>1,150.00</u>                            |
| 10. Nonmonetary Adjustment ..... Schedule C,         | <u>0.00</u>                                      | <u>0.00</u>                                |
| 11. TOTAL EXPENDITURES MADE ..... Add Lines 8 + 9 +  | \$ <u>1,588.75</u>                               | \$ <u>1,588.75</u>                         |

**Expenditure Limit Summary for State  
Candidates**

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

| Date of Election<br>(mm/dd/yy) | Total to Date |
|--------------------------------|---------------|
| _____                          | \$ _____      |
| _____                          | \$ _____      |
| _____                          | \$ _____      |
| _____                          | \$ _____      |
| _____                          | \$ _____      |
| _____                          | \$ _____      |

**Current Cash Statement**

|   |                  |
|---|------------------|
| 12. Beginning Cash Balance ..... Previous Summary Page, Line  | \$ <u>0.00</u>   |
| 13. Cash Receipts ..... Column A, Line 3  | <u>770.00</u>    |
| 14. Miscellaneous Increases to Cash ..... Schedule I,   | <u>0.00</u>      |
| 15. Cash Payments ..... Column A, Line 8  | <u>438.75</u>    |
| 16. <b>ENDING CASH BALANCE</b> ..... Add Lines 12 + 13 + 14, then subtract Line<br><i>If this is a termination statement, Line 16 must be zer</i> | \$ <u>331.25</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 amounts

17. LOAN GUARANTEES RECEIVED ..... Schedule B, \$ 0.00

**Cash Equivalents and Outstanding Debts**

|   |                    |
|---|--------------------|
| 18. Cash Equivalents ..... See instructions on              | \$ <u>0.00</u>     |
| 19. Outstanding Debts ..... Add Line 2 + Line 9 in Column B | \$ <u>1,150.00</u> |

\*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B

**Schedule A  
Monetary Contributions Received**

Type or print in ink.  
Amounts may be  
rounded

SCHEDULE A

|  |                                |
|--|--------------------------------|
| Statement covers period<br>from <u>01/01/2021</u><br>through <u>12/31/2021</u> | <b>CALIFORNIA<br/>FORM 460</b> |
|  | Page <u>4</u> of <u>7</u>      |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER **LaVoice for Beverly Hill Unified School District**

ID NUMBER  
**1439969**

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR<br>(JAN. 1 - DEC. 31) | PER ELECTION TO DATE<br>(IF REQUIRED) |
|---------------|---|---|---|-----------------------------|--|---------------------------------------|
| 12/31/2021    | LLC (David Hakimfar)<br>West Hollywood, CA 90069  | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | \$250.00                    | \$250.00   | \$250.00 G-22                         |
| 10/04/2021    | Janessa Lavoice<br>Beverly Hills, CA 90211  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Behavioral Tutor/Nanny<br>Educated Nannies                                  | \$100.00                    | \$135.00   | \$135.00 G-22                         |
| 10/31/2021    | Janessa Lavoice<br>Beverly Hills, CA 90211  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Behavioral Tutor/Nanny<br>Educated Nannies                                  | \$35.00                     | \$135.00   | \$135.00 G-22                         |
| 11/20/2021    | Darren Uyematsu<br>Torrance, CA 90501   | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Manager<br>Big 5  | \$100.00                    | \$100.00   | \$100.00 G-22                         |
| 10/22/2021    | Kevin Wright<br>Post Falls, ID 83854  | <input checked="" type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC | Consultant<br>GPG   | \$100.00                    | \$100.00   | \$100.00 G-22                         |

**Schedule A Summary**

|   |                               |
|---|-------------------------------|
| 1. Amount received this period - contributions of \$100 or more.<br>(Include all Schedule A subtotals.) | \$ <u>585.00</u>              |
| .....   | \$ <u>185.00</u>              |
| 2. Amount received this period - unitemized contributions of less than \$100 .....                      |                               |
| 3. Total monetary contributions received this period.   | <b>TOTAL</b> \$ <u>770.00</u> |

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party

**Schedule E  
Payments Made**

Type or print in ink.  
Amounts may be  
rounded

SCHEDULE E

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers perio  |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from  | 01/01/2021 |                                |
| through   | 12/31/2021 | Page <u>5</u> of <u>7</u>      |
| NAME OF FILER<br>LaVoice for Beverly Hill Unified School District |            | I.D. NUMBER<br>1439969         |

SEE INSTRUCTIONS ON REVERSE

**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 expense                            | SAL campaigns 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<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| William Baber :<br><br>La Mesa, CA 91942                            | WEB  |    | See Schedule G         | \$360.50    |

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

**SUBTOTAL \$ 360.50**

**Schedule E Summary**

|  |                        |
|--|------------------------|
| 1. Payments made this period of \$100 or more. (Include all Schedule E subtotals)                                  | \$360.50               |
| 2. Unitemized payments made this period of under \$100   | \$78.25                |
| 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.) | <b>TOTAL \$ 438.75</b> |

**Schedule F  
Accrued Expenses (Unpaid Bills)**

Type or print in ink.  
Amounts may be rounded

SCHEDULE F

|   |            |                                |
|---|------------|--------------------------------|
| Statement covers perio  |            | <b>CALIFORNIA<br/>FORM 460</b> |
| from  | 01/01/2021 |                                |
| through   | 12/31/2021 | Page <u>6</u> of <u>7</u>      |
| NAME OF FILER<br>LaVoice for Beverly Hill Unified School District |            | I.D. NUMBER<br>1439969         |

SEE INSTRUCTIONS ON REVERSE

**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 campaigns 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  |

| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR DESCRIPTION OF PAYMENT | (a)<br>OUTSTANDING<br>BALANCE BEGINNING<br>OF THIS PERIOD | (b)<br>AMOUNT INCURRED<br>THIS PERIOD | (c)<br>AMOUNT PAID<br>THIS PERIOD<br>(ALSO REPORT ON E) | (d)<br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD |
|--|--------------------------------|---|---------------------------------------|---|--|
| Ksenia Zaytseva<br><br>Los Angeles, CA 90038                           | WEB                            | \$0.00  | \$1,150.00                            | \$0.00  | \$1,150.00   |

\* Payments that are contributions or independent expenditures must also be

**SUBTOTALS**      \$0.00      \$1,150.00      \$0.00      \$1,150.00

**Schedule F Summary**

|   |                           |                   |
|---|---------------------------|-------------------|
| 1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)                     | <b>INCURRED TOTALS \$</b> | <u>\$1,150.00</u> |
| 2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) | <b>PAID TOTALS \$</b>     | <u>\$0.00</u>     |
| 3. Net change this period. ( <b>Subtract</b> Line 2 from Line 1. Enter the difference here and  |                           | <u>\$1,150.00</u> |

May be a negative number

FPPC Form 460 (Jan/2016)

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

www.fppc.ca.gov

**Schedule G**

**Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)**

Type or print in ink.  
Amounts may be rounded

SCHEDULE G

Statement covers perio  
from 01/01/2021  
through 12/31/2021

**CALIFORNIA FORM 460**  
Page 7 of 7

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
LaVoice for Beverly Hill Unified School District

ID NUMBER  
1439969

NAME OF AGENT OR INDEPENDENT CONTRACTOR  
William Baber

**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 campaigns 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)           |

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

| NAME AND ADDRESS OF PAYEE OR CREDITOR<br><small>(IF COMMITTEE, ALSO ENTER LG, NUMBER)</small> | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| Ksenia Zaytseva<br><br>Los Angeles, CA 90038  | WEB     |                        | \$350.00    |

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\*** \$350.00

\*Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contract as reported on Schedule E.

FPPC Form 460 (Jan/2016)  
FPPC Advice: advice@fppc.ca.gov 866/275-3772  
www.fppc.ca.gov