

Recipient Committee Campaign Statement Cover Page

COVER PAGE

CALIFORNIA
FORM **460**

Page _____ of _____

For Official Use Only

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 5/17/2026through 6/30/2026Date of election if applicable:
(Month, Day, Year)06/02/2026

Date Stamp

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.☒ 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 Ballot Measure
Committee☐ Controlled☐ Sponsored

(Also Complete Part 6)

☐ Primarily Formed Candidate/
Officeholder Committee

(Also Complete Part 7)

2. Type of Statement:☐ Preelection Statement☒ Semi-annual Statement☐ Termination Statement

(Also file a Form 410 Termination)

☒ Amendment (Explain below)☐ Quarterly Statement☐ Special Odd-Year ReportIncluded payments in the 1/1-4/18 statement which were in the
4/19-5/17 statement, over-reported the loan amount.**3. Committee Information**

I.D. NUMBER

1488855

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

La Canada FlintridgeCA

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

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

Alexander Keledjian

MAILING ADDRESS

P.O. Box 1094

CITY STATE ZIP CODE AREA CODE/PHONE

La Canada FlintridgeCA

NAME OF ASSISTANT TREASURER, IF ANY

MAILING 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 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 _____
DateExecuted on _____
DateExecuted on _____
DateExecuted on _____
Date

Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By _____
Signature of Controlling Officeholder, Candidate, State Measure ProponentBy _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (Jan/2016))

FPPC Advice: advice@fppc.ca.gov (866/275-3772)

www.fppc.ca.gov

Recipient Committee
Campaign Statement
Cover Page — Part 2

COVER PAGE - PART 2

CALIFORNIA
FORM 460

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Nerses Aposhian

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

Member, La Canada Flintridge City Council

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

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?

☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS 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

☐ SUPPORT
☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, 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

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT
☐ OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from 5/17/2026 through 6/30/2026	CALIFORNIA FORM 460 Page 3 of 9 I.D. NUMBER 1488855
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nerses Aposhian for LCF City Council 2026

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions Schedule A, Line 3	\$ 2,100.00	\$ 27,100
2. Loans Received Schedule B, Line 3	0	18,250
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 2,100.00	\$ 45,350.00
4. Nonmonetary Contributions Schedule C, Line 3	0	5,583.35
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 2,100.00	\$ 50,933.35

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	\$ 11,615.96	\$ 42,216.92
7. Loans Made Schedule H, Line 3	0	0
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 11,615.96	\$ 42,216.92
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	0	0
10. Nonmonetary Adjustment Schedule C, Line 3	0	5,583.35
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 11,615.96	\$ 47,800.27

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)	
Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____

Current Cash Statement

12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 12,889.04
13. Cash Receipts Column A, Line 3 above	2,100.00
14. Miscellaneous Increases to Cash Schedule I, Line 4	16.73
15. Cash Payments Column A, Line 8 above	11,615.96
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 3,389.81

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

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.

Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse	\$ 0
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ 0

Schedule A

Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period from 5/17/2026 through 6/30/2026	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Nerses Aposhian for LCF City Council 2026	I.D. NUMBER 1488855
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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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/19/2026	Khalil Betbout 13924 Marquesas Way, Apt 2307 Marina Del Rey, CA 90292	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Investment Manager, IDS Real Estate Group	250.00	250.00	
5/20/2026	Robert Hymers 4740 Hillard Avenue La Cañada Flintridge, CA 91011	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	CPA, Pinnacle Tax Services	1,000	1,500	
5/24/2026	Craig Robbins 5028 Jarvis Ave La Canada, CA 91011	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Consulting, Next Level Coaching	250.00	250.00	
5/27/2026	Peter Amloian 10657 Bloomfield St Toluca Lake, CA 91602	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	VP, Finance, Downtown Music	100.00	100.00	
5/28/2026	Jack Manoukian 4828 Oakwood Avenue La Cañada Flintridge, CA 91011	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	500.00	500.00	

SUBTOTAL \$ 2,100.00

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.)\$ 2,116.73
- Amount received this period – unitemized monetary contributions of less than \$100\$ 16.73
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.).....**TOTAL \$ 2,116.73**

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

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from 5/17/2026 through 6/30/2026	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nerses Aposhian for LCF City Council 2026

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	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 airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Meta (Facebook) 1 Hacker Way Menlo Park, CA 94025	WEB		Social Media Ads	117.97
Outlook Newspaper 1038 Foothill Blvd La Canada Flintridge, CA 91011	PRT		Print Ads	1,760.00
Image Cube 15840 Monte St., Suite B-109 Sylmar, CA 91342	LIT		Mailers	3,530.84
Campaign Sidekick 1712 Pioneer Ave. Cheyenne, Wyoming 82001	WEB		Walking/Calling App	300.00
Google 1600 Amphitheatre Parkway Mountain View, CA 94043	WEB		Account Payment	19.80

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

SUBTOTAL \$ 5,728.61

Schedule E Payments Made

Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period from 5/17/2026 through 6/30/2026	CALIFORNIA FORM 460
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NAME OF FILER

Nerses Aposhian for LCF City Council

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	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 airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
The Jonathan Club 2831 G Street, Suite 200, Sacramento, CA 95816	FND		Food & Drink Cost	500.00
Meta (Facebook) 1 Hacker Way Menlo Park, CA 94025	WEB		Social Media Ads	250.00
Outlook Newspaper 1038 Foothill Blvd La Canada Flintridge, CA 91011	PRT		Print Ads	1,140.00

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

SUBTOTAL \$ 1,890.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 11,165.88
2. Unitemized payments made this period of under \$100.	\$ 0
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ 0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$ 11,165.88

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

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NAME OF FILER

Nerses Aposhian for LCF City Council 2026

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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 airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
eFundraising Connections 2831 G Street, Suite 200, Sacramento, CA 95816	CMP	Fundraising Fee	16.75
eFundraising Connections 2831 G Street, Suite 200, Sacramento, CA 95816	CMP	Fundraising Fee	65.50
eFundraising Connections 2831 G Street, Suite 200, Sacramento, CA 95816	CMP	Fundraising Fee	16.75
eFundraising Connections 2831 G Street, Suite 200, Sacramento, CA 95816	CMP	Fundraising Fee	7.00
eFundraising Connections 2831 G Street, Suite 200, Sacramento, CA 95816	CMP	Fundraising Fee	33.00

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

SUBTOTAL \$ 139.00

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded
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SCHEDULE E (CONT.)

Statement covers period from 5/17/2026 through 6/30/2026	CALIFORNIA FORM 460
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Nerses Aposhian for LCF City Council 2026

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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 airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate 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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Image Cube 15840 Monte St., Suite B-109 Sylmar, CA 91342	LIT		Mailers	3,010.87
Campaign Sidekick 1712 Pioneer Ave. Cheyenne, Wyoming 82001	WEB		Walking/Calling App	205.76
Printefex Foothill Blvd. La Canada Flintridge, CA 91011	LIT		Lawn Signs/Mailers	331.50
Mailchimp 405 N. Angier Ave. NE Atlanta, GA 3030	WEB		Emailing Services	110.00
Lontra Coffee 333 S Grand Ave Ste 150 Los Angeles, CA 90071	TRC		Coffee for Meeting	23.58

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

SUBTOTAL \$ 3,681.71

FPPC Form 460 (Jan/2016))

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Schedule E (Continuation Sheet) Payments Made

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to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from 5/17/2026 through 6/30/2026		CALIFORNIA FORM 460 Page 9 of 9
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NAME OF FILER

Nerses Aposhian for LCF City Council 2026

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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Lontra Coffee 333 S Grand Ave Ste 150 Los Angeles, CA 90071	TRC		Coffee for Meeting	7.00
Meta (Facebook) 1 Hacker Way Menlo Park, CA 94025	WEB		Social Media Ads	169.64

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

SUBTOTAL \$ 176.64