Recipient Committee Campaign Statement Cover Page			ink.	MORENO V RECEIV			cover page california 460 form	
(Government Code Sections 84200-842 SEE INSTRUCTIONS ON REVERSE	16.5)	fromJan	covers period uary 1, 2016 ne 30, 2016	Date of election if appl (Month, Day, Year		AM 9: (06 Pag	pe 1 of 4 For Official Use Only
1. Type of Recipient Committe Officeholder, Candidate Controlle State Candidate Election Com Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Commi	ed Committee nmittee	Complete Parts 1, 2, 3, Primarily Formed Ba Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Ca Officeholder Commi (Also Complete Part 7)	llot Measure	2. Type of Statem Preelection Statem Semi-annual S Termination Statem (Also file a Forth Amendment (B	atement tatement atement m 410 Termination)		Supplemen	tatement d-Year Report tal Preelection - Attach Form 495
3. Committee Information COMMITTEE NAME (OR CANDIDATE'S Residents for a Livable More		I.D. NUMBER		Treasurer(s) NAME OF TREASURER Tom Thornsley MAILING ADDRESS CITY Moreno Valley	3	STATE CA	ZIP CODE 92555	AREA CODE/PHONE
Moreno Valley Mailing address (if different) N	CA 92	555	CODE/PHONE	NAME OF ASSISTANT MAILING ADDRESS	TREASURER, IF ANY			
Moreno Valley OPTIONAL: FAX / E-MAIL ADDRESS		CODE AREA	CODE/PHONE	OPTIONAL: FAX / E-M	IAIL ADDRESS	STATE	ZIP CODE	AREA CODE/PHONE
4. Verification I have used all reasonable diligence under penalty of perjury under the law Executed on Executed on Executed on Executed on Executed on	n preparing and reviews of the State of Calif	wing this statement and ornia that the foregoing	By	Signature of Controlling Officeholder,	or Assistant Treasurer Measure Proponent or Resp	onsible Officer o		rue and complete. I certify
Executed on	do		Ву	Signature of Controlling Officeholder,	Candidate, State Measure P	roponent		EPPC Form 480 (January/05)

FPPC Form 460 (January/05) FPPC Toli-Free Helpline: 886/ASK-FPPC (866/275-3772) State of California

Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Residents for a Livable Moreno Valley Calendar Year Summary for Candidates Column B Column A Running in Both the State Primary and TOTAL THIS PERIOD CALENDAR YEAR **Contributions Received** TOTAL TO DATE (FROM ATTACHED SCHEDULES) **General Elections** 1. Monetary Contributions Schedule A, Line 3 \$ 7/1 to Date 1/1 through 6/30 0 n 2. Loans Received Schedule B, Line 3 20. Contributions 0 N/A s____ N/A 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ Received 0 4. Nonmonetary Contributions Schedule C, Line 3 21. Expenditures N/A \$____ N/A Made 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 \$ **Expenditure Limit Summary for State Expenditures Made** 160 **Candidates** 6. Payments Made Schedule E, Line 4 \$ _____ 7. Loans Made Schedule H, Line 3 22. Cumulative Expenditures Made* 160 160 (If Subject to Voluntary Expenditure Limit) 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ Total to Date 9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3 Date of Election (mm/dd/yy) 10. Nonmonetary Adjustment Schedule C, Line 3 160 N/A 160 N/A **Current Cash Statement** 2239 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ To calculate Column B, add amounts in Column A to the 13. Cash Receipts Column A, Line 3 above corresponding amounts *Amounts in this section may be different from amounts from Column B of your last 14. Miscellaneous Increases to Cash Schedule I, Line 4 reported in Column B. report. Some amounts in 160 15. Cash Payments Column A, Line 8 above Column A may be negative 2081 figures that should be 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ subtracted from previous period amounts. If this is If this is a termination statement, Line 16 must be zero. the first report being filed for this calendar year, only n/a 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ ___ carry over the amounts from Lines 2, 7, and 9 (if **Cash Equivalents and Outstanding Debts** any). 18. Cash Equivalents See instructions on reverse \$ _____ FPPC Form 460 (January/05) 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ _ FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule E **Payments Made**

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

Statement covers period fromJanuary 1, 2016	CALIFORNIA 460			
through June 30, 2016	Page3 of4			
	I.D. NUMBER			

SCHEDULEE

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Residents for a Livable Moreno Valley CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs MBR member communications campaign paraphernalia/misc. returned contributions MTG meetings and appearances CNS campaign consultants SAL campaign workers' salaries OFC office expenses contribution (explain nonmonetary)* TEL t.v. or cable airtime and production costs petition circulating PET CVC civic donations TRC candidate travel, lodging, and meals phone banks candidate filing/ballot fees FIL staff/spouse travel, lodging, and meals polling and survey research FND fundraising events transfer between committees of the same candidate/sponsor postage, delivery and messenger services independent expenditure supporting/opposing others (explain)* ND VOT voter registration professional services (legal, accounting) legal defense WEB information technology costs (internet, e-mail) PRT print ads campaign literature and mailings NAME AND ADDRESS OF PAYEE **AMOUNT PAID DESCRIPTION OF PAYMENT** CODE OR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) PO Box fee USPS, Moreno Valley, CA 92555-6907 110 POS Filling fee for our local campaign committee CA 95814 Secretary of State, ' 50 **PRO** * Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL\$ 160 **Schedule E Summary** 160 0 2. Unitemized payments made this period of under \$100\$ ____ 0 160

Schedule i			4.
Miscellaneous	Increases	to	Cash

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

Statement covers period January 1, 2016

california 460

SCHEDULE

		trom	
		through June 30, 2016	Page 4 of 4
SEE INSTRUCTION	S ON REVERSE		I.D. NUMBER
	r a Livable Moreno Valley		
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
RECEIVED			
	N/A		
	in the land agriculture about	SUBTOTAL	\$
Attach add	itional information on appropriately labeled continuation sheets.		
Schedule !	Summary		
1. Itemized in	ncreases to cash this period	\$\$	5
2. Unitemize	ed increases to cash of under \$100 this period	\$	
3. Total of all	I interest received this period on loans made to others. (Schedule H, C	Column (e).)\$\$	
4. Total mice	collegeous increases to cash this period. (Add Lines 1, 2, and 3. Enter	er here and on the	5
Summary	Page, Line 14.)	IUIAL 7	EDDC Form 460 (lanuary/05