

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

Date Stamp <b>RECEIVED</b> <b>OCT 06 2008</b>	<b>CALIFORNIA FORM 460</b>
	Page <u>1</u> of <u>9</u>
	For Official Use Only

Statement covers period  
from 01/01/08  
through 09/30/08

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

11/04/08 CITY OF RANCHO CUCAMONGA

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  
1305984

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

COMMITTEE TO Elect Janice Reynolds

STREET ADDRESS (NO P.O. BOX)

5783 KLUZMAN AVE.

CITY STATE ZIP CODE AREA CODE/PHONE

Rancho Cucamonga, CA 91737 (909) 989-9334

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

CITY STATE ZIP CODE AREA CODE/PHONE

bruceandjanice@MSN.COM

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER

LYNDA L. THOMPSON

MAILING ADDRESS

14045 San Dimas Lane Rancho Cucamonga, CA 91737

CITY STATE ZIP CODE AREA CODE/PHONE

Rancho Cucamonga, CA 91737 (909) 899-6740

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 10/6/08  
Date

Executed on 10/6/08  
Date

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

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

By [Signature]  
Signature of Treasurer or Assistant Treasurer

By [Signature]  
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

**Instructions for  
Recipient Committee  
Campaign Statement – Cover Page**

**CALIFORNIA  
FORM 460**

**Period Covered by a Statement:**

The "period covered" by a campaign statement begins the day after the closing date of the last campaign statement you filed. For example, if the closing date of the last statement was September 30, the beginning date of the next statement will be October 1.

If this is the committee's first campaign statement, begin with January 1 of the current calendar year.

The closing date of the statement depends on the type of statement you are filing.

**Date of Election:**

If you are filing this statement as a preelection statement in connection with an election, enter the date of the election.

**Type of Recipient Committee:**

Check one box to indicate the type of committee filing the statement. General descriptions are provided on the cover sheet to this form, or contact your filing officer or the FPPC for assistance. Following are some additional guidelines:

**Controlled Committee**

- A controlled committee is one that is controlled by a candidate, officeholder or, in the case of a state ballot measure committee, by the proponent of the measure. A committee is "controlled" if the candidate, officeholder, or proponent, his or her agent, or any other committee he or she controls, has a significant influence on the actions or decisions of the committee.

**Sponsored Committees**

- A sponsored committee is one that has a sponsor—a business entity, organization, union, or other entity—that meets certain criteria. Sponsored ballot measure committees and general purpose committees must include the name of the sponsor in the name of the committee.

**Small Contributor Committees**

- This term is significant only if the committee makes contributions to candidates running for elective state office.

**Type of Statement:**

Check the appropriate box(es) to indicate the type of statement you are filing (or amending).

**Amendments:** If you are filing an amendment to a previously filed statement, give a brief explanation of the amendment and list the schedules being amended. Include an amended summary page, if applicable. Be sure to enter the period covered of the statement you are amending.

**Termination:** A committee must continue filing campaign statements each year until it is eligible to terminate and files a Form 410 Termination. Most officeholders must continue filing campaign statements until they have terminated all controlled committees and have left office.

**Committee I.D. Number:**

If the committee has not yet received an identification number from the Secretary of State,

enter "Not Yet Received." File Form 410 to obtain an I.D. Number.

**Verification:**

The statement must be signed by the committee treasurer or the assistant treasurer named on the committee's Statement of Organization (Form 410). An officeholder, candidate, or state measure proponent who controls the committee must also sign the statement. If two or three officeholders, candidates, or proponents control the committee, each must sign the statement. If more than three control the committee, one may sign on behalf of the others.

Under certain circumstances, the responsible officer of a sponsoring organization must sign the statement.

**Additional Important Information:**

Refer to the FPPC Campaign Disclosure Manual for your type of committee for information about:

- When, where, and what type of statements the committee is required to file.
- Closing date of campaign statements.
- Sponsored committee criteria.
- Termination criteria.
- Recordkeeping requirements and prohibitions.

**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

Janice C. Reynolds

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

Rancho Cucamonga City Clerk

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

5783 Klusman Ave Rancho Cucamonga, CA 91737

**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*

**Instructions for  
Recipient Committee  
Campaign Statement – Cover Page**

CALIFORNIA  
FORM **460**

**Officeholder or Candidate Controlled  
Committee:**

Candidates must have a separate bank account and committee to run for different elective offices. A candidate who is required to file campaign statements in connection with more than one elective office but is only receiving contributions and making expenditures for one of the offices, may include both offices on one Form 460. In Part 5 of the cover page, enter the candidate's name and under "Office Sought or Held," identify each office, and state whether the candidate is seeking or holding the office. The Form 460 must be filed with the appropriate filing officer(s) for each office.

For example, a city councilmember is raising funds to run for the county board of supervisors. She has no committee and is not raising or spending funds in connection with the city office, and has formed a controlled committee for the county office. To comply with the requirements to file campaign statements for both her city office and her county candidacy, she may complete one Form 460 each campaign reporting period, which she will file with the city clerk and the county elections department. In Part 5 of the Form 460 Cover Page, under "Office Sought or Held," she will state that she is holding the office of city councilmember (including the name of the city) and that she is seeking a seat on the board of supervisors (including the name of the county).

**Ballot Measure Committee:**

Part 6 of the Form 460 Cover Page must be completed by committees that are primarily formed to support or oppose the qualification or passage of a single ballot measure or two or more measures being voted on in the same city, county, multicounty, or state election. A "general purpose" ballot measure committee (one that supports or opposes a variety of state and/or local ballot measures) is not required to complete Part 6.

**Campaign Disclosure Statement  
Summary Page**

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

SUMMARY PAGE

Statement covers period from <u>01-01-08</u> through <u>09-30-08</u>	<b>CALIFORNIA FORM 460</b>
Page <u>3</u> of <u>9</u>	I.D. NUMBER <u>1305984</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

JANICE Reynolds

**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>4,856</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>4,856</u>	\$ <u>-0-</u>
4. Nonmonetary Contributions ..... Schedule C, Line 3	<u>1,393</u>	
5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 + 4	\$ <u>6,249</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 TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made ..... Schedule E, Line 4	\$ <u>3,093</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>3,093</u>	\$ <u>-0-</u>
9. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3	<u>\$ 1,651</u>	<u>\$ 1,651</u>
10. Nonmonetary Adjustment ..... Schedule C, Line 3	<u>-0-</u>	
11. TOTAL EXPENDITURES MADE ..... Add Lines 8 + 9 + 10	\$ <u>4,744</u>	\$ <u>1,651</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>  </u>

**Current Cash Statement**

12. Beginning Cash Balance ..... Previous Summary Page, Line 16	\$ <u>-0-</u>
13. Cash Receipts ..... Column A, Line 3 above	<u>4,856</u>
14. Miscellaneous Increases to Cash ..... Schedule I, Line 4	<u>-0-</u>
15. Cash Payments ..... Column A, Line 8 above	<u>3,093</u>
16. ENDING CASH BALANCE ..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>1,763</u>

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

17. LOAN GUARANTEES RECEIVED ..... Schedule B, Part 2	\$ <u>-0-</u>
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**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents ..... See instructions on reverse	\$ <u>  </u>
19. Outstanding Debts ..... Add Line 2 + Line 9 in Column B above	\$ <u>1,651</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.

# Instructions for Summary Page Campaign Disclosure Statement

CALIFORNIA  
FORM **460**

The Summary Page provides an overview of the committee's financial activities and is completed for each filing.

**Column A** reflects activities during the current reporting period as reported on Schedules A through H. It is not necessary to attach a blank schedule if there has been no reportable activity during the period, but it is necessary to enter a zero or the word "none" on the appropriate line in Column A of the Summary Page.

**Column B** figures should reflect the cumulative total since January 1 of the current calendar year.\* Add the totals from Column B of the committee's last campaign statement (if any) to the corresponding amounts in Column A. If this is the first report being filed for a calendar year, only carry forward the amounts reported on Lines 2, 7, and 9 of Column B (if any) from the committee's last statement. (Note: The amounts reported on Lines 2, 7, and 9 of Column B should be the same as the total outstanding amounts disclosed in column (d) of Schedules B, F, and H, respectively, of the current report.)

When loans (Schedules B and H) and accrued expenses (Schedule F) are paid, the figures to be carried from the schedules to Lines 2, 7, and 9 of Column A may be negative numbers. In this case, be sure to show them as negative figures on the Summary Page (e.g., with a minus sign (-) or in parentheses), and subtract them when totaling Columns A and B.

\*There are exceptions to the calendar year "cumulation period" for candidate elections and ballot measure elections held in January and early February, and for ballot measure qualification activities. Consult the FPPC [Campaign Disclosure](#)

[Manual](#) for your type of committee for additional information.

## Current Cash Statement:

Lines 12-16 of the Summary Page should accurately reflect your current cash position. Beginning and ending cash balances should include the total amount of funds in your campaign checking and savings accounts, plus any investments that can be readily converted to cash, such as certificates of deposit, money market accounts, stocks and bonds, etc. (Officeholders and candidates are subject to bank account restrictions, and all committees should read the [FPPC Campaign Disclosure Manual](#) regarding appropriate uses of campaign funds.)

Line 12 (Beginning Cash Balance) must be the same as the ending cash balance reported on Line 16 of your previous statement's Summary Page. If this is your first campaign statement, enter zero on Line 12.

Line 16 (Ending Cash Balance) is the total of Lines 12, 13, and 14, minus Line 15.

**If you are filing a termination statement, Line 16 must be zero.**

## Cash Equivalents:

"Cash equivalents" include investments that cannot be readily converted to cash, as well as the balance due on all outstanding loans the committee has made to others (from Line 7 of Column B of the Summary Page). Investments that can be readily converted to cash, such as certificates of deposit or money market funds, should be included in the cash on hand figures on Lines 12 and 16 of the Summary Page.

## Summary for Primary and General Elections (Lines 20 and 21):

This section is only for committees that are:

- Controlled by a candidate who is being voted on in both the state primary and general elections (does not apply to controlled ballot measure committees); or
- Primarily formed to support or oppose candidates being voted on in both the state primary and general elections.

Complete this summary on the preelection and semi-annual statements for the general election, covering periods during the last six months of the year (July 1-December 31).

## Expenditure Ceiling Summary for State Candidates (Line 22):

Candidates for elective state office who have accepted the voluntary expenditure ceiling for a particular election must disclose the total amount of expenditures made through the end of the reporting period that are subject to the expenditure ceiling for the election. Report the date of the election and total amount expended for that election. Report totals for the primary and general elections separately. This information is no longer required if the expenditure ceiling has been lifted. (See [FPPC Campaign Disclosure Manual 1.](#))

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>01-01-08</u> through <u>9-30-08</u>	<b>CALIFORNIA FORM 460</b>
Page <u>4</u> of <u>9</u>	I.D. NUMBER <u>1305984</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

JANICE Reynolds

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)
9-20-08	DENNIS STOUT 8104 Gardenia Ave Rancho Cucamonga, CA 91701	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100		
9-20-08	Rathindra Nath Bose 3028 Vermillion St. West Covina, CA 91762	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$250		
9-18-08	Carole Seulke 7302 W. Ocean Front Newport Beach, CA 92663	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Escrow Off. West Coast Escrow	\$100		
9-30-08	Cathy Morris 6291 Marble Ave. Rancho Cucamonga, CA 91701	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Planning Spec. City of Rancho Cucamonga	\$100		
9-30-08	RGS 8800 Onyx Ave, Ste D. Rancho Cucamonga, CA 91730	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$500		

SUBTOTAL \$ 1050

**Schedule A Summary**

- Amount received this period – itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 2,550
- Amount received this period – unitemized monetary contributions of less than \$100 ..... \$ 2,306
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL \$ 4,856

\*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

**Instructions for  
Schedule A  
Monetary Contributions Received**

Report monetary contributions (except loans) received during the reporting period on Schedule A. Also report on Schedule A if a contributor forgives a loan for you or a third party pays a loan for you. Loans received during the period are reported on Schedule B. Certain transfers between a state candidate's controlled committees are also disclosed on Schedule A. (See FPPC [Campaign Disclosure Manual 1.](#))

If a total of \$100 or more is received from a single contributor during a calendar year, report the name, street address, city, state and zip code of the contributor, the amount contributed this period, and the cumulative amount received from the contributor since January 1 of the current calendar year.\* Include monetary and nonmonetary contributions and loans when reporting the cumulative amount.

Contributions totaling less than \$100 received from a single contributor during a calendar year are reported as a lump sum on Line 2 of the Schedule A Summary.

\*There are exceptions to the calendar year "cumulation period" for candidate elections and ballot measure elections held in January and early February, and for ballot measure qualification activities. (See the FPPC [Campaign Disclosure Manuals](#) for candidates and ballot measure committees.)

**Date Received:**

A monetary contribution has been received when the candidate or committee, or an agent of the candidate or committee, receives or obtains control of the check or other negotiable instrument. There are special rules for reporting the date contributions are received by a committee that collects

contributions through employee payroll deductions or membership dues.

**Contributor Codes:**

For each itemized contributor, check the applicable contributor code:

IND—contributions from any individual's personal funds.

COM—contributions from other committees that receive contributions. These committees will have an identification number assigned by the Secretary of State. Examples: political action committees, other candidates' committees. (State committees should use PTY or SCC when appropriate.)

OTH—business entities and other contributors.

PTY—contributions from political parties (including state and county central committees).

SCC—contributions from small contributor committees (applicable only to state candidates and committees).

**Contributions from Individuals:**

When itemizing a contribution from an individual, also disclose the contributor's occupation and the name of his or her employer. If the contributor is self-employed, provide the name of his or her business. If the contributor is not employed, enter "none."

It is not necessary to enter occupation and employer information for other types of contributors (such as business entities).

**Missing Contributor Information:** A contribution of \$100 or more must be returned to the contributor within 60 days if the recipient does not obtain the contributor's address, occupation and employer.

**Contributions from Committees:**

When itemizing a contribution from another recipient committee, disclose the identification number assigned to that committee by the Secretary of State in addition to its name and address. If no ID number has been assigned, provide the name and address of that committee's treasurer.

**Intermediaries:**

If you receive a contribution through an intermediary (i.e., you have received a contribution check from a person other than the true source of the funds), disclose all of the required information for both the intermediary and the actual contributor.

**Per Election to Date:**

Candidates subject to state contribution limits (or if required by local ordinance) must disclose the cumulative amount received from each contributor during the limitation cycle in addition to the calendar year cumulative amount. (Candidates for elective state office should refer to FPPC [Campaign Disclosure Manual 1.](#))

**Additional Important Information:**

Refer to the FPPC [Campaign Disclosure Manual](#) for your type of committee for important information about aggregating monetary and nonmonetary contributions, recordkeeping, prohibitions on cash contributions, returning contributions, and more.

**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>01-01-08</u> through <u>09-30-08</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>5</u> of <u>9</u>

NAME OF FILER <u>JANICE Reynolds</u>	I.D. NUMBER <u>1305984</u>
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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 THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9-26-08	Hae Park P.O. Box 780 Bloomington, CA 92316	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Bel-Air Swap Meet	\$500		
8-28-08	Cole Burr 35560 De Portola Rd. Temecula, CA 92592	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Burrtec Waste	\$250		
8-28-08	Tracy Burr 35560 De Portola Rd. Temecula, CA 92592	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Burrtec Waste	\$250		
9-09-08	MDS Consulting 17320 Redhill Ave. Ste 350 Irvine, CA 92614	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$250		
9-18-08	Rancho Cucamonga Prof. Fine Fighters Assoc. P.O. Box 8491 Rancho Cucamonga, CA 91701	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$250		
<b>SUBTOTAL \$</b>				<b>1500</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



**Schedule C  
Nonmonetary Contributions Received**

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

SCHEDULE C

Statement covers period from <u>01-01-08</u> through <u>09-30-08</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>6</u> of <u>9</u>
I.D. NUMBER <u>130S984</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

JANICE Reynolds

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)
9-30-08	Friends of Diane Williams 7251 Amethyst Ave Rancho Cucamonga, CA FD # 902332	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Fund Raiser	\$1,393	\$1,393	
		<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 \$ 1,393

**Schedule C Summary**

- Amount received this period – itemized nonmonetary contributions.  
(Include all Schedule C subtotals.) ..... \$ 1,393
- Amount received this period – unitemized nonmonetary contributions of less than \$100 ..... \$ -0-
- Total nonmonetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) ..... **TOTAL \$ 1,393**

\*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

**Instructions for  
Schedule C  
Nonmonetary Contributions Received**

CALIFORNIA  
FORM **460**

Report the receipt of nonmonetary contributions on Schedule C.

Nonmonetary contributions include:

- Goods and services for which you have not paid the fair market value, including items donated for auctions or garage sales, such as artwork or furniture.
- A discount that is not available to the public generally.
- Salary payments made by an employer for an employee who spends 10% or more of his or her compensated time in a calendar month working for your committee.

Volunteer personal services and payments voluntarily made by a person for his or her own campaign-related travel expenses are not reportable. The occupant of a home or office can host a fundraiser without making a nonmonetary contribution as long as the total cost of the fundraiser is \$500 or less.

If a total of \$100 or more is received from a single contributor during a calendar year, report the name, street address, city, state and zip code of the contributor, the amount contributed this period, and the cumulative amount received from the contributor since January 1 of the current calendar year. Include monetary and nonmonetary contributions and loans when reporting the cumulative amount.

Contributions totaling less than \$100 received from a single contributor during a calendar year are reported as a lump sum on Line 2 of the Schedule C Summary.

**Date Received:**

A nonmonetary contribution has been received on the earlier of the following: 1) the date the contributor made an expenditure for goods or services at your behest (in consultation or coordination with you, or at your request or suggestion); or 2) the date you or your agent obtained possession or control of the goods or services.

**Per Election to Date:**

Candidates subject to state contribution limits (or if required by local ordinance) must disclose the cumulative amount received from each contributor during the limitation cycle in addition to the calendar year cumulative amount. (Candidates for elective state office should refer to FPPC [Campaign Disclosure Manual 1.](#))

**Fair Market Value:**

The fair market value of a nonmonetary contribution is the amount it would cost to purchase the goods or services on the open market. The fair market value can be more than the amount it cost the contributor to provide the goods or services to you.

If you do not know the value of a nonmonetary contribution, you may request the contributor to provide you with a written statement of the value. If you make a request in writing and the value of the contribution is \$100 or more, the contributor is required by law to provide the information.

**Administrative Services:**

Administrative overhead and start-up expenses paid by a sponsoring organization for its sponsored committee are not contributions to the committee but must be reported on Schedule C. Report the value of the services in the "Description of Goods or Services" column and a zero in the "Amount" and "Cumulative to Date" columns.

**Nonmonetary Contributions as Expenditures:**

The total of nonmonetary contributions is reported on the Summary Page as both contributions received and expenditures made. Enter the total on Line 3 of the Schedule C Summary on both Lines 4 and 10 of the Summary Page. (State Candidates: Most nonmonetary contributions also count for purposes of the voluntary expenditure limits.)

**Additional Important Information:**

Refer to the Instructions for Schedule A for important information about:

- Contributor Codes
- Contributions from Individuals
- Contributions from Committees
- Intermediaries

Refer to the FPPC [Campaign Disclosure Manual](#) for your type of committee for important information about aggregating monetary and nonmonetary contributions, recordkeeping, and more.

**Schedule E  
Payments Made**

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

SCHEDULE E

Statement covers period from <u>01-01-08</u> through <u>09-30-08</u>	<b>CALIFORNIA FORM 460</b>
Page <u>7</u> of <u>9</u>	I.D. NUMBER <u>1305984</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

JANICE Reynolds

**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
us Printing 7974 Haven Ave., Ste 120 Rancho Cucamonga, CA 91730	LIT		\$964
Eighty Ave. Graphics 10326 ALTA LOMA DR. Rancho Cucamonga, CA 91701	LIT		\$200
AAA Financial Services Visa P.O. Box 15019 Wilmington, DE 19886	OFC/ LIT		\$100

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

SUBTOTAL \$ 1269

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ <u>2,699</u>
2. Unitemized payments made this period of under \$100	\$ <u>394</u>
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ <u>- 0 -</u>
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$ <u>3,093</u>

**Instructions for  
Schedule E  
Payments Made**

Report payments on Schedule E (other than loans).

For each payment of \$100 or more made during the period, report the name and street address, city, state, and zip code of the payee or creditor, and the amount paid during the period. Payments of less than \$100 during the period are reported as a lump sum on Line 2 of the Schedule E Summary.

However, if two or more payments under \$100 were made for a single product or service and the total paid during the period was \$100 or more, itemize the total amount paid during the period.

**Report on Schedule E payments made on expenses that were reported on a previous statement as accrued expenses. Also report the required information on Schedule F.**

**Code or Description of Payment:**

If one of the codes listed on Schedule E fully describes the payment, enter the code. A full description of each code is provided on the back of the Schedule E-Continuation Sheet. If none of the codes fully explains the payment, leave the "Code" column blank and enter a brief description of the goods or services purchased in the "Description of Payment" column.

**Candidates:**

All payments in connection with your campaign must be made from the campaign bank account. To use personal funds for campaign purposes, you must first deposit the funds in the campaign bank account.

**Credit Card Payments:**

Disclose the name, address, and amount paid to the credit card company during the period. Also disclose the name, address, amount paid, and code or description of payment for each vendor paid \$100 or more. You may disclose the vendor payments on Schedule E or Schedule G.

**Payments by Agents and Independent Contractors:**

When an agent or independent contractor (e.g., campaign worker, advertising agency, campaign management firm) makes payments on your behalf ("subvendor payments"), disclose the name, address, amount paid, and code or description of payment for each vendor paid \$500 or more. Disclose payments to the agent or independent contractor on Schedule E. You may disclose the subvendor payments on Schedule E or Schedule G.

**Ownership Interests or Business Employment:**

A ballot measure committee that makes a payment to any business entity (1) which is owned 50 percent or more by any of the individuals listed below, or (2) in which any of the individuals listed below is an officer, partner, consultant or employee, must report that individual's name, relationship to the committee, and a description of the ownership interest or position with the business entity. Individuals covered by (1) and (2) above include:

- A candidate or person controlling the committee; or

- An officer or employee of the committee; or
- The spouse of any of the above.

**Loans:**

Report interest paid on loans received on Line 3 of the Schedule E Summary (from Schedule B, Part 1, Column (e)).

Do not report payments made on loans received on Schedule E. Report loan repayments on Schedule B.

Do not report loans made to others on Schedule E. Report loans made on Schedule H.

**Savings Accounts/Certificates of Deposit/Money Market Accounts:**

Do not report transfers of campaign funds into savings accounts, certificates of deposit, money market accounts, or the purchase of any other asset that can readily be converted to cash on Schedule E. Continue reporting these amounts as part of your cash on hand on the Summary Page.

**Additional Important Information:**

Refer to the FPPC [Campaign Disclosure Manual](#) for your type of committee for important information about recordkeeping, returning contributions, prohibitions on cash expenditures, permissible uses of campaign funds, and more.

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

SCHEDULE E (CONT.)

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

Statement covers period  
from 01-01-08  
through 09-30-08

**CALIFORNIA FORM 460**

Page 8 of 9

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Janice Reynolds

I.D. NUMBER

1305984

**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
<u>Subvenders AAA Financial</u> <u>campaign LA</u> <u>17205 S. Broadway ST</u> <u>Gardena, CA 90248</u>	<u>CMP</u>		<u>\$412</u>
<u>US Printing</u> <u>7974 Haven Ave, STE. 120</u> <u>Rancho Cucamonga, CA 91730</u>	<u>LIT</u>		<u>\$1018</u>

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

**SUBTOTAL \$** 1430

**Instructions for  
Schedule E (Continued)  
Payments Made**

**CALIFORNIA  
FORM 460**

**Codes:**

**CMP: Campaign paraphernalia/misc.** Lawn signs, buttons, bumper stickers, T-shirts, potholders, etc. Includes costs of election night event.

**CNS: Campaign consultants.** Fees and commissions paid to professional campaign management or consulting firms.

**CTB: Contributions.** Contributions made to other candidates and committees. Use "CTB" for direct monetary contributions. For nonmonetary (in-kind) contributions, use "CTB" and, if one of the other codes accurately describes the expenditure, you may enter that code also. Otherwise, describe the payment. Also provide the name of the candidate or committee that received the nonmonetary contribution in the "Description of Payment" column.\*

**CVC: Civic donations.** Donations to civic, nonprofit or education organizations; payments for community events.

**FIL: Candidate Filing/Ballot Fees.** Payments to election officials for candidate filing fees and fees charged for publication of a ballot statement.

**FND: Fundraising events.** Expenditures associated with holding a fundraising event, including payments for event space to hotels or halls, payments for food and beverages to restaurants, caterers and other vendors, and payments for speakers, entertainment, and decorations. Includes costs of house parties. (Use "LIT" for costs of invitations, brochures, and solicitations associated with fundraising events.)

**IND: Independent expenditures.** Payments for communications that support/oppose other candidates or measures that are not made in consultation or coordination with the candidates or a ballot measure committee. Use "IND" and, if one of the other codes accurately describes the independent expenditure, you may enter that code

also. Otherwise, describe the payment. Also provide the name of the candidate or ballot measure supported or opposed by the expenditure.\*

**LEG: Legal Defense.** Attorney or other fees paid for legal defense.

**LIT: Campaign literature and mailings.** Preparation, production, and distribution of campaign literature, direct mail pieces, fundraising solicitations, and door hangers. Includes costs of mailing lists, design/graphics, copy and layout, printing and photocopying. Includes payments to be on a slate mailer, and for absentee ballot mailers.

**MBR: Member Communications.** Payments for communications to members, employees, or shareholders of an organization, or their family members, for the purpose of supporting or opposing a candidate or ballot measure.

**MTG: Meetings and appearances.** Costs associated with meetings, press conferences, town halls, constituent meetings, etc.

**OFC: Office expenses.** Expenditures for office rent; utilities (including cellular phone service); purchase or rental of office equipment (computer, fax, photocopier, etc.) and furniture; office supplies, etc.

**PET: Petition circulating.** Includes payments for printing petitions and payments to signature gathering firms for ballot measure qualification drives.

**PHO: Phone banks.** Costs of phone banks.

**POL: Polling and survey research.** Costs of designing and conducting polls, reports on election trends, voter surveys, etc.

**POS: Postage, delivery and messenger services.** Includes U.S. Postal Service, Federal Express, United Parcel Service, and other delivery and courier services.

**PRO: Professional services.** Includes legal, accounting, and bookkeeping services.

**PRT: Print space and production costs.** Includes advertising space in newspapers, magazines and other publications, and billboard ads.

**RAD: Radio airtime and production costs.**

**RFD: Returned contributions.**

**SAL: Campaign workers salaries.** Includes state and federal payroll taxes.

**TEL: Television or cable airtime and video production costs.**

**TRC: Candidate travel.** Payments or reimbursements for travel, lodging, and meals of a candidate.

**TRS: Staff/spouse travel.** Payments or reimbursements for travel, lodging, and meals of a candidate's representative (staff), or member of the candidate's household.

**TSF: Transfers.** Only use this code to report the transfer of funds to another authorized committee of the same candidate or sponsoring organization. Report funds this committee gives to other committees on Schedule E, as contributions ("CTB") to those committees, not as transfers.

**VOT: Voter registration costs.**

**WEB: Information technology costs.** Includes payments for website design, e-mail, internet access, production of website and e-mail advertising.

**\*Payments that are contributions or independent expenditures to support or oppose other candidates, measures, and committees must also be summarized on Schedule D.**

**Schedule F  
Accrued Expenses (Unpaid Bills)**

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

Statement covers period from <u>01-01-08</u> through <u>09-30-08</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>9</u> of <u>9</u>
I.D. NUMBER <u>1305984</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

JANICE Reynolds

**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 CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
<u>AAA Financial Services VISA P.O. Box 15019 Wilmington, DE 19886</u>	<u>LIT/OFC/ CMP</u>	<u>- 0 -</u>	<u>\$1751</u>	<u>\$100</u>	<u>\$1651</u>

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

**SUBTOTALS \$ - 0 - \$1751 \$100 \$1651**

**Schedule F Summary**

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)..... **INCURRED TOTALS \$ 1,751**
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)..... **PAID TOTALS \$ 100**
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... **NET \$ 1,651**  
May be a negative number

**Instructions for  
Schedule F  
Accrued Expenses (Unpaid Bills)**

Report unpaid bills for goods or services on Schedule F.

If the amount owed to a single vendor is \$100 or more at the end of the reporting period, you must disclose the name and street address, city, state, and zip code of the payee or creditor and the amount incurred during the period that is outstanding at the end of the period (Column (b)). Continue reporting the accrued expense on each subsequent campaign statement until it is paid.

You are not required to report on Schedule F regular administrative overhead expenses, such as rent, utilities, phones, or employee salaries if you have not received a bill in the normal course of business or if the due date for the payment is after the closing date of the statement.

If you do not know the exact amount of a debt or obligation, provide an estimate. Once the exact amount is known, amend the estimated amount or note the correct amount on the next campaign statement.

Unpaid bills of less than \$100 at the end of the reporting period are added together and included in the total reported on Line 1 of the Schedule F Summary.

When accrued expenses are paid, the payments are reported on Schedule E. Also report the payment on Schedule F, Column (c).

**Code or Description of Payment:**

If one of the expenditure codes listed on Schedule F fully describes the payment, enter the code. A full description of each code is provided on the back of

the Schedule E Continuation Sheet. If none of the codes fully explains the expenditure, enter a brief description of the goods or services instead.

There are special instructions on the back of the Schedule E Continuation Sheet for coding and describing nonmonetary contributions and independent expenditures to support/oppose other candidates, committees, and ballot measures.

Accrued expenses that are nonmonetary contributions and independent expenditures must also be summarized on Schedule D when incurred.

**Credit Card Payments:**

Disclose the name, address, and amount owed or paid to the credit card company during the period. Also disclose the name, address, amount paid, and code or description of payment for each vendor paid \$100 or more. You may disclose the vendor payments on Schedule F or Schedule G.

**Payments by Agents and Independent Contractors:**

When an agent or independent contractor (e.g., campaign worker, advertising agency, campaign management firm) makes payments on your behalf ("subvendor payments"), disclose the name, address, amount paid, and code or description of payment for each vendor paid \$500 or more. Disclose amounts owed to the agent or independent contractor on Schedule F. You may disclose the subvendor payments on Schedule F or Schedule G.

Note: It is not necessary to reitemize credit card vendors or agent subvendors on Schedule F or G

when payments are made on accrued expenses, or if an accrued expense is itemized on more than one statement.

**Forgiveness or Third Party Payment of an Accrued Expense:**

If a creditor forgives or reduces an outstanding debt, or a third party pays a debt for you, report the transaction as follows:

- In the "Description of Payment" column, state that the debt was forgiven, reduced, or paid by a third party.
- Report the amount forgiven, reduced, or paid by a third party as a negative figure in the "Amount Incurred This Period" column (Column (b)).
- Report a nonmonetary contribution from the creditor or third party on Schedule C.

Do not report the forgiveness, reduction, or third party payment on Schedule E.

Refer to the FPPC [Campaign Disclosure Manual](#) for your type of committee for important information about recordkeeping, cash expenditures, permissible uses of campaign funds, and more