Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

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COVER PAGE

CALIFORNIA FORM **460**

Page 1 of 5

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SEE INSTRUCTIONS ON REVERSE

Statement covers period
from Jan. 1, 2013
through Jan 19, 2013

Date of election if applicable: (Month, Day, Year)
March 5, 2013

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

- [x] Officeholder, Candidate Controlled Committee
  - ○ State Candidate Election Committee
  - ○ Recall *(Also Complete Part 5)*
- [ ] General Purpose Committee
  - ○ Sponsored
  - ○ Small Contributor Committee
  - ○ Political Party/Central Committee
- [ ] Primarily Formed Ballot Measure Committee
  - ○ Controlled
  - ○ Sponsored *(Also Complete Part 6)*
- [ ] Primarily Formed Candidate/ Officeholder Committee *(Also Complete Part 7)*

2. Type of Statement:

- [x] 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: 1345313

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Ray Marquez for City Council 2013

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

ZIP CODE | AREA CODE/PHONE

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
Joanne Genis

MAILING ADDRESS
[redacted]

ZIP CODE | AREA CODE/PHONE

NAME OF ASSISTANT TREASURER, IF ANY
Roman G. Nava

MAILING ADDRESS
[redacted]

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 [redacted] 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 1-24-13
Date

Executed on 1-27-13
Date

Executed on _____
Date

Executed on _____
Date

[redacted]
sible Officer of Sponsor
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**

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Ray Marquez

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

Chino Hills City Council

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

[redacted]

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

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

SUMMARY PAGE

Statement covers period
from Jan. 1, 2013
through Jan 19, 2013

CALIFORNIA FORM 460

Page 3 of 5

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ray Marquez for City Council 2013

I.D. NUMBER
1345313

Contributions Received

		Column A (TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)	Column B (CALENDAR YEAR TOTAL TO DATE)
1. Monetary Contributions	*Schedule A, Line 3*	$ 1748.00	$
2. Loans Received	*Schedule B, Line 3*	0	
3. SUBTOTAL CASH CONTRIBUTIONS	*Add Lines 1 + 2*	$ 1748.00	$
4. Nonmonetary Contributions	*Schedule C, Line 3*	0	
5. TOTAL CONTRIBUTIONS RECEIVED	*Add Lines 3 + 4*	$ 1748.00	$

Expenditures Made

6. Payments Made	*Schedule E, Line 4*	$ 2191.50	$
7. Loans Made	*Schedule H, Line 3*	0	
8. SUBTOTAL CASH PAYMENTS	*Add Lines 6 + 7*	$ 2191.50	$
9. Accrued Expenses (Unpaid Bills)	*Schedule F, Line 3*	0	
10. Nonmonetary Adjustment	*Schedule C, Line 3*	0	
11. TOTAL EXPENDITURES MADE	*Add Lines 8 + 9 + 10*	$ 2191.50	$

Current Cash Statement

12. Beginning Cash Balance	*Previous Summary Page, Line 16*	$ 2079.79
13. Cash Receipts	*Column A, Line 3 above*	1748.00
14. Miscellaneous Increases to Cash	*Schedule I, Line 4*	0
15. Cash Payments	*Column A, Line 8 above*	2191.50
16. **ENDING CASH BALANCE**	*Add Lines 12 + 13 + 14, then subtract Line 15*	$ 1636.29

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

17. LOAN GUARANTEES RECEIVED *Schedule B, Part 2* $

Cash Equivalents and Outstanding Debts

18. Cash Equivalents *See instructions on reverse* $

19. Outstanding Debts *Add Line 2 + Line 9 in Column B above* $

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

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

	1/1 through 6/30	7/1 to Date
20. Contributions Received	$	$
21. Expenditures Made	$	$

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
/ /	$
/ /	$

*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
from Jan. 1, 2013
through Jan 19, 2013

CALIFORNIA FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ray Marquez for City Council 2013

I.D. NUMBER
1345313

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)
01/11/13	Vicky Tzeng [redacted]	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Coordinator, Central Health Plan of California	500.00		
1/17/13	JMJ Properties Inc./Advantage Real Estate [redacted]	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		500.00		
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
			SUBTOTAL $	1000.00		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 1000.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 748.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL $** 1748.00

*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 E

Schedule E
Payments Made

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

Statement covers period
from Jan. 1, 2013
through Jan 19, 2013

CALIFORNIA FORM **460**

Page 5 of 5

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ray Marquez for City Council 2013

I.D. NUMBER
1345313

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
B&C Graphics [redacted]	CMP			1226.50
Ragland Graphic Services [redacted]	PRT			625.00
City of Chino Hills [redacted]			Campaign sign deposit	250.00

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

SUBTOTAL $

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 2101.50
2. Unitemized payments made this period of under $100 ..... $ 90.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ..... $
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ..... **TOTAL** $ 2191.50

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

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CALIFORNIA FORM **460**

Page 1 of 17

For Official Use Only

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from Jan. 20, 2013
through Feb. 16, 2013

Date of election if applicable: (Month, Day, Year)
March 5, 2013

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: 1345313

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Elect Ray Marquez for City Council 2013

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

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER
Joanne Genis

MAILING ADDRESS
[redacted]

NAME OF ASSISTANT TREASURER, IF ANY
Roman G. Nava

MAILING ADDRESS
[redacted]

PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement a[redacted]tached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoi[redacted]

Executed on 2-21-13
Date

Executed on 2-21-13
Date

Executed on _____
Date

Executed on _____
Date

[redacted]

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

[redacted] Officer of Sponsor

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

Ray Marquez

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

City Council Member - City of Chino Hills

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

[redacted]

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

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

SUMMARY PAGE

Statement covers period
from Jan. 20, 2013
through Feb. 16, 2013

CALIFORNIA FORM **460**

Page 3 of 17

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Elect Ray Marquez for City Council 2013

I.D. NUMBER
1345313

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	*Schedule A, Line 3*	$ 7669.00	$ 9417.00
2. Loans Received	*Schedule B, Line 3*	0	0
3. SUBTOTAL CASH CONTRIBUTIONS	*Add Lines 1 + 2*	$ 7669.00	$ 9417.00
4. Nonmonetary Contributions	*Schedule C, Line 3*	3620.00	3620.00
5. TOTAL CONTRIBUTIONS RECEIVED	*Add Lines 3 + 4*	$ 11289.00	$ 13037.00

Expenditures Made

6. Payments Made	*Schedule E, Line 4*	$ 6417.76	$ 8609.26
7. Loans Made	*Schedule H, Line 3*	0	0
8. SUBTOTAL CASH PAYMENTS	*Add Lines 6 + 7*	$ 6417.76	$ 8609.26
9. Accrued Expenses (Unpaid Bills)	*Schedule F, Line 3*	12226.83	12226.83
10. Nonmonetary Adjustment	*Schedule C, Line 3*	3620.00	3620.00
11. TOTAL EXPENDITURES MADE	*Add Lines 8 + 9 + 10*	$ 22264.59	$ 22264.59

Current Cash Statement

12. Beginning Cash Balance	*Previous Summary Page, Line 16*	$ 1636.29
13. Cash Receipts	*Column A, Line 3 above*	7669.00
14. Miscellaneous Increases to Cash	*Schedule I, Line 4*	445.05
15. Cash Payments	*Column A, Line 8 above*	6417.76
16. **ENDING CASH BALANCE**	*Add Lines 12 + 13 + 14, then subtract Line 15*	$ 3332.58

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

17. LOAN GUARANTEES RECEIVED	*Schedule B, Part 2*	$ 0

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*	$ 12226.83

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

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

	1/1 through 6/30	7/1 to Date
20. Contributions Received	$	$
21. Expenditures Made	$	$

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
/ /	$
/ /	$

*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
from Jan. 20, 2013
through Feb. 16, 2013

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ray Marquez for City Council 2013

I.D. NUMBER
1345313

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)
1/23/13	John A Kramer Jr. [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Part ownership of Los Serranos Golf Center Chino Hills	100.00		
1/28/13	Giannetti Group [redacted]	☐IND ☐COM ☑OTH ☐PTY ☐SCC		100.00		
1/28/13	Ronald Watts [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired N/A	100.00		
1/30/13	Chino Hills Pizza Co. [redacted]	☐IND ☐COM ☑OTH ☐PTY ☐SCC		100.00		
2/1/13	Steven Ball [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Teacher Chino Valley Unified School District	100.00		
			SUBTOTAL $	500.00		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 5870.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 1799.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL $** 7669.00

*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 A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from Jan. 20, 2013
through Feb. 16, 2013

CALIFORNIA FORM 460

NAME OF FILER
Ray Marquez for City Council 2013

I.D. NUMBER
1345313

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)
1/23/13	Republic Services, Inc. c/o Awin Mgmt Inc. [redacted]	☐IND ☐COM ☑OTH ☐PTY ☐SCC		750.00	1250.00	
2/19/13	Republic Services, Inc. c/o Awin Mgmt Inc. c/o Allied Waste Services [redacted]	☐IND ☐COM ☑OTH ☐PTY ☐SCC		500.00	1250.00	
2/8/13	Dwight Wilson [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired N/A	80.00	260.00	
2/19/13	Dwight Wilson [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired N/A	180.00	260.00	
2/14/13	Misty Lamb [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired N/A	80.00	160.00	
			SUBTOTAL $	1590.00		

*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 A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from Jan. 20, 2013
through Feb. 16, 2013

CALIFORNIA FORM 460

NAME OF FILER
Ray Marquez for City Council 2013

I.D. NUMBER
1345313

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)
2/19/13	Misty Lamb [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired N/A	80.00	160.00	
2/8/13	Agnes Thornton [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired N/A	80.00	115.00	
2/19/13	Agnes Thornton [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired N/A	35.00	115.00	
2/19/13	Art Bennett [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Property Tax Adjuster	80.00	225.00	
2/19/13	Art Bennett [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Property Tax Adjuster	145.00	225.00	
			SUBTOTAL $	420.00		

*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 A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from Jan. 20, 2013
through Feb. 16, 2013

CALIFORNIA FORM 460

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NAME OF FILER
Ray Marquez for City Council 2013

I.D. NUMBER
1345313

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)
2/1/13	Prime Healthcare Services Inc. [redacted]	☐IND ☐COM ☑OTH ☐PTY ☐SCC		1000.00		
2/1/13	Roger Cox [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired N/A	200.00		
2/1/13	Peter Rogers Photography [redacted]	☐IND ☐COM ☑OTH ☐PTY ☐SCC		100.00		
2/1/13	Yi Ji [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Real Estate Developer	500.00		
2/1/13	Scott O'Brien [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Business Owner Safariland LLC	200.00		
			SUBTOTAL $	2000.00		

*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 A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from Jan. 20, 2013
through Feb. 16, 2013

CALIFORNIA FORM 460

NAME OF FILER
Ray Marquez for City Council 2013

I.D. NUMBER
1345313

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)
2/8/13	TREH PARTNERS II LLC [redacted]	☐IND ☐COM ☑OTH ☐PTY ☐SCC		200.00		
2/19/13	Victor Marin [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Fireman Santa Fe Springs, CA	100.00		
2/19/13	Phil Avala [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Pro 1 Carpet	260.00		
2/19/13	Robert Bryant [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Florist	155.00		
2/19/13	Al Matta [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired N/A	100.00		
			SUBTOTAL $	815.00		

*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 A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from Jan. 20, 2013
through Feb. 16, 2013

CALIFORNIA FORM 460

NAME OF FILER
Ray Marquez for City Council 2013

I.D. NUMBER
1345313

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)
2/19/13	Timothy Mitch Felde [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired N/A	195.00	275.00	
2/19/13	Timothy Mitch Felde [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired N/A	80.00	275.00	
2/19/13	Barbara Marquez [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Teacher Chino Valley Unified School District	120.00		
2/19/13	George DeFrank [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired N/A	70.00	150.00	
2/19/13	George DeFrank [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired N/A	80.00	150.00	
			SUBTOTAL $	545.00		

*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 C
Nonmonetary Contributions Received

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

SCHEDULE C

Statement covers period
from Jan. 20, 2013
through Feb. 16, 2013

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Ray Marquez for City Council 2013

I.D. NUMBER
1345313

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)
2/16/13	Jane DeFrank [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired N/A	Dog Grooming & Training	300.00	550.00	
2/16/13	Jane DeFrank [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired N/A	USC Items	250.00	550.00	
2/16/13	Los Serranos Golf & Country Club [redacted]	☐IND ☐COM ☑OTH ☐PTY ☐SCC		4 Rounds of Golf & Two Carts	460.00		
2/16/13	Viking Demolition [redacted]	☐IND ☐COM ☑OTH ☐PTY ☐SCC		Angel Baseball Tickets	320.00		

Attach additional information on appropriately labeled continuation sheets. **SUBTOTAL $** 1330.00

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) ..... $ 3355.00
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $ 265.00
3. 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 $** 3620.00

*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 C
Nonmonetary Contributions Received

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

SCHEDULE C
CALIFORNIA FORM **460**

Statement covers period
from Jan. 20, 2013
through Feb. 16, 2013

Page 11 of 17

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Ray Marquez for City Council 2013

I.D. NUMBER
1345313

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)
2/16/13	Planet Beach [redacted]	☐IND ☐COM ☑OTH ☐PTY ☐SCC		Spa Service	175.00		
2/16/13	Western Hills Golf & Country Club [redacted]	☐IND ☐COM ☑OTH ☐PTY ☐SCC		Round of Golf & Cart	300.00		
2/16/13	Anytime Fitness [redacted]	☐IND ☐COM ☑OTH ☐PTY ☐SCC		1 Month Free Membership	175.00		
2/16/13	Dave Seltzer [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Seeley Bros. Sales Repr.	Three Hours Music Entertainment	400.00		

Attach additional information on appropriately labeled continuation sheets. **SUBTOTAL $** 1050.00

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) ..... $ _____
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $ _____
3. 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 $** _____

*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 Jan. 20, 2013
through Feb. 16, 2013

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Ray Marquez for City Council 2013

I.D. NUMBER
1345313

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)
2/16/13	Lillestrand Consulting Leadership [redacted]	☐IND ☐COM ☑OTH ☐PTY ☐SCC		Wine Basket	200.00		
2/16/13	Priceless Pets [redacted]	☐IND ☐COM ☑OTH ☐PTY ☐SCC		One Free Adoption	175.00		
2/16/13	Raul Acosta [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired N/A	Painting By Raul	100.00		
2/16/13	Douglas Athans Associates [redacted]	☐IND ☐COM ☑OTH ☐PTY ☐SCC		Retirement Counseling	500.00		
Attach additional information on appropriately labeled continuation sheets.				**SUBTOTAL $**	975.00		

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) ..... $ _____
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $ _____
3. 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 $** _____

*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

Schedule E
Payments Made

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

Statement covers period
from Jan. 20, 2013
through Feb. 16, 2013

CALIFORNIA FORM **460**

Page 13 of 17

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ray Marquez for City Council 2013

I.D. NUMBER
1345313

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
Champion Newspaper [redacted]	PRT	Ad In Local Newspaper	780.30
Ragland Graphic Service [redacted]	PRT	Stageline Ad	575.00
Champion Newspaper [redacted]	PRT	Ad in Local Newspaper	780.30

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

SUBTOTAL $ 2135.60

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	$	6362.57
2. Unitemized payments made this period of under $100	$	55.19
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**	$	6417.76

Schedule E (Continuation Sheet) Payments Made

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

SCHEDULE E (CONT.)

Statement covers period
from Jan. 20, 2013
through Feb. 16, 2013

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ray Marquez for City Council 2013

I.D. NUMBER
1345313

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
Margin of Victory [redacted]	PHO	Robo Calls	235.00
Champion Newspaper [redacted]	PRT	Ad in Local Newspaper	877.50
Firefighters Print & Design [redacted]	LIT	Doorhangers	670.97
Champion Newspaper [redacted]	PRT	Ad in Local Newspaper	877.50
Papachino's Grill & Greens [redacted]	FND	Food for Fundraiser	875.00

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

SUBTOTAL $ 3535.97

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period
from Jan. 20, 2013
through Feb. 16, 2013

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ray Marquez for City Council 2013

I.D. NUMBER
1345313

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
Crummitt & Associate [redacted]	PRO	Political Reporting Services	691.00

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

SUBTOTAL $ 691.00

Schedule F
Accrued Expenses (Unpaid Bills)

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

Statement covers period
from Jan. 20, 2013
through Feb. 16, 2013

CALIFORNIA FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ray Marquez for City Council 2013

I.D. NUMBER
1345313

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
JC Evans, Inc. [redacted]	LIT--Flyer "Public Safety"	0	4075.61	0	4075.61
JC Evans, Inc. [redacted]	LIT--Flyer "Experienced Leader"	0	4075.61	0	4075.61
JC Evans, Inc. [redacted]	LIT--Flyer "Wrap-Up"	0	4075.61	0	4075.61
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	**SUBTOTALS $**	0	$ 12226.83	$ 0	$ 12226.83

Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of $100 or more, plus total unitemized accrued expenses under $100.) ..... **INCURRED TOTALS $** 12226.83
2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of $100 or more, plus total unitemized payments on accrued expenses under $100.) ..... **PAID TOTALS $** 0
3. Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... **NET $** 12226.83
   May be a negative number

Schedule I
Miscellaneous Increases to Cash

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

Statement covers period
from Jan. 20, 2013
through Feb. 16, 2013

SCHEDULE I
CALIFORNIA FORM 460
Page 17 of 17

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ray Marquez for City Council 2013

I.D. NUMBER
1345313

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
1/21/13	City of Chino Hills [redacted]	Refund for Political Sign Deposit	70.00
1/31/13	Wells Fargo Bank	Interest Earned on Savings Account	.05
2/14/13	City of Chino Hills [redacted]	Refund Candidate Statement	375.00

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL $ 445.05

Schedule I Summary

1. Itemized increases to cash this period. ..... $ 445.05
2. Unitemized increases to cash of under $100 this period. ..... $ 0
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) ..... $ 0
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) ..... **TOTAL** $ 445.05

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

Original

(19)

Date Stamp
RECEIVED
2013 JUL 31 AM 11:01
OFFICE OF CITY CLERK
OHIHO HILLS

COVER PAGE
CALIFORNIA FORM 460
Page 1 of 11
For Official Use Only

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from Feb. 17, 2013
through June 30, 2013

Date of election if applicable
(Month, Day, Year)

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

- [x] Officeholder, Candidate Controlled Committee
  - ○ State Candidate Election Committee
  - ○ Recall
  - *(Also Complete Part 5)*
- [ ] General Purpose Committee
  - ○ Sponsored
  - ○ Small Contributor Committee
  - ○ Political Party/Central Committee
- [ ] Primarily Formed Ballot Measure Committee
  - ○ Controlled
  - ○ Sponsored
  - *(Also Complete Part 6)*
- [ ] Primarily Formed Candidate/ Officeholder Committee
  - *(Also Complete Part 7)*

2. Type of Statement:

- [ ] Preelection Statement
- [x] 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: 1345313

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Elect Ray Marquez for City Council 2013

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

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
Joanne Genis

MAILING ADDRESS
[redacted]

NAME OF ASSISTANT TREASURER, IF ANY
Roman G. Nava

MAILING ADDRESS
[redacted]

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement an[redacted]e attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing[redacted]

Executed on 7-30-13
Date

Executed on 7-30-2013
Date

Executed on _____
Date

Executed on _____
Date

[redacted]nsible Officer of Sponsor

[redacted]ponent

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**

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Ray Marquez

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

City Council Member-City of Chino Hills

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

[redacted]

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

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

SUMMARY PAGE

Statement covers period from Feb. 17, 2013 through June 30, 2013

CALIFORNIA FORM 460

Page 3 of 11

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Elect Ray Marquez for City Council 2013

I.D. NUMBER

1345313

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	*Schedule A, Line 3*	$ 13940.10	$ 23357.10
2. Loans Received	*Schedule B, Line 3*	0	0
3. SUBTOTAL CASH CONTRIBUTIONS	*Add Lines 1 + 2*	$ 13940.10	$ 23357.10
4. Nonmonetary Contributions	*Schedule C, Line 3*	4075.61	7695.61
5. TOTAL CONTRIBUTIONS RECEIVED	*Add Lines 3 + 4*	$ 18015.71	$ 31052.71

Expenditures Made

6. Payments Made	*Schedule E, Line 4*	$ 12566.81	$ 21176.07
7. Loans Made	*Schedule H, Line 3*	0	0
8. SUBTOTAL CASH PAYMENTS	*Add Lines 6 + 7*	$ 12566.81	$ 21176.07
9. Accrued Expenses (Unpaid Bills)	*Schedule F, Line 3*	(12226.83)	0
10. Nonmonetary Adjustment	*Schedule C, Line 3*	4075.61	7695.61
11. TOTAL EXPENDITURES MADE	*Add Lines 8 + 9 + 10*	$ 4415.59	$ 28871.68

Current Cash Statement

12. Beginning Cash Balance	*Previous Summary Page, Line 16*	$ 3332.58
13. Cash Receipts	*Column A, Line 3 above*	13940.10
14. Miscellaneous Increases to Cash	*Schedule I, Line 4*	210.00
15. Cash Payments	*Column A, Line 8 above*	12566.81
16. **ENDING CASH BALANCE**	*Add Lines 12 + 13 + 14, then subtract Line 15*	$ 4915.87

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

17. LOAN GUARANTEES RECEIVED — *Schedule B, Part 2* — $ 0

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

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

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

	1/1 through 6/30	7/1 to Date
20. Contributions Received	$	$
21. Expenditures Made	$	$

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
/ /	$
/ /	$

*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
from Feb. 17, 2013
through June 30, 2013

CALIFORNIA FORM **460**

Page 4 of 11

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Elect Ray Marquez for City Council 2013

I.D. NUMBER
1345313

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)
2/22/13	Pamela Edwards-SWIFT Professional Law Corp. [redacted]	☐IND ☐COM ☑OTH ☐PTY ☐SCC		100.00		
2/22/13	Trinity Holdings & Investments LLC [redacted]	☐IND ☐COM ☑OTH ☐PTY ☐SCC		350.00		
2/25/13	San Bernardino County Safety Employees Benefit Assoc. Local Pac #1272515 [redacted]	☐IND ☑COM ☐OTH ☐PTY ☐SCC		250.00		
2/25/13	Ray Davis [redacted]	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Self-employed Pacific Sun Distr. 5624 Bandini Bl. Bell, CA	100.00		
2/25/13	Grow Elect [redacted]	☐IND ☑COM ☐OTH ☐PTY ☐SCC		1000.00		
			SUBTOTAL $	1800.00		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 13300.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 640.10
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL** $ 13940.10

*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 A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from Feb. 17, 2013
through June 30, 2013

CALIFORNIA FORM 460

NAME OF FILER
Elect Ray Marquez for City Council 2013

I.D. NUMBER
1345313

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)
2/27/13	Calif. Real Estate Political Action Comm. CREPAC FPPC ID#890106 [redacted]	☐IND ☑COM ☐OTH ☐PTY ☐SCC		10,000.00		
3/4/13	Apartment Assoc. Of Greater Inland Empire CAAPAC ID#745208 [redacted]	☐IND ☑COM ☐OTH ☐PTY ☐SCC		1000.00		
4/19/13	Bldg Industrial Assoc. Of S/C-ALL Purpose c/o Reed & Davidson LLP ID#74733 [redacted]	☐IND ☑COM ☐OTH ☐PTY ☐SCC		500.00		
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
			SUBTOTAL $	11500.00		

*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 C
Nonmonetary Contributions Received

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

SCHEDULE C

Statement covers period
from Feb. 17, 2013
through June 30, 2013

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Elect Ray Marquez for City Council 2013

I.D. NUMBER
1345313

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)
2/17/2013	Hagman for Assembly 2012 [redacted] ID #92688 SEE SCHEDULE "F"	☐IND ☑COM ☐OTH ☐PTY ☐SCC		In-kind	4075.61		
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					

Attach additional information on appropriately labeled continuation sheets. **SUBTOTAL $** 4075.61

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) ..... $ 4075.61
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $
3. 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 $** 4075.61

*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
Payments Made

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

SCHEDULE E

Statement covers period
from Feb. 17, 2013
through June 30, 2013

CALIFORNIA FORM **460**

Page 7 of 11

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Elect Ray Marquez for City Council 2013

I.D. NUMBER
1345313

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

CMP campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)*
CVC civic donations
FIL candidate filing/ballot fees
FND fundraising events
IND independent expenditure supporting/opposing others (explain)*
LEG legal defense
LIT campaign literature and mailings
MBR member communications
MTG meetings and appearances
OFC office expenses
PET petition circulating
PHO phone banks
POL polling and survey research
POS postage, delivery and messenger services
PRO professional services (legal, accounting)
PRT print ads
RAD radio airtime and production costs
RFD returned contributions
SAL campaign workers' salaries
TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Hope for the Hills [redacted]	CVC		200.00
Aldo Casillas [redacted]	WEB	Website Designer	250.00
Liquorama [redacted]	FND		437.01

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

SUBTOTAL $ 887.01

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 12352.86
2. Unitemized payments made this period of under $100 ..... $ 213.95
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 $** 12566.81

Schedule E
(Continuation Sheet)
Payments Made

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

Statement covers period
from Feb. 17, 2013
through June 30, 2013

CALIFORNIA FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Elect Ray Marquez for City Council 2013

I.D. NUMBER
1345313

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
Boys Republic [redacted]	CVC			200.00
Chino Hills Pizza Co. [redacted]	FND			187.83
JC Evans [redacted]	LIT			4075.61
JC Evans [redacted]	LIT			4075.61
Champion Newspaper [redacted]	PRT			243.00

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

SUBTOTAL $ 8782.05

Schedule E
(Continuation Sheet)
Payments Made

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

Statement covers period
from Feb. 17, 2013
through June 30, 2013

CALIFORNIA FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Elect Ray Marquez for City Council 2013

I.D. NUMBER
1345313

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
Champion Newspaper [redacted]	PRT			780.30
Champion Newspaper [redacted]	PRT			1903.50

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

SUBTOTAL $ 2683.80

Schedule F
Accrued Expenses (Unpaid Bills)

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

Statement covers period
from Feb. 17, 2013
through June 30, 2013

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Elect Ray Marquez for City Council 2013

I.D. NUMBER
1345313

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
JC Evans Inc. [redacted]	Lit-Flyer "Public Safety"	4075.61	0	4075.61	0
JC Evans Inc. [redacted]	Lit-Flyer "Experienced Leader"	4075.61	0	4075.61	0
JC Evans Inc. [redacted] SEE SCHEDULE "C"	Lit-Flyer "Wrap-Up"	4075.61	(4075.61)	0	0
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	**SUBTOTALS $**	12226.83	$ (4075.61)	$ 8151.22	$ 0

Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of $100 or more, plus total unitemized accrued expenses under $100.) ..... **INCURRED TOTALS $** (4075.61)
2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of $100 or more, plus total unitemized payments on accrued expenses under $100.) ..... **PAID TOTALS $** 8151.22
3. Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... **NET $** (12226.83) (May be a negative number)

Schedule I
Miscellaneous Increases to Cash

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

Statement covers period
from Feb. 17, 2013
through June 30, 2013

SCHEDULE I
CALIFORNIA FORM 460
Page 11 of 11

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Elect Ray Marquez for City Council 2013

I.D. NUMBER
1345313

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
4/19/13	City of Chino Hills [redacted]	Refund of deposit--related to campaign signs	210.00

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL $ 210.00

Schedule I Summary

1. Itemized increases to cash this period. ..... $ 210.00
2. Unitemized increases to cash of under $100 this period. ..... $ 0
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) ..... $ 210.00
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) ..... **TOTAL** $ 210.00

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

SEE INSTRUCTIONS ON REVERSE

Type or print in ink.

(21) Original

Date Stamp: RECEIVED 2014 JAN 29 PM 1:20 OFFICE OF CITY CLERK CHINO HILLS

COVER PAGE

CALIFORNIA FORM 460

Page 1 of 6

For Official Use Only

Statement covers period
from 1 JUL 2013
through 31 DEC 2013

Date of election if applicable: (Month, Day, Year)
5 MAR 2013

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

- [x] Officeholder, Candidate Controlled Committee
  - ○ State Candidate Election Committee
  - ○ Recall
  - *(Also Complete Part 5)*
- [ ] General Purpose Committee
  - ○ Sponsored
  - ○ Small Contributor Committee
  - ○ Political Party/Central Committee
- [ ] Primarily Formed Ballot Measure Committee
  - ○ Controlled
  - ○ Sponsored
  - *(Also Complete Part 6)*
- [ ] Primarily Formed Candidate/ Officeholder Committee
  - *(Also Complete Part 7)*

2. Type of Statement:

- [ ] Preelection Statement
- [x] 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: 1345313

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
ELECT RAY MARQUEZ FOR CITY COUNCIL 2013

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

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

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER
BRETT M. BENSON

MAILING ADDRESS
[redacted]

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 ar[redacted]

Executed on 31 JAN 2014 (Date) By _____

Executed on 31 JAN 2014 (Date) By _____

Executed on _____ (Date) By _____

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

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

RAY MARQUEZ

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

CITY COUNCIL - CITY OF CHINO HILLS

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

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

SUMMARY PAGE

Statement covers period
from 1 JUL 2013
through 31 DEC 2013

CALIFORNIA FORM 460

Page 3 of 6

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
RAY MARQUEZ

I.D. NUMBER
1345313

Contributions Received

		Column A (TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)	Column B (CALENDAR YEAR TOTAL TO DATE)
1. Monetary Contributions	*Schedule A, Line 3*	$ 0	$ 23357
2. Loans Received	*Schedule B, Line 3*	0	0
3. SUBTOTAL CASH CONTRIBUTIONS	*Add Lines 1 + 2*	$ 0	$ 23357
4. Nonmonetary Contributions	*Schedule C, Line 3*	0	7696
5. TOTAL CONTRIBUTIONS RECEIVED	*Add Lines 3 + 4*	$ 0	$ 31053

Expenditures Made

6. Payments Made	*Schedule E, Line 4*	$ 1910	$ 23086
7. Loans Made	*Schedule H, Line 3*	0	0
8. SUBTOTAL CASH PAYMENTS	*Add Lines 6 + 7*	$ 1910	$ 23086
9. Accrued Expenses (Unpaid Bills)	*Schedule F, Line 3*	0	0
10. Nonmonetary Adjustment	*Schedule C, Line 3*	0	7696
11. TOTAL EXPENDITURES MADE	*Add Lines 8 + 9 + 10*	$ 1910	$ 30782

Current Cash Statement

12. Beginning Cash Balance	*Previous Summary Page, Line 16*	$ 4916
13. Cash Receipts	*Column A, Line 3 above*	0
14. Miscellaneous Increases to Cash	*Schedule I, Line 4*	0
15. Cash Payments	*Column A, Line 8 above*	1910
16. **ENDING CASH BALANCE**	*Add Lines 12 + 13 + 14, then subtract Line 15*	$ 3006

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

17. LOAN GUARANTEES RECEIVED — *Schedule B, Part 2* — $

Cash Equivalents and Outstanding Debts

18. Cash Equivalents — *See instructions on reverse* — $

19. Outstanding Debts — *Add Line 2 + Line 9 in Column B above* — $

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

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

	1/1 through 6/30	7/1 to Date
20. Contributions Received	$	$
21. Expenditures Made	$	$

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
/ /	$
/ /	$

*Amounts in this section may be different from amounts reported in Column B.

SCHEDULE E

Schedule E
Payments Made

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

Statement covers period
from 1 JUL 2013
through 31 DEC 2013

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
RAY MARQUEZ

I.D. NUMBER
1345313

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
WELLS FARGO BANK [redacted]		MONTHLY SERVICE FEES	70
CHINO HILLS COMMUNITY FOUNDATION [redacted]	CVC		500
DOG PARK FOR CHINO HILLS [redacted]	CVC		200

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

SUBTOTAL $ 770

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	$	1910
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**	$	1910

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period
from 1 JUL 2013
through 31 DEC 2013

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
RAY MARQUEZ

I.D. NUMBER
1345313

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)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
HOPE FOR THE HILLS [redacted]	CVC			100
ROTARY CLUB OF GREATER CHINO HILLS [redacted]	CVC			200
LAS CASCADAS RESTAURANT [redacted]	CVC		HOPE FOR THE HILLS DINNER	431
RAY MARQUEZ [redacted]	CVC		REIMBURSEMENT FOR HOPE FOR THE HILLS BREAKFAST	174
PRICELESS PETS [redacted]	CVC			135

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

SUBTOTAL $ 1040

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period
from 1 JUL 2013
through 31 DEC 2013

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
RAY MARQUEZ

I.D. NUMBER
1345313

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
INTUIT WEBSITES / HOMESTEAD	WEB			100

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

SUBTOTAL $ 100