Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 7-1-14
through 9-30-14

Date of election if applicable: (Month, Day, Year)
11-4-14

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UPLAND CITY
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Date Stamp

CALIFORNIA FORM 460

Page 1 of 8

For Official Use Only

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: 1363746

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Carol Timm for Upland City Council 2014

STREET ADDRESS (NO P.O. BOX)
636

CITY	STATE	ZIP CODE	AREA CODE/PHONE
East 9th Street	CA	91786	(909)204-2629

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER
Rita C Hansen

MAILING ADDRESS
1131 W 6th Street, Ste 255

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Ontario	CA	91786	(909) 983-3365

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 10-6-14 (Date) By Rita C Hansen (Signature of Treasurer or Assistant Treasurer)

Executed on 10-6-14 (Date) By Carol S. Timm (Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor)

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Campaign Disclosure Statement
Summary Page

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

SUMMARY PAGE

Statement covers period
from 7-1-14
through 9-30-14

CALIFORNIA FORM 460

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Carol Timm for Upland City Council 2014

I.D. NUMBER
1363746

Contributions Received

		Column A (TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)	Column B (CALENDAR YEAR TOTAL TO DATE)
1. Monetary Contributions	*Schedule A, Line 3*	$ 3468.00	$ 7823.00
2. Loans Received	*Schedule B, Line 3*	4151.79	4252.79
3. SUBTOTAL CASH CONTRIBUTIONS	*Add Lines 1 + 2*	$ 7619.79	$ 12075.79
4. Nonmonetary Contributions	*Schedule C, Line 3*	1350.00	1350.00
5. TOTAL CONTRIBUTIONS RECEIVED	*Add Lines 3 + 4*	$ 8969.79	$ 13425.79

Expenditures Made

6. Payments Made	*Schedule E, Line 4*	$ 10037.75	$ 10930.49
7. Loans Made	*Schedule H, Line 3*	-0-	-0-
8. SUBTOTAL CASH PAYMENTS	*Add Lines 6 + 7*	$ 10037.75	$ 10930.49
9. Accrued Expenses (Unpaid Bills)	*Schedule F, Line 3*	-0-	-0-
10. Nonmonetary Adjustment	*Schedule C, Line 3*	1350.00	1350.00
11. TOTAL EXPENDITURES MADE	*Add Lines 8 + 9 + 10*	$ 11387.75	$ 12280.79

Current Cash Statement

12. Beginning Cash Balance	*Previous Summary Page, Line 16*	$ 3563.26
13. Cash Receipts	*Column A, Line 3 above*	7619.79
14. Miscellaneous Increases to Cash	*Schedule I, Line 4*	-0-
15. Cash Payments	*Column A, Line 8 above*	10037.75
16. **ENDING CASH BALANCE**	*Add Lines 12 + 13 + 14, then subtract Line 15*	$ 1145.30

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

17. LOAN GUARANTEES RECEIVED — *Schedule B, Part 2* — $ -0-

Cash Equivalents and Outstanding Debts

18. Cash Equivalents — *See instructions on reverse* — $ -0-
19. Outstanding Debts — *Add Line 2 + Line 9 in Column B above* — $ -0-

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).

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	$	$

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
/ /	$
/ /	$

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

Schedule A
Monetary Contributions Received

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

SCHEDULE A

Statement covers period
from 7-1-14
through 9-30-14

CALIFORNIA FORM 460

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Carol Timm for Upland City Council 2014

I.D. NUMBER
1363746

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)
8-4-14	Susan Warren 1742 N Palm Ave. Upland, CA 91784	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	College Professor Claremont Colleges	75.00	75.00	
9-8-14	Alexander Veltro 1760 N Palm Ave. Upland, CA 691784	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Financial Advisor USB Financial Services	250.00	250.00	
9-8-14	M S Derickson 390 W Clark Street Uland, CA 91784	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	100.00	100.00	
9-18-14	David Stevens 719 2nd Ave. Upland, CA 91786	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	400.00	450.00	
9-18-14	Timothy Lynch 1555 Upland Hills Dr. Upland, CA 91784	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	150.00	150.00	
			SUBTOTAL $	975.00		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 975.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 2493.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL $** 3468.00

*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 B – Part 1
Loans Received

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

Statement covers period
from 7-1-14
through 9-30-14

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Carol Timm for Upland City Council 2014

I.D. NUMBER
1363746

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) 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	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Carol Timm 636 East 9th Street Upland, CA 91786 †☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Carol Timm Retired	$ -0-	$ 4151.79	☐ PAID $ ____ ☐ FORGIVEN $ ____	$ 4151.79 DATE DUE ____	____% RATE $ ____	$ 4151.79 9-30-14 DATE INCURRED	CALENDAR YEAR $ 4151.79 PER ELECTION** $ ____
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$ ____	$ ____	☐ PAID $ ____ ☐ FORGIVEN $ ____	$ ____ DATE DUE ____	____% RATE $ ____	$ ____ DATE INCURRED ____	CALENDAR YEAR $ ____ PER ELECTION** $ ____
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$ ____	$ ____	☐ PAID $ ____ ☐ FORGIVEN $ ____	$ ____ DATE DUE ____	____% RATE $ ____	$ ____ DATE INCURRED ____	CALENDAR YEAR $ ____ PER ELECTION** $ ____
		SUBTOTALS $ 4151.79		$	$ 4151.79	$		

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

Schedule B Summary

1. Loans received this period ..... $ 4151.79
   (Total Column (b) plus unitemized loans of less than $100.)
2. Loans paid or forgiven this period ..... $ -0-
   (Total Column (c) plus loans under $100 paid or forgiven.)
   (Include loans paid by a third party that are also itemized on Schedule A.)
3. Net change this period. (**Subtract** Line 2 from Line 1.) ..... **NET** $ 4151.79
   (May be a negative number)
   Enter the net here and on the Summary Page, Column A, Line 2.

†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

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.

Schedule C
Nonmonetary Contributions Received

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

SCHEDULE C

Statement covers period
from 7-1-14
through 9-30-14

CALIFORNIA FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Carol Timm for Upland City Council 2014

I.D. NUMBER

1363746

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)
7-26-14	Laura Stone 7819 Euclid Ave Whittier, CA 90602	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	Food	350.00	350.00	
7-26-14	Carolyn Theisen 16220 Honnington St Whittier, CA 90603	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Entertainer Self emoloyed	Music	400.00	400.00	
9-14-14	Susan Warren 1741 N Palm Ave Upland, CA 91784	☑IND ☐COM ☐OTH ☐PTY ☐SCC	College Professor Claremont Colleges	Food	400.00	400.00	
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					

Attach additional information on appropriately labeled continuation sheets. **SUBTOTAL $** 1150.00

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) ..... $ 1150.00
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $ 200.00
3. 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 $** 1350.00

*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 E

Schedule E
Payments Made

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

Statement covers period
from 7-1-14
through 9-30-14

CALIFORNIA FORM 460

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Carol Timm for Upland City Council 2014

I.D. NUMBER
1363746

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
City of Upland 460 N Euclid Upland, CA 91786	FIL			1200.00
Los Angeles Paper Group Internet Sales	CMP			2038.53
United States Post Office	POS			1961.47

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

SUBTOTAL $ 5200.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 8514.17
2. Unitemized payments made this period of under $100 ..... $ 1523.58
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ..... $
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ..... **TOTAL $** 10037.75

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period
from - through 9-30-14

CALIFORNIA FORM 460

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NAME OF FILER
Carol Timm for Upland City Council 2014

I.D. NUMBER
1363746

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
Offrice Depot 937 N Mountain Upland, CA 91786	OFC			118.76
Staples, Inc. Mountain Ave Upland, CA 91786	OFC			131.74
Office Depot 937 N Mountain Upland, CA	OFC			225.78
Office Depot 937 N Mountain Upland, CA	OFC			229.93
Staples, Inc. Mountain Ave Upland, CA 91786	OFC			102.59

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

SUBTOTAL $ 808.80

Schedule E (Continuation Sheet) Payments Made

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

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from 7-1-14
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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
Los Angeles Newspaper Grou[Internet	CMP			428.87
Cross & Oberlic 916 Byrd Ave. Neenuh, WI 54956	LIT			277.86
Cross & Oberlic 916 Byrd Ave. Neenuh, WI 54956	LIT			1549.30
ICON Group Internet	LIT			249.35

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

SUBTOTAL $ 2505.37