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

SEE INSTRUCTIONS ON REVERSE

Statement covers period from ___ through ___

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

2. Type of Statement:
   - Preelection Statement
   - Semi-annual Statement
   - Termination Statement
   - Amendment (Explain below)

3. Committee Information
   - I.D. NUMBER: 1280884
   - COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
     West Covina Police Officers Association PAC Sponsored by West Covina Police Officers Association
   - STREET ADDRESS (NO P.O. BOX)
     West Covina, CA 91790
   - MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
     Inglewood, CA 90301
   - CITY
     West Covina
   - CITY
     Inglewood
   - STATE
     CA
   - STATE
     CA
   - ZIP CODE
     91790
   - ZIP CODE
     90301
   - 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, it is true and correct. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

   Executed on SEP 24 2018
   By ________________________________
   Signature of Treasurer(s)

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

www.netfile.com
5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

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

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

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?

YES NO

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

CITY STATE ZIP CODE AREA CODE/PHONE

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.

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
**Contributions Received**

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A (Total This Period)</th>
<th>Column B (Calendar Year Total to Date)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Monetary Contributions</td>
<td>Schedule A, Line 3 $0.00</td>
<td>$9,675.00</td>
</tr>
<tr>
<td>2. Loans Received</td>
<td>Schedule B, Line 3 $0.00</td>
<td>$30,000.00</td>
</tr>
<tr>
<td>3. SUBTOTAL CASH CONTRIBUTIONS</td>
<td>Add Lines 1 + 2 $0.00</td>
<td>$39,675.00</td>
</tr>
<tr>
<td>4. Nonmonetary Contributions</td>
<td>Schedule C, Line 3 $0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>5. TOTAL CONTRIBUTIONS RECEIVED</td>
<td>Add Lines 3 + 4 $0.00</td>
<td>$39,675.00</td>
</tr>
</tbody>
</table>

**Expenditures Made**

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A (Total This Period)</th>
<th>Column B (Calendar Year Total to Date)</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Payments Made</td>
<td>Schedule E, Line 4 $1,000.00</td>
<td>$1,312.49</td>
</tr>
<tr>
<td>7. Loans Made</td>
<td>Schedule H, Line 3 $0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>8. SUBTOTAL CASH PAYMENTS</td>
<td>Add Lines 6 + 7 $1,000.00</td>
<td>$1,312.49</td>
</tr>
<tr>
<td>9. Accrued Expenses (Unpaid Bills)</td>
<td>Schedule F, Line 3 $250.00</td>
<td>$250.00</td>
</tr>
<tr>
<td>10. Nonmonetary Adjustment</td>
<td>Schedule C, Line 3 $0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>11. TOTAL EXPENDITURES MADE</td>
<td>Add Lines 8 + 9 + 10 $1,250.00</td>
<td>$1,562.49</td>
</tr>
</tbody>
</table>

**Current Cash Statement**

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A (Total This Period)</th>
<th>Column B (Calendar Year Total to Date)</th>
</tr>
</thead>
<tbody>
<tr>
<td>12. Beginning Cash Balance</td>
<td>Previous Summary Page, Line 16 $146,981.95</td>
<td>$145,981.95</td>
</tr>
<tr>
<td>13. Cash Receipts</td>
<td>Column A, Line 3 $0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>14. Miscellaneous Increases to Cash</td>
<td>Schedule I, Line 4 $0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>15. Cash Payments</td>
<td>Column A, Line 6 above $1,000.00</td>
<td>$145,981.95</td>
</tr>
<tr>
<td>16. ENDING CASH BALANCE</td>
<td>Add Lines 12 + 13 + 14, then subtract Line 15 $146,981.95</td>
<td>$145,981.95</td>
</tr>
</tbody>
</table>
| **If this is a termination statement, Line 16 must be zero.**

**LOAN GUARANTEES RECEIVED**

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A (Total This Period)</th>
<th>Column B (Calendar Year Total to Date)</th>
</tr>
</thead>
<tbody>
<tr>
<td>17. LOAN GUARANTEES RECEIVED</td>
<td>Schedule B, Part 2 $0.00</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

**Cash Equivalents and Outstanding Debts**

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A (Total This Period)</th>
<th>Column B (Calendar Year Total to Date)</th>
</tr>
</thead>
<tbody>
<tr>
<td>18. Cash Equivalents</td>
<td>See instructions on reverse $0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>19. Outstanding Debts</td>
<td>Add Line 2 + Line 9 in Column B above $30,350.00</td>
<td>$30,350.00</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A (Total This Period)</th>
<th>Column B (Calendar Year Total to Date)</th>
</tr>
</thead>
<tbody>
<tr>
<td>20. Contributions Received</td>
<td></td>
<td>$9,675.00</td>
</tr>
<tr>
<td>21. Expenditures Made</td>
<td></td>
<td>$39,675.00</td>
</tr>
</tbody>
</table>

**Expenditure Limit Summary for State Candidates**

<table>
<thead>
<tr>
<th>Date of Election (mm/dd/yy)</th>
<th>Total to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$___________</td>
</tr>
<tr>
<td></td>
<td>$___________</td>
</tr>
</tbody>
</table>

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

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).
## Schedule B - Part 1

### Loans Received

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>Name of Lender</th>
<th>Full Name, Street Address and Zip Code</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>
</tr>
</thead>
<tbody>
<tr>
<td>West Covina Police Officers Association</td>
<td>West Covina Police Officers Association</td>
<td>$30,000.00</td>
<td>$0.00</td>
<td>$30,000.00</td>
<td>0.00 % Rate</td>
<td>$30,000.00</td>
<td>39,675.00</td>
<td>PER ELECTION**</td>
</tr>
<tr>
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</tr>
</tbody>
</table>

### Schedule B Summary

1. Loans received this period .......................................................... $ 0.00
   (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 $ 0.00
   Enter the net here and on the Summary Page, Column A, Line 2.

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.
### Schedule D Summary of Expenditures

Supporting/Opposing Other Candidates, Measures and Committees

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

Statement covers period

<table>
<thead>
<tr>
<th>from</th>
<th>through</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/01/2018</td>
<td>09/22/2018</td>
</tr>
</tbody>
</table>

CALIFORNIA FORM 460

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**NAME OF FILER**

West Covina Police Officers Association PAC Sponsored by West Covina Police Officers Association

**NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE**

<table>
<thead>
<tr>
<th>DATE</th>
<th>NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE</th>
<th>TYPE OF PAYMENT</th>
<th>DESCRIPTION</th>
<th>AMOUNT THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
</table>
| 08/21/2018 | Susan Rubio  
State Senator  
District: 22 | ✑ Monetary Contribution | Contribution | 1,000.00 | 1,000.00 | |

**Schedule D Summary**

1. Contributions and independent expenditures made this period of $100 or more. (Include all Schedule D subtotals.) ........................................... $ 1,000.00

2. Unitemized contributions and independent expenditures made this period of under $100 ................................................................................. $ 0.00

3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ............ TOTAL $ 1,000.00
### Schedule E Payments Made

**NAME OF FILER:** West Covina Police Officers Association PAC Sponsored by West Covina Police Officers Association  
**I.D. NUMBER:** 1280884  
**STATEMENT covers period from** 07/01/2018  
**through** 09/22/2018  
**Page 6 of 7**

**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
- LT campaign literature and mailings
- MBR member communications
- MTG meetings and appearances
- OIF office expenses
- PET petition circulating
- PHO phone banks
- POL polling and survey research
- POS postage, delivery and messenger services
- PRO professional services (legal, accounting)
- PRN public notice
- PRT print ads
- RAD radio time 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
- VOT voter registration
- WEB information technology costs (internet, e-mail)

<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>SUSAN RUBIO FOR SENATE 2018 (ID# 13926890)</td>
<td>CTB</td>
<td>Contribution</td>
<td>1,000.00</td>
</tr>
</tbody>
</table>

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

**SUBTOTAL** $1,000.00

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.) $1,000.00
2. Unitemized payments made this period of under $100 $0.00
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 $1,000.00
**Schedule F**

**Accrued Expenses (Unpaid Bills)**

**NAME OF FILER**
West Covina Police Officers Association PAC Sponsored by West Covina Police Officers Association

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

- OVP: 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
- LT: campaign literature and mailings
- 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
- PROF: 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
- TEB: information technology costs
- VOT: voter registration
- WEB: information technology costs (internet, e-mail)

**NAME AND ADDRESS OF CREDITOR**

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF CREDITOR</th>
<th>CODE OR DESCRIPTION OF PAYMENT</th>
<th>OUTSTANDING BALANCE BEGINNING OF THIS PERIOD</th>
<th>AMOUNT INCURRED THIS PERIOD</th>
<th>AMOUNT PAID THIS PERIOD</th>
<th>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Political Reporting Plus</td>
<td>PRO: Political Accounting - July, 2018</td>
<td>0.00</td>
<td>250.00</td>
<td>0.00</td>
<td>250.00</td>
</tr>
</tbody>
</table>

**SUBTOTALS $**

<table>
<thead>
<tr>
<th></th>
<th>INCURRED TOTALS $</th>
<th>PAID TOTALS $</th>
<th>NET $</th>
</tr>
</thead>
<tbody>
<tr>
<td>250.00</td>
<td>0.00</td>
<td>250.00</td>
<td>250.00</td>
</tr>
</tbody>
</table>

**Schedule F Summary**

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of $100 or more, plus total unitemized accrued expenses under $100.)

2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of $100 or more, plus total unitemized payments on accrued expenses under $100.)

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)

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