COVER PAGE

Recipient Committee Campaign Statement Cover Page

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Date Stamp: CITY OF RIALTO 2016 OCT 11 AM 8:45 RECEIVED CITY CLERK

CALIFORNIA FORM **460**

Page 1 of 10

For Official Use Only: 1349223

Statement covers period: from 7/01/16 through 9/24/16

Date of election if applicable (Month, Day, Year): 11/08/16

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

- [x] Officeholder, Candidate Controlled Committee
  - ○ State Candidate Election Committee
  - ○ Recall (Also Complete Part 5)
- [ ] General Purpose Committee
  - ○ Sponsored
  - ○ Small Contributor Committee
  - ○ Political Party/Central Committee
- [ ] Primarily Formed Ballot Measure Committee
  - ○ Controlled
  - ○ Sponsored (Also Complete Part 6)
- [ ] Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)

2. Type of Statement:

- [ ] Preelection Statement
- [ ] Semi-annual Statement
- [ ] Termination Statement (Also file a Form 410 Termination)
- [ ] Amendment (Explain below)
- [ ] Quarterly Statement
- [ ] Special Odd-Year Report

3. Committee Information

I.D. NUMBER: 1349223

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE): Friends of Joe Britt for Rialto City Council Committee 2016

STREET ADDRESS (NO P.O. BOX): [redacted]

CITY: Rialto STATE: CA ZIP CODE: 92376 AREA CODE/PHONE:

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

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER: Joelle McCoy

MAILING ADDRESS: [redacted]

CITY ZIP CODE AREA CODE/PHONE

Rialto, CA 92376

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 _____ Date

Executed on 10/10/16 Date

Executed on _____ Date

Executed on _____ Date

[redacted] Sponsor

By _____ Signature of Controlling Officeholder, Candidate, State Measure Proponent

By _____ Signature of Controlling Officeholder, Candidate, State Measure Proponent

Recipient Committee Campaign Statement Cover Page — Part 2

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COVER PAGE - PART 2

CALIFORNIA FORM **460**

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
JOE BRITT

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

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
[redacted] Rialto, CA 92376

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
FRIENDS OF JOE BRITT FOR RIALTO CITY COUNCIL	
NAME OF TREASURER: JOELLE McCOY	CONTROLLED COMMITTEE? ☐ YES ☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)
[redacted] RIALTO, CA 92376

CITY: RIALTO STATE: CA ZIP CODE: 92376 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

Amounts may be rounded to whole dollars.

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SUMMARY PAGE

Statement covers period from 7/01/16 through 9/24/16

CALIFORNIA FORM 460

Page 3 of 10

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Friends of Joe Brett for Rialto City Council Committee 2016

I.D. NUMBER: 1349223

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	$ 800.00	$
2. Loans Received	Schedule B, Line 3	4900	6,000.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	$ 5,700	$
4. Nonmonetary Contributions	Schedule C, Line 3		
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	$ 5700	$

Expenditures Made

6. Payments Made	Schedule E, Line 4	$ 2,303.53	$
7. Loans Made	Schedule H, Line 3		
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	$ 2303.53	$
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3		
10. Nonmonetary Adjustment	Schedule C, Line 3		
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	$ 2303.53	$

Current Cash Statement

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

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

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

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	$
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	$ 6000.00

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).

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	$	$

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
/ /	$
/ /	$

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

Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

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SCHEDULE A

CALIFORNIA FORM **460**

Statement covers period from 7/01/16 through 9/24/16

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Friends of Joe Britt for Rialto City Council Committee 2016

I.D. NUMBER: 1349223

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)
9/10/16	Chris Gleason [redacted] Rialto, CA 92376	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Tene Warner	$150.00		
	Brockhouse & Hallum [redacted] Rialto, CA 92376	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC	CPA	$500.00		
9/5/16	Sherman Garrett [redacted] Upland, CA 91784	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Teacher	$50.00		
9/10/16	Dr. Rita Ramirez Dea Lead PHd [redacted] Twentynine Palms, CA 92277	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Teacher	$50.00		
9/22/16	Dr. Talat Khan [redacted] Rancho Cucamonga, CA 91739	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Doctor	$50.00		

SUBTOTAL $ 800.00

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 650.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 150.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL $ 800.00

*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 B – Part 1
Loans Received

Amounts may be rounded to whole dollars.

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Statement covers period from 7/01/16 through 9/24/16

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Friends of Joe Britt for Rialto City Council (Committee 2016)

I.D. NUMBER: 1349223

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
Cynthia Britt [redacted] Rialto, CA 92376 †☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Wife	$ 400.00	$	☐ PAID $ ☐ FORGIVEN $	$ 400.00 DATE DUE	% RATE $	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION** $
Britt Family [redacted] Rialto, CA 92376 †☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Family	$ 700.00	$	☐ PAID $ ☐ FORGIVEN $	$ 700.00 DATE DUE	% RATE $	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION** $
Britt Family [redacted] Rialto, CA 92376 †☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Family	$	$ 4,900.00	☐ PAID $ ☐ FORGIVEN $	$ 4,900.00 DATE DUE	% RATE $	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION** $
SUBTOTALS		$ 4,900.00	$		$ 6,000.00	$		

Schedule B Summary

1. Loans received this period ..... $ 4,900
   (Total Column (b) plus unitemized loans of less than $100.)
2. Loans paid or forgiven this period ..... $ Ø
   (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 $ 4,900
   Enter the net here and on the Summary Page, Column A, Line 2.
   (May be a negative number)

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

†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 E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

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Statement covers period from 7/01/16 through 9/24/16

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Friends of Joe Brill for Rialto City Council Committee 2016

I.D. NUMBER: 1349223

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
Romero's Jumpers (909-496-0549)	FND	5 Tables 40 Chairs for fundraiser	$150.00
City of Rialto Family Festival Booth	CTB	Family Festival Booth	$10.00
McLogans Supply [redacted] Anaheim, CA 92805	CMP	Rubylith sheets yellow paint white Coroplast yellow Coroplast	$248.29
McLogan Supply [redacted] Anaheim, CA 92805	CMP	Peacock Blue Coroplast Xacto Blades Medium yellow	$101.20
99¢ Store [redacted] Rialto, CA 92376	FND	3 Cases of water	$11.59

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

SUBTOTAL $ 421.08

Schedule E (Continuation Sheet) Payments Made

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I.D. NUMBER: 1349223

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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
Rialto Glass Co [redacted] Rialto, CA 92376	CMP	1/8" Clear Temp 128 X 20	$30.00
KH Metal [redacted] Riverside, CA 92501	CMP	1/8" C-1018 Cold Finished Round Bar	$25.66
KH Metals [redacted] Riverside, CA 92501	CMP	1/8" C-1018 Cold Finished Round Bar	$21.39
McLogan Supply [redacted] Los Angeles, CA 90007	CMP	Retarder Thinner Qt 7921 Peacock Blue	$64.75
Rialto Glass Co [redacted] Rialto, CA 92376	CMP	1/4 Clear Glass	$10.00

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

SUBTOTAL $ 151.80

Schedule E (Continuation Sheet) Payments Made

Amounts may be rounded to whole dollars.

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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
99¢ Store, [redacted] Rialto, CA 92376	FND	Water; Water Aluminum Pans for fundraiser	$9.46
Kasch Graphic Designs [redacted] Rialto, CA 92376	CMP	Signs	$200.00
Kasch Graphic Designs [redacted] Rialto, CA 92376	CMP	Sign	$86.50
Precise Print & Promotions [redacted] San Bernardino, CA 92408	LIT	Color Copies	$25.00
Arco Gasoline [redacted] Rialto, CA 92376	TRS	Gas	$15.35

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

SUBTOTAL $ 336.31

Schedule E (Continuation Sheet) Payments Made

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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
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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
The Home Depot [redacted] Rialto, CA 92376	CMP	Lacquer Thinner for screenprinting	$19.95
Office Depot Office Max [redacted] Rancho Cucamonga, CA 91739	CMP	T-Square Blade	$24.60
USA Gasoline [redacted] San Bernardino, CA	TRS	Gas	$15.00
McLogan Supply [redacted] Los Angeles, CA 90007	CMP	Paint Squeegee Gold Squeegee	$54.92
Arrowhead Mechanical, Inc / Sheet Metal [redacted] San Bernardino, CA 92408	CMP	Plates Cut Down To Size	$20.00

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SUBTOTAL $ 134.47

Schedule E (Continuation Sheet) Payments Made

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NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Receipt for HP Printer	CMP	Printer's Ink	$40.00
Reliable Screen Supply [redacted] Riverside, CA 92507	CMP	Red Block out - 1 print	$11.87
City of Rialto	FIL	Candidates Statement	1,208.00

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

SUBTOTAL $ 1259.87