Recipient Committee Campaign Statement Cover Page

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CALIFORNIA FORM 460

Page __1__ of __7__

For Official Use Only

Statement covers period	Date of election if applicable: (Month, Day, Year)
from _1-1-16_	_11-8-16_
through _9-24-16_	

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- ☒ Officeholder, Candidate Controlled Committee
  - ○ State Candidate Election Committee
  - ○ Recall
  - *(Also Complete Part 5)*
- ☐ General Purpose Committee
  - ○ Sponsored
  - ○ Small Contributor Committee
  - ○ Political Party/Central Committee

- ☐ Primarily Formed Ballot Measure Committee
  - ○ Controlled
  - ○ Sponsored
  - *(Also Complete Part 6)*
- ☐ Primarily Formed Candidate/ Officeholder Committee
  - *(Also Complete Part 7)*

2. Type of Statement:

- ☒ Preelection Statement
- ☐ Semi-annual Statement
- ☐ Termination Statement
  (Also file a Form 410 Termination)
- ☐ Amendment (Explain below)

- ☐ Quarterly Statement
- ☐ Special Odd-Year Report

3. Committee Information

I.D. NUMBER 1387293

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
ELECT DAVID MARQUEZ 2016 MORENO VALLEY CITY COUNCIL, DISTRICT 3

STREET ADDRESS (NO P.O. BOX)
████████████

CITY Moreno Valley   STATE CA   ZIP CODE 92551   AREA CODE/PHONE ████

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
—

CITY —   STATE   ZIP CODE   AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS
████████████

Treasurer(s)

NAME OF TREASURER
Radene Hiers

MAILING ADDRESS
████████████

CITY Moreno Valley   STATE CA   ZIP CODE 92551   AREA CODE/PHONE ████

NAME OF ASSISTANT TREASURER, IF ANY
N/A

MAILING ADDRESS
N/A

CITY N/A   STATE   ZIP CODE   AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on _9-27-16_ Date   By ____ Signature of Treasurer or Assistant Treasurer

Executed on _9-27-16_ Date   By ____ Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on ____ Date   By ____ Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on ____ Date   By ____ Signature of Controlling Officeholder, Candidate, State Measure Proponent

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Recipient Committee Campaign Statement Cover Page — Part 2

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

DAVID MARQUEZ

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

MORENO VALLEY CITY COUNCIL, DISTRICT 3

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)   CITY   STATE   ZIP

███████████████████, Moreno Valley, CA. 92555

Related Committees Not Included in this Statement: *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? ☐ YES ☐ NO
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	
CITY STATE ZIP CODE AREA CODE/PHONE	

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? ☐ YES ☐ NO
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	
CITY STATE ZIP CODE AREA CODE/PHONE	

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	☐ SUPPORT ☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE

Attach continuation sheets if necessary

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Campaign Disclosure Statement
Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statement covers period	CALIFORNIA FORM **460**
from __1-1-16__	
through __9-24-16__	Page __3__ of __7__

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ELECT DAVID MARQUEZ 2016 MORENO VALLEY CITY COUNCIL, DISTRICT 3

I.D. NUMBER
1387293

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	$ 3000.00	$ 3000.00
2. Loans Received	Schedule B, Line 3	3500.00	3500.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	$ 6500.00	$ 6500.00
4. Nonmonetary Contributions	Schedule C, Line 3	0	0
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	$ 6500.00	$ 6500.00

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contributions Received	$ _____	$ _____
21. Expenditures Made	$ _____	$ _____

Expenditures Made

		Column A	Column B
6. Payments Made	Schedule E, Line 4	$ 4765.47	$ 4765.47
7. Loans Made	Schedule H, Line 3	0	0
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	$ 4765.47	$ 4765.47
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	0	0
10. Nonmonetary Adjustment	Schedule C, Line 3	0	0
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	$ 4765.47	$ 4765.47

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made*
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
___/___/___	$ _____
___/___/___	$ _____

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	$ 0
13. Cash Receipts	Column A, Line 3 above	6500.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4	0
15. Cash Payments	Column A, Line 8 above	4765.47
16. **ENDING CASH BALANCE**	Add Lines 12 + 13 + 14, then subtract Line 15	$ 1734.53

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED	Schedule B, Part 2	$ 0

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

*Amounts in this section may be different from amounts reported in Column B.

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	$ 0
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	$ 0

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Schedule A
Monetary Contributions Received

Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period	
from	1-1-16
through	9-24-16

CALIFORNIA FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
ELECT DAVID MARQUEZ 2016 MORENO VALLEY CITY COUNCIL, DISTRICT 3

I.D. NUMBER
1387293

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)
7/24/16	VELMA MARQUEZ ▓▓▓▓▓ MORENO VALLEY, CA 92555	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$200.00	$200.00	$200.00
8/8/16	STANLEY KING ▓▓▓▓▓ MORENO VALLEY, CA. 92555	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$100.00	$100.00	$100.00
8/15/16	THOMAS W. DOMINICK ▓▓▓▓▓ SAN BERNARDINO, CA. 92401	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	ATTORNEY Self-employed	$100.00	$100.00	$100.00
9/8/16	ANDY SEHREMELIS ▓▓▓▓▓ ONTARIO, CA 91761	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	BUSINESS OWNER MORENO VALLEY CAR WASH	$1,000.00	$1,000.00	$1,000.00
9/20/16	ROC III CA BELAGO LLC DBA MORENO VALLEY LAND 5295 S. COMMERCE DR., SUITE 100 MURRAY, UT 84107	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		$1,500.00	$1,500.00	$1,500.00

SUBTOTAL $ 2900.00

Schedule A Summary

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) .... $ 2900.00

2. Amount received this period – unitemized monetary contributions of less than $100 .... $ 100.00

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)..................... TOTAL $ 3000.00

Schedule B – Part 1
Loans Received

Amounts may be rounded to whole dollars.

Statement covers period		CALIFORNIA FORM **460**
from _1-1-16_		
through _9-24-16_	Page _5_ of _7_	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
ELECT DAVID MARQUEZ 2016 MORENO VALLEY CITY COUNCIL, DISTRICT 3

I.D. NUMBER
1387293

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 *	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
DAVID MARQUEZ ▇▇▇ MORENO VALLEY, CA 92555 †☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$ 2000.80	$ 2000.80	☐ PAID $ 0 ☐ FORGIVEN $ 0	$ 2000.00 N/A DATE DUE	0 % RATE $ 0	$ 2000.00 7/12/16 DATE INCURRED	CALENDAR YEAR $ 2000.00 PER ELECTION** $ 2000.00
DAVID MARQUEZ ▇▇▇ Moreno Valley, CA. 92555 †☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	$ 1500.00	$ 1500.00	☐ PAID $ 0 ☐ FORGIVEN $ 0	$ 1500.00 N/A DATE DUE	0 % RATE $ 0	$ 1500.00 9/9/16 DATE INCURRED	CALENDAR YEAR $ 1500.00 PER ELECTION** $ 1500.00
▇ †☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$	$	☐ PAID $ ☐ FORGIVEN $	$ DATE DUE	% RATE $	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION** $

SUBTOTALS $ 3500.00 $ 0 $ 3500.00 $ 0

(Enter (e) on Schedule E, Line 3)

Schedule B Summary

1. Loans received this period ....$ 3500.00
   (Total Column (b) plus unitemized loans of less than $100.)

2. Loans paid or forgiven this period...$ 0
   (Total Column (c) plus loans under $100 paid or forgiven.)
   (Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (**Subtract** Line 2 from Line 1.) .... NET $ 3500.00
   Enter the net here and on the Summary Page, Column A, Line 2. (May be a negative number)

†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

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

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Schedule E
Payments Made

Amounts may be rounded
to whole dollars.

Statement covers period	CALIFORNIA FORM **460**
from _1-1-16_	
through _9-24-16_	Page _6_ of _7_

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ELECT DAVID MARQUEZ 2016 MORENO VALLEY CITY COUNCIL, DISTRICT 3

I.D. NUMBER

1387293

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
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
ꞮL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
ND	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, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT		AMOUNT PAID
VISTA PRINT 11815 PIGEON PASS Rd, Suite 613 MORENO VALLEY, CA. 92557	LIT	BUSINESS CARDS CAMPAIGN LITERATURE	316.43
DELIVERY SIGNS 40 W. Crystal Lake St #100 ORLANDO, FLORIDA 32806	CMP	SIGNS	521.75
TARGET 27100 EUCALYPTUS AVE MORENO VALLEY, CA. 92555	OFC	INK CARTRIDGES, MISC OFFICE SUPPLIES	128.71

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

SUBTOTAL $ 966.89

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) .... $ 3979.32

2. Unitemized payments made this period of under $100 .... $ 786.15

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) .... $ 0

4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) .... TOTAL $ 4765.47

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Schedule E
(Continuation Sheet)
Payments Made

Amounts may be rounded
to whole dollars.

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

ELECT DAVID MARQUEZ 2016 MORENO VALLEY CITY COUNCIL, DISTRICT 3

I.D. NUMBER

1387293

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
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
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
ID 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, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
OFFICE DEPOT 23961 SUNNYMEAD BLVD MORENO VALLEY, CA. 92553	OFC	COPIER, FAX, SCAN, PRINTER	138.21
CITY OF MORENO VALLEY 14177 FREDERICK ST. MORENO VALLEY, CA. 92552	FIL	CANDIDATE STATEMENT	475.00
AMAZON 24208 SAN MICHELE ROAD. MORENO VALLEY, CA. 92551	CMP	PRINTED PENS	155.88
MY PRINTING CENTER 10590 MAGNOLIA AVE., SUITE G RIVERSIDE, CA 92505	CMP	SIGNS	2123.72
HOME DEPOT 12255 PIGEON PASS RD. MORENO VALLEY, CA. 92557	CMP	BOOTH SUPPLIES	119.62

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

SUBTOTAL $ 3012.43

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