

**Recipient Committee  
Campaign Statement  
Cover Page**

COVER PAGE

Date Stamp <b>RECEIVED</b> JUL 26 2023 CITY OF ARTESIA	<b>CALIFORNIA FORM 460</b>
	Page 1 of 8
	For Official Use Only

Statement covers period  
from 01/01/2023  
through 06/30/2023

Date of Election if applicable  
  
(Month, Day, Year)

**1. Type of Recipient Committee**

- Officeholder, Candidate Controlled Committee
- State Candidate Election Committee
- Recall
- General Purpose Committee
  - Sponsored
  - Small Contributor Committee
  - Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
  - Controlled
  - Sponsored
- Primarily Formed Candidate/Officeholder Committee

**2. Type of Statement**

- Pre-election Statement
- Semi-Annual Statement
- Termination Statement
- Amendment
- Quarterly Statement
- Special Odd-Year Statement
- Supplemental Pre-election Statement - Attach Form 495

**3. Committee Information**

I.D. Number 1409946

COMMITTEE NAME  
Melissa Ramoso For City Council 2022

STREET ADDRESS (NO PO BOX)

CITY STATE ZIP CODE AREA CODE/PHONE  
Encino CA 91436

MAILING ADDRESS (IF DIFFERENT)

CITY STATE ZIP CODE

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER  
Jane Leiderman

STREET ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE  
Encino CA 91436

NAME OF ASSISTANT TREASURER, IF ANY

STREET ADDRESS

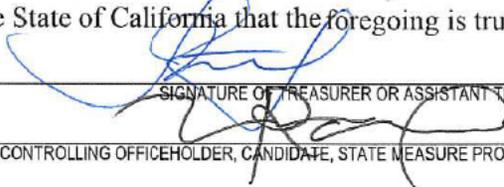
CITY STATE ZIP CODE AREA CODE/PHONE

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 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 7/20/23

By  SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on 7/18/23

By SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

Executed on

By SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on

By SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

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

Statement covers period  
from 01/01/2023  
through 06/30/2023

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE  
Melissa Ramoso

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)  
City Council Member Artesia

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP  
[REDACTED] Artesia CA 90701

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

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

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE ? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE 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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER OR CANDIDATE OR PROPONENT

OFFICE SOUGHT OR HELD DISTRICT NO. IF ANY

**7. Primarily Formed Candidate/Officeholder Committee**

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

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

**Campaign Disclosure Statement  
Summary Page**

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2023	
through		Page 3 of 8
		I.D. NUMBER
		1409946

NAME OF FILER Melissa Ramoso For City Council 2022

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
<b>Contributions Received</b>		
1. Monetary Contributions ..... Schedule A, Line 3	\$ 774.44	\$ 774.44
2. Loans Received ..... Schedule B, Line 3	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1+2	\$ 774.44	\$ 774.44
4. Nonmonetary Contributions ..... Schedule C, Line 3	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 + 4	\$ 774.44	\$ 774.44

**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	\$ _____	\$ _____

<b>Expenditures Made</b>		
6. Payments Made ..... Schedule E, Line 4	\$ 2,629.47	\$ 2,629.47
7. Loans Made ..... Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7	\$ 2,629.47	\$ 2,629.47
9. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3	0.00	0.00
10. Nonmonetary Adjustment ..... Schedule C, Line 3	0.00	0.00
11. TOTAL EXPENDITURES MADE ..... Add Lines 8 + 9 + 10	\$ 2,629.47	\$ 2,629.47

**Expenditure Limit Summary  
for State Candidates**

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

_____	\$ _____
_____	\$ _____

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

<b>Current Cash Statement</b>	
12. Beginning Cash Balance ..... Previous Summary Page, Line 16	\$ 5,348.27
13. Cash Receipts ..... Column A, Line 3 above	774.44
14. Miscellaneous Increases to Cash ..... Schedule I, Line 4	0.00
15. Cash Payments ..... Column A, Line 8 above	2,629.47
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 3,493.24
17. LOAN GUARANTEES RECEIVED. .... Schedule B, Part 2	\$ 0.00

<b>Cash Equivalents and Outstanding Debts</b>	
18. Cash Equivalents .....	\$ 0.00
19. Outstanding Debts. .... Add Lines 2 + Line 9 in Column B above	\$ 0.00

**Schedule A  
Monetary Contributions Received**

SCHEDULE A

Statement covers period from <u>01/01/2023</u> through <u>06/30/2023</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Melissa Ramoso For City Council 2022

I.D. NUMBER  
1409946

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
01/31/2023	Geraldine Aglipay [REDACTED] Skokie, IL 60076	IND	Regional Director  SBA	140.00	140.00	
05/12/2023	Edison 2244 Walnut Grove Ave Rosemead, CA 91770	OTH		250.00	250.00	
02/08/2023	Hiroko Higuchi [REDACTED] Palos Verdes Peninsula, CA 90274	IND	Writer  Hiroko Higuchi	300.00	300.00	

**SUBTOTAL \$** 690.00

**Schedule A Summary**

1. Amount received this period - itemized contributions (Includes all Schedule A subtotals) .....	\$	<u>690.00</u>
2. Amount received this period - unitemized .....	\$	<u>84.44</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 \$</b>	<u>774.44</u>

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

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2023	
through	06/30/2023	Page 5 of 8

NAME OF FILER Melissa Ramoso For City Council 2022	I.D. NUMBER 1409946
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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)
03/23/2023	Ysabel Jurado City Council Member	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		250.00	250.00	250.00 (P24)
		<input checked="" type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE				

<b>SUBTOTAL \$</b>	250.00	
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**Schedule D Summary**

1. Itemized contributions and independent expenditures made this period. ( Include all Schedule D subtotals. ) .....	\$ 250.00
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.) . <b>TOTAL \$</b>	<u>250.00</u>

**Schedule E  
Payments Made**

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2023	
through	06/30/2023	Page 6 of 8
NAME OF FILER Melissa Ramoso For City Council 2022		I.D. NUMBER 1409946

**CODES:** If one of the following 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 production costs                            |
| FIL candidate filing / ballot fees                      | PHO phone banks                               | TRC candidate travel, lodging and meals                       |
| FND fundraising expenses                                | POL polling and survey research               | TRS staff/spouse travel, lodging and meals                    |
| IND independent expenditures supporting/opposing others | 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	CODE or DESCRIPTION OF PAYMENT	AMOUNT PAID
California Democratic Party  1830 9th St. Sacramento, CA 95811 ID No: 741666	CVC	500.00
Cerritos Artesia Distinguished Young Women Inc.  19717 Kimberly Court Cerritos, CA 90703	PRT	150.00
Jurado for City Council 2024  16633 Ventura Blvd. #1008 Encino, CA 91436 ID No: 1457034	CTB	250.00
<b>SUBTOTAL \$</b>		<b>900.00</b>

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 2,525.00
2. Unitemized payments made this period of under \$100	\$ 104.47
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 Line 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	<b>TOTAL \$ 2,629.47</b>

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2023	
through	06/30/2023	Page 7 of 8
NAME OF FILER Melissa Ramoso For City Council 2022		I.D. NUMBER 1409946

**CODES:** If one of the following 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 production costs                            |
| FIL candidate filing / ballot fees                      | PHO phone banks                               | TRC candidate travel, lodging and meals                       |
| FND fundraising expenses                                | POL polling and survey research               | TRS staff/spouse travel, lodging and meals                    |
| IND independent expenditures supporting/opposing others | 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	CODE or	DESCRIPTION OF PAYMENT	AMOUNT PAID
Kalayaan Incorporated 1130 E. Ridgewood St. Long Beach, CA 90807	CVC		110.00
Miss Artesia Pageant P.O. Box 623 Artesia, CA 90702	CVC		200.00
NAFFAA Greater Los Angeles 12540 E. Oak Creek Lane Cerritos, CA 90703	CVC		160.00
NAFFAA Greater Los Angeles 12540 E. Oak Creek Lane Cerritos, CA 90703	CVC		130.00
Philippine American Bar Association 3300 Sepulveda Blvd. Torrance, CA 90505	CVC		275.00

**SUBTOTAL \$ 875.00**

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2023	
through	06/30/2023	Page 8 of 8
NAME OF FILER Melissa Ramoso For City Council 2022		I.D. NUMBER 1409946

**CODES:** If one of the following 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 production costs                            |
| FIL candidate filing / ballot fees                      | PHO phone banks                               | TRC candidate travel, lodging and meals                       |
| FND fundraising expenses                                | POL polling and survey research               | TRS staff/spouse travel, lodging and meals                    |
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| 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	CODE or	DESCRIPTION OF PAYMENT	AMOUNT PAID
Pilipino American Los Angeles Democrats 1621 N. Naomi St. Burbank, CA 91505	CVC		350.00
Radio TV Artesia 12215 183rd St. Artesia, CA 90701	CVC		400.00

**SUBTOTAL \$ 750.00**