Recipient Committee
Campaign Statement
Cover Page
(Government Code Sections 84200-84216.5)

Statement covers period from ______/____/____ through ______/____/____

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

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.
   - Officeholder, Candidate Controlled Committee
   - Primarily Formed Ballot Measure Committee
   - Primarily Formed Candidate/Officeholder Committee
   - General Purpose Committee
   - Sponsored
   - Small Contributor Committee
   - Political Party/Central Committee

2. Type of Statement:
   - Pre-election Statement
   - Semi-annual Statement
   - Amendment (Explain below)

3. Committee Information
   - I.D. NUMBER
   - 1357140

   COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
   Dina Walker for Rialto School Board 2014

   STREET ADDRESS (NO P.O. BOX)
   Rialto, CA 92376

   MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
   Rialto, CA 92377

   CITY
   STATE
   ZIP CODE
   AREA CODE/PHONE

   CITY
   STATE
   ZIP CODE
   AREA CODE/PHONE

   NAME OF TREASURER
   Paul A. Scott

   MAILING ADDRESS
   Hawthorne, CA 90250

   NAME OF ASSISTANT TREASURER, IF ANY

   MAILING ADDRESS

   CITY
   STATE
   ZIP CODE
   AREA CODE/PHONE

   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 ______/____/____
   By
   Signature of Controlling Officer, Candidate, State Measure Proponent

   Executed on ______/____/____
   By
   Signature of Controlling Officer, Candidate, State Measure Proponent

   Executed on ______/____/____
   By
   Signature of Controlling Officer, Candidate, State Measure Proponent

   Executed on ______/____/____
   By
   Signature of Controlling Officer, Candidate, State Measure Proponent
5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
Dina L. Walker

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

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)  CITY  STATE  ZIP
[redacted]  Rialto  CA  92376

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.

<table>
<thead>
<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
</table>

NAME OF TREASURER

CONTROLLED COMMITTEE?
[ ] YES  [ ] NO

COMMITTEE ADDRESS  STREET ADDRESS (NO P.O. BOX)

<table>
<thead>
<tr>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
<th>AREA CODE</th>
<th>PHONE</th>
</tr>
</thead>
</table>

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.

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
<th>SUPPORT</th>
<th>OPPOSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
<td>SUPPORT</td>
<td>OPPOSE</td>
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<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
<td>SUPPORT</td>
<td>OPPOSE</td>
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</table>

<table>
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<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
</table>

NAME OF TREASURER

CONTROLLED COMMITTEE?
[ ] YES  [ ] NO

COMMITTEE ADDRESS  STREET ADDRESS (NO P.O. BOX)

<table>
<thead>
<tr>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
<th>AREA CODE</th>
<th>PHONE</th>
</tr>
</thead>
</table>

Attach continuation sheets if necessary
Contributions Received

1. Monetary Contributions .................................. Schedule A, Line 3 $ 1688.70 $ 1688.70
2. Loans Received ........................................... Schedule B, Line 3 1500.00 1500.00
3. SUBTOTAL CASH CONTRIBUTIONS .................. Add Lines 1 + 2 $ 3188.70 $ 3188.70
4. Nonmonetary Contributions ............................... Schedule C, Line 3
5. TOTAL CONTRIBUTIONS RECEIVED .................. Add Lines 3 + 4 $ 3188.70 $ 3188.70

Expenditures Made

6. Payments Made ........................................... Schedule E, Line 4 $ 2624.24 $ 2624.24
7. Loans Made ................................................ Schedule H, Line 3
8. SUBTOTAL CASH PAYMENTS .......................... Add Lines 6 + 7 $ 2624.24 $ 2624.24
9. Accrued Expenses (Unpaid Bills) ....................... Schedule F, Line 3
10. Nonmonetary Adjustment ............................... Schedule C, Line 3
11. TOTAL EXPENDITURES MADE ......................... Add Lines 8 + 9 + 10 $ 2624.24 $ 2624.24

Current Cash Statement

12. Beginning Cash Balance ............................... Previous Summary Page, Line 16 $ 0.00
13. Cash Receipts ........................................... Column A, Line 3 above 3188.70
14. Miscellaneous Increases to Cash ....................... Schedule I, Line 4 0.00
15. Cash Payments .......................................... Column A, Line B above 2624.24
16. ENDING CASH BALANCE ......................... Add Lines 12 + 13 + 14, then subtract Line 15 $ 564.46

Cash Equivalents and Outstanding Debts

17. LOAN GUARANTEES RECEIVED ....................... Schedule B, Part 2 $
18. Cash Equivalents ....................................... See instructions on reverse $
19. Outstanding Debts ..................................... Add Line 2 + Line 3 in Column B above $
## Schedule A
### Monetary Contributions Received

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

**Statement covers period from 7/1/2014 through 9/30/2014**

**NAME OF FILER**
Dina Walker for Rialto School Board 2014

**I.D. NUMBER**
1367140

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR</th>
<th>CONTRIBUTOR CODE</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>8/20/14</td>
<td>Lindsey Law</td>
<td>OTH</td>
<td>San Bernardino, CA 92431</td>
<td>100.00</td>
<td>100.00</td>
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<tr>
<td>9/4/14</td>
<td>Wil Greer</td>
<td>OTH</td>
<td>Rialto, CA 92375</td>
<td>100.00</td>
<td>100.00</td>
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<tr>
<td></td>
<td></td>
<td>COM</td>
<td>Vice Principal Chino USD</td>
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</tr>
<tr>
<td>9/4/14</td>
<td>A. Majadi</td>
<td>OTH</td>
<td>San Bernardino, CA 92411</td>
<td>200.00</td>
<td>200.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>COM</td>
<td>CEO Boys &amp; Girls Club of San Bernardino</td>
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</tr>
<tr>
<td>9/4/14</td>
<td>Carolyn Tillman</td>
<td>OTH</td>
<td>San Bernardino, CA 92411</td>
<td>250.00</td>
<td>250.00</td>
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<tr>
<td></td>
<td></td>
<td>COM</td>
<td>Special Assistant SBCSS</td>
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<tr>
<td>9/1/14</td>
<td>Alton Garrett</td>
<td>OTH</td>
<td>San Bernardino, CA 92404</td>
<td>100.00</td>
<td>100.00</td>
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<tr>
<td></td>
<td></td>
<td>COM</td>
<td>Managing Partner Garrett Management Grp</td>
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</table>

**SUBTOTAL $ 750.00**

### Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ................................................. $ 1,200.00
2. Amount received this period – unitemized monetary contributions of less than $100 ................................................. $ 488.70
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ................................................. TOTAL $ 1688.70

*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

FPPC Form 460 (November/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
### Schedule A (Continuation Sheet)
#### Monetary Contributions Received

**Name of Filer:** Dina Walker for Rialto School Board 2014

**I.D. Number:** 1367140

<table>
<thead>
<tr>
<th>Date Received</th>
<th>Full Name, Street Address and Zip Code of Contributor</th>
<th>Contributor Codes</th>
<th>If an Individual, Enter Occupation and Employer (If Self-Employed, Enter Name of Business)</th>
<th>Amount Received This Period</th>
<th>Cumulative to Date Calendar Year (Jan. 1 - Dec. 31)</th>
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<tbody>
<tr>
<td>9/12/14</td>
<td>Williams for SB Community College Board 2014</td>
<td>COM</td>
<td>Community College Board of Trustees 2014</td>
<td>100.00</td>
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<tr>
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<td>Rialto, CA 92376</td>
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<tr>
<td>9/20/14</td>
<td>Rikke Van Johnson</td>
<td>COM</td>
<td>City Council Member City of San Bernardino</td>
<td>100.00</td>
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<td></td>
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<td>9/20/14</td>
<td>Joanne Gilbert for Kids Sake</td>
<td>COM</td>
<td>Board President Rialto USD</td>
<td>150.00</td>
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<tr>
<td>9/30/14</td>
<td>Tamara Moore</td>
<td>COM</td>
<td>Program Officer College Foundation of CA</td>
<td>100.00</td>
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<tr>
<td></td>
<td>Oakland, CA 94609</td>
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**Subtotal:** 450.00

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*Contributor Codes:
- IND - Individual
- COM - Recipient Committee
- OTH - Other (e.g., business entity)
- PTY - Political Party
- SCC - Small Contributor Committee

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FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 888/ASK-FPPC (888/275-3772)
### Schedule B – Part 1

**Loans Received**

<table>
<thead>
<tr>
<th>Full Name, Street Address and Zip Code of Lender</th>
<th>IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER</th>
<th>Outstanding Balance Beginning This Period</th>
<th>Amount Received This Period</th>
<th>Amount Paid or Forgiven This Period</th>
<th>Outstanding Balance at Close of This Period</th>
<th>Interest Paid This Period</th>
<th>Original Amount of Loan</th>
<th>Cumulative Contributions to Date</th>
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<tbody>
<tr>
<td>Dina L. Walker</td>
<td>GEO BLU Educational Foundation</td>
<td>$0.00</td>
<td>$1500.00</td>
<td>□ PAID $1500.00</td>
<td>$1500.00</td>
<td>$1500.00</td>
<td>$1500.00</td>
<td>CALENDAR YEAR: $1500.00</td>
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<td>PER ELECTION**: $1500.00</td>
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</tbody>
</table>

**Schedule B Summary**

1. Loans received this period .......................................................... $1500.00
   (Total Column (b) plus unitemized loans of less than $100.)

2. Loans paid or forgiven this period .................................................. $0.00
   (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 $1500.00
   (May be a negative number)

*Contributor Codes

IND – Individual
COM – Recipient Committee
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 E Payments Made

#### CODES:
- 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
- WBR: member communications
- WFG: meetings and appearances
- OFC: office expenses
- PET: petition circulating
- RHO: phone banks
- POL: polling and survey research
- POS: postage, delivery and messenger services
- PRO: professional services (legal, accounting)
- PRT: print ads
- RAD: radio airtime and production costs
- RFD: returned contributions
- SAL: campaign workers' salaries
- TEL: tel. 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)

#### Payment Details

<table>
<thead>
<tr>
<th>Name and Address of Payee</th>
<th>Code</th>
<th>Description of Payment</th>
<th>Amount Paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>San Bernardino County Registrar of Voters</td>
<td>FIL</td>
<td>Personal Statement Filing Fee</td>
<td>1420.47</td>
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<tr>
<td>Uribe Printing, Inc.</td>
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<td><strong>Remittance Envelopes</strong></td>
<td>169.40</td>
</tr>
<tr>
<td>Riverside, CA 92504</td>
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<tr>
<td>Pooleman Photography</td>
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<td><strong>Candidate Photographs</strong></td>
<td>125.00</td>
</tr>
<tr>
<td>San Bernardino, CA 92401</td>
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</tbody>
</table>

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

**Subtotal:** $1,714.87

### Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) $1,714.87
2. Unitized payments made this period of under $100 $909.37
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) $0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) TOTAL $2,624.24