Recipient ommittee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in	Ä	ENGLOS ALLEY	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE	from 01 01 2013	Date of election if applicable: (Month, Day, Year)	-3 PM 12: 41	Page of For Official Use Only
	through 09 30 2013			
Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	rimarily Formed Ballot Measure committee Controlled Sponsored Complete Part 6) Committee Complete Part 7)	2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termina Amendment (Explain below)	☐ Specia ☐ Supple	erly Statement al Odd-Year Report emental Preelection nent - Attach Form 495
Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Friends to Elect Good Price for Council 2014 STREET ADDRESS (NO P.O. BOX) MOYEND Valley CA 9255 CITY STATE ZIP CODE MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX CITY STATE ZIP CODE OPTIONAL: FAX / E-MAIL ADDRESS	E AREA CODE/PHONE	Treasurer(s) Mays no NAME OF TREASURER MAILING ADDRESS CITY NAME OF ASSISTANT TREASURER, IF AMAILING ADDRESS CITY OPTIONAL: FAX / E-MAIL ADDRESS	A 92555 STATE ZIP COD	C E AREA CODE/PHONE
Verification				
I have used all reasonable diligence in preparing and reviewing th under penalty of perjury under the laws of the State of California the Executed on	By	dge the information contained herein and		is true and complete. I certify
Executed on	Bv	ature of Controlling Officeholder, Candidate, State Measure		 .a
Executed on	Bv	ature of Controlling Officeholder, Candidate, State Measure		* . ¹ -

Type or print in ink.

Recipient Committee Campaign Statement Cover Page — Part 2

CALIFORNIA 460
FORM

		-				rage <u>4</u>	or <u></u>
. Officeholder or Candidate Controlled Comm	ittee	6.	Primarily Formed Ballo	t Measure	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE				
OFFICE SOUGHT-OR HELD (INCLUDE LOCATION AND DISTRIC	T NI IMBER IF ADDI (CADI E)		N/A BALLOT NO. OR LETTER		· ·		
Moreno Valley City Council	TY STATE ZIP	,	DALEOT NO. OR LETTER	JURISDICTI	ON		SUPPORT OPPOSE
Moreno	011 MM 211		Identify the controlling office			te measure	proponent, if any.
Related Committees Not Included in this Sta	famous		THE OF STREET OF STREET STREET	ADAIE, OK PA	OPONENT		
not included in this statement that are controlled by you contributions or make expenditures on behalf of your can	r are primarily formed to meeting		OFFICE SOUGHT OR HELD			DISTRICT NO. I	F ANY
COMMITTEE NAME	I.D. NUMBER						
N/A							
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Candi	date/Offic	eholder Con	nmittee <i>Li</i>	st names of
	☐ YES ☐ NO		officeholder(s) or candidate(s)	for which this	s committee is p	orimarily form	ed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BO	X) .		NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUGH	T OR HELD	
A 170			NIA		İ		SUPPORT OPPOSE
CITY STATE ZIP CO	DDE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUGH	T OR HELD	-
						•	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OCCUPANT		·		U OPPOSE
			NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUGH	IT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR CAI	IDIDATE	OFFICE COURT	T 00 110 0	
	YES NO		The street of th	IDIDATE	OFFICE SOUGH	II OK HELD	SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BO	X)						☐ OPPOSE
CITY STATE ZIP CO	DE AREA CODE/PHONE		Attach	continuatio	n sheets if nec	cessary	
			6.0				

Schedule A Monetary Contributions Receive
·

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

SCHEDULE A

				from 01/01	2013	FORM 460
SEE INSTRUCTION NAME OF FILER	NS ON REVERSE			through <u>09 3</u>	0/2013	Page 3 of 6
Frien		e-for	Moreno Valley Cr	ty Counci	1 2014	1.D. NUMBER 135 9613
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	1	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	DATE PERELECTION
08/29/2013	Moreno Valley, CA 92555	MIND □COM □OTH □PTY □SCC	Retired	#100.00	\$ 100.00	
08/29/2013	Kyle P. Kollar Moreno Valley, CA 92555-7067	DIND COM OTH PTY SCC	Retired	# /00.00	# 100.00)
18/29/2013	Moreno Valley, CA 92552	IND COM	Senior V.P. Visterra Credit Union	*150.00	^{sl} /150.00	
18/29/2013	Cynthia Conley Moreno Valley, CH 92553	MIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Educator Riverside Community College	100.00	# 100.00	
28/29/2013	Errol T. Caszatt Moreno Valley, CA 92555	DIND COM OTH PTY SCC	Retired	5/100.00	# 100.00	
			SUBTOTAL\$	550.00	a Book and a second and a second	
Schedule A	Summary				100 to 100 100 100 100 100 100 100 100 100 10	

1. Amount received this period – itemized monetary contributions.

2. Amount received this period – unitemized monetary contributions of less than \$100\$ _____\$ ____\$ _____ \$

3. Total monetary contributions received this period.

*Contributor Codes

IND - Individual

Statement covers period

COM - Recipient Committee

(other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Schedule Monetary	A (Continuation Sheet) Contributions Received	Type or pri Amounts may to whole	/ be rounded	Statement cov	2013	CAL F	SCHEDULEA (CON IFORNIA 460 ORM
NAME OF FILER Friend	s to Elect George Price -	for Me	oreno Valley Ci	through 09/30			4 of 6
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, ALSO ENTER LD. NUMBER)	1	IE AAI INDURANIAA SAMOO	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	DATE EAR	PER ELECTION TO DATE (IF REQUIRED)
08/29/2013	Marsha S. Locke Moreno Valley, CA 92555	NIND □COM □OTH □PTY □SCC	Retired	\$ 100.00	\$ 100.0	00	
09/06/13	Encinitas, CH 42024-1029	XIND COM OTH PTY SCC	Retired	# 100.00	# 100.00)	
	Victoria Price Moreno Valley, CA 92555	IND COM	Operations Co-ordinato American Dental Partners California	#100.00	\$ 100.0	00	
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
ı		□ COM					

⊟отн PTY Scc

*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

300.00

SUBTOTAL\$

Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

SUMMARYPAGE

Summary Page	to whole dollars. Statement covers period from 0101/2013				CALIFORNIA 460		
see instructions on reverse NAME OF FILER Friends to Elect George Price for More	no Valley City C	Numari 2011	through	09/30/2013	Page _5 of _6		
Contributions Received 1. Monetary Contributions	Column A TOTAL THIS PERIOD (FROMATTACHED SCHEDULES) \$ 1125.00	Column CALENDARY TOTAL TODAY \$ 1125.	18 VEAR ATE O O	Running in Both the General Elections	mary for Candidates State Primary and rough 6/30 7/1 to Date \$\$		
Expenditures Made 5. Payments Made	\$ 115.56 -0-	\$ 115.5	56 ~	Expenditure Limit S Candidates 22. Cumulative (If Subject to V Date of Election (mm/dd/yy)	ummary for State Expenditures Made* oluntary Expenditure Limit) Total to Date		
2. Beginning Cash Balance Previous Summary Page, Line 16 3. Cash Receipts Column A, Line 3 above 4. Miscellaneous Increases to Cash Schedule I, Line 4 5. Cash Payments Column A, Line 8 above 6. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 If this is a termination statement, Line 16 must be zero. 7. LOAN GUARANTEES RECEIVED Schedule B, Part 2 Cash Equivalents and Outstanding Debts 8. Cash Equivalents	\$	To calculate Column amounts in Column corresponding amounts. Some amounts. Some amounts of the first report being for this calendar yearry over the amounts. The first report amounts of the first report being for this calendar yearry over the amounts. The first report being for this calendar yearry over the amounts.	n A to the counts your last unts in negative be revious this is g filed ear, only ounts	*Amounts in this section mareported in Column B.	\$y be different from amounts		
9. Outstanding Debts Add Line 2 + Line 9 in Column B above	s <u>-o-</u>			FPPC Toll-Free Helpline:	FPPC Form 460 (January/05) 866/ASK-FPPC (866/275-3772)		

• •		({	
Schedule E Type or print in ink. Payments Made to whole dollars.				Statement con	-,	CALIFORNIA 46		
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Friends to Elect George Po	rice for Mo	reno Valle	v Citu C	through 09/3	0/2013 2014	Page <u>6</u> 1.D. NUMBE	ER	
CODES: If one of the following codes accurately descreption of the following codes accurately descreptions campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member cor MTG meetings an OFC office expe PET petition circ PHO phone bank POL polling and POS postage, de	You may enter the of mmunications and appearances enses authors	code. Otherwi	se, describe the RAD radio airtime RFD returned con SAL campaign wo TEL t.v. or cable a TRC candidate tra TRS staff/spouse TSF transfer betw VOT voter registra	payment. and production of tributions orkers' salaries airtime and producted, lodging, and travel, lodging, are committees	costs uction costs meals and meals of the same	candidate/sponso	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD, NUMBER)		CODE OR	DESCF	RIPTION OF PAYMENT			AMOUNT PAID	
PIP Printing and Marketing 12234 Heacock St. Moreno Valley, CA 92557	Services	LIT	***************************************			*	15.56	
							. **	
* Payments that are contributions or Independent expenditure	es must also be sumn	narized on Schedule	D.		SUE	BTOTAL\$	115.56	
Schedule E Summary 1. Itemized payments made this period. (Include all Sched 2. Unitemized payments made this period of under \$100	***************************************	•••••••	**************	******************************	*****************	\$	5.56	
 Total interest paid this period on loans. (Enter amount from 4. Total payments made this period. (Add Lines 1, 2, and 3) 						\$ Al & //5	5.56	