

**Recipient Committee  
Campaign Statement  
Cover Page**

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COVER PAGE

CALIFORNIA  
FORM **460**

Page 1 of 16

For Official Use Only

Statement covers period from 01/01/2018 through 06/30/2018	Date of Election if applicable  (Month, Day, Year)
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**1. Type of Recipient Committee**

- Officeholder, Candidate Controlled Committee
- State Candidate Election Committee
- Recall
- General Purpose Committee
  - Sponsored
  - Small Contributor Committee
  - Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
- Controlled
- Sponsored
- Primarily Formed Candidate/Officeholder Committee

**2. Type of Statement**

- Pre-election Statement
- Semi-Annual Statement
- Termination Statement
- Amendment
- Quarterly Statement
- Special Odd-Year Statement
- Supplemental Pre-election Statement - Attach Form 495

**3. Committee Information**

I.D. Number 1400113

COMMITTEE NAME  
Carla Thornton for City Council 2018

STREET ADDRESS (NO PO BOX)

CITY Riverside STATE CA ZIP CODE 92501 AREA CODE/PHONE [REDACTED]

MAILING ADDRESS (IF DIFFERENT)

CITY STATE ZIP CODE

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER  
Richard Teaman

STREET ADDRESS

CITY Riverside STATE CA ZIP CODE 92501 AREA CODE/PHONE [REDACTED]

NAME OF ASSISTANT TREASURER, IF ANY  
Javier Carrillo

STREET ADDRESS

CITY Riverside STATE CA ZIP CODE 92501 AREA CODE/PHONE [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 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 7/27/18 By [REDACTED] TREASURER OR ASSISTANT TREASURER  
 Executed on 7/27/18 By [REDACTED] SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROONENT OR RESPONSIBLE OFFICER OF SPONSOR  
 Executed on \_\_\_\_\_ By \_\_\_\_\_ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROONENT  
 Executed on \_\_\_\_\_ By \_\_\_\_\_ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROONENT

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

Statement covers period from <u>01/01/2018</u> through <u>06/30/2018</u>	Page 2 of 16
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**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE  
Carla Thornton

OFFICE SOUGHT OR HELD ( INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)  
City Council Member - District 2 City of Moreno Valley

RESIDENTIAL/BUSINESS ADDRESS ( NO. AND STREET) CITY STATE ZIP  
[REDACTED] Moreno Valley CA 92557

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

NAME OF OFFICEHOLDER OR CANDIDATE OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY
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**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

**Campaign Disclosure Statement  
Summary Page**

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2018	
through	06/30/2018	Page 3 of 16

NAME OF FILER Carla Thornton for City Council 2018

I.D. NUMBER  
1400113

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
<b>Contributions Received</b>		
1. Monetary Contributions . . . . . Schedule A, Line 3	\$ 4,865.00	\$ 4,865.00
2. Loans Received . . . . . Schedule B, Line 3	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS . . . . . Add Lines 1+ 2	\$ 4,865.00	\$ 4,865.00
4. Nonmonetary Contributions . . . . . Schedule C, Line 3	435.00	435.00
5. TOTAL CONTRIBUTIONS RECEIVED . . . . . Add Lines 3 + 4	\$ 5,300.00	\$ 5,300.00

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

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

	Column A	Column B
<b>Expenditures Made</b>		
6. Payments Made . . . . . Schedule E, Line 4	\$ 2,590.28	\$ 2,590.28
7. Loans Made . . . . . Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS . . . . . Add Lines 6 + 7	\$ 2,590.28	\$ 2,590.28
9. Accrued Expenses (Unpaid Bills) . . . . . Schedule F, Line 3	0.00	0.00
10. Nonmonetary Adjustment . . . . . Schedule C, Line 3	435.00	435.00
11. TOTAL EXPENDITURES MADE . . . . . Add Lines 8 + 9 + 10	\$ 3,025.28	\$ 3,025.28

**Expenditure Limit Summary  
for State Candidates**

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

_____	\$ _____
_____	\$ _____

<b>Current Cash Statement</b>	
12. Beginning Cash Balance . . . . . Previous Summary Page, Line 16	\$ 1,719.85
13. Cash Receipts . . . . . Column A, Line 3 above	4,865.00
14. Miscellaneous Increases to Cash . . . . . Schedule I, Line 4	145.23
15. Cash Payments . . . . . Column A, Line 8 above	2,590.28
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 4,139.80

17. LOAN GUARANTEES RECEIVED. . . . . Schedule B, Part 2	\$ 0.00
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<b>Cash Equivalents and Outstanding Debts</b>	
18. Cash Equivalents . . . . .	\$ 0.00
19. Outstanding Debts. . . . . Add Lines 2 + Line 9 in Column B above	\$ 0.00

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

**Schedule A  
Monetary Contributions Received**

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2018	
through	06/30/2018	Page 4 of 16

NAME OF FILER Carla Thornton for City Council 2018

I.D. NUMBER  
1400113

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/08/2018	Beverly Bailey [REDACTED] Riverside, CA 92501	IND	Business Owner  Stronghold Engineering	1,000.00	1,000.00	
04/05/2018	Shira Brownell [REDACTED] Brandon, MS 39047	IND	HCS Director  Molina	100.00	100.00	
03/09/2018	De Anza Tool & Mfg Co 4010 Garner Rd Riverside, CA 92501	OTH		250.00	250.00	
03/09/2018	Janis Duke [REDACTED] Riverside, CA 92506	IND	Retired  N/A	100.00	100.00	

**SUBTOTAL \$** 1,450.00

**Schedule A Summary**

1. Amount received this period - itemized contributions (Includes all Schedule A subtotals ) .....	\$ 3,775.00
2. Amount received this period - unitemized .....	\$ 1,090.00
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> 4,865.00

**\*\* Contributor Codes**  
 IND - Individual  
 COM - Recipient Committee (other than PTY or SCC)  
 OTH - Other  
 PTY - Political Party  
 SCC - Small Contributor Committee

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2018	
through	06/30/2018	Page 5 of 16

NAME OF FILER Carla Thornton for City Council 2018

I.D. NUMBER  
1400113

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/02/2018	Tina Dunneback [REDACTED] Orange, CA 92865	IND	Retired  N/A	100.00	100.00	
03/16/2018	Grosvenor Fish [REDACTED] Riverside, CA 92506	IND	Retired  N/A	100.00	100.00	
03/14/2018	Rebecca Franklin [REDACTED] Riverside, CA 92503	IND	Computer consultant  Self-employed	200.00	200.00	
03/09/2018	Gallant Risk & Insurance Services Inc.  4160 Temescal Canyon Rd Ste 402 Corona, CA 92883	OTH		125.00	125.00	

**SUBTOTAL \$** 525.00

\*\* Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2018	
through	06/30/2018	Page 6 of 16

NAME OF FILER Carla Thornton for City Council 2018

I.D. NUMBER  
1400113

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
01/18/2018	Rosa Gomez [REDACTED] Redlands, CA 92374	IND	Retired  N/A	100.00	100.00	
03/16/2018	Victoria Jones [REDACTED] Apo, AP 96266	IND	Military  US Air Force	100.00	100.00	
04/11/2018	Kristen Kavanaugh [REDACTED] San Jose, CA 95112	IND	Sr. Manager Leadership Development  Tesla Inc.	100.00	100.00	
03/09/2018	Alicia Reed [REDACTED] Riverside, CA 92506	IND	Retired  N/A	100.00	100.00	

**SUBTOTAL \$** 400.00

\*\* Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2018	
through	06/30/2018	Page 7 of 16

NAME OF FILER Carla Thornton for City Council 2018	I.D. NUMBER 1400113
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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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
03/15/2018	Steve Russell [REDACTED] Riverside, CA 92509	IND	Retired  N/A	100.00	100.00	
03/14/2018	Wayne Sheppard [REDACTED] Riverside, CA 92506	IND	Managing Partner  Post Acute Care LLC	500.00	500.00	
03/09/2018	Dwight Tate [REDACTED] Riverside, CA 92506	IND	Retired  N.A.	100.00	100.00	
03/14/2018	Carldell Thornton [REDACTED] Palmdale, CA 93550	IND	Computer Tech  Worldwide Tech Services	500.00	500.00	

<b>SUBTOTAL \$</b>	1,200.00	
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\*\* Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

Statement covers period
from 01/01/2018
through 06/30/2018

CALIFORNIA FORM 460
Page 8 of 16

NAME OF FILER Carla Thornton for City Council 2018

I.D. NUMBER
1400113

Table with 7 columns: DATE RECEIVED, FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR, CONTRIBUTOR CODE, IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER, AMOUNT RECEIVED, CUMULATIVE TO DATE CALENDAR YEAR, PER ELECTION TO DATE. Includes entries for Khristopher Thornton and Theo Thornton.

SUBTOTAL \$ 200.00

\*\* Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee



**Schedule C  
Nonmonetary Contributions Received**

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2018	
through	06/30/2018	Page 9 of 16

NAME OF FILER Carla Thornton for City Council 2018

I.D. NUMBER  
1400113

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR	CONTRIBUTOR CODE	OCCUPATION & EMPLOYER OR COMMITTEE ID NO.	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
04/12/2018	Paul Gill [REDACTED] Riverside, CA 92506	IND	Director of Client Services Ruhnau & Clark and Associates	Hosted fundraising event	435.00	435.00	

<b>SUBTOTAL \$</b>	435.00
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**Schedule C Summary**

1. Amount received this period - itemized contributions (Includes all Schedule C subtotals ) . . . . .	\$ 435.00
2. Amount received this period - unitemized . . . . .	\$ 0.00
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 \$ 435.00</b>

**\*\* Contributor Codes**  
 IND - Individual  
 COM - Recipient Committee (other than PTY or SCC)  
 OTH - Other  
 PTY - Political Party  
 SCC - Small Contributor Committee

**Schedule E  
Payments Made**

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2018	
through	06/30/2018	Page 10 of 16
NAME OF FILER Carla Thornton for City Council 2018		I.D. NUMBER 1400113

**CODES:** If one of the following 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 production costs
FIL candidate filing / ballot fees	PHO phone banks	TRC candidate travel, lodging and meals
FND fundraising expenses	POL polling and survey research	TRS staff/spouse travel, lodging and meals
IND independent expenditures supporting/opposing others	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	CODE or DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot  PO Box 84314 Baton Rouge, LA 70884	Merchant fee	6.60
Anedot  PO Box 84314 Baton Rouge, LA 70884	Merchant fee	2.30
Anedot  PO Box 84314 Baton Rouge, LA 70884	Merchant fee	8.30
<b>SUBTOTAL \$</b>		17.20

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 2,590.28
2. Unitemized payments made this period of under \$100	\$ 0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ 0.00
4. Total payments made this period. (Add Line 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	<b>TOTAL \$ 2,590.28</b>

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2018	
through	06/30/2018	Page 11 of 16
NAME OF FILER Carla Thornton for City Council 2018		I.D. NUMBER 1400113

**CODES:** If one of the following 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 production costs                            |
| FIL candidate filing / ballot fees                      | PHO phone banks                               | TRC candidate travel, lodging and meals                       |
| FND fundraising expenses                                | POL polling and survey research               | TRS staff/spouse travel, lodging and meals                    |
| IND independent expenditures supporting/opposing others | 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	CODE or	DESCRIPTION OF PAYMENT	AMOUNTPAID
Anedot PO Box 84314 Baton Rouge, LA 70884		Merchant fee	4.30
Anedot PO Box 84314 Baton Rouge, LA 70884		Merchant fee	47.80
Anedot PO Box 84314 Baton Rouge, LA 70884		Merchant fee	13.50
Anedot PO Box 84314 Baton Rouge, LA 70884		Merchant fee	1.30
Anedot PO Box 84314 Baton Rouge, LA 70884		Merchant fees	32.40

**SUBTOTAL \$** 99.30

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2018	
through	06/30/2018	Page 12 of 16
NAME OF FILER Carla Thornton for City Council 2018		I.D. NUMBER 1400113

**CODES:** If one of the following 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 production costs                            |
| FIL candidate filing / ballot fees                      | PHO phone banks                               | TRC candidate travel, lodging and meals                       |
| FND fundraising expenses                                | POL polling and survey research               | TRS staff/spouse travel, lodging and meals                    |
| IND independent expenditures supporting/opposing others | 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	CODE or	DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot PO Box 84314 Baton Rouge, LA 70884		Merchant fees	6.90
Anedot PO Box 84314 Baton Rouge, LA 70884		Merchant fees	5.80
Greater Riverside Chambers of Commerce 3256 3985 University Ave Riverside, CA 92501	MTG		179.00
Greater Riverside Chambers of Commerce 3256 3985 University Ave Riverside, CA 92501	MTG		30.00
Teaman Ramirez & Smith Inc. 4201 Brockton Ave Ste 100 Riverside, CA 92501	PRO		200.00
<b>SUBTOTAL \$</b>			421.70

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2018	
through	06/30/2018	Page 13 of 16
NAME OF FILER Carla Thornton for City Council 2018		I.D. NUMBER 1400113

**CODES:** If one of the following 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 production costs                            |
| FIL candidate filing / ballot fees                      | PHO phone banks                               | TRC candidate travel, lodging and meals                       |
| FND fundraising expenses                                | POL polling and survey research               | TRS staff/spouse travel, lodging and meals                    |
| IND independent expenditures supporting/opposing others | 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	CODE or	DESCRIPTION OF PAYMENT	AMOUNT PAID
Teaman Ramirez & Smith Inc. 4201 Brockton Ave Ste 100 Riverside, CA 92501	PRO		225.45
Teaman Ramirez & Smith Inc. 4201 Brockton Ave Ste 100 Riverside, CA 92501	PRO		438.40
Teaman Ramirez & Smith Inc. 4201 Brockton Ave Ste 100 Riverside, CA 92501	PRO		275.00
Teaman Ramirez & Smith Inc. 4201 Brockton Ave Ste 100 Riverside, CA 92501	PRO		106.25
Troast and Associates LLC 3649 Mission Inn Ave 2nd Floor Riverside, CA 92501	CNS		400.74

**SUBTOTAL \$ 1,445.84**

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2018	
through	06/30/2018	Page 14 of 16
NAME OF FILER Carla Thornton for City Council 2018		I.D. NUMBER 1400113

**CODES:** If one of the following 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 production costs                            |
| FIL candidate filing / ballot fees                      | PHO phone banks                               | TRC candidate travel, lodging and meals                       |
| FND fundraising expenses                                | POL polling and survey research               | TRS staff/spouse travel, lodging and meals                    |
| IND independent expenditures supporting/opposing others | 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	CODE or	DESCRIPTION OF PAYMENT	AMOUNT PAID
Troast and Associates LLC 3649 Mission Inn Ave 2nd Floor Riverside, CA 92501	CNS		193.77
Marc Troast 3646 Mission Inn Ave 2nd Floor Riverside, CA 92501	CNS		250.00
Vista Print 275 Wyman St Waltham, MA 02451	LIT		162.47

**SUBTOTAL \$** 606.24

**Schedule I  
Miscellaneous Increases to Cash**

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2018	
through	06/30/2018	Page 15 of 16

NAME OF FILER Carla Thornton for City Council 2018

I.D. NUMBER  
1400113

DATE RECEIVED	NAME AND ADDRESS OF PAYEE	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
01/31/2018	Provident Bank 6570 Magnolia Ave Riverside, CA 92506	Refund of check order	142.25
01/31/2018	Provident Bank 6570 Magnolia Ave Riverside, CA 92506	Interest	0.31
03/23/2018	Provident Bank 6570 Magnolia Ave Riverside, CA 92506	Interest	0.25
04/12/2018	Provident Bank 6570 Magnolia Ave Riverside, CA 92506	Interest	0.41
06/21/2018	Provident Bank 6570 Magnolia Ave Riverside, CA 92506	Interest	0.74

**SUBTOTAL \$ 143.96**

**Schedule I Summary**

1. Itemized increases to cash this period . . . . .	\$ 145.23
2. Unitemized payments made this period of under \$100 . . . . .	\$ 0.00
3. Total interest received this period on loans made to others. (Schedule H, Column (e).) . . . . .	\$ 0.00
4. Total miscellaneous increases to cash this period. Total to Summary Page, Line 14 . . . . .	<b>TOTAL \$ 145.23</b>

**Schedule I ( Continued )  
Miscellaneous Increases to Cash**

Statement covers period  
from 01/01/2018  
through 06/30/2018

**CALIFORNIA FORM 460**  
Page 16 of 16

NAME OF FILER Carla Thornton for City Council 2018

I.D. NUMBER  
1400113

DATE RECEIVED	NAME AND ADDRESS OF PAYEE	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
06/21/2018	Provident Bank 6570 Magnolia Ave Riverside, CA 92506	Interest	0.56
06/30/2018	Provident Bank 6570 Magnolia Ave Riverside, CA 92506	Interest	0.71

**SUBTOTAL \$** 1.27



SEAL FIRMLY TO SEAL

PRESS FIRMLY TO SEAL

PRIORITY MAIL  
FLAT RATE  
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US POSTAGE  
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- \* Domestic only

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City Clerk  
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Moreno Valley, CA 92552

UNITED STATES  
POSTAL SERVICE

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