

1/31/22 FE

Recipient Committee Campaign Statement Cover Page

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2022 FEB -1 PM 12:00
CAMPAIGN FINANCE

DATE/STAMP

CALIFORNIA FORM 460

Page 1 of 8

For Official Use Only

Statement covers period
from 07/01/2021
through 12/31/2021

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 1420291

COMMITTEE NAME
Emily Weisberg for School Board 2020

STREET ADDRESS (NO PO BOX)

CITY STATE ZIP CODE AREA CODE/PHONE
Encino CA 91436 323/655-4065

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 323/655-4065

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 complete. I certify under penalty of perjury under the knowledge the information contained herein is true and correct.

Executed on 1/31/22 By _____

Executed on _____ By _____

Executed on 1/29/22 By _____

Executed on _____ By _____

ASSISTANT TREASURER

SURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

DATE, STATE MEASURE PROPONENT

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

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

Statement covers period	Page 2 of 8
from 07/01/2021	
through 12/31/2021	

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
Emily Weisberg

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
Board of Education City of Burbank

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
Burbank CA 91505

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
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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		CALIFORNIA FORM 460
from	07/01/2021	
through		Page 3 of 8
		I.D. NUMBER
		1420291

NAME OF FILER Emily Weisberg for School Board 2020

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

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		
6. Payments Made Schedule E, Line 4	\$ 788.36	\$ 1,270.06
7. Loans Made Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS Add Lines 6+7	\$ 788.36	\$ 1,270.06
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	15.13	15.13
10. Nonmonetary Adjustment Schedule C, Line 3	0.00	0.00
11. TOTAL EXPENDITURES MADE Add Lines 8+9+10	\$ 803.49	\$ 1,285.19

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.

Current Cash Statement	
12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 1,981.89
13. Cash Receipts Column A, Line 3 above	0.00
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00
15. Cash Payments Column A, Line 8 above	788.36
16. ENDING CASH BALANCE Add Lines 12+13+14, then subtract Line 15	\$ 1,193.53
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ 0.00

Cash Equivalents and Outstanding Debts	
18. Cash Equivalents	\$ 0.00
19. Outstanding Debts Add Lines 2+Line 9 in Column B above	\$ 15.13

**Schedule E
Payments Made**

Statement covers period		CALIFORNIA FORM	460
from	07/01/2021		
through	12/31/2021	Page	4 of 8
NAME OF FILER Emily Weisberg for School Board 2020		I.D. NUMBER 1420291	

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
Credit One Bank Las Vegas, NV 89113	See Schedule G for payees reaching disclosure threshold.	159.97
Credit One Bank Las Vegas, NV 89113	See Schedule G for payees reaching disclosure threshold.	241.30
Credit One Bank Las Vegas, NV 89113	See Schedule G for payees reaching disclosure threshold.	263.59
SUBTOTAL \$		664.86

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 694.86
2. Unitemized payments made this period of under \$100	\$ 93.50
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.)	TOTAL \$ 788.36

Schedule E (Continuation Sheet)
Payments Made

Statement covers period		CALIFORNIA FORM 460
from	07/01/2021	
through	12/31/2021	Page 5 of 8
NAME OF FILER Emily Weisberg for School Board 2020		I.D. NUMBER 1420291

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
Credit One Bank Las Vegas, NV 89113	See Schedule G for payees reaching disclosure threshold.	30.00

SUBTOTAL \$ 30.00

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

Statement covers period		CALIFORNIA FORM 460
from	07/01/2021	
through	12/31/2021	Page 6 of 8

NAME OF FILER Emily Weisberg for School Board 2020.

I.D. NUMBER
1420291

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 CREDITOR	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Credit One Bank Las Vegas, NV 89113	Various credit card purchases. See Schedule G for Credit Card Payees meeting threshold.	0.00	709.99	694.86	15.13
SUBTOTALS \$		0.00	709.99	694.86	15.13

Schedule F Summary

- 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.) **INCURRED TOTALS \$** 709.99
- 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.) **PAID TOTALS \$** 694.86
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, column A, Line 9.) **NET \$** 15.13

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

Statement covers period	CALIFORNIA FORM 460
from 07/01/2021	
through 12/31/2021	Page 7 of 8

NAME OF FILER Emily Weisberg for School Board 2020 I.D. NUMBER 1420291

NAME OF AGENT OR INDEPENDENT CONTRACTOR Credit One Bank

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

- CMP campaign paraphernalia/misc.
- CNS campaign consultants
- CTB contribution (explain nonmonetary)
- CVC civic donations
- FIL candidate filing / ballot fees
- FND fundraising expenses
- IND independent expenditures supporting/opposing others
- LEG legal defense
- LIT campaign literature and mailings
- 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 costs
- RFD returned contributions
- SAL campaign workers' salaries
- TEL t.v. or cable production costs
- TRC candidate travel, lodging and meals
- TRS staff/spouse travel, lodging and meals
- TSF transfer between committees of the same candidate/sponsor
- VOT voter registration
- WEB information technology costs (Internet, e-mail)

* Payments that re contributions or independent expenditures are also summarized on Schedule D

NAME AND ADDRESS OF PAYEE OR CREDITOR	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Burbank Arts for All Foundation Burbank, CA 91502	CVC		154.50
Constant Contact Inc. Waltham, MA 02451	WEB		20.00
Constant Contact Inc. Waltham, MA 02451	WEB		-20.00
Constant Contact Inc. Waltham, MA 02451	WEB		40.00

TOTAL \$ 234.50

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

Statement covers period from 07/01/2021 through 12/31/2021	CALIFORNIA FORM 460
	Page 8 of 8

NAME OF FILER Emily Weisberg for School Board 2020

I.D. NUMBER
1420291

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Credit One Bank

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) |

* Payments that re contributions or independent expenditures are also summarized on Schedule D

NAME AND ADDRESS OF PAYEE OR CREDITOR	CODE OR	DESCRIPTON OF PAYMENT	AMOUNT PAID
Constant Contact Inc. Waltham, MA 02451	WEB		20.00
GoDaddy.com LLC Scottsdale, AZ 85260	WEB		162.36

TOTAL \$ 182.36