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**From:** Jane Halstead  
**Sent:** Tuesday, October 22, 2013 3:45 PM  
**To:** Cindy Miller; Jane Halstead; Jesse Molina; Michele Patterson; Richard Stewart; Richard Stewart; Tom Owings; Victoria Baca; Yxstian Gutierrez  
**Cc:** Michelle Dawson; Tom DeSantis; Suzanne Bryant; 'Tom Owings (towings123@gmail.com)'; 'Victoriabaca2000 (victoriabaca2000@gmail.com)'  
**Subject:** Federal Grand Jury Subpoenas Served to the Custodian of Records

Mayor Owings & Members of the Council:

Investigators for the FBI delivered to the City Clerk the following subpoenas for records:


1. All documents relating to the following development projects in Moreno Valley: Any development by Ridge Property; Project Numbers P08-133; PA08-0098; PA10-0017, PA08-0097; and PA09-0022.
2. All documents relating to the following development projects in Moreno Valley: All Moreno Valley Properties and Highland Fairview Projects, including Skechers; and City of Moreno Valley project numbers PA07-0090; PA-07-0088; PA-07-0090; and PA-07-0091
3. All documents relating to the following development projects in Moreno Valley: The Aquabella project, including project numbers P11-029, PA-04-0005, PA04-0069, PA-04-0070 and PA-04-0082
4. All documents relating to Victoria Baca
5. All documents relating to the hiring, employment, and termination of Paul J. Early
6. All documents relating to Iddo Benzeevi
7. All documents relating to Tom Owings
8. All documents relating to Dr. Yxstian Gutierrez
9. All documents relating to development construction projects currently awaiting approval by the Moreno Valley City Council
10. All documents relating to pending or completed infrastructure projects in City Council District 3 of the City of Moreno Valley
11. All documents relating to the hiring, employment, and termination of Henry Garcia as City Manager
12. All documents relating to the hiring, employment, and termination of Barry Foster as Moreno Valley's Director of Economic Development
13. All documents relating to development construction projects approved by the Moreno Valley City Council
14. All documents relating to pending development construction projects currently pending approval of the Moreno Valley Planning Commission
15. All documents relating to the following development projects in Moreno Valley: Projects associated with the World Logistic Centers, including the Moreno Valley project numbers PA-12-0010, PA-12-0011, PA-12-0012, PA12-0013, PA-12-0014, PA-12-0015
16. All documents relating to development construction projects approved by the Moreno Valley Planning Commission
17. All documents relating to the following development projects in Moreno Valley: Projects associated with the company Prologis, including Moreno Valley project numbers P07-0081, PA-0081, PA-0084, PA-0142, PA-0158 and PA-0162
18. All documents relating to the following development projects in Moreno Valley: The Economic Development Action Plan approved by the City Council on April 26, 2011
19. All documents relating to Victoria Baca
20. All documents relating to Jesse Molina
21. All documents relating to Michael Geller
22. All documents relating to Richard Stewart
23. All documents relating to Marcelo Co
24. All documents relating to Jerry Stephens
25. All documents relating to the hiring, employment, and termination of Anne Schneider

26. All documents relating to Highland Fairview Corporation

Let me know if you have any questions.

Thank you.

Jane Halstead, CMC  
City Clerk  
City of Moreno Valley  
14177 Frederick Street  
Moreno Valley, CA 92552

  
F:(951)413-3009

W: [www.moreno-valley.ca.us](http://www.moreno-valley.ca.us)

[janeh@moval.org](mailto:janeh@moval.org)

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**From:** Michelle Dawson  
**Sent:** Tuesday, October 22, 2013 4:58 PM  
**To:** Everyone  
**Subject:** Update on investigation, subpoenas, etc.

City staff: I want to continue updating you on what little I do know about the investigation that began last May with the search warrants served at the residences of our Council Members (the ones in office at that time) and others. Subpoenas were delivered to the Clerk's Office today for documents related to the items listed below (most of which, the Clerk indicates, have already been provided to them). In addition, I was served with a subpoena to appear before a grand jury next Wednesday, as was Tom DeSantis. Our testimony is being requested just as witnesses.

Also, some in the media have tried to make an issue of an item on tonight's Council agenda; it is a routine update by the City Clerk of the City's record retention policy. This is done every few years to keep current with technological advancements and to comply with State law. Other cities do this as a routine update as well. Prior year updates were approved by the Council in 2003 and again in 2007. An outside consultant has been working on this update for over one year, obviously well before any investigation began. Tonight's item is on the consent calendar, as was the previous update. The City Clerk will be pulling this item from the agenda and preparing a comprehensive report to present to the City Council at a later date when the consultant can attend and provide information regarding this routine update. I don't know if the record retention update prompted today's influx of subpoenas, but as always the Clerk's Office and City staff will comply fully in providing copies of these items.

I apologize for any distraction and thank you for your continued hard work serving the City of Moreno Valley.  
--Michelle

Items subpoenaed today included the following:

1. All documents relating to the following development projects in Moreno Valley: Any development by Ridge Property; Project Numbers P08-133; PA08-0098; PA10-0017, PA08-0097; and PA09-0022.
2. All documents relating to the following development projects in Moreno Valley: All Moreno Valley Properties and Highland Fairview Projects, including Skechers; and City of Moreno Valley project numbers PA07-0090; PA-07-0088; PA-07-0090; and PA-07-0091
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7. All documents relating to Tom Owings
8. All documents relating to Dr. Yxstain Gutierrez
9. All documents relating to development construction projects currently awaiting approval by the Moreno Valley City Council
10. All documents relating to pending or completed infrastructure projects in City Council District 3 of the City of Moreno Valley
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13. All documents relating to development construction projects approved by the Moreno Valley City Council
14. All documents relating to pending development construction projects currently pending approval of the Moreno Valley Planning Commission
15. All documents relating to the following development projects in Moreno Valley: Projects associated with the World Logistic Centers, including the Moreno Valley project numbers PA-12-0010, PA-12-0011, PA-12-0012, PA12-0013, PA-12-0014, PA-12-0015
16. All documents relating to development construction projects approved by the Moreno Valley Planning Commission
17. All documents relating to the following development projects in Moreno Valley: Projects associated with the company Prologis, including Moreno Valley project numbers P07-0081, PA-0081, PA-0084, PA-0142, PA-0158 and PA-0162
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19. All documents relating to Victoria Baca
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21. All documents relating to Michael Geller
22. All documents relating to Richard Stewart
23. All documents relating to Marcelo Co
24. All documents relating to Jerry Stephens
25. All documents relating to the hiring, employment, and termination of Anne Schneider
26. All documents relating to Highland Fairview Corporation

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**Subject:** Geller, Stewart & Foley Office Party  
**Location:** 23205 Sunnymead Blvd.  
  
**Start:** Fri 2/24/2006 5:00 PM  
**End:** Fri 2/24/2006 8:00 PM  
**Show Time As:** Out of Office  
  
**Recurrence:** (none)  
  
**Organizer:** Charles White

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**Subject:** Owings/Geller/Bryant Lunch  
**Location:** Meet at City Hall

**Start:** Thu 1/17/2013 11:30 AM  
**End:** Thu 1/17/2013 1:00 PM  
**Show Time As:** Out of Office

**Recurrence:** (none)

**Meeting Status:** Meeting organizer

**Organizer:** Tom Owings  
**Required Attendees:** Suzanne Bryant; towings123@gmail.com; msg@gsf-law.com

1/8/13 (cm)

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**Subject:** Owings/Geller/Bryant Lunch  
**Location:** Meet at City Hall

**Start:** Thu 1/17/2013 11:30 AM  
**End:** Thu 1/17/2013 1:00 PM  
**Show Time As:** Out of Office

**Recurrence:** (none)

**Meeting Status:** Meeting organizer

**Organizer:** Tom Owings  
**Required Attendees:** Suzanne Bryant; towings123@gmail.com; msg@gsf-law.com

1/8/13 (cm)

---

**Subject:** Owings/Geller/Bryant Lunch  
**Location:** Meet at City Hall

**Start:** Thu 1/17/2013 11:30 AM  
**End:** Thu 1/17/2013 1:00 PM  
**Show Time As:** Out of Office

**Recurrence:** (none)

**Meeting Status:** Meeting organizer

**Organizer:** Tom Owings  
**Required Attendees:** Suzanne Bryant; towings123@gmail.com; msg@gsf-law.com

1/8/13 (cm)



**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

CITY CLERK  
MORENO Date Stamp  
RECEIVED  
07 JUL 13 PM 12:46

COVER PAGE

**CALIFORNIA  
FORM 460**

Page 1 of 3

For Official Use Only

Statement covers period  
from 01/01/2007  
through 06/30/2007

Date of election if applicable:  
(Month, Day, Year)

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
- Supplemental Preelection Statement - Attach Form 495

**3. Committee Information**

I.D. NUMBER  
**96204**

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Moreno Valley Action Committee (MOVAC)

STREET ADDRESS (NO P.O. BOX)  
23205 Sunnymead Blvd., Suite 100

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Moreno Valley	CA	92553	[REDACTED]

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

PO Box 7599

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Moreno Valley	CA	92552	[REDACTED]

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER

Michael S. Geller

MAILING ADDRESS

PO Box 7599

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Moreno Valley	CA	92552	[REDACTED]

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	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 July 12, 2007  
Date

By [Signature]  
Signature of Treasurer or Assistant Treasurer

Executed on \_\_\_\_\_  
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

MV00250357

Type or print in ink.

Recipient Committee Campaign Statement Cover Page — Part 2

CALIFORNIA FORM 460 Page 2 of 3

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

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

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

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

MV000250358

**Campaign Disclosure Statement  
Summary Page**

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

SUMMARY PAGE

Statement covers period from 01/01/2007	<b>CALIFORNIA FORM 460</b>
through 06/30/2007	
Page 3 of 3	I.D. NUMBER 96204

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
MOVAC

**Contributions Received**

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

**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 TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made ..... Schedule E, Line 4	\$ -0-	\$ -0-
7. Loans Made ..... Schedule H, Line 3	\$ -0-	\$ -0-
8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7	\$ -0-	\$ -0-
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	\$ -0-	\$ -0-

**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	\$ 1811
13. Cash Receipts ..... Column A, Line 3 above	\$ -0-
14. Miscellaneous Increases to Cash ..... Schedule I, Line 4	\$ -0-
15. Cash Payments ..... Column A, Line 8 above	\$ -0-
16. ENDING CASH BALANCE ..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ 1811

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

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

**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-

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.

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

CITY CLERK  
Date Stamp  
MORENO VALLEY  
RECEIVED  
08 JAN 31 PM 8:31

CALIFORNIA  
FORM **460**  
Page 1 of 3  
For Official Use Only

Statement covers period from <u>07/01/2007</u>  through <u>12/31/2007</u>	Date of election if applicable: (Month, Day, Year) _____
--	--

SEE INSTRUCTIONS ON REVERSE

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

- |  |  |
|--|--|
| <input type="radio"/> Officeholder, Candidate Controlled Committee | <input type="radio"/> Primarily Formed Ballot Measure Committee  |
| <input type="radio"/> State Candidate Election Committee           | <input type="radio"/> Controlled   |
| <input type="radio"/> Recall<br><i>(Also Complete Part 5)</i>      | <input type="radio"/> Sponsored<br><i>(Also Complete Part 6)</i>   |
| <input checked="" type="checkbox"/> General Purpose Committee      | <input type="radio"/> Primarily Formed Candidate/Officeholder Committee<br><i>(Also Complete Part 7)</i> |
| <input type="radio"/> Sponsored                                    |  |
| <input type="radio"/> Small Contributor Committee                  |  |
| <input type="radio"/> Political Party/Central Committee            |  |

**2. Type of Statement:**

- |   |   |
|---|---|
| <input type="checkbox"/> Preelection Statement  | <input type="checkbox"/> Quarterly Statement                                  |
| <input checked="" type="checkbox"/> Semi-annual Statement                                   | <input type="checkbox"/> Special Odd-Year Report                              |
| <input type="checkbox"/> Termination Statement<br><i>(Also file a Form 410 Termination)</i> | <input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
| <input type="checkbox"/> Amendment (Explain below)  |   |

**3. Committee Information**

I.D. NUMBER  
96204

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Moreno Valley Action Committee (MOVAC)

STREET ADDRESS (NO P.O. BOX)

23205 Sunnymead Blvd., Suite 100

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Moreno Valley</u>	<u>CA</u>	<u>92553</u>	<u>[REDACTED]</u>

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

PO Box 7599

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Moreno Valley</u>	<u>CA</u>	<u>92552</u>	<u>[REDACTED]</u>

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER

Michael S. Geller

MAILING ADDRESS

PO Box 7599

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Moreno Valley</u>	<u>CA</u>	<u>92552</u>	<u>[REDACTED]</u>

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	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 JAN 30 2008  
Date

By [Signature]  
Signature of Treasurer or Assistant Treasurer

Executed on \_\_\_\_\_  
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

MV000250360

Type or print in ink.

Recipient Committee Campaign Statement Cover Page — Part 2

CALIFORNIA FORM 460 Page 2 of 3

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

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
Measure 11-73
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
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NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD SUPPORT OPPOSE

Attach continuation sheets if necessary

MV000250361

**Campaign Disclosure Statement  
Summary Page**

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

SUMMARY PAGE

Statement covers period from <u>07/01/2007</u>	<b>CALIFORNIA FORM 460</b>
through <u>12/31/2007</u>	
Page <u>3</u> of <u>3</u>	I.D. NUMBER 96204

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

MOVAC

**Contributions Received**

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

**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	\$ <u>-0-</u>	\$ <u>-0-</u>
7. Loans Made ..... Schedule H, Line 3	<u>-0-</u>	<u>-0-</u>
8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7	\$ <u>-0-</u>	\$ <u>-0-</u>
9. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3	<u>-0-</u>	<u>-0-</u>
10. Nonmonetary Adjustment ..... Schedule C, Line 3	<u>-0-</u>	<u>-0-</u>
11. TOTAL EXPENDITURES MADE ..... Add Lines 8 + 9 + 10	\$ <u>-0-</u>	\$ <u>-0-</u>

**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	\$ <u>1811</u>
13. Cash Receipts ..... Column A, Line 3 above	<u>-0-</u>
14. Miscellaneous Increases to Cash ..... Schedule I, Line 4	<u>-0-</u>
15. Cash Payments ..... Column A, Line 8 above	<u>-0-</u>
16. ENDING CASH BALANCE ..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>1811</u>

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

17. LOAN GUARANTEES RECEIVED ..... Schedule B, Part 2	\$ <u>-0-</u>
---	---------------

**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents ..... See instructions on reverse	\$ <u>-0-</u>
19. Outstanding Debts ..... Add Line 2 + Line 9 in Column B above	\$ <u>-0-</u>

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.

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.  
**DUPLICATE**

For Official Use Only

Date Stamp  
**CITY CLERK  
MORENO VALLEY  
RECEIVED**

**08 AUG -1 PM 12:42**

Statement covers period  
from 01/01/2008  
through 06/30/2008

Date of election if applicable:  
(Month, Day, Year)

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
- Supplemental Preelection Statement - Attach Form 495

**3. Committee Information**

I.D. NUMBER  
**96204**

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

**Moreno Valley Taxpayers Association**

STREET ADDRESS (NO P.O. BOX)

**23205 Sunnymead Blvd.,**

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<b>Moreno Valley</b>	<b>CA</b>	<b>92553</b>	<b>[REDACTED]</b>

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

**PO Box 7599**

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<b>Moreno Valley</b>	<b>CA</b>	<b>92552</b>	<b>[REDACTED]</b>

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER

**Michael S. Geller**

MAILING ADDRESS

**PO Box 7599**

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<b>Moreno Valley</b>	<b>CA</b>	<b>92552</b>	<b>[REDACTED]</b>

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	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 **JUL 31 2008**  
Date

By \_\_\_\_\_  
Signature of Treasurer or Assistant Treasurer

Executed on \_\_\_\_\_  
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

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

Type or print in ink.

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE

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

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

**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*

MV00250364



# Campaign Disclosure Statement Summary Page

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

SUMMARY PAGE

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	<b>CALIFORNIA FORM 460</b> Page <u>3</u> of <u>12</u> I.D. NUMBER <u>96204</u>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

## Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions ..... Schedule A, Line 3	\$ <u>174854</u>	\$ <u>-0-</u>
2. Loans Received ..... Schedule B, Line 3	<u>-0-</u>	<u>-0-</u>
3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1 + 2	\$ <u>174854</u>	\$ <u>-0-</u>
4. Nonmonetary Contributions ..... Schedule C, Line 3	<u>1000</u>	<u>-0-</u>
5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 + 4	\$ <u>175854</u>	\$ <u>-0-</u>

## 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	\$ <u>-0-</u>	\$ <u>-0-</u>
21. Expenditures Made	\$ <u>-0-</u>	\$ <u>-0-</u>

## Expenditures Made

	Column A	Column B
6. Payments Made ..... Schedule E, Line 4	\$ <u>119001</u>	\$ <u>-0-</u>
7. Loans Made ..... Schedule H, Line 3	<u>-0-</u>	<u>-0-</u>
8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7	\$ <u>119001</u>	\$ <u>-0-</u>
9. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3	<u>-0-</u>	<u>-0-</u>
10. Nonmonetary Adjustment ..... Schedule C, Line 3	<u>1000</u>	<u>-0-</u>
11. TOTAL EXPENDITURES MADE ..... Add Lines 8 + 9 + 10	\$ <u>120001</u>	\$ <u>-0-</u>

## 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
<u>    </u> / <u>    </u> / <u>    </u>	\$ <u>-0-</u>
<u>    </u> / <u>    </u> / <u>    </u>	\$ <u>-0-</u>

## Current Cash Statement

12. Beginning Cash Balance ..... Previous Summary Page, Line 16	\$ <u>1811</u>
13. Cash Receipts ..... Column A, Line 3 above	<u>174854</u>
14. Miscellaneous Increases to Cash ..... Schedule I, Line 4	<u>-0-</u>
15. Cash Payments ..... Column A, Line 8 above	<u>119001</u>
16. ENDING CASH BALANCE ..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>57664</u>

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

17. LOAN GUARANTEES RECEIVED ..... Schedule B, Part 2	\$ <u>-0-</u>
---	---------------

## Cash Equivalents and Outstanding Debts

18. Cash Equivalents ..... See instructions on reverse	\$ <u>-0-</u>
19. Outstanding Debts ..... Add Line 2 + Line 9 in Column B above	\$ <u>-0-</u>

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.

**Schedule A  
Monetary Contributions Received**

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

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>4</u> of <u>12</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

I.D. NUMBER

96204

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)
03/31/2008	Jerome Stephens 11370 Moreno Beach Drive Moreno Valley CA 92555	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Diversified Real Estate	4500	4500	
03/31/2008	26th Corporation 1285 Baring Blvd., #127 Sparks NV 89434	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		10000	10000	
03/31/2008	Highland Fairview Properties 18140 Collins Avenue Sunny Isles Beach FL 33160	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		10000	10000	
06/30/2008	Marsha Locke 29133 Campbell Avenue Moreno Valley CA 92555	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Riverside USD Administrator	100	100	
04/23/2008	Highland Fairview Properties 18140 Collins Avenue Sunny Isles Beach CA 33160	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		50000	60000	
<b>SUBTOTAL \$</b>				<b>74600</b>		

**Schedule A Summary**

- Amount received this period – itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 174700
- Amount received this period – unitemized monetary contributions of less than \$100 ..... \$ 154
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$** 174854

\*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

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

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

SCHEDULE A (CONT.)

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>5</u> of <u>12</u>

NAME OF FILER Moreno Valley Taxpayers Association	I.D. NUMBER 96204
--	----------------------

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)
04/23/2008	Jerome Stephens 11370 Moreno Beach Drive Moreno Valley CA 92555	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Diversified Real Estate	20000	24500	
06/26/2008	Cathlene M. Fishman PO Box 7599 Moreno Valley CA 92555	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Wolfe & Associates IT (Computer)	100	100	
05/29/2008	Jerome Stephens 11370 Moreno Beach Drive Moreno Valley CA 92555	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Diversified Real Estate	80000	104500	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				<b>100100</b>		

\*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

MV00250367

**Schedule C**  
**Nonmonetary Contributions Received**

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

SCHEDULE C

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>6</u> of <u>12</u>

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

Moreno Valley Taxpayers Association

I.D. NUMBER  
96204

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)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
06/26/08	Michael S. Geller PO Box 7599 Moreno Valley CA 92552	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney, Computer Consultant	Legal Services, Accounting Svcs	1000	1000	1000
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL \$ 1000**

**Schedule C Summary**

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) .....	\$	1000
2. Amount received this period – unitemized nonmonetary contributions of less than \$100 .....	\$	-0-
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.) .....	<b>TOTAL \$</b>	1000

\*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

**Schedule D  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

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

SCHEDULED

Statement covers period from <u>01/01/2008</u> through <u>06/30/2008</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>7</u> of <u>12</u>
	I.D. NUMBER 96204

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
06/30/08	Moreno Valley Citizens for Rancho Belago	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	AFS Printing Mailers	10374	10374	10374
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
<b>SUBTOTAL \$</b>				<b>10374</b>		

**Schedule D Summary**

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) .....	\$	10374
2. Unitemized contributions and independent expenditures made this period of under \$100 .....	\$	-0-
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) .....	<b>TOTAL \$</b>	<b>10374</b>

MV00250369

**Schedule E  
Payments Made**

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2008	
through	06/30/2008	Page <u>8</u> of <u>12</u>
NAME OF FILER		I.D. NUMBER
Moreno Valley Taxpayers Association		96204

SEE INSTRUCTIONS ON REVERSE

**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                   |
| 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
Optimist Foundation PO Box 9107 Moreno Valley CA 92552	CVC		150
Public Opinion Strategies 107 W Torrance Blvd, Ste. 200 Redondo Beach CA 90277	POL		21100
Frede's Printing 23846 Sunnymead Blvd., Ste. A-1 Moreno Valley CA 92553	PRT		166

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL \$ 21416**

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 118467
2. Unitemized payments made this period of under \$100	\$ 534
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.)	<b>TOTAL \$ 119001</b>

MV00250370

**Schedule E  
(Continuation Sheet)  
Payments Made**

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2008	
through	06/30/2008	Page <u>9</u> of <u>12</u>
NAME OF FILER		I.D. NUMBER
Moreno Valley Taxpayers Association		96204

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

**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                   |
| 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
Floyd & Lucsko 950 April Lane Banning CA 92220	CNS		7500
Political Data Inc. PO Box 1706 Burbank CA 91507	POL		2660
Century Bank Card 9410 Topanga Cyn Blvd, #202 Chatsworth CA 91311	OFC		994
Moreno Valley Citizens for Rancho Belago PO Box 7599 Moreno Valley CA 92552 FPPC 1306564	CTB		46600
Constant Contact 1601 Trapelo Road, Ste. 329 Waltham MA 02451	WEB		440

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

**SUBTOTAL \$ 58194**

**Schedule E  
(Continuation Sheet)  
Payments Made**

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/08	
through	06/30/08	Page 10 of 12
NAME OF FILER		I.D. NUMBER
Moreno Valley Taxpayers Association		96204

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

**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                   |
| 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
Moreno Valley Hispanic Chamber of Commerce PO Box 7624 Moreno Valley CA 92553	CVC		100
Kathy Finch Foundation 26220 Kalmia Avenue Moreno Valley CA 92555	CVC		150
Matrix Media 250 Anita Drive Pasadena CA 91105	PRT		21523
Inland Empire Community Calendar PO Box 8652 Moreno Valley CA 92552	PRT		220
AFS 2678 Hamner Avenue Norco CA 92860	PRT		13364

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

**SUBTOTAL \$ 35357**

MV00250372



**Schedule E  
Payments Made**

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/08	
through	06/30/08	Page <u>11</u> of <u>12</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  Moreno Valley Taxpayers Association	I.D. NUMBER  96204
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**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                   |
| 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  |
| LT 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
David Morgan 29090 Light Sails Court Temecula CA 92585	CNS		3500

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL \$ 3500**

MV00250373

**Schedule G**  
**Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)**

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

Statement covers period  
 from 01/01/2008  
 through 06/30/2008

SCHEDULE G

**CALIFORNIA FORM 460**

Page 12 of 12

I.D. NUMBER  
 96204

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

NAME OF AGENT OR INDEPENDENT CONTRACTOR

AFS Printing

**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                   |
| 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  |
| LT campaign literature and mailings                               | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Postmaster Corona CA	POS		4289

Attach additional information on appropriately labeled continuation sheets.

TOTAL\* \$ 4289

\* 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.

MV00250374

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

Date Stamp  
CITY CLERK  
MORENO VALLEY  
RECEIVED  
08 OCT -7 PM 1:00

CALIFORNIA FORM **460**

Page 1 of 11

For Official Use Only

Statement covers period  
from 07/01/2008  
through 09/30/2008

Date of election if applicable:  
(Month, Day, Year)

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
- Supplemental Preelection Statement - Attach Form 495

**3. Committee Information**

I.D. NUMBER  
96204

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Moreno Valley Taxpayers Association

STREET ADDRESS (NO P.O. BOX)

23205 Sunnymead Blvd.,

CITY STATE ZIP CODE AREA CODE/PHONE

Moreno Valley CA 92553

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

PO Box 7599

CITY STATE ZIP CODE AREA CODE/PHONE

Moreno Valley CA 92552

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER

Michael S. Geller

MAILING ADDRESS

PO Box 7599

CITY STATE ZIP CODE AREA CODE/PHONE

Moreno Valley CA 92552

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY 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 OCT 06 2008  
Date

Executed on \_\_\_\_\_  
Date

Executed on \_\_\_\_\_  
Date

Executed on \_\_\_\_\_  
Date

By [Signature]  
Signature of Treasurer or Assistant Treasurer

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

MV00250375

Type or print in ink.

Recipient Committee Campaign Statement Cover Page — Part 2

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

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

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

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

MV000250376

**Campaign Disclosure Statement  
Summary Page**

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

SUMMARY PAGE

Statement covers period from <u>07/01/2008</u>	<b>CALIFORNIA FORM 460</b>
through <u>09/30/2008</u>	
Page <u>3</u> of <u>11</u>	I.D. NUMBER <u>96204</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

**Contributions Received**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions ..... Schedule A, Line 3	\$ <u>103170</u>	\$ <u>278024</u>
2. Loans Received ..... Schedule B, Line 3	<u>-0-</u>	<u>-0-</u>
3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1 + 2	\$ <u>103170</u>	\$ <u>278024</u>
4. Nonmonetary Contributions ..... Schedule C, Line 3	<u>-0-</u>	<u>1000</u>
5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 + 4	\$ <u>103170</u>	\$ <u>279024</u>

**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	\$ <u>-0-</u>	\$ <u>-0-</u>
21. Expenditures Made	\$ <u>-0-</u>	\$ <u>-0-</u>

**Expenditures Made**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made ..... Schedule E, Line 4	\$ <u>159475</u>	\$ <u>278476</u>
7. Loans Made ..... Schedule H, Line 3	<u>-0-</u>	<u>-0-</u>
8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7	\$ <u>159475</u>	\$ <u>278476</u>
9. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3	<u>-0-</u>	<u>-0-</u>
10. Nonmonetary Adjustment ..... Schedule C, Line 3	<u>-0-</u>	<u>1000</u>
11. TOTAL EXPENDITURES MADE ..... Add Lines 8 + 9 + 10	\$ <u>159475</u>	\$ <u>279476</u>

**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
<u>    </u> / <u>    </u> / <u>    </u>	\$ <u>-0-</u>
<u>    </u> / <u>    </u> / <u>    </u>	\$ <u>-0-</u>

**Current Cash Statement**

12. Beginning Cash Balance ..... Previous Summary Page, Line 16	\$ <u>57664</u>
13. Cash Receipts ..... Column A, Line 3 above	<u>103170</u>
14. Miscellaneous Increases to Cash ..... Schedule I, Line 4	<u>-0-</u>
15. Cash Payments ..... Column A, Line 8 above	<u>159678</u>
16. ENDING CASH BALANCE ..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>1156</u>

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

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.

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

**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents ..... See instructions on reverse	\$ <u>-0-</u>
19. Outstanding Debts ..... Add Line 2 + Line 9 in Column B above	\$ <u>-0-</u>

MV00250377

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>07/01/2008</u>	<b>CALIFORNIA FORM 460</b>
through <u>09/30/2008</u>	
Page <u>4</u> of <u>11</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

I.D. NUMBER

96204

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)
7/1-9/30/08	Highland Fairview Properties 18140 Collins Avenue Sunny Isles Beach FL 33160	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		103000	163000	
07/17/2008	Winchester & Associates 23640 Tovler, Ste 3 Moreno Valley CA 92553	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100	100	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				

**SUBTOTAL \$ 103100**

**Schedule A Summary**

- Amount received this period – itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 103100
- Amount received this period – unitemized monetary contributions of less than \$100 ..... \$ 70
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$** 103170

\*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

MV00250378

**Schedule D**  
**Summary of Expenditures**  
**Supporting/Opposing Other**  
**Candidates, Measures and Committees**

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

Statement covers period		SCHEDULE D	
from	07/01/2008	<b>CALIFORNIA FORM 460</b>	
through	09/30/2008	Page	5 of 11

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Moreno Valley Taxpayers Association	I.D. NUMBER 96204
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DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2008	Jesse Molina 23595 Judge Ward Ct. Moreno Valley CA 92557 FPPC 1310079	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Democratic Voters Choice FPPC 595002	900	900	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
08/25/2008	Robin Hastings PO Box 121 Moreno Valley CA 92555 FPPC 1309420	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Democratic Voters Choice FPPC 595002	900	900	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
08/25/2008	Jesse Molina 23595 Judge Ward Ct. Moreno Valley CA 92557 FPPC 1310079	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Citizens for Good Government FPPC 599010	700	1600	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
<b>SUBTOTAL \$</b>				<b>2500</b>		

**Schedule D Summary**

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)	\$ 3200
2. Unitemized contributions and independent expenditures made this period of under \$100	\$ -0-
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	<b>TOTAL \$ 3200</b>

MV00250379

**Schedule D  
(Continuation Sheet)  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

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

SCHEDULE D (CONT.)

Statement covers period from <u>07/01/2008</u> through <u>09/30/2008</u>	<b>CALIFORNIA FORM 460</b> Page <u>6</u> of <u>11</u>
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NAME OF FILER <b>Moreno Valley Taxpayers Association</b>	I.D. NUMBER <b>96204</b>
---	-----------------------------

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2008	Robin Hastings PO Box 121 Moreno Valley CA 92555 FPPC 1309420	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Citizens for Good Government FPPC 599010	700	700	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					

**SUBTOTAL \$ 900**

MV000250380



**Schedule E  
Payments Made**

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2008	
through	09/30/2008	Page <u>7</u> of <u>11</u>
NAME OF FILER		I.D. NUMBER
Moreno Valley Taxpayers Association		96204

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

I.D. NUMBER

96204

**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
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
AFS Printing 1678 Hamner Avenue Norco CA 92860	PRT		36936
Boy Scouts of America PO Box 179 Moreno Valley CA 92556	CVC		500
California Voter's Guide 1954 W Carson St., Ste B Torrance CA 96204	POL		1300

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

**SUBTOTAL \$ 38736**

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 159475
2. Unitemized payments made this period of under \$100	\$ 203
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.)	<b>TOTAL \$ 159678</b>

**Schedule E  
(Continuation Sheet)  
Payments Made**

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2008	
through	09/30/2008	Page <u>8</u> of <u>11</u>
NAME OF FILER		I.D. NUMBER
Moreno Valley Taxpayers Association		96204

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

I.D. NUMBER

96204

**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
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
Floyd & Lucsko 950 April Lane Banning CA 92220	CNS			15000
David Morgan 29090 Light Sails Ct Romoland CA 92585	CNS			5750
Democratic Voter's Choice 728 W Edna Pl Covina CA 91722 FPPC 595002	POL			1800
Moreno Valley Citizens for Rancho Belago PO Box 7599 Moreno Valley CA 92552 FPPC 1306564	CTB			2500
Friends of Meli Van Natta 23205 Sunnymead Bl Moreno Valley CA 92553 FPPC 1302221	CTB			500

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

**SUBTOTAL \$ 25550**

**Schedule E  
(Continuation Sheet)  
Payments Made**

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

Statement covers period from <u>07/01/2008</u> through <u>09/30/2008</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>9</u> of <u>11</u>
NAME OF FILER  Moreno Valley Taxpayers Association	I.D. NUMBER 96204

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

**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                   |
| 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
Century Bankcard Services 9410 Topanga Canyon Bl, Ste 202 Chatsworth CA 91311	OFC		110
Matrix Media 250 Anita Drive Pasadena CA 91105	PRT		52951
MemberClicks Buckhead Centre 2970 Peachtree Rd, Ste 300, Atlanta GA 30305	OFC		271
Political Data, Inc PO Box 1706 Burbank CA 91507	POL		497
Public Opinion Strategies 107 W Torrance Blvd. Ste. 200 Redondo Beach CA 90277	CNS		39100

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

**SUBTOTAL \$ 92929**

MV000250383

**Schedule E  
Payments Made**

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2008	
through	09/30/2008	Page 10 of 11
NAME OF FILER		I.D. NUMBER
Moreno Valley Taxpayers Association		96204

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

I.D. NUMBER

96204

**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                   |
| 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
Voter Information Guide G08 13701 Riverside Drive, Ste 604 Sherman Oaks CA 91423	POL			860
Citizens for Good Government 728 W Edna Pl Covina CA 91722	POL			1400

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

**SUBTOTAL \$**

**2260**

**Schedule G**  
**Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)**

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

Statement covers period from <u>07/01/2008</u>	<b>CALIFORNIA FORM 460</b>
through <u>09/30/2008</u>	
Page <u>11</u> of <u>11</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

I.D. NUMBER

96204

NAME OF AGENT OR INDEPENDENT CONTRACTOR

AFS Printing

**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                   |
| 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)           |

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Postmaster Corona CA	POS		8062

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\* \$ 8062**

\* 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.

MV00250385

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

CITY DATE STAMP  
MORENO VALLEY  
RECEIVED  
OCT -8 PM 3:54

**CALIFORNIA FORM 460**

Page 1 of 5

For Official Use Only

Statement covers period  
from 07/01/2008  
through 09/30/2008

Date of election if applicable:  
(Month, Day, Year)

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)  
Correct Codes Listed on Schedule E, pgs 7 thru 10
  - Quarterly Statement
  - Special Odd-Year Report
  - Supplemental Preelection Statement - Attach Form 495

**3. Committee Information**

I.D. NUMBER  
96204

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Moreno Valley Taxpayers Association

STREET ADDRESS (NO P.O. BOX)

23205 Sunnymead Blvd.,

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Moreno Valley</u>	<u>CA</u>	<u>92553</u>	<u>[REDACTED]</u>

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

PO Box 7599

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Moreno Valley</u>	<u>CA</u>	<u>92552</u>	<u>[REDACTED]</u>

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER

Michael S. Geller

MAILING ADDRESS

PO Box 7599

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Moreno Valley</u>	<u>CA</u>	<u>92552</u>	<u>[REDACTED]</u>

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	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 October 7, 2008  
Date

By [Signature]  
Signature of Treasurer or Assistant Treasurer

Executed on \_\_\_\_\_  
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

MV00250386

**Schedule E  
Payments Made**

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2008	
through	09/30/2008	Page <u>7</u> of <u>11</u>
NAME OF FILER		I.D. NUMBER
Moreno Valley Taxpayers Association		96204

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

I.D. NUMBER

96204

**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
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
AFS Printing 1678 Hamner Avenue Norco CA 92860	PRT		36936
Boy Scouts of America PO Box 179 Moreno Valley CA 92556	CVC		500
California Voter's Guide 1954 W Carson St., Ste B Torrance CA 96204	LIT		1300
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			<b>SUBTOTAL \$</b> 38736

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	159475
2. Unitemized payments made this period of under \$100	\$	203
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.)	<b>TOTAL \$</b>	159678

**Schedule E  
(Continuation Sheet)  
Payments Made**

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2008	
through	09/30/2008	Page <u>8</u> of <u>11</u>
NAME OF FILER		I.D. NUMBER
Moreno Valley Taxpayers Association		96204

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

I.D. NUMBER

96204

**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                   |
| 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
Floyd & Lucsko 950 April Lane Banning CA 92220	CNS		15000
David Morgan 29090 Light Sails Ct Romoland CA 92585	CNS		5750
Democratic Voter's Choice 728 W Edna Pl Covina CA 91722 FPPC 595002	LIT		1800
Moreno Valley Citizens for Rancho Belago PO Box 7599 Moreno Valley CA 92552 FPPC 1306564	CTB		2500
Friends of Meli Van Natta 23205 Sunnymead Bl Moreno Valley CA 92553 FPPC 1302221	CTB		500

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

**SUBTOTAL \$ 25550**



**Schedule E  
(Continuation Sheet)  
Payments Made**

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

Statement covers period from <u>07/01/2008</u> through <u>09/30/2008</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>9</u> of <u>11</u>
NAME OF FILER  Moreno Valley Taxpayers Association	I.D. NUMBER  96204

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

I.D. NUMBER  
96204

**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                   |
| 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
Century Bankcard Services 9410 Topanga Canyon Bl, Ste 202 Chatsworth CA 91311	OFC		110
Matrix Media 250 Anita Drive Pasadena CA 91105	PRT		52951
MemberClicks Buckhead Centre 2970 Peachtree Rd, Ste 300, Atlanta GA 30305	OFC		271
Political Data, Inc PO Box 1706 Burbank CA 91507	POL		497
Public Opinion Strategies 107 W Torrance Blvd. Ste. 200 Redondo Beach CA 90277	POL		39100

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

**SUBTOTAL \$ 92929**

MV00250389

**Schedule E  
Payments Made**

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

Statement covers period from <u>07/01/2008</u> through <u>09/30/2008</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>10</u> of <u>11</u>
I.D. NUMBER 96204	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

**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                   |
| 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
Voter Information Guide G08 13701 Riverside Drive, Ste 604 Sherman Oaks CA 91423	LIT		860
Citizens for Good Government 728 W Edna Pl Covina CA 91722	LIT		1400
<b>* Payments that are contributions or independent expenditures must also be summarized on Schedule D.</b>			
<b>SUBTOTAL \$</b>			<b>2260</b>

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

*at* COVER PAGE

Date Stamp  
CITY CLERK  
MORENO VALLEY  
RECEIVED  
08 OCT 22 PM 4:05

**CALIFORNIA FORM 460**  
Page 1 of 5  
For Official Use Only

Statement covers period  
from 07/01/2008  
through 09/30/2008

Date of election if applicable:  
(Month, Day, Year)  
11/04/2008

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)  
Schedule E balance carried over incorrectly to Disclosure page. Add Correct Schedule D.
  - Quarterly Statement
  - Special Odd-Year Report
  - Supplemental Preelection Statement - Attach Form 495

**3. Committee Information**

I.D. NUMBER  
96204

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
Moreno Valley Taxpayers Association

STREET ADDRESS (NO P.O. BOX)  
23205 Sunnymead Blvd.,

CITY STATE ZIP CODE AREA CODE/PHONE  
Moreno Valley CA 92553

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX  
PO Box 7599

CITY STATE ZIP CODE AREA CODE/PHONE  
Moreno Valley CA 92552

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER  
Michael S. Geller

MAILING ADDRESS  
PO Box 7599

CITY STATE ZIP CODE AREA CODE/PHONE  
Moreno Valley CA 92552

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY 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 OCT 22 2008  
Date

Executed on \_\_\_\_\_  
Date

Executed on \_\_\_\_\_  
Date

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Treasurer or Assistant Treasurer

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

MV00250391

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

Type or print in ink.

COVER PAGE - PART 2

**CALIFORNIA  
FORM 460**

Page 2 of 5

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE

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

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

**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? <input type="checkbox"/> YES <input type="checkbox"/> 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? <input type="checkbox"/> YES <input type="checkbox"/> 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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> 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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

*Attach continuation sheets if necessary*

**Campaign Disclosure Statement  
Summary Page**

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

SUMMARY PAGE

Statement covers period from <u>07/01/2008</u>	<b>CALIFORNIA FORM 460</b>
through <u>09/30/2008</u>	
Page <u>3</u> of <u>5</u>	I.D. NUMBER <u>96204</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

**Contributions Received**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions ..... <i>Schedule A, Line 3</i>	\$ <u>103170</u>	\$ <u>278024</u>
2. Loans Received ..... <i>Schedule B, Line 3</i>	\$ <u>-0-</u>	\$ <u>-0-</u>
3. SUBTOTAL CASH CONTRIBUTIONS ..... <i>Add Lines 1 + 2</i>	\$ <u>103170</u>	\$ <u>278024</u>
4. Nonmonetary Contributions ..... <i>Schedule C, Line 3</i>	\$ <u>-0-</u>	\$ <u>1000</u>
5. TOTAL CONTRIBUTIONS RECEIVED ..... <i>Add Lines 3 + 4</i>	\$ <u>103170</u>	\$ <u>279024</u>

**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	\$ <u>-0-</u>	\$ <u>-0-</u>
21. Expenditures Made	\$ <u>-0-</u>	\$ <u>-0-</u>

**Expenditures Made**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made ..... <i>Schedule E, Line 4</i>	\$ <u>159678</u>	\$ <u>278476</u>
7. Loans Made ..... <i>Schedule H, Line 3</i>	\$ <u>-0-</u>	\$ <u>-0-</u>
8. SUBTOTAL CASH PAYMENTS ..... <i>Add Lines 6 + 7</i>	\$ <u>159678</u>	\$ <u>278476</u>
9. Accrued Expenses (Unpaid Bills) ..... <i>Schedule F, Line 3</i>	\$ <u>-0-</u>	\$ <u>-0-</u>
10. Nonmonetary Adjustment ..... <i>Schedule C, Line 3</i>	\$ <u>-0-</u>	\$ <u>1000</u>
11. TOTAL EXPENDITURES MADE ..... <i>Add Lines 8 + 9 + 10</i>	\$ <u>159678</u>	\$ <u>279476</u>

**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
<u>    </u> / <u>    </u> / <u>    </u>	\$ <u>-0-</u>
<u>    </u> / <u>    </u> / <u>    </u>	\$ <u>-0-</u>

**Current Cash Statement**

12. Beginning Cash Balance ..... <i>Previous Summary Page, Line 16</i>	\$ <u>57664</u>
13. Cash Receipts ..... <i>Column A, Line 3 above</i>	\$ <u>103170</u>
14. Miscellaneous Increases to Cash ..... <i>Schedule I, Line 4</i>	\$ <u>-0-</u>
15. Cash Payments ..... <i>Column A, Line 8 above</i>	\$ <u>159678</u>
16. ENDING CASH BALANCE ..... <i>Add Lines 12 + 13 + 14, then subtract Line 15</i>	\$ <u>1156</u>

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

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.

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

**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents ..... <i>See instructions on reverse</i>	\$ <u>-0-</u>
19. Outstanding Debts ..... <i>Add Line 2 + Line 9 in Column B above</i>	\$ <u>-0-</u>

**Schedule D**  
**Summary of Expenditures**  
**Supporting/Opposing Other**  
**Candidates, Measures and Committees**

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

SCHEDULE D

Statement covers period from <u>07/01/2008</u> through <u>09/30/2008</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>4</u> of <u>5</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Moreno Valley Taxpayers Association	I.D. NUMBER 96204
--	----------------------

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/30/2008	Jesse Molina 23595 Judge Ward Ct. Moreno Valley CA 92557 FPPC 1310079	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Democratic Voters Choice FPPC 595002	900	900	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
09/30/2008	Robin Hastings PO Box 121 Moreno Valley CA 92555 FPPC 1309420	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Democratic Voters Choice FPPC 595002	900	900	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
08/25/2008	Jesse Molina 23595 Judge Ward Ct. Moreno Valley CA 92557 FPPC 1310079	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Citizens for Good Government FPPC 599010	700	1600	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
<b>SUBTOTAL \$</b>				<b>2500</b>		

**Schedule D Summary**

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) .....	\$	33479
2. Unitemized contributions and independent expenditures made this period of under \$100 .....	\$	-0-
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) .....	<b>TOTAL \$</b>	<b>33479</b>

MV00250394

**Schedule D**  
**(Continuation Sheet)**  
**Summary of Expenditures**  
**Supporting/Opposing Other**  
**Candidates, Measures and Committees**

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

SCHEDULE D (CONT.)

Statement covers period from <u>07/01/2008</u> through <u>09/30/2008</u>	<b>CALIFORNIA FORM 460</b> Page <u>5</u> of <u>5</u>
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NAME OF FILER <b>Moreno Valley Taxpayers Association</b>	I.D. NUMBER <b>96204</b>
---	-----------------------------

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2008	Robin Hastings PO Box 121 Moreno Valley CA 92555 FPPC 1309420  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	Citizens for Good Government FPPC 599010	700	700	
09/30/2008	Committee to Elect Frank West 11933 Vista De Cerros Moreno Valley CA 92557 FPPC 1223022  <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	PRT: AFS Printing	25169	25169	
09/30/2008	Committee to Elect Charles White FPPC 961657  <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	PRT: AFS Printing	5110	5110	
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure  <input type="checkbox"/> Support <input type="checkbox"/> Oppose				

**SUBTOTAL \$ 30979**

MV000250395

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

1 of 10

COVER PAGE

Date Stamp CITY CLERK MORENO VALLEY RECEIVED 08 OCT 22 PM 4:05

CALIFORNIA FORM 460

Page 1 of 9

For Official Use Only

Statement covers period from 10/01/2008 through 10/18/2008

Date of election if applicable: Nov 4 2008

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, General Purpose Committee, etc.

- 2. Type of Statement: Preelection Statement, Semi-annual Statement, Termination Statement, Amendment, Quarterly Statement, Special Odd-Year Report, Supplemental Preelection Statement - Attach Form 495

3. Committee Information

I.D. NUMBER 96204

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Moreno Valley Taxpayers Association

STREET ADDRESS (NO P.O. BOX) 23205 Sunnymead Blvd.,

CITY STATE ZIP CODE AREA CODE/PHONE Moreno Valley CA 92553

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX PO Box 7599

CITY STATE ZIP CODE AREA CODE/PHONE Moreno Valley CA 92552

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER Michael S. Geller

MAILING ADDRESS PO Box 7599

CITY STATE ZIP CODE AREA CODE/PHONE Moreno Valley CA 92552

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY 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 OCT 22 2008

By [Signature] Signature of Treasurer or Assistant Treasurer

Executed on \_\_\_\_\_ 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

MV00250396



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

Type or print in ink.

COVER PAGE - PART 2

**CALIFORNIA  
FORM 460**

Page 2 of 9

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE

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

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

**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? <input type="checkbox"/> YES <input type="checkbox"/> 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? <input type="checkbox"/> YES <input type="checkbox"/> 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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> 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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

*Attach continuation sheets if necessary*

**Campaign Disclosure Statement  
Summary Page**

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

SUMMARY PAGE

Statement covers period from <u>10/01/2008</u>	<b>CALIFORNIA FORM 460</b>
through <u>10/18/2008</u>	
Page <u>3</u> of <u>9</u>	I.D. NUMBER <u>96204</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

**Contributions Received**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions ..... Schedule A, Line 3	\$ <u>50000</u>	\$ <u>328024</u>
2. Loans Received ..... Schedule B, Line 3	<u>50000</u>	<u>-0-</u>
3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1 + 2	\$ <u>100000</u>	\$ <u>378024</u>
4. Nonmonetary Contributions ..... Schedule C, Line 3	<u>4500</u>	<u>5500</u>
5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 + 4	\$ <u>104500</u>	\$ <u>383524</u>

**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	\$ <u>-0-</u>	\$ <u>-0-</u>
21. Expenditures Made	\$ <u>-0-</u>	\$ <u>-0-</u>

**Expenditures Made**

	Column A	Column B
6. Payments Made ..... Schedule E, Line 4	\$ <u>70174</u>	\$ <u>348650</u>
7. Loans Made ..... Schedule H, Line 3	<u>-0-</u>	<u>-0-</u>
8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7	\$ <u>70174</u>	\$ <u>345650</u>
9. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3	<u>-0-</u>	<u>-0-</u>
10. Nonmonetary Adjustment ..... Schedule C, Line 3	<u>4500</u>	<u>5500</u>
11. TOTAL EXPENDITURES MADE ..... Add Lines 8 + 9 + 10	\$ <u>74674</u>	\$ <u>354150</u>

**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
<u>    </u> / <u>    </u> / <u>    </u>	\$ <u>-0-</u>
<u>    </u> / <u>    </u> / <u>    </u>	\$ <u>-0-</u>

**Current Cash Statement**

12. Beginning Cash Balance ..... Previous Summary Page, Line 16	\$ <u>1156</u>
13. Cash Receipts ..... Column A, Line 3 above	<u>100000</u>
14. Miscellaneous Increases to Cash ..... Schedule I, Line 4	<u>-0-</u>
15. Cash Payments ..... Column A, Line 8 above	<u>70174</u>
16. ENDING CASH BALANCE ..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>30982</u>

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

17. LOAN GUARANTEES RECEIVED ..... Schedule B, Part 2	\$ <u>-0-</u>
---	---------------

**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents ..... See instructions on reverse	\$ <u>-0-</u>
19. Outstanding Debts ..... Add Line 2 + Line 9 in Column B above	\$ <u>-0-</u>

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.

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>10/01/2008</u>	<b>CALIFORNIA FORM 460</b>
through <u>10/18/2008</u>	
Page <u>4</u> of <u>9</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER <b>Moreno Valley Taxpayers Association</b>	I.D. NUMBER <b>96204</b>
---	-----------------------------

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)
10/03/2008	Highland Fairview Properties 18140 Collins Avenue Sunny Isles Beach FL 33160	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		50000	213000	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				

**SUBTOTAL \$ 50000**

**Schedule A Summary**

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) .....	\$ <u>50000</u>
2. Amount received this period – unitemized monetary contributions of less than \$100 .....	\$ <u>-0-</u>
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .....	<b>TOTAL \$ <u>50000</u></b>

\*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

MV00250399

**Schedule B – Part 1  
Loans Received**

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

Statement covers period from <u>10/01/2008</u> through <u>10/18/2008</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>5</u> of <u>9</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  Moreno Valley Taxpayers Association	I.D. NUMBER  96204
--	--------------------------

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
Highland Fairview Properties 18140 Collins Avenue Sunny Isles Beach FL 33160  † <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ -0-	\$ 50000	<input type="checkbox"/> PAID \$ -0- <input type="checkbox"/> FORGIVEN \$ -0-	\$ 50000  11/30/2009 DATE DUE	4 % RATE \$ -0-	\$ 50000  10/17/2008 DATE INCURRED	CALENDAR YEAR \$ 50000 PER ELECTION** \$ 50000
		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____  DATE DUE	_____% RATE \$ _____	\$ _____  DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____  DATE DUE	_____% RATE \$ _____	\$ _____  DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
<b>SUBTOTALS</b>		\$	50000 \$	-0- \$	50000 \$	-0-		

**Schedule B Summary**

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

1. Loans received this period ..... \$ 50000  
(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 \$ 50000**  
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.

MV00250400

**Schedule D**  
**Summary of Expenditures**  
**Supporting/Opposing Other**  
**Candidates, Measures and Committees**

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

Statement covers period		SCHEDULE D	
from	10/01/2008	<b>CALIFORNIA FORM 460</b>	
through	10/18/2008	Page	6 of 9
		I.D. NUMBER	96204

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/18/2008	Robin Hastings PO Box 121 Moreno Valley CA 92555 FPPC 1309420	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	PRT: AFS Printing	13361	13361	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/18/2008	Jesse Molina 23595 Judge Ward Ct. Moreno Valley CA 92557 FPPC 1310079	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	PRT: AFS Printing	4182	5082	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
10/18/2008	Committee to Elect Frank West 11933 Vista De Cerros Moreno Valley CA 92557 FPPC 1223022	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	PRT: AFS Printing	20180	45349	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
<b>SUBTOTAL \$</b>				<b>37723</b>		

**Schedule D Summary**

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) .....	\$ 44895
2. Unitemized contributions and independent expenditures made this period of under \$100 .....	\$ -0-
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) .....	<b>TOTAL \$ 44895</b>

**Schedule D**  
**(Continuation Sheet)**  
**Summary of Expenditures**  
**Supporting/Opposing Other**  
**Candidates, Measures and Committees**

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

SCHEDULE D (CONT.)

Statement covers period from <u>10/01/2008</u> through <u>10/18/2008</u>	<b>CALIFORNIA FORM 460</b> Page <u>7</u> of <u>9</u>
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NAME OF FILER <b>Moreno Valley Taxpayers Association</b>	I.D. NUMBER <b>96204</b>
---	-----------------------------

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/18/2008	Committee to Elect Charles White FPPC 961657	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	PRT: AFS Printing	7172	12282	
	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					

**SUBTOTAL \$ 7172**

MV00250402

**Schedule E  
Payments Made**

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

8

SCHEDULE E

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	10/01/2008	
through	10/18/2008	Page <u>7</u> of <u>9</u>
NAME OF FILER		I.D. NUMBER
Moreno Valley Taxpayers Association		96204

SEE INSTRUCTIONS ON REVERSE

**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                   |
| 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
AFS Printing 1678 Hamner Avenue Norco CA 92860	PRT			57640
Floyd & Lucsko 950 April Lane Banning CA 92220	CNS			10000
David Morgan 29090 Light Sails Ct Romoland CA 92585	CNS			2000

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 69640

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 70036
2. Unitemized payments made this period of under \$100	\$ 138
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.)	<b>TOTAL \$ 70174</b>

MV00250403

**Schedule E  
(Continuation Sheet)  
Payments Made**

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	10/01/2008	
through	10/18/2008	Page <u>8</u> of <u>9</u>
NAME OF FILER		I.D. NUMBER
Moreno Valley Taxpayers Association		96204

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

**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                   |
| 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
Lois Tomlinson, CPA 12214 Heacock Street, Ste 100 Moreno Valley CA 92557	PRO		396

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

**SUBTOTAL \$ 396**

MV00250404



**Schedule G**  
**Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)**

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

Statement covers period from <u>10/01/2008</u>	<b>CALIFORNIA FORM 460</b>
through <u>10/18/2008</u>	
Page <u>9</u> of <u>9</u>	I.D. NUMBER <u>96204</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

NAME OF AGENT OR INDEPENDENT CONTRACTOR

AFS Printing

**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                   |
| 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)           |

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Postmaster Corona CA	POS			10027

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\* \$ 10027**

\* 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.

MV00250405

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

**COPY**

Type or print in ink.

CITY CLERK  
MORENO VALLEY  
RECEIVED

09 JAN 12 PM 3:30

COVER PAGE

CALIFORNIA  
FORM **460**

30<sup>th</sup> 1 of 12

For Official Use Only

Statement covers period  
from 07/01/2008  
through 12/31/2008

Date of election if applicable:  
(Month, Day, Year)

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
- Supplemental Preelection Statement - Attach Form 495

**3. Committee Information**

I.D. NUMBER  
96204

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Moreno Valley Taxpayers Association

STREET ADDRESS (NO P.O. BOX)

23205 Sunnymead Blvd.,

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Moreno Valley	CA	92553	[REDACTED]

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

PO Box 7599

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Moreno Valley	CA	92552	[REDACTED]

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER

Michael S. Geller

MAILING ADDRESS

PO Box 7599

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Moreno Valley	CA	92552	[REDACTED]

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	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.

JAN 12 2009

Executed on \_\_\_\_\_  
Date

Executed on \_\_\_\_\_  
Date

Executed on \_\_\_\_\_  
Date

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Treasurer or Assistant Treasurer

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

MV00250406

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

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA FORM		<b>460</b>
Page	2	of 12

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE

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

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

**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? <input type="checkbox"/> YES <input type="checkbox"/> 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? <input type="checkbox"/> YES <input type="checkbox"/> 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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> 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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

*Attach continuation sheets if necessary*

MV00250407

**Campaign Disclosure Statement  
Summary Page**

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

SUMMARY PAGE

Statement covers period from <u>07/01/2008</u>	<b>CALIFORNIA FORM 460</b>
through <u>12/31/2008</u>	
Page <u>3</u> of <u>12</u>	I.D. NUMBER <u>96204</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

**Contributions Received**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions ..... <i>Schedule A, Line 3</i>	\$ <u>154170</u>	\$ <u>329024</u>
2. Loans Received ..... <i>Schedule B, Line 3</i>	<u>50000</u>	<u>50000</u>
3. SUBTOTAL CASH CONTRIBUTIONS ..... <i>Add Lines 1 + 2</i>	\$ <u>204170</u>	\$ <u>379024</u>
4. Nonmonetary Contributions ..... <i>Schedule C, Line 3</i>	<u>-0-</u>	<u>1000</u>
5. TOTAL CONTRIBUTIONS RECEIVED ..... <i>Add Lines 3 + 4</i>	\$ <u>204170</u>	\$ <u>380024</u>

**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	\$ <u>-0-</u>	\$ <u>-0-</u>
21. Expenditures Made	\$ <u>-0-</u>	\$ <u>-0-</u>

**Expenditures Made**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made ..... <i>Schedule E, Line 4</i>	\$ <u>260320</u>	\$ <u>379321</u>
7. Loans Made ..... <i>Schedule H, Line 3</i>	<u>-0-</u>	<u>-0-</u>
8. SUBTOTAL CASH PAYMENTS ..... <i>Add Lines 6 + 7</i>	\$ <u>260320</u>	\$ <u>379321</u>
9. Accrued Expenses (Unpaid Bills) ..... <i>Schedule F, Line 3</i>	<u>-0-</u>	<u>-0-</u>
10. Nonmonetary Adjustment ..... <i>Schedule C, Line 3</i>	<u>-0-</u>	<u>1000</u>
11. TOTAL EXPENDITURES MADE ..... <i>Add Lines 8 + 9 + 10</i>	\$ <u>260320</u>	\$ <u>380321</u>

**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
<u>  </u> / <u>  </u> / <u>  </u>	\$ <u>-0-</u>
<u>  </u> / <u>  </u> / <u>  </u>	\$ <u>-0-</u>

**Current Cash Statement**

12. Beginning Cash Balance ..... <i>Previous Summary Page, Line 16</i>	\$ <u>57664</u>
13. Cash Receipts ..... <i>Column A, Line 3 above</i>	<u>204170</u>
14. Miscellaneous Increases to Cash ..... <i>Schedule I, Line 4</i>	<u>-0-</u>
15. Cash Payments ..... <i>Column A, Line 8 above</i>	<u>260320</u>
16. ENDING CASH BALANCE ..... <i>Add Lines 12 + 13 + 14, then subtract Line 15</i>	\$ <u>1514</u>

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

17. LOAN GUARANTEES RECEIVED ..... <i>Schedule B, Part 2</i>	\$ <u>-0-</u>
--	---------------

**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents ..... <i>See instructions on reverse</i>	\$ <u>-0-</u>
19. Outstanding Debts ..... <i>Add Line 2 + Line 9 in Column B above</i>	\$ <u>-0-</u>

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.

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>07/01/2008</u>		<b>CALIFORNIA FORM 460</b>
through <u>12/31/2008</u>		
Page <u>4</u> of <u>12</u>		I.D. NUMBER <u>96204</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

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)
Various	Highland Fairview Properties 18140 Collins Avenue Sunny Isles Beach FL 33160	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		153000	213000	
07/17/2008	Winchester & Associates 23640 Tovler, Ste 3 Moreno Valley CA 92553	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100	100	
12/24/2008	Diversified Real Estate 23205 Sunnymead Blvd Moreno Valley CA 92553	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1000	1000	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				<b>154100</b>		

**Schedule A Summary**

- Amount received this period – itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 154100
- Amount received this period – unitemized monetary contributions of less than \$100 ..... \$ 70
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$** 154170

\*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

MV00250409

**Schedule B – Part 1  
Loans Received**

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

Statement covers period from <u>07/01/2008</u>	<b>CALIFORNIA FORM 460</b>
through <u>12/31/2008</u>	
Page <u>5</u> of <u>12</u>	I.D. NUMBER <u>96204</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

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
Highland Fairview Properties 18140 Collins Avenue Sunny Isles Beach FL 33160		\$ -0-	\$ 50000	<input type="checkbox"/> PAID \$ -0- <input type="checkbox"/> FORGIVEN \$ -0-	\$ 50000 11/03/2009 DATE DUE	-0- % RATE	\$ 50000 10/17/08 DATE INCURRED	CALENDAR YEAR \$ 50000 PER ELECTION** \$ 50000
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	DATE DUE	% RATE	DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	DATE DUE	% RATE	DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	DATE DUE	% RATE	DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
<b>SUBTOTALS \$</b>			<b>50000 \$</b>	<b>-0- \$</b>	<b>50000 \$</b>	<b>-0-</b>		

**Schedule B Summary**

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

- Loans received this period ..... \$ 50000  
(Total Column (b) plus unitemized loans of less than \$100.)
- 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.)
- Net change this period. (Subtract Line 2 from Line 1.) ..... **NET \$** 50000  
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.

**Schedule D  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

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

SCHEDULED

Statement covers period from <u>07/01/2008</u> through <u>12/31/2008</u>	<b>CALIFORNIA FORM 460</b>
Page <u>6</u> of <u>12</u>	I.D. NUMBER <u>96204</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2008	Jesse Molina 23595 Judge Ward Ct. Moreno Valley CA 92557 FPPC 1310079	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Democratic Voters Choice FPPC 595002	900	900	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
08/25/2008	Robin Hastings PO Box 121 Moreno Valley CA 92555 FPPC 1309420	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Democratic Voters Choice FPPC 595002	900	900	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
08/25/2008	Jesse Molina 23595 Judge Ward Ct. Moreno Valley CA 92557 FPPC 1310079	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Citizens for Good Government FPPC 599010	700	1600	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
<b>SUBTOTAL \$</b>				2500		

**Schedule D Summary**

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) ..... \$ 40923
- Unitemized contributions and independent expenditures made this period of under \$100 ..... \$ -0-
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ..... **TOTAL \$** 40923

MV00250411

**Schedule D  
(Continuation Sheet)  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

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

SCHEDULE D (CONT.)

Statement covers period from <u>07/01/2008</u> through <u>12/31/2008</u>	<b>CALIFORNIA FORM 460</b>
Page <u>7</u> of <u>12</u>	I.D. NUMBER 96204

NAME OF FILER

Moreno Valley Taxpayers Association

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2008	Robin Hastings PO Box 121 Moreno Valley CA 92555 FPPC 1309420  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Citizens for Good Government FPPC 599010	700	700	700
10/18/2008	Robin Hastings PO Box 121 Moreno Valley CA 92555 FPPC 1310079  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	PRT: AFS Printing	13361	13361	13361
10/18/2008	Jesse Molina 23595 Judge Ward Ct Moreno Valley CA 92557 FPPC 1310079  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	PRT: AFS Printing	4182	5082	5082
10/18/2008	Committee to Elect Frank West 11933 Vista De Cerros Moreno Valley CA 92557 FPPC 1223022  <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input checked="" type="checkbox"/> Independent Expenditure	PRT: AFS Printing	20180	45349	45349

**SUBTOTAL \$ 38423**

MV00250412



**Schedule E  
Payments Made**

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2008	
through	12/31/2008	Page <u>8</u> of <u>12</u>
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Moreno Valley Taxpayers Association		96204

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |  |  |  |
|--|--|--|
| <b>CMP</b> campaign paraphernalia/misc.                                  | <b>MBR</b> member communications                     | <b>RAD</b> radio airtime and production costs                        |
| <b>CNS</b> campaign consultants  | <b>MTG</b> meetings and appearances                  | <b>RFD</b> returned contributions                                    |
| <b>CTB</b> contribution (explain nonmonetary)*                           | <b>OFC</b> office expenses                           | <b>SAL</b> campaign workers' salaries                                |
| <b>CVC</b> civic donations   | <b>PET</b> petition circulating                      | <b>TEL</b> t.v. or cable airtime and production costs                |
| <b>FIL</b> candidate filing/ballot fees                                  | <b>PHO</b> phone banks                               | <b>TRC</b> candidate travel, lodging, and meals                      |
| <b>FND</b> fundraising events  | <b>POL</b> polling and survey research               | <b>TRS</b> staff/spouse travel, lodging, and meals                   |
| <b>IND</b> independent expenditure supporting/opposing others (explain)* | <b>POS</b> postage, delivery and messenger services  | <b>TSF</b> transfer between committees of the same candidate/sponsor |
| <b>LEG</b> legal defense   | <b>PRO</b> professional services (legal, accounting) | <b>VOT</b> voter registration  |
| <b>LIT</b> campaign literature and mailings                              | <b>PRT</b> print ads                                 | <b>WEB</b> 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
AFS Printing 1678 Hamner Avenue Norco CA 92860	PRT		139393
Boy Scouts of America PO Box 179 Moreno Valley CA 92556	CVC		500
California Voter's Guide 1954 W Carson St., Ste B Torrance CA 96204	LIT		1300

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

**SUBTOTAL \$ 120085**

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.) .....	\$	260015
2. Unitemized payments made this period of under \$100 .....	\$	305
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.) .....	<b>TOTAL \$</b>	<b>260320</b>

MV00250413

**Schedule E  
(Continuation Sheet)  
Payments Made**

SCHEDULE E (CONT.)

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2008	
through	12/31/2008	Page <u>9</u> of <u>12</u>
NAME OF FILER		I.D. NUMBER
Moreno Valley Taxpayers Association		96204

SEE INSTRUCTIONS ON REVERSE

**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
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
Floyd & Lucsko 950 April Lane Banning CA 92220	CNS		25000
David Morgan 29090 Light Sails Ct Romoland CA 92585	CNS		7750
Democratic Voter's Choice 728 W Edna Pl Covina CA 91722 FPPC 595002	LIT		1800
Moreno Valley Citizens for Rancho Belago PO Box 7599 Moreno Valley CA 92552 FPPC 1306564	CTB		2500
Friends of Meli Van Natta 23205 Sunnymead Bl Moreno Valley CA 92553 FPPC 1302221	CTB		500

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

**SUBTOTAL \$ 37550**

MV00250414

**Schedule E  
(Continuation Sheet)  
Payments Made**

SCHEDULE E (CONT.)

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2008	
through	12/31/2008	Page 10 of 12
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Moreno Valley Taxpayers Association		96204

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

**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
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
Century Bankcard Services 9410 Topanga Canyon Bl, Ste 202 Chatsworth CA 91311	OFC		216
Matrix Media 250 Anita Drive Pasadena CA 91105	PRT		52951
MemberClicks Buckhead Centre 2970 Peachtree Rd, Ste 300, Atlanta GA 30305	OFC		451
Political Data, Inc PO Box 1706 Burbank CA 91507	POL		497
Public Opinion Strategies 107 W Torrance Blvd. Ste. 200 Redondo Beach CA 90277	POL		39100

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

**SUBTOTAL \$ 93215**

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

MV00250415

**Schedule E  
(Continuation Sheet)  
Payments Made**

SCHEDULE E (CONT.)

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2008	
through	12/31/2008	Page <u>11</u> of <u>12</u>
NAME OF FILER		I.D. NUMBER
Moreno Valley Taxpayers Association		96204

SEE INSTRUCTIONS ON REVERSE

**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                   |
| 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
Lois Tomlinson CPA 12214 Heacock Moreno Valley CA 92557	PRO		396
RT Burns 8456 Hunt Valley Dr Vienna VA 22182	PHO		6499
Voter Information Guide 13701 Riverside Dr Sherman Oaks CA 91423	LIT		860
Citizens for Good Government 728 W Edna Pl Covina 91722	LIT		1400
26th Corporation 1285 Baring Blvd #127 Sparks NV 89434	RFD	Refund portion of contribution	10

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

**SUBTOTAL \$ 9165**

MV000250416

**Schedule G  
Payments Made by an Agent or Independent  
Contractor (on Behalf of This Committee)**

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

SCHEDULE G

Statement covers period from <u>07/01/2008</u>	<b>CALIFORNIA FORM 460</b>
through <u>12/31/2008</u>	
Page <u>12</u> of <u>12</u>	I.D. NUMBER <u>96204</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

NAME OF AGENT OR INDEPENDENT CONTRACTOR

AFS Printing

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- |  |  |  |
|--|--|--|
| <b>CMP</b> campaign paraphernalia/misc.                                  | <b>MBR</b> member communications                     | <b>RAD</b> radio airtime and production costs                        |
| <b>CNS</b> campaign consultants  | <b>MTG</b> meetings and appearances                  | <b>RFD</b> returned contributions                                    |
| <b>CTB</b> contribution (explain nonmonetary)*                           | <b>OFC</b> office expenses                           | <b>SAL</b> campaign workers' salaries                                |
| <b>CVC</b> civic donations   | <b>PET</b> petition circulating                      | <b>TEL</b> t.v. or cable airtime and production costs                |
| <b>FIL</b> candidate filing/ballot fees                                  | <b>PHO</b> phone banks                               | <b>TRC</b> candidate travel, lodging, and meals                      |
| <b>FND</b> fundraising events  | <b>POL</b> polling and survey research               | <b>TRS</b> staff/spouse travel, lodging, and meals                   |
| <b>IND</b> independent expenditure supporting/opposing others (explain)* | <b>POS</b> postage, delivery and messenger services  | <b>TSF</b> transfer between committees of the same candidate/sponsor |
| <b>LEG</b> legal defense   | <b>PRO</b> professional services (legal, accounting) | <b>VOT</b> voter registration  |
| <b>LIT</b> campaign literature and mailings                              | <b>PRT</b> print ads                                 | <b>WEB</b> information technology costs (internet, e-mail)           |

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Postmaster Corona CA	POS		18089

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\* \$ 18089**

\* 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.

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

MORENO VALLEY RECEIVED

CALIFORNIA FORM **460**

Page 1 of 3

For Official Use Only

Statement covers period  
from 01/01/2009  
through 06/30/2009

Date of election if applicable  
(Month, Day, Year)

NOV -4 PM 1:56

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
- Supplemental Preelection Statement - Attach Form 495

Type of Committee corrected from Controlled Committee to

General Purpose Committee.

**3. Committee Information**

I.D. NUMBER  
96204

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Moreno Valley Taxpayers Association

STREET ADDRESS (NO P.O. BOX)

5900 Sycamore Canyon Blvd. 2nd Floor

CITY STATE ZIP CODE AREA CODE/PHONE  
Riverside CA 92507

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

PO Box 7599

CITY STATE ZIP CODE AREA CODE/PHONE  
Moreno Valley CA 92552

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER  
Michael S. Geller

MAILING ADDRESS  
PO Box 7599

CITY STATE ZIP CODE AREA CODE/PHONE  
Moreno Valley CA 92552

NAME OF ASSISTANT TREASURER, IF ANY

Michael S. Geller

MAILING ADDRESS  
PO Box 7599

CITY STATE ZIP CODE AREA CODE/PHONE  
Moreno Valley CA 92552

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 November 3, 2009  
Date

By \_\_\_\_\_  
Signature of Treasurer or Assistant Treasurer

Executed on \_\_\_\_\_  
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

MV00250418

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

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA FORM	<b>460</b>
Page <u>2</u> of <u>3</u>	

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE

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

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

**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? <input type="checkbox"/> YES <input type="checkbox"/> 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? <input type="checkbox"/> YES <input type="checkbox"/> 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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> 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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
-----------------------------------	-----------------------	---

*Attach continuation sheets if necessary*

MV00250419

**Campaign Disclosure Statement  
Summary Page**

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

SUMMARY PAGE

Statement covers period from 01/01/2009 through 06/30/2009	<b>CALIFORNIA FORM 460</b>
Page 3 of 3	I.D. NUMBER 96204

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Moreno Valley Taxpayers Association

**Contributions Received**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions ..... Schedule A, Line 3	\$ 5000	\$ 5000
2. Loans Received ..... Schedule B, Line 3	\$ -0-	\$ -0-
3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1 + 2	\$ 5000	\$ 5000
4. Nonmonetary Contributions ..... Schedule C, Line 3	\$ -0-	\$ -0-
5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 + 4	\$ 5000	\$ 5000

**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 \$	-0-	-0-
21. Expenditures Made \$	-0-	-0-

**Expenditures Made**

	Column A	Column B
6. Payments Made ..... Schedule E, Line 4	\$ 5688	\$ 5688
7. Loans Made ..... Schedule H, Line 3	\$ -0-	\$ -0-
8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7	\$ 5688	\$ 5688
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	\$ 5688	\$ 5688

**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
/ /	\$ -0-
/ /	\$ -0-

**Current Cash Statement**

12. Beginning Cash Balance ..... Previous Summary Page, Line 16	\$ 1514
13. Cash Receipts ..... Column A, Line 3 above	\$ 5000
14. Miscellaneous Increases to Cash ..... Schedule I, Line 4	\$ -0-
15. Cash Payments ..... Column A, Line 8 above	\$ 5688
16. ENDING CASH BALANCE ..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ 826

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

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

**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	\$ 50000

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.

MV00250420



**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

CITY CLERK  
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**CALIFORNIA FORM 460**

Page 1 of 8  
For Official Use Only

Statement covers period  
from 01/01/2009  
through 06/30/2009

Date of election if applicable:  
(Month, Day, Year)

SEE INSTRUCTIONS ON REVERSE

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

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee<br><input type="checkbox"/> State Candidate Election Committee<br><input type="checkbox"/> Recall<br><i>(Also Complete Part 5)</i>       | <input type="checkbox"/> Primarily Formed Ballot Measure Committee<br><input type="checkbox"/> Controlled<br><input type="checkbox"/> Sponsored<br><i>(Also Complete Part 6)</i> |
| <input checked="" type="checkbox"/> General Purpose Committee<br><input type="checkbox"/> Sponsored<br><input type="checkbox"/> Small Contributor Committee<br><input type="checkbox"/> Political Party/Central Committee | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee<br><i>(Also Complete Part 7)</i>  |

**2. Type of Statement:**

- |   |   |
|---|---|
| <input type="checkbox"/> Preelection Statement  | <input type="checkbox"/> Quarterly Statement                                  |
| <input checked="" type="checkbox"/> Semi-annual Statement                                   | <input type="checkbox"/> Special Odd-Year Report                              |
| <input type="checkbox"/> Termination Statement<br><i>(Also file a Form 410 Termination)</i> | <input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
| <input type="checkbox"/> Amendment (Explain below)  |   |

**3. Committee Information**

I.D. NUMBER  
**96204**

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Moreno Valley Taxpayers Association

STREET ADDRESS (NO P.O. BOX)

5900 Sycamore Canyon Blvd. 2nd Floor

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Riverside	CA	92507	[REDACTED]

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

PO Box 7599

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Moreno Valley	CA	92552	[REDACTED]

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER

Michael S. Geller

MAILING ADDRESS

PO Box 7599

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Moreno Valley	CA	92552	[REDACTED]

NAME OF ASSISTANT TREASURER, IF ANY

Michael S. Geller

MAILING ADDRESS

PO Box 7599

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Moreno Valley	CA	92552	[REDACTED]

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 June 30, 2009  
Date

By \_\_\_\_\_  
Signature of Treasurer or Assistant Treasurer

Executed on \_\_\_\_\_  
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

MV00250421

# Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

Date Stamp  
**CITY CLERK MORENO VALLEY RECEIVED**  
**09 JUL 28 PM 3:31**

**CALIFORNIA FORM 460**

Page 1 of 8  
 For Official Use Only

Statement covers period  
 from 01/01/2009  
 through 06/30/2009

Date of election if applicable:  
 (Month, Day, Year)

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  
 Supplemental Preelection Statement - Attach Form 495

**3. Committee Information**

I.D. NUMBER  
96204

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
Moreno Valley Taxpayers Association

STREET ADDRESS (NO P.O. BOX)  
5900 Sycamore Canyon Blvd. 2nd Floor

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Riverside</u>	<u>CA</u>	<u>92507</u>	<u>[REDACTED]</u>

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX  
PO Box 7599

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Moreno Valley</u>	<u>CA</u>	<u>92552</u>	<u>[REDACTED]</u>

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER  
Michael S. Geller

MAILING ADDRESS  
PO Box 7599

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Moreno Valley</u>	<u>CA</u>	<u>92552</u>	<u>[REDACTED]</u>

NAME OF ASSISTANT TREASURER, IF ANY  
Michael S. Geller

MAILING ADDRESS  
PO Box 7599

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Moreno Valley</u>	<u>CA</u>	<u>92552</u>	<u>[REDACTED]</u>

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 June 30, 2009 Date

By [Signature] Signature of Treasurer or Assistant Treasurer

By \_\_\_\_\_ Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By \_\_\_\_\_ Signature of Controlling Officeholder, Candidate, State Measure Proponent

By \_\_\_\_\_ Signature of Controlling Officeholder, Candidate, State Measure Proponent

MV00250422

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

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA FORM		<b>460</b>
Page	2	of 8

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE \_\_\_\_\_

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

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

**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? <input type="checkbox"/> YES <input type="checkbox"/> 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? <input type="checkbox"/> YES <input type="checkbox"/> 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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> 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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

*Attach continuation sheets if necessary*

MV000250423

**Campaign Disclosure Statement  
Summary Page**

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

SUMMARY PAGE

Statement covers period from 01/01/2009 through 06/30/2009	<b>CALIFORNIA FORM 460</b>
	Page 3 of 8
	I.D. NUMBER 96204

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

**Contributions Received**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions ..... Schedule A, Line 3	\$ 5000	\$ 5000
2. Loans Received ..... Schedule B, Line 3	\$ -0-	\$ -0-
3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1 + 2	\$ 5000	\$ 5000
4. Nonmonetary Contributions ..... Schedule C, Line 3	\$ -0-	\$ -0-
5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 + 4	\$ 5000	\$ 5000

**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	\$ -0-	\$ -0-
21. Expenditures Made	\$ -0-	\$ -0-

**Expenditures Made**

	Column A	Column B
6. Payments Made ..... Schedule E, Line 4	\$ 5688	\$ 5688
7. Loans Made ..... Schedule H, Line 3	\$ -0-	\$ -0-
8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7	\$ 5688	\$ 5688
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	\$ 5688	\$ 5688

**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
/ /	\$ -0-
/ /	\$ -0-

**Current Cash Statement**

12. Beginning Cash Balance ..... Previous Summary Page, Line 16	\$ 1514
13. Cash Receipts ..... Column A, Line 3 above	5000
14. Miscellaneous Increases to Cash ..... Schedule I, Line 4	-0-
15. Cash Payments ..... Column A, Line 8 above	5688
16. ENDING CASH BALANCE ..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ 826

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

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

**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	\$ 50000

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.

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>01/01/2009</u> through <u>06/30/2009</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>4</u> of <u>8</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

I.D. NUMBER  
96204

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)
Various	Doug Whitney 11233 Studebaker RD Norwalk CA 90650	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self: Contractor	5000	5000	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				5000		

**Schedule A Summary**

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) .....	\$	5000
2. Amount received this period – unitemized monetary contributions of less than \$100 .....	\$	-0-
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .....	<b>TOTAL \$</b>	5000

\*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

MV00250425

**Schedule B – Part 1  
Loans Received**

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

Statement covers period from <u>01/01/2009</u> through <u>06/30/2009</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>5</u> of <u>8</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

I.D. NUMBER

96204

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)	(b)	(c)	(d)	(e)	(f)	(g)
		OUTSTANDING BALANCE BEGINNING THIS PERIOD	AMOUNT RECEIVED THIS PERIOD	AMOUNT PAID OR FORGIVEN THIS PERIOD*	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE
Highland Fairview Properties 18140 Collins Avenue Sunny Isles Beach FL 33160  † <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ 50000	\$ -0-	<input type="checkbox"/> PAID \$ -0- <input type="checkbox"/> FORGIVEN \$ -0-	\$ 50000  6/30/09 DATE DUE	-0- % RATE -0- DATE INCURRED	\$ 50000  10/17/08 DATE INCURRED	CALENDAR YEAR \$ 50000 PER ELECTION** \$ 50000
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____  DATE DUE	_____% RATE	\$ _____  DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____  DATE DUE	_____% RATE	\$ _____  DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
<b>SUBTOTALS \$</b>			<b>-0- \$</b>	<b>-0- \$</b>	<b>50000 \$</b>	<b>-0-</b>		

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

**Schedule B Summary**

- Loans received this period ..... \$ -0-  
(Total Column (b) plus unitemized loans of less than \$100.)
- 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.)
- Net change this period. (**Subtract** Line 2 from Line 1.) ..... **NET \$ -0-**  
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.

MV00250426

**Schedule D  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

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

Statement covers period		SCHEDULE D	
from	01/01/2009	<b>CALIFORNIA FORM 460</b>	
through	06/30/2009	Page 6 of 8	
		I.D. NUMBER 96204	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/06/09	Sniff for Sheriff/Coroner PO Box 1177 Riverside CA 92502 FPPC 1308117	<input type="checkbox"/> Monetary Contribution <input checked="" type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	Fundraiser	719	719	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
04/23/09	Rod Pacheco for DA 4075 Main Street Riverside CA 92501 FPPC 902578	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		300	300	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
<b>SUBTOTAL \$</b>				1019		

**Schedule D Summary**

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) .....	\$ 1019
2. Unitemized contributions and independent expenditures made this period of under \$100 .....	\$ -0-
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) .....	<b>TOTAL \$ 1019</b>

**Schedule E  
Payments Made**

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

SCHEDULE E

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2009	
through	06/30/2009	Page <u>7</u> of <u>8</u>
NAME OF FILER		I.D. NUMBER
Moreno Valley Taxpayers Association		96204

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

**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                   |
| 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
Derrick Coffman 34 Nieto Avenue Long Beach CA 90803	WEB		555
Wolfe & Associates PO Box 7599 Moreno Valley CA 92552	WEB		510
Floyd & Lucsko 950 April Lane Banning CA 92220	CNS		2500

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

**SUBTOTAL \$ 3565**

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	5442
2. Unitemized payments made this period of under \$100	\$	246
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.)	<b>TOTAL \$</b>	<b>5688</b>

MV00250428



**Schedule E  
(Continuation Sheet)  
Payments Made**

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

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2009	
through	06/30/2009	Page <u>8</u> of <u>8</u>
NAME OF FILER		I.D. NUMBER
Moreno Valley Taxpayers Association		96204

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

**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
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
MemberClicks 2970 Peachtree Road, NW, Ste 300 Atlanta GA 30305	OFC			588
Moreno Valley Morning Optimist Club PO Box 9107 Moreno Valley CA 92552	CVC			100
Inland Empire Community Calendar PO Box 8652 Moreno Valley CA 92552	LIT			170
Calliente Restaurant Bar & Grill 23040 Alessandro Blvd. Moreno Valley CA 92553	FND		Sniff for Sheriff/Coroner PO Box 1177 Riverside CA 92502 FPPC 1308117	719
Rod Pacheco for DA 4075 Main Street Riverside CA 92501 FPPC 902578	CTB			300

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

**SUBTOTAL \$ 1877**

MV00250429

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

**COPY**

Type or print in ink.

COVER PAGE

CITY CLERK  
**MORENO VALLEY RECEIVED**  
10 FEB -2 PM 3:37

**CALIFORNIA FORM 460**

Page 1 of 5  
For Official Use Only

Statement covers period  
from 07/01/2009  
through 12/31/2009

Date of election if applicable:  
(Month, Day, Year)

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
- Supplemental Preelection Statement - Attach Form 495

**3. Committee Information**

I.D NUMBER  
96204

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Moreno Valley Taxpayers Association

STREET ADDRESS (NO P.O. BOX)

5900 Sycamore Canyon Blvd. 2nd Floor

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Riverside	CA	92507	[REDACTED]

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

PO Box 7599

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Moreno Valley	CA	92552	[REDACTED]

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER

Michael S. Geller

MAILING ADDRESS

PO Box 7599

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Moreno Valley	CA	92552	[REDACTED]

NAME OF ASSISTANT TREASURER, IF ANY

Michael S. Geller

MAILING ADDRESS

PO Box 7599

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Moreno Valley	CA	92552	[REDACTED]

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 FEB 01 2010  
Date

Executed on \_\_\_\_\_  
Date

Executed on \_\_\_\_\_  
Date

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Treasurer or Assistant Treasurer

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

MV00250430

Type or print in ink.

COVER PAGE - PART 2

# Recipient Committee Campaign Statement Cover Page — Part 2

**CALIFORNIA  
FORM 460**

Page 2 of 5

### 5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

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

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

**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*

**Campaign Disclosure Statement  
Summary Page**

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

SUMMARY PAGE

Statement covers period from 07/01/2009		<b>CALIFORNIA FORM 460</b>
through 12/31/2009		
Page 3 of 5		I.D. NUMBER 96204

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

**Contributions Received**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions ..... Schedule A, Line 3	\$ -0-	\$ 5000
2. Loans Received ..... Schedule B, Line 3	-0-	-0-
3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1 + 2	\$ -0-	\$ 5000
4. Nonmonetary Contributions ..... Schedule C, Line 3	-0-	-0-
5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 + 4	\$ -0-	\$ 5000

**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	\$ -0-	\$ -0-
21. Expenditures Made	\$ -0-	\$ -0-

**Expenditures Made**

	Column A	Column B
6. Payments Made ..... Schedule E, Line 4	\$ 567	\$ 6255
7. Loans Made ..... Schedule H, Line 3	-0-	-0-
8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7	\$ 567	\$ 6255
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	\$ 567	\$ 6255

**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
____/____/____	\$ -0-
____/____/____	\$ -0-

**Current Cash Statement**

12. Beginning Cash Balance ..... Previous Summary Page, Line 16	\$ 826
13. Cash Receipts ..... Column A, Line 3 above	-0-
14. Miscellaneous Increases to Cash ..... Schedule I, Line 4	-0-
15. Cash Payments ..... Column A, Line 8 above	567
16. ENDING CASH BALANCE ..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ 259

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

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

**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	\$ 50000

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.

**Schedule B – Part 1  
Loans Received**

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

Statement covers period from <u>07/01/2009</u> through <u>12/31/2009</u>		<b>CALIFORNIA FORM 460</b>
Page <u>4</u> of <u>5</u>		
NAME OF FILER Moreno Valley Taxpayers Association		I.D. NUMBER 96204

SEE INSTRUCTIONS ON REVERSE

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
Highland Fairview Properties 18140 Collins Avenue Sunny Isles Beach FL 33160  † <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ 50000	\$ -0-	<input type="checkbox"/> PAID \$ -0- <input type="checkbox"/> FORGIVEN \$ -0-	\$ 50000 6/30/09 DATE DUE	-0- % RATE \$ -0-	\$ 50000 10/17/08 DATE INCURRED	CALENDAR YEAR \$ 50000 PER ELECTION** \$ 50000
		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE	_____% RATE \$ _____	\$ _____ DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE	_____% RATE \$ _____	\$ _____ DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
<b>SUBTOTALS \$</b>			<b>-0-</b>	<b>\$ -0-</b>	<b>\$ 50000</b>	<b>\$ -0-</b>		

**Schedule B Summary**

- (Enter (e) on Schedule E, Line 3)
- Loans received this period ..... \$ -0-  
(Total Column (b) plus unitemized loans of less than \$100.)
  - 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.)
  - Net change this period. (Subtract Line 2 from Line 1.) ..... **NET \$** -0-  
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.

MV00250433

**Schedule E  
Payments Made**

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2009	
through	12/31/2009	Page 5 of 5
NAME OF FILER		I.D. NUMBER
Moreno Valley Taxpayers Association		96204

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Moreno Valley Taxpayers Association

**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
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
MemberClicks 2970 Peachtree Road, NW, Ste 300 Atlanta GA 30305	OFC			567

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

**SUBTOTAL \$**

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	567
2. Unitemized payments made this period of under \$100	\$	-0-
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.)	<b>TOTAL \$</b>	<b>567</b>

## Jane Halstead

---

**To:** Council  
**Cc:** Michelle Dawson; Tom DeSantis; Suzanne Bryant  
**Subject:** Subpoenas served to the Custodian of Records

Mayor Owings & Members of the Council:


Investigators for the FBI delivered to the City Clerk the following subpoenas for records:

1. All documents relating to the following development projects in Moreno Valley: Any development by Ridge Property; Project Numbers P08-133; PA08-0098; PA08-0097; and PA09-0022.
2. All documents relating to the following development projects in Moreno Valley: All Moreno Valley Properties and Highland Fairview Projects, including Skechers; and City of Moreno Valley project numbers PA07-0090; PA-07-0088; PA-07-0090; and PA-07-0091
3. All documents relating to the following development projects in Moreno Valley: The Aquabella project, including project numbers P11-029, PA-04-0005, PA-04-0070 and PA-04-0082
4. All documents relating to Victoria Baca
5. All documents relating to the hiring, employment, and termination of Paul J. Early
6. All documents relating to Iddo Benzeevi
7. All documents relating to Tom Owings
8. All documents relating to Dr. Yxstain Gutierrez
9. All documents relating to development construction projects currently awaiting approval by the Moreno Valley City Council
10. All documents relating to pending or completed infrastructure projects in City Council District 3 of the City of Moreno Valley
11. All documents relating to the hiring, employment, and termination of Henry Garcia as City Manager
12. All documents relating to the hiring, employment, and termination of Barry Foster as Moreno Valley's Director of Economic Development
13. All documents relating to development construction projects approved by the Moreno Valley City Council
14. All documents relating to pending development construction projects currently pending approval of the Moreno Valley Planning Commission
15. All documents relating to the following development projects in Moreno Valley: Projects associated with the World Logistic Centers, including the Moreno Valley project numbers PA-12-0010, PA-12-0011, PA-12-0012, PA12-0013, PA-12-0014, PA-12-0015
16. All documents relating to development construction projects approved by the Moreno Valley Planning Commission
17. All documents relating to the following development projects in Moreno Valley: Projects associated with the company Prologis, including Moreno Valley project numbers P07-0081, PA-0081, PA-0084, PA-0142, PA-0158 and PA-0162
18. All documents relating to the following development projects in Moreno Valley: The Economic Development Action Plan approved by the City Council on April 26, 2011
19. All documents relating to Victoria Baca
20. All documents relating to Jesse Molina
21. All documents relating to Michael Geller
22. All documents relating to Richard Stewart
23. All documents relating to Marcelo Co
24. All documents relating to Jerry Stephens
25. All documents relating to the hiring, employment, and termination of Anne Schneider
26. All documents relating to Highland Fairview Corporation

Let me know if you have any questions.

Thank you.

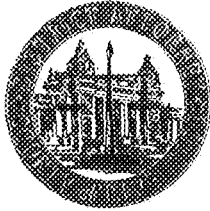
Jane Halstead, CMC  
City Clerk  
City of Moreno Valley  
14177 Frederick Street  
Moreno Valley, CA 92552

  
F: (951) 413-3009

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PAUL E. ZELLERBACH  
DISTRICT ATTORNEY

RIVERSIDE COUNTY  
DISTRICT ATTORNEY

3960 ORANGE STREET  
RIVERSIDE, CALIFORNIA 92501-3643  
951-955-5520

October 22, 2013

Ms. Jane Halstead  
Moreno Valley City Clerk  
14177 Frederick St.  
Moreno Valley, CA 92552

Subject: **Preservation of Evidence Demand**

Dear Ms. Halstead:

The Riverside County District Attorney's Office has learned that the Moreno Valley City Council will consider adopting Resolution No. 2013-82, a "Resolution Adopting Updated Records Retention Schedules and Authorizing Destruction of Certain City Records" at its regular meeting on October 22, 2013.

The District Attorney's Office has reason to believe that litigation may result from matters currently under investigation with regard to the City of Moreno Valley and that relevant evidence potentially may be destroyed if Resolution No. 2013-82 is passed and implemented. This information may be in the City of Moreno Valley's possession or control and the City has a duty to preserve that information.

Therefore, the District Attorney's Office demands that the City of Moreno Valley immediately take action to protect and preserve until further notice any of that information that is in its possession or under its control until further notice.

Specifically, the District Attorney's Office demands that the City of Moreno Valley immediately suspend deletion, overwriting and/or any other destruction of records and electronic stored information (hereinafter "ESI") connected, either directly or indirectly, to the following:

- All records and ESI associated with or concerning Highland Fairview, Iddo Benzeevi, Jerry Stephens, Tom Owings, Marcelo Co, Jesse Molina, Victoria Baca, Richard Stewart, Yxstian Gutierrez and Michael Geller.
- All records and ESI associated with or concerning all City of Moreno Valley elected and appointed public officials and Department Heads.

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- All records and ESI associated with or concerning pending or approved development construction projects, infrastructure and/or new infrastructure projects located in the City of Moreno Valley.
- All records and ESI associated with or concerning communications to and from City of Moreno Valley employees, elected and/or appointed public officials regarding the hiring, employment and discharge of former City Manager Henry Garcia.
- All records and ESI associated with or concerning the following development projects: Skechers, World Logistic Center, Prologis, Aquabella Development, Ridge Property Development and Nason Street infrastructure improvements.

The District Attorney's Office is specifically demanding that you preserve all documents, tangible things and ESI potentially associated with or concerning the matters identified above for the time frame of January 1, 2008 to present.

ESI, as used in this demand, should be afforded the broadest possible definition and includes (by way of example and not as an exclusive list) any and all information electronically, magnetically or optically stored as:

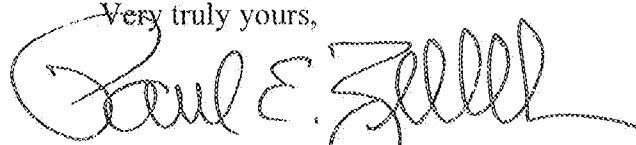
- Digital communications (e.g., e-mail, voice mail, instant messaging);
- Word processed documents (e.g., Word or WordPerfect documents and drafts);
- Spreadsheets and tables (e.g., Excel or Lotus 123 worksheets);
- Accounting Application Data (e.g., QuickBooks, Money, Peachtree data files);
- Image and Facsimile Files (e.g., .PDF, .TIFF, .JPG, .GIF images);
- Sound Recordings (e.g., .WAV and .MP3 files);
- Video and Animation (e.g., .AVI and .MOV files);
- Databases (e.g., Access, Oracle, SQL Server data, SAP);
- Contact and Relationship Management Data (e.g., Outlook, ACT!);
- Calendar and Diary Application Data (e.g., Outlook PST, Yahoo, blog tools);
- Online Access Data (e.g., Temporary Internet Files, History, Cookies);
- Presentations (e.g., PowerPoint, Corel Presentations)
- Network Access and Server Activity Logs;
- Project Management Application Data;
- Computer Aided Design/Drawing Files; and,
- Back Up and Archival Files (e.g., Zip, .GHO)

All ESI must be preserved so that it can be retrieved at a later time. The information must be preserved in its original electronic form so that all information contained within it,

whether visible or not, is also available for inspection. It is not sufficient to make a hard copy of electronic communication.

Thank you for your anticipated cooperation.

Very truly yours,



PAUL E. ZELLERBACH  
Riverside County District Attorney

Cc: Michelle Dawson  
Moreno Valley City Manager  
14177 Frederick St.  
Moreno Valley, CA 92552

Suzanne Bryant  
Moreno Valley City Attorney  
14177 Frederick St.  
Moreno Valley, CA 92552

✓ Tom Owings  
Mayor, Moreno Valley City Council  
14177 Frederick St.  
Moreno Valley, CA 92552

Jesse Molina  
Mayor Pro Tem, Moreno Valley City Council  
14177 Frederick St.  
Moreno Valley, CA 92552

Victoria Baca  
Moreno Valley City Council  
14177 Frederick St.  
Moreno Valley, CA 92552

Richard Stewart  
Moreno Valley City Council  
14177 Frederick St.  
Moreno Valley, CA 92552

Yxstain Gutierrez  
Moreno Valley City Council  
14177 Frederick St.  
Moreno Valley, CA 92552

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**From:** Jane Halstead  
**Sent:** Tuesday, October 22, 2013 3:45 PM  
**To:** Cindy Miller; Jane Halstead; Jesse Molina; Michele Patterson; Richard Stewart; Richard Stewart; Tom Owings; Victoria Baca; Yxstian Gutierrez  
**Cc:** Michelle Dawson; Tom DeSantis; Suzanne Bryant; 'Tom Owings (towings123@gmail.com)'; 'Victoriabaca2000 (victoriabaca2000@gmail.com)'  
**Subject:** Federal Grand Jury Subpoenas Served to the Custodian of Records

Mayor Owings & Members of the Council:

Investigators for the FBI delivered to the City Clerk the following subpoenas for records:


1. All documents relating to the following development projects in Moreno Valley: Any development by Ridge Property; Project Numbers P08-133; PA08-0098; PA10-0017, PA08-0097; and PA09-0022.
2. All documents relating to the following development projects in Moreno Valley: All Moreno Valley Properties and Highland Fairview Projects, including Skechers; and City of Moreno Valley project numbers PA07-0090; PA-07-0088; PA-07-0090; and PA-07-0091
3. All documents relating to the following development projects in Moreno Valley: The Aquabella project, including project numbers P11-029, PA-04-0005, PA04-0069, PA-04-0070 and PA-04-0082
4. All documents relating to Victoria Baca
5. All documents relating to the hiring, employment, and termination of Paul J. Early
6. All documents relating to Iddo Benzeevi
7. All documents relating to Tom Owings
8. All documents relating to Dr. Yxstian Gutierrez
9. All documents relating to development construction projects currently awaiting approval by the Moreno Valley City Council
10. All documents relating to pending or completed infrastructure projects in City Council District 3 of the City of Moreno Valley
11. All documents relating to the hiring, employment, and termination of Henry Garcia as City Manager
12. All documents relating to the hiring, employment, and termination of Barry Foster as Moreno Valley's Director of Economic Development
13. All documents relating to development construction projects approved by the Moreno Valley City Council
14. All documents relating to pending development construction projects currently pending approval of the Moreno Valley Planning Commission
15. All documents relating to the following development projects in Moreno Valley: Projects associated with the World Logistic Centers, including the Moreno Valley project numbers PA-12-0010, PA-12-0011, PA-12-0012, PA12-0013, PA-12-0014, PA-12-0015
16. All documents relating to development construction projects approved by the Moreno Valley Planning Commission
17. All documents relating to the following development projects in Moreno Valley: Projects associated with the company Prologis, including Moreno Valley project numbers P07-0081, PA-0081, PA-0084, PA-0142, PA-0158 and PA-0162
18. All documents relating to the following development projects in Moreno Valley: The Economic Development Action Plan approved by the City Council on April 26, 2011
19. All documents relating to Victoria Baca
20. All documents relating to Jesse Molina
21. All documents relating to Michael Geller
22. All documents relating to Richard Stewart
23. All documents relating to Marcelo Co
24. All documents relating to Jerry Stephens
25. All documents relating to the hiring, employment, and termination of Anne Schneider

26. All documents relating to Highland Fairview Corporation

Let me know if you have any questions.

Thank you.

Jane Halstead, CMC  
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[janeh@moval.org](mailto:janeh@moval.org)

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**From:** Michelle Dawson  
**Sent:** Tuesday, October 22, 2013 4:58 PM  
**To:** Everyone  
**Subject:** Update on investigation, subpoenas, etc.

City staff: I want to continue updating you on what little I do know about the investigation that began last May with the search warrants served at the residences of our Council Members (the ones in office at that time) and others. Subpoenas were delivered to the Clerk's Office today for documents related to the items listed below (most of which, the Clerk indicates, have already been provided to them). In addition, I was served with a subpoena to appear before a grand jury next Wednesday, as was Tom DeSantis. Our testimony is being requested just as witnesses.

Also, some in the media have tried to make an issue of an item on tonight's Council agenda; it is a routine update by the City Clerk of the City's record retention policy. This is done every few years to keep current with technological advancements and to comply with State law. Other cities do this as a routine update as well. Prior year updates were approved by the Council in 2003 and again in 2007. An outside consultant has been working on this update for over one year, obviously well before any investigation began. Tonight's item is on the consent calendar, as was the previous update. The City Clerk will be pulling this item from the agenda and preparing a comprehensive report to present to the City Council at a later date when the consultant can attend and provide information regarding this routine update. I don't know if the record retention update prompted today's influx of subpoenas, but as always the Clerk's Office and City staff will comply fully in providing copies of these items.

I apologize for any distraction and thank you for your continued hard work serving the City of Moreno Valley.  
--Michelle

Items subpoenaed today included the following:

1. All documents relating to the following development projects in Moreno Valley: Any development by Ridge Property; Project Numbers P08-133; PA08-0098; PA10-0017, PA08-0097; and PA09-0022.
2. All documents relating to the following development projects in Moreno Valley: All Moreno Valley Properties and Highland Fairview Projects, including Skechers; and City of Moreno Valley project numbers PA07-0090; PA-07-0088; PA-07-0090; and PA-07-0091
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