Ci	ampaign Statement over Page			Date	Stamp	
		Statement covers period from 07/01/2022	Date of election if applicable: (Month, Day, Year)	22 SEP 30	PH 3: 29	Page of For Official Use Only
SEI	E INSTRUCTIONS ON REVERSE	through	11/08/2022			
1.	Type of Recipient Committee: All Committees - Cor	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:	*****		
	State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored Uso Complete Part 6) Primarily Formed Candidate/ Officeholder Committee Also Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 T Amendment (Explain b	nt t Fermination)		terly Statement ial Odd-Year Report
3.		NUMBER 451786	Treasurer(s)			
	COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)		NAME OF TREASURER			
	GREG KUSTER FOR MORENO VALLEY CITY CO	UNCIL 2022-DISTRICT 4	LINDA KUSTER MAILING ADDRESS			
			MAILING AUDRESS			
	STREET ADDRESS (NO P.O. BOX)		CITY		STATE ZIP CO	AREA CODE/PHONE
			MORENO VALLEY		CA 9255	55
	CITY STATE ZIP CO		NAME OF ASSISTANT TREASU	RER, IF ANY	*	× 3) -11 11 11 -11
	MORENO VALLEY CA 9255 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX		MAILING ADDRESS			
	CITY STATE ZIP CO	DE AREA CODE/PHONE	CITY		STATE ZIP CO	DE AREA CODE/PHONE
	OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDR	RESS		
ı.	Verification					
	I have used all reasonable diligence in preparing and reviewin	•		d herein and in t	he attached sch	edules is true and complete. I
	certify under penalty of perjury under the laws of the State of	California that the foregoing is frue and o	correct.I			
	Executed on	В		surer		
	Executed on	By Signature of Control	iling Officeholder, Candidate, State Measure P	Proponent or Respons	ible Officer of Sponso	or .
	Executed onDate	BySi	gnature of Controlling Officeholder, Candidate,	, State Measure Propo	pnent	
	Executed on	BySi	gnature of Controlling Officeholder, Candidate,	State Measure Propo	onent	

FPPC Form 460 (Jan/2016))
FPPC Advice: advice@fppc.ca.gov (866/275-3772)

COVER PAGE

Recipient Committee Campaign Statement Cover Page — Part 2

5.

CALIFORNIA 460

Page 2 of 11

Officeholder or Candidate Controlled Commi	ittee			6.	Primarily Formed Ballot	Measure Com	nmittee		
NAME OF OFFICEHOLDER OR CANDIDATE					NAME OF BALLOT MEASURE				
GREGORY (GREG) KUSTER									
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	RICT NUMBER IF	APPLICA	ABLE)		BALLOT NO. OR LETTER	JURISDICTION		In	SUPPORT
CITY COUNCIL MEMEBER, CITY OF MORENO	VALLEY DIS	TRICT	4						OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CI		STATE	ZIP		Identify the controlling officer	older eardidate	or state me	dalika nrana	nent if any
MORENO V	VALLEY	CA	92555					sasure propo	nent, it any.
					NAME OF OFFICEHOLDER, CAN	DIDATE, OR PROP	ONENI		
Related Committees Not Included in this Statement included in this statement that are controlled by you or contributions or make expenditures on behalf of your candi	are primarily fo				OFFICE SOUGHT OR HELD		DI	ISTRICT NO. II	FANY
COMMITTEE NAME	I.D. NUMBER								, -
NAME OF TREASURER	CONTROLLED	СОММІ		7.	Primarily Formed Candi officeholder(s) or candidate(s)	date/Officeho	Ider Com	mittee List marily formed	names of
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. B					NAME OF OFFICEHOLDER OR C	ANDIDATE OF	FICE SOUGH	HT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP CO		REA COL	DE/PHONE		NAME OF OFFICEHOLDER OR C	ANDIDATE OF	FICE SOUGH	HT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	1.D. NUMBER				NAME OF OFFICEHOLDER OR C	ANDIDATE OF	FICE SOUGH	HT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLE				NAME OF OFFICEHOLDER OR	ANDIDATE OF	FICE SOUGH	HT OR HELD	SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. E	BOX)	□ №)						☐ OPPOSE
CITY STATE ZIP C	CODE A	REA CO	DE/PHONE		Attac	ch continuation si	heets If nece	essary	

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Summary Page	from	FORM 460
SEE INSTRUCTIONS ON REVERSE	through	Page 3 of 11
NAME OF FILER		I.D. NUMBER
GREG KUSTER FOR MORENO VALLEY CITY COUNCIL 2022-DISTRICT 4		1451786

Contributions Received	COlumn A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions Schedule A, Line 3 2. Loans Received Schedule B, Line 3 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 4. Nonmonetary Contributions Schedule C, Line 3 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	525.00	\$\frac{3200.00}{525.00}\$ \$\frac{3725.00}{350.00}\$ \$\frac{4075.00}{350.00}\$	1/1 through 6/30 7/1 to Date 20. Contributions Received \$\$ 21. Expenditures Made \$\$
Expenditures Made 6. Payments Made	0.00	\$\frac{1834.14}{0.00}\$ \$\frac{1834.14}{154.00}\$ 0.00 \$\frac{1988.14}{0.00}\$	Expenditure Limit Summary for State Candidates 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) Date of Election (mm/dd/yy)
Current Cash Statement 12. Beginning Cash Balance	3725.00 0.02 1834.14 \$ 1890.88 \$ 0.00	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).	*Amounts in this section may be different from amounts reported in Column B.
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ 595.00		FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772

Schedule A **Monetary Contributions Received**

Amounts may be rounded to whole dollars.

SCHEDULE A

Monetary	Contributions Received	to	whole dollars.	Statement cov from	ers period	CALIFORN FORM	^{IA} 460
SEE INSTRUCTION	ONS ON REVERSE			through09/24/20	22	Page 4	_ of
NAME OF FILER GREG KUST	TER FOR MORENO VALLEY CITY COUNCIL 2022-DIS	STRICT 4			3 1 3	I.D. NUMBER 1451786	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	R ELECTION TO DATE REQUIRED)
08/18/2022	JAMIL DADA RIVERSIDE CA 92501	☑ IND □ COM □ OTH □ PTY □ SCC	VICE PRESIDENT PROVIDENT BANK	500.00	500.00	500.00	0
08/22/2022	JIM HASTINGS MORENO VALLEY, CA 92555	☑ IND □ COM □ OTH □ PTY □ SCC	RETIRED	1000.00	1000.00	1000.	00
08/25/2022	MORENO VALLEY CA 92553	☑ IND □ COM □ OTH □ PTY □ SCC	CITY COUNCIL MEMBER CITY OF MORENO VALLEY	100.00	100.00	100.0	0
08/22/2022	TERRY KENNEDY MORENO VALLEY CA 92553	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	RETIRED	50.00	50.00	50.00	
09/04/2022	KRIS HOOD MORENO VALLEY CA 92553	ZIND COM OTH PTY SCC	HEAVY EQUIPMENT OPERATOR	100.00	100.00	100.0	0
			SUBTOTAL S	\$ 1750.00			
Amount re (Include a	A Summary eceived this period – itemized monetary contributions II Schedule A subtotals.)		\$	00.00	IND COM OTH	tributor Codes Individual Recipient Cor (other than P Other (e.g., bt Political Party	TY or SCC)
		ons of less that	Φ			- Small Contribu	utor Committee
	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Co	olumn A, Line 1	1.) TOTAL \$	00.00		FPPC Form	460 (Jan/2016))

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

Schedule A (Continuation Sheet) Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

				from07/01/2022		F	ORM 40U
	*			through09/24/20	22	Page _	
NAME OF FILER GREG KUST	ER FOR MORENO VALLEY CITY COUNCIL 2022-DIS				1.D. NU 14517	600	
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	CALENDAR Y	MULATIVE TO DATE PER E CALENDAR YEAR TO (JAN. 1 - DEC. 31) (IF RE	
09/08/2022	DAVID CARLSON MORENO VALLEY, CA 92555	IND COM OTH PTY	PASTOR MORENO CHRISTIAN ASSEMBLY	500.00	500.00		500.00
09/14/2022	TITUS CARLSON MORENO VALLEY, CA 92555	DIND COM OTH PTY SCC	MARKETING USAF	200.00	200.00		200.00
09/15/2022	MICHAEL DOWNS CORONA, CA 92879	IND COM OTH PTY	EXECUTIVE DOWNS ENERGY	750.00	750.00		750.00
		□IND □COM □OTH □PTY □SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
			SUBTOTAL	\$ 1450.00			

*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

	Am	ounts may be rou	ınded				SCHED	ULE B - PART
Schedule B – Part 1 Loans Received	Aith	to whole dollars. Statement covers period from 07/01/2022			CALIFORN FORM	^{IA} 460		
SEE INSTRUCTIONS ON REVERSE					through09/24/20	022	Page 6	of
NAME OF FILER							I.D. NUMBER	-:
GREG KUSTER FOR MORENO VALLEY CI	TY COUNCIL 2022-DISTRIC	CT 4					1451786	
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)	OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT RECEIVED THIS PERIOD	AMOUNT PAIL OR FORGIVE THIS PERIOD	N BALANCE AT	INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTION TO DATE
GREGORY KUSTER	DIRECTOR OF OPERATIONS			100.00	\$ 525.00	0%	\$_625.00	625.00
	MARCH FIELD AIR MUSEUM	525.00	625.00	FORGIVEN	12/31/22	s_0	8/12/2022	PER ELECTION
TIND COM OTH PTY SCC		1		***************************************	DATE DUE		DATE INCURRED	V
				☐ PAID				CALENDARYEA
				\$. \$	%	\$	\$
				FORGIVEN		RATE		PER ELECTION
TO IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
				PAID				CALENDAR YEA
				s	\$	%	\$	\$
				FORGIVEN		RATE		PER ELECTION
[†] □ IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
		SUBTOTALS \$		\$	\$	\$		
Schedule B Summary 1. Loans received this period				\$ _62	25.00	(Enter (e) on Scheo	dule E, Line 3)	
(Total Column (b) plus unitemized loar 2. Loans paid or forgiven this period (Total Column (c) plus loans under \$10	***************************************			\$	00.00	- 11	Contributor Codes ND – Individual COM – Recipient C	
(Include loans paid by a third party the 3. Net change this period. (Subtract Lin Enter the net here and on the Summa	at are also itemized on Sche e 2 from Line 1.)			NET \$	25.00	C		PTY or SCC) business entity) ty

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

FPPC Form 460 (Jan/2016))
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

(May be a negative number)

Schedu Nonmoi	le C netary Contributions Received		Amounts may be rounded to whole dollars.		S	07/01/2022	eriod	CALIF FO	
SEE INSTRUC	TIONS ON REVERSE				thro	ugh		Page	of
	TER FOR MORENO VALLEY CITY COUNCI	L 2022-DISTR	ICT 4					1.D. NUM 145178	
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 GOODS OR SERV		AMOUNT/ FAIR MARKET VALUE	CALEND	ATIVE TO ATE AR YEAR DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
8/15/202 2	TITUS CARLSON MORENO VALLEY, CA 92555	IND COM OTH PTY	PHOTOGRAPHER	PHOTOGRAP	PHS	350.00	350.00		350.00
		□IND □COM □OTH □PTY □SCC							
		□IND □COM □OTH □PTY □SCC							
		□IND □COM □OTH □PTY □SCC							
Attach add	ditional information on appropriately labeled	continuation	sheets.	SUBTO	OTAL \$				
1. Amount	e C Summary received this period – itemized nonmonetar all Schedule C subtotals.)	y contribution	ıs.		\$_3	350.00	COI	(other th	nt Committee nan PTY or SCC)
2. Amount	received this period – unitemized nonmone	tary contribut	ions of less than \$100		\$	0.00	PT\	- Political	.g., business entity) Party ontributor Committee

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 \$

Schedule E Payments Made	Amounts may b to whole de			fro			FORNIA 460
SEE INSTRUCTIONS ON REVERSE				thr	ough_09/24/2022	Page .	of
NAME OF FILER						I.D. NU	MBER
GREG KUSTER FOR MORENO VALLEY CITY COUNCIL 2022-	DISTRICT 4					1451	786
CODES: If one of the following codes accurately describes	the payment, y	ou may e	nter the code.	Otherwise,	describe the payment		
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	MBR member com MTG meetings and OFC office expens PET petition circu PHO phone banks POL polling and s POS postage, deli PRO professional PRT print ads	d appearanceses lating urvey reseal very and me	es rch essenger services	RFD SAL TEL TRO TRS TSF VOT	t.v. or cable airtime and pro candidate travel, lodging, a staff/spouse travel, lodging	duction cos nd meals , and meals es of the sa	me candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER (.D. NUMBER)		CODE	OR	DESCRIPTI	ON OF PAYMENT		AMOUNT PAID
CITY OF MORENO VALLEY - CITY CLERK 14177 FREDERICK ST MORENO VALLEY, CA 92553		FIL					525.00
SQUARESIGNS 3520 VALHALLA DR BURBANK, CA 91505		CMP					266.86
NEXT DAY 8000 HASKELL AVE VAN NUYS, CA 91406		LIT		11.5%			379.70
* Payments that are contributions or independent expenditures must also be s	summarized on Sche	edule D.			s	UBTOTAL	\$ 1171.56
Schedule E Summary							
Itemized payments made this period. (Include all Schedule)	F subtotals \					\$	1434.20
Uniternized payments made this period of under \$100	•						399.94
3. Total interest paid this period on loans. (Enter amount from							0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Er							1834.14

Schedule E
(Continuation Sheet)
Payments Made

Amounts may be rounded

SCH	EDUL	EE	(CONT.)

(Continuation Sheet) Payments Made	to whole dollars.	07/01/2022 from	CALIFORNIA FORM	460
SEE INSTRUCTIONS ON REVERSE		through <u>09/24/2022</u>	Page o	of
NAME OF FILER			I.D. NUMBER	
GREG KUSTER FOR MORENO VALLEY CITY COUNCIL	2022-DISTRICT 4		1451786	
CODES: If one of the following codes accurately des	cribes the payment, you may enter the code. Other	rwise, describe the payment.		

COL	PES: If one of the following codes accurately describes	the	payment, yo	ou may enter the code.	Otherwise,	describe the payment.
CMP	campaign paraphernalia/misc.	MBR	member com	munications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and	appearances	RFD	returned contributions
	contribution (explain nonmonetary)*	OFC	office expens	es	SAL	campaign workers' salaries
	civic donations	PET	petition circula	ating	TEL	t.v. or cable airtime and production costs
	candidate filing/ballot fees	PHO	phone banks		TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and su	urvey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, deliv	very and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional s	services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads		WEB	information technology costs (internet, e-mail)
6						
	NAME AND ADDRESS OF PAYEE					

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	C	DESCRIPTION OF PAYMENT	AMOUNT PAID
AXIS APPAREL 21866 ALESSANDRO BLVD, STE A MORENO VALLEY, CA 92553	СМР			262.64

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

SUBTOTAL \$ 262.64

1451786

Schedule F Accrued Expenses (Unpaid Bills)	Amounts may be rounded to whole dollars.	Statement covers period from 07/01/2022	california 4	
SEE INSTRUCTIONS ON REVERSE		through	Page	of
NAME OF FILER			I.D. NUMBER	

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 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 independent expenditure supporting/opposing others (explain)* TSF transfer between committees of the same candidate/sponsor POS postage, delivery and messenger services legal defense PRO professional services (legal, accounting) VOT voter registration campaign literature and mailings LIT PRT print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
IONOS - 2 LOGAN SQUARE, 100 N 18TH ST SUITE 400, PHILADELPHIA, PA 19103	WEB	154.00	154.00	0.00	154.00
		,			
* Payments that are contributions or independent expenditures must also be	SUBTOTALS	\$.	•	\$

Schedule F Summary

	. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)	154.00
_		

2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and

GREG KUSTER FOR MORENO VALLEY CITY COUNCIL 2022-DISTRICT 4

May be a negative number

FPPC Form 460 (Jan/2016))

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

Schedule I Miscellaned	ous Increases to Cash	Amounts may be rounded to whole dollars.	Statement covers period from	CALIFORNIA 460 FORM of 11
NAME OF FILER GREG KUSTER	FOR MORENO VALLEY CITY COUNCIL 2022-DISTRICT 4			I.D. NUMBER 1451786
DATE RECEIVED	FULL NAME AND ADDRESS OF SQURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DE	ESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
Attach additio	onal information on appropriately labeled continuation sheets.	*	SUBTOTAL	.\$
Schedule 1 S	Summary		0.00	*
Itemized incr	reases to cash this period.		0.02	-
	ncreases to cash of under \$100 this periodterest received this period on loans made to others. (Sche			-> ->
4. Total miscell	aneous increases to cash this period. (Add Lines 1, 2, and age, Line 14.)	3. Enter here and on the	0.02	EPPC Form 460 (lan/2016)

FPPC Form 460 (Jan/2016))
FPPC Advice: advice@fppc.ca.gov (866/275-3772)