Recipient Committee Campaign Statement Cover Page

(Government Code Sections 842)

SEE INSTRUCTIONS ON REVERSE

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No. 12 No	through10-18-2014	Statement covers period from 10-01-2014		Type or print in ink.
0 1	11-04-2014	Date of election if applicable TY CLERK'S OFFI	2.1	nk.
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		Page 1 of 17	2001/02 400 FORM	CALIFORNIA

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☐ Quarterly Statement☐ Special Odd-Year Report☐ Supplemental PreelectionStatement - Attach Form 495	Quarterly Statement Special Odd-Year Report Supplemental Preelection Statement - Attach Form 49

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.

	Signature of Controlling Officeholder, Candidate, State Measure Proponent		Date	
		Bv		Executed on
	Signature of Controlling Officeholder, Candidate, State Measure Proponent		Date	
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fficer of Sponsor	Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor		Date	
	Way.	Bv	10-22-2014	Executed on
	Signature of Treasurer or Assistant Treasurer		Date	
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	Attach continuation sheets if necessary	ach continuation	Atte	DDE AREA CODE/PHONE	STATE ZIP CODE	CITY
				X)	STREET ADDRESS (NO P.O. BOX)	COMMITTEE ADDRESS
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ididate(s) for	Primarily Formed Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.	mmittee List na marily formed.	7. Primarily Formed Committee Li which this committee is primarily formed.	CONTROLLED COMMITTEE?		NAME OF TREASURER
				I.D. NUMBER	N/A	COMMITTEE NAME
ANY	DISTRICT NO. IF ANY		OFFICE SOUGHT OR HELD	r are primarily formed to receive didacy.	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.	not included in this sta
	PONENT	ANDIDATE, OR PROF	NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT	fement: List any committees		Related Committe
oponent, if any.	Identify the controlling officeholder, candidate, or state measure proponent, if any.	fficeholder, candi	Identify the controlling of	TY STATE ZIP	RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY 12611 CARDINAL AVENUE GARDEN GROVE	RESIDENTIAL/BUSINESS ADDRESS (I
SUPPORT OPPOSE		JURISDICTION	BALLOT NO. OR LETTER	T NUMBER IF APPLICABLE)	OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) GARDEN GROVE CITY COUNCIL MEMBER	GARDEN GROVE
		N/A			A	RICKK MONTOYA
			NAME OF BALLOT MEASURE		ER OR CANDIDATE	NAME OF OFFICEHOLDER OR CANDIDATE
		nittee	6. Ballot Measure Committee	ttee	Officeholder or Candidate Controlled Committee	5. Officeholder or C

Campaign Disclosure Statement Summary Page

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC	70		\$	19. Outstanding Debts Add Line 2 + Line 9 in Column B above
dillerent from amounts reported in Column 6.	different from amou	from Lines 2, 7, and 9 (if any).	0	Cash Equivalents and Outstanding Debts 18. Cash Equivalents See instructions on reverse
*Since January 1, 2001. Amounts in this section may be	*Since January 1, 2	eada	\$0	17. LOAN GUARANTEES RECEIVED Schedule B, Part 2
\$		subtracted from previous period amounts. If this is		If this is a termination statemen
\$		report. Some amounts in Column A may be negative figures that should be	647.85	15. Cash Payments Column A, Line 8 above
\$			0	Miscellaneous Increases to Cash
\$		To calculate Column B, add amounts in Column A to the	\$ 647.83	12. Beginning Cash Balance Previous Summary Page, Line 16 13. Cash Receipts Column A, Line 3 above
\$				Current Cash Statement
₩		\$ 1052.15	\$	11. TOTAL EXPENDITURES MADEAdd Lines 8 + 9 + 10
on Total to Date	Date of Election (mm/dd/yy)	0	0	9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3 10. Nonmonetary Adjustment
ZZ. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)	ZZ. Cumi (If Sui	\$ 1052.15	\$ 	SUBTOTAL CASH PAYMENTS Add Lines 6 +
	Calididates	0	0	7. Loans Made
Expenditure Limit Summary for State	Expenditure Li	1052.15	0	xpenditures Made
\$ \$	Made	\$1,700	\$ 0	5. TOTAL CONTRIBUTIONS RECEIVED
	res	0	0	Sc
SA	20. Contributions	\$ 1,700	\$ 0	SUBTOTAL CASH CONTRIBUTIONS Add Lines 1+
1/1 through 6/30 7/1 to Date		1,700	0	2. Loans Received
ons	General Elections	0		Manatana Contributions
Calendar Year Summary for Candidates Running in Both the State Primary and	Calendar Year Running in Bot	Column B CALENDAR YEAR TOTAL TO DATE	Column A TOTAL THIS PERIOD (FROMATTACHED SCHEDULES)	Contributions Received
1369799			4	RICKK MONTOYA FOR GARDEN GROVE CITY COUNCIL 2014
I.D. NUMBER		in the second se	And the second s	NAME OF FILER
Page3 of17	10-18-2014	through		SEE INSTRUCTIONS ON REVERSE
	10-01-2014	from	to whole dollars.	oummary Fage
SUMMARY PAGE	Statement covers period		Type or print in ink. Amounts may be rounded	Campaign Disclosure Statement

Schedule A **Monetary Contributions Received**

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Amounts may be rounded to whole dollars.

Statement covers period

10-01-2014

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FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC	FP FPPC Toll-Free F		TOTAL \$	mn A, Line 1.).	(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)…	(Add Lines
SCC - Small Contributor Committee	SCC - Small	D		•	Total monetary contributions received this period.	3. Total monet
Other trail First Sco.	OTH – Other PTY – Political Party		\$	an \$100	2. Amount received this period – unitemized contributions of less than \$100	2. Amount rec
*Contributor Codes IND – Individual COM – Recipient Committee	*Contributor Codes IND – Individual COM – Recipient Co	0	⇔		Schedule A Summary 1. Amount received this period – contributions of \$100 or more. (Include all Schedule A subtotals.)	Schedule A 1. Amount rec (Include all
		0	\$ SUBTOTAL			
				SCC STORY		
				SCC SCC		
				OSCC OSC		
				□ IND □ IND □ SCC		
·				□ IND □ COM □ PTY □ SCC		
PER ELECTION TO DATE (IF REQUIRED)	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	AMOUNT RECEIVED THIS PERIOD	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	CONTRIBUTOR CODE *	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DATE RECEIVED
I.D. NUMBER 1369799	1369			4	AME OF FILER RICKK MONTOYA FOR GARDEN GROVE CITY COUNCIL 2014	NAME OF FILER RICKK MON
e 4 of 17	10-18-2014 Page	through10-1			SEE INSTRUCTIONS ON REVERSE	SEE INSTRUCTION

Monetary Contributions Received Schedule A (Continuation Sheet)

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

m 10-01-2014	Statement covers period	
FORM 400	CALIFORNIA 100	SCHEDULE A (CONT.)

from

through

10-18-2014

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				·		DATE RECEIVED	NAME OF FILER RICKK MON
to the delivery of the second						FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	AME OF FILER RICKK MONTOYA FOR GARDEN GROVE CITY COUNCIL 2014
te ada da Argina termetak adalah sembia sebendah da dalah berakan perdebagai	OTH SCC	OTH SCC	OTH SCC	□ IND □ COM □ OTH □ PTY □ SCC	OTH SCC	CONTRIBUTOR CODE *	,
\$UBTOTAL \$						IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	
0			·			AMOUNT RECEIVED THIS PERIOD	
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						PER ELECTION TO DATE (IF REQUIRED)	1.D. NUMBER 1369799

IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other

PTY – Political Party SCC – Small Contributor Committee

5 S

Type or print in ink.

SCHEDULE B - PART 1

Schedule B – Part 1 Loans Received	Amounto	Amounts may be rounded to whole dollars.	nded		Statement covers period from 10-01-2014	t covers period 10-01-2014	CALIFORNIA FORM	^A 460
SEE INSTRUCTIONS ON REVERSE				#	igh	10-18-2014	Page6	of 17
NAME OF FILER	1						I.D. NUMBER	
RICKK MONTOYA FOR GARDEN GROVE CITY COUNCIL 2014	VE CITY COUNCIL 2014						1369799	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER LD, NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) BE	OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE
				☐ PAID				CALENDAR YEAR
			Ma April 30 Ar	\$ FORGIVEN	\$	RATE %	€ 9	\$PER ELECTION**
[†] □ IND □ COM □ OTH □ PTY □ SCC	w	\$			DATE DUE	69	DATE INCURRED	\$
		, , , , , , , , , , , , , , , , , , ,		PAID	erikinanour-abboraterii saasioriini juu			CALENDAR YEAR
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†□ IND □ COM □ OTH □ PTY □ SCC	ø	8	Appendix and the second	\$	DATE DUE	\$	DATE INCURRED	<i>s</i>
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$^{\dagger}\Box$ IND \Box COM \Box OTH \Box PTY \Box SCC		₩.		5	DATE DUE	\$3 	DATE INCURRED	\$
	SU	SUBTOTALS \$	\$	4		₩		
Schedule B Summary					•	(Enter (e) on Schedule E, Line 3)		
1. Loans received this period(Total Column (b) plus unitemized loans less than \$100.)	less than \$100.)			 \$,	*Amounts forgiven or paid another party also must be	*Amounts forgiven or paid by another party also must be
2. Loans paid or forgiven this period	paid or forgiven.)	>		\$	0		** If required.	Scriedale A.
	are also llemized on scriedule	Ä.)			0		:	
Enter the net here and on the Summary Page, Column A, Line 2.	Page, Column A, Line 2.	***************************************		(May	(May be a negative number)			

OTH - Other PTY - Political Party SCC - Small Contributor Committee

IND - Individual COM - Recipient Committee (other than PTY or SCC)

† Contributor Codes

Schedule B - Part 2 Loan Guarantors

SEE INSTRUCTIONS ON REVERSE RICKK MONTOYA FOR GARDEN GROVE CITY COUNCIL 2014 Type or print in ink.
Amounts may be rounded to whole dollars. from through Statement covers period 10-01-2014 10-18-2014 1369799 CALIFORNIA ' I.D. NUMBER Page _ SCHEDULE B - PART 2 앜 17

																						FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IFCOMMITTEE, ALSO ENTER LD, NUMBER)
	□scc	MA	ПОТН	СОМ		□scc	☐ PTY	ПОТН	СОМ	- IND		□scc	□ PTY	Пошн	СОМ		□scc	□ PTY	ПОТН	СОМ	□ ND	CONTRIBUTOR CODE
											MACHERINA, MACHERINA, CALAGORIA CONTO, AND CONTO, C											IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)
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Enter on Summary Page, Line 17 only.	\$		PERELECTION (IF REQUIRED)	€A	CALENDAR YEAR	\$		(IF REQUIRED)	\$		CALENDAR YEAR			(IF REQUIRED)	4	CALENDAR YEAR	<i>⇔</i>		PER ELECTION (IF REQUIRED)	55	CALENDAR YEAR	CUMULATIVE TO DATE
																						BALANCE OUTSTANDING TO DATE

Nonmonet Schedule C

Type or print in ink. Amounts may be rounded

SCHEDULE C

Nonmonetary Contributions Received		to whole dollars.		Statement covers period 10-01-2014		CALIFORNIA ,	460
SEE INSTRUCTIONS ON REVERSE				through10-18-2014		Page 8 of	17
NAME OF FILER		100.1			_	I.D. NUMBER	
RICKK MONTOYA FOR GARDEN GROVE CITY COUNCIL 2014	COUNCIL 201	4				1369799	
DATE ZIP CODE OF CONTRIBUTOR RECEIVED (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)
	□IND □COM □PTY □SCC						
	SCC						
	OTH SCC						
	□IND □COM □OTH □PTY □SCC						
Attach additional information on appropriately labeled continuation sheets	ed continuation	on sheets.	SUBTOTAL	AL \$			
Schedule C Summary 1. Amount received this period – nonmonetary contributions of \$100 or more. (Include all Schedule C subtotals.)	ions of \$100 o	r more.		\$	*Contributor Co	*Contributor Codes IND – Individual COM – Recipient Committee (other than PTY or SCC)	300)
	ary contribution	าร of less than \$100		\$	0 OTH - Other PTY - Politics	OTH – Other PTY – Political Party SCC – Small Contributor Committee	mmittee
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)	Page, Columr	ո A, Lines 4 and 10.)	TOTAL \$				

Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures and C

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Supporting Candidates	Summary or Expenditures Supporting/Opposing Other Candidates, Measures and Committees	to whole dollars.	in ink. rounded llars.	Statement covers period from 10-01-2014	niselsausa	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE	NS ON REVERSE			10-18-2014	· Parameter Anna Para	Page 9 of 17
NAME OF FILER					1.0	I.D. NUMBER
RICKK MO	RICKK MONTOYA FOR GARDEN GROVE CITY COUNCIL 2014	IL 2014			136	1369799
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION AR TO DATE (IF REQUIRED)
		Monetary Contribution				
***************************************		Nonmonetary Contribution				
	☐ Support ☐ Oppose	Expenditure				
		☐ Monetary Contribution				
		☐ Nonmonetary Contribution				4 404 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
	☐ Support ☐ Oppose	Independent Expenditure				
		Monetary Contribution				
		☐ Nonmonetary Contribution			-	
	☐ Support ☐ Oppose	Independent Expenditure		,		
State of the state			SUBTOTAL	\$ 0		

Schedule D Summary

- 2. Unitemized contributions and independent expenditures made this period of under \$100\$ 1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) 69 0 0

Schedule D (Continuation Sheet) Summary of Expenditu Supporting/Opposic Candidates, Measur

NAME OF FILER

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Statement of Expenditures Amounts may be rounded Amounts may be rounded Amounts may be rounded	Statement covers period C	ALIFORNIA A CO
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					Colored to the colore					Tage 1					 DATE
	☐ Support ☐ Oppose				☐ Support ☐ Oppose				☐ Support ☐ Oppose				☐ Support ☐ Oppose		NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION. OR COMMITTEE
	۱ -	Independent	Nonmonetary	Monetary Contribution	<u>-</u>	Independent	☐ Nonmonetary Contribution	Monetary Contribution	Expenditure	☐ Independent	☐ Nonmonetary Contribution	☐ Monetary Contribution	į -	Contribution	 TYPE OF PAYMENT
SUBTOTAL \$															DESCRIPTION (IF REQUIRED)
0					ANGENOME TO THE PROPERTY OF TH										AMOUNT THIS PERIOD
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Schedule E Payments Made

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

from 10-01-2014	Statement covers period

ALIFORNIA 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

RICKK MONTOYA FOR GARDEN GROVE CITY COUNCIL 2014

from _______10-01-2014 through _____10-18-2014

Page 11 of 17

1369799

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

	SUBTOTAL\$	nust also be summarized on Schedule D.	* Payments that are contributions or independent expenditures must also be summarized on Schedule D.
,			
AMOUNT PAID	DESCRIPTION OF PAYMENT	CODE OR DESC	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)
s ne candidate/sponsor ⊦-mail)	RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (internet, e-mail)	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads	CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LTC campaign literature and mailings

Schedule E Summary

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)......(e).) 2. Unitemized payments made this period of under \$100 1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) 69 49 0 0 0 0

Schedule E Payments Made (Continuation Sheet)

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

RICKK MONTOYA FOR GARDEN GROVE CITY COUNCIL 2014

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

SCHEDULE E (CONT.)

		through 10-18-2014	from 10-01-2014	Statement covers period
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* Payments that are contributions or independent expenditures must also be summarized on Schedule D.				NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODES: If one of the following codes accurately describes the CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events ND independent expenditure supporting/opposing others (explain)* LEG legal defense LTG campaign literature and mailings MBR OPC PRO
t also be summarized					
on Schedule D.				CODE OR	payment, you may enter the code. member communications meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting) print ads
transport of the state of the s		·		DESCRIPTION OF PAYMENT	P. Otherwise, RAD RAD SAL TEL TRC TRS TRS TSF VOT WEB
SUBTOTAL \$					describe the payment. radio airlime and production costs returned contributions campaign workers' salaries t.v. or cable airlime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor voter registration information technology costs (internet, e-mail)
A CONTROL OF THE STATE OF THE S				AMOUNT PAID	ю candidate/sponsor

Accrued Expenses (Unpaid Bills) Schedule F

NAME OF FILER

RICKK MONTOYA FOR GARDEN GROVE CITY COUNCIL 2014

SEE INSTRUCTIONS ON REVERSE

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

from Statement covers period 10-01-2014

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through 10-18-2014 1369799

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CNS P * Payments that are contributions or independent expenditures must also be summarized on Schedule D. Schedule F Summary CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. campaign paraphernalia/misc. civic donations contribution (explain nonmonetary)* campaign consultants campaign literature and mailings candidate filing/ballot fees independent expenditure supporting/opposing others (explain)* fundraising events legal defense (IF COMMITTEE, ALSO ENTER I.D. NUMBER) PR PR 몽퍼워 MIG MBR CODE OR DESCRIPTION OF PAYMENT meetings and appearances member communications office expenses print ads professional services (legal, accounting) postage, delivery and messenger services polling and survey research phone banks petition circulating SUBTOTALS \$ (a)
OUTSTANDING
BALANCE BEGINNING
OF THIS PERIOD ↔ AMOUNT INCURRED THIS PERIOD SAL 7 returned contributions voter registration transfer between committees of the same candidate/sponsor campaign workers' salaries radio airtime and production costs information technology costs (internet, e-mail) t.v. or cable airtime and production costs staff/spouse travel, lodging, and meals candidate travel, lodging, and meals 40 (c)
AMOUNT PAID
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(ALSO REPORT ON E) 60 BALANCE AT CLOSE OF THIS PERIOD (d) OUTSTANDING

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	3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and	nn (c) su	ises un	ilumn (b
	e and	2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100 or more, plus total unitemized payments on accrued expenses under \$100 or more, plus total unitemized payments on accrued expenses under \$100 or more, plus total unitemized payments on accrued expenses under \$100 or more, plus total unitemized payments on accrued expenses under \$100 or more, plus total unitemized payments on accrued expenses under \$100 or more, plus total unitemized payments on accrued expenses under \$100 or more, plus total unitemized payments on accrued expenses under \$100 or more, plus total unitemized payments on accrued expenses under \$100 or more, plus total unitemized payments on accrued expenses under \$100 or more, plus total unitemized payments on accrued expenses under \$100 or more, plus total unitemized payments on accrued expenses under \$100 or more, plus total unitemized payments on accrued expenses under \$100 or more, plus total unitemized payments on accrued expenses under \$100 or more, plus total unitemized payments on accrued expenses under \$100 or more, plus total unitemized payments on accrued expenses under \$100 or more, plus total unitemized payments of \$100 or more, plus	der \$10	1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for
		for pay	0.)	tals for
on the Summary Page, Column A, Line 9.)		Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments o accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.	accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)	
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Schedule F Accrued Expenses (Unpaid Bills) (Continuation Sheet)

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

through

10-18-2014

Page_

4

<u>o</u>

17

from_

Statement covers period 10-01-2014

CALIFORNIA FORM SCHEDULE F (CONT.)

\$		\$	& .	\$UBTOTALS	
(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(b) AMOUNT INCURRED THIS PERIOD	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	CODE OR DESCRIPTION OF PAYMENT	NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)
			D.	so be summarized on Schedule	* Payments that are contributions or independent expenditures must also be summarized on Schedule D
ame candidate/sponsor e-mail)	transfer between committees of the same candidate/sponsor voter registration information technology costs (internet, e-mail)	TSF transfer between VOT voter registration WEB information techn	messenger services (legal, accounting)	POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads	IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings
:	candidate travel, lodging, and meals staff/spouse travel, lodging, and meals		earch		
its	campaign workers' salaries t.v. or cable airtime and production costs	SAL campaign workers' salaries TEL t.v. or cable airtime and pro-		OFC office expenses PET petition circulating	
	radio airtime and production costs returned contributions	RAD radio airtime and produced RFD returned contributions	ns nces	MBR member communications MTG meetings and appearances	CMP campaign paraphemalia/misc. CNS campaign consultants
	e payment.	Otherwise, describe the payment	code.	es the payment, you may enter the	CODES: If one of the following codes accurately describes the
799	1369799			CIL 2014	RICKK MONTOYA FOR GARDEN GROVE CITY COUNCIL 2014
MBER	I.D. NUMBER				NAME OF FILER

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

NAME OF AGENT OR INDEPENDENT CONTRACTOR

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

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

Statement covers period 10-01-2014 10-18-2014

SCHEDULE G

RICKK MONTOYA FOR GARDEN GROVE CITY COUNCIL 2014 from through CALIFORNIA FORM Page_ 1369799 I.D. NUMBER 3 으 17

THE TOTAL PROPERTY OF THE PROP			NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODES: If one of the following codes accurately describes the payment, you may enter the code. CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings *Payments that are contributions or independent expenditures must also be summarized on Schedule D.
			CODE O	payment, you may ent member communications meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and mess professional services (legal print ads
			OR DES	es es rch essenger services gal, accounting)
			ESCRIPTION OF PAYMENT	therwise, of RAD rain RAD reing SAL can TRC can TRS state TRS transvot vo WEB inf
			= PAYMENT	Otherwise, describe the payment. RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (internet, e-mail)
	·		AMOUNT PAID	candidate/sponsor

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule H Loans Made to O

			1))) ;
I.D. NUMBER		hard в нешен до на выполнения выполне	
Page16of17	through 10-18-2014		ERSE
CALIFORNIA 460 FORM	Statement covers period from 10-01-2014	Type or print in ink. Amounts may be rounded to whole dollars.	thers*

CIL 2014 **CIL 2014 **CIL 2014 **CIL 2014 **CIL 2014 **CONTER BEGINNING THIS PERIOD T	RICKK MONTOYA FOR GARDEN GROVE CITY COUNCIL 2014 FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER 1.D. NUMBER) FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER 1.D. NUMBER) FULL NAME OF BUSINESS) IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER EMPLOYER EMPLOYER ENTER NAME OF BUSINESS) NAME OF BUSINESS) *Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must
--	--

(Enter (e) on Schedule I, Line 3)

Schedule H Summary

	•	
1. Loans made this period\$ (Total Column (b) plus unitemized loans less than \$100.)	0	**If Required
Payments received on loans\$ (Total Column (c) plus unitemized payments less than \$100.)	0	
3. Net change this period. (Subtract Line 2 from Line 1.)	(May be a negative number)	,

Miscellaneous Increases to Cash Schedule I

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period

CALIFORNIA

SCHEDULE

	5	from	10-01-2014	FORM
SEE INSTRUCTIONS ON REVERSE	ON REVERSE	through	10-18-2014	Page17of17
NAME OF FILER				I.D. NUMBER
RICKK MO	RICKK MONTOYA FOR GARDEN GROVE CITY COUNCIL 2014			1369799
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	CEIPT	AMOUNT OF INCREASE TO CASH
Attach additio	Attach additional information on appropriately labeled continuation sheets.		SUBTOTAL \$	0
Schedule I Summary 1. Increases to cash of \$	Schedule I Summary 1. Increases to cash of \$100 or more this period.	₩	0	
i. increases to	cash of \$100 or more this period			

TOTAL \$

. \$

0 0

4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the

Summary Page, Line 14.)

3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)(e). 2. Unitemized increases to cash under \$100 this period.\$