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Government Code Sections 84200-84216.5

Recipient Committee Campaign Statement Cover Page

Date Stamp

RECEIVED CITY OF GARDEN GROVE CITY CLERK'S OFFICE 2012 OCT 25 A 11:01

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

Statement covers period from OCT 1, 2012 through OCT 20, 2012

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. [X] 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 [ ] Officeholder Committee [ ] Political Party/Central Committee

2. Type of Statement: [X] Preelection Statement [ ] Quarterly Statement [ ] Semi-annual Statement [ ] Special Odd-Year Report [ ] Termination Statement [ ] Supplemental Preelection Statement - Attach Form 495 [ ] Amendment (Explain below)

Treasurer(s)

NAME OF TREASURER WILLIAM J DALTON MAILING ADDRESS 9862 CATHERINE AVE CITY GARDEN GROVE STATE CA ZIP CODE 92841 AREA CODE/PHONE 714 539-1592

3. Committee Information I.D. NUMBER 1225968 COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) BILL DALTON FOR MAYOR

STREET ADDRESS (NO P.O. BOX) 9862 CATHERINE AVE CITY GARDEN GROVE STATE CA ZIP CODE 92841 AREA CODE/PHONE 714 539-1592 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX 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 Oct 23, 2012 Date

Executed on Oct 23, 2012 Date

Executed on Date

Executed on Date

Signature of Treasurer or Assistant Treasurer Signature of Controlling Officer/holder, Candidate, State Measure Proponent or Responsible Officer of Sponsor Signature of Controlling Officer/holder, Candidate, State Measure Proponent Signature of Controlling Officer/holder, Candidate, State Measure Proponent

# Campaign Disclosure Statement Summary Page

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Amounts may be rounded  
to whole dollars.

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NAME OF FILER

BILL DALTON FOR MAYOR

I.D. NUMBER

1225968

## Contributions Received

Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
Monetary Contributions ..... Schedule A, Line 3 \$ 0	\$ 0
Loans Received ..... Schedule B, Line 3 0	0
<b>SUBTOTAL CASH CONTRIBUTIONS</b> ..... Add Lines 1 + 2 \$ 0	\$ 0
Nonmonetary Contributions ..... Schedule C, Line 3 0	0
<b>TOTAL CONTRIBUTIONS RECEIVED</b> ..... Add Lines 3 + 4 \$ 0	\$ 0

**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 \$ \_\_\_\_\_

## Expenditures Made

1. Payments Made ..... Schedule E, Line 4 \$ 125.00	\$ 114312.00
Loans Made ..... Schedule H, Line 3 0	0
<b>SUBTOTAL CASH PAYMENTS</b> ..... Add Lines 6 + 7 \$ 125.00	\$ 114312.00
Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3 0	0
0. Nonmonetary Adjustment ..... Schedule C, Line 3 0	0
<b>TOTAL EXPENDITURES MADE</b> ..... Add Lines 8 + 9 + 10 \$ 125.00	\$ 114312.00

**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 \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

## Current Cash Statement

2. Beginning Cash Balance ..... Previous Summary Page, Line 16 \$ 100901.04	
3. Cash Receipts ..... Column A, Line 3 above	
4. Miscellaneous Increases to Cash ..... Schedule I, Line 4	
5. Cash Payments ..... Column A, Line 8 above	125.00
<b>ENDING CASH BALANCE</b> ..... Add Lines 12 + 13 + 14, then subtract Line 15 \$ 100776.04	

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

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).

## Loan Guarantees Received

7. LOAN GUARANTEES RECEIVED ..... Schedule B, Part 2 \$ _____
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## Cash Equivalents and Outstanding Debts

8. Cash Equivalents ..... See instructions on reverse \$ _____
9. Outstanding Debts ..... Add Line 2 + Line 9 in Column B above \$ _____

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Statement covers period  
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through OCT 20, 2012  
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**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

MP	campaign paraphernalia/misc.	IMB	member communications	RAD	radio airtime and production costs
NS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
TB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
VC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
IL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
ND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
ID	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
EG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
IT	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
BARBARA ROBERTSON & ASSOICATES 2990 INLAND EMPIRE BLVD #107 ONTARIO CA 91764	PRO			125.00
<b>Payments that are contributions or independent expenditures must also be summarized on Schedule D.</b>				<b>SUBTOTAL \$</b> 125.00

**Schedule E Summary**

Itemized payments made this period. (Include all Schedule E subtotals.) ..... \$ 125.00

Unitemized payments made this period of under \$100 ..... \$

Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ..... \$

Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ..... **TOTAL \$** 125.00