Statement covers period from 2-11-11	Date of election if applicable:	CITY CLERK	
	(Month, Day, Year) 401	MAR 22 PM 12: 24	Page of
through <u>3~19~11</u>	4-5-11		
rimarily Formed Ballot Measure committee ) Controlled ) Soptosed Viso Complete Part 6) rimarily Formed Candidate/ officeholder Committee	Termination Statement (Also file a Form 410 To	Specification Sp	rterly Statement bial Odd-Year Report blemental Preelection ement - Attach Form 495
Gonnell to	Santa Classistant treasure Frank Hill Mailing address	ritu. CA 91390 RER. IF ANY 1990 NO Horm	
By	OPTIONAL: FAX / E-MAIL ADDR	rein and in the attached schedulinessure Treasure  ponent or Responsible Officer of Sponsor  itale Measure Proponent	FPPC Form 450 (January/05)
	primarily Formed Ballot Measure Committee Controlled Sponsored Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee Also Complete Part 7)  D. NUMBER CONDELL AREA CODE/PHONE  GOX  DDE AREA CODE/PHONE  g this statement and to the best of my known a that the foregoing is true and correct.  By  Signature of Cox By  Signature of Cox By	2. Type of Statement: Committee Comm	2. Type of Statement:   Committee

	olled Committee	6.	<b>Primarily Formed Ball</b>	ot Measure	Committee	
NAME OF OFFICEHOLDER OR CANDIDATE	****		NAME OF BALLOT MEASURE			
Inarid Connell						
OFFICE SOUGHT OR HELD (INCLUDE LOCATIO	ON AND DISTRICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIO	ON	☐ SUPPORT
clendale ust	School Board					OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND	STREET) CITY STATE ZIP					
	Chendrale Ca 9120	52-	Identify the controlling of			sure proponent, if an
			NAME OF OFFICEHOLDER, CA	NDIDATE, OR PR	OPONENT	
Related Committees Not Included not included in this statement that are concontributions or make expenditures on behind the contributions of the contributio	d in this Statement: List any committees trolled by you or are primarily formed to receive half of your candidacy.		OFFICE SOUGHT OR HELD		DISTRICT	NO. IF ANY
COMMITTEE NAME	I.D. NUMBER					
NAME OF TOPACHOED		7.	Primarily Formed Can	didate/Offic	eholder Committe	e List names of
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Can officeholder(s) or candidate(s)	s) for which this	eholder Committe s committee is primarily	e List names of formed.
COMMITTEE ADDRESS STREET ADDR		7.	Primarily Formed Can officeholder(s) or candidate(s) NAME OF OFFICEHOLDER OR	s) for which this	eholder Committe s committee is primarily OFFICE SOUGHT OR H	formed.
COMMITTEE ADDRESS STREET ADDR	YES NO	7.	officeholder(s) or candidate(	s) for which this	s committee is primarily	ELD SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDR	YES NO NO	7.	NAME OF OFFICEHOLDER OR	s) for which thi: CANDIDATE CANDIDATE	OFFICE SOUGHT OR H	ELD SUPPORT OPPOSE  ELD SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDR	YES NO RESS (NO P.O. BOX)  TATE ZIP CODE AREA CODE/PHONE	7.	officeholder(s) or candidate(s) NAME OF OFFICEHOLDER OR	s) for which thi: CANDIDATE CANDIDATE	S committee is primarily	ELD SUPPORT OPPOSE  ELD SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDR	YES NO RESS (NO P.O. BOX)  TATE ZIP CODE AREA CODE/PHONE	7.	NAME OF OFFICEHOLDER OR	candidate  Candidate  Candidate  Candidate	OFFICE SOUGHT OR H	ELD SUPPORT OPPOSE  ELD SUPPORT OPPOSE  ELD SUPPORT OPPOSE  ELD SUPPORT SUPPORT
COMMITTEE ADDRESS STREET ADDR CITY ST  COMMITTEE NAME  NAME OF TREASURER	YES NO  RESS (NO P.O. BOX)  TATE ZIP CODE AREA CODE/PHONE  I.D. NUMBER  CONTROLLED COMMITTEE?	7.	NAME OF OFFICEHOLDER OR  NAME OF OFFICEHOLDER OR  NAME OF OFFICEHOLDER OR	candidate  Candidate  Candidate  Candidate	OFFICE SOUGHT OR H  OFFICE SOUGHT OR H  OFFICE SOUGHT OR H	ELD SUPPORT OPPOSE  ELD SUPPORT OPPOSE  ELD OPPOSE  ELD OPPOSE

## Campaign Disclosure Statement Summary Page

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

Statement covers period from 2-17-11 CALIFORNIA 460

through 3-19-11 Page 3 of 7

I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE		through .	Page 2 of 4
Committee to Elect Inarid Gunnell	to GUSD Scho	ed Board 2011	1.D. NUMBER 1336166
Contributions Received  1. Monetary Contributions	Column A TOTAL THIS PERIOD (FROMATTACHED SCHEDULES)  \$ 1/58.88  \$ 1/58.88	Column B calendaryear total todate  \$ 1258,88 11250.24 \$ 13509.12  \$ 13509.12	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections  1/1 through 8/30 7/1 to Date  20. Contributions Received \$ 13509.12 \$  21. Expenditures Made \$ 9910.02 \$
Expenditures Made  6. Payments Made Schedule E, Line 4  7. Loans Made Schedule H, Line 3  8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7  9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3  10. Nonmonetary Adjustment Schedule C, Line 3  11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ \frac{\tau}{8580.61} \\ \frac{\tau}{0} \\ \tau \tau \tau \tau \tau \tau \tau \	\$ 9910.02 \$ 9910.02 0 0 \$ 9910.02	Expenditure Limit Summary for State Candidates  22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)  Date of Election Total to Date (mm/dd/yy)  \$
Current Cash Statement  12. Beginning Cash Balance	1158.88 12181.71 8582-61 \$ 3599.10	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.  FPPC Form 460 (January/05)

Schedule	₽Α	
Monetary	/ Contributions	Received

Type or print in ink.

SCHEDULE A

Monetary Contributions Received			s may be rounded whole dollars.	Statement covers period from 2-17-11		CALIFORNIA 460	
SEE INSTRUCTION	ONS ON REVERSE			through 3-19-	-11	Page	4_ of 7_
COMM	i Hze to Elect Inanid Gunnel	1 to G	USD School Box	ard 2011		1 .	1MBER 336166
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		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)
3-8-11	United Teachers of los Angeles PACE ALL PULL DOSE Los Angeles CA 90010	□IND MCOM -MOTH □PTY □SCC		1,000	1,000		
2-25-11	Marco Flores Los Angeles CA 90007	DIND COM OTH PTY SCC	LAUSD Tracher	100	100		
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
_		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					
			SUBTOTAL	1100			
1. Amount re (Include a 2. Amount re 3. Total mone	A Summary ecceived this period – itemized monetary contributions. ell Schedule A subtotals.) ecceived this period – unitemized monetary contributions etary contributions received this period. es 1 and 2. Enter here and on the Summary Page, Colu				IND- COM OTH PTY	(other Other – Politica	al ent Committee than PTY or SCC) (e.g., business entity)

Schedule B - Part 1	
Loans Received	

Type or print in ink.

			SCHEDULE B-PAR
nent	COVATE	norind	

Loans Received	Amounts may be rounded to whole dollars.				from 2-17-		CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE			· · · · · ·		through 3-k		Page 5	of <u>7</u>
Λ (1)	ngrid Gonrel	1 to GU	SD Sch				13361	66
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (FCOMMITTEE ALSO ENTERLD 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 PAIL OR FORGIVER THIS PERIOD	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Marilyn Gunnell Gendale CA 91202	Community Activist		_	PAID \$10,000 □ FORGIVEN		RATE	:/0,000	CALENDAR YEAR \$ PER ELECTION**
† 1 IND □ COM □ OTH □ PTY □ SCC		; <u> </u>	; <u> </u>	s	DATE DUE	s	DATE INCURRED	\$
Ingrid Gunnell Glandale CA 91202	LAUSD Tracher	. <i>•</i>	5000	PAID  S  FORGIVEN	,5 <u>000</u>	RATE	,5000	SOOO PER ELECTION **
TO SOLVE TO					DATE DUE		DATE INCURRED	•
FRANK Higgenbotham Glandale LA91202	Stay at home dad		,	S FORGIVEN	,5000	RATE %	,5000	CALENDARYEAR  S DDO  PERELECTION**
†□ IND □ COM □ OTH □ PTY □ SCC		, <u> </u>	, 5000	\$	DATE DUE	s	DATE INCURRED	·\$
		SUBTOTALS \$	10,000	10,000	>\$ 10,000	\$ &		
Schedule B Summary						(Enter (e) on Schedule E, Line	3)	
Loans received this period (Total Column (b) plus unitemized loans	s of less than \$100.)		***************************************	\$ 10	0,000		†Contributor Codes	, , , , , , , , , , , , , , , , , , ,
Loans paid or forgiven this period (Total Column (c) plus loans under \$100 (Include loans paid by a third party that	) pald or forgiven.)		······	s <u> </u>	0,000		IND Individual COM Recipient Co	ommittee PTY or SCC) business entity)
3. Net change this period. (Subtract Line Enter the net here and on the Summar,	2 from Line 1.)y Page, Column A, Line 2.		*************	NET \$	May be a negative number)		SCC - Small Contril	

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

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

	Tou Commettee to Calant Tropped Commend
	To: Commette to Check Trypid Grund to
	The land H. Committies
	Fire the send Della for his comping
	For gharpate School Boordo
	Thank you,
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agil Mixaell Board ommittee to E hu Poncera, re check rom Frank in the amount elso a loax 

Schedule E
<b>Payments Made</b>

SEE INSTRUCTIONS ON REVERSE

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

SCHEDULEE Statement covers period **CALIFORNIA FORM** I.D. NUMBER

NAME OF FILER to Elect Ingoid Gonnell to GUSD Johns 1 Board 2011

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

PET

PHO:

POL

POS

PRT

print ads

CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)\*

CVC civic donations FIL candidate filing/ballot fees

FND fundraising events independent expenditure supporting/opposing others (explain)\*

LEG legal defense

campaign literature and mailings

MBR member communications radio airtime and production costs MTG meetings and appearances returned contributions

office expenses SAL campaign workers' salarles petition circulating t.v. or cable airtime and production costs phone banks

TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals postage, delivery and messenger services

transfer between committees of the same candidate/sponsor TSF

VOT voter registration

WEB Information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (FCOMMITTEE, ALSO ENTER LD, NUMBER)	CODE OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Yvonne Smith	LIT Pos	74.92
Santa Clarita. Gt 91390	OFC Labels, Postage, CRAY,	ms 66.37
Printco Graphics		806.66
Commerce 04 90040	LIT mailer, business cards	2046.84
Colby Posters		794.90
Los Angeles CA 90015	LIT Lawn signs, Tosts	426.23

polling and survey research

professional services (legal, accounting)

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

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) 2. Unitemized payments made this period of under \$100

Schedule	E
(Continua	tion Sheet)
<b>Payments</b>	Made

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

petition circulating

polling and survey research

postage, delivery and messenger services

professional services (legal, accounting)

phone banks

print ads

PRO

PRT

SCHEDULE E (CONT.)

Statement covers period **CALIFORNIA FORM** I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Inglie Gennell to GUSD School 1336166

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 CTB contribution (explain nonmonetary)\* office expenses OFC

CVC civic donations PET candidate filing/ballot fees FIL. PHO FND fundraising events

independent expenditure supporting/opposing others (explain)\* ND LEG legal defense

campaign literature and mailings

RAD radio airtime and production costs

RFD returned contributions SAL campaign workers' salaries

t.v. or cable airtime and production costs TEL candidate travel, lodging, and meals staff/spouse travel, lodging, and meals

transfer between committees of the same candidate/sponsor TŞF

VOT voter registration

WEB Information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Political Data			
Burbank Ca 91507 STar Mailing	LIT	Mailing List	377.79
STAR MAILING		,	
Los Angeles Ca 90065			2172.39
Los Angeles CA 90005	LIT	Hailing	1569.21
•			

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

**SUBTOTAL \$**