Recipient Committee
Campaign Statement
Cover Page
(Government Code Sections 84200-84216.6)

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.
   - [X] Officerholder, Candidate Controlled Committee
   - [ ] State Candidate Election Committee
   - [ ] Recall
   - [ ] Ballot Measure Committee
     - [ ] Primarily Formed
     - [ ] Controlled
     - [ ] Sponsored
     - [ ] (Also Complete Part 8)
   - [ ] General Purpose Committee
     - [ ] Sponsored
     - [ ] Small Contributor Committee
     - [ ] Political Party/Central Committee
     - [ ] Primarily Formed Candidate
     - [ ] Officerholder Committee
       - [ ] (Also Complete Part 7)

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

3. Committee Information
   I.D. NUMBER: 1368708
   COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE):
   Friends of Lillie Houston, Rialto USD 2014

   STREET ADDRESS (NO P.O. BOX):
   Rialto
   CITY
   STATE
   ZIP CODE
   AREA CODE/PHONE

   MAILING ADDRESS
   CITY
   STATE
   ZIP CODE
   AREA CODE/PHONE

   OPTIONAL: FAX / EMAIL 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 10/04/2014
   Date

   Executed on 10/04/2014
   Date

   Executed on
   Date

   Executed on
   Date

Treasurer(s)
NAME OF TREASURER:
Dolores Armstead

MAILING ADDRESS
CITY
STATE
ZIP CODE
AREA CODE/PHONE
San Bernardino
CA
92407

NAME OF ASSISTANT TREASURER, IF ANY:
MAILING ADDRESS
CITY
STATE
ZIP CODE
AREA CODE/PHONE

OPTIONAL: FAX / EMAIL ADDRESS
darmst8273@aol.com

Signatures of Controlling Officer/holder, Candidate, State Measure Proponent or Responsible Center of Sponsor

FPPC Form 480 (June 2001)
FPPC Toll-Free Helpline: 866/ASK-FPPC
State of California
### Contributions Received

<table>
<thead>
<tr>
<th>Contribution Type</th>
<th>Column A (This Period)</th>
<th>Column B (Calendar Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monetary Contributions</td>
<td>$2080.00</td>
<td>$2080.00</td>
</tr>
<tr>
<td>Loans Received</td>
<td>$6454.90</td>
<td>$6454.90</td>
</tr>
<tr>
<td>SUBTOTAL CASH CONTRIBUTIONS</td>
<td>$8534.90</td>
<td>$8534.90</td>
</tr>
<tr>
<td>Nonmonetary Contributions</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>TOTAL CONTRIBUTIONS RECEIVED</td>
<td>$8534.90</td>
<td>$8534.90</td>
</tr>
</tbody>
</table>

### Expenditures Made

<table>
<thead>
<tr>
<th>Expenditure Type</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payments Made</td>
<td>$8142.09</td>
<td>$8142.09</td>
</tr>
<tr>
<td>Loans Made</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>SUBTOTAL CASH PAYMENTS</td>
<td>$8142.09</td>
<td>$8142.09</td>
</tr>
<tr>
<td>Accrued Expenses (Unpaid Bills)</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Nonmonetary Adjustment</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>TOTAL EXPENDITURES MADE</td>
<td>$8142.09</td>
<td>$8142.09</td>
</tr>
</tbody>
</table>

### Current Cash Statement

<table>
<thead>
<tr>
<th>Statement</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginning Cash Balance</td>
<td>$0</td>
</tr>
<tr>
<td>Cash Receipts</td>
<td>$8534.90</td>
</tr>
<tr>
<td>Miscellaneous Increases to Cash</td>
<td>$0</td>
</tr>
<tr>
<td>Cash Payments</td>
<td>$8142.09</td>
</tr>
<tr>
<td>ENDING CASH BALANCE</td>
<td>$392.81</td>
</tr>
</tbody>
</table>

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

### Cash Equivalents and Outstanding Debts

<table>
<thead>
<tr>
<th>Type</th>
<th>Column A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash Equivalents</td>
<td>$0</td>
</tr>
<tr>
<td>Outstanding Debts</td>
<td>$6454.90</td>
</tr>
</tbody>
</table>

---

**Calendar Year Summary for Candidates Running in Both the State Primary and General Elections**

- Contributions Received: $0
- Expenditures Made: $0

**Expenditure Limit Summary for State Candidates**

- Cumulative Expenditures Made:
  - Date of Election (mm/dd/yy): $0

---

*Since January 1, 2001. 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.

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

**NAME OF FILER**
Friends of Little Houston, Rialto USD 2014

**I.D. NUMBER**
1368708

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (COMMITTEE ALSO ENTERS NAME)</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>8/27/2014</td>
<td>Wailer Hawkins, Rialto CA 92377</td>
<td>☑IND</td>
<td>Retired</td>
<td>100.00</td>
<td>100.00</td>
<td></td>
</tr>
<tr>
<td>8/27/2014</td>
<td>Ed Scott, Rialto CA 92376</td>
<td>☑IND</td>
<td>City Counsel Rialto</td>
<td>200.00</td>
<td>200.00</td>
<td></td>
</tr>
<tr>
<td>8/27/2014</td>
<td>Alton Garrett, San Bernardino CA 92413</td>
<td>☑IND</td>
<td>GMG, LLC</td>
<td>100.00</td>
<td>100.00</td>
<td></td>
</tr>
<tr>
<td>8/5/2014</td>
<td>Artist Gilbert, Rialto CA 92377</td>
<td>☑IND</td>
<td>A Gilbert &amp; Asossc</td>
<td>400.00</td>
<td>400.00</td>
<td></td>
</tr>
<tr>
<td>9/17/2014</td>
<td>Randall Ceniceros, Fontana CA 92337</td>
<td>☑IND</td>
<td>School Board Fontana</td>
<td>200.00</td>
<td>200.00</td>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTAL $** 1000.00

---

**Schedule A Summary**

1. Amount received this period – contributions of $100 or more.
   (Include all Schedule A subtotals.) ........................................................ $ 1750.00

2. Amount received this period – unitemized contributions of less than $100 ........................................ $ 330.00

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .................................... TOTAL $ 2080.00

---

*Contributor Codes*
- IND – Individual
- COM – Recipient Committee (other than PTY or SCC)
- OTH – Other
- PTY – Political Party
- SCC – Small Contributor Committee

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Friends of Lillie Houston, Rialto USD 2014

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

School Board Member, Rialto USD

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

Rialto  CA  92377

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?

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

CITY  STATE  ZIP CODE  AREA CODE/PHONE

6. 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 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

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 888/ASK-FPPC
State of California
## Schedule A (Continuation Sheet)

### Monetary Contributions Received

**Type or print in ink.**

**Amounts may be rounded to whole dollars.**

<table>
<thead>
<tr>
<th>Date</th>
<th>Full Name, Street Address and Zip Code of Contributor (If Committee, Also Enter ID Number)</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>9/11/2014</td>
<td>For Kids Sake</td>
<td></td>
<td></td>
<td>150.00</td>
<td>150.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Rialto CA 92377</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9/2/2014</td>
<td>Mr. Mills</td>
<td></td>
<td>Retired</td>
<td>500.00</td>
<td>500.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Rialto CA 92376</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9/12/2014</td>
<td>Onetta Brooks</td>
<td></td>
<td>Retired</td>
<td>100.00</td>
<td>100.00</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Inglewood CA 90305</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Subtotal $ 750.00**

---

**Contributor Codes**

- IND - Individual
- COM - Recipient Committee (other than PTY or SCC)
- OTH - Other
- PTY - Political Party
- SCC - Small Contributor Committee

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
**Schedule B - Part 1**  
**Loans Received**

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

---

### Friends of Lillie Houston, Rialto USD 2014

#### Full Name, Street Address and ZIP Code of Lender  
If an Individual, Enter Occupation and Employer (If Committee, Also Enter I.D. Number)

<table>
<thead>
<tr>
<th>Lender</th>
<th>Occupation</th>
<th>Amount Received This Period</th>
<th>Amount Paid or Forgiven This Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lillie &amp; Marcus Houston</td>
<td>Retired</td>
<td>$0</td>
<td>$6454.90</td>
</tr>
</tbody>
</table>

- **Date Due:** 12/31/2015  
- **Interest Paid This Period:** 0  
- **Original Amount of Loan:** $6454.90  
- **Cumulative Contributions to Date:** 0  
- **Calendar Year:**  
  - **Per Election**
  - **Per Election**

#### Schedule B Summary

1. Loans received this period. 
   
   (Total Column (b) plus unitemized loans less than $100.) 
   
   $6454.90

2. Loans paid or forgiven this period. 
   
   (Total Column (c) plus loans under $100 paid or forgiven.) 
   
   $0

3. Net change this period. (Subtract Line 2 from Line 1.) 
   
   **NET:** $6454.90

† **Contributor Codes**
- IND - Individual  
- COM - Recipient Committee (other than PTY or SCC)  
- OTH - Other  
- PTY - Political Party  
- SCC - Small Contributor Committee

---

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

---

**CALIFORNIA FORM 460**

**Page 6 of 10**

**I.D. Number:** 1368708

---

FFPC Form 460 (June 01)  
FFPC Toll-Free Helpline: 866/ASK-FPPC
**Schedule E Payments Made**

**NAME OF FILER**
Friends of Lillian Houston, Rialto USD 2014

**NAME AND ADDRESS OF PAYEE**

<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>Stater Bros</td>
<td>FND</td>
<td>Fundraiser</td>
<td>104.63</td>
</tr>
<tr>
<td>Rialto CA 92376</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amos Young</td>
<td>CNS</td>
<td>consultant</td>
<td>1689.57</td>
</tr>
<tr>
<td>Pomona CA 91767</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Van Howard</td>
<td>FND</td>
<td>fundraiser</td>
<td>210.00</td>
</tr>
<tr>
<td>Van Howard</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rialto CA 92376</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**SUBTOTAL**: $2004.20

**Schedule E Summary**

1. Payments made this period of $100 or more. (Include all Schedule E subtotals.) $6110.06
2. Unitemized payments made this period of under $100 $2032.03
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.) $6142.09

**CALIFORNIA FORM 460**

**SCHEDULE E**

**STATEMENT COVERED PERIOD FROM 7/1/2014 THROUGH 9/30/2014**

**I.D. NUMBER**
1368708

**PPPC Form 460 (June/01)**
FPCC Toll-Free Helpline: 866/ASK-FPPC
## Schedule E

### (Continuation Sheet)

**Payments Made**

 SEE INSTRUCTIONS ON REVERSE

**NAME OF FILER**

Friends of Lillie Houston, Rialto USD 2014

**I.D. NUMBER**

1368708

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

- **CMP:** campaign paraphernalia/misc.
- **CNS:** campaign consultants
- **CTB:** contribution (explain nonmonetary)*
- **CVC:** other donations
- **FL:** candidate filing/ballot fees
- **FND:** fundraising events
- **IND:** independent expenditure supporting/opposing others (explain)*
- **LEG:** legal defense
- **LIT:** campaign literature and mailings
- **MBR:** member communications
- **MTG:** meetings and appearances
- **OFD:** office expenses
- **PET:** petition circulating
- **PHD:** phone banks
- **POL:** polling and survey research
- **POS:** postage, delivery and messenger services
- **PRO:** professional services (legal, accounting)
- **PRR:** print ads
- **RAH:** 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/purpose travel, lodging, and meals
- **TSF:** transfer between committees of the same candidate/sponsor
- **VCT:** voter registration
- **WEB:** information technology costs (internet, e-mail)

### NAME AND ADDRESS OF PAYEE

<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>Scott Smith</td>
<td>LIT</td>
<td>Literature</td>
<td>125.00</td>
</tr>
<tr>
<td>Victorville CA 92394</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4Over, Inc.</td>
<td>LIT</td>
<td>Literature</td>
<td>1135.39</td>
</tr>
<tr>
<td>Glendale CA 91202</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gabriel James</td>
<td>FND</td>
<td>fundraiser</td>
<td>150.00</td>
</tr>
<tr>
<td>San Bernardino CA 92410</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>San Bernardino County - Registrar of Voters</td>
<td>FIL</td>
<td>candidate statement</td>
<td>1420.47</td>
</tr>
<tr>
<td>San Bernardino CA 92415</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Black Culture Foundation</td>
<td>CVC</td>
<td>donation</td>
<td>180.00</td>
</tr>
<tr>
<td>San Bernardino CA 92411</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**SUBTOTAL $**

3010.66

---

**FPPC Form 460 (June/01)**

FPPC Toll-Free Helpline: 866/ASK-FPPC
## Schedule E
(Continuation Sheet)
Payments Made

<table>
<thead>
<tr>
<th>NAME OF FILER</th>
<th>T.D. NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Friends of Lillie Houston, Rialto USD 2014</td>
<td>1368708</td>
</tr>
</tbody>
</table>

### 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 |
| CNS | campaign consultants              | MTG | meetings and appearances |
| COTB| contribution (explain nonmonetary)* | CFC | office expenses |
| CVC | civic donations                   | PET | petition circulating |
| FFL | candidate filing/ballot fees      | PHO | phone banks |
| FND | fundraising events                | POL | polling and survey research |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services |
| LEG | legal defense                     | PRO | professional services (legal, accounting) |
| LIT | campaign literature and mailings  | PRT | print ads |
| RCD | radio airtime and production costs|
| RPD | returned contributions            |
| SAL | campaign workers' salaries        |
| TEL | t.v. or cable airtime and production costs |
| TRC | candidate travel, lodging, and meals |
| TRS | spouse travel, lodging, and meals |
| TSF | transfer between committees of the same candidate/sponsor |
| VOT | voter registration                |
| WEB | information technology costs (internet, e-mail) |

### NAME AND ADDRESS OF PAYEE

<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>Dolores Amstead</td>
<td>PRO</td>
<td>report services</td>
<td>100.00</td>
</tr>
<tr>
<td>San Bernardino CA 92407</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Black Culture Foundation</td>
<td></td>
<td>advertising</td>
<td>180.00</td>
</tr>
<tr>
<td>San Bernardino CA 92411</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>California Outdoor</td>
<td></td>
<td>signs</td>
<td>815.00</td>
</tr>
<tr>
<td>Santa Ana CA 92707</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**SUBTOTAL $ 1095.00**

FPPC Form 460 (June 01)
FPPC Toll-Free Helpline: 866/ASK-FPPC