

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

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COVER PAGE

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Date Stamp
MORENO VALLEY
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CALIFORNIA
FORM **460**

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For Official Use Only

SEE INSTRUCTIONS ON REVERSE

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 Report
- Supplemental Preelection Statement - Attach Form 495

3. Committee Information

I.D. NUMBER
1372571

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
COMMITTEE AGAINST POLITICAL CORRUPTION & SPECIAL INTERESTS, OPPOSING GWENDOLYN CROSS FOR CITY COUNCIL DISTRICT 4 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.

STREET ADDRESS (NO P.O. BOX)
2350 KERNER BLVD, SUITE 250

CITY	STATE	ZIP CODE	AREA CODE/PHONE
SAN RAFAEL	CA	94901	(415) 389-6800

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS
form410@nmgovlaw.com

Treasurer(s)

NAME OF TREASURER
JASON D. KAUNE

MAILING ADDRESS
2350 KERNER BLVD, SUITE 250

CITY	STATE	ZIP CODE	AREA CODE/PHONE
SAN RAFAEL	CA	94901	(415) 389-6800

NAME OF ASSISTANT TREASURER, IF ANY
JAMES W. CARSON

MAILING ADDRESS
2350 KERNER BLVD., SUITE 250

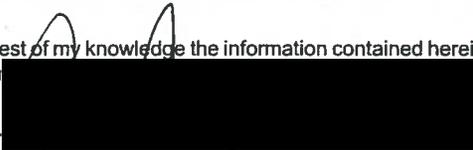
CITY	STATE	ZIP CODE	AREA CODE/PHONE
SAN RAFAEL	CA	94901	(415) 389-6800

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 1/6/15
Date

By 
Treasurer

Executed on _____
Date

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

Executed on _____
Date

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

Executed on _____
Date

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

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

Type or print in ink.

COVER PAGE - PART 2

**CALIFORNIA
FORM 460**

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

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

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	<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, 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 GWENDOLYN CROSS	OFFICE SOUGHT OR HELD City Council Member	<input type="checkbox"/> SUPPORT <input checked="" type="checkbox"/> OPPOSE
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NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Type or print in ink.
Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>10/19/2014</u>	CALIFORNIA FORM 460
through <u>12/31/2014</u>	
Page <u>3</u> of <u>15</u>	I.D. NUMBER 1372571

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
COMMITTEE AGAINST POLITICAL CORRUPTION & SPECIAL INTERESTS, OPPOSING GWENDOLYN CROSS FOR CITY COUNCIL DISTRICT 4 IN 2014,
MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions Schedule A, Line 3	\$ <u>10,878.36</u>	\$ <u>20,878.36</u>
2. Loans Received Schedule B, Line 3	<u>0.00</u>	<u>0.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ <u>10,878.36</u>	\$ <u>20,878.36</u>
4. Nonmonetary Contributions Schedule C, Line 3	<u>0.00</u>	<u>0.00</u>
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ <u>10,878.36</u>	\$ <u>20,878.36</u>

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

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made Schedule E, Line 4	\$ <u>19,664.36</u>	\$ <u>20,878.36</u>
7. Loans Made Schedule H, Line 3	<u>0.00</u>	<u>0.00</u>
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ <u>19,664.36</u>	\$ <u>20,878.36</u>
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	<u>-577.70</u>	<u>0.00</u>
10. Nonmonetary Adjustment Schedule C, Line 3	<u>0.00</u>	<u>0.00</u>
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ <u>19,086.66</u>	\$ <u>20,878.36</u>

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	\$ <u>8,786.00</u>
13. Cash Receipts Column A, Line 3 above	<u>10,878.36</u>
14. Miscellaneous Increases to Cash Schedule I, Line 4	<u>0.00</u>
15. Cash Payments Column A, Line 8 above	<u>19,664.36</u>
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>0.00</u>

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

17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ <u>0.00</u>
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse	\$ <u>0.00</u>
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ <u>0.00</u>

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.

**Schedule A
Monetary Contributions Received**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from	10/19/2014	
through	12/31/2014	Page <u>4</u> of <u>15</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER COMMITTEE AGAINST POLITICAL CORRUPTION & SPECIAL INTERESTS, OPPOSING GWENDOLYN CROSS FOR CITY COUNCIL DISTRICT 4 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.	I.D. NUMBER 1372571
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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)
10/29/2014	HIGHLAND FAIRVIEW OPERATING CO. 14225 CORPORATE WAY Moreno Valley, CA 92553	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		3,378.36	21,051.07	
11/06/2014	HIGHLAND FAIRVIEW OPERATING CO. 14225 CORPORATE WAY Moreno Valley, CA 92553	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		7,500.00	21,051.07	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				

SUBTOTAL \$ 10,878.36

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 10,878.36
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 0.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 10,878.36

*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 C
Nonmonetary Contributions Received**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from <u>10/19/2014</u> through <u>12/31/2014</u>	CALIFORNIA FORM 460
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NAME OF FILER COMMITTEE AGAINST POLITICAL CORRUPTION & SPECIAL INTERESTS, OPPOSING GWENDOLYN CROSS FOR CITY COUNCIL DISTRICT 4 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.	
I.D. NUMBER 1372571	

SEE INSTRUCTIONS ON REVERSE

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)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
12/03/2014	HIGHLAND FAIRVIEW OPERATING CO. 14225 CORPORATE WAY Moreno Valley, CA 92553	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		PAYMENT OF PAC ADMINISTRATIVE SERVICES BY SPONSOR	172.71 Memo	21,051.07	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

<i>Attach additional information on appropriately labeled continuation sheets.</i>	SUBTOTAL \$	0.00
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Schedule C Summary

- Amount received this period – itemized nonmonetary contributions.
(Include all Schedule C subtotals.) \$ 0.00
- Amount received this period – unitemized nonmonetary contributions of less than \$100 \$ 0.00
- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL \$** 0.00

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

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/19/2014	
through	12/31/2014	Page <u>6</u> of <u>15</u>
NAME OF FILER		I.D. NUMBER
COMMITTEE AGAINST POLITICAL CORRUPTION & SPECIAL INTERESTS, OPPOSING GWENDOLYN CROSS FOR CITY COUNCIL DISTRICT 4 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.		1372571

SEE INSTRUCTIONS ON REVERSE

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)
10/22/2014	GWENDOLYN CROSS City Council Member CITY OF MORENO VALLEY	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	MAILER	1,689.18	11,456.34	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/22/2014	GWENDOLYN CROSS City Council Member CITY OF MORENO VALLEY	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	MAILER	1,164.00	11,456.34	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/22/2014	GWENDOLYN CROSS City Council Member CITY OF MORENO VALLEY	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	MAILER	577.70	11,456.34	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
SUBTOTAL \$				3,430.88		

Schedule D Summary

- Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) \$ 11,456.34
- Unitemized contributions and independent expenditures made this period of under \$100 \$ 0.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL \$** 11,456.34

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period from <u>10/19/2014</u> through <u>12/31/2014</u>	CALIFORNIA FORM 460
	Page <u>7</u> of <u>15</u>

NAME OF FILER COMMITTEE AGAINST POLITICAL CORRUPTION & SPECIAL INTERESTS, OPPOSING GWENDOLYN CROSS FOR CITY COUNCIL DISTRICT 4 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.	I.D. NUMBER 1372571
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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)
10/25/2014	GWENDOLYN CROSS City Council Member CITY OF MORENO VALLEY <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	PHONE BANK	1,481.40	11,456.34	
10/28/2014	GWENDOLYN CROSS City Council Member CITY OF MORENO VALLEY <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	MAILER	577.70	11,456.34	
10/28/2014	GWENDOLYN CROSS City Council Member CITY OF MORENO VALLEY <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	MAILER	630.00	11,456.34	
10/28/2014	GWENDOLYN CROSS City Council Member CITY OF MORENO VALLEY <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	MAILER	1,689.18	11,456.34	

SUBTOTAL \$ 4,378.28

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period from <u>10/19/2014</u> through <u>12/31/2014</u>	CALIFORNIA FORM 460
	Page <u>8</u> of <u>15</u>

NAME OF FILER COMMITTEE AGAINST POLITICAL CORRUPTION & SPECIAL INTERESTS, OPPOSING GWENDOLYN CROSS FOR CITY COUNCIL DISTRICT 4 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.	I.D. NUMBER 1372571
--	------------------------

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)
10/28/2014	GWENDOLYN CROSS City Council Member CITY OF MORENO VALLEY	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	PHONE BANK	571.80	11,456.34	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/29/2014	GWENDOLYN CROSS City Council Member CITY OF MORENO VALLEY	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	MAILER	363.00	11,456.34	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/29/2014	GWENDOLYN CROSS City Council Member CITY OF MORENO VALLEY	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	MAILER	577.70	11,456.34	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
10/29/2014	GWENDOLYN CROSS City Council Member CITY OF MORENO VALLEY	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	MAILER	1,689.18	11,456.34	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					

SUBTOTAL \$ 3,201.68

**Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D (CONT.)

Statement covers period from <u>10/19/2014</u> through <u>12/31/2014</u>	CALIFORNIA FORM 460
	Page <u>9</u> of <u>15</u>
I.D. NUMBER 1372571	

NAME OF FILER COMMITTEE AGAINST POLITICAL CORRUPTION & SPECIAL INTERESTS, OPPOSING GWENDOLYN CROSS FOR CITY COUNCIL DISTRICT 4 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.	I.D. NUMBER 1372571
--	------------------------

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)
11/01/2014	GWENDOLYN CROSS City Council Member CITY OF MORENO VALLEY	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	PHONE CALLS	445.50	11,456.34	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$				445.50		

**Schedule E
Payments Made**

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/19/2014	
through	12/31/2014	Page <u>10</u> of <u>15</u>
NAME OF FILER		I.D. NUMBER
COMMITTEE AGAINST POLITICAL CORRUPTION & SPECIAL INTERESTS, OPPOSING GWENDOLYN CROSS FOR CITY COUNCIL DISTRICT 4 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.		1372571

SEE INSTRUCTIONS ON REVERSE

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
ALCO PRINTING, INC. 3649 SAN FERNANDO ROAD Glendale, CA 91204	IND		MAILER OPPOSING GWENDOLYN CROSS, MORENO VALLEY CITY COUNCIL	577.70
STAR MAILING INC. 3050 ROSSLYN ST. Los Angeles, CA 90065-1408	IND		MAILER OPPOSING GWENDOLYN CROSS, MORENO VALLEY CITY COUNCIL; SEE SCHEDULE G	1,689.18
BRIAN FLOYD & ASSOCIATES 721 CORDOVA STREET #6 Pasadena, CA 91101	CNS			2,500.00

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

SUBTOTAL \$ 4,766.88

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	19,664.36
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 \$	19,664.36

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

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	10/19/2014	
through	12/31/2014	Page 11 of 15
NAME OF FILER		I.D. NUMBER
COMMITTEE AGAINST POLITICAL CORRUPTION & SPECIAL INTERESTS, OPPOSING GWENDOLYN CROSS FOR CITY COUNCIL DISTRICT 4 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.		1372571

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

COMMITTEE AGAINST POLITICAL CORRUPTION & SPECIAL INTERESTS, OPPOSING GWENDOLYN CROSS FOR CITY COUNCIL DISTRICT 4 IN 2014,
MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.

I.D. NUMBER

1372571

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
R.T. BURNS, INC. 8456 HUNT VALLEY DRIVE VIENNA, VA 22182	IND		PHONE BANK OPPOSING GWENDOLYN CROSS, MORENO VALLEY CITY COUNCIL	1,481.40
MOBLEY MARKETING GROUP 5100 VICTORIA HILL DRIVE Riverside, CA 92506	IND		DESIGN OF MAILER OPPOSING GWENDOLYN CROSS, MORENO VALLEY CITY COUNCIL	363.00
MOBLEY MARKETING GROUP 5100 VICTORIA HILL DRIVE Riverside, CA 92506	IND		DESIGN OF MAILER OPPOSING GWENDOLYN CROSS, MORENO VALLEY CITY COUNCIL	630.00
STAR MAILING INC. 3050 ROSSLYN ST. Los Angeles, CA 90065-1408	IND		MAILER OPPOSING GWENDOLYN CROSS, MORENO VALLEY CITY COUNCIL; SEE SCHEDULE G	1,689.18
STAR MAILING INC. 3050 ROSSLYN ST. Los Angeles, CA 90065-1408	IND		MAILER OPPOSING GWENDOLYN CROSS, MORENO VALLEY CITY COUNCIL; SEE SCHEDULE G	1,689.18

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

SUBTOTAL \$ 5,852.76

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

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	10/19/2014	
through	12/31/2014	Page 12 of 15
NAME OF FILER		I.D. NUMBER
COMMITTEE AGAINST POLITICAL CORRUPTION & SPECIAL INTERESTS, OPPOSING GWENDOLYN CROSS FOR CITY COUNCIL DISTRICT 4 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.		1372571

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

COMMITTEE AGAINST POLITICAL CORRUPTION & SPECIAL INTERESTS, OPPOSING GWENDOLYN CROSS FOR CITY COUNCIL DISTRICT 4 IN 2014,
MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.

I.D. NUMBER
1372571

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
ALCO PRINTING, INC. 3649 SAN FERNANDO ROAD Glendale, CA 91204	IND		MAILER OPPOSING GWENDOLYN CROSS, MORENO VALLEY CITY COUNCIL	577.70
R.T. BURNS, INC. 8456 HUNT VALLEY DRIVE VIENNA, VA 22182	IND		PHONE CALLS OPPOSING GWENDOLYN CROSS, MORENO VALLEY CITY COUNCIL	445.50
ALCO PRINTING, INC. 3649 SAN FERNANDO ROAD Glendale, CA 91204	IND		MAILER OPPOSING GWENDOLYN CROSS, MORENO VALLEY CITY COUNCIL	577.70
R.T. BURNS, INC. 8456 HUNT VALLEY DRIVE VIENNA, VA 22182	IND		PHONE BANK OPPOSING GWENDOLYN CROSS, MORENO VALLEY CITY COUNCIL	571.80
NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP TRUST ACCOUNT 1415 L STREET, SUITE 1200 Sacramento, CA 95814			REIMBURSEMENT FROM STAR MAILING SERVICE INC. FOR POSTAGE REFUND	-420.36

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

SUBTOTAL \$ 1,752.34

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

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	10/19/2014	
through	12/31/2014	Page 13 of 15
I.D. NUMBER		1372571

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

COMMITTEE AGAINST POLITICAL CORRUPTION & SPECIAL INTERESTS, OPPOSING GWENDOLYN CROSS FOR CITY COUNCIL DISTRICT 4 IN 2014,
MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.

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
NIelsen MERKSAMER PARINELLO GROSS & LEONI LLP 1415 L STREET, SUITE 1200 Sacramento, CA 95814	PRO			7,292.38

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

SUBTOTAL \$ 7,292.38

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

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period		CALIFORNIA FORM 460
from	10/19/2014	
through	12/31/2014	Page 14 of 15
NAME OF FILER		I.D. NUMBER
COMMITTEE AGAINST POLITICAL CORRUPTION & SPECIAL INTERESTS, OPPOSING GWENDOLYN CROSS FOR CITY COUNCIL DISTRICT 4 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.		1372571

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

COMMITTEE AGAINST POLITICAL CORRUPTION & SPECIAL INTERESTS, OPPOSING GWENDOLYN CROSS FOR CITY COUNCIL DISTRICT 4 IN 2014,
MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.

I.D. NUMBER
1372571

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 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
ALCO PRINTING, INC. 3649 SAN FERNANDO ROAD Glendale, CA 91204	IND MAILER OPPOSING GWENDOLYN CROSS, MORENO VALLEY CITY COUNCIL	577.70	0.00	577.70	0.00
SUBTOTALS \$		577.70\$	0.00\$	577.70\$	0.00

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

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 \$** 0.00
- 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 \$** 577.70
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** -577.70
May be a negative number

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

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
from	10/19/2014	
through	12/31/2014	Page <u>15</u> of <u>15</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER COMMITTEE AGAINST POLITICAL CORRUPTION & SPECIAL INTERESTS, OPPOSING GWENDOLYN CROSS FOR CITY COUNCIL DISTRICT 4 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.	I.D. NUMBER 1372571
NAME OF AGENT OR INDEPENDENT CONTRACTOR STAR MAILING INC.	

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 |
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| 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) |

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
US POSTMASTER Moreno Valley, CA	POS		1,104.18
US POSTMASTER Moreno Valley, CA	POS		1,104.18
US POSTMASTER Moreno Valley, CA	POS		1,104.18

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 3,312.54

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.