C	ecipient Comm ampa <u>i</u> gn State	nittee ment					Date Stamp		COVER PAGE ORNIA 460
<i>'</i>	over Page		State from _ through	07/01/2	022	Date of election if applicable: (Month, Day, Year)	SENDY PEREZ, COUNTY CLE JAN 31 2023 Y DEPI	Page _	1 of For Official Use Only
1.	Type of Recipier Officeholder, Candidate State Candidate Recall (Also Complete Part of Sponsored Sponsored Small Contributor Political Party/Ce	Election Committee 5) mrittee r Committee	Primarily For Committee Controlle Sponsor (Also Comple	med Ballot Measure ed ed lete Part 6) med Candidate/ Committee		2. Type of Statement: Preelection Statement Semi-annual Statement X Termination Statement (Also file a Form 410 Termination) Amendment (Explain Below)	Quarterly Special Or		
3.	•	mation CANDIDATE'S NAME IF NO COM Superintendent 2022	I.D. NUMBER	1444821		Treasurer(s) NAME OF TREASURER Kelly Lawler MAILING ADDRESS			
	CITY Orland, CA 95963	P.O. BOX)	STATE	ZIP CODE	AREA CODE/PHONE 530-228-3586	CITY Hilmar, CA 95324 NAME OF ASSISTANT TREASURER, IF	STATE	ZIP CODE	AREA CODE/PHONE 209-656-1542
		DIFFERENT) NO. AND STREET C	OR P.O. BOX	ZIP CODE	AREA CODE/PHONE	MAILING ADDRESS	STATE	ZIP CODE	AREA CODE/PHONE
	Orland, CA 95963 OPTIONAL: FAX / E-MA kellylawler@thekalgro					OPTIONAL: FAX / E-MAIL ADDRESS kellylawler@thekalgroup.com		· ·	
4.	Verification I have used all reascertify under penalty	of perjury under the laws	ng and review of the State o	ving this statem of California that	ent and to the best of the foregoing is true a	Kelly	<i>r</i> Lawler	hed schedul	es ja true and complete. I
	Executed on	12/23/2022 DATE				Signature of Treasur Ryan ture of Controlling Officeholder, Candidate, Stat	S. Bentz	of Spons	sor
	Executed on	DATE			Ву		r, Candidate, State Measure Propone	S	-

Recipient Committee Campaign Statement Cover Page - Part 2

CITY

COVER PAGE - PART	2
CALIFORNIA 460	
2 15	1

5. Officeholder or Candidate Controlled Committee	6. Primarily Formed Ballot Measure Committee				
NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BALLOT MEASURE			
Ryan S. Bentz			13		
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTION		SUPPORT
Other Glenn		·	1		OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE Orland, CA 95963	ZIP	Identify the controlling	g officeholder,	candidate, or state me	easure proponent, if
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 contimate expenditures on behalf of your candidacy	ributions or	NAME OF OFFICEHOLDER, CAI	IDIDATE, OR PROPONE	DISTRICT I	IO. IF ANY
COMMITTEE NAME I.D. NUMBER NAME OF TREASURER CONTROLLED	0014477550	7. Primarily Formed	Candidate/Offic	eholder Committee //	iet namas of
NAME OF TREASURER CONTROLLED YES	NO NO	officeholder(s) or candi	date(s) for which t	his committee is primari	ly formed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	·	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP CODE	AREA CODE/PHONE	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME I.D. NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
NAME OF TREASURER CONTROLLED YES	COMMITTEE?	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HELD	OPPOSE SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)		4			OPPOSE
CITY STATE ZIP CODE	AREA				

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE Statement covers period **CALIFORNIA** 07/01/2022 from 12/23/2022 3 of 15 through I.D. NUMBER 1///821

SEE INSTRUCTIONS ON REVERSE

Ryan Bentz For Superintendent 2022				1444821
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	COLUMN B CALENDAR YEAR TOTAL TO DATE	Running in Both tl	mmary for Candidates ne State Primary and
1. Monetary Contributions Schedule A, Line 3	\$2,500.00	\$8,289.00_	General Elections	
2. Loans ReceivedSchedule B, Line 3	-2,500.00	0.00	1/1 th	rough 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS	\$	\$8,289.00	20. Contributions Received	0.00 \$ 0.00
4. Nonmonetary Contributions	2,270.66	2,270.66	21. Expenditures	
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$2,270.66	\$10,559.66	Made \$	0.00 \$ 0.00
Expenditures Made			Expenditures Lim Candidates	it Summary for State
6. Payments Made Schedule E, Line 4	\$ 448.87	\$ 8,289.00		
7. Loans Made Schedule H, Line 3	0.00	0.00		ative Expenditures Made* Voluntary Expenditure Limit)
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 448.87_	\$8,289.00		
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	-2,016.38	0.00	Date of Election	Total to Date
10. Nonmonetary Adjustment	2,270.66	2,270.66	(mm/dd/yy)	Total to Date
11. TOTAL EXPENDITURES MADE	\$ 703.15	\$ 10,559.66	_	
Current Cash Statement		To calculate Column B,	1	\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$\$	add amounts in Column A to the corresponding amounts from Column B		Φ.
13. Cash Receipts Column A, Line 3 above	0.00	of your last report. Some amounts in Column A may		\$
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00	be negative figures that should be subtracted from		\$
15. Cash Payments	448.87	previous period amounts. If this is the first report being		\$
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$0.00	filed for this calendar year, only carry over the amounts		
If this is a termination statement, Line 16 must be zero.		from Lines 2, 7, and 9 (if any).	e e	
17. LOAN GUARANTEES RECEIVED Schedule B, Line 2	\$0.00		*Amounts in this section may reported in Column B.	be different from amounts
Cash Equivalents and Outstanding Debts				
18. Cash Equivalents See instructions on reverse \$	0.00			
19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$	0.00		FPPC Advic	FPPC Form 460 (Jan/2016) e: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

Schedule A Monetary Contributions Received			ounts may be rounded to whole dollars,	SCHI			
wonetary	Contributions Received		to whole donars.	Statement covers		CALIFORNIA 460	
				from07/01/	2022	FU	HIVI IOC
				through12/23/	2022	Page _	4 of15
SEE INSTRUCTION NAME OF FILER	NS ON REVERSE			ia Par		I.D. NUMBER	3
Ryan Bentz	For Superintendent 2022		<u> </u>				1444821
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALEND	VE TO DATE AR YEAR DEC. 31)	PER ÉLECTION TO DATE (IF REQUIRED)
	Ryan S. Bentz	IND IND	Principal	2,500.00	2,01	6.38	2,016.38 P-2022
12/23/2022	Orland, CA 95963	COM OTH PTY SCC	CK Price Middle School	Æ			
	A Summary					* Contributor	Codes
	eived this period - itemized monetary contributions. Schedule A subtotals.)		 \$	2,500.00	_	IND - Individu	ient Committee
2. Amount rec	eived this period - unitemized monetary contributions of less th	nan \$100	\$	0.00		(other OTH - Other PTY - Politica	than PTY or SCC) (e.g., business entity)
3. Total mone (add Lines 1	tary contributions received this period. and 2. Enter here and on the Summary Page, Column A, Line	 e 1.)	TOTAL \$	2,500.00			Contributor Committee
	3						
						2	
	1		SUBTOTAL \$	2,500.00			

Sched	ule	B -	Part	1
Loans	Re	ceiv	/ed	

SEE INSTRUCTIONS ON REVERSE

Rvan S. Bentz

Orland, CA 95963

Ryan Bentz For Superintendent 2022

FULL NAME, STREET ADDRESS AND

ZIP CODE OF LENDER

(IF COMMITTEE, ALSO ENTER I.D. NUMBER)

*XIND COM OTH PTY SCC

1. Loans received this period - -

Schedule B Summary

Amounts may be rounded to whole dollars.

(b) AMOUNT

RÉCEIVED THIS

PERIOD

0.00

PAID

SCHEDULE B - PART 1 **CALIFORNIA** Statement covers period **FORM** 07/01/2022 from 12/23/2022 through I.D. NUMBER 1444821 (g) CUMULATIVE (d) OUTSTANDING (e) INTEREST (f) ORIGINAL (c) AMOUNT PAID OR FORGIVEN THIS PERIOD ** BALANCE AT CLOSE PAID THIS AMOUNT OF CONTRIBUTIONS TO PERIOD OF THIS PERIOD LOAN DATE CALENDAR YEAR \$ 2,016.38 2.500.00 PER ELECTION** 2,016.38 P-2022 0.00 0.00 RATE X FORGIVEN 05/23/2022 2,500.00 12/31/2026 0.00 DATE DUE DATE INCURRED 0.00 * Contributor Codes IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other (e.g., business entity)

(Total Column (b) plus unitemized loans of less than \$100.)	
. Loans paid or forgiven this period (Total Column (c) plus loans under \$100 paid or forgiven) (Include loans paid by a third party that are also itemized on Schedule A.)	2,500.00
. Net change this period. (Subtract Line 2 from Line 1.) NET \$. Enter the net here and on the Summary Page, Column A, Line 2	-2,500.00 (May be a negative number)

(a) OUTSTANDING

BALANCE BEGINNING THIS

PERIOD

2,500.00

IF INDIVIDUAL, ENTER

OCCUPATION AND EMPLOYER

(IF SELF- EMPLOYED, ENTER NAME

OF BUSINESS)

CK Price Middle School

Principal

\$ SUBTOTALS \$ 0.00 \$ 2500.00 \$ 0.00 0.00

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

(Enter (e) on Schedule E, Line 3) FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772)

www.fppc.ca.gov

PTY - Political Party

SCC - Small Contributor Committee

Schedule B - Part 2 Loan Guarantors		Amounts may be rounded to whole dollars.		Statement covers period 67/01/2022 from		CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE				through12/	23/2022	Page 6	of <u>15</u>
NAME OF FILER Ryan Bentz For Superintendent 2022						I.D. NUMBER 1444	821
FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
14	IND COM OTH SCC			LENDER		CALENDAR DATE \$ PER ELECTION (IF REQUIRED)	
,					S.		
8							

Schedule C Nonmonetary Contributions Received		Amounts may be rounded to whole dollars.		Statement covers period from		CALIFORNIA FORM Page7 of1		
NAME OF FILER	DNS ON REVERSE						I.D. NUMBER	
Ryan Bentz	For Superintendent 2022						1444	821
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIF GOODS OF	PTION OF SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Ryan S. Bentz	X IND	Principal			2,016.38	2,016.38	2,016.38 P-2022
12/23/2022	Orland, CA 95963	COM OTH PTY SCC	CK Price Middle School	Filing	Fees	8		
	The KAL Group, Inc.	☐ IND	İ			254.28	254.28	254.28 P-2022
12/23/2022	Hilmar, CA 95324	COM OTH PTY SCC		Bookk	eeping			
Schedule	C Summary						* Contributor Codes	
1. Amount received this period - itemized nonmonetary contributions. (Include all Schedule C subtotals.)							Y or SCC) siness entity)	
							2 2	
						2		
					SUBTOTAL S	\$		

Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures, and Committees	Amounts ma to whole	y be rounded e dollars.	Statement covers po	100	FORM 40	
			through12/23/20	022	Page	8 of 15
NAME OF FILER Ryan Bentz For Superintendent 2022					.D. NUMBER 1444821	
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	CUMULATIV CALEND/ (JAN. 1 -	AR YEAR	PER ELECTION TO DATE (IF REQUIRED)
Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure		·			
SCHEDULE D SUMMARY	siad (Include all Cabo	dulo D oubtotale)			9	0.00
 Itemized contributions and independent expenditures made this per Unitemized contributions and independent expenditures made this Total contributions and independent expenditures made this period 	period of under \$100					0.00
		SUBTOT	AL \$			

Schedule	
Payments	Made

Amounts may be rounded to whole dollars.

MBR member communications

OFC office expenses

PHO phone banks

PRT print ads

PET petition circulating

MTG meetings and appearances

POL polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

			SCHEDULE E
ľ	Statem	ent covers period	CALIFORNIA / CO
l	from	07/01/2022	FORM 400
	through _	12/23/2022	Page 9 of 15

I.D. NUMBER

1444821

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

CMP campaign paraphernalia/misc.

LIT campaign literature and mailings

CTB contribution (explain nonmonetary)*

CNS campaign consultants

FIL candidate filing/ballot fees

CVC civic donations

LEG legal defense

FND fundraising events

Ryan Bentz For Superintendent 2022

IND independent expenditure supporting/opposing others (explain)*

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries TEL t.v. or cable airtime and 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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	DR DESCRIPTION OF PAYMENT	AMOUNT PAID	
Integrated Solutions: Political San Diego, CA 92116	OFC	3	40.00	
Integrated Solutions: Political San Diego, CA 92116	OFC	^	40.00	
Integrated Solutions: Political San Diego, CA 92116	OFC	n	40.00	
Integrated Solutions: Political San Diego, CA 92116	OFC		40.00	
* Payments that are contributions or independent expenditures must also be summarized on Schedule D. * SUBTOTAL \$				

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

Schedule	E
Payments	Made

Amounts may be rounded to whole dollars.

1444821

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Ryan Bentz For Superintendent 2022

CODES: If one of the following codes 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 events

IND independent expenditure supporting/opposing others (explain)*

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 airtime and 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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Integrated Solutions: Political San Diego, CA 92116	OFC		40.00
Integrated Solutions: Political San Diego, CA 92116	OFC		40.00
The KAL Group, Inc. Hilmar, CA 95324	PRO		208.87
· B			
Payments that are contributions or independent expenditures must also be summarized on	Schedule D.	SUBTOTAL \$	288.87

Schedule	E
Payments	Made

CMP campaign paraphernalia/misc.

CNS campaign consultants

Amounts may be rounded to whole dollars.

CALIFORNIA / Statement covers period

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

	from07/01/2022	FORM TOU
	through12/23/2022	Page11 of15
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		I.D. NUMBER
Ryan Bentz For Superintendent 2022		1444821
CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, or	describe the payment.	

MBR member communications

OFC office expenses

MTG meetings and appearances

CVC civic donations PET FIL candidate filing/ballot fees PHC FND fundraising events POL IND independent expenditure supporting/opposing others (explain)* LEG legal defense PRC	C office expenses petition circulating phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting) print ads	SAL campaign workers' salaries TEL t.v. or cable airtime and production cos TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the sa VOT voter registration WEB information technology costs (internet	s me candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DE	ESCRIPTION OF PAYMENT	AMOUNT PAID
=		В	
Schedule E Summary 1. Itemized payments made this period. (Include all Schedule E subtotals.)			448.87
2. Unitemized payments made this period of under \$100			0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, P		0.00	
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and c	on the Summary Page, Column A, Line 6.)	TOTAL \$	448.87
		·	
* Payments that are contributions or independent expenditures must also be summarized on Schedul	le D.	SUBTOTAL \$	0.00

Schedule F Accrued Expenses (Unpaid Bills)	Amounts may be rounded to whole dollars.	SCHEDULE F			
		Statement covers period	CALIFORNIA 460		
		from07/01/2022	FORM 400		
•		through12/23/2022	Page 12 of 15		
SEE INSTRUCTIONS ON REVERSE					
NAME OF FILER			I.D. NUMBER		
Ryan Bentz For Superintendent 2022			1444821		
CODES: If one of the following codes accurately describes t	the payment, you may enter the code. Otherwise	e, describe the payment.			

MBR member communications

OFC office expenses

MTG meetings and appearances

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	PET petition circulating PHO phone banks POL polling and survey POS postage, delivery a PRO professional servic PRT print ads	and messenger services	TEL t.v. or cable airtime and 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)		
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
Ayan S. Bentz Orland, CA 95963	FIL	2,016.38	0.00	0.00	0.00
1. Total accrued expenses incurred this period. (Include all Schedule F, Columbia accrued expenses of \$100 or more, plus total unitemized accrued expenses.) 2. This is a second of \$100 or more, plus total unitemized accrued expenses.	es under \$100.)		IN	ICURRED TOTALS	\$
 Total accrued expenses paid this period. (Include all Schedule F, Column accrued expenses of \$100 or more, plus total unitemized payments on ac Net change this period. (Subtract Line 2 from Line 1. Enter the difference 	crued expenses under \$10	s on 00.) 		_ PAID TOTALS	\$
on the Summary Page, Column A, Line 9.) ———————————————————————————————————				NET :	\$2,016.38
				E1	

SUBTOTALS \$

0.00

\$

RAD radio airtime and production costs

RFD returned contributions

\$

2,016.38

SAL campaign workers' salaries

\$

0.00

0.00

summarized on Schedule D.

* Payments that are contributions or independent expenditures must also be

CMP campaign paraphernalia/misc.
CNS campaign consultants

CTB contribution (explain nonmonetary)*

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

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Ryan Bentz For Superintendent 2022

NAME OF AGENT OR INDEPENDENT CONTRACTOR

CODES: If one of the following codes 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 events

IND independent expenditure supporting/opposing others (explain)*

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 airtime and 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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PA

_

TOTAL * \$

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

Schedule H		Amounts may be rounded to whole dollars,					SCHEDULE	
Loans Made to Others*			to whole dollars.		Statement cove	ers period	CALIFORNIA	460
					from07/	01/2022	FORM	400
					through12/	23/2022	Page 14	of15
SEE INSTRUCTIONS ON REVERSE NAME OF FILER					=		I.D. NUMBER	
Ryan Bentz For Superintendent 202	2						1444	821
FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF- EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OF FORGIVENESS THIS PERIOD *	(d) OUTSTANDING B BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				PAID \$ FORGIVEN	\$	% RATE	\$	CALENDAR YEAR S PER ELECTION**
W =		\$	\$	\$	DATE DUE	\$	DATE INCURRED	

SUBTOTALS	\$ ·\$	\$ \$	

Schedule I			
Miscellaneous	Increases	to	Cash

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE I.D. NUMBER 1444821 **Ryan Bentz For Superintendent 2022** AMOUNT OF FULL NAME AND ADDRESS OF SOURCE DATE DESCRIPTION OF RECEIPT INCREASE TO CASH RECEIVED (IF COMMITTEE, ALSO ENTER I.D. NUMBER) **Schedule I Summary** 0.00 2. Unitemized increases to cash of under \$100 this period. 0.00 3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) 0,00 4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) _ _ _ TOTAL \$ __ 0.00