# Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

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(4) Original

COVER PAGE

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CHINO HILLS

CALIFORNIA FORM **460**

Page 1 of 4

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SEE INSTRUCTIONS ON REVERSE

**Statement covers period**
from January 1, 2011
through June 30, 2011

**Date of election if applicable:**
(Month, Day, Year)
2012

## 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: 1338698

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Cynthia Moran for City Council 2012

[redacted]

## Treasurer(s)

NAME OF TREASURER
Derek Williams

[redacted]

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 [redacted] s true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is

Executed on 7-19-11 (Date) By [redacted]

Executed on 7-19-11 (Date) By [redacted]

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

# Recipient Committee Campaign Statement Cover Page — Part 2

Type or print in ink.

COVER PAGE - PART 2

**CALIFORNIA FORM 460**

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## 5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Cynthia Moran

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

City council member

[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 January 1, 2011
through June 30, 2011

CALIFORNIA FORM 460

Page 3 of 4

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

## 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 | $ 0 |
| 2. Loans Received | *Schedule B, Line 3* | 300 | 300 |
| 3. SUBTOTAL CASH CONTRIBUTIONS | *Add Lines 1 + 2* | $ 0 | $ 0 |
| 4. Nonmonetary Contributions | *Schedule C, Line 3* | 0 | 0 |
| 5. TOTAL CONTRIBUTIONS RECEIVED | *Add Lines 3 + 4* | $ 300 | $ 300 |

## Expenditures Made

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

## Current Cash Statement

| | | |
|---|---|---|
| 12. Beginning Cash Balance | *Previous Summary Page, Line 16* | $ 0 |
| 13. Cash Receipts | *Column A, Line 3 above* | 300 |
| 14. Miscellaneous Increases to Cash | *Schedule I, Line 4* | 0 |
| 15. Cash Payments | *Column A, Line 8 above* | 0 |
| 16. **ENDING CASH BALANCE** | *Add Lines 12 + 13 + 14, then subtract Line 15* | $ 300 |

*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 B - PART 1

# Schedule B – Part 1
## Loans Received

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

Statement covers period
from January 1, 2011
through June 30, 2011

CALIFORNIA FORM 460

Page 4 of 4

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran For City Council 2012

I.D. NUMBER
1338698

| FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | (a) OUTSTANDING BALANCE BEGINNING THIS PERIOD | (b) AMOUNT RECEIVED THIS PERIOD | (c) AMOUNT PAID OR FORGIVEN THIS PERIOD * | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD | (e) INTEREST PAID THIS PERIOD | (f) ORIGINAL AMOUNT OF LOAN | (g) CUMULATIVE CONTRIBUTIONS TO DATE |
|---|---|---|---|---|---|---|---|---|
| Cynthia Moran [redacted]<br>†☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Clerk with Chino Valley Unified School District | $ 0 | $ 300 | ☐ PAID<br>$ ____<br>☐ FORGIVEN<br>$ ____ | $ 300<br>DATE DUE ____ | 0 %<br>RATE<br>$ ____ | $ ____<br>DATE INCURRED ____ | CALENDAR YEAR<br>$ 300<br>PER ELECTION **<br>$ 300 |
| †☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | | $ ____ | $ ____ | ☐ PAID<br>$ ____<br>☐ FORGIVEN<br>$ ____ | $ ____<br>DATE DUE ____ | ____ %<br>RATE<br>$ ____ | $ ____<br>DATE INCURRED ____ | CALENDAR YEAR<br>$ ____<br>PER ELECTION **<br>$ ____ |
| †☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | | $ ____ | $ ____ | ☐ PAID<br>$ ____<br>☐ FORGIVEN<br>$ ____ | $ ____<br>DATE DUE ____ | ____ %<br>RATE<br>$ ____ | $ ____<br>DATE INCURRED ____ | CALENDAR YEAR<br>$ ____<br>PER ELECTION **<br>$ ____ |
| | **SUBTOTALS** | $ | $ | $ | $ | $ | | |

(Enter (e) on Schedule E, Line 3)

## Schedule B Summary

1. Loans received this period ..... $ 300
   (Total Column (b) plus unitemized loans of less than $100.)
2. Loans paid or forgiven this period ..... $ 0
   (Total Column (c) plus loans under $100 paid or forgiven.)
   (Include loans paid by a third party that are also itemized on Schedule A.)
3. Net change this period. (**Subtract** Line 2 from Line 1.) ..... **NET** $ 300
   (May be a negative number)
   Enter the net here and on the Summary Page, Column A, Line 2.

†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

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

(5) Original

COVER PAGE

# Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

Date Stamp: RECEIVED 2012 JAN 24 PM 4:18 OFFICE OF CITY CLERK CHINO HILLS

**CALIFORNIA FORM 460**

Page 1 of 16

For Official Use Only

SEE INSTRUCTIONS ON REVERSE

**Statement covers period**
from 7/1/11
through 12/31/11

**Date of election if applicable:** (Month, Day, Year)
11/6/12

## 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: 1338698

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

Cynthia Moran for City Council 2012

[redacted]

OPTIONAL: FAX / E-MAIL ADDRESS

## Treasurer(s)

NAME OF TREASURER

Derek Williams

[redacted]

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 [redacted] schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and [redacted]

Executed on 1/23/12 (Date) — By [redacted]

Executed on 1/23/12 (Date) — By [redacted] (Signature of Controlling Officeholder/Sponsor)

Executed on _____ (Date) — By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Executed on _____ (Date) — By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Type or print in ink.

COVER PAGE - PART 2

# Recipient Committee Campaign Statement Cover Page — Part 2

CALIFORNIA FORM **460**



## 5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Cynthia Moran

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

Council Member - Chino Hills

[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 7/1/11
through 12/31/11

CALIFORNIA FORM 460

Page 3 of 16

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

## Contributions Received

| | | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|---|---|---|---|
| 1. Monetary Contributions | *Schedule A, Line 3* | $ 14,284.00 | $ 14,284.00 |
| 2. Loans Received | *Schedule B, Line 3* | 1550.00 | 1550.00 |
| 3. SUBTOTAL CASH CONTRIBUTIONS | *Add Lines 1 + 2* | $ 15,834.00 | $ 15,834.00 |
| 4. Nonmonetary Contributions | *Schedule C, Line 3* | 6475.00 | 6475.00 |
| 5. TOTAL CONTRIBUTIONS RECEIVED | *Add Lines 3 + 4* | $ 22,309.00 | $ 22,309.00 |

## Expenditures Made

| | | | |
|---|---|---|---|
| 6. Payments Made | *Schedule E, Line 4* | $ 2236.00 | $ 2236.00 |
| 7. Loans Made | *Schedule H, Line 3* | 0 | 0 |
| 8. SUBTOTAL CASH PAYMENTS | *Add Lines 6 + 7* | $ 2236.00 | $ 2236.00 |
| 9. Accrued Expenses (Unpaid Bills) | *Schedule F, Line 3* | 0 | 0 |
| 10. Nonmonetary Adjustment | *Schedule C, Line 3* | 6475.00 | 6475.00 |
| 11. TOTAL EXPENDITURES MADE | *Add Lines 8 + 9 + 10* | $ 8711.00 | $ 8711.00 |

## Current Cash Statement

| | | |
|---|---|---|
| 12. Beginning Cash Balance | *Previous Summary Page, Line 16* | $ 0 |
| 13. Cash Receipts | *Column A, Line 3 above* | 15,834.00 |
| 14. Miscellaneous Increases to Cash | *Schedule I, Line 4* | 2420.00 |
| 15. Cash Payments | *Column A, Line 8 above* | 2236.00 |
| 16. **ENDING CASH BALANCE** | *Add Lines 12 + 13 + 14, then subtract Line 15* | $ 16,018.00 |

*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* | $ 1550.00 |

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

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

| | 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 7/1/11
through 12/31/11

**CALIFORNIA FORM 460**



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| 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) |
|---|---|---|---|---|---|---|
| 12/20/11 | Veritas Health Services [redacted] | ☐IND ☐COM ☑OTH ☐PTY ☐SCC | | $6,000.00 | $6,000.00 | |
| 9/16/11 | Debra Giles-Zemitis [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Accounting Manager JPL | 150.00 | 150.00 | |
| 9/16/11 | Tonya Klement [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Sales Harte-Hanks | 130.00 | 130.00 | |
| 9/16/11 | Gerald Moser [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Contractor IEI Equipment Rental | 400.00 | 400.00 | |
| 9/16/11 | Lorri Tippett [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Realtor Smart Market Consulting | 150.00 | 150.00 | |
| | | | **SUBTOTAL $** | 6830.00 | | |

### Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 12,580.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 1704.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL** $ 14,284.00

*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
## Monetary Contributions Received

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

SCHEDULE A

**Statement covers period**
from 7/1/11
through 12/31/11

**CALIFORNIA FORM 460**



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| 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) |
|---|---|---|---|---|---|---|
| 9/16/11 | Alfred & Barbara Santos [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Owners Daniels Western Meats | $500.00 | 500.00 | |
| 9/16/11 | Ernie Delgado [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Owner Beyond Tech Education | 150.00 | 150.00 | |
| 9/16/11 | Gary & Kelly Bracamontes [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | President Brock's Produce | 150.00 | 150.00 | |
| 9/16/11 | Robert Jacoby [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Administrator PVH Medical Center | 150.00 | 150.00 | |
| | | ☐IND ☐COM ☐OTH ☐PTY ☐SCC | | | | |
| | | | **SUBTOTAL $** | 950.00 | | |

### Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ _____
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ _____
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **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 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 7/1/11
through 12/31/11

CALIFORNIA FORM 460



NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| 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) |
|---|---|---|---|---|---|---|
| 9/16/11 | David Fischetti [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | General Manager ISILON | $150.00 | 150.00 | |
| 9/16/11 | Ed Graham [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Retired | 170.00 | 170.00 | |
| 9/16/11 | Lisa Greathouse [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Editorial Manager Walt Disney Company | 150.00 | 150.00 | |
| | | ☐IND ☐COM ☐OTH ☐PTY ☐SCC | | | | |
| | | ☐IND ☐COM ☐OTH ☐PTY ☐SCC | | | | |
| | | | **SUBTOTAL $** | 470.00 | | |

*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 7/1/11
through 12/31/11

**CALIFORNIA FORM 460**



NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| 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) |
|---|---|---|---|---|---|---|
| 9/16/11 | Diane McEvilly [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Attendance Tech. CVUSD | $180.00 | 180.00 | |
| 9/16/11 | Carlos & Susan Moz [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Director of Engineering Direct TV | 150.00 | 150.00 | |
| 9/16/11 | Chris Burns [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Administrator Boy's Republic | 100.00 | 100.00 | |
| 9/16/11 | Melba Mayes, DDS [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Dentist | 150.00 | 150.00 | |
| 9/16/11 | Jerry & Kerry Ruiz [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Court Reporter County of Los Angeles | 150.00 | 150.00 | |
| | | | **SUBTOTAL $** | 730.00 | | |

*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** 7/1/11
**through** 12/31/11

**CALIFORNIA FORM 460**



NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| 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) |
|---|---|---|---|---|---|---|
| 9/16/11 | John & Kelly Good [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Owner<br>Good & Associates | $150.00 | 150.00 | |
| 9/16/11 | Platinum Cargo Logistics [redacted] | ☐IND ☐COM ☑OTH ☐PTY ☐SCC | | 150.00 | 150.00 | |
| 9/16/11 | S.D. Nash [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Consultant<br>Lillestrand Leadership | 150.00 | 150.00 | |
| 9/16/11 | Bill Taylor [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Legislative Analyst Dir.<br>County of Los Angeles | 300.00 | 300.00 | |
| 9/16/11 | John & Maria Young [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | President<br>Young Homes | 650.00 | 650.00 | |
| | | | **SUBTOTAL $** | 1400.00 | | |

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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 7/1/11
through 12/31/11

**CALIFORNIA FORM 460**



NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| 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) |
|---|---|---|---|---|---|---|
| 9/16/11 | Steve & Sandee Rose [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Retired | $150.00 | 150.00 | |
| 9/16/11 | Angela Turner [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Owner Launch Lady, LLL | 150.00 | 150.00 | |
| 9/16/11 | Scott Kaplan [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Realtor CBRE | 150.00 | 150.00 | |
| 9/16/11 | Peter Rogers [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Owner Peter Rogers Photography | 150.00 | 150.00 | |
| 9/16/11 | Rodney & Robin Peacock [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Retired | 100.00 | 100.00 | |
| | | | **SUBTOTAL $** | 700.00 | | |

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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 7/1/11
through 12/31/11

CALIFORNIA FORM 460



NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| 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) |
|---|---|---|---|---|---|---|
| 9/16/11 | Dennis Curley [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Retired | $500.00 | 500.00 | |
| 9/16/11 | Kathleen Smith [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Director of Sales Time Warner | 500.00 | 500.00 | |
| 9/16/11 | Brian Pollack [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Owner PSI Seafood | 500.00 | 500.00 | |
| | | ☐IND ☐COM ☐OTH ☐PTY ☐SCC | | | | |
| | | ☐IND ☐COM ☐OTH ☐PTY ☐SCC | | | | |
| | | | **SUBTOTAL $** | 1500.00 | | |

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OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

# Schedule B – Part 1
## Loans Received

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

Statement covers period
from 7/1/11
through 12/31/11

CALIFORNIA FORM 460



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | (a) OUTSTANDING BALANCE BEGINNING THIS PERIOD | (b) AMOUNT RECEIVED THIS PERIOD | (c) AMOUNT PAID OR FORGIVEN THIS PERIOD * | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD | (e) INTEREST PAID THIS PERIOD | (f) ORIGINAL AMOUNT OF LOAN | (g) CUMULATIVE CONTRIBUTIONS TO DATE |
|---|---|---|---|---|---|---|---|---|
| David Moran<br>[redacted]<br>†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Sales<br>Paragon Packaging | $ 1550.00 | $ 0 | ☐ PAID<br>$ ____<br>☐ FORGIVEN<br>$ ____ | $ 1550.00<br>DATE DUE | ____%<br>RATE<br>$ ____ | $ ____<br>DATE INCURRED | CALENDAR YEAR<br>$ 1550.00<br>PER ELECTION**<br>$ ____ |
| †☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | | $ ____ | $ ____ | ☐ PAID<br>$ ____<br>☐ FORGIVEN<br>$ ____ | $ ____<br>DATE DUE | ____%<br>RATE<br>$ ____ | $ ____<br>DATE INCURRED | CALENDAR YEAR<br>$ ____<br>PER ELECTION**<br>$ ____ |
| †☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | | $ ____ | $ ____ | ☐ PAID<br>$ ____<br>☐ FORGIVEN<br>$ ____ | $ ____<br>DATE DUE | ____%<br>RATE<br>$ ____ | $ ____<br>DATE INCURRED | CALENDAR YEAR<br>$ ____<br>PER ELECTION**<br>$ ____ |
| | **SUBTOTALS** | $ | $ | $ | $ | (Enter (e) on Schedule E, Line 3) | | |

## Schedule B Summary

1. Loans received this period ..... $ 1550.00
   (Total Column (b) plus unitemized loans of less than $100.)
2. Loans paid or forgiven this period ..... $ ____
   (Total Column (c) plus loans under $100 paid or forgiven.)
   (Include loans paid by a third party that are also itemized on Schedule A.)
3. Net change this period. (**Subtract** Line 2 from Line 1.) ..... **NET** $ 1550.00
   (May be a negative number)
   Enter the net here and on the Summary Page, Column A, Line 2.

†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

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

# Schedule C
## Nonmonetary Contributions Received

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

SCHEDULE C

Statement covers period
from 7/1/11
through 12/31/11

CALIFORNIA FORM 460



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| 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) |
|---|---|---|---|---|---|---|---|
| 9/16/11 | David Moran [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Sales Paragon Packaging | autographed baseball | 100.00 | 100.00 | |
| 9/16/11 | Chick-fil-A [redacted] | ☐IND ☐COM ☑OTH ☐PTY ☐SCC | | gift cards | 250.00 | 250.00 | |
| 9/16/11 | Vellano Country Club [redacted] | ☐IND ☐COM ☑OTH ☐PTY ☐SCC | | Golf Foursome | 400.00 | 400.00 | |
| 9/16/11 | Los Serranos Country Club [redacted] | ☐IND ☐COM ☑OTH ☐PTY ☐SCC | | Golf Foursome | 200.00 | 200.00 | |

*Attach additional information on appropriately labeled continuation sheets.* **SUBTOTAL $** 950.00

## Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) ..... $ 4300.00
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $ 2175.00
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** $ 6475.00

*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 7/1/11
through 12/31/11

CALIFORNIA FORM 460

Page 13 of 16

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Cynthia Moran for City Council 2012

I.D. NUMBER

1338698

| 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) |
|---|---|---|---|---|---|---|---|
| 9/16/11 | Angela Turner [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Owner Launch Lady LLL | Autographed Seinfeld Book | 200.00 | 200.00 | |
| 9/16/11 | The Frame Salon [redacted] | ☐IND ☐COM ☑OTH ☐PTY ☐SCC | | Beauty Services | 350.00 | 350.00 | |
| 9/16/11 | Amy Trujillo [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Auditor Stein Mart | Hawaiian Vacation | 1000.00 | 1000.00 | |
| 9/16/11 | Chino Grading [redacted] | ☐IND ☐COM ☑OTH ☐PTY ☐SCC | | Carlsbad and Lake Havasu | 1800.00 | 1800.00 | |

*Attach additional information on appropriately labeled continuation sheets.* **SUBTOTAL $** 3350.00

### 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
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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 7/1/11
through 12/31/11

**CALIFORNIA FORM 460**



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

**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 |
|---|---|---|---|
| Los Serranos Country Club [redacted] | FND | Catering | 1600.00 |
| Creative Touch Communications [redacted] | WEB | Graphic Design Services | 150.00 |
| Amy Trujillo [redacted] | CNS | Consulting | 100.00 |

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

**SUBTOTAL $** 1850.00

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 1850.00
2. Unitemized payments made this period of under $100 ..... $ 386.00
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** $ 2236.00

# Schedule I
## Miscellaneous Increases to Cash

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

Statement covers period
from 7/1/11
through 12/31/11

SCHEDULE I
CALIFORNIA FORM 460
Page 15 of 16

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| DATE RECEIVED | FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | DESCRIPTION OF RECEIPT | AMOUNT OF INCREASE TO CASH |
|---|---|---|---|
| 9/16/11 | Victoria Perretta [redacted] | Silent Auction Purchase | 150.00 |
| 9/16/11 | Lisa Greathouse [redacted] | Silent Auction Purchase | 120.00 |
| 9/16/11 | Debbie Giles- Zemitis [redacted] | Silent Auction Purchase | 320.00 |
| 9/16/11 | Lorri Tippett [redacted] | Silent Auction Purchase | 140.00 |
| 9/16/11 | Linda Householder [redacted] | Silent Auction Purchase | 1080.00 |

*Attach additional information on appropriately labeled continuation sheets.*

**SUBTOTAL $** 1810.00

## Schedule I Summary

1. Itemized increases to cash this period. ..... $ 2420.00
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).) ..... $ 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** $ 2420.00

# Schedule I
## Miscellaneous Increases to Cash

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

Statement covers period
from 7/1/11
through 12/31/11

SCHEDULE I
CALIFORNIA FORM 460
Page 16 of 16

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| DATE RECEIVED | FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | DESCRIPTION OF RECEIPT | AMOUNT OF INCREASE TO CASH |
|---|---|---|---|
| 9/16/11 | Mark & Rose Johnson [redacted] | Silent Auction Purchase | 200.00 |
| 9/16/11 | Sandee Rose [redacted] | Silent Auction Purchase | 110.00 |
| 9/16/11 | Karen Kaplan [redacted] | Silent Auction Purchase | 300.00 |
| | | | |
| | | | |

*Attach additional information on appropriately labeled continuation sheets.*

**SUBTOTAL $** 610.00

## Schedule I Summary

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

# Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

Original

(6)

COVER PAGE

CALIFORNIA FORM **460**

Page 1 of 13

For Official Use Only

Date Stamp

RECEIVED
2012 JUL 30 AM 10:32
OFFICE OF CITY CLERK
CHINO HILLS

SEE INSTRUCTIONS ON REVERSE

**Statement covers period**
from 1/1/12
through 6/30/12

**Date of election if applicable:**
(Month, Day, Year) 11/6/12

## 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

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

Cynthia Moran for city council 2012

[redacted]

OPTIONAL: FAX / E-MAIL ADDRESS

## Treasurer(s)

NAME OF TREASURER

Derek Williams

[redacted]

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 [redacted] schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true

Executed on 7-30-12 (Date) By [redacted]

Executed on 7-30-12 (Date) By [redacted] Sponsor

Executed on _____ (Date) By _____ Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on _____ (Date) By _____ Signature of Controlling Officeholder, Candidate, State Measure Proponent

# Recipient Committee Campaign Statement Cover Page — Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA FORM 460



## 5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Cynthia Moran

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

Chino Hills City Council

[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 1/11/12
through 6/30/12

CALIFORNIA FORM 460

Page 3 of 13

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

## Contributions Received

| | | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|---|---|---|---|
| 1. Monetary Contributions | Schedule A, Line 3 | $ 9038.00 | $ 9038 |
| 2. Loans Received | Schedule B, Line 3 | 0 | 0 |
| 3. SUBTOTAL CASH CONTRIBUTIONS | Add Lines 1 + 2 | $ 9038 | $ 9038 |
| 4. Nonmonetary Contributions | Schedule C, Line 3 | 2400 | 2400 |
| 5. TOTAL CONTRIBUTIONS RECEIVED | Add Lines 3 + 4 | $ 11,438 | $ 11,438 |

## Expenditures Made

| | | | |
|---|---|---|---|
| 6. Payments Made | Schedule E, Line 4 | $ 4950 | $ 4950 |
| 7. Loans Made | Schedule H, Line 3 | 0 | 0 |
| 8. SUBTOTAL CASH PAYMENTS | Add Lines 6 + 7 | $ 4950 | $ 4950 |
| 9. Accrued Expenses (Unpaid Bills) | Schedule F, Line 3 | 0 | 0 |
| 10. Nonmonetary Adjustment | Schedule C, Line 3 | 2400 | 2400 |
| 11. TOTAL EXPENDITURES MADE | Add Lines 8 + 9 + 10 | $ 7350 | $ 7350 |

## Current Cash Statement

| | | |
|---|---|---|
| 12. Beginning Cash Balance | Previous Summary Page, Line 16 | $ 16,018.00 |
| 13. Cash Receipts | Column A, Line 3 above | 9,038.00 |
| 14. Miscellaneous Increases to Cash | Schedule I, Line 4 | 725.00 |
| 15. Cash Payments | Column A, Line 8 above | 4,950.00 |
| 16. **ENDING CASH BALANCE** | Add Lines 12 + 13 + 14, then subtract Line 15 | $ 20,831.00 |

*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 1/1/12
through 6/1/12

CALIFORNIA FORM 460



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| 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) |
|---|---|---|---|---|---|---|
| 6/18/12 | Lewis Pacific Partners [redacted] | ☐IND ☐COM ☒OTH ☐PTY ☐SCC | | $1000.00 | $1000.00 | |
| 5/6/12 | Phil + Jean Gorgone [redacted] | ☒IND ☐COM ☐OTH ☐PTY ☐SCC | Manager Chino Grading | $500.00 | $500.00 | |
| 5/6/12 | Debra Giles-Zemitis [redacted] | ☒IND ☐COM ☐OTH ☐PTY ☐SCC | Accounting Mgr. JPL | $110.00 | $110.00 | |
| 5/6/12 | David + Terry George [redacted] | ☒IND ☐COM ☐OTH ☐PTY ☐SCC | Inst. Aide Chino Valley USD | $100.00 | $100.00 | |
| 5/6/12 | Bruce + Jenny Mott [redacted] | ☒IND ☐COM ☐OTH ☐PTY ☐SCC | School Nurse Chino Valley USD | $100.00 | $100.00 | |

SUBTOTAL $ 1810.00

### Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 5095
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 3943
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL $ 9038

*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 1/1/12
through 6/30/12

CALIFORNIA FORM 460



NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---|---|---|---|---|---|---|
| 5/6/12 | Cynthia Gurrola [redacted] | ☒IND ☐COM ☐OTH ☐PTY ☐SCC | President, Creative Touch Communications | $100.00 | $100.00 | |
| 4/28/12 | Rod + Robin Peacock [redacted] | ☒IND ☐COM ☐OTH ☐PTY ☐SCC | Retired | $100.00 | $100.00 | |
| 3/21/12 | Jerry Foster [redacted] | ☒IND ☐COM ☐OTH ☐PTY ☐SCC | Retired | $100.00 | $100.00 | |
| 5/3/12 | Lorri Tippett [redacted] | ☒IND ☐COM ☐OTH ☐PTY ☐SCC | Realtor Smart Market | $100.00 | $100.00 | |
| 4/30/12 | Patrick Hamamoto [redacted] | ☒IND ☐COM ☐OTH ☐PTY ☐SCC | Contract Mgr. City of Corona | $100.00 | $100.00 | |

SUBTOTAL $ 500.00

*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 1/1/12
through 6/30/12

CALIFORNIA FORM 460



NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| 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) |
|---|---|---|---|---|---|---|
| 4/20/12 | Republic Services, Inc. [redacted] | ☐IND ☐COM ☒OTH ☐PTY ☐SCC | | $250.00 | $250.00 | |
| 4/25/12 | SCM Construction, Inc. [redacted] | ☐IND ☐COM ☐OTH ☐PTY ☐SCC | | $460.00 | $460.00 | |
| 4/19/12 | John + Jeanine Solomon [redacted] | ☒IND ☐COM ☐OTH ☐PTY ☐SCC | Self-Employed Liquorama | $150.00 | $150.00 | |
| 4/28/12 | Grace Capps [redacted] | ☒IND ☐COM ☐OTH ☐PTY ☐SCC | Proj. Specialist Capital Group | $100.00 | $100.00 | |
| 4/9/12 | Don + Lourdes Wong [redacted] | ☒IND ☐COM ☐OTH ☐PTY ☐SCC | Mgmt. Analyst LACNTA | $100.00 | $100.00 | |
| | | | SUBTOTAL $ | 1060 | | |

*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 1/1/12
through 6/30/12

CALIFORNIA FORM 460



NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| 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) |
|---|---|---|---|---|---|---|
| 4/14/12 | Bill & Ann Taylor [redacted] | IND | Legislative Analyst LA County | $100.00 | $100.00 | |
| 3/23/12 | Los Serranos Golf Club [redacted] | OTH | | $250.00 | $250.00 | |
| 3/14/12 | John Kramer [redacted] | IND | General Mgr. Los Serranos Country Club | $250.00 | $250.00 | |
| 3/30/12 | John Young [redacted] | IND | President, Young Homes | $500.00 | $500.00 | |
| 4/2/12 | Peter Rogers [redacted] | IND | Owner, Peter Rogers Photography | $125.00 | $125.00 | |

SUBTOTAL $ 1225

*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 1/1/12
through 6/30/12

CALIFORNIA FORM 460

Page 8 of 13

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| 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) |
|---|---|---|---|---|---|---|
| 3/16/12 | Retire America Corp. [redacted] | ☐IND ☐COM ☒OTH ☐PTY ☐SCC | | $500.00 | $500.00 | |
| | | ☐IND ☐COM ☐OTH ☐PTY ☐SCC | | | | |
| | | ☐IND ☐COM ☐OTH ☐PTY ☐SCC | | | | |
| | | ☐IND ☐COM ☐OTH ☐PTY ☐SCC | | | | |
| | | ☐IND ☐COM ☐OTH ☐PTY ☐SCC | | | | |
| | | | SUBTOTAL $ | 500 | | |

*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.

Statement covers period
from 1/1/12
through 6/30/12

SCHEDULE C
CALIFORNIA FORM 460



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| 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) |
|---|---|---|---|---|---|---|---|
| 5/6/12 | Vellano Country Club [redacted] | ☐IND ☐COM ☒OTH ☐PTY ☐SCC | | golf foursome | 400.00 | 400.00 | |
| 5/6/12 | The Frame Salon [redacted] | ☐IND ☐COM ☒OTH ☐PTY ☐SCC | | Beauty Services | 495.00 | 495.00 | |
| | | ☐IND ☐COM ☐OTH ☐PTY ☐SCC | | | | | |
| | | ☐IND ☐COM ☐OTH ☐PTY ☐SCC | | | | | |

*Attach additional information on appropriately labeled continuation sheets.* SUBTOTAL $ 895

### Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) ..... $ 895
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $ 1505
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 $ 2400

*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.

Statement covers period
from 1/1/12
through 6/30/12

CALIFORNIA FORM 460



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

**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 |
|---|---|---|---|
| Amy Trujillo [redacted] | CNS | Consulting | 550.00 |
| Claudia's Catering. [redacted] | FND | Catering | 1150.00 |
| City of Chino Hills [redacted] | FND | Venue + Licensing | 537.00 |

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

SUBTOTAL $ 2237

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 4195
2. Unitemized payments made this period of under $100 ..... $ 755
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 $ 4950

# Schedule E (Continuation Sheet) Payments Made

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

Statement covers period
from 1/1/12
through 6/30/12

CALIFORNIA FORM 460



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

**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/spons |
| 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 |
|---|---|---|---|
| Reinberger Printwerks | FND | Invitations | 290 - |
| US Postmaster | POS | Stamps | 238- |
| Ecko Products | FND | Promotional Items | 539- |
| Staples | FND | Copies & Paper | 119 - |
| Creative Touch Communications | WEB | Graphic Design Svcs. | 400 - |

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

SUBTOTAL $ 1586

# 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 1-1-12
through 6-30-12

CALIFORNIA FORM **460**

Page 12 of 13

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Cynthia Moran for City Council 2012

I.D. NUMBER 1338698

**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 |
|---|---|---|---|
| Vertical response Inc | FND | E-Mail Marketing | $286.00 |
| Brenda Gonzalez | FND | linen Rentals | $86.00 |
| | | | |
| | | | |
| | | | |

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

SUBTOTAL $ 372

## Schedule I
## Miscellaneous Increases to Cash

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

Statement covers period
from 1/1/12
through 6/30/12

SCHEDULE I
CALIFORNIA FORM 460
Page 13 of 13

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| DATE RECEIVED | FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | DESCRIPTION OF RECEIPT | AMOUNT OF INCREASE TO CASH |
|---|---|---|---|
| 5/6/12 | Paragon Packaging Solutions [redacted] | Silent Auction Purchase | $200.00 |
| 5/6/12 | Carl & Kim Weidman [redacted] | Silent Auction Purchase | $110.00 |
| 5/6/12 | Dan Fox [redacted] | Silent Auction Purchase | $100.00 |
| | | | |
| | | | |

*Attach additional information on appropriately labeled continuation sheets.*

SUBTOTAL $ 410

### Schedule I Summary

1. Itemized increases to cash this period. ..... $ 410
2. Unitemized increases to cash of under $100 this period. ..... $ 315
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) ..... $ _____
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) ..... TOTAL $ 725

# Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

Original

COVER PAGE

Date Stamp

RECEIVED

2012 OCT -4 PM 2:39

OFFICE OF CITY CLERK
CHINO HILLS

CALIFORNIA FORM 460

Page 1 of 14

For Official Use Only

SEE INSTRUCTIONS ON REVERSE

**Statement covers period**
from 7/1/12
through 9/30/12

**Date of election if applicable**
(Month, Day, Year)
11/6/12

## 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

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

Cynthia Moran for City Council 2012

[redacted]

OPTIONAL: FAX / E-MAIL ADDRESS

## Treasurer(s)

NAME OF TREASURER
Derek Williams

MAILING ADDRESS
[redacted]

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 [redacted] schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and

Executed on 10-4-12 (Date) By [redacted]

Executed on 10-4-12 (Date) By [redacted] Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on _____ (Date) By _____ Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on _____ (Date) By _____ Signature of Controlling Officeholder, Candidate, State Measure Proponent

# Recipient Committee Campaign Statement Cover Page — Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA FORM **460**



## 5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Cynthia Moran

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

China Hills City Council

[redacted]

***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 7/1/12
through 9/30/12

CALIFORNIA FORM **460**

Page 3 of 14

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

## Contributions Received

| | | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|---|---|---|---|
| 1. Monetary Contributions | *Schedule A, Line 3* | $ 7515- | $ 16,553- |
| 2. Loans Received | *Schedule B, Line 3* | 0 | 0 |
| 3. SUBTOTAL CASH CONTRIBUTIONS | *Add Lines 1 + 2* | $ 7515- | $ 16,553- |
| 4. Nonmonetary Contributions | *Schedule C, Line 3* | 0 | 2400- |
| 5. TOTAL CONTRIBUTIONS RECEIVED | *Add Lines 3 + 4* | $ 7515- | $ 18,953- |

## Expenditures Made

| | | | |
|---|---|---|---|
| 6. Payments Made | *Schedule E, Line 4* | $ 16,183- | $ 21,133 |
| 7. Loans Made | *Schedule H, Line 3* | 0 | 0 |
| 8. SUBTOTAL CASH PAYMENTS | *Add Lines 6 + 7* | $ 16,183- | $ 21,133 |
| 9. Accrued Expenses (Unpaid Bills) | *Schedule F, Line 3* | 0 | 0 |
| 10. Nonmonetary Adjustment | *Schedule C, Line 3* | 0 | 2400- |
| 11. TOTAL EXPENDITURES MADE | *Add Lines 8 + 9 + 10* | $ 16,183- | $ 23,533- |

## Current Cash Statement

| | | |
|---|---|---|
| 12. Beginning Cash Balance | *Previous Summary Page, Line 16* | $ 20,831- |
| 13. Cash Receipts | *Column A, Line 3 above* | 7515- |
| 14. Miscellaneous Increases to Cash | *Schedule I, Line 4* | 0 |
| 15. Cash Payments | *Column A, Line 8 above* | 16,183- |
| 16. **ENDING CASH BALANCE** | *Add Lines 12 + 13 + 14, then subtract Line 15* | $ 12,163- |

*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 7/1/12
through 9/30/12

CALIFORNIA FORM **460**



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| 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) |
|---|---|---|---|---|---|---|
| 7/18/12 | Scott Kaplan [redacted] | ☒IND ☐COM ☐OTH ☐PTY ☐SCC | Realtor CBRE | $1000.00 | $1000.00 | |
| 8/1/12 | Pamela Edwards Swift [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Attorney Self-employed. | $350.00 | $350.00 | |
| 8/25/12 | Michael Rosen [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Senior VP Genco ATC | $250.00 | $250.00 | |
| 8/27/12 | The Rovira Group, LLC [redacted] | ☐IND ☐COM ☑OTH ☐PTY ☐SCC | | $100.00 | $100.00 | |
| 8/27/12 | Treh Partners II LLC [redacted] | ☐IND ☐COM ☑OTH ☐PTY ☐SCC | | $1000.00 | $1000.00 | |
| | | | SUBTOTAL $ | $2700.00 | | |

### Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 7025-
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 490-
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL $ 7515-

*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 7/1/12
through 9/30/12

CALIFORNIA FORM 460

Page 5 of 14

NAME OF FILER: Cynthia Moran for City Council 2012

I.D. NUMBER: 1338698

| 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) |
|---|---|---|---|---|---|---|
| 9/1/12 | Jerry Foster [redacted] | ☒IND ☐COM ☐OTH ☐PTY ☐SCC | Retired | $125.00 | $225.00 | |
| 8/27/12 | School Portraits by Adams [redacted] | ☐IND ☐COM ☑OTH ☐PTY ☐SCC | | $500.00 | $500.00 | |
| 9/8/12 | Dan & Lisa Fox [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Biologist Biologist Services, Inc. | $250.00 | $250.00 | |
| 9/6/12 | Los Serranos Golf Club [redacted] | ☐IND ☐COM ☒OTH ☐PTY ☐SCC | | $300.00 | $550.00 | |
| 9/8/12 | Peter Rogers [redacted] | ☒IND ☐COM ☐OTH ☐PTY ☐SCC | owner Peter Rogers Photography | $250.00 | $375.00 | |
| | | | SUBTOTAL $ | 1425- | | |

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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 7/1/12
through 9/30/12

CALIFORNIA FORM **460**

Page 6 of 14

NAME OF FILER: Cynthia Moran for City Council 2012

I.D. NUMBER: 1338698

| 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) |
|---|---|---|---|---|---|---|
| 9/8/12 | Platinum Cargo Logistics Inc. [redacted] | ☐IND ☐COM ☑OTH ☐PTY ☐SCC | | $250.00 | $250.00 | |
| 9/8/12 | James & Pamela Nixon [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | teacher CVUSD | $250.00 | $250.00 | |
| 8/27/12 | Douglas & Priscilla DuckWorth [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | | $250.00 | $250.00 | |
| 9/8/12 | Barry Fischer [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | retired | $250.00 | $250.00 | |
| 9/8/12 | Kathleen Smith [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Director of Sales Time Warner | $250.00 | $250.00 | |
| | | | SUBTOTAL $ | $1250.00 | | |

*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 7/1/12
through 9/30/12

CALIFORNIA FORM 460

Page 7 of 14

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| 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) |
|---|---|---|---|---|---|---|
| 9/4/12 | Paris & Maria Roumbos [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Detective LAPD | $100.00 | $100.00 | |
| 9/5/12 | John Le Blanc [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Attorney Barger & Wolen | $250.00 | $250.00 | |
| 9/16/12 | William Shannon [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Retired | $100.00 | $100.00 | |
| 9/8/12 | John Solomon [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | President Liquorama, Inc. | $250.00 | $400.00 | |
| 9/14/12 | Semora Energy [redacted] | ☐IND ☐COM ☑OTH ☐PTY ☐SCC | | $250.00 | $250.00 | |
| | | | SUBTOTAL $ | $950.00 | | |

*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 7/1/12
through 9/30/12

CALIFORNIA FORM **460**

Page 8 of 14

NAME OF FILER: Cynthia Moran for City Council 2012

I.D. NUMBER: 1338698

| 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) |
|---|---|---|---|---|---|---|
| 9/21/12 | Grace Hickey [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Account Services Novel Ingredients | $100.00 | $100.00 | |
| 9/22/12 | Ed Graham [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Councilman City of Chino Hills | $250.00 | $250.00 | |
| 9/26/12 | Debra Hernandez [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Facilities Management Toyota Incorp. | $100.00 | $100.00 | |
| 9/27/12 | Lewis Pacific Partners [redacted] | ☐IND ☐COM ☑OTH ☐PTY ☐SCC | | $250.00 | $1250.00 | |
| | | ☐IND ☐COM ☐OTH ☐PTY ☐SCC | | | | |
| | | | SUBTOTAL $ | 700.00 | | |

*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
## Payments Made

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

Statement covers period
from 7/1/12
through 9/30/12

SCHEDULE E
CALIFORNIA FORM **460**

Page 9 of 14

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

**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 |
|---|---|---|---|
| Champian Newspaper | PRT | Ads | 1211 00 |
| Graphics Details | CMP | Banners | 1393 00 |
| Chino Hills High School Football Boosters | PRT | Full page Ad | 385 - |

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

**SUBTOTAL $** 2989 00

## Schedule E Summary

| | | |
|---|---|---|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.) | $ | 16042 |
| 2. Unitemized payments made this period of under $100 | $ | 141 |
| 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** | $ | 16,183 |

**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 7/1/12
through 9/30/12

CALIFORNIA FORM **460**

Page 10 of 14

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

**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 |
|---|---|---|---|
| Chick-Fil-A | | Campaign Meeting | 142— |
| City of Chino Hills | | Sign Deposit & Candidate Statement | 1726 00 |
| Inland Empire RLVG | LIT | Slate Mailings | 446 00 |
| NTLC Newsletter | LIT | Slate Mailings | 547 00 |
| Same Prop 13 | LIT | Slate Mailings | 653 00 |

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

SUBTOTAL $ 3514 00

SCHEDULE E (CONT.)

# Schedule E (Continuation Sheet) Payments Made

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

Statement covers period
from 7/1/12
through 9/30/12

CALIFORNIA FORM 460



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

**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 |
|---|---|---|---|
| California Public Safety | LIT | Slate Mailings | 699.00 |
| SBAC Newsletter | LIT | Slate Mailings | 417.00 |
| Womans Voice | LIT | Slate Mailings | 387.00 |
| COPS Voter Guide | LIT | Slate Mailings | 842.00 |
| CA Latine Voters Guide | LIT | Slate Mailings | 424.00 |

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

SUBTOTAL $ 2769.00

# Schedule E (Continuation Sheet) Payments Made

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

Statement covers period
from 7/1/12
through 9/30/12

CALIFORNIA FORM 460



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Cynthia Moran for City Council 2012

I.D. NUMBER: 1338698

**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 |
|---|---|---|---|
| Conservations Vote Guide | LIT | Slate Mailings | 443.00 |
| California Taxpayer | LIT | Slate Mailings | 402.00 |
| Election Digest G2012 | LIT | Slate Mailings | 809.00 |
| Ecko Products | CMP | Promotional items | 723.00 |
| Reinberger | | Business cards & flyers | 600.00 |

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

SUBTOTAL $ 2977.00

**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 7/1/12
through 9/30/12

CALIFORNIA FORM **460**

Page 13 of 14

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Cynthia Moran for City Council 2012

I.D. NUMBER 1338698

**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/sponso. |
| 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 |
|---|---|---|---|
| Cogs South Signs | | Campaign signs | 1374 00 |
| Sheila Dufresne | CNS | | 200 00 |
| Ragland Graphic | PRT | | 1250 00 |
| Rubicon Communications | CNS | | 500 00 |
| Lauren Nybor | | graphic design | 104 00 |

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

SUBTOTAL $ 3428 00

# 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 7/1/12 through 9/30/12

CALIFORNIA FORM 460



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Cynthia Moran for City Council 2012

I.D. NUMBER 1338698

**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/sponso |
| 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 |
|---|---|---|---|
| Institute for FAIR Elections | LIT | Slate Mailings | 260 00 |
| Staples | | Office Supplies | 105 00 |
| | | | |
| | | | |
| | | | |

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

SUBTOTAL $ 365 00

# RECIPIENT COMMITTEE CAMPAIGN STATEMENT FORM 460 AMENDMENT REQUEST

**INSTRUCTIONS:** A check mark indicates an amendment is required. File your amended statement at:

Statement Verification Date: ___/___/___

Period Covered by Statement: 07/01/12 to 09/30/12 Name: Cynthia Moran

## AMENDMENT FORM

### Cover Page
- O Period covered (for all schedules)
- O Address was incomplete
- O Signature missing
- O Treasurer information was incomplete ID# missing
- ☒ Other - see comments section Primarily Formed so §7 needs to be completed not §5

### Summary Page
- O Column A, Line ___ does not match with applicable schedule
- O You indicated that schedule(s) were attached. However, the schedules were not attached to the statement.
- O Lines _____ were left blank in column A or B
- O Other - see comments section

### Schedule A
- O Date received column was left blank
- O Street address for contributor(s) was incomplete
- O Contributor code was not marked for contributor(s)
- ☒ Occupation & employer column was left blank or incomplete for individual contributor(s) Those that are self employed need name of business
- O Amount received this period was missing
- O Cumulative to date column (Jan 1 - Dec 31) was missing
- O Summary section was incomplete
- O Other - see comments section

### Schedule B
- O Street address for contributor(s) was incomplete
- O Contributor code was not marked for contributor(s)
- O Occupation & employer column was left blank or incomplete for individual contributor(s)
- O Outstanding balance beginning this period was left blank
- O Amount received this period was left blank
- O Amount paid or forgiven this period was left blank
- O Outstanding balance at close of this period was left blank or incomplete
- O Interest paid this period was left blank or incomplete
- O Original amount of loan was left blank or incomplete
- O Date incurred for original loan amount was missing
- O Cumulative to date column (Jan 1 - Dec 31) was missing
- O Summary section was incomplete
- O Guarantor information was incomplete
- O Other - see comments section

### Schedule C
- O Date received column was left blank
- O Street address for contributor(s) was incomplete
- O Contributor code was not marked for contributor(s)
- O Occupation & employer column was left blank or incomplete for individual contributor(s)
- O Description of goods/services was missing
- O Amount/fair market value was missing
- O Cumulative to date (Jan 1 - Dec 31) was missing
- O Summary section was incomplete
- O Other - see comments section

### Schedule D
- O Date was missing
- O Support/oppose box was not marked
- O Type of payment was missing
- O Description (if required) was missing
- O Amount this period was missing
- O Cumulative to date column (Jan 1 - Dec 31) was missing
- O Summary section was incomplete
- O Other - see comments section

### Schedule E
- ☒ Street address of payee was incomplete no addresses given
- ☒ A code or description of payment was missing inconsistent w/ codes & descriptions
- O Amount paid was missing
- O Summary section was incomplete
- O Other - see comments section

### Schedule F
- O Street address of creditor was incomplete
- O A code or description of payment was missing
- O Outstanding balance beginning of this period was missing
- O Amount incurred this period was missing
- O Amount paid this period was missing
- O Outstanding balance at close of this period was missing
- O Summary section was incomplete
- O Other - see comments section

continued on other side...

# Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

Original

(8)

Date Stamp

RECEIVED
2012 OCT 25 PM 12:46
OFFICE OF CITY CLERK
CHINO HILLS

COVER PAGE

CALIFORNIA FORM **460**

Page 1 of 8

For Official Use Only

SEE INSTRUCTIONS ON REVERSE

**Statement covers period**
from 10/1/12
through 10/20/12

**Date of election if applicable:**
(Month, Day, Year)
11-6-12

## 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

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Cynthia Moran for City Council 2012

[redacted]

OPTIONAL: FAX / E-MAIL ADDRESS

## Treasurer(s)

NAME OF TREASURER
Derek Williams

[redacted]

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 [redacted] edules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is t

Executed on 10/25/12 (Date) By [redacted]

Executed on 10/25/12 (Date) By [redacted]

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

# Recipient Committee Campaign Statement Cover Page — Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA FORM **460**

Page 2 of 8

## 5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Cynthia Moran

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

Chino Hills City Council

[redacted]

***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 10/1/12
through 10/20/12

CALIFORNIA FORM **460**

Page 3 of 8

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Cynthia Moran for City Council 2012

I.D. NUMBER: 1338698

## Contributions Received

| | | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|---|---|---|---|
| 1. Monetary Contributions | Schedule A, Line 3 | $ 2091 00 | $ 18,644- |
| 2. Loans Received | Schedule B, Line 3 | 1000- | 1000- |
| 3. SUBTOTAL CASH CONTRIBUTIONS | Add Lines 1 + 2 | $ 3091- | $ 19,644- |
| 4. Nonmonetary Contributions | Schedule C, Line 3 | 350- | 2750- |
| 5. TOTAL CONTRIBUTIONS RECEIVED | Add Lines 3 + 4 | $ 3441- | $ 22,394- |

## Expenditures Made

| | | | |
|---|---|---|---|
| 6. Payments Made | Schedule E, Line 4 | $ 13,061- | $ 34,194- |
| 7. Loans Made | Schedule H, Line 3 | 0 | 0 |
| 8. SUBTOTAL CASH PAYMENTS | Add Lines 6 + 7 | $ 13,061- | $ 34,194- |
| 9. Accrued Expenses (Unpaid Bills) | Schedule F, Line 3 | 0 | 0 |
| 10. Nonmonetary Adjustment | Schedule C, Line 3 | 350- | 350- |
| 11. TOTAL EXPENDITURES MADE | Add Lines 8 + 9 + 10 | $ 13,411- | $ 36,944- |

## Current Cash Statement

| | | |
|---|---|---|
| 12. Beginning Cash Balance | Previous Summary Page, Line 16 | $ 12,163- |
| 13. Cash Receipts | Column A, Line 3 above | 3091- |
| 14. Miscellaneous Increases to Cash | Schedule I, Line 4 | 0 |
| 15. Cash Payments | Column A, Line 8 above | 13,061- |
| 16. **ENDING CASH BALANCE** | Add Lines 12 + 13 + 14, then subtract Line 15 | $ 2,193- |

*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 10/1/12
through 10/20/12

CALIFORNIA FORM **460**

Page 4 of 8

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Cynthia Moran for City Council 2012

I.D. NUMBER: 1338698

| 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) |
|---|---|---|---|---|---|---|
| 10/4/12 | James & Joanna Hermanson [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Absolutly Italian, Inc. Self-Employed | $100.00 | $100.00 | |
| 10/17/12 | Safety Employees Benefit San Bernardino | ☐IND ☐COM ☑OTH ☐PTY ☐SCC | | $500.00 | $500.00 | |
| 10/18/12 | Angela Turner [redacted] | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | owner Launch Lady Marketing | $150.00 | $150.00 | |
| 10/18/12 | Building Industry Assoc. of Southern California | ☐IND ☐COM ☑OTH ☐PTY ☐SCC | | $500.00 | $500.00 | |
| 10/18/12 | Scott Morley | ☑IND ☐COM ☐OTH ☐PTY ☐SCC | Financial Adviser Solutions Insurance and Investments | $100.00 | $100.00 | |
| | | | **SUBTOTAL $** | $1350.00 | | |

### Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ $1350.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ $741.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL $** $2091.00

*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 B – Part 1
## Loans Received

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

Statement covers period
from 10/1/12
through 10/20/12

CALIFORNIA FORM 460



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | (a) OUTSTANDING BALANCE BEGINNING THIS PERIOD | (b) AMOUNT RECEIVED THIS PERIOD | (c) AMOUNT PAID OR FORGIVEN THIS PERIOD * | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD | (e) INTEREST PAID THIS PERIOD | (f) ORIGINAL AMOUNT OF LOAN | (g) CUMULATIVE CONTRIBUTIONS TO DATE |
|---|---|---|---|---|---|---|---|---|
| Dave Moran [redacted]<br>†☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | Sales<br>Paragon Packaging Solutions | $ | $ 1000.00 | ☐ PAID<br>$<br>☐ FORGIVEN<br>$ | $<br>DATE DUE | %<br>RATE<br>$ | $<br>DATE INCURRED | CALENDAR YEAR<br>$<br>PER ELECTION**<br>$ |
| †☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | | $ | $ | ☐ PAID<br>$<br>☐ FORGIVEN<br>$ | $<br>DATE DUE | %<br>RATE<br>$ | $<br>DATE INCURRED | CALENDAR YEAR<br>$<br>PER ELECTION**<br>$ |
| †☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC | | $ | $ | ☐ PAID<br>$<br>☐ FORGIVEN<br>$ | $<br>DATE DUE | %<br>RATE<br>$ | $<br>DATE INCURRED | CALENDAR YEAR<br>$<br>PER ELECTION**<br>$ |
| | | SUBTOTALS $ | $ 1000.00 | $ | $ | $ | | |

(Enter (e) on Schedule E, Line 3)

## Schedule B Summary

1. Loans received this period ..... $ 1000.00
   (Total Column (b) plus unitemized loans of less than $100.)
2. Loans paid or forgiven this period ..... $ -0-
   (Total Column (c) plus loans under $100 paid or forgiven.)
   (Include loans paid by a third party that are also itemized on Schedule A.)
3. Net change this period. (**Subtract** Line 2 from Line 1.) ..... **NET** $ 1000.00
   Enter the net here and on the Summary Page, Column A, Line 2.
   (May be a negative number)

†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

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

# 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 10/1/12
through 10/20/12

Page 6 of 8

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| 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) |
|---|---|---|---|---|---|---|---|
| 10/8/12 | Capital Communications | ☐IND ☐COM ☑OTH ☐PTY ☐SCC | | Consulting Services | $350.00 | | |
| | | ☐IND ☐COM ☐OTH ☐PTY ☐SCC | | | | | |
| | | ☐IND ☐COM ☐OTH ☐PTY ☐SCC | | | | | |
| | | ☐IND ☐COM ☐OTH ☐PTY ☐SCC | | | | | |

*Attach additional information on appropriately labeled continuation sheets.* **SUBTOTAL $** 350.00

### Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) ..... $ 350.00
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $ 0
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 $** 350.00

*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 10/1/12
through 10/20/12

CALIFORNIA FORM **460**

Page 7 of 8

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Cynthia Moran for City Council 2012

I.D. NUMBER: 1338698

**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 |
|---|---|---|---|
| JC Evans | LIT | | $ 8867.00 |
| Cogs South | | Campaign Signs | $ 695.00 |
| Chino Champian Newspaper | PRT | Ads | $ 3031.00 |

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

**SUBTOTAL $** 12,593.00

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 13,046.00
2. Unitemized payments made this period of under $100 ..... $ 15.00
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 $** 13,061.00

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

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

Statement covers period
from 10/1/12
through 10/20/12

CALIFORNIA FORM **460**



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

**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 |
|---|---|---|---|
| Graphic Details | CMP | Banners | $103.00 |
| Capital Communications | | Services - Campaign Consulting | $350.00 |
| | | | |
| | | | |
| | | | |

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

**SUBTOTAL $** 453.00

# Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

(12) Original

COVER PAGE

Date Stamp
RECEIVED
2013 JAN 29 AM 7:38
OFFICE OF CITY CLERK
CHINO HILLS

CALIFORNIA FORM 460

Page 1 of 6

For Official Use Only

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 10/21/12
through 12/31/12

Date of election if applicable: (Month, Day, Year)
N/A

## 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

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Cynthia Moran for City Council 2012

[redacted]

## Treasurer(s)

NAME OF TREASURER
Derek Williams

[redacted]

OPTIONAL: FAX / E-MAIL ADDRESS

## 4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my k[redacted]edules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 1-28-13 (Date) By [redacted]

Executed on 1-28-13 (Date) By [redacted] (Signature of [redacted]nsor)

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

# Recipient Committee Campaign Statement Cover Page — Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA FORM **460**

Page 2 of 6

## 5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Cynthia Moran

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

Chino Hills City Council

[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 10 | 21 | 12
through 12 | 31 | 12

CALIFORNIA FORM **460**

Page 3 of 6

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Cynthia Moran for City Council 2012

I.D. NUMBER 1338698

## Contributions Received

| | | Column A (TOTAL THIS PERIOD FROM ATTACHED SCHEDULES) | Column B (CALENDAR YEAR TOTAL TO DATE) |
|---|---|---|---|
| 1. Monetary Contributions | Schedule A, Line 3 | $ 3096- | $ 21,740- |
| 2. Loans Received | Schedule B, Line 3 | -0- | 1000- |
| 3. SUBTOTAL CASH CONTRIBUTIONS | Add Lines 1 + 2 | $ 3096- | $ 22,740- |
| 4. Nonmonetary Contributions | Schedule C, Line 3 | -0- | 2,750- |
| 5. TOTAL CONTRIBUTIONS RECEIVED | Add Lines 3 + 4 | $ 3096- | $ 25,490 |

## Expenditures Made

| | | | |
|---|---|---|---|
| 6. Payments Made | Schedule E, Line 4 | $ 4878- | $ 39,072- |
| 7. Loans Made | Schedule H, Line 3 | -0- | -0- |
| 8. SUBTOTAL CASH PAYMENTS | Add Lines 6 + 7 | $ 4878- | $ 39,072- |
| 9. Accrued Expenses (Unpaid Bills) | Schedule F, Line 3 | -0- | -0- |
| 10. Nonmonetary Adjustment | Schedule C, Line 3 | -0- | 350- |
| 11. TOTAL EXPENDITURES MADE | Add Lines 8 + 9 + 10 | $ 4878- | $ 41,822 |

## Current Cash Statement

| | | |
|---|---|---|
| 12. Beginning Cash Balance | Previous Summary Page, Line 16 | $ 2193- |
| 13. Cash Receipts | Column A, Line 3 above | 3096- |
| 14. Miscellaneous Increases to Cash | Schedule I, Line 4 | -0- |
| 15. Cash Payments | Column A, Line 8 above | 4878- |
| 16. **ENDING CASH BALANCE** | Add Lines 12 + 13 + 14, then subtract Line 15 | $ 411- |

*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 10/21/12
through 12/31/12

CALIFORNIA FORM **460**



SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

| 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) |
|---|---|---|---|---|---|---|
| | | ☐IND ☐COM ☐OTH ☐PTY ☐SCC | | | | |
| | | ☐IND ☐COM ☐OTH ☐PTY ☐SCC | | | | |
| | | ☐IND ☐COM ☐OTH ☐PTY ☐SCC | | | | |
| | | ☐IND ☐COM ☐OTH ☐PTY ☐SCC | | | | |
| | | ☐IND ☐COM ☐OTH ☐PTY ☐SCC | | | | |
| | | | **SUBTOTAL $** | | | |

## Schedule A Summary

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) ..... $ 0
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 3096—
3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL $** 3096—

*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.

Statement covers period
from 10/21/12
through 12/31/12

SCHEDULE E
CALIFORNIA FORM **460**

Page 5 of 6

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

**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 |
|---|---|---|---|
| Rubucon Communications | CNS | Services- Campaign Consulting | $1100.00 |
| Los Serranos Country Club | FND | Event - | $1163.00 |
| DAVID Moran | | Loan Repayment | $500.00 |

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

**SUBTOTAL $** 2763.00

## Schedule E Summary

| | | |
|---|---|---|
| 1. | Itemized payments made this period. (Include all Schedule E subtotals.) | $ 4674.00 |
| 2. | Unitemized payments made this period of under $100 | $ 204.00 |
| 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** | $ 4878.00 |

# 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 10/21/12
through 12/31/12

CALIFORNIA FORM 460

Page 6 of 6

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Cynthia Moran for City Council 2012

I.D. NUMBER
1338698

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

| | | | | | |
|---|---|---|---|---|---|
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| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
| CVC | civic donations | PET | petition circulating | TEL | t.v. or cable airtime and production costs |
| FIL | candidate filing/ballot fees | PHO | phone banks | TRC | candidate travel, lodging, and meals |
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| LEG | legal defense | PRO | professional services (legal, accounting) | VOT | voter registration |
| LIT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, e-mail) |

| NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---|---|---|
| Kiwanis Foundations | CVC | Donation - Boat Parade | $200.00 |
| Alston Tascom, Inc. | | Robo Calls | $710.00 |
| Chino Champion | PRT | Publications | $901.00 |
| Graphic Designs/Details | | Banners | $100.00 |
| | | | |

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

SUBTOTAL $ 1911.00