Recipient Committee Campaign Statement Cover Page		OF TH	THIS DATESINGHE OF HE CITY CLERK OF THE HINO	FORM TOO
	Statement covers period from 7/1/2022	Date of election if applicable: (Month, Day, Year)	SEP 2 9 2022	Page 1 of 7 For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through <u>9/24/22</u>	11/8/2022 City Ci	erk,	
1. Type of Recipient Committee: All Committees - Co	mplete 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)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination Statement) Amendment (Explain bek	Spemination)	rterly Statement cial Odd-Year Report
3 L'OMMITTEE INTORMATION	D. NUMBER 453133	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)	. 100100	NAME OF TREASURER		
The Committee to Elect Sylvia (Cervantez) Orozco,	Chino City Council,	Sylvia Orozco		
District 2, 2022		MAILING ADDRESS		
STREET ADDRESS (NO P.O. BOX)		CITY	STATE ZIP C	ODE AREA CODE/PHONE
		Chino	CA 917	710
CITY STATE ZIP CO	DDE AREA CODE/PHONE	NAME OF ASSISTANT TREASURE	R, IF ANY	
Chino CA 9171 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO		MAILING ADDRESS		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
CITY STATE ZIP CO	DDE AREA CODE/PHONE	CITY	STATE ZIP C	ODE AREA CODE/PHONE
OPTIONAL: FAX/E-MAILADDRESS		OPTIONAL: FAX / E-MAIL ADDRES	ss	·
4. Verification				
I have used all reasonable diligence in preparing and review certify under penalty of perjury under the laws of the State of	•		rein and in the attached so	chedules is true and complete. !
Executed on 9/27/2022	-			
	Ву		isurer	
Executed on 9/27/2022	BySignature of Contr		ent or Responsible Officer of Spor	esor
Executed on	Ву			
Date	·	Signature of Controlling Officeholder, Candidate, Sta	ate Measure Proponent	
Executed onDate	By	Signature of Controlling Officeholder, Candidate, Sta	ate Measure Proponent	

Recipient Committee Campaign Statement Cover Page --- Part 2

COVE	R PAGE - PART 2
CALIFORM FORM	NIA 460
Page 2	of_7

Officeholder or Candidate Controlled Cor	mmittee			6.	Primarily Formed Ballo	t Measure (Committee		
NAME OF OFFICEHOLDER OR CANDIDATE					NAME OF BALLOT MEASURE			- u-	
Sylvia Orozco									
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND D	DISTRICT NUMBE	R IF APPLIC	CABLE)		BALLOT NO. OR LETTER	JURISDICTIO	N		SUPPORT
Chino City Council, District 2								-] OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET	r) CITY Chino	STATE CA	21P 91710		Identify the controlling office	holder, candid	late, or state	measure prop	onent, if any.
					NAME OF OFFICEHOLDER, CA	NDIDATE, OR P	ROPONENT		
Related Committees Not Included in this not included in this statement that are controlled by you contributions or make expenditures on behalf of your contributions.	ou or are primaril				OFFICE SOUGHT OR HELD			DISTRICT NO.	IF ANY
COMMITTEE NAME	I,D. NŲMB	ER						<u> </u>	
NAME OF TREASURER	CONTROL	LED COMM	ITTEE?	7.	Primarily Formed Cand officeholder(s) or candidate(s)	idate/Office	eholder Co	mmittee Li	st names of
	☐ YES	□NG)		Unicertorder(s) or carrordate(s)	TOF WINCH BITS	committee is	primarny tornic	· (L
COMMITTEE ADDRESS STREET ADDRESS (NO)	P.O. BOX)		·		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT OPPOSE
CITY STATE 2	ZIP CODE	AREA CO	DE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOL	JGHT OR HELD	
COMMITTEE NAME	I.D. NUMBI								SUPPORT OPPOSE
COMMITTEE NAME	I.D. NOMB	EK			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROL	LED COMM	ITTEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO	P.O. BOX)	□ мо	<u> </u>						☐ OPPOSE
**************************************							•		

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

CALIFORNIA ACO

Statement covers period

		from	7/1/2022	FORM 400		
SEE INSTRUCTIONS ON REVERSE	throu	gh <u>9/24/2022</u>	Page _3 of _7			
NAME OF FILER The Committee to Elect Sylvia (Cervantez) Orozco, Chino City Council,	District 2 2022			I.D. NUMBER 1453133		
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Running in Both th	nmary for Candidates ne State Primary and		
1. Monetary Contributions Schedule A, Line 3 2. Loans Received Schedule B, Line 3 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 4. Nonmonetary Contributions Schedule C, Line 3 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$\frac{2,250.00}{2,045.00}\$ \$\frac{4,295.00}{0}\$ \$\$	\$\frac{2,250.00}{2,045.00}\$ \$\frac{4,295.00}{0}\$ \$\frac{4,295.00}{0}\$	20. Contributions Received \$ 21. Expenditures	\$\$		
Expenditures Made 6. Payments Made	\$\ \ \frac{1,194.00}{0} \\ \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\$\ \ \begin{array}{c} 1,194.00 \\ 0 \\ \ 1,194.00 \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Summary for State ve Expenditures Made* voluntary Expenditure Limit) Total to Date \$		
Current Cash Statement 12. Beginning Cash Balance	\$\ \ \begin{align*} 0.00 \\ 4,295.00 \\ 0 \\ 1,194.00 \\ \$\ \end{align*} \] \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	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 fron previous period amounts. this is the first report bein filed for this calendar years over the amounts.	reported in Column B. reported in Column B. reported in Column B.	\$ may be different from amounts		
Cash Equivalents and Outstanding Debts 18. Cash Equivalents	\$ <u>0</u>	only carry over the amour from Lines 2, 7, and 9 (if any).	nts			

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

Schedule Monetary	e A y Contributions Received		nts may be rounded o whole dollars.	Statement cov	vers period	CALIFORNIA 460		
	TIONS ON REVERSE		· 	through 9/24/202	22	Page	e 4 of 7	
The Commit	R ittee to Elect Sylvia (Cervantez) Orozco, Chino City Cour	ıncil, District 2, 20	022		!	145313		
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	YEAR	PER ELECTION TO DATE (IF REQUIRED)	
8/25/2022 (Form 497 filed)	Threshold Technologies, Inc. Chino, CA 91710	□IND □COM ☑OTH □PTY □SCC		1,250.00	1,250.00			
9/13/2022	Peter Rogers Chino Hills, CA 91709	☑IND □COM □OTH □PTY □SCC	County of San Bernardino District Director	500.00	500.00			
9/13/2022	Dr. James Lally Upland, CA 91784	☑IND □COM □OTH □PTY □SCC	Medical Physician Lally Medical Group	500.00	500.00			
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						
			SUBTOTAL	\$ 2,250.00			. j pleator	
Amount re (Include al	A Summary eceived this period – itemized monetary contribution all Schedule A subtotals.) eceived this period – unitemized monetary contribut			,250.00	IND - COM OTH	(other	dual ipient Committee er than PTY or SCC) er (e.g., business entity)	

3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.).....TOTAL \$ $\frac{2,250.00}{1}$

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www.fppc.ca.gov

SCC - Small Contributor Committee

	Δm	ounts may be ro	unded				SCHEE	OULE B - PART	
Schedule B – Part 1 Loans Received	~···	to whole dollar			Statement cov from 7/1/2022	ers period	california 460		
SEE INSTRUCTIONS ON REVERSE					through 9/24/20	22	Page 5	of	
NAME OF FILER The Committee to Elect Sylvia (Cervantez) Or	rozco, Chino City Council, Di	istrict 2, 2022					1.D. NUMBER 1453133		
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)	(8) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(B) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAIL OR FORGIVEN THIS PERIOD	N BALANCE AT	(e) INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	(9) CUMULATIVE CONTRIBUTION TO DATE	
Ruben Orozco	Retired			PAID \$_0	\$_1045.00	0 %	s_1,045.00	\$ 1,045.00	
Chino CA 91710		\$	s_1,045.00	□ FORGIVEN \$_0	n/a DATE DUE	\$ <u>0</u>	8/17/2022 DATE INCURRED	\$ _1045.00	
Ruben Orozco	Retired			PAID \$ 0 FORGIVEN	\$ 2,045.00	0 %	s_1,000.00	\$ 2,045.00	
Chino CA 91710 ☐ IND ☐ COM ☐ CTH ☐ PTY ☐ SCC		1,045.00 s	s	\$_0	n/a DATE DUE	s_0	8/31/2022 DATE INCURRED	\$_2,045.00	
				□ PAID \$ □ FORGIVEN	s	RATE	s	\$PER ELECTION	
IND COM OTH PTY SCC		\$	s	\$	DATE DUE	s	DATE INCURRED	\$	
		SUBTOTALS \$	\$ 2,045.00	\$ 0	\$ 2,045.00	\$ 0			
Schedule B Summary 1. Loans received this period				\$\$	045.00	(Enter (e) on Sche	dule E, Line 3}		
(Total Column (b) plus unitemized loan 2. Loans paid or forgiven this period (Total Column (c) plus loans under \$10			•••••	\$ <u>0</u>		์ แ	Contributor Codes ND – Individual COM – Recipient C		

(May be a negative number)

2,045.00

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

SCC - Small Contributor Committee

(other than PTY or SCC)

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

Enter the net here and on the Summary Page, Column A, Line 2.

(Include loans paid by a third party that are also itemized on Schedule A.)

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Schedule E	Amounts may be rounded to whole dollars.			Statement covers period	CALIF	SCHEDULE FORNIA 460
Payments Made				from <u>7/1/2022</u>	_ FC	ORM TOU
SEE INSTRUCTIONS ON REVERSE NAME OF FILER The Committee to Elect Sylvia (Cervantez) Orozco, Chino City C	Council District 2 2	022		through <u>9/24/2022</u>	Page	
CODES: If one of the following codes accurately describe			nter the code. Oth	nerwise, describe the paymen		
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings and OFC office expens PET petition circu PHO phone banks POL polling and s POS postage, deli PRO professional PRT print ads	munications d appearance ses lating urvey resear very and me	es ch ssenger services	RAD radio airtime and producting returned contributions campaign workers' salaries t.v. or cable airtime and producting transfer between committed voter registration web information technology co	on costs s roduction costs and meals g, and meals ees of the san	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR D	ESCRIPTION OF PAYMENT		AMOUNT PAID
City of Chino 13220 Central Ave., Chino, CA 91710		FIL	Filing fee for car	ndidate statement		1,045.00
* Payments that are contributions or independent expenditures must also be	e summarized on Sche	dule D.		(SUBTOTAL	\$ 1,045.00
Schedule E Summary						
Itemized payments made this period. (Include all Schedule)	e E subtotals.)				\$_	1,045.00
Unitemized payments made this period of under \$100	***************************************		••••		\$_	149.00
3. Total interest paid this period on loans. (Enter amount fror	n Schedule B, Pai	t 1, Colum	nn (e).)		\$_ ⁽	0

			SCHEDULE
Schedule F Accrued Expenses (Unpaid Bills)	Amounts may be rounded to whole dollars.	Statement covers period from 7/1/2022	california 460
SEE INSTRUCTIONS ON REVERSE		through <u>9/24/2022</u>	Page of
NAME OF FILER	I.D. NUMBER		
The Committee to Elect Sylvia (Cervantez) Orozco, Chino City Co	1453133		
CODES: If one of the following codes accurately described 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	s the payment, you may enter the code. Other 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) PRT print ads	RAD radio airtime and production of returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production of campaign workers' salaries TRC candidate travel, lodging, and TRS staff/spouse travel, lodging, ar	ction costs meals nd meals of the same candidate/sponsor

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Ulta Credit Card	CMP (yard signs)	0.00	\$1,664.00	0	\$1,664.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS S	\$ 0.00	\$ 1,164.00	0	\$ 1,164.00

Schedule F Summary

1.	accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)	1,164.00
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.)	•
	Net change this period (Subtract Line 2 from Line 1. Enter the difference here and	114400

May be a negative number FPPC Form 460 (Jan/2016))