## **Recipient Committee Campaign Statement Cover Page**

SEE INSTRUCTIONS ON REVERSE

O Recall

(Also Complete Part 5)

General Purpose Committee

☑ Officeholder, Candidate Controlled Committee

O State Candidate Election Committee

**COVER PAGE CALIFORNIA FORM** of  $_{-}^{5}$ Page 1 Date of election if applicable: Statement covers period (Month, Day, Year) For Official Use Only through 12/31/2021 2. Type of Statement: 1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. Preelection Statement ☐ Primarily Formed Ballot Measure Quarterly Statement Semi-annual Statement Special Odd-Year Report Termination Statement (Also file a Form 410 Termination) Amendment (Explain below) Primarily Formed Candidate/ Officeholder Committee

O Sponsored O Small Contributor Commit O Political Party/Central Con	tee (	Primarily Formed Candidate/ Officeholder Committee Also Complete Part 7)				
Committee Information		D. NUMBER 428033	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE		120033	NAME OF TREASURER			
Elect David Marquez 2020 M	oreno Valley City Coun	cil, District 3	Radene Hiers MAILING ADDRESS			
STREET ADDRESS (NO P.O. BOX)			CITY	STATE	ZIP CODE	AREA CODE/PHONE
			Moreno Valley	CA	92551	
CITY	STATE ZIP CO	DE AREA CODE/PHONE	NAME OF ASSISTANT TREASURI	ER, IF ANY		
Moreno Valley	CA 9255	1	n/a			
MAILING ADDRESS (IF DIFFERENT)		×	MAILING ADDRESS			
n/a			n/a			
CITY	STATE ZIP CO	DE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
n/a			n/a			
OPTIONAL: FAX / E-MAIL ADDRESS			OPTIONAL: FAX / E-MAIL ADDRE	SS		
rlhiers1954@gmail.com						
Verification		,	$//$ . $\sim$			
			of my knowledge the information contained	herein and in the atta	ched schedules i	s true and complete. I
certify under penalty of perjury un-	der the laws of the State of	California that the foregoing				
Executed on	24 -12 Date	Ву	Signature of Treasurer or Assistant	Treasurer		
Executed on	2 2	Ву		nsible Office	er of Sponsor	
Executed on	Date	Ву	Signature of Controlling Officeholder, Candidate, S	State Measure Proponent		
Executed on	Date	Ву	Signature of Controlling Officeholder, Candidate, S	State Measure Proponent		
	Date		agricule of controlling childrings, Calibrate, 5	nate incasure r roponetit	FP	PC Form 460 (Jan/2016
				EDDC Ad-	deer addiss Ofm	ac en cou 1966 1975 977

from 07/01/2021

Committee Controlled Sponsored

(Also Complete Part 6)

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## Recipient Committee Campaign Statement Cover Page — Part 2

	RNIA 460
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. Officeholder or Candidate Controlled Committee	ee	6. Primaril	y Formed Ballo	t Measure (	Committee	•	
NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF E	BALLOT MEASURE				
David Marquez		n/a					
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRIC	T NUMBER IF APPLICABLE)	BALLOT NO	O. OR LETTER	JURISDICTIO	ON		SUPPORT
City Coun cil District 3		n/a				111	OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY	STATE ZIP						
Mo	oreno Vall CA 92555	Identify th	e controlling office	holder, candid	late, or state	measure pro	ponent, if any.
X		NAME OF	OFFICEHOLDER, CAN	NDIDATE, OR P	ROPONENT		
Related Committees Not Included in this State	mont: List any committees	n/a					
not included in this statement that are controlled by you or ar		OFFICE SC	DUGHT OR HELD			DISTRICT NO	). IF ANY
contributions or make expenditures on behalf of your candida	асу.	n/a					
COMMITTEE NAME	.D. NUMBER	f. <del></del>					
n/a							
		7. Primaril	y Formed Cand	idate/Office	eholder Co	mmittee <i>L</i>	ist names of
The state of the s	CONTROLLED COMMITTEE?	officeholde	er(s) or candidate(s)	for which this	committee is	primarily form	ed.
n/a	YES NO	NAME OF C	SERIOFILOI DED OD A	MANDIDATE	LOFFICE COL	JGHT OR HELD	
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BO	X)		OFFICEHOLDER OR (	ANDIDATE	OFFICE SUL	JOHT OR HELL	□ SUPPORT
n/a		n/a					☐ OPPOSE
CITY STATE ZIP COD	DE AREA CODE/PHONE	NAME OF C	OFFICEHOLDER OR (	CANDIDATE	OFFICE SOL	JGHT OR HELD	
n/a		n/a					SUPPORT OPPOSE
COMMITTEE NAME [	.D. NUMBER	0					
n/a		NAME OF C	OFFICEHOLDER OR (	CANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT
		n/a					OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?	NAME OF C	OFFICEHOLDER OR C	CANDIDATE	OFFICE SOL	IGHT OR HELD	Cauppont
n/a	YES NO	n/a					SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BO	×)	11/ (1					LI OPPOSE
n/a							
CITY STATE ZIP COL	DE AREA CODE/PHONE		Attac	ch continuatio	n sheets if n	ecessary	
n/a							

## Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Elect David Marquez 2020 Moreno Valley City Council, District 3 1428033 Calendar Year Summary for Candidates Column A Column B Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE General Elections 1. Monetary Contributions ...... Schedule A, Line 3 1/1 through 6/30 7/1 to Date 1350.00 2. Loans Received ...... Schedule B, Line 3 20. Contributions 3. SUBTOTAL CASH CONTRIBUTIONS...... Add Lines 1 + 2 \$ Received 4. Nonmonetary Contributions...... Schedule C, Line 3 21. Expenditures 1350.00 Made 5. TOTAL CONTRIBUTIONS RECEIVED......Add Lines 3 + 4 **Expenditures Made Expenditure Limit Summary for State** Candidates 0 7. Loans Made ...... Schedule H. Line 3 22. Cumulative Expenditures Made\* 8. SUBTOTAL CASH PAYMENTS...... Add Lines 6 + 7 (If Subject to Voluntary Expenditure Limit) (1350.00)9. Accrued Expenses (Unpaid Bills) ......Schedule F, Line 3 Date of Election Total to Date (mm/dd/yy) (1350.00)Current Cash Statement 12. Beginning Cash Balance .................................. Previous Summary Page, Line 16 To calculate Column B, add amounts in Column 13. Cash Receipts ...... Column A, Line 3 above A to the corresponding \*Amounts in this section may be different from amounts 14. Miscellaneous Increases to Cash ...... Schedule I, Line 4 amounts from Column B reported in Column B. of your last report. Some 15. Cash Payments ...... Column A, Line 8 above amounts in Column A may 16. ENDING CASH BALANCE ......Add Lines 12 + 13 + 14, then subtract Line 15 be negative figures that should be subtracted from If this is a termination statement. Line 16 must be zero. previous period amounts. If this is the first report being filed for this calendar year, 17. LOAN GUARANTEES RECEIVED...... Schedule B, Part 2 \$ 0 only carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). FPPC Form 460 (Jan/2016))

FPPC Form 460 (Jan/2016))
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	Am	nounts may be ro	unded		SCHEDULE B - F				
Schedule B – Part 1	CAII	to whole dollars. Statement co				tatement covers period CALIFO		ORNIA 460	
Loans Received		from <u>07/01/</u>				07/01/2020		FORM TO	
SEE INSTRUCTIONS ON REVERSE					through 12/31/20	020	Page 4	of_5	
NAME OF FILER							I.D. NUMBER		
Elect David Marquez 2020 Moreno Valley Cit	y Council, District 3						1428033		
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	BALANCE AT	(e) INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTION TO DATE	
David Marquez	City of Moreno Valley Council Member, District 3			\$ PAID	\$ <u>0</u>	0 RATE	s_2550.00	\$ 1350.00	
Moreno Valley, CA 92555 <sup>†</sup> ☑ IND □ COM □ OTH □ PTY □ SCC		\$ 565.79	s_565.79	₹ 565,79	0 DATE DUE	s_0	08/22/2021 DATE INCURRED	\$ 2550.00	
				PAID  \$  FORGIVEN	\$		s	\$ PER ELECTION	
TO IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$	
				\$ FORGIVEN	\$	% RATE	\$	\$PER ELECTION	
TO IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$	
	S	SUBTOTALS \$	5 565,79 \$	565.79	\$ 0	\$ 0			
Schedule B Summary  1. Loans received this period				\$ _565	5.79	(Enter (e) on Sche	dule E, Line 3)		
<ul> <li>(Total Column (b) plus unitemized loan</li> <li>Loans paid or forgiven this period</li> <li>(Total Column (c) plus loans under \$10</li> <li>(Include loans paid by a third party tha</li> <li>Net change this period. (Subtract Line</li> </ul>	00 paid or forgiven.) t are also itemized on Sche	dule A.)		0	5.79	C	TH – Other (e.g., b	ommittee PTY or SCC) business entity)	
Enter the net here and on the Summar						F	TY - Political Part	у	

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

\*\* If required.

FPPC Form 460 (Jan/2016))
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(May be a negative number)

SCC - Small Contributor Committee

Schedule	F		
Accrued	Expenses	(Unpaid	Bills)

Amounts may be rounded to whole dollars.

CALIFORNIA Statement covers period

Accrued Expenses (Unpaid Bills)	 from 07/01/2021	FORM	400
SEE INSTRUCTIONS ON REVERSE	through 12/31/2021	Page 5	of _5
NAME OF FILER		I.D. NUMBER	
Elect David Marquez 2020 Moreno Valley City Council, District 3		1428033	

CODES: If one of the following codes accurately describes  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 communication MTG meetings and appearant OFC office expenses PET petition circulating PHO phone banks POL polling and survey rese POS postage, delivery and r PRO professional services (I PRT print ads	ns nces earch nessenger services	RAD radio airtime RFD returned cont SAL campaign wo TEL t.v. or cable a TRC candidate tra TRS staff/spouse transfer betw VOT voter registra	and production costs ributions rkers' salaries irtime and production cost vel, lodging, and meals ravel, lodging, and meals een committees of the san	ne candidate/sponsor
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
D +114	D Len e	F05 70		(505 70)	

* Payments that are contributions or independent expenditures must also be	SUBTOTALS	\$ 565.79	<b>5</b> 0 <b>5</b>	(565.79)	\$ 0
Moreno Valley, CA 92555					
David Marquez	Debt Forgiven	565.79	0	(565.79)	0
(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF PAYMENT	BALANCE BEGINNING OF THIS PERIOD	AMOUNT INCURRED THIS PERIOD	THIS PERIOD  (ALSO REPORT ON E)	BALANCE AT CLOSE OF THIS PERIOD

summarized on Schedule D.

## Schedule F Summary

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