

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

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COVER PAGE

CALIFORNIA
FORM **460**

Page 1 of 20

For Official Use Only

Statement covers period	Date of election if applicable: (Month, Day, Year)
from <u>10/01/2014</u>	<u>11/04/2014</u>
through <u>10/18/2014</u>	

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- | | |
|---|--|
| <input type="checkbox"/> Officeholder, Candidate Controlled Committee
<input type="radio"/> State Candidate Election Committee
<input type="radio"/> Recall
<i>(Also Complete Part 5)</i> | <input type="checkbox"/> Primarily Formed Ballot Measure Committee
<input type="radio"/> Controlled
<input type="radio"/> Sponsored
<i>(Also Complete Part 6)</i> |
| <input type="checkbox"/> General Purpose Committee
<input type="radio"/> Sponsored
<input type="radio"/> Small Contributor Committee
<input type="radio"/> Political Party/Central Committee | <input checked="" type="checkbox"/> Primarily Formed Candidate/Officeholder Committee
<i>(Also Complete Part 7)</i> |

2. Type of Statement:

- | | |
|---|---|
| <input checked="" type="checkbox"/> Preelection Statement | <input type="checkbox"/> Quarterly Statement |
| <input type="checkbox"/> Semi-annual Statement | <input type="checkbox"/> Special Odd-Year Report |
| <input type="checkbox"/> Termination Statement
<i>(Also file a Form 410 Termination)</i> | <input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
| <input type="checkbox"/> Amendment (Explain below) | |

3. Committee Information

I.D. NUMBER
1372071

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
RESIDENTS FOR SAFE NEIGHBORHOODS, GREAT SCHOOLS & JOB CREATION, SUPPORTING GIBA FOR CITY COUNCIL DISTRICT 2 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
<u>SAN RAFAEL</u>	<u>CA</u>	<u>94901</u>	<u>(415) 389-6800</u>

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

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

NAME OF ASSISTANT TREASURER, IF ANY
JAMES W. CARSON

MAILING ADDRESS
2350 KERNER BLVD., SUITE 250

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

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and  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

Executed on 10/23/14
Date

Executed on _____
Date

Executed on _____
Date

Executed on _____
Date

By 
Signature of Treasurer or Assistant Treasurer

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

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

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
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NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> 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? <input type="checkbox"/> YES <input type="checkbox"/> NO
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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 JEFFREY GIBA	OFFICE SOUGHT OR HELD City Council Member	<input checked="" 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
-----------------------------------	-----------------------	---

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
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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		CALIFORNIA FORM 460
from	10/01/2014	
through	10/18/2014	Page <u>3</u> of <u>20</u>
NAME OF FILER RESIDENTS FOR SAFE NEIGHBORHOODS, GREAT SCHOOLS & JOB CREATION, SUPPORTING GIBA FOR CITY COUNCIL DISTRICT 2 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.		I.D. NUMBER 1372071

SEE INSTRUCTIONS ON REVERSE

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$ 85,000.00	\$ 85,000.00
2. Loans Received	Schedule B, Line 3	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$ 85,000.00	\$ 85,000.00
4. Nonmonetary Contributions	Schedule C, Line 3	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$ 85,000.00	\$ 85,000.00

**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

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made	Schedule E, Line 4	\$ 64,880.98	\$ 64,880.98
7. Loans Made	Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$ 64,880.98	\$ 64,880.98
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	28,341.37	28,341.37
10. Nonmonetary Adjustment	Schedule C, Line 3	0.00	0.00
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	\$ 93,222.35	\$ 93,222.35

**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	\$ 0.00
13. Cash Receipts	Column A, Line 3 above	85,000.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4	0.00
15. Cash Payments	Column A, Line 8 above	64,880.98
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$ 20,119.02

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.

17. LOAN GUARANTEES RECEIVED	Schedule B, Part 2	\$ 0.00
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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	\$ 28,341.37

**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	10/01/2014	
through	10/18/2014	Page <u>4</u> of <u>20</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER RESIDENTS FOR SAFE NEIGHBORHOODS, GREAT SCHOOLS & JOB CREATION, SUPPORTING GIBA FOR CITY COUNCIL DISTRICT 2 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.	I.D. NUMBER 1372071
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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)
10/01/2014	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		20,000.00	85,000.00	
10/10/2014	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		55,000.00	85,000.00	
10/15/2014	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		10,000.00	85,000.00	
		<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 \$				85,000.00		

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 85,000.00
- 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 \$** 85,000.00

*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	10/01/2014	
through	10/18/2014	Page <u>5</u> of <u>20</u>

SCHEDULE D

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER RESIDENTS FOR SAFE NEIGHBORHOODS, GREAT SCHOOLS & JOB CREATION, SUPPORTING GIBA FOR CITY COUNCIL DISTRICT 2 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.	I.D. NUMBER 1372071
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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)
10/03/2014	JEFFREY GIBA City Council Member CITY OF MORENO VALLEY	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	MAILER	2,632.35	61,632.35	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/03/2014	JEFFREY GIBA City Council Member CITY OF MORENO VALLEY	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	MAILER	2,872.80	61,632.35	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/03/2014	JEFFREY GIBA City Council Member CITY OF MORENO VALLEY	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	MAILER	48.00	61,632.35	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$				5,553.15		

Schedule D Summary

- Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) \$ 61,632.35
- 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 \$** 61,632.35

**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		CALIFORNIA FORM 460
from	10/01/2014	
through	10/13/2014	Page <u>6</u> of <u>20</u>

NAME OF FILER RESIDENTS FOR SAFE NEIGHBORHOODS, GREAT SCHOOLS & JOB CREATION, SUPPORTING GIBA FOR CITY COUNCIL DISTRICT 2 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.	I.D. NUMBER 1372071
--	------------------------

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)
10/04/2014	JEFFREY GIBA City Council Member CITY OF MORENO VALLEY	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	CANVASSING	15,000.00	61,632.35	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/04/2014	JEFFREY GIBA City Council Member CITY OF MORENO VALLEY	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	VOTER LISTS	660.57	61,632.35	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/08/2014	JEFFREY GIBA City Council Member CITY OF MORENO VALLEY	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	MAILER	872.00	61,632.35	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/08/2014	JEFFREY GIBA City Council Member CITY OF MORENO VALLEY	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	MAILER	2,570.19	61,632.35	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$				19,102.76		

**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		CALIFORNIA FORM 460
from <u>10/01/2014</u>		
through <u>10/18/2014</u>		Page <u>7</u> of <u>20</u>

NAME OF FILER RESIDENTS FOR SAFE NEIGHBORHOODS, GREAT SCHOOLS & JOB CREATION, SUPPORTING GIBA FOR CITY COUNCIL DISTRICT 2 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.	I.D. NUMBER 1372071
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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)
10/08/2014	JEFFREY GIBA 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	2,770.80	61,632.35	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/08/2014	JEFFREY GIBA City Council Member CITY OF MORENO VALLEY	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	MAILER	454.50	61,632.35	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/11/2014	JEFFREY GIBA City Council Member CITY OF MORENO VALLEY	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	CANVASSING	15,000.00	61,632.35	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/16/2014	JEFFREY GIBA City Council Member CITY OF MORENO VALLEY	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	MAILER	2,570.19	61,632.35	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
SUBTOTAL \$				20,795.49		

**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		CALIFORNIA FORM 460
from <u>10/01/2014</u>		
through <u>10/18/2014</u>		Page <u>8</u> of <u>20</u>

NAME OF FILER RESIDENTS FOR SAFE NEIGHBORHOODS, GREAT SCHOOLS & JOB CREATION, SUPPORTING GIBA FOR CITY COUNCIL DISTRICT 2 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.	I.D. NUMBER 1372071
--	------------------------

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)
10/16/2014	JEFFREY GIBA City Council Member CITY OF MORENO VALLEY	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	MAILER	1,095.45	61,632.35	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/16/2014	JEFFREY GIBA City Council Member CITY OF MORENO VALLEY	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	MAILER	85.50	61,632.35	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/18/2014	JEFFREY GIBA City Council Member CITY OF MORENO VALLEY	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	CANVASSING	15,000.00	61,632.35	
	<input checked="" 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 \$				16,180.95		

**Schedule E
Payments Made**

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

Statement covers period		CALIFORNIA FORM 460
from	10/01/2014	
through	10/18/2014	Page 9 of 20
NAME OF FILER		I.D. NUMBER
RESIDENTS FOR SAFE NEIGHBORHOODS, GREAT SCHOOLS & JOB CREATION, SUPPORTING GIBA FOR CITY COUNCIL DISTRICT 2 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.		1372071

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

RESIDENTS FOR SAFE NEIGHBORHOODS, GREAT SCHOOLS & JOB CREATION, SUPPORTING GIBA FOR CITY COUNCIL DISTRICT 2 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.

I.D. NUMBER

1372071

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 SUPPORTING JEFFREY GIBA, MORENO VALLEY CITY COUNCIL	2,632.35
STAR MAILING SERVICE INC. 305 ROSSLYN ST. Los Angeles, CA 90065-1408	IND	MAILER SUPPORTING JEFFREY GIBA, MORENO VALLEY CITY COUNCIL; SEE SCHEDULE G	2,872.80
TORRES CONSULTING 9339 GUATEMALA AVENUE Downey, CA 90240	IND	CANVASSING SUPPORTING JEFFREY GIBA, MORENO VALLEY CITY COUNCIL; SEE SCHEDULE G	10,000.00

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

SUBTOTAL \$ 15,505.15

Schedule E Summary

- | | | |
|--|-----------------|------------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.) | \$ | 64,830.98 |
| 2. Unitemized payments made this period of under \$100 | \$ | 50.00 |
| 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 \$ | 64,880.98 |

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

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

SCHEDULE E (CONT.)

Statement covers period from <u>10/01/2014</u> through <u>10/18/2014</u>	CALIFORNIA FORM 460
	Page <u>10</u> of <u>20</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

RESIDENTS FOR SAFE NEIGHBORHOODS, GREAT SCHOOLS & JOB CREATION, SUPPORTING GIBA FOR CITY COUNCIL DISTRICT 2 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.

I.D. NUMBER

1372071

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 SUPPORTING JEFFREY GIBA, MORENO VALLEY CITY COUNCIL	872.00
STAR MAILING SERVICE INC. 305 ROSSLYN ST. Los Angeles, CA 90065-1408	IND		MAILER SUPPORTING JEFFREY GIBA, MORENO VALLEY CITY COUNCIL; SEE SCHEDULE G	2,570.19
TORRES CONSULTING 9339 GUATEMALA AVENUE Downey, CA 90240	IND		CANVASSING SUPPORTING JEFFREY GIBA, MORENO VALLEY CITY COUNCIL; SEE SCHEDULE G	35,000.00
CANDID RESEARCH SOLUTIONS 3601 HALBRITE AVENUE LONG BEACH, CA 90808	POL			6,630.00
MOBLEY MARKETING GROUP 14225 CORPORATE WAY Moreno Valley, CA 92553	IND		DESIGN OF MAILER SUPPORTING JEFFREY GIBA, MORENO VALLEY CITY COUNCIL	588.00

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

SUBTOTAL \$ 45,660.19

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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

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

Statement covers period from <u>10/01/2014</u> through <u>10/18/2014</u>	CALIFORNIA FORM 460
	Page <u>11</u> of <u>20</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

RESIDENTS FOR SAFE NEIGHBORHOODS, GREAT SCHOOLS & JOB CREATION, SUPPORTING GIBA FOR CITY COUNCIL DISTRICT 2 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.

I.D. NUMBER

1372071

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 | FET 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
STAR MAILING SERVICE INC. 305 ROSSLYN ST. Los Angeles, CA 90065-1408	IND	MAILER SUPPORTING JEFFREY GIBA, MORENO VALLEY CITY COUNCIL; SEE SCHEDULE G	2,570.19
ALCO PRINTING, INC. 3649 SAN FERNANDO ROAD Glendale, CA 91204	IND	MAILER SUPPORTING JEFFREY GIBA, MORENO VALLEY CITY COUNCIL	1,095.45

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

SUBTOTAL \$ 3,665.64

**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	10/01/2014	
through	10/18/2014	Page <u>12</u> of <u>20</u>
NAME OF FILER		I.D. NUMBER
RESIDENTS FOR SAFE NEIGHBORHOODS, GREAT SCHOOLS & JOB CREATION, SUPPORTING GIBA FOR CITY COUNCIL DISTRICT 2 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.		1372071

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 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
TORRES CONSULTING 9339 GUATEMALA AVENUE Downey, CA 90240	IND CANVASSING SUPPORTING JEFFREY GIBA, MORENO VALLEY CITY COUNCIL; SEE SCHEDULE G	0.00	25,000.00	0.00	25,000.00
R.T. BURNS INC. 8456 HUNT VALLEY DRIVE Vienna, VA 22182	IND PHONE BANK, SUPPORTING JEFFREY GIBA, MORENO VALLEY CITY COUNCIL	0.00	2,770.80	0.00	2,770.80
HF PROPERTIES 14225 CORPORATE WAY Moreno Valley, CA 92553	IND VOTER LISTS FOR CANVASSING AND MAILERS SUPPORTING JEFFREY GIBA, MORENO VALLEY CITY COUNCIL	0.00	570.57	0.00	570.57
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.					
SUBTOTALS \$		0.00\$	28,341.37\$	0.00\$	28,341.37

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 \$** 28,341.37
- 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 \$** 0.00
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** 28,341.37
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
 from 10/01/2014
 through 10/18/2014

CALIFORNIA FORM 460
 Page 13 of 20

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

RESIDENTS FOR SAFE NEIGHBORHOODS, GREAT SCHOOLS & JOB CREATION, SUPPORTING GIBA FOR CITY COUNCIL DISTRICT 2 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.

I.D. NUMBER
 1372071

NAME OF AGENT OR INDEPENDENT CONTRACTOR

STAR MAILING SERVICE 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 |
| 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) |

* 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	.		2,212.80
US POSTMASTER MORENO VALLEY, CA	POS	.		1,910.19
US POSTMASTER MORENO VALLEY, CA	POS	.		1,910.19

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 6,033.18

* 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.

**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	10/01/2014	
through	10/18/2014	Page 14 of 20

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER RESIDENTS FOR SAFE NEIGHBORHOODS, GREAT SCHOOLS & JOB CREATION, SUPPORTING GIBA FOR CITY COUNCIL DISTRICT 2 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.	I.D. NUMBER 1372071
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NAME OF AGENT OR INDEPENDENT CONTRACTOR TORRES CONSULTING
--

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) |

* 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
CHRISTIAN ARRIZON [REDACTED]			CANVASSER	720.00
GEOFFREY BASCO [REDACTED]			CANVASSER	945.00
IRIS BOYCE [REDACTED]			CANVASSER	945.00
ANA CERVANTES [REDACTED]			CANVASSER	885.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 3,495.00

* 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.

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

**Schedule G (Continuation Sheet)
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 (CONT.)

Statement covers period from <u>10/01/2014</u> through <u>10/18/2014</u>	CALIFORNIA FORM 460
	Page <u>15</u> of <u>20</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

RESIDENTS FOR SAFE NEIGHBORHOODS, GREAT SCHOOLS & JOB CREATION, SUPPORTING GIBA FOR CITY COUNCIL DISTRICT 2 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.

I.D. NUMBER
1372071

NAME OF AGENT OR INDEPENDENT CONTRACTOR

TORRES CONSULTING

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)

* 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
MONICA CORONEL [REDACTED]			CANVASSER	750.00
ERIC DARASOUK [REDACTED]			CANVASSER	840.00
MARBRISA DIAZ [REDACTED]			CANVASSER	885.00
EDWIN ESCANDON [REDACTED]			CANVASSER	945.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 3,420.00

* 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.

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

**Schedule G (Continuation Sheet)
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 (CONT.)

Statement covers period from <u>10/01/2014</u> through <u>10/18/2014</u>	CALIFORNIA FORM 460
	Page <u>16</u> of <u>20</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER RESIDENTS FOR SAFE NEIGHBORHOODS, GREAT SCHOOLS & JOB CREATION, SUPPORTING GIBA FOR CITY COUNCIL DISTRICT 2 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.	I.D. NUMBER 1372071
NAME OF AGENT OR INDEPENDENT CONTRACTOR TORRES CONSULTING	

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) |

* 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
ROSALBA GOMEZ [REDACTED]			CANVASSER	945.00
LORI GRIFFITH [REDACTED]			CANVASSER	945.00
JERMEY HALL [REDACTED]			CANVASSER	945.00
GABRIELA JIMINEZ [REDACTED]			CANVASSER	945.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 3,780.00

* 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.

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule G (Continuation Sheet)
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 (CONT.)

Statement covers period from <u>10/01/2014</u> through <u>10/18/2014</u>	CALIFORNIA FORM 460
	Page <u>17</u> of <u>20</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER RESIDENTS FOR SAFE NEIGHBORHOODS, GREAT SCHOOLS & JOB CREATION, SUPPORTING GIBA FOR CITY COUNCIL DISTRICT 2 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.	I.D. NUMBER 1372071
NAME OF AGENT OR INDEPENDENT CONTRACTOR TORRES CONSULTING	

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 |
| LT 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
MANISH KHANNA [REDACTED]		CANVASSER	660.00
ARIANA MEJIA [REDACTED]		CANVASSER	630.00
OMARI MONTGOMERY [REDACTED]		CANVASSER	885.00
JORDAN MURPHY [REDACTED]		CANVASSER	945.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 3,120.00

* 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.

FPPC Form 460 (January/05)
 FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule G (Continuation Sheet)
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 (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	10/01/2014	
through	10/18/2014	Page <u>18</u> of <u>20</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER RESIDENTS FOR SAFE NEIGHBORHOODS, GREAT SCHOOLS & JOB CREATION, SUPPORTING GIBA FOR CITY COUNCIL DISTRICT 2 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.	I.D. NUMBER 1372071
NAME OF AGENT OR INDEPENDENT CONTRACTOR TORRES CONSULTING	

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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| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LT 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
IRENE PAYAN [REDACTED]		CANVASSER	2,214.00
ANGELICA PRIETO [REDACTED]		CANVASSER	945.00
ROSA QUIJANO [REDACTED]		CANVASSER	945.00
STEVEN QUINTEROS [REDACTED]		CANVASSER	930.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 5,034.00

* 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.

Schedule G (Continuation Sheet)
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 (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	10/01/2014	
through	10/18/2014	Page 19 of 20

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER RESIDENTS FOR SAFE NEIGHBORHOODS, GREAT SCHOOLS & JOB CREATION, SUPPORTING GIBA FOR CITY COUNCIL DISTRICT 2 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.	I.D. NUMBER 1372071
NAME OF AGENT OR INDEPENDENT CONTRACTOR TORRES CONSULTING	

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) |

* 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
ELAINE RAYMUNDO [REDACTED]		CANVASSER	690.00
STEVE RUBIO [REDACTED]		CANVASSER	585.00
ANGIE TAPIA [REDACTED]		CANVASSER	510.00
DAVINA VITHAYAVONG [REDACTED]		CANVASSER	1,200.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 2,985.00

* 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.

FPPC Form 460 (January/05)
 FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

**Schedule G (Continuation Sheet)
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 (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	10/01/2014	
through	10/18/2014	Page <u>20</u> of <u>20</u>
NAME OF FILER		I.D. NUMBER
RESIDENTS FOR SAFE NEIGHBORHOODS, GREAT SCHOOLS & JOB CREATION, SUPPORTING GIBA FOR CITY COUNCIL DISTRICT 2 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.		1372071

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

RESIDENTS FOR SAFE NEIGHBORHOODS, GREAT SCHOOLS & JOB CREATION, SUPPORTING GIBA FOR CITY COUNCIL DISTRICT 2 IN 2014, MAJOR FUNDING BY HIGHLAND FAIRVIEW OPERATING CO.

NAME OF AGENT OR INDEPENDENT CONTRACTOR

TORRES CONSULTING

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) |

* 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
MIRIAM ZARATE [REDACTED]			CANVASSER	945.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 945.00

* 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.

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)