**Recipient Committee** Campaign Statement

Executed on \_

**COVER PAGE** CALIFORNIA 460

Cover Page			RECEIVE		FORIVI
SEE INSTRUCTIONS ON REVERSE	from January 1 W b through June 30 20/b	Date of election if applicable: 6 (Month, Day, Year)  November 8, 2016	AUG - I PH	կ։ կկ <u>Р</u>	For Official Use Only
1. Type of Recipient Committee: All Committees - Committe	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:			
Officeholder, Candidate Controlled Committee O State Candidate Election Committee O Recall (Also Complete Parl 5)  General Purpose Committee O Sponsored O Small Contributor Committee	Primarily Formed Ballot Measure Committee Controlled Consored Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee Also Complete Part 7)	☐ Preelection Statement ☐ Semi-annual Statement ☐ Termination Statement (Also file a Form 410 Term ☐ Amendment (Explain bek	mination)		r Statement Odd-Year Report
	D. NUMBER 1381978	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Friends to Elect Price for Mayor 2016  STREET ADDRESS (NO P.O. BOX)		MAME OF TREASURER  Marsha Locke  MAILING ADDRESS  CITY	STATE	ZIP CODE	AREA CODE/PHONE
		Moreno Valley	CA	92555	
Moreno Valley CA 9255		NAME OF ASSISTANT TREASURER,	IF ANY		
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX		MAILING ADDRESS			
CITY STATE ZIP CO	DE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRESS			
4. Verification I have used all reasonable diligence in preparing and reviewicertify under penalty of perjury under the laws of the State of  Executed on	ng this statement and to the best of my kn California that the foregoing By	ure of Treasurer or Assistant Tr	reasurer		les is true and complete. I
Executed on	BySig	nature of Controlling Officeholder, Candidate, Sta	ate Measure Proponent		

Signature of Controlling Officeholder, Candidate, State Measure Proponent FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

### Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2
CALIFORNIA FORM 460
Page 2 of 8

NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BALLOT MEASURE			
George Price		N/A			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AN	D DISTRICT NUMBER IF APPLICABLE)	BALLOT NO. OR LETTER	JURISDICTI	ON	SUPPORT
Manage Malley Mayor					OPPOSE
Moreno Valley Mayor RESIDENTIAL/BUSINESS ADDRESS (NO. AND STRE	ET) CITY STATE ZIP				
ESIDENTIAD BUSINESS ADDRESS (NO. AND STALE		Identify the controlling office	ceholder, cand	idate, or state measure pro	ponent, if any.
	Moreno Valley, CA 92555	NAME OF OFFICEHOLDER, CA	NDIDATE, OR PE	ROPONENT	
Related Committees Not Included in not included in this statement that are controlled	this Statement: List any committees by you or are primarily formed to receive	OFFICE SOUGHT OR HELD		DISTRICT NO	). IF ANY
contributions or make expenditures on behalf of	your candidacy.				
OMMITTEE NAME	LD NUMBER				
	I.D. NUMBER				
	I.D. NUMBER	7 Drimovily Formed Con	edidata/Offic	coholder Committee	list names of
N/A	I.D. NUMBER  CONTROLLED COMMITTEE?	7. Primarily Formed Car officeholder(s) or candidate(	ndidate/Offic	ceholder Committee s committee is primarily form	List names of ned.
N/A		officeholder(s) or candidate(	s) for which thi	s committee is primarily for	ned.
N/A NAME OF TREASURER	CONTROLLED COMMITTEE?	7. Primarily Formed Car officeholder(s) or candidate(	s) for which thi	ceholder Committee s committee is primarily form OFFICE SOUGHT OR HELD	suppor
N/A NAME OF TREASURER	CONTROLLED COMMITTEE?	officeholder(s) or candidate(	s) for which thi	s committee is primarily for	suppor
COMMITTEE NAME N/A  NAME OF TREASURER  COMMITTEE ADDRESS  STREET ADDRESS  CITY  STATE	CONTROLLED COMMITTEE?	officeholder(s) or candidate(	CANDIDATE	OFFICE SOUGHT OR HELL	SUPPOR
N/A  NAME OF TREASURER  COMMITTEE ADDRESS STREET ADDRESS	CONTROLLED COMMITTEE?  YES NO (NO P.O. BOX)	officeholder(s) or candidate( NAME OF OFFICEHOLDER OR George Price	CANDIDATE	OFFICE SOUGHT OR HELD Moreno Valley May	SUPPOR
N/A  NAME OF TREASURER  COMMITTEE ADDRESS STREET ADDRESS	CONTROLLED COMMITTEE?  YES NO (NO P.O. BOX)	officeholder(s) or candidate(  NAME OF OFFICEHOLDER OR  George Price  NAME OF OFFICEHOLDER OR	CANDIDATE  CANDIDATE	OFFICE SOUGHT OR HELD  Moreno Valley May  OFFICE SOUGHT OR HELD	SUPPOR
N/A  N/A  N/A  N/A  N/A  N/A  N/A  N/A	CONTROLLED COMMITTEE?  YES NO (NO P.O. BOX)  ZIP CODE AREA CODE/PHONE	officeholder(s) or candidate( NAME OF OFFICEHOLDER OR George Price	CANDIDATE  CANDIDATE	OFFICE SOUGHT OR HELD Moreno Valley May	SUPPOR
N/A  N/A  N/A  N/A  N/A  N/A  N/A  N/A	CONTROLLED COMMITTEE?  YES NO  (NO P.O. BOX)  ZIP CODE AREA CODE/PHONE  I.D. NUMBER	officeholder(s) or candidate(  NAME OF OFFICEHOLDER OR  George Price  NAME OF OFFICEHOLDER OR	CANDIDATE  CANDIDATE	OFFICE SOUGHT OR HELD  Moreno Valley May  OFFICE SOUGHT OR HELD	SUPPOR
N/A  IAME OF TREASURER  COMMITTEE ADDRESS  STREET ADDRESS  STATE  COMMITTEE NAME	CONTROLLED COMMITTEE?  YES NO (NO P.O. BOX)  ZIP CODE AREA CODE/PHONE	officeholder(s) or candidate(  NAME OF OFFICEHOLDER OR  George Price  NAME OF OFFICEHOLDER OR	CANDIDATE  CANDIDATE  CANDIDATE	OFFICE SOUGHT OR HELD  Moreno Valley May  OFFICE SOUGHT OR HELD	SUPPOR SUPPOR OPPOSE SUPPOR OPPOSE
N/A  IAME OF TREASURER  COMMITTEE ADDRESS  STREET ADDRESS  STATE  COMMITTEE NAME	CONTROLLED COMMITTEE?  YES NO  (NO P.O. BOX)  ZIP CODE AREA CODE/PHONE  I.D. NUMBER  CONTROLLED COMMITTEE?  YES NO	Officeholder(s) or candidate(  NAME OF OFFICEHOLDER OR  George Price  NAME OF OFFICEHOLDER OR  NAME OF OFFICEHOLDER OR	CANDIDATE  CANDIDATE  CANDIDATE	OFFICE SOUGHT OR HELD OFFICE SOUGHT OR HELD OFFICE SOUGHT OR HELD OFFICE SOUGHT OR HELD	SUPPOR SUPPOR OPPOSE SUPPOR OPPOSE
N/A  NAME OF TREASURER  COMMITTEE ADDRESS  STREET ADDRESS  CITY  STATE	CONTROLLED COMMITTEE?  YES NO  (NO P.O. BOX)  ZIP CODE AREA CODE/PHONE  I.D. NUMBER  CONTROLLED COMMITTEE?	Officeholder(s) or candidate(  NAME OF OFFICEHOLDER OR  George Price  NAME OF OFFICEHOLDER OR  NAME OF OFFICEHOLDER OR	CANDIDATE  CANDIDATE  CANDIDATE	OFFICE SOUGHT OR HELD OFFICE SOUGHT OR HELD OFFICE SOUGHT OR HELD OFFICE SOUGHT OR HELD	SUPPOPO

## **Campaign Disclosure Statement Summary Page**

Amounts may be rounded to whole dollars.

		SUMMART PAGE
Statem	January 1701L	california 460
through	June 30 2016	Page3 of8
		I.D. NUMBER
		1381978

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Friends to Elect George Price for Mayor 2016 **Calendar Year Summary for Candidates** Column A Column B Contributions Received TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) CALENDAR YEAR TOTAL TO DATE Running in Both the State Primary and **General Elections** 3397.54 1. Monetary Contributions...... Schedule A, Line 3 1/1 through 6/30 7/1 to Date N/A N/A 2. Loans Received ...... Schedule B. Line 3 20. Contributions 3397.54 3397.54 3. SUBTOTAL CASH CONTRIBUTIONS....... Add Lines 1 + 2 \$ Received N/A N/A 4. Nonmonetary Contributions...... Schedule C, Line 3 21. Expenditures 3397.54 3397.54 Made 5. TOTAL CONTRIBUTIONS RECEIVED......Add Lines 3 + 4 \$ **Expenditures Made Expenditure Limit Summary for State** 5590.32 5590.32 **Candidates** 6. Payments Made...... Schedule E, Line 4 \$ \_\_ N/A N/A 7. Loans Made...... Schedule H. Line 3 22. Cumulative Expenditures Made\* 5590.32 5590.32 8. SUBTOTAL CASH PAYMENTS...... Add Lines 6 + 7 \$ (If Subject to Voluntary Expenditure Limit) N/A N/A 9. Accrued Expenses (Unpaid Bills) .......Schedule F, Line 3 Date of Election Total to Date N/A N/A (mm/dd/yy) 5590.32 5590.32 **Current Cash Statement** 7760.64 12. Beginning Cash Balance ...... Previous Summary Page, Line 16 \$ To calculate Column B. 3397.54 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 N/A 14. Miscellaneous Increases to Cash ...... Schedule I, Line 4 amounts from Column B reported in Column B. 5590.32 of your last report. Some amounts in Column A may 5567.86 be negative figures that 16. ENDING CASH BALANCE ......Add Lines 12 + 13 + 14, then subtract Line 15 \$ 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 N/A filed for this calendar year, 17. LOAN GUARANTEES RECEIVED...... Schedule B, Part 2 \$ \_\_\_\_ only carry over the amounts from Lines 2, 7, and 9 (if **Cash Equivalents and Outstanding Debts** any). 18. Cash Equivalents ...... See instructions on reverse \$ 19. Outstanding Debts...... Add Line 2 + Line 9 in Column B above \$ \_ FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

#### Schedule A **Monetary Contributions Received**

Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period  from January 1, 16, 16	CALIFORNIA 460
through June 30 Tolk	Page4 of8
	I.D. NUMBER 1381978

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends to Flect George Price for Mayor 2016

4/28/16 Ri	iverside, CA 92506 ynn McQuern iverside, CA 92506	OTH PTY SCC  IND COM OTH PTY SCC	Retired SUBTOTAL \$	100	100	100
4/28/16 Ri	ynn McQuern	OTH PTY SCC IND COM OTH PTY				
4/28/16	iverside, CA 92506	□OTH □PTY □SCC	Tourse	200	200	200
	erry Reed	☑ IND □ COM	Retired			
4/28/16	an Zuppardo oreno Valley, CA 92557	☑IND □COM □OTH □PTY □SCC	Realtor, MY Realty	200	200	200
4/28/16	om Gardner oreno Valley, CA 92557	☑IND □COM □OTH □PTY □SCC	Retired	150`	150	150
4/28/16	L Mullen iverside, CA 92506	☑IND □COM □OTH □PTY □SCC	Retired	150	150	150
DATE RECEIVED	L NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)

#### Schedule A Summary

- 1. Amount received this period itemized monetary contributions. 1850.00 (Include all Schedule A subtotals.) .....\$ 1547.54 2. Amount received this period – unitemized monetary contributions of less than \$100 ......\$
- 3. Total monetary contributions received this period. 3397.54 (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.).....TOTAL \$ .

\*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

FPPC Form 460 (Jan/2016)

# **Schedule A (Continuation Sheet)**

Amounts may be rounded

SCHEDULE A (CONT.)

Monetary	onetary Contributions Received to whole dollars.		Statement co	CALIFO FOR		460		
				throughJt	une 30 W/L	Page5	5 of_	8
IAME OF FILER						I.D. NUMBI	ER	
Friends to E	lect George Price for Mayor 2016					1381978		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELE TO DA	ATE

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
4/28/16	Wendell Tucker Riverside, CA 92506	IND COM OTH PTY	Retired	100	100	100
4/28/16	Phillip Rizzo Riverside, CA 92506	IND COM OTH PTY	Retired Military	100	100	100
4/28/16	Norman Perry Riverside, CA 92506	☑ IND Retired		150	150	150
4/28/16	S Sue Johnson Riverside, CA 92506	IND COM OTH PTY	Owner of Johnson Caterpiller	500	500	500
4/28/16	Brad Scott San Jacinto, CA 92538	IND COM OTH PTY	Retired	200	200	200
			SUBTOTAL S	1050		

\*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

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		to more be rou	unded				SCHE	DULE B - PART 1
Schedule B – Part 1 Loans Received	Amounts may be rounded to whole dollars.  Statement from					ers period	california 460	
SEE INSTRUCTIONS ON REVERSE					through Ju	ine 30 7016	Page 6	of8
NAME OF FILER							I.D. NUMBER	1
Friends to Elect George Price for Mayor 2	2016						1381978	
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	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE
George Price	City Councilman of District 3			☐ PAID	s 2500		s 3500	calendar year 2016
Moreno Valley, CA 92555	District 5			\$	,	RATE	,	PER ELECTION**
†☑IND □ COM □ OTH □ PTY □ SCC		\$	\$0	\$	DATE DUE	\$	DATE INCURRED	s0
				PAID				CALENDAR YEAR
				\$	\$	RATE	\$	\$PER ELECTION**
† IND COM OTH PTY SCC		\$	\$	s	DATE DUE	\$	DATE INCURRED	s
THE COM COM CONTROL				☐ PAID		-		CALENDAR YEAR
				\$  FORGIVEN	\$	RATE	\$	\$ PER ELECTION**
† IND COM OTH PTY SCC		\$	\$	s	DATE DUE	\$	DATE INCURRED	s
		SUBTOTALS \$	0 \$	<b>5</b> 0	\$ 2500	<b>\$</b> 0		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
Loans received this period				\$	N/A			
(Total Column (b) plus unitemized loar						(to	ontributor Codes	
<ol> <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 that</li> </ol>	00 paid or forgiven.)			\$	0	OT OT	TH - Other (e.g.,	PTY or SCC) business entity)
3. Net change this period. (Subtract Lin	e 2 from Line 1.)	***************************************		.NET \$	00_		Y – Political Part CC – Small Contri	y butor Committee
Enter the net here and on the Summa				(h	lay be a negative number)			

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

\*\* If required.

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Schedule E Payments Made  SEE INSTRUCTIONS ON REVERSE NAME OF FILER Friends to Elect George Price for Mayor 2016			Statem from through _	January 1, 20)L  June 30, WH	CALIFOR FORM Page 7 I.D. NUMBE 1381978	of8
IND independent expenditure supporting/opposing others (explain)* POS postage, de	ommunications and appearance asses culating ks survey resear elivery and me	es	RAD radio RFD return SAL camp TEL t.v. or TRC candi TRS staff/s TSF transi	ibe the payment. airtime and production of the contributions align workers' salaries cable airtime and produdate travel, lodging, and spouse travel, lodging, align between committees registration nation technology costs (	ction costs meals nd meals of the same o	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESC	CRIPTION OF PA	AYMENT		AMOUNT PAID
California Secretary of State Sacremento, CA 95814	FIL	yearly fee				\$5
CA GOP Burbank, CA 91506	MTG	Campaign training	1			\$40.3
Capital Leverage	CNS	campaign team				\$320
* Payments that are contributions or independent expenditures must also be summarized on Sci	hedule D.			SUE	STOTAL \$	3290.3
Schedule E Summary  1. Itemized payments made this period. (Include all Schedule E subtotals.)					\$	5590.32

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).)......\$ —

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5590.32

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Schedule E			SCHEDULE E (CONT
(Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.	Statement covers period  from January 1/20 1/6	california 460
SEE INSTRUCTIONS ON REVERSE		through June 30, 2011	Page 8 of 8
NAME OF FILER			I.D. NUMBER
Friends to Elect George Price for Mayor 2016			1381978
CODES: If one of the following codes accurately describ	es the payment, you may enter the code. Oth	nerwise, describe the payment.	
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 communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and pro TRC candidate travel, lodging, a TRS staff/spouse travel, lodging,	n costs  duction costs  nd meals , and meals es of the same candidate/sponsor

campaign literature and mailings

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Capital Campaigns Riverside, CA 92501	FND	Fundraising	\$500
Capital Leverage  Moreno Valley, CA	CNS	Campaign team	\$1800

\$2300

SUBTOTAL \$