Recipient Committee Campaign Statement (Government Code Sections 84200-84216.5)		ink.	PECEIVED	COVER PAGE 2001/02 460	
	Statement covers period from10/01/2012	Date of election if applicable: (Month, Day, Year)	12 OCT 25 PM 4: 40		
SEE INSTRUCTIONS ON REVERSE	through 10/20/2012	11/06/2012	·	For Official Use Only	
1. Type of Recipient Committee: All Comm Some Officeholder, Candidate Controlled Committee O State Candidate Election Committee O Recall (Also Complete Part 5.) General Purpose Committee O Sponsored O Small Contributor Committee O Political Party/Central Committee	ittees - Complete Parts 1,2,3, and 4. 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 Statem Pre-election State Semi-annual State Termination State Amendment (Expla	ment G ement S ment S	Quarterly Statement Special Odd-Year Report Supplemental Preelection Statement - Attach Form 495	
3. Committee Information	I.D.NUMBER 1310079	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE Jesse Molina for City Council 2012 STREET ADDRESS (NO.P.O. BOX)		NAME OF TREASURER Mrs. Dana Hopkins, CPA			
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. B	NE NE	NAME OF ASSISTANT TREASUR	ER, IF ANY	AREA CODE/PHONE	
CITY STATE ZIP COE	DE AREA CODE/PHONE	MAILING ADDRESS		<u>.</u>	
OPTIONAL: FAX/E-MAIL ADDRESS		OPTIONAL · FAY/F-MAIL ADDRES	STATE ZIP CODE	AREA CODE/PHONE	
I have used all reasonable diligence in proparing and is true and complete. I certify under penal Executed on 10-25-2012 By Executed on 10-24-2012 By DATE Executed on By	f	best of my knowledge the inform ornia that the foregoing is true at SSISTANT TREASURER	nation contained herein and in and correct.	n the attached schedules	
Executed on By	SIGNATURE OF CONTROLLING OFFICEHOLDER, (CANDIDATE, STATE MEASURE PROPONENT	· .		
DATE	SIGNATURE OF CONTROLLING OFFICEHOLDER, (CANDIDATE, STATE MEASURE PROPONENT	FPPC Toll-	FPPC Form 460 (JAN/05) Free Helpline: 866/ASK-FPPC	

FPPC Form 460 (JAN/05) FPPC Toll-Free Helpline: 866/ASK-FPPC State of California

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2

CALIFORNIA 460

2/13

Officeholder or Candidate C	Controlled Co	mmittee	6	. Ballot Measure Co	mmittee			
NAME OF OFFICEHOLDER OR CANDIDATE Jesse Molina				NAME OF BALLOT MEASURE				
OFFICE SOUGHT OR HELD (INCLUDE LOCATI Held: City Council Member City	ION AND DISTRICT NU	· ·,		BALLOT NO. OR LETTER	JURISDICTIO	N		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND		STATE ZIP		Identify the controlling office	eholder, candid	late, or state i	neasure prop	onent, if any.
				NAME OF OFFICEHOLDER, CAI	NDIDATE, OR PR	OPONENT		
Related Committees Not Include not included in this statement that are control contributions or to make expenditures on beh	lled by you or are prim	arily formed to receive		OFFICE SOUGHT OR HELD			DISTRICT NO.	IF ANY
COMMITTEE NAME	I.D	NUMBER	7.	Primarily Formed (Committee	List names	of officeholder	s) or candidate(s) f
NAME OF TREASURER	Ι.	NTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOU	HT OR HELD	SUPPORT
COMMITTEE ADDRESS STREET ADDR	RESS (NO P.O.BOX)			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUC	SHT OR HELD	SUPPORT
CITY	STATE ZIP CODE	AREA CODE/PHONE						☐ OPPOSE
COMMITTEE NAME	I.D	NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUC	OHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	I	NTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUC	SHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDR	RESS (NO P.O.BOX)							

Campaign Disclosure Statement Summary Page

19. Outstanding Debts

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

SUMMARY PAGE

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

Statement covers period

		from	
EE INSTRUCTIONS ON REVERSE		through	3 / 13
AME OF FILER esse Molina for City Council 2012			I.D. NUMBER
esse Molina for City Council 2012	•		1310079
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
. Monetary Contributions Schedule A, Line	3 \$ 2050.00	\$39598.00_	General Elections
. Loans Received Schedule B, Line		0.00	1/1 through 6/30 7/1 to Date
. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 +	2 \$ <u>2050.00</u>	\$\$39598.00	20. Contribution Received \$ 0.00 \$ 0.00
. Nonmonetary Contributions Schedule C, Line	3 0.00	1140.00	24 Evpandituras
. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 +	4 2050.00	\$ 40738.00	21. Expenditures Made \$ 0.00 \$ 0.00
xpenditures Made			Expenditure Limit Summary for State
Payments Made Schedule E, Line	4 \$ 13388.16	\$ <u>40807.59</u>	Candidates
. Loans Made Schedule H, Line	7 0.00	0.00	22. Cumulative Expenditures Made*
. SUBTOTAL CASH PAYMENTS Add Lines 6 +	7 \$ 13388.16	\$40807.59	(If Subject to Voluntary Expenditure Limit)
. Accrued Expenses (Unpaid Bills) Schedule F, Line	3 -5935.42	2970.00	Date of Election Total to Date
0. Nonmonetary Adjustment Schedule C, Line	3 0.00	1140.00	(mm/dd/yy)
1. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 1	0 \$ 7452.74	\$44917.59_	<u> </u>
Current Cash Statement			\$
Beginning Cash Balance Previous Summary Page, Line 1	16 \$ <u>15870.71</u>	To calculate Column B, add	
3. Cash Receipts Column A, Line 3 abov	ve <u>2050.00</u>	amounts in Column A to the corresponding amounts	
4. Miscellaneous Increases to Cash Schedule I, Line	4159.30	from Column B of your last	
5. Cash Payments Column A, Line 8 abov	ve <u>13388.16</u>	report. Some amounts in Column A may be negative	
6. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line	15 \$ <u>4691.85</u>	figures that should be subtracted from previous	
If this is a termination statement, Line 16 must be zero.	:	period amounts. If this is the first report being filed	
7. LOAN GUARANTEES RECEIVED Schedule B, Part	2 \$ 0.00	for this calendar year, only carry over the amounts	
Cash Equivalents and Outstanding Debts 8. Cash Equivalents See instructions on reverse	se \$ 0.00	from Lines 2, 7, and 9 (if any).	*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

2970.00

Add Line 2 + Line 9 in Column B above

Schedule A Monetary Contributions Received

Type or print in ink.
Amounts may be rounded

COL		MI II	E 4
SCH	II.	<i>)</i> () (E A

Ionetary Contributions Received	to whole dollars.	Statement covers period	california 460	
EE INSTRUCTIONS ON REVERSE		through	4 / 13	
AME OF FILER esse Molina for City Council 2012			I.D. Number 1310079	

					10.10	
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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
Rcpt Dt: 10/12/2012	MEF Homes LLC 1000 Dove St Ste 100 Newport Beach CA 92660 ID:	IND COM OTH PTY SCC		500.00	500.00	
Rcpt Dt: 10/12/2012	MV Homes LLC 1000 Dove St Ste 100 Newport Beach CA 92660 ID:	IND COM OTH PTY		500.00	500.00	
Rcpt Dt: 10/12/2012	RVOne Homes LLC 1000 Dove St Ste 100 Newport Beach CA 92660 ID:	☐ IND ☐ COM ※ OTH ☐ PTY ☐ SCC		500.00	500.00	
Rept Dt: 10/12/2012	RVThree Homes LLC 1000 Dove St Ste 100 Newport Beach CA 92660 ID:	IND COM OTH PTY SCC		500.00	500.00	

	SUBTOTAL \$	2000.00	
Schedule A Summary 1. Amount received this period - contributions of \$100 or more. (Include all Schedule A subtotals.)	\$	2000.00	*Contributor Codes IND - Individual COM - Recipient Committee
2. Amount received this period - unitemized contributions of less than \$100	\$	50.00	(other than PTY or SCC) 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 \$	2050.00	SCC - Small Contributor Committee

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

scneaule		•					SCHEDULE D
Supportin	of Expenditures ng/Opposing Other es, Measures and Committees	osing Other Amounts may be rounded to whole dollars.			vers period	CALIFORNIA 460	
	ONS ON REVERSE			through		5	/ 13
NAME OF FILER						I.D. NUME	SER
Jesse Molina i	for City Council 2012	,	:	-		131007	9
DATE	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMMULATIVE CALENDAR \ JAN.1 - DEC.	YEAR	PER ELECTION TO DATE (IF REQUIRED)
10/16/2012	Ms. Victoria Baca City Council Member	Monetary Contribution		1000.00	1	00.00	1000.00 G1
	City	Non-Monetary Contribution				· ·	
	District No:	Independent Expenditure					
				,			
		٠	SUBTOTAL	- \$ 1000.00			
Sahadula	D Summary						
	ions and independent expenditures made this period	of \$100 or more. (Incl	ude all Schedule D s	subtotals.)	.,	\$ _	1000.00
`							0.00
2. Unitemize	ed contributions and independent expenditures made	this period of under \$	100	.,		Ф	- 3100

Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period	CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE			through	6/13
NAME OF FILER				I.D. NUMBER
Jesse Molina for City Council 2012				1310079
CODES: If one of the following codes accurately describes t	he payment, you r	may enter the code. Oth	nerwise, describe the payment.	
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundralsing events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	POS postage, de	nd appearances nses ulating	RAD radio airtime and productions RFD returned contributions SAL campaign workers' sale t.v. or cable airtime and TRC candidate travel, lodging transfer between community voter registration WEB returned contributions.	aries d production costs ng, and meals Iging, and meals nittees of the same candidate/sponso
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
AFS Printing 2678 Hamner Avenue	ID:	LIT		2330.42
Norco CA 92860 Mr. Richard L. F. Archer	ID:	LIT	· · · · · · · · · · · · · · · · · · ·	650.00
AT&T 221 Venture Way LaFayette LA 70507	ID:	OFC		122.00
* Payments that are contributions or independent expenditures must al	so be summarized or	n Schedule D.	S	SUBTOTAL \$
Schedule E Summary				
1. Payments made this period of \$100 or more. (Include all	Schedule E subtot	tals.)		\$13308.32
Unitemized payments made this period of under \$100.		,		
Total interest paid this period on loans. (Enter amount fro				0.00
4. Total payments made this period. (Add lines 1, 2, and 3.	\$			

	÷			SCHEDULE		
Schedule E	Type or print in ink. Amounts may be rounded to whole dollars.			Statement covers period	CALIFORNIA 460	
Payments Made				from	FORM 400	
SEE INSTRUCTIONS ON REVERSE				through	7/13	
NAME OF FILER					I.D. NUMBER	
Jesse Molina for City Council 2012	•		4 - 2 - 0		1310079	
CODES: If one of the following codes accurately describes t	he payment, you r	nay enter t	he 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		d appearance ses ilating s survey resear ivery and me	es	RAD radio airtime and product returned contributions SAL campaign workers' salar TEL t.v. or cable airtime and TRC candidate travel, lodging TRS staff/spouse travel, lodging transfer between commit voter registration WEB information technology of	ries production costs g, and meals ing, and meals ttees of the same candidate/sponsor	
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE	OR DES	CRIPTION OF PAYMENT	AMOUNT PAID	
Chris Baca	ID:		Sign Installation		280.00	
Office Dava	10.			;		
Victoria Baca for Moreno Valley City Council 2012	ID: 1348243	СТВ			1000.00	
		CNS			500.00	
Brian Floyd & Associates 10930 Terra Vista Pkwy #18	ID:				000.00	
·						
Rancho Cucamonga CA 91730				0.1	IDTOTAL A	
* Payments that are contributions or independent expenditures must al	so be summarized or	Schedule D		30	JBTOTAL \$	
Schedule E Summary	•		•			
1. Payments made this period of \$100 or more. (Include all \$						
2. Unitemized payments made this period of under \$100.					\$	
3. Total interest paid this period on loans. (Enter amount fro	m Schedule B, Pa	rt 1, Colum	ın (e).)		\$	
4. Total payments made this period. (Add lines 1, 2, and 3.	Enter here and on	the Summ	ary Page, Column	A, Line 6.) T (OTAL \$	

Schedule E Payments Made	* Amazonia wazo ka wazonia d		Statement covers period	CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE				through	8/13
NAME OF FILER	?				I.D. NUMBER
Jesse Molina for City Council 2012					1310079
CODES: If one of the following codes accurately describes to	the payment, you r	nay enter th	ne code. Otherwi	se, 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		d appearance ses ilating s survey researd ivery and mes		RAD radio airtime and product returned contributions SAL campaign workers' salar TEL t.v. or cable airtime and product race transfer between commit vot voter registration WEB information technology of	ies production costs , and meals ng, and meals ttees of the same candidate/sponso
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE C	DR D	ESCRIPTION OF PAYMENT	AMOUNT PAID
Adrin Coronado	ID:		Sign Installation		100.00
Costco Wholesale 12700 Day St	ID:	TRC	Fuel		50.22
Moreno Valley CA 92553	·				
Costco Wholesale 12700 Day St	ID:	TRC	Fuel		77.79
Moreno Valley CA 92553					EDTOTAL A
* Payments that are contributions or independent expenditures must a	Iso be summarized or	Schedule D.		30	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, Colum	n (e).)		\$

0 1 1 1 m	· · ·			SCHEDULE			
Schedule E		ype or print in ink. unts may be rounded	Statement covers period	california 460			
Payments Made		to whole dollars.	from	FORM FOU			
SEE INSTRUCTIONS ON REVERSE			through	9/13			
NAME OF FILER	•			I.D. NUMBER			
Jesse Molina for City Council 2012			·	1310079			
CODES: if one of the following codes accurately de	escribes the payment, you	u 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 fundralsing events IND independent expenditure supporting/opposing others (ex LEG legal defense LIT campaign literature and mailings	OFC office exp PET petition ci PHO phone ba POL polling an plain)* POS postage,	and appearances enses irculating		ns salaries and production costs ging, and meals odging, and meals mmittees of the same candidate/sponso			
NAME AND ADDRESS OF PAYEE OR CI (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	REDITOR	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID			
Oscar Santana Web Design 11672 Pintall Ct.	ID.	WEB		100.00			
Moreno Valley CA 92557							
Perfect Impressions 3547 Market St.	ID:	СМР		150.31			
Riverside CA 92501							
Perfect Impressions 3547 Market St.	ID:	CMP		172.40			
Riverside CA 92501							
* Payments that are contributions or independent expenditu	res must also be summarized	on Schedule D.		SUBTOTAL \$			
Schedule E Summary							
1. Payments made this period of \$100 or more. (In	clude all Schedule E subt	totals.)		\$			
Unitemized payments made this period of under							
Total interest paid this period on loans. (Enter a							
4. Total payments made this period. (Add lines 1, 2			·				
T. Lotal payments made this period. (Add into 1,)	E, and o. Lincol Holo and	on the cumming i age	-,				

Oakastala E	Thomas				SCHEDULE E	
Schedule E		e or print in ink. Is may be rounded		Statement covers period	CALIFORNIA 460	
Payments Made	to	whole dollars.		from	FORM 400	
SEE INSTRUCTIONS ON REVERSE				through	10 / 13	
NAME OF FILER					I.D. NUMBER	
Jesse Molina for City Council 2012					1310079	
CODES: If one of the following codes accurately describes the	he payment, you n	nay 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	OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, del	d appearances ses ılating		RAD radio airtime and product returned contributions SAL campaign workers' salar TEL t.v. or cable airtime and TRC candidate travel, lodging staff/spouse travel, lodg TSF transfer between commit voter registration WEB information technology of	ries production costs g, and meals ing, and meals ittees of the same candidate/sponsor	
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE OR	DESC	RIPTION OF PAYMENT	AMOUNT PAID	
Public Opinion Strategies P.O. Box 4250	ID:	POL			3625.00	
Redondo Beach CA 90277	·					
U.S. Postal Service 23580 Allessandro Blvd	ID:	POS			2151.93	
Moreno Valley CA 92553						
U.S. Postal Service 23580 Allessandro Blvd	ID:	POS			1998.25	
Moreno Valley CA 92553						
* Payments that are contributions or independent expenditures must also	so be summarized or	Schedule D.		St	JBTOTAL \$ 13308.32	
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.						
Total interest paid this period on loans. (Enter amount from						
4. Total payments made this period. (Add lines 1, 2, and 3.	Enter nere and on	trie Summary Pag	je, Column A	, Line 6.)	UIAL D	

SCH	Æ	DI.	11	F	F
OUL	ı⊏	UL.	ᄔ	_	Г

Schedule F		
Accrued Expenses	(Unpaid	Bills)

Type or print in ink. Amounts may be rounded

Statement covers period from	california 460
through	11 / 13
	I.D. NUMBER

to whole dollars. SEE INSTRUCTIONS ON REVERSE NAME OF FILER 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. campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs campaign consultants MTG meetings and appearances RFD returned contributions contribution (explain nonmonetary)* office expenses campaign workers' salaries civic donations PET petition circulating t.v. or cable airtime and production costs candidate filing/ballot fees candidate travel, lodging, and meals PHO phone banks fundraising events staff/spouse travel, lodging, and meals polling and survey research POL independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services transfer between committees of the same candidate/sponsor legal defense professional services (legal, accounting) voter registration campaign literature and mailings PRT print ads WEB information technology costs (internet, email)

(a) (b) NAME AND ADDRESS OF PAYEE OR CREDITOR AMOUNT PAID OUTSTANDING CODE OR OUTSTANDING AMOUNT INCURRED (IF COMMITTEE, ALSO ENTER I.D. NUMBER) DESCRIPTION OF PAYMENT **BALANCE BEGINNING** THIS PERIOD THIS PERIOD BALANCE AT CLOSE OF THIS PERIOD OF THIS PERIOD (ALSO REPORT ON E) ID: 0.00 2330.42 IIT 2330.42 0.00 **AFS Printing** 2678 Hamner Avenue Norco 92860 ID: 2000.00 0.00 500.00 1500.00 CNS Brian Floyd & Associates 10930 Terra Vista Pkwv #18 Rancho Cucamonga 91730 ID: **OFC** 300.00 0.00 0.00 300.00 **Delta Business Machines** 14175 Apple Blossom Lane 92553 Moreno Vallev * Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTALS \$ \$ \$

Schedule F Summary

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

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.)..... 6455.42

3. Net change this period. Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)

	_	_	 	_	_
SCH		IΝ		_	_

			<i>t</i>		SCHEDULE
Schedule F Accrued Expenses (Unpaid Bills)	Type or print in in Amounts may be rou to whole dollars	nded	Statement cover		ornia 460
SEE INSTRUCTIONS ON REVERSE			through		12 / 13
NAME OF FILER Jesse Molina for City Council 2012				I.D. NUI	
CODES: If one of the following codes accurately describes	the payment, you may ent	er the code. Otherw	ise, describe the pay		
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 appeara OFC office expenses PET petition circulating PHO phone banks POL polling and survey rese POS postage, delivery and in PRO professional services (PRT print ads	nces earch messenger services	RFD returned of SAL campaign TEL t.v. or cab TRC candidate TRS staff/spou TSF transfer book VOT voter regis	me and production costs contributions workers' salaries le airtime and production travel, lodging, and meal se travel, lodging, and metween committees of the stration in technology costs (internations)	s eals 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
Public Opinion Strategies P.O. Box 4250	POL	3625.00	0.00	3625.00	0.00
Redondo Beach CA 90277 ID: Trimble & Company An Accountancy Corp. 5041 La Mart Drive Suite 110 Riverside CA 92507	PRO	650.00	520.00	0.00	1170.00
TAVELSIGE OA SZOOY		·			
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$ 8905.42	\$ 520.00	\$ 6455.42	\$ 2970.00
Schedule F Summary 1. Total accrued expenses incurred this period. (Include all S accrued expenses of \$100 or more, plus total unitemized 2. Total accrued expenses paid this period. (Include all Sche	accrued expenses under \$	100.)	INCL	IRRED 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.).....

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

PAID TOTALS \$_

Schedule I			
Miscellaneous	Increases	to	Cash

SCHEDULE I

Miscellaneous Increases to Cash		Amounts	may be rounded tole dollars.	Statement covers period from	california 460	
EE INSTRUCTION:	S ON REVERSE				through	13 / 13
AME OF FILER Jesse Molina fo	or City Council 2012					I.D. NUMBER 1310079
DATE RECEIVED		FULL NAME AND ADDRESS OF SOURCE (F COMMITTEE, ALSO ENTER I.D. NUMBER)		DES	SCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
Rcpt Dt: 10/19/2012	Waste Management 800 South Temescal		ID:	Stale Dated		159.30
	Corona	CA 92879	•			

Attach additional information on appropriately labeled continuation sheets.	SUBTOTAL \$	159.30
Schedule I Summary	150.20	
1. Increases to cash of \$100 or more this period	\$ 159.30	
2. Unitemized increases to cash under \$100 this period	\$ 0.00	
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e)_)	\$ 0.00_	,
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)	\$ 159.30	
	 FPPC Toll-F	FPPC Form 460 JAN/05 ree Helpline: 866/ASK-FPPC