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

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.
   - [X] 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:
   - [X] Preelection Statement
   - [ ] Quarterly Statement
   - [ ] Semi-annual Statement
   - [ ] Termination Statement
     (Also file a Form 410 Termination)
   - [ ] Amendment (Explain below)
     - [X] Include non itemized contributions and correct dates on
       transactions that were in Sept, not Oct

3. Committee Information
   COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE)
   Horner For School Board

   I.D. NUMBER
   Pending

   STREET ADDRESS (NO P.O. BOX)

   CITY STATE ZIP CODE AREA CODE/PHONE
   Morgan Hill CA 95037 (408) 776-9513

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

   CITY STATE ZIP CODE AREA CODE/PHONE

   OPTIONAL: FAX / E-MAIL ADDRESS
   anhorner@verizon.net

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 10/21/2014
   By Jayne Perryman
   Signature of Treasurer or Assistant Treasurer

   Executed on 10/21/2014
   By Ann Horner
   Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

   Executed on
   By
   Signature of Controlling Officeholder, Candidate, State Measure Proponent

   Executed on
   By
   Signature of Controlling Officeholder, Candidate, State Measure Proponent

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5. **Officeholder or Candidate Controlled Committee**

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ann Horner</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

governing Board member: Morgan Hill Unified School District

**RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)**

<table>
<thead>
<tr>
<th>CITY</th>
<th>STATE</th>
<th>ZIP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Morgan Hill</td>
<td>CA</td>
<td>95037</td>
</tr>
</tbody>
</table>

**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>
<th>CONTROLLED COMMITTEE?</th>
</tr>
</thead>
</table>

6. **Primarily Formed Ballot Measure Committee**

<table>
<thead>
<tr>
<th>NAME OF BALLOT MEASURE</th>
<th>BALLOT NO. OR LETTER</th>
<th>JURISDICTION</th>
<th>SUPPORT</th>
<th>OPPOSE</th>
</tr>
</thead>
</table>

**Identify the controlling officeholder, candidate, or state measure proponent, if any.**

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT</th>
<th>OFFICE SOUGHT OR HELD</th>
<th>DISTRICT NO. IF ANY</th>
</tr>
</thead>
</table>

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

*Attach continuation sheets if necessary*
**Contributions Received**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Monetary Contributions</td>
<td></td>
<td>974.00</td>
</tr>
<tr>
<td>2.</td>
<td>Loans Received</td>
<td></td>
<td>200.00</td>
</tr>
<tr>
<td>3.</td>
<td>SUBTOTAL CASH CONTRIBUTIONS</td>
<td>1,174.00</td>
<td>1,174.00</td>
</tr>
<tr>
<td>4.</td>
<td>Nonmonetary Contributions</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>5.</td>
<td>TOTAL CONTRIBUTIONS RECEIVED</td>
<td>1,174.00</td>
<td>1,174.00</td>
</tr>
</tbody>
</table>

**Expenditures Made**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.</td>
<td>Payments Made</td>
<td>553.13</td>
<td>553.13</td>
</tr>
<tr>
<td>7.</td>
<td>Loans Made</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>8.</td>
<td>SUBTOTAL CASH PAYMENTS</td>
<td>553.13</td>
<td>553.13</td>
</tr>
<tr>
<td>9.</td>
<td>Accrued Expenses (Unpaid Bills)</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>10.</td>
<td>Nonmonetary Adjustment</td>
<td>0.00</td>
<td>0.00</td>
</tr>
<tr>
<td>11.</td>
<td>TOTAL EXPENDITURES MADE</td>
<td>553.13</td>
<td>553.13</td>
</tr>
</tbody>
</table>

**Current Cash Statement**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>12.</td>
<td>Beginning Cash Balance</td>
<td>0.00</td>
<td></td>
</tr>
<tr>
<td>13.</td>
<td>Cash Receipts</td>
<td>1,174.00</td>
<td></td>
</tr>
<tr>
<td>14.</td>
<td>Miscellaneous Increases to Cash</td>
<td>0.00</td>
<td></td>
</tr>
<tr>
<td>15.</td>
<td>Cash Payments</td>
<td>553.13</td>
<td></td>
</tr>
<tr>
<td>16.</td>
<td>ENDING CASH BALANCE</td>
<td>620.87</td>
<td></td>
</tr>
</tbody>
</table>

**Cash Equivalents and Outstanding Debts**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>18.</td>
<td>Cash Equivalents</td>
<td>0.00</td>
<td></td>
</tr>
<tr>
<td>19.</td>
<td>Outstanding Debts</td>
<td>200.00</td>
<td></td>
</tr>
</tbody>
</table>
## Schedule A
### Monetary Contributions Received

**NAME OF FILER:** Horner For School Board

<table>
<thead>
<tr>
<th>Date Received</th>
<th>Full Name, Street Address and Zip Code of Contributor</th>
<th>Contributor Code</th>
<th>Occupation and Employer</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>09/07/2014</td>
<td>Adam Escoto, Morgan Hill, CA 95037</td>
<td>IND</td>
<td>Retired Educator</td>
<td>200.00</td>
<td>200.00</td>
<td>G2014 $200.00</td>
</tr>
<tr>
<td>09/12/2014</td>
<td>Judy Lopez, Gilroy, CA 95020</td>
<td>IND</td>
<td>Manager Ponzinni Garage</td>
<td>100.00</td>
<td>100.00</td>
<td>G2014 $100.00</td>
</tr>
<tr>
<td>09/12/2014</td>
<td>Cecelia Ponzinni, Morgan Hill, CA 95037</td>
<td>IND</td>
<td>Self Employed Owner Ponzinni Garage</td>
<td>100.00</td>
<td>100.00</td>
<td>G2014 $100.00</td>
</tr>
<tr>
<td>09/20/2014</td>
<td>John Hogan, Los Gatos, CA</td>
<td>IND</td>
<td>CEO Teenforce</td>
<td>150.00</td>
<td>150.00</td>
<td>G2014 $150.00</td>
</tr>
</tbody>
</table>

**Schedule A Summary**

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ................................................................. $ 550.00
2. Amount received this period – unitemized monetary contributions of less than $100 ........................................... $ 424.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ................. **TOTAL $ 974.00**

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

**Statement covers period from 01/01/2014 through 09/30/2014**

I.D. NUMBER: Pending

**FPPC Form 460 (January/05)**
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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## Schedule B – Part 1

### Loans Received

**Statement covers period from** 01/01/2014 **through** 09/30/2014

**I.D. NUMBER**

**SCHEDULE B - PART 1**

Type or print in ink.

Amounts may be rounded to whole dollars.

**NAME OF FILER**

Horner For School Board

**FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER**

John and Ann Horner
Morgan Hill, CA 95037

**OCCUPATION AND EMPLOYER**

Business Owners
Thinker Toys

**IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)**

**OUTSTANDING BALANCE BEGINNING THIS PERIOD**

$0.00

**AMOUNT RECEIVED THIS PERIOD**

$200.00

**AMOUNT PAID OR FORGIVEN THIS PERIOD**

$0.00

**OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD**

$200.00

**INTEREST PAID THIS PERIOD**

$0.00

**ORIGINAL AMOUNT OF LOAN**

$200.00

**CALENDAR YEAR**

08/21/2014

**PER ELECTION**

$2014

**CUMULATIVE CONTRIBUTIONS TO DATE**

$2014

**DATE DUE**

10/06/2014

**DATE INCURRED**

10/06/2014

**NAME OF LENDER**

John and Ann Horner
Morgan Hill, CA 95037

**ADDRESS**

Morgan Hill, CA 95037

**ZIP CODE**

95037

**DATE INCURRED**

10/06/2014

**CALIFORNIA FORM 460 (January/05)**

FPPC Toll-Free Helpline: 886/ASK-FPPC (866/275-3772)

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### Schedule B Summary

1. Loans received this period .......................................................... $ 200.00
   (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 $ 200.00
   (May be a negative number)

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

-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 Payments Made

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

**NAME OF FILER**

Horner For School Board

**Statement covers period**

from 01/01/2014

through 09/30/2014

I.D. NUMBER

Pending

### 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** 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
- **MBR** member communications
- **MTG** meetings and appearances
- **OCF** office expenses
- **PDC** petition circulating
- **PHO** 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** 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)

### NAME AND ADDRESS OF PAYEE

(IF COMMITTEE, ALSO ENTER I.D. NUMBER)

<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>Staples Morgan Hill</td>
<td>CMP</td>
<td>Easel Paper, Post-it notes etc for Meet the Candidate Group Exercises</td>
<td>104.80</td>
</tr>
<tr>
<td>Morgan Hill, CA 95037</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Signs On The Cheap</td>
<td>CMP</td>
<td>Lawn signs and stakes</td>
<td>340.88</td>
</tr>
<tr>
<td>Austin, TX 78758</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 $**

445.68

### Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ................................................................. $ 445.68

2. Unitemized payments made this period of under $100 ................................................................. $ 107.45

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ................................................................. $ 0.00

4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ............................................ TOTAL $ 553.13