

**Recipient Committee  
Campaign Statement  
Cover Page**

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COVER PAGE

CALIFORNIA  
FORM **460**

Page 1 of 10

For Official Use Only

<b>Statement covers period</b>	<b>Date of Election if applicable</b>
from 07/01/2018	11/06/2018
through 09/22/2018	(Month, Day, Year)

**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 STATE ZIP CODE AREA CODE/PHONE  
Riverside CA 92501

MAILING ADDRESS (IF DIFFERENT)

CITY STATE ZIP CODE

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER  
Richard Teaman

STREET ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE  
Riverside CA 92501

NAME OF ASSISTANT TREASURER, IF ANY  
Javier Carrillo

STREET ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE  
Riverside CA 92501

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 9/27/18 By \_\_\_\_\_  
 Executed on 9/27/18 By \_\_\_\_\_  
 Executed on \_\_\_\_\_ By \_\_\_\_\_  
 Executed on \_\_\_\_\_ By \_\_\_\_\_

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

**Statement covers period**  
**from** 07/01/2018  
**through** 09/22/2018

**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 from 07/01/2018 through 09/22/2018
CALIFORNIA FORM 460
Page 3 of 10

NAME OF FILER Carla Thornton for City Council 2018

I.D. NUMBER 1400113

Table with 3 columns: Description, Column A (TOTAL THIS PERIOD), Column B (CALENDAR YEAR TOTAL TO DATE). Rows include Contributions Received (Monetary, Loans, Nonmonetary) and TOTAL CONTRIBUTIONS RECEIVED.

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

Summary table for candidates with columns for 1/1 through 6/30 and 7/1 to Date. Rows for Contributions Received and Expenditures Made.

Table with 3 columns: Description, Column A, Column B. Rows include Expenditures Made (Payments, Loans, Accrued Expenses, Nonmonetary Adjustment) and TOTAL EXPENDITURES MADE.

Expenditure Limit Summary for State Candidates

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

Table for Expenditure Limit Summary with two rows for cumulative expenditures, each with a dollar sign and a blank line for the amount.

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

Table with 3 columns: Description, Column A, Column B. Rows include Current Cash Statement (Beginning Balance, Receipts, Payments, Ending Balance) and LOAN GUARANTEES RECEIVED.

Table with 3 columns: Description, Column A, Column B. Rows include Cash Equivalents and Outstanding Debts.

**Schedule A  
Monetary Contributions Received**

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2018	
through	09/22/2018	Page 4 of 10

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)
08/27/2018	Nancy Abeyta [REDACTED] Moreno Valley, CA 92555	IND	Retired  N/A	100.00	100.00	
08/27/2018	Sam Alhadeff [REDACTED] Temecula, CA 92590	IND	Attorney  Lewis Brisbois Bisgaard & Smith LLP	150.00	150.00	
08/10/2018	Angel Lopez [REDACTED] Moreno Valley, CA 92557	IND	Social Security Administration  US Government	100.00	100.00	
07/31/2018	Malissa McKeith [REDACTED] Riverside, CA 92506	IND	CEO  Environmental Infrastructure Consultan	200.00	200.00	

**SUBTOTAL \$** 550.00

**Schedule A Summary**

1. Amount received this period - itemized contributions (Includes all Schedule A subtotals ) .....	\$	1,150.00
2. Amount received this period - unitemized .....	\$	70.00
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>	<u>1,220.00</u>

\*\* 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 07/01/2018
through 09/22/2018

CALIFORNIA FORM 460
Page 5 of 10

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. Rows include Marci Reiss and Jan Zuppardo.

SUBTOTAL \$ 600.00

\*\* 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	07/01/2018	
through	09/22/2018	Page 6 of 10
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
COGS South Signs  3309 S Main St Santa Ana, CA 92707	CMP	976.50
COGS South Signs  3309 S Main St Santa Ana, CA 92707	CMP	976.50
Home Depot  2455 Paces Ferry Rd Atlanta, GA 30339	CMP	114.62
<b>SUBTOTAL \$</b>		<b>2,067.62</b>

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 5,045.14
2. Unitemized payments made this period of under \$100	\$ 47.83
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 \$ 5,092.97</b>

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2018	
through	09/22/2018	Page 7 of 10

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		331.25
Teaman Ramirez & Smith Inc. 4201 Brockton Ave Ste 100 Riverside, CA 92501	PRO		257.72
Teaman Ramirez & Smith Inc. 4201 Brockton Ave Ste 100 Riverside, CA 92501	PRO		237.50
Carla Thornton 24511 Skyland Dr Moreno Valley, CA 92557		Reimbursement for filing fee	575.00
Vista Print 275 Wyman St Waltham, MA 02451	LIT		151.05

**SUBTOTAL \$** 1,552.52

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2018	
through	09/22/2018	Page 8 of 10

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
Word Mill  5055 Canyon Crest Dr Riverside, CA 92507	WEB		1,425.00

**SUBTOTAL \$** 1,425.00



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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2018	
through	09/22/2018	Page 9 of 10

NAME OF FILER Carla Thornton for City Council 2018

I.D. NUMBER  
1400113

NAME OF AGENT OR INDEPENDENT CONTRACTOR  
Carla Thornton

**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)            |

\* Payments that re contributions or independent expenditures are also summarized on Schedule D

NAME AND ADDRESS OF PAYEE OR CREDITOR	CODE OR	DESCRIPTON OF PAYMENT	AMOUNT PAID
City of Moreno Valley 14177 Frederick St Moreno Valley, CA 92552	FIL		575.00

**TOTAL \$** 575.00

**Schedule I  
Miscellaneous Increases to Cash**

Statement covers period  
from 07/01/2018  
through 09/22/2018

**CALIFORNIA  
FORM 460**

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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

**SUBTOTAL \$**

**Schedule I Summary**

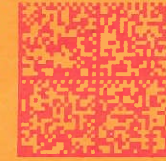
1. Itemized increases to cash this period . . . . .	\$ 0.00
2. Unitemized payments made this period of under \$100 . . . . .	\$ 0.92
3. Total interest received this period on loans made to others. (Schedule H, Column (e).) . . . . .	\$ 0.00
4. Total miscellaneous increases to cash this period. Total to Summary Page, Line 14 . . . . .	<b>TOTAL \$ 0.92</b>



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**TEAMAN, RAMIREZ & SMITH, INC.**  
4201 BROCKTON AVENUE, SUITE 100  
RIVERSIDE, CA 92501-3431

City Clerk  
14177 Frederick St  
Moreno Valley, Ca 92552

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