R	е	ci	p	ieı	nt	Co	m	m	itte	е
C	a	m	p	ai	gr	St	at	er	nei	nt

DATE

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Executed on_

Executed on_



(Government Code Sections 84200-84216.5)	() I specification		MORENO V RECEIV	2	001/02 460 FORM
	Statement covers period from07/01/2012	Date of election if applicable: (Month, Day, Year)	12 0CT -14 F		1 / 23 For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through09/30/2012	11/06/2012			
1. Type of Recipient Committee: All Committee Officeholder, Candidate Controlled Committee Officeholder, Candidate Controlled Committee Officeholder, Candidate Committee	Ballot Measure Committee O Primary Formed O Controlled O Sponsored (Also Complete Part 6.) Primary Formed Candidate/ Officeholder Committee (Also Complete Part 7.)	2. Type of Stateme Pre-election Stater Semi-annual State Termination Stater Amendment (Expla	ment ment nent	☐ Special ☐ Supplen	ly Statement Odd-Year Report mental Preelection ent - Attach Form 495
3. Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE Jesse Molina for City Council 2012 STREET ADDRESS (NO P.O. BOX)	I.D.NUMBER 1310079	Treasurer(s) NAME OF TREASURER Mrs. Dana Hopkins, CPA	§		
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO		NAME OF ASSISTANT TREASUR Lidia Molina		ZIP CODE	AREA CODE/PHONE
CITY STATE ZIP COD	E AREA CODE/PHONE	MAII ING ADDRESS			
OPTIONAL: FAX/E-MAIL ADDRESS		OPTIONAL: FAX/E-MAIL ADDRES		ZIP CODE	AREA CODE/PHONE
4. Verification I have used all reasonable diligence in prescise and resist true and complete. I certify under per Executed on 10/4/12 By.	Aif	best of my knowledge the information that the foregoing is true a	mation contained he	rein and in the	attached schedules

TE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR R, CANDIDATE, STATE MEASURE PROPONENT

Recipient Committee Campaign Statement Cover Page — Part 2 COVER PAGE - PART 2

CALIFORNIA 460

2/23

Officeholder or Candidate Controlled	Committee	6.	Ballot Measure Cor	nmittee			
NAME OF OFFICEHOLDER OR CANDIDATE Jesse Molina			NAME OF BALLOT MEASURE				
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICH Held: City Council Member City City of Mor	,		BALLOT NO. OR LETTER	JURISDICTIO	N	X	SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) C	TY STATE ZIP		Identify the controlling office	holder, candid	late, or state ı	neasure propo	nent, if any.
	.		NAME OF OFFICEHOLDER, CAN	DIDATE, OR PR	OPONENT	•	27
Related Committees Not Included in this Star not included in this statement that are controlled by you or are contributions or to make expenditures on behalf of your candid	primarily formed to receive		OFFICE SOUGHT OR HELD	_		DISTRICT NO.	FANY
COMMITTEE NAME	I.D.NUMBER	7.	Primarily Formed C which this committee is primarily		List names	of officeholder(s) or candidate(s) fo
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BO	DX)		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT
CITY STATE ZIP C	ODE AREA CODE/PHONE		18				☐ OPPOSE
COMMITTEE NAME	I.D.NUMBER		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BC	DX)		-	-			
CITY STATE ZIP C	ODE AREA CODE/PHONE		Attach	continuation	sheets if nece	essary	

Campaign Disclosure Statement Summary Page

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

SUMMARY PAGE Statement covers period CALIFORNIA

FORM from ___ 3/23

through :

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Jesse Molina for City Council 2012

I.D. NUMBER

					1310079
Contributions Received	Column A TOTAL THIS PERIO (FROM ATTACHED SCHED		Column B CALENDAR YEAR TOTAL TO DATE		mmary for Candidates he State Primary and
Monetary Contributions Schedule A, Line 3	\$374	8.00 \$	37548.00	General Elections	
2. Loans Received Schedule B, Line 7		0.00	0.00_		rough 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$374	8.00 \$	37548.00	20. Contribution Received \$	0.00 \$ 0.00
4. Nonmonetary Contributions Schedule C, Line 3	114	0.00	1140.00	21. Expenditures	
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	488	8.00 \$	38688.00	Made \$	0.00 \$ 0.00
Expenditures Made					Summary for State
6. Payments Made Schedule E, Line 4	\$2061	7.59 \$	27419.43	Candidates	
7. Loans Made Schedule H, Line 7	-	0.00_	0.00		ve Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$2061	7.59\$	27419.43	(if Subject to	/oluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	778	5.42	8255.42	Date of Election (mm/dd/yy)	Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3	114	0.00	1140.00	(
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$	3.01 \$	36814.85		\$
Current Cash Statement					\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$3274	amou	alculate Column B, add unts in Column A to the		
13. Cash Receipts Column A, Line 3 above	-	8.00 согте	sponding amounts		
14. Miscellaneous Increases to Cash Schedule I, Line 4		repor	Column B of your last t. Some amounts in		
15. Cash Payments Column A, Line 8 above	2061		nn A may be negative		
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$1587	subtr	acted from previous	1	
If this is a termination statement, Line 16 must be zero.		the fi	d amounts. If this is rst report being filed		
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00 carry	is calendar year, only over the amounts		
Cash Equivalents and Outstanding Debts		any).	Lines 2, 7, and 9 (if	*Since January 1, 2001 different from amounts	. Amounts in this section may be
18. Cash Equivalents See instructions on reverse	· · · · · · · · · · · · · · · · · · ·	0.00		different from amounts	reported in Column b.
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$825	5.42_			

FPPC Form 460 JAN/05 FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule A Monetary Contributions Received

Type or print in lnk.
Amounts may be rounded

SCHEDULE A

Monetary Contributions Received		to whole dollars.		Statement covers period from		FORM 460	
SEE INSTRUCTION	NS ON REVERSE			through			4 / 23
NAME OF FILER Jesse Molina fo	or City Council 2012			J.	D	I.D. No	
DATE RECEIVED	FULL NAME, MAILING 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 CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
Rcpt Dt: 08/30/2012	Mr. Alfred Davis	IND COM OTH PTY SCC	Design/Construction Mgmt Alfred M. Davis & Associates	100.00	10	0.00	
Rcpt Dt: 08/23/2012	Ms. Grace Davis	IND COM OTH PTY SCC	Design/Construction Mgmt Alfred M. Davis & Associates	100.00	10	0.00	
Rept Dt: 08/30/2012	Ms. Susan Gilmore ID:	X IND COM OTH PTY SCC	Accountant H.R. Block	150.00	15	0.00	
Rcpt Dt: 08/29/2012	Mr. George Salas Jr	IND COM OTH PTY SCC	Administration Field of Dreams	150.00	15	0.00	
Rept Dt: 07/30/2012	Shivalik Inc dba Sunnymead Shell/ Circle K 24840 Sunnymead Blvd Moreno Valley CA 92553 ID:	IND COM OTH PTY SCC		500.00	50	0.00	
			SUBTOTAL	\$		00000	
Schedule A 1. Amount reco	A Summary eived this period - contributions of \$100 or more. Schedule A subtotals.)		\$	3500.00	INE		
2. Amount rec	eived this period - unitemized contributions of less t	han \$100	\$	248.00		H - Other Y - Politic	
	tary contributions received this period. 1 and 2. Enter here and on the Summary Page, Co	lumn A, Line 1.	.) TOTAL \$	3748.00			Contributor Committee

Schedule A

001		JIF A
- O(4	ᄀᆮᆝᄼ	$H \Gamma F$

Concadio A			-t ttt	SCHEDOLE /					
Monetary Contributions Received			nts may be rounded whole dollars.	Statement cov	ers period	CALIFORNIA 460			
SEE INSTRUCTION	NS ON REVERSE			through			5 / 23		
NAME OF FILER Jesse Molina fo	or City Council 2012						lumber 0079		
DATE RECEIVED	FULL NAME, MAILING 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 CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)		
Rcpt Dt: 07/02/2012	Mr. Douglas Whitney	IND □ COM □ OTH □ PTY □ SCC	Homebuilder Self Employed	2500.00	500	00.00			

	SUBTOTAL \$	3500.00	
Schedule A Summary 1. Amount received this period - contributions of \$100 or more. (Include all Schedule A subtotals.)	\$		*Contributor Codes IND - Individual COM - Recipient Committee (other than PTY or SCC)
2. Amount received this period - unitemized contributions of less than \$100	\$		OTH - Other PTY - Political Party
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A. Line 1.)	TOTAL \$		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	CALIFORNIA 460

Statement covers period	CALIFORNIA 460
through	6 / 23
	I.D. Number
	1310079

Jesse Molina for City Council 2012

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

CUMULATIVE TO IF AN INDIVIDUAL, ENTER AMOUNT/ PER ELECTION CONTRIBUTOR FULL NAME, STREET ADDRESS AND **DESCRIPTION OF** DATE DATE OCCUPATION AND EMPLOYER FAIR MARKET TO DATE ZIP CODE OF CONTRIBUTOR CODE * GOODS OR SERVICES CALENDAR YEAR RECEIVED (IF SELF-EMPLOYED, ENTER VALUE (IF REQUIRED) (IF COMMITTEE, ALSO ENTER I.D. NUMBER) (JAN 1 - DEC 31) NAME OF BUSINESS) ☐ IND Rcpt Dt: 08/29/2012 Food for 8/29 fundra-140.00 140.00 Chicago Pasta House 24667 Sunnymead Blvd COM OTH PTY SCC iser Moreno Valley CA 92553 IND COM Pymt for Sign Installations Real Estate 1000.00 6000.00 Mr. Jerome Stephens II PTY Self Employed ID:

Attach additional information on appropriately labeled continuation sheets.	SUBTOTAL \$	1140.00	
Schedule C Summary			
Amount received this period - nonmonetary contributions of \$100 or more. (Include all Schedule C subtotals.)	\$	1140.00	*Contributor Codes IND - Individual
2. Amount received this period - unitemized nonmonetary contributions of less than \$100	\$	0.00	COM- Recipient Committee - (other than PTY or SCC) OTH - Other
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 \$	1140.00	PTY - Political Party SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE I		
Statement covers period	FORM 460		
through	7 / 23		
	I.D. NUMBER		

1310079

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Jesse Molina for City Council 2012

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
	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
	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, email)

NAM	NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			DESCRIPTION OF PAYMENT	AMOUNT PAID
AFS Printing 2678 Hamner Avenu	le	ID:	LIT		4415.74
Norco	CA 92860				
AT&T 221 Venture Way		ID:	OFC		133.23
LaFavette	LA 70507				
AT&T 221 Venture Way		ID:	OFC		121.51
LaFavette	LA 70507				

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

SUBTOTAL \$

Schedule E Summary

Statement covers period	CALIFORNIA 160			
from	FORM 400			
through	8 / 23			
	I.D. NUMBER			

Payments Made	Amounts may be rounded to whole dollars.		CALIF	RM 460		
SEE INSTRUCTIONS ON REVERSE				through		3 / 23
NAME OF FILER					I.D. NUN	BER
Jesse Molina for City Council 2012					13100	79
CODES: If one of the following codes accurately describes	the payment, you r	may enter th	e code. Otherwise	e, describe the paymer	ıt.	×
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 con MTG meetings ar OFC office exper PET petition circle PHO phone bank POL polling and POS postage, de PRO professiona PRT print ads	nd appearances uses ulating s survey research livery and mess	n senger services	RAD radio airtime and RFD returned contribution SAL campaign work TEL t.v. or cable air TRC candidate traver TRS staff/spouse transfer between VOT voter registration technical recommendation technical registration recommendation re	butions kers' salaries time and production of el, lodging, and meals avel, lodging, and mea en committees of the s	ils ame candidate/sponso
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE O	R DES	CRIPTION OF PAYMENT		AMOUNT PAID
AT&T 221 Venture Way	ID:	OFC			2 8	119.81
LaFayette LA 70507						
Brian Floyd & Associates 10930 Terra Vista Pkwy #18	ID:	CNS				2000.00
Rancho Cucamonga CA 91730						
Chicago Pasta House 24667 Sunnymead Blvd	ID:	FND				50.00
Moreno Valley CA 92553						
* Payments that are contributions or independent expenditures must a	ilso be summarized or	n Schedule D.			SUBTOTAL S	3
Schedule E Summary						
1. Payments made this period of \$100 or more. (Include all	Schedule E subtot	als.)	**********************		\$	
Unitemized payments made this period of under \$100.						
Total interest paid this period on loans. (Enter amount from						
4. Total payments made this period. (Add lines 1, 2, and 3.				A, Line 6.)	TOTAL \$ _	*

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

Statement covers period	CALIFORNIA 460
through	9 / 23
	I.D. NUMBER

	10	wildle dollars.	•	from	
SEE INSTRUCTIONS ON REVERSE			*>	through	9/23
NAME OF FILER					I.D. NUMBER
Jesse Molina for City Council 2012					1310079
CODES: If one of the following codes accurately describes of the 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 con MTG meetings an OFC office expen. PET petition circu PHO phone banks POL polling and s POS postage, del PRO professional PRT print ads	nmunications d appearances ses lating s survey research	s h senger services	RAD radio airtime and process returned contributions SAL campaign workers' sate TEL t.v. or cable airtime at TRC candidate travel, lodg TRS staff/spouse travel, lo	s alaries nd production costs ping, and meals adging, and meals nmittees of the same candidate/sponso
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	posta	CODE O	R DE	SCRIPTION OF PAYMENT	AMOUNT PAID
Chicago Pasta House 24667 Sunnymead Blvd	ID:	TRC	9/28 Campaign str	ategy meeting	121.10
Moreno Valley CA 92553					
City of Moreno Valley 14177 Frederick St PO Box 88005 Moreno Valley CA 92552	ID:	FIL			550.00
City of Moreno Valley 14177 Frederick St PO Box 88005 Moreno Valley CA 92552	ID:	FIL			25.00
* Payments that are contributions or independent expenditures must a	iso be summarized on	Schedule D.			SUBTOTAL \$
Schedule F Summary					

Schedule	E Summary
----------	-----------

- 1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)\$ _____ 2. Unitemized payments made this period of under \$100. 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)

2. Unitemized payments made this period of under \$100.

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

Statement covers period	FORM 460		
through	10 / 23		
	I.D. NUMBER		

		Wilole dollars	•	from	
SEE INSTRUCTIONS ON REVERSE	rie .			through	10 / 23
NAME OF FILER					I.D. NUMBER
Jesse Molina for City Council 2012					1310079
CODES: If one of the following codes accurately describes to the campaign paraphemalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events	MBR member com MTG meetings an OFC office expens PET petition circu PHO phone banks POL polling and s	nmunications d appearance ses alating	s	RAD radio airtime and production returned contributions SAL campaign workers' salarie TEL t.v. or cable airtime and production TRC candidate travel, lodging, staff/spouse travel, lodging.	s oduction costs and meals
IND independent expenditure supporting/opposing others (explain)* LEG legal defense	POS postage, del PRO professional	ivery and mes	senger services		ees of the same candidate/sponso
LIT campaign literature and mailings	PRT print ads			WEB information technology co	sts (internet, email)
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE C	DR DESC	RIPTION OF PAYMENT	AMOUNT PAID
Costco Wholesale 12700 Day St	ID:	OFC			65.67
Moreno Valley CA 92553					
Costco Wholesale 12700 Day St	ID:	TRC	Fuel		78.36
Moreno Valley CA 92553					
Costco Wholesale 12700 Day St	ID:	OFC	Xerox Paper, Water		75.58
Moreno Valley CA 92553					
* Payments that are contributions or independent expenditures must al	so be summarized on	Schedule D,		SUE	BTOTAL \$
Schedule E Summary					
Payments made this period of \$100 or more. (Include all \$	Schedule E subtota	als.)			\$

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)

FPPC Form 460 (JAN/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC

.....\$ _____

Statement covers period	CALIFORNIA FORM 460
through	11 / 23
•	I.D. NUMBER

Payments Made		whole dollars.		from	FORM 400
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				through	11 / 23
Jesse Molina for City Council 2012					I.D. NUMBER
					1310079
CODES: If one of the following codes accurately describes to CMP campaign paraphernalia/misc.	MBR member con		ie code. Otherwi		
CNS campaign consultants	MTG meetings an		s	RAD radio airtime and produ RFD returned contributions	iction costs
CTB contribution (explain nonmonetary)* CVC civic donations	OFC office expen PET petition circu			SAL campaign workers' sala	
FIL candidate filing/ballot fees	PET petition circu PHO phone banks			TEL t.v. or cable airtime and TRC candidate travel, lodgin	g, and meals
FND fundraising events	POL polling and s			TRS staff/spouse travel, lodg	ging, and meals
IND independent expenditure supporting/opposing others (explain)* LEG legal defense	POS postage, del PRO professional			TSF transfer between comm VOT voter registration	nittees of the same candidate/sponsor
LIT campaign literature and mailings	PRT print ads			WEB information technology	costs (internet, email)
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE C	DR D	ESCRIPTION OF PAYMENT	AMOUNT PAID
Costco Wholesale 12700 Day St	ID:	TRC	Fuel		84.56
Moreno Valley CA 92553					8
Costco Wholesale 12700 Day St	ID:	OFC			26.70
Moreno Valley CA 92553					
Costco Wholesale 12700 Day St	ID:	TRC	Fuel		82.61
Moreno Valley CA 92553			ļ		
* Payments that are contributions or independent expenditures must a	lso be summarized on	Schedule D.		S	UBTOTAL \$
Schedule E Summary					
1. Payments made this period of \$100 or more. (Include all	Schedule E subtot	als.)			\$
2. Unitemized payments made this period of under \$100.					\$

- 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)

Type or print in ink. Amounts may be rounded

Statement covers period	CALIFORNIA A CO
from	FORM 400
through	12 / 23
	I.D. NUMBER

aye.mado	to	whole dollar	s.	from	FORM TOU
SEE INSTRUCTIONS ON REVERSE				through	12 / 23
NAME OF FILER					I.D. NUMBER
Jesse Molina for City Council 2012				· · ·	1310079
CODES: If one of the following codes accurately describes	the payment you r	nav enter t	he code Otherwise	describe the navment	1010070
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 cor MTG meetings an OFC office expen PET petition circu PHO phone bank POL polling and s POS postage, del PRO professional PRT print ads	nmunications of appearance ses ulating s survey resear	es ch ssenger services	RAD radio airtime and product returned contributions SAL campaign workers' salate. t.v. or cable airtime and TRC candidate travel, lodging staff/spouse travel, lodging	ries production costs g, and meals ing, and meals ittees of the same candidate/sponso
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DESC	CRIPTION OF PAYMENT	AMOUNT PAID
Costco Wholesale 12700 Day St	ID:	TRC	Fuel		82.80
Moreno Valley CA 92553					
Ms. Andrea De Leon 1450 University Ave # F-524	ID:	CNS			500.00
Riverside CA 92507					
Delta Business Machines 14175 Apple Blossom Lane	ID:	OFC			110.00
Moreno Valley CA 92553					
* Payments that are contributions or independent expenditures must al	so be summarized on	Schedule D		SL	JBTOTAL \$
Schedule E Summary					
1. Payments made this period of \$100 or more. (Include all	Schedule E subtota	als.)	***************************************		\$
2. Unitemized payments made this period of under \$100.					
3. Total interest paid this period on loans. (Enter amount fro					
4. Total payments made this period. (Add lines 1, 2, and 3.	Enter here and on	the Summ			MANAGEMENT SECTION OF THE SECTION OF

Statement covers period	CALIFORNIA 160
from	FORM 400
through	13 / 23
	I.D. NUMBER

Payments Made to whole dollars.		from		FORM 460		
SEE INSTRUCTIONS ON REVERSE	30			through	1	3 / 23
NAME OF FILER					I.D. NUN	IBER
Jesse Molina for City Council 2012					13100	70
CODES: If one of the following codes accurately describes	the payment, you	may enter th	ne code. Otherwise	e, describe the payment.	13100	
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 of meetings at office experience petition circle. PHO phone ban POL polling and POS postage, deprofession. PRT print ads	and appearance enses culating ks I survey researd elivery and mes	ch senger services	RAD radio airtime and pro RFD returned contribution SAL campaign workers's TEL t.v. or cable airtime a TRC candidate travel, lodg TRS staff/spouse travel, lofg TSF transfer between con VOT voter registration WEB information technological	ns alaries and production co ging, and meals odging, and mea mmittees of the s	ls ame candidate/sponso
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE C	PR DES	CRIPTION OF PAYMENT		AMOUNT PAID
Delta Business Machines 14175 Apple Blossom Lane	ID:	OFC				129.00
Moreno Valley CA 92553 Home Depot 12255 Pigeon Pass Rd	ID:	CMP				459.66
Moreno Valley CA 92557 Home Depot 12255 Pigeon Pass Rd Moreno Valley CA 92557	ID:	CMP	Į.			21.52
* Payments that are contributions or independent expenditures must a	lso be summarized o	on Schedule D.			SUBTOTAL \$	i
Schedule E Summary						
1. Payments made this period of \$100 or more. (Include all	Schedule E subto	otals.)			\$ _	
2. Unitemized payments made this period of under \$100.	***************************************				\$ _	
3. Total interest paid this period on loans. (Enter amount fro	om Schedule B, Pa	art 1, Columi	n (e).)		\$	
4. Total payments made this period. (Add lines 1, 2, and 3.	Enter here and o	n the Summa	ary Page, Column /	A, Line 6.)	TOTAL \$ _	

Type or print in ink.
Amounts may be rounded

Statement covers period from	CALIFORNIA 460
through	14 / 23
	I.D. NUMBER

to whole dollars.		from	FORM 400		
SEE INSTRUCTIONS ON REVERSE				through	14 / 23
NAME OF FILER					I.D. NUMBER
Jesse Molina for City Council 2012			33		1310079
CODES: If one of the following codes accurately describes to the campaign paraphemalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations	MBR member cor MTG meetings an OFC office expen PET petition circu	nmunications id appearances ses		RAD radio airtime and pro RFD returned contribution SAL campaign workers' s TEL t.v. or cable airtime a	ns salaries
FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	PHO phone bank POL polling and s POS postage, del PRO professional PRT print ads	s survey research	senger services	TRC candidate travel, lod TRS staff/spouse travel, le	lging, and meals lodging, and meals mmittees of the same candidate/spons
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE O	ום א	ESCRIPTION OF PAYMENT	AMOUNT PAID
Home Depot 12255 Pigeon Pass Rd	ID:	CMP			21.44
Moreno Valley CA 92557 Home Depot 12255 Pigeon Pass Rd	ID:	CMP			23.67
Moreno Valley CA 92557					
Home Depot 12255 Pigeon Pass Rd	ID:	CMP			52.11
Moreno Valley CA 92557					
* Payments that are contributions or independent expenditures must als	so be summarized on	Schedule D.			SUBTOTAL \$
Schedule E Summary				V	
1. Payments made this period of \$100 or more. (Include all 5	Schedule E subtota	als.)	**********************		\$
2. Unitemized payments made this period of under \$100.					\$
3. Total interest paid this period on loans. (Enter amount from					\$
4. Total payments made this period. (Add lines 1, 2, and 3.	Enter here and on	the Summa	ry Page, Columr	n A, Line 6.)	TOTAL \$

	SCHEDULE E
Statement covers period	FORM 460
from	
through	15 / 23
	I.D. NUMBER

Payments Made Amounts may be rounded to whole dollars.		from	EC	FORM 460		
SEE INSTRUCTIONS ON REVERSE		through				15 / 23
NAME OF FILER					I.D. NUI	MBER
Jesse Molina for City Council 2012					13100	79
CODES: If one of the following codes accurately describes	the payment, you r	may enter	the code. Otherwi	se, describe the payme	ent.	
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 cor MTG meetings ar OFC office expen PET petition circu PHO phone bank POL polling and a POS postage, de PRO professional PRT print ads	nd appearand nses ulating s survey resea livery and m	ces arch essenger services	RFD returned con SAL campaign wo TEL t.v. or cable a TRC candidate tra TRS staff/spouse TSF transfer betw VOT voter registra	orkers' salaries airtime and production of avel, lodging, and meals travel, lodging, and mea veen committees of the	als same candidate/sponso
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR D	ESCRIPTION OF PAYMENT		AMOUNT PAID
Home Depot 12255 Pigeon Pass Rd	ID:	CMP	N .			20.85
Moreno Valley CA 92557			E ₂₂			
Leisure Enterprises Embroidery 24891 Sunnymead Blvd	ID:	CMP		11		150.00
Moreno Valley CA 92553						
Moreno Valley 4th of July Youth Stage 26658 Opal St	ID:	CVC				200.00
Moreno Valley CA 92555						
* Payments that are contributions or independent expenditures must a	ilso be summarized or	n Schedule I	D.		SUBTOTAL	\$
Schedule E Summary			75-161		11-11	
1. Payments made this period of \$100 or more. (Include all	Schedule E subtot	als.)	*************		\$ _	
2. Unitemized payments made this period of under \$100.				***************************************	\$ _	
3. Total interest paid this period on loans. (Enter amount fro	om Schedule B, Pa	rt 1, Colur	mn (e).)		\$ _	
4. Total payments made this period. (Add lines 1, 2, and 3.	Enter here and on	the Sumr				

Schedule E
Payments Made

	SCHEDULE E
Statement covers period	CALIFORNIA 460
from	FORM 400
through	16 / 23
1	I.D. NUMBER

Payments Made Amounts may be rounded to whole dollars.		mente wade		from	FORM 460
SEE INSTRUCTIONS ON REVERSE				through	16 / 23
NAME OF FILER Jesse Molina for City Council 2012		6			I.D. NUMBER
Sesse Wolling for City Council 2012					1310079
CODES: If one of the following codes accurately describes	the payment, you r	may enter the	code. Otherwis	e, 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 cor MTG meetings ar OFC office expen PET petition circu PHO phone bank POL polling and s POS postage, de PRO professional PRT print ads	nd appearances uses ulating s survey research livery and messe		RAD radio airtime and productions returned contributions SAL campaign workers' sala TEL t.v. or cable airtime and TRC candidate travel, lodging TRS staff/spouse travel, lodg TSF transfer between comm VOT voter registration WEB information technology	ries production costs g, and meals ling, and meals ittees of the same candidate/sponso
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE OR	DES	SCRIPTION OF PAYMENT	AMOUNT PAID
Oscar Santana Web Design 11672 Pintail Ct.	ID:	WEB	***************************************		300.00
Moreno Valley CA 92557					
Perfect Impressions 3547 Market St.	ID:	LIT			172.40
Riverside CA 92501					
Perfect Impressions 3547 Market St.	ID:	CMP			3985.88
Riverside CA 92501					
* Payments that are contributions or independent expenditures must a	lso be summarized or	Schedule D.		SI	JBTOTAL \$
Schedule E Summary					
1. Payments made this period of \$100 or more. (Include all	Schedule E subtot	als.)	***************************************	***************************************	\$
2. Unitemized payments made this period of under \$100.	***************************************			***************************************	\$
3. Total interest paid this period on loans. (Enter amount fro	om Schedule B, Pa	rt 1, Column	(e).)		\$
4. Total payments made this period. (Add lines 1, 2, and 3.					

Statement covers period	CALIFORNIA 460
through	17 / 23
	I.D. NUMBER

Payments Made		nts may be roui whole dollars.		from		FORM 460	
SEE INSTRUCTIONS ON REVERSE				through	_ 1	7 / 23	
NAME OF FILER					I.D. NUM	BER	
Jesse Molina for City Council 2012					131007	9	
CODES: If one of the following codes accurately describes	the payment, you	may enter the	e code. Otherwise	e, 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 con MTG meetings ar OFC office exper PET petition circs PHO phone bank POL polling and POS postage, de PRO professiona PRT print ads	nd appearances nses ulating s survey research livery and mess	ı enger services	RAD radio airtime and productions returned contributions SAL campaign workers' sale t.v. or cable airtime and TRC candidate travel, lodging transfer between community voter registration webs.	aries d production co ng, and meals lging, and meals nittees of the sa	s ame candidate/sponse	
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OF	R DES	CRIPTION OF PAYMENT		AMOUNT PAID	
Perfect Impressions 3547 Market St.	ID;	CMP				226.28	
Riverside CA 92501			(4)				
Perfect Impressions 3547 Market St.	ID:	LIT				86.20	
Riverside CA 92501		±	7				
Perfect Impressions 3547 Market St.	ID:	CMP				3618.03	
Riverside CA 92501							
* Payments that are contributions or independent expenditures must a	lso be summarized or	Schedule D.		S	SUBTOTAL \$		
Schedule E Summary							
Payments made this period of \$100 or more. (Include all	Schedule E subtot	als.)			\$		
2. Unitemized payments made this period of under \$100.							
3. Total interest paid this period on loans. (Enter amount fro							
4. Total payments made this period. (Add lines 1, 2, and 3.	Enter here and on	the Summa					

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period	SCHEDULE E
from	FORM 460
through	18 / 23
	I.D. NUMBER

1310079

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Jesse Molina for City Council 2012

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 com	munication	าร	RA	D radio airtime and production costs	
CNS		MTG	meetings and	d appearan	ices	RF	·	
CTB	contribution (explain nonmonetary)*	OFC office expenses		SA	campaign workers' salaries			
CVC	civic donations	PET petition circulating		TE	t.v. or cable airtime and production costs			
FIL	candidate filing/ballot fees	PHO phone banks			candidate travel, lodging, and meals			
FND	fundraising events	POL polling and survey research			staff/spouse travel, lodging, and meals			
IND	independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services			F transfer between committees of the same candidate/sponso			
LEG	legal defense	PRO	professional	services (le	egal, accounting)	VO	T voter registration	•
LIT	campaign literature and mailings	PRT	print ads			WE	B information technology costs (intern-	et, email)
	NAME AND ADDRESS OF PAYEE OR CREDITOR			CODE	OR	DESCRIPTION	OF DAYMENT	AMOUNT PAID

Li campaign illerature and	ı mailings			PKT print ads			VVEB Information technology costs (nternet, email)
NAM		DRESS OF PA TEE, ALSO ENTER	YEE OR CREDITOR	₹	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Perfect Impressions 3547 Market St.				ID:	LIT			338.34
Riverside	CA	92501						
Picture Perfect By T 2391 Lonestar	eri Mund	t		ID:	PRO			400.00
Norco	CA	92860						
Political Data Inc. P.O. Box 1706				ID:	OFC			847.77
Burbank	CA	91507						

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

SUBTOTAL \$	SL	JBT	ОТ	AL	\$
-------------	----	-----	----	----	----

Schedule E Summary

- Payments made this period of \$100 or more. (Include all Schedule E subtotals.)
 Unitemized payments made this period of under \$100.
 Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)

	SCHEDULE E
Statement covers period	CALIFORNIA 460
from	FORM 400
through	19 / 23
	I.D. NUMBER

Payments Made	yments Made Amounts may be rounded to whole dollars.			from	EO	RM 460
SEE INSTRUCTIONS ON REVERSE			- 2 1	through	1	9 / 23
NAME OF FILER Jesse Molina for City Council 2012					I.D. NUN	/IBER
- Country Country 2012					13100	79
CODES: If one of the following codes accurately describes	the payment, you	may enter the	e code. Otherwise	e, 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 of meetings at OFC office experience petition cir PHO phone barn POL polling and POS postage, deprofession PRT print ads	and appearances enses culating ks I survey research elivery and mess	n eenger services	RAD radio airtime and returned contribution SAL campaign worker TEL t.v. or cable airting TRC candidate travel, TRS staff/spouse travity transfer between VOT voter registration WEB information technical returned candidate travel, and the staff/spouse travity transfer between voter registration technical returned candidate returned contribution candidate returned	utions rs' salaries ne and production or lodging, and meals el, lodging, and mea committees of the s	ls ame candidate/sponso
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OF	R DES	CRIPTION OF PAYMENT		AMOUNT PAID
Siteground.com PO Box 48010	ID:	WEB			27	2.14
Washington DC 20002						
Siteground.com PO Box 48010	ID:	WEB				107.40
Washington DC 20002						
Trimble & Company An Accountancy Corp. 5041 La Mart Drive Suite 110	ID:	PRO				170.00
Riverside CA 92507						
* Payments that are contributions or independent expenditures must al	so be summarized o	n Schedule D.			SUBTOTAL \$	
Schedule E Summary						
1. Payments made this period of \$100 or more. (Include all	Schedule E subto	otals.)	*******************	**************	\$ <u></u>	
2. Unitemized payments made this period of under \$100.			**********************	*******************************	\$	
3. Total interest paid this period on loans. (Enter amount fro						
4. Total payments made this period. (Add lines 1, 2, and 3.	Enter here and o	n the Summa				

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

Statement covers period	CALIFORNIA 460
through	20 / 23
	LD. NUMBER

	to whole dollars.	from	
SEE INSTRUCTIONS ON REVERSE		through	20 / 23
NAME OF FILER			I.D. NUMBER
Jesse Molina for City Council 2012			1310079

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 con	nmunications	RAI	radio airtime and production costs	
CNS	campaign consultants	MTG	meetings an	d appearances	RF	·	
CTB	contribution (explain nonmonetary)*		office expens		SAL		
	civic donations		petition circu			t.v. or cable airtime and production costs	
			•				
FIL	candidate filing/ballot fees	PHO	D phone banks		TRO	candidate travel, lodging, and meals	
FND	fundraising events	POL	polling and survey research			staff/spouse travel, lodging, and meals	
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, del	ivery and messenger services	TSF		
LEG	legal defense	PRO	professional	services (legal, accounting)	VO.		
LIT	campaign literature and mailings	PRT	print ads		WE	B information technology costs (internet, email)	
	NAME AND ADDRESS OF PAYEE OR CREDITOR			2005 05	DECODINE		

N	AME AND ADDRESS OF PA (IF COMMITTEE, ALSO ENTER		CODE C	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
United Democrats	s of Moreno Valley	ID:		Fundraising event	250.00
WalMart 12721 Moreno Be Moreno Valley	each Dr. CA 92555	ID:	OFC	in .	169.14

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTAL \$	20394.50
Schedule E Summary		
Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$	
2. Unitemized payments made this period of under \$100.	\$	
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$	
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A. Line 6.)	TOTAL \$	

0	\sim 1	45	11	-	

Schedule F

Statement covers period	CALIFORNIA 460		
through	21 / 23		

Accrued Expenses (Unpaid Bills)	to whole dollars		from	. F	21/23	
SEE INSTRUCTIONS ON REVERSE			through			
NAME OF FILER				I.D. NU	IMBER	
Jesse Molina for City Council 2012				13100	779	
CODES: If one of the following codes accurately descr	ribes the payment, you may ent	ter the code. Otherw	rise, describe the pay			
CMP campaign paraphemalia/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 appears OFC office expenses PET petition circulating PHO phone banks POL polling and survey res	ons ances earch messenger services	RAD radio airtir RFD returned of SAL campaign TEL t.v. or cab TRC candidate TRS staff/spour TSF transfer bo	me and production costs contributions workers' salaries le airtime and productior travel, lodging, and mease travel, lodging, and metween committees of the	n costs als neals e same candidate/spons	
NAME AND ADDRESS OF PAYEE OR 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	
AFS Printing 2678 Hamner Avenue Norco CA 92860	LIT	0.00	2330.42	0.00	2330.42	
ID: Brian Floyd & Associates 10930 Terra Vista Pkwy #18	CNS	0.00	2000.00	0.00	2000.00	
Rancho Cucamonga CA 91730						
Delta Business Machines 14175 Apple Blossom Lane	OFC	300.00	0.00	0.00	300.00	
Moreno Valley CA 92553						
 Payments that are contributions or independent expenditures must a summarized on Schedule D. 	also be SUBTOTALS	\$	\$	\$	\$	
Schedule F Summary 1. Total accrued expenses incurred this period. (Include accrued expenses of \$100 or more, plus total unitemi			INCL	JRRED TOTALS \$	7955.42	
Total accrued expenses paid this period. (Include all saccrued expenses of \$100 or more, plus total unitemited)	Schedule F, Column (c) subtota	als for payments on		PAID TOTALS \$		
3. Net change this period. Subtract Line 2 from Line 1 on the Summary Page, Column A, Line 9.)				NET \$	7785.42	

Schedule	e F		
Accrued	Expenses	(Unpaid	Bills)

Type or print In ink.

Amounts may be rounded to whole dollars.

	201	יטשד	ソレビリ

CALIFORNIA

Statement covers period

FORM from _ through ____ 22 / 23 SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Jesse Molina for City Council 2012 1310079 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphemalia/misc. MBR member communications RAD radio airtime and production costs 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 staff/spouse travel, lodging, and meals IND independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services transfer between committees of the same candidate/sponsor LEG legal defense PRO professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT print ads WEB information technology costs (internet, email) (a) (d) NAME AND ADDRESS OF PAYEE OR CREDITOR CODE OR **OUTSTANDING** AMOUNT INCURRED AMOUNT PAID **OUTSTANDING** (IF COMMITTEE, ALSO ENTER I.D. NUMBER) DESCRIPTION OF PAYMENT **BALANCE BEGINNING** THIS PERIOD THIS PERIOD BALANCE AT CLOSE OF THIS PERIOD (ALSO REPORT ON E) OF THIS PERIOD ID: POL 0.00 3625.00 0.00 3625,00 **Public Opinion Strategies** P.O. Box 4250 Redondo Beach 90277 ID: 170.00 0.00 170.00 0.00 Trimble & Company An Accountancy Corp. See Schedule E for codes 5041 La Mart Drive Suite 110 or descriptions. Riverside 92507 Payments that are contributions or independent expenditures must also be **SUBTOTALS \$** 470.00\$ 7955.42\$ 170.00 \$ 8255.42 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 uniterized accrued expenses under \$100.)..... INCURRED TOTALS \$ 2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on PAID TOTALS \$ accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)..... 3. Net change this period. Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) May be a negative number

Schedule G

Type or print in ink.

	SCHEDULE (
Statement covers period	california 460		
through	23 / 23		
	I.D. NUMBER		

Contractor (on Behalf of This Committee)	nt		its may be rounded whole dollars.	from	CALIFO	
SEE INSTRUCTIONS ON REVERSE				through	2	23 / 23
NAME OF FILER Jesse Molina for City Council 2012					I.D. NUMB	BER
·					1310079	9
NAME OF AGENT OR INDEPENDENT CONTRACTOR						
AFS Printing				- 19		
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 * Payments that are contributions or Independent expenditures must also be seemed.	MBR membe MTG meeting OFC office e. PET petition PHO phone b POL polling a POS postage PRO professi PRT print ad	r communications and appearance appearance circulating conks and survey resultional services (s	ons ances	RAD radio airtime a RFD returned cont SAL campaign wo TEL t.v. or cable a TRC candidate tra TRS staff/spouse t TSF transfer betwo	and production costs ributions rkers' salaries irtime and production covel, lodging, and meals ravel, lodging, and meals een committees of the s	ls ame candidate/spons
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION OF PAYMENT		AMOUNT PAID
U.S. Postal Service 23580 Allessandro Blvd	ID:	POS				872.76
Moreno Valley CA 92553						
	ID:			2	<u>ω</u>	
	ID:					
	ID:					
	ID:				iž.	
и						

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

872.76

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.