Recipient Committee
Campaign Statement
Cover Page
(Government Code Sections 84200-84216.5)

Statement covers period
from 01/01/2019
through 06/30/2019

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.
   - [X] Officeholder, Candidate Controlled Committee
   - [ ] State Candidate Election Committee
   - [ ] Recall
   (Also Complete Part 5)
   - [ ] General Purpose Committee
   - [ ] Sponsored
   - [ ] Small Contributor Committee
   - [ ] Political Party/Central Committee
   - [ ] Primarily Formed Candidate/Officeholder Committee
   (Also Complete Part 7)
   - [ ] Primarily Formed Ballot Measure Committee
   - [ ] Controlled
   - [ ] Sponsored
   (Also Complete Part 6)

2. Type of Statement:
   - [X] Semi-Annual Statement
   - [ ] Quarterly Statement
   - [ ] Special Odd-Year Report
   - [ ] Supplemental Pre-election Statement - Attach Form 495
   - [ ] Amendment (Explain below)

3. Committee Information
   I.D. NUMBER
   1407550

   COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE)
   Dario Castellanos MBA for West Covina City Council 2018

   STREET ADDRESS (NO P.O. BOX)
   [Redacted]

   CITY
   West Covina
   STATE
   CA
   ZIP CODE
   91791

   MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
   N/A

   CITY
   [Redacted]
   STATE
   CA
   ZIP CODE
   [Redacted]

   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 and in the attached schedules 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 07/25/2019
   [Redacted]

   Executed on 07/25/2019
   [Redacted]

   Executed on [Redacted]
   [Redacted]

   Executed on [Redacted]
   [Redacted]

FFPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
Recipieent Committee
Campaign Statement
3. Committee Information - Additional Assistant Treasurers

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Dario Castallanos MBA for West Covina City Council 2018

Danielle Bazayivazo
Azusa, CA 91702
(626)862-1430
## Contributions Received

1. Monetary Contributions ................................................. Schedule A, Line 3 $0.00 $0.00
2. Loans Received ........................................................... Schedule B, Line 3 $0.00 $14,000.00
3. SUBTOTAL CASH CONTRIBUTIONS .................................. Add Lines 1 + 2 $0.00 $14,000.00
4. Nonmonetary Contributions ............................................. Schedule C, Line 3 $0.00 $0.00
5. TOTAL CONTRIBUTIONS RECEIVED .................................. Add Lines 3 + 4 $0.00 $14,000.00

## Expenditures Made

6. Payments Made ........................................................... Schedule E, Line 4 $400.00 $400.00
7. Loans Made ............................................................... Schedule H, Line 3 $0.00 $0.00
8. SUBTOTAL CASH PAYMENTS .......................................... Add Lines 6 + 7 $400.00 $400.00
9. Accrued Expenses (Unpaid Bills) ..................................... Schedule F, Line 3 $-25.00 $125.00
10. Nonmonetary Adjustment ............................................... Schedule C, Line 3 $0.00 $0.00
11. TOTAL EXPENDITURES MADE .......................................... Add Lines 8 + 9 + 10 $375.00 $525.00

## Current Cash Statement

12. Beginning Cash Balance ................................................ Previous Summary Page, Line 16 $7,701.62
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 $400.00
16. ENDING CASH BALANCE ............................................... Add Lines 12 + 13 + 14, then subtract Line 15 $7,301.62

If this is a termination statement, Line 16 must be zero.

## Cash Equivalents and Outstanding Debts

17. LOAN GUARANTEES RECEIVED ..................................... Schedule B, Part 2 $0.00
18. Cash Equivalents .......................................................... See instructions on reverse $0.00
19. Outstanding Debts ....................................................... Add Line 2 + Line 9 in Column B above $14,125.00

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).

---

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

20. Contributions Received $__________ $__________
21. Expenditures Made $__________ $__________

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (if Subject to Voluntary Expenditure Limit)

<table>
<thead>
<tr>
<th>Date of Election (mm/dd/yy)</th>
<th>Total to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>/ / /</td>
<td>$__________</td>
</tr>
</tbody>
</table>

*Amounts in this section may be different from amounts reported in Column B.
**Schedule B - Part 1**

**Loans Received**

**Name of Filer:** Dario Castellanos MBA for West Covina City Council 2018

<table>
<thead>
<tr>
<th>Full Name, Street Address and Zip Code</th>
<th>Occupation and Employer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dario Castellanos</td>
<td>Healthcare Administrator, Castellanos Family Practice</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>LOANS RECEIVED (A)</th>
<th>OUTSTANDING BALANCE BEGINNING THIS PERIOD</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>AMOUNT PAID OR FORGIVEN THIS PERIOD</th>
<th>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
<th>INTEREST PAID THIS PERIOD</th>
<th>ORIGINAL AMOUNT OF LOAN</th>
<th>CUMULATIVE CONTRIBUTIONS TO DATE</th>
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<td>$10,000.00</td>
<td>$0.00</td>
<td>$0.00</td>
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<td>PER ELECTION**</td>
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<td>$20,000.00</td>
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<tr>
<td></td>
<td>$10,000.00</td>
<td>$0.00</td>
<td>$0.00</td>
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<td></td>
<td>FORGIVEN</td>
<td></td>
<td></td>
<td></td>
<td>$20,000.00</td>
</tr>
</tbody>
</table>

**Schedule B Summary**

1. Loans received this period .......................................................... $ 0.00
   (Total Column (b) plus unitemized loans of less than $100.)

2. Loans paid or forgiven this period .................................................. $ 0.00
   (Total Column (c) plus loans under $100 paid or forgiven.)
   (Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) .......................... NET $ 0.00
   (May be a negative number)

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

**Contributor Codes**
IND - Individual
COM - Recipient Committee
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

**Schedule B - Part 1**

**CALIFORNIA FORM**

**Page 5 of 7**

**I.D. NUMBER**
1407550

**Statement covers period**
from 01/01/2019
through 06/30/2019

**FPPC Form 460 (Jan/2016)**
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
### Schedule E Payments Made

**NAME OF FILER**

Dario Castellanos MBA for West Covina City Council 2018

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

- CPM: 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
- MSR: 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)
- FRT: 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)

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yolanda Miranda &amp; Assoc.</td>
<td>PRO</td>
<td></td>
<td>150.00</td>
</tr>
<tr>
<td>728 West Edna Place</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Covina, CA 91722</td>
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<tr>
<td>Yolanda Miranda &amp; Assoc.</td>
<td>PRO</td>
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<tr>
<td>728 West Edna Place</td>
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</tr>
<tr>
<td>Covina, CA 91722</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**SUBTOTAL** $400.00

### Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) $400.00
2. Unitemized payments made this period of under $100 $0.00
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 Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) TOTAL $400.00
## Schedule F
### Accrued Expenses (Unpaid Bills)

Amounts may be rounded to whole dollars.

**Statement covers period**

<table>
<thead>
<tr>
<th>from</th>
<th>through</th>
</tr>
</thead>
<tbody>
<tr>
<td>01/01/2019</td>
<td>06/30/2019</td>
</tr>
</tbody>
</table>

**CALIFORNIA FORM 460**

**Page 7 of 7**

**NAME OF FILER**

Dario Castallanos MBA for West Covina City Council 2018

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

- CMP campaign paraphernalia/misc.
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- FND fundraising events
- ND independent expenditure supporting/opposing others (explain)*
- LEG legal defense
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- MER member communications
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- OFC office expenses
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- FHO phone banks
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- 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)

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF CREDITOR</th>
<th>(a) CODE OR DESCRIPTION OF PAYMENT</th>
<th>(b) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD</th>
<th>(c) AMOUNT INCURRED THIS PERIOD</th>
<th>(d) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)</th>
<th>(e) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yolanda Miranda &amp; Assoc.</td>
<td>PRO</td>
<td>150.00</td>
<td>0.00</td>
<td>150.00</td>
<td>0.00</td>
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<td>728 West Edna Place</td>
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<td>2707 Aurora Rd.</td>
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<td></td>
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<tr>
<td>Mariposa, CA 95338</td>
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</tr>
</tbody>
</table>

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

**SUBTOTALS $**

- 150.00$  
- 125.00$  
- 150.00$  
- 125.00$

### Schedule F Summary

1. **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 $**
   
   125.00

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.)**
   
   **PAID TOTALS $**
   
   150.00

3. **Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)**
   
   **NET $**
   
   - 25.00

FPPC Form 460 (Jan/2016)

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