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



NAME OF FILER	1000			Date of	4104145	U Date Stamp 1777 CALIFO	ORNIA ZIGOZ
JAWANE HILTOI	N FOR CARSON CIT	Y COUNCIL 2015	5	This Filing	4/21/15	15 APR 21 PM 5:1	RM 434
AREA CODE/PHONE NU	JMBER	I.D. NUMBER (if applica	ble)		1009	1 101	Official Use Only
(310) 740-9363		1373690		Report No		CITY OF CARSO!	
STREET ADDRESS				☐ Amendmer	nt		
665 EAST UNIVE	ERSITY DRIVE			to Report No.			
CITY		STATE	ZIP CODE		1		
CARSON		CA	90746	No. of Pages			
1. Contributio	n(s) Received						
DATE RECEIVED	FULL NAME	E, STREET ADDRESS A	ND ZIP CODE OF CONTRIBI ENTER I.D. NUMBER)	UTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
4/20/15	Christopher Town 26022 Horseshoe Laguna Hills, CA	Circle			☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	President, Townsend Public Affairs	1,000.00  Check if Loan  **  Provide interest rate
					☐ IND☐ COM☐ OTH☐ PTY☐ SCC		☐ Check if Loan
					☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		Check if Loan  ———————————————————————————————————
Reason for Amendn	nent:		:			**Contributor Codes  IND — Individual  COM — Recipient Committee (oth  OTH — Other (e.g., business enti  PTY — Political Party  SCC — Small Contributor Commi	ty)

Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Y STARCEPHEN		Date Stamp	cover page california 460 FORM
	Statement covers period from January 1, 2015	Date of election if applicable:  (Month, Day, Year)  15 APR 23 M 1: 02	)	Page of
SEE INSTRUCTIONS ON REVERSE	through April 18, 2015	June 2, 2015		
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	mplete Parts 1, 2, 3, and 4. rimarily Formed Ballot Measure ommittee ) Controlled ) Sponsored (so Complete Part 6) rimarily Formed Candidate/ fficeholder Committee (so Complete Part 7)	2. Type of Statement:  Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination) Amendment (Explain below)	Specia	erly Statement al Odd-Year Report emental Preelection nent - Attach Form 495
	NUMBER 373690	Treasurer(s)  NAME OF TREASURER Sheri Butler MAILING ADDRESS 21724 Grace Avenue Unit 120		
STREET ADDRESS (NO P.O. BOX)  665 East University Drive  CITY STATE ZIP COE  Carson CA 90746  MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO	310-740-9363	Carson NAME OF ASSISTANT TREASURER, IF ANY MAILING ADDRESS	STATE ZIP COI CA 90745	
CITY STATE ZIP COD OPTIONAL: FAX / E-MAIL ADDRESS	DE AREA CODE/PHONE	OPTIONAL: FAX / E-MAIL ADDRESS	STATE ZIP COL	DE AREA CODE/PHONE
4. Verification I have used all reasonable diligence in preparing and reviewing to under penalty of perjury under the laws of the State of California (  Executed on	that the foregoing is true and correct.  By	wledge the information contained herein and in the Signature of Treasurer or Assistant Treasurer trolling Officeholder, Candidate, State Measure Proponent or Response	sible Officer of Sponsor	s is true and complete. I certify
Executed on	Ву	Signature of Controlling Officeholder, Candidate, State Measure Prop	onent	**************************************

5.	Officeholder or Candidate Controlled Comm	ittee	6.	Primarily Formed Ballo	t Measure	Committee	
	NAME OF OFFICEHOLDER OR CANDIDATE	200036-1		NAME OF BALLOT MEASURE			
	Jawane Hilton						
	OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRIC	CT NUMBER IF APPLICABLE)	•	BALLOT NO. OR LETTER	JURISDICTI	ION	SUPPORT
	Carson City Council						OPPOSE
	RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) C	ITY STATE ZIP					
	1008 Autumn Leaf Court Carson	, CA 90746		Identify the controlling offi	ceholder, ca	ındidate, or state meas	ure proponent, if any.
	987666 - 1987666 - 1987666 - 1987666			NAME OF OFFICEHOLDER, CAN	DIDATE, OR PI	ROPONENT	
	Related Committees Not Included in this Sta not included in this statement that are controlled by you contributions or make expenditures on behalf of your car	or are primarily formed to receive		OFFICE SOUGHT OR HELD	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	DISTRICT	NO. IF ANY
	COMMITTEE NAME	I.D. NUMBER			**************************************		
	NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Cand			
	HAME OF THE MODILIN	TYES NO		officeholder(s) or candidate(s)	for which th	is committee is primarily	formed.
	COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BO	<u> </u>		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT OR HE	SUPPORT OPPOSE
	CITY STATE ZIP C	ODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT OR HE	SUPPORT OPPOSE
(	COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICE US DEPOS OF		OSTIGE ACUCIET OF LIS	
_	· ·			NAME OF OFFICEHOLDER OR C.	ANDIDATE	OFFICE SOUGHT OR HE	SUPPORT OPPOSE
ì	NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT OR HE	ELD COURTORY
		YES NO		,			SUPPORT OPPOSE
(	COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BC	DX)				<u> </u>	
(	CITY STATE ZIP CO	DDE AREA CODE/PHONE		Attaci	n continuatio	on sheets if necessary	.*

## Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period
from January 1, 2015

through April 18, 2015

CALIFORNIA 460
FORM Page of 19

LD. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Jawane Hilton for Carson City Council 2015 1373690 Column A Column B Calendar Year Summary for Candidates Contributions Received TOTALTHIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE General Elections 21,879.00 21,879.00 1. Monetary Contributions ...... Schedule A, Line 3 \$ 1/1 through 6/30 7/1 to Date 19,150.00 19,150.00 SUBTOTAL CASH CONTRIBUTIONS ...... Add Lines 1 + 2 \$ 41.029.00 41,029.00 20. Contributions Received Nonmonetary Contributions ....... Schedule C, Line 3 21. Expenditures 41.029.00 41,029.00 5. TOTAL CONTRIBUTIONS RECEIVED ...... Add Lines 3 + 4 \$ Made Expenditures Made **Expenditure Limit Summary for State** 36,109.72 Candidates 0 Loans Made ..... Schedule H. Line 3 22. Cumulative Expenditures Made\* SUBTOTAL CASH PAYMENTS ...... Add Lines 6 + 7 \$ 36,109,72 36,109.72 (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy) 36,109.72 36,109.72 **Current Cash Statement** 12. Beginning Cash Balance .................................. Previous Summary Page, Line 16 \$ To calculate Column B. add 41.029.00 amounts in Column A to the corresponding amounts \*Amounts in this section may be different from amounts 14. Miscellaneous Increases to Cash ...... Schedule I, Line 4 from Column B of your last reported in Column B. 36,109,72 report. Some amounts in Column A may be negative 4.919.28 16. ENDING CASH BALANCE ........ Add Lines 12 + 13 + 14, then subtract Line 15 \$ figures that should be subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 17. LOAN GUARANTEES RECEIVED ...... Schedule B. Part 2 \$ carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts 18. Cash Equivalents ...... See instructions on reverse \$ 19. Outstanding Debts ...... Add Line 2 + Line 9 in Column B above \$ -FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

#### Schedule A **Monetary Contributions Received**

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

SCHEDULE A **CALIFORNIA** 

Statement covers period January 1, 2015 FORM from April 18, 2015 Page 4 of 19 through LD. NUMBER 1373690

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Jawane Hilton for Carson City Council 2015

**AMOUNT** PER ELECTION CUMULATIVE TO DATE FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR IF AN INDIVIDUAL, ENTER DATE CONTRIBUTOR RECEIVED THIS OCCUPATION AND EMPLOYER CALENDAR YEAR TO DATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED CODE \* (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) **VIND** Gwendolyn White COM Retired 1/10/15 900.00 900.00 1753 Wes 125th Street ПОТН Los Angeles, CA 90047 PTY □scc **ZIND** Brian Cook ПСОМ Sheriff. 1/26/15 100.00 100.00 974 Sagebank □ OTH Los Angeles County ☐ PTY Carson, CA 90746 Sheriff Department □scc **VIND** Carlisha Millage COM Manager, 1/26/15 150.00 150.00 234 West 91st Street ПОТН Department of Motor Los Angeles, CA 90003 PTY Vehicle SCC **VIND** Franklin Sellers ПСОМ Self-Employee, 1/26/15 200.00 200.00 19819 Midtown Avenue ПОТН Pastor Carson, CA 90746 PTY SCC **☑**IND Deterius Frierson Advisor. □ COM 1/26/15 2894 Herrington Avenue #K 200.00 200.00 Long Beach Job Corp. Потн San Bernardino, CA 92405 PTY □ SCC SUBTOTAL \$ 1.550.00

#### Schedule A Summary

	Amount received this period – itemized monetary contributions.  (Include all Schedule A subtotals.)		. \$	19,550.00
	Amount received this period – unitemized monetary contributions of less than \$100			2,329.00
3.	Total monetary contributions received this period.	TOTA:	A	21.879.00

\*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

FPPC Form 460 (January/05)

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

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA FORM

Statement covers period

550.00

SUBTOTAL \$

		to willote	uonars,	from January	1, 2015	F	ORM 4:0U
				through April	18, 2015	Page_	5_ of19
NAME OF FILER						I.D. NUI	MBER
Jawane H	ilton for Carson City Council 2015					13736	590
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 CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
1/31/15	Steven C. Bradford 13609 Purche Avenue Gardena, CA 90249	☑IND □COM □OTH □PTY □SCC	Retired	100.00	100	.00	
1/31/15	Steven Jefferson 323 Faley Lane Placentia, CA 92870	Z IND   COM   OTH   PTY   SCC	Teacher, John Muir Charter School	100.00	100	00	
1/31/15	Teresa Murdock P.O. Box 465 Atwood, CA 92811	Z IND   COM   OTH   PTY   SCC	Sales Representative AT&T	100.00	100.	00	
1/31/15	Charles Alford 19520 Scobey Avenue Carson, CA 90745	ZIND COM OTH PTY SCC	Longshoreman, ILWU	150.00	150.	00	
1/31/15	Jennifer Mason 13148 Day Street #E402	☑IND □COM □OTH	Processor Word and Brown	100.00	100.	00	

□ PTY □ SCC

\*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

Moreno Valley, CA 92553

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

**CALIFORNIA** 

Statement covers period

from \_\_

January 1, 2015

through April 18, 2015 Page									
Jawane Hilton for Carson City Council 2015  1373									
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 I CALENDAR YE. (JAN. 1 - DEC. (	AR	PER ELECTIO TO DATE (IF REQUIRED		
1/31/15	Suzanne Brown 2421 West 85th Street Inglewood, CA 90305	ZIND COM OTH PTY SCC	Director, Los Angeles Urban League	100.00	100.00				
1/31/15	Walter Whitehead 13006 Kornblum Avenue #H Hawthorne, A 90250	☑IND □COM □OTH □PTY □SCC	Registered Private Wealth Associate, Merrill Lynch	100.00	100.00				
1/31/15	Reginald Tate 28318 Granite Court Valencia, CA 91354	☑IND □ COM □ OTH □ PTY □ SCC	Depot X, Los Angeles County	100.00	100.0	0			
1/31/15	Harry Eaves 20303 Kaiser Circle Carson, CA 90746	☑IND □COM □OTH □PTY □SCC	Self-Employed, Pastor/Realtor	100.00	100.0	0			
1/31/15	Brandi Murdock 20029 Alvo Avenue Carson, CA 90746	☑IND □COM □OTH □PTY □SCC	Self-Employed, Realtor	950.00	950.00				
	SUBTOTAL\$ 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 A (Continuation Sheet)

Type or print in ink.

SCHEDULE A (CONT.)
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wonetary	Contributions Received	to whole d	· ·	Statement cov from January	ers period 1, 2015	CALIF FO		<b>4</b> 60
				through April	18, 2015	Page	of	19
NAME OF FILER						I.D. NUM	BER	
Jawane Hil	ton for Carson City Council 2015					137369	<del>}</del> 0	
DATE	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTO	R CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	AMOUNT RECEIVED THIS	CUMULATIVE TO CALENDAR Y			LECTION DATE

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)
1/31/15	Panattoni Development Company 20411 SW Birch Street Suite 200 Newport Beach, CA 92660	☐IND ☐COM ØOTH ☐PTY ☐SCC		500.00	500.00	
1/31/15	Deidra Vandiegriff 1021 Gladwick Carson, CA 90746	☑IND □COM □OTH □PTY □SCC	Community Development Specialist, City of Long Beach	100.00	100.00	
2/13/15	James Peoples 19202 Broadacre Avenue Carson, CA 90746	☑IND □COM □OTH □PTY □SCC	Economist, Retired	100.00	100.00	
2/13/15	Robert Felix 873 Gladwick Carson, CA 90746	☑IND □COM □OTH □PTY □SCC	Los Angeles Police Dept., Retired	100.00	100.00	
2/13/15	California Ticket Defense Legal Service 11455 Paramount Blvd., Suite H Downey, CA 90241	□IND □COM ☑OTH □PTY □SCC		100.00	100.00	
A-10171			SUBTOTAL\$	900.00		

\*Contributor Codes

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(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party

SCC - Small Contributor Committee

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

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

**CALIFORNIA** 

**FORM** 

Statement covers period

January 1, 2015

				through April	18, 2015	Page <u>£</u>	3 of[9
NAME OF FILER  Jawane Hilton for Carson City Council 2015  13							
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN. 1 - DEC. 3	AR	PER ELECTION TO DATE (IF REQUIRED)
2/13/15	Pro Color Lab West 16435 Ishida Gardena, CA 90248	☐IND ☐COM ØOTH ☐PTY ☐SCC		100.00	100.0	0	
1/26/15	Lauren Wilson 19527 Eddington Drive Carson, CA 90746	☑IND □COM □OTH □PTY □SCC	Educator, Los Angeles Unified School District	100.00	100.0	0	
2/18/15	Carson Companies 100 Bayview Circle #3500 Newport Beach, CA 92660	☐IND ☐COM ØOTH ☐PTY ☐SCC		2,000.00	2,000.0	0	MARIELLA PROGRAMA CONTROL OF THE CON
2/19/15	Bel Canto Properties, LLC 17803 S. Santa Fe Avenue Rancho Dominguez, CA 90221	☐IND ☐COM ØOTH ☐PTY ☐SCC		600.00	600.0	0	
2/19/15	Leroy Thomas 6709 La Tijera Blvd. Unit 429 Los Angeles, CA 90045	☑IND □COM □OTH □PTY □SCC	Owner, Buffalo Wild Wings	500.00	500.00	0	
	:		SUBTOTAL \$	3,300.00			

\*Contributor Codes

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(other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

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

SCHEDULE A TOON I.	HEDULE A (CONT.)
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Statement covers period

Wonetary Contributions Received Amounts may be rounded to whole dollars.			Statement cov fromJanuar	1, 2015 CALI		IFORNIA 460			
				through April	18, 2015	Page	9 of 19		
I.D. Y									
Jawane Hilton for Carson City Council 2015									
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 CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)		
2/23/15	Ervin Kinsey 2928 West 131st Street Gardena, CA 90249	☑IND □COM □OTH □PTY □SCC	Retired, Teacher	100.00	100.	.00			
2/23/15	Curtis Morris 842 E. Penrod Drive Carson, CA 90746	ZIND COM OTH PTY SCC	Selr-Employed, Pastor	100.00	100.	00			
2/23/15	Shane Scott 19008 Kay Avenue Cerritos, CA 90703	☑IND □COM □OTH □PTY □SCC	Selr-Employed, Pastor	100.00	100.	00			
2/23/15	James Perkins 525 West 58th Street Los Angeles, CA 90007	☑IND □COM □OTH □PTY □SCC	Selr-Employed, Pastor	100.00	100.	00			
2/23/15	Franklin Sellers 19819 Midtown Avenue Carson, CA 90746	☑IND □COM □OTH □PTY □SCC	Selr-Employed, Pastor	100.00	100.	00			
			SUBTOTAL \$	500.00					

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SCC - Small Contributor Committee

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

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

SCHEDULE A	(CONT.)
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CALIFORNIA FORM

Statement covers period

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				through April	18, 2015	Page_10_ of_19_
NAME OF FILER						I.D. NUMBER
Jawane miii	ton for Carson City Council 2015	(See Sure on the original of t			1	373690
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 D CALENDAR YEA (JAN. 1 - DEC. 3	R TO DATE
2/24/15	Christopher Townsend 26002 Horseshoe Circle Laguna Hills, CA 92653	☑IND □COM □OTH □PTY □SCC	President, Townsend Public Affairs	1,000.00	1,000.00	)
2/24/15	Norwalk Unocal Inc., DBA Autocar/USA 11948 Regent View Avenue Downey, CA 90241	□IND □COM ☑OTH □PTY □SCC		1,000.00	1,000.00	)
2/25/15	Deterius Frierson 525 Wier Road San Bernardino, CA 92408	☑IND □COM □OTH □PTY □SCC	Advisor, Long Beach Job Corp.	100.00	100.00	)
2/25/15	Barbara Johnson 5000 Sweetwater Drive Benton, LA 71006	☑IND □COM □OTH □PTY □SCC	Trucker, Trinity Trucking	500.00	500.00	)
2/27/15	Watson Land Company 22010 Wilmington Avenue Carson, CA 90745	□IND □COM ☑OTH □PTY □SCC	:	1,000.00	1,000.00	
			SUBTOTAL \$	3,600.00		

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

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

SCHEDULE A (CONT.)

Statement covers period

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				through April	18, 2015	Page_	11 of 19
NAME OF FILER			<u>↓</u>			I.D. NUI	MBER
Jawane Hi	lton for Carson City Council 2015	NY XX				13736	90
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD, NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)
3/2/15	Carson El Camino, LLC 10751 Wilshire Blvd. Suite 1207 Los Angeles, CA 90024	☐IND ☐COM ØOTH ☐PTY ☐SCC		2,000.00	2,000	.00	
3/2/15	National Assoc. of Industrial & Office Properties 30151 Tomas Rancho Santa Margarita, CA 92688	☐IND ☐COM ØOTH ☐PTY ☐SCC		500.00	500.	.00	
3/2/15	Biz Fed PAC 455 Capital Mall, Suite 600 Sacramento, CA 95814	☐IND ☐COM ☐OTH ☐PTY ☑SCC		500.00	500.	.00	
3/2/15	Steven Wright 5742 10th Avenue Los Angeles, CA 90043	☑IND □COM □OTH □PTY □SCC		. 100.00	100.	00	
3/9/15	Gipson for Assembly 2016 (1373829) 3700 Wilshire Blvd. Suite 1050B Los Angeles, CA 90040	☐IND ☐COM ☐OTH ☐PTY ☐SCC		2,000.00	2,000.	00	
			SUBTOTAL \$	5,100.00			

\*Contributor Codes

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OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

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iaioiictai y	Contributions Received	to whole		Statement cov fromJanuary	y 1, 2015	CAL F	orm 460
				through April	18, 2015	Page	12_ of_19
NAME OF FILER							JMBER
Jawane Hi	lton for Carson City Council 2015				NAME OF THE PROPERTY OF THE PR	1373	690
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 CALENDAR Y (JAN. 1 - DEC	/EAR	PER ELECTION TO DATE (IF REQUIRED)
4/10/15	Yolanda Hill 5747 7th Avenue Los Angeles, CA 90043	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired, AT&T	100.00	100	.00	
4/10/15	Carson Estate Trust 100 Bayview Circle #3500 Newport Beach, CA 92660	☐IND ☐COM ØOTH ☐PTY ☐SCC		2,500.00	2,500	.00	
2/25/15	Jarvis Young 5329 S. Chariton Avenue Los Angeles, CA 90056	☑IND □COM □OTH □PTY □SCC	Retired	100.00	100	.00	
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
	·	□IND □COM □OTH □PTY □SCC				The state of the s	
			SUBTOTAL	2,700.00			

\*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

S	ched	ule	B -	Part	tracella
I	nane	Por	oive	ad	

\*\* If required.

Type or print in ink. Amounts may be rounded

SCHEDULE B - PART 1
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Schedule B – Part 1 Loans Received	Am-	ounts may be ro to whole dollar			Statement cov from Januar	y 1, 2015	CALIFORN FORM	<sup>IA</sup> 460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Jawane Hilton for Carson City Council 20	015				through April	18, 2015	Page 170 I.D. NUMBER 1373690	of
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER LD. 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 PAÍI OR FORGIVE THIS PERIOD	N. CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Jawane Hilton 1008 Autumn Leaf Court Carson, CA 90746  T☑ IND □ COM □ OTH □ PTY □ SCC	Self Employed, Senior Pastor, City of the Hill Church, Carson, CA	s0	\$_9,600.00	PAID  S FORGIVEN  S S	\$ 9,600.00 6/10/15 DATE DUE	10 % RATE	\$ 9600.00 1/9/15 DATE INCURRED	\$ 9,600.00 PER ELECTION** \$ 9,600.00
Jawane Hilton 1008 Autumn Leaf Court Carson, CA 90746	Self Employed, Senior Pastor, City of the Hill Church, Carson, CA	s0	s_1,500.00	PAID  S FORGIVEN  S	\$ 1,550.00 6/10/15 DATE DUE	10 % RATE	\$ 1550.00 2/23/15 DATE INCURRED	s 1,550.00 PER ELECTION ** s 1,550.00
Gipson for Assembly 2016 (1373829) 3700 Wilshire Blvd. Ste 1050B Los Angeles, CA 90010  To the property of the		s0	s_8,000.00	PAID  \$ FORGIVEN	\$ 8,000.00 6/10/15 DATE DUE	% RATE	\$ 8000.00 4/10/15 DATE INCURRED	\$ 8,000.00 PER ELECTION ** \$ 8,000.00
		SUBTOTALS \$	\$	>	\$	\$		
Schedule B Summary  1. Loans received this period  (Total Column (b) plus unitemized loans	s of less than \$100.)				19,150.00	i	Contributor Codes D – Individual	
<ol> <li>Loans paid or forgiven this period (Total Column (c) plus loans under \$100 (Include loans paid by a third party that</li> <li>Net change this period. (Subtract Line Enter the net here and on the Summary</li> </ol>	paid or forgiven.) are also itemized on Sched 2 from Line 1.)	lule A.)				O	OM – Recipient Co	PTY or SCC) business entity)
*Amounts forgiven or paid by another party also r	must be reported on Schedule A.							

#### Schedule E Payments Made

legal defense

campaign literature and mailings

Type or print in ink.

Amounts may be rounded to whole dollars.

PRT

print ads

Statement covers period from January 1, 2015	california 460
through April 18, 2015	Page of
	I.D. NUMBER
	1373690

VOT voter registration

WEB information technology costs (internet, e-mail)

00112011120

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LEG

Jawane Hilton for Carson City Council 2015

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. campaign paraphernalia/misc. CVP MBR member communications RAD radio airtime and production costs campaign consultants MTG meetings and appearances returned contributions contribution (explain nonmonetary)\* office expenses SAL campaign workers' salaries CVC civic donations petition circulating t.v. or cable airtime and production costs candidate filing/ballot fees phone banks candidate travel, lodging, and meals fundraising events polfing and survey research staff/spouse travel, lodging, and meals postage, delivery and messenger services ND independent expenditure supporting/opposing others (explain)\* transfer between committees of the same candidate/sponsor

professional services (legal, accounting)

NAME AND ADDRESS OF PAYEE CODE AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) OR DESCRIPTION OF PAYMENT Campaign LA 15518 South Broadway Street **CMP** 1.836.00 Gardena, CA 90248 John F. Kennedy Alliance LIT 1.365.00 3700 Wilshire Blvd., #1050B Los Angeles, CA 90010 Courtney Lindberg Photography LIT 525.00 8002 West 4th Street Los Angeles, CA 90048

#### Schedule E (Continuation Sheet) Payments Made

CVP campaign paraphernalia/misc.

candidate filing/ballot fees

contribution (explain nonmonetary)\*

campaign consultants

CVC civic donations

FJL

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

MBR member communications

office expenses

phone banks

petition circulating

meetings and appearances

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

PET

PHO

Statement covers period **CALIFORNIA** FORM January 1, 2015 from April 18, 2015 through. I.D. NUMBER

RAD radio airtime and production costs

t.v. or cable airtime and production costs

candidate travel, lodging, and meals

returned contributions

SAL campaign workers' salaries

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Jawane Hilton for Carson City Council 2015 1373690

fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)\* transfer between committees of the same candidate/sponsor postage, delivery and messenger services LEG legal defense professional services (legal, accounting) VOT voter registration 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 Political Data, Inc. P.O. Box 59570 LIT 850 97 Norwalk, CA 90652 Voter Guide Slate Card 6285 E. Spring Street, Suite 202 LIT 1.212.00 Long Beach, AC 90808 Target Marketing, USA 22981 Calle Azorin LIT 269.04 Mission Viego, CA 92692 Cognetix 2912 Old Bennett Ridge Road LIT 655.57 Santa Rosa, CA 95404 Independent Voters League 3700 Wilshire Blvd., #1050B LIT 250.00 Los Angeles, CA 90010 \* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$

3.237.58

#### Schedule E (Continuation Sheet) Payments Made

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

SCHEDULE	E (CONT.	.)
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Statement covers period CALIFORNIA January 1, 2015 April 18, 2015 through SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Jawane Hilton for Carson City Council 2015 1373690

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. campaign paraphernalia/misc. RAD radio airtime and production costs MBR member communications CNS campaign consultants MTG meetings and appearances RFD returned contributions contribution (explain nonmonetary)\* office expenses SAL campaign workers' salaries CVC civic donations petition circulating t.v. or cable airtime and production costs candidate filing/ballot fees PHO phone banks candidate travel, lodging, and meals fundraising events polling and survey research staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)\* postage, delivery and messenger services transfer between committees of the same candidate/sponsor legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings WEB information technology costs (internet, e-mail) PRT print ads NAME AND ADDRESS OF PAYEE CODE OR AMOUNT PAID DESCRIPTION OF PAYMENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Overland Strategies LLC 13300 Victory Blvd. #362 LIT 6.998.00 Van Nuys, CA 91401 Bank of America Wire Fee 870 E. Del Amo Blvd, 25.00 Carson, CA 90746 Southern California Edison Security Deposit for Electric Company P.O. Box 600 135.00 Rosemead, CA 91770

Pay Pal Fees for online donations P.O. Box 105658 191.32 Atlanta, GA 30348 Overland Strategies LLC

13300 Victory Blvd. #362 LIT Van Nuys, CA 91401

SUBTOTAL \$

13.313.32

5,964.00

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

#### Schedule E (Continuation Sheet) Payments Made

CMP campaign paraphernalia/misc.

CTB contribution (explain nonmonetary)\*

campaign consultants

CNS

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

MBR member communications

office expenses

MTG meetings and appearances

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

SCHEDULE E (CONT
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Statement covers period	CALIFORNIA ACO
from January 1, 2015	FORM 40U
through April 18, 2015	Page 17 of 19
**Berramon As NAV Joseph Commission Commissi	I.D. NUMBER

RAD radio airtime and production costs

RFD returned contributions

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Jawane Hilton for Carson City Council 2015 1373690

SAL campaign workers' salaries CVC civic donations PET petition circulating t.v. or cable airtime and production costs candidate filing/ballot fees PHO phone banks candidate travel, lodging, and meals fundraising events POL polling and survey research staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)\* postage, delivery and messenger services transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) voter registration campaign literature and mailings ЦΠ print ads WEB information technology costs (internet, e-mail) NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Jennifer Barrios 1521 South Haskins Avenue SAL 600.00 Compton, CA 90220 Juwan Tarver 17422 Wellfleet Avenue SAL 590.00 Carson, CA 90746 Angle Barrios 1521 9 Halskins Avenue SAL 585.00 Compton CA 90200 Julia Recinos 432 E. 17th Street #B SAL 340.00 Long Beach, CA 90813 **David Morales** 1930 W. El Segundo Blvd, #8 SAL 150.00 'Gardena, CA 90249 \* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

2,265.00

SUBTOTAL \$

## Schedule E Type or print in ink. Statement covers period Statement covers period Statement covers period Statement covers period

(Continuation	on Sheet)
Payments N	Nade

SEE INSTRUCTIONS ON REVERSE

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period	CALIFORNIA ACO
from January 1, 2015	FORM 400
through April 18, 2015	Page 18 of 19
AND CONTROL OF THE CONTROL OF THE PROPERTY OF THE CONTROL OF THE C	I.D. NUMBER

1373690

NAME OF FILER

Jawane Hilton for Carson City Council 2015

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

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CVP 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 candidate filing/ballot fees FIL. PHO phone banks TRC candidate travel, lodging, and meals FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)\* postage, delivery and messenger services transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings 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
Cassandra Kelly 19814 Galway Avenue Carson, CA 90746	SAL		220.00
Basil Kimbrew 25920 Iris Avenue Suite 13A Moreno Valley, CA 92551	WEB		200.00
City of Carson	FIL		775.00
Campaign LA 15518 South Broadway Street Gardena, CA 90248	СМР		1,550.00
Overland Strategies LLC 13300 Victory Blvd. #362 Van Nuys, CA 91401	LIT		9,000.00

11,745.00

SUBTOTAL \$

Schedule	1000	
(Continua	tion	Sheet)
<b>Payments</b>	Mac	le

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

SCHEDUL	EE	(CONT.)

Statement covers period **CALIFORNIA** FORM January 1, 2015 April 18, 2015 through. SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Jawane Hilton for Carson City Council 2015 1373690 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs

campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)\* 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 candidate travel, lodging, and meals FND fundraising events polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)\* postage, delivery and messenger services transfer between committees of the same candidate/sponsor 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 CODE OR AMOUNT PAID DESCRIPTION OF PAYMENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) **Bhullar Properties** Wo Summit Team, Inc **OFC** 1,000.00 17145 Newhope, St. Suite to Fourtage Valler Target Marketing 22981 Calle Azorin LIT 449.72 Mission Viejo, CA 92692

Alexis Servin 842 Lagoon Avenue SAL 275.00 Wilmington, CA 90744

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

SUBTOTAL \$

1.724.72

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

RECEIVED CITY CLERK

NAME OF FILER		Date of	45	MAY Date Stamp2: 39	CALIFORNIA 107			
JAWANE HILTON FOR CARSON CITY COUNCIL 2015		This Filing	05/06/15 15	MARTO INECOZ	FOR			
AREA CODE/PHONE NU	MBER	I.D. NUMBER (if applicable)			1010 GI	TY OF CARSON	For	Official Use Only
(310) 740-9363		1373690		Report No.				
STREET ADDRESS				Amendmer	ıt			
665 EAST UNIVE	RSITY DRIVE			to Report No.				
CITY		STATE	ZIP CODE	(explain below)	1			
CARSON, CA 90	746		National States and St	No. of Pages				
1. Contributio	n(s) Received							
DATE RECEIVED	FULL NAME	E, STREET ADDRESS AND 2 (IF COMMITTEE, ALSO ENTE		OR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EM (IF SELF-EMPLOYED, ENTER NAME OF		AMOUNT RECEIVED
5/4/15	WATSON LAND ( 22010 WILMINGT CARSON, CA 90	ON AVENUE			☐ IND☐ COM☐ OTH☐ PTY☐ SCC			2,500.00  Check if Loan  **  **Provide interest rate**
5/6/15	CARSON EL CAN 10751 WILSHIRE LOS ANGELES, (	BLVD. STE 1207			☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC			2,000.00  Check if Loan  **  Provide interest rate
					☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			☐ Check if Loan  ———————————————————————————————————
Reason for Amendm	ent:		· · · · · · · · · · · · · · · · · · ·			**Contributor Codes IND — Individual COM — Recipient Com OTH — Other (e.g., bu PTY — Political Party SCC — Small Contribu	siness entit	<b>y</b> )

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

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NAME OF FILER			Date of	5/14/15	Date Stamp	CALIFORNIA 107		
	N FOR CARSON CIT	Y COUNCIL 2015		This Filing	5/14/15 15	NAT   G TH ST THE	FOR	RM 43/
AREA CODE/PHONE NUMBER  I.D. NUMBER (if applicable)		D	1011 (4)	TY OF CARSON	For	Official Use Only		
(310) 740-9363		1373690		Report No		-		
STREET ADDRESS				Amendmer	nt			
665 EAST UNIVE	RSITY DRIVE			to Report No.				
CITY		STATE	ZIP CODE	(explain below)	1			
CARSON		CA	90746	No. of Pages	,			
1. Contributio	n(s) Received							
DATE RECEIVED	FULL NAMI	E, STREET ADDRESS AI (IF COMMITTEE, ALSO	ND ZIP CODE OF CONTRIBU' ENTER I.D. NUMBER)	TOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EM (IF SELF-EMPLOYED, ENTER NAME OF	PLOYER BUSINESS)	AMOUNT RECEIVED
5/11/15	UA JOURNEYME 18355 S. FIGUEF GARDENA, CA S	ROA STREET	ES		☐ IND☐ COM☐ OTH☐ PTY☐ SCC			2,000.00  Check if Loan  **  Provide interest rate
5/11/15	SOUTHERN CAL 501 SHATTO PLA LOS ANGELES, ( ID# 760715	ACE, SUITE 400	RADES		☐ IND ☐ COM ☐ OTH ☐ PTY ☒ SCC			2,000.00  Check if Loan  Provide interest rate
5/14/15	HANI NASSIF 2201 EAST 223R CARSON, CA 90				IND     COM     OTH     PTY     SCC	OWNER - WIN CHEVRO	LET	1,000.00  Check if Loan  **  Provide interest rate
Reason for Amendm	ent:					**Contributor Codes IND — Individual COM — Recipient Com OTH — Other (e.g., bu PTY — Political Party SCC — Small Contribu	siness entit	y)

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

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NAME OF FILER  JAWANE HILTON FOR CARSON CITY COUNCIL 2015		Date of This Filing	5/19/15 ∱ 등	Date Stamp	CALIFORNIA 497			
AREA CODE/PHONE NUMBER   I.D. NUMBER (if applicable)   (310) 740-9363   1373690     STREET ADDRESS   665 EAST UNIVERSITY DRIVE			1012		<b>6</b> 0.000 (1.50)	Official Use Only		
		Report No			***************************************			
		☐ Amendmer		-				
		to Report No. (explain below)		:				
CITY		STATE	ZIP CODE	No. of Pages	1	:		
CARSON		CA	90746	No. or rages				
1. Contributio	n(s) Received							
DATE RECEIVED	FULL NAM	ME, STREET ADDRESS AI (IF COMMITTEE, ALSO	ND ZIP CODE OF CONTRIBU ENTER I.D. NUMBER)	JTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND I (IF SELF-EMPLOYED, ENTER NAME	EMPLOYER	AMOUNT RECEIVED
5/18/15	STEVEN BRADF 777 S. FIGUERO LOS ANGELES, ID#1354953	FORD FOR SENAT DA STREET, SUITI CA 90017	TE 2016 E 4050		☐ IND  ☑ COM ☐ OTH ☐ PTY ☐ SCC			1,500.00  Check if Loan  **  Provide interest rate
					☐ IND☐ COM☐ OTH☐ PTY☐ SCC	:		Check if Loan
					☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			Check if Loan
Reason for Amendn	nent:					**Contributor Codes IND — Individual COM — Recipient Co OTH — Other (e.g., PTY — Political Part SCC — Small Contri	business entit ty	y)

Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	nk.	RECEPT Stamp	FORM 400	
SEE INSTRUCTIONS ON REVERSE	Statement covers period from April 19, 2015 through May 16, 2015	Date of election if applicable (Month, Day, Year)	MAY 21 AM 1 TY OF CARS	For Official Use Only
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	mplete Parts 1, 2, 3, and 4.  rimarily Formed Ballot Measure ommittee ) Controlled ) Sponsored //so Complete Part 6)  rimarily Formed Candidate/ fficeholder Committee //so Complete Part 7)	2. Type of Statement:  Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te	•	Quarterly Statement Special Odd-Year Report Supplemental Preelection Statement - Attach Form 495
STREET ADDRESS (NO P.O. BOX) 665 East University Drive Carson CA 90746	310-740-9363	Treasurer(s)  NAME OF TREASURER Sheri Butler  MAILING ADDRESS 21724 Grace Avenue U CITY Carson  NAME OF ASSISTANT TREASUR	STATE CA	ZIP CODE AREA CODE/PHONE 90745 323-394-4545
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BI CITY STATE ZIP CO OPTIONAL: FAX / E-MAIL ADDRESS		MAILING ADDRESS  CITY  OPTIONAL: FAX / E-MAIL ADDR	STATE	ZIP CODE AREA CODE/PHONE
4. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California  Executed on	By	viedge the information contained her  Signature of Candidate, State Measure Proping author of Controlling Officeholder, Candidate, State Signature of Controlling Officeholder, Candidate, State Measure Proping author of Controlling Officeholder, Candidate, State Measure Proping author of Controlling Officeholder, Candidate, State Measure of Controlling Officeholder, Candidate,	reasurer conent or Responsible Officer of ate Measure Proponent	

5. Officeholder or Candidate Controlled Co	mmittee	6.	Primarily Formed Ballot I	Measure (	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE				**************************************
Jawane Hilton							
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DI	STRICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIO	N		SUPPORT
Carson City Council							OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP						
1008 Autumn Leaf Court Car	son, CA 90746		Identify the controlling office	holder, can	didate, or state me	easure p	roponent, if any.
			NAME OF OFFICEHOLDER, CANDID	DATE, OR PRO	PONENT		
Related Committees Not Included in this not included in this statement that are controlled by contributions or make expenditures on behalf of your	you or are primarily formed to receive		OFFICE SOUGHT OR HELD	······································	DISTRI	CT NO. IF	ANY
COMMITTEE NAME	I.D. NUMBER						
NAME OF TREASURER  COMMITTEE ADDRESS STREET ADDRESS (NO F	CONTROLLED COMMITTEE?  YES NO	7.	Primarily Formed Candid officeholder(s) or candidate(s) for NAME OF OFFICEHOLDER OR CAN	or which this	eholder Commit committee is primal	rily forme	ed.
							SUPPORT OPPOSE
CITY STATE	ZIP CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR CAN	IDIDATE	OFFICE SOUGHT OF	HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		VIII 05 05 05 05 05 05 05 05 05 05 05 05 05				
			NAME OF OFFICEHOLDER OR CAN	IDIDATE	OFFICE SOUGHT OR	HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR CAN	DIDATE	OFFICE SOUGHT OR	HELD	
COMMITTEE ADDRESS STREET ADDRESS (NO P	YES NO						SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P	U. BUX)					· · · · · · · · · · · · · · · · · · ·	
CITY STATE :	P CODE AREA CODE/PHONE		Attach e	continuation	n sheets if necess	ary	

#### Campaign Disclosure Statement Summary Page

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

SUMMARY PAGE Statement covers period CALIFORNIA April 19, 2015 EORM from \_\_ May 16, 2015 through I.D. NUMBER

FPPC Form 460 (January/05)

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

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Jawane Hilton for Carson City Council 2015 1373690 Column A Column B Calendar Year Summary for Candidates Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE General Elections 33,304.00 1. Monetary Contributions ...... Schedule A, Line 3 \$ 1/1 through 6/30 7/1 to Date 19,150.00 11,425.00 20. Contributions 52,454.00 3. SUBTOTAL CASH CONTRIBUTIONS ...... Add Lines 1 + 2 \$ Received 4. Nonmonetary Contributions ...... Schedule C, Line 3 21. Expenditures 11.425.00 52,454.00 Made 5. TOTAL CONTRIBUTIONS RECEIVED ...... Add Lines 3 + 4 \$ **Expenditures Made Expenditure Limit Summary for State** 8.134.95 44,244,67 Candidates 7. Loans Made ...... Schedule H, Line 3 22. Cumulative Expenditures Made\* 8,134.95 44.244.67 8. SUBTOTAL CASH PAYMENTS ...... Add Lines 6 + 7 \$ (If Subject to Voluntary Expenditure Limit) 9. Accrued Expenses (Unpaid Bills) ......Schedule F, Line 3 Date of Election Total to Date (mm/dd/yy) 10. Nonmonetary Adjustment ...... Schedule C, Line 3 8,134.95 44.244.67 **Current Cash Statement** 4,919.28 To calculate Column B, add 11,425.00 amounts in Column A to the 13. Cash Receipts ...... Column A. Line 3 above corresponding amounts \*Amounts in this section may be different from amounts 14. Miscellaneous Increases to Cash ...... Schedule I, Line 4 from Column B of your last reported in Column B. report. Some amounts in 8,134.95 Column A may be negative 8,209.33 16. ENDING CASH BALANCE ....... Add Lines 12 + 13 + 14, then subtract Line 15 \$ figures that should be subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 17. LOAN GUARANTEES RECEIVED ...... Schedule B. Part 2 \$ carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts anv). 18. Cash Equivalents ...... See instructions on reverse \$ 19. Outstanding Debts ...... Add Line 2 + Line 9 in Column B above \$

#### Schedule A **Monetary Contributions Received**

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

SCHEDULE A Statement covers period **CALIFORNIA** April 19, 2015 FORM from May 16, 2015 through I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Schedule A Summary

Jawane Hilton for Carson City Council 2015

1373690 IF AN INDIVIDUAL, ENTER AMOUNT CUMULATIVE TO DATE PER ELECTION FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR DATE CONTRIBUTOR OCCUPATION AND EMPLOYER RECEIVED THIS CALENDAR YEAR TO DATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED CODE \* (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) **ZIND** Christopher Townsend □сом President, Townsend 4/20/15 1,000.00 2,000.00 26022 Horseshoe Circle \_\_OTH Public Affairs PTY Laguna Hills, CA 92653 SCC ZIND Robert L. Lesley COM Retired 5/4/15 200.00 200.00 19213 Midtown Avenue ПОТН Carson, CA 90746 PTY □scc Nationwide Environmental Services COM 5/4/15 500.00 500.00 11914 Front Street **⊘**OTH PTY Norwalk, CA 90650 SCC Watson Land Company COM 5/4/15 2.500.00 3.500.00 22010 Wilmington Avenue ZOTH Carson, CA 90745 PTY SCC TIND Carson El Camino LLC ПСОМ 5/6/15 2.000.00 10751 Wilshire Blvd. Ste. 1207 4.000.00 Ø10TH Los Angeles, CA 90024 PTY □SCC SUBTOTAL \$ 6200.00

Amount received this period – itemized monetary contributions.  (Include all Schedule A subtotals.)	\$_	11,400.00
Amount received this period – unitemized monetary contributions of less than \$100		25.00

3. Total monetary contributions received this period. 11425.00 

\*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

FPPC Form 460 (January/05)

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

Type or print in ink.
Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received	to whole dollars.	Statement covers period fromApril 19, 2015	CALIFORNIA 460
		through <u>May 16, 2015</u>	Page <u>5</u> of <u>12</u>
NAME OF FILER			I.D. NUMBER
Jawane Hilton for Carson City Council 2015		NO. OF THE PROPERTY OF THE PRO	1373690

		iga Silahan makan makan makan makan mengapat mengapat mengapat mengapat mengapat mengapat mengapat mengapat m				
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)
5/6/15	Pro Color Lab West , Inc. 16435 Ishida Avenue Gardena, CA 90248	☐IND ☐COM ØOTH ☐PTY ☐SCC		100.00	200.00	
5/11/15	UA Journeymen & Apprentices 18355 S. Figueroa Street Gardena, CA 90248	□IND □COM ☑OTH □PTY □SCC		2,000.00	2,000.00	
5/11/15	Southern California Pipe Trades ID# 760715 501 Shatto Place Suite 400 Los Angeles, CA 90020	□IND □COM □OTH □PTY ☑SCC		2,000.00	2,000.00	
5/11/15	Martin Luther King Jr. Democratic Club 1224 Oakhorne Drive Harbor City, CA 90710	□IND □COM □OTH □PTY □SCC		100.00	100.00	
5/14/15	Hani Nassif 2201 East 223rd Street Carson, CA 90810	ZIND COM OTH PTY SCC	Owner - Win Chevrolet	1,000.00	1,000.00	
			SUBTOTAL\$	5,200.00		40.

\*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

Sched	ule	8 –	Part	1
Loans	Rec	eiv	ed	

\*\* If required.

Type or print in ink.

Amounts may be rounded

SCHEDU	JLEB-I	PART 1
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Statement covers period

Loans Received		to whole dollars.			from April 1	19, 2015	FORM 46U	
SEE INSTRUCTIONS ON REVERSE					throughMay	16, 2015	Page C	of 12
NAME OF FILER		The state of the s			***************************************		I.D. NUMBER	
Jawane Hilton for Carson City Council 20	015						1373690	
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 PAI OR FORGIVE THIS PERIOI	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Jawane Hilton 1008 Autumn Leaf Court Carson, CA 90746	Self Employed, Senior Pastor, City of the Hill Church, Carson, CA	s_9,600.00	\$	\$ PAID  \$ FORGIVEN	s 9,600.00 6/10/15	10 %	\$ 9600.00 1/9/15	\$ 9,600.00 PER ELECTION**
TIND □ COM □ OTH □ PTY □ SCC					DATE DUE	-	DATE INCURRED	Ψ
Jawane Hilton 1008 Autumn Leaf Court Carson, CA 90746	Self Employed, Senior Pastor, City of the Hill Church, Carson, CA	4 500 00		\$FORGIVEN	ş 1,550.00	10 %	<sub>\$</sub> 1550.00	calendar year  s 1,550.00  PER ELECTION ***
TØ IND □ COM □ OTH □ PTY □ SCC	Ourson, Or	\$ 1,500.00	\$	\$	6/10/15 DATE DUE	\$0	2/23/15 DATE INCURRED	<u> </u>
Gipson for Assembly 2016 (1373829) 3700 Wilshire Blvd. Ste 1050B Los Angeles, CA 90010		8,000.00		PAID  S  FORGIVEN	\$ 8,000.00	% RATE	\$ 8000.00	\$ 8,000.00 PER ELECTION**
†□ IND Ø COM □ OTH □ PTY □ SCC		\$	\$	\$	6/10/15 DATE DUE	\$	4/10/15 DATE INCURRED	\$_8,000.00
		SUBTOTALS \$	)	\$	\$ 19,150.00	\$		1
Schedule B Summary						(Enter (e) on Schedule E, Line 3)	A CAMPAGE OF THE PROPERTY AND ADMINISTRATION OF THE	
1. Loans received this period	4595-674224-651483635-87624-67622-224224 <u>9</u> 742414	**************************************		\$	0			
(Total Column (b) plus unitemized loans							Contributor Codes	THE RESERVE THE PROPERTY OF TH
Loans paid or forgiven this period (Total Column (c) plus loans under \$100 (Include loans paid by a third party that	paid or forgiven.)		•••••	\$		- C	ID – Individual OM – Recipient Co (other than I TH – Other (e.g., TY – Political Party	PTY or SCC) business entity)
<ol><li>Net change this period. (Subtract Line Enter the net here and on the Summary</li></ol>				NET \$	O May be a negative number)		CC – Small Contrib	
*Amounts forgiven or paid by another party also r	nust be reported on Schedule A.	7						

Schedule	
<b>Payments</b>	Made

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

	SCHEDULE E
Statement covers period	CALIFORNIA ACO
fromApril 19, 2015	FORM 400
throughMay 16, 2015	Page of
	I.D. NUMBER
	1373690

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Jawane Hilton for Carson City Council 2015

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

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

OMP	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		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)
Free County Street Street		STORY STREET,		Name of the Party	

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
JENNIFER BARRIOS 1521 SOUTH HASKINS AVENUE COMPTON, CA 90220	SAL			335.00
DOLORES KELLEY 19905 REINHART AVENUE CARSON, CA 90746	SAL			395.00
ANGIE BARRIOS 1521 SOUTH HASKINS AVENUE COMPTON, CA 90220	SAL			275.00

SUBTOTAL \$

1.005.00

### Schedule E (Continuation Sheet)

CNS campaign consultants

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

MTG meetings and appearances

		SCHEDULE	E (CONT.)
Sta	tement covers period	CALIFORNIA	100
rom _	April 19, 2015	FORM	HOU.
	May 16, 2015	COL	1 · 7

Payments Made	to whole dostaid.	fromApril 19, 2015	FORW FOO
SEE INSTRUCTIONS ON REVERSE		throughMay 16, 2015	Page <u>8</u> of <u>12</u>
NAME OF FILER			I.D. NUMBER
Jawane Hilton for Carson City Council 2015			1373690
CORES: If one of the following codes accurately de-			
CODES: If one of the following codes accurately de-	scribes the payment, you may enter the co	de. Otherwise, describe the payment.	
CMP campaign paraphernalla/misc.	MBR member communications	RAD radio airtime and production	ı costs

CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* legal defense LTC campaign literature and mailings	MTG meetings an OFC office exper petition circu phone banks POL polling and spostage, del PRO professional print ads	ises lating survey reser lvery and m		SAL TEL TRC TRS TSF VOT	returned contributions campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the san voter registration information technology costs (internet, e	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTIO	N OF PAYMENT	AMOUNT PAID
JULIA RECINOS 432 E. 17TH STREET #B LONG BEACH, CA 90813		SAL				320.00
ARTURO FRAZIER		SAL				270.00
CLEO CLAXTON		SAL				190.00
BRYAUM PROBY		SAL				270.00
AMVAR CASTANEDA 4330 PENDLETON AVENUE LYNWOOD, CA 90262		SAL				90.00
Payments that are contributions or independent expenditures must als	o be summarized on	Schedule D	•		SUBTOTAL \$	1,140.00

# Schedule E

candidate filing/ballot fees

independent expenditure supporting/opposing others (explain)\*

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

fundraising events

CVC civic donations

FIL

FND

Type or print in ink.

petition circulating

polling and survey research

phone banks

PET

PHO

POL

POS

SCHEDULE E (CONT.)

Statement covers period

TEL t.v. or cable airtime and production costs

candidate travel, lodging, and meals

staff/spouse travel, lodging, and meals

Payments Made	to whole dollars.	fromApril 19, 2015	FORM 460
SEE INSTRUCTIONS ON REVERSE		through May 16, 2015	Page 9 of 12
NAME OF FILER			I.D. NUMBER
Jawane Hilton for Carson City Council 2015			1373690
CODES: If one of the following codes accurately	describes the payment, you may enter the code	e. Otherwise, describe the payment	
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)*	MBR member communications MTG meetings and appearances OFC office expenses	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries	

postage, delivery and messenger services transfer between committees of the same candidate/sponsor LEG legal defense PRO professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail) NAME AND ADDRESS OF PAYEE CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) JUANA HERNANDEZ SAL 30.00 **OVERLAND STRATEGIES** 13300 VICTORY BLVD. #362 LIT 2,699.00 VAN NUYS, CA 91401 **CHARLES HUNT** 17701 AVALON SPACE #52 SAL 80.00 CARSON, CA 90746 KENNETH ROBINSON 738 HOWARD AVENUE SAL 80.00 CARSON, CA 90746 **ANTHONY MYERS** 17613 AMANTHA AVENUE SAL 40.00 CARSON, CA 90746

2,929.00

SUBTOTAL \$

# Schedule E

Type or print in ink

(Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.	State	ment covers period April 19, 2015	CALIFORNIA FORM	460	
SEE INSTRUCTIONS ON REVERSE		through	May 16, 2015	Page	of <u>12</u>	
NAME OF FILER				I.D. NUMBER		
Jawane Hilton for Carson City Council 2015				1373690		
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 com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and POS postage, dei	nmunications d appearanc nses alating s survey resea livery and me	es rch	RAD radio airtime and returned contribus SAL campaign worke TEL t.v. or cable airtime TRC candidate travel TRS staff/spouse transfer between VOT voter registratio	d production costs utions ers' salaries me and production costs , lodging, and meals vel, lodging, and meals n committees of the same	,
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	or	DESCRIPTION OF PAYMENT		AMOUNT PAID
RAY LEWIS 969 GLADWICK STREET CARSON, CA 90746		SAL				40.00
PERNITHA TINSLEY P.O. BOX 91070 LOS ANGELES, CA 90009		SAL				40.00
CAMPAIGN LA 15518 SOUTH BROADWAY STREET GARDENA, CA 90248		СМР				420.00
AT&T 20810 AVALON BLVD. STE B CARSON, CA 90746		PHO				160.89
NEXT DAY FLYERS 8000 HASKELL AVENUE VAN NUYS, CA 91406		CMP				480.06
* Payments that are contributions or independent expenditures must als	o be summarized on	Schedule D.			SUBTOTAL \$	1,140.95

# Schedule E

Type or print in ink,

SCHEDUL	ΕE	(CONT.)
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(Continuation Sheet) Payments Made	" An early of a state of the state of		FORM 460
SEE INSTRUCTIONS ON REVERSE		through <u>May 16, 2015</u>	Page // of /2
NAME OF FILER			I.D. NUMBER
Jawane Hilton for Carson City Council 2015			1373690
CODES: If one of the following codes accurate	ely describes the payment, you may enter the code.	Otherwise, describe the paymen	t.

	munications I appearances ses ating urvey researd very and mes	3	RAD RFD SAL TEL TRC TRS	describe the payment.  radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production cost candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the sar voter registration information technology costs (internet, e	me candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE C	R	DESCRIPTIO	N OF PAYMENT	AMOUNT PAID
JENNIFER BARRIOS 1521 SOUTH HASKINS AVENUE COMPTON, CA 90220	SAL				245.00
DOLORES KELLEY 19905 REINHART AVENUE CARSON, CA 90746	SAL				420.00
ANGIE BARRIOS 1521 SOUTH HASKINS AVENUE COMPTON, CA 90220	SAL				25.00
JULIA RECINOS 432 E. 17TH STREET #B LONG BEACH, CA 90813	SAL				40.00

ARTURO FRAZIER SAL 325.00 SUBTOTAL \$ \* Payments that are contributions or independent expenditures must also be summarized on Schedule D. 1,055.00

Schedule	Parts Parts	
(Continua	tion Sheet	
<b>Payments</b>	Made	

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

MBR member communications

MTG meetings and appearances

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

	SCHEDULE E (CONT.)
Statement covers period	CALIFORNIA 160
fromApril 19, 2015	FORM 40U
throughMay 16, 2015	Page 12 of 12
	, 1130

RAD radio airtime and production costs

RFD returned contributions

SEE INSTRUCTIONS ON REVERSE

CMP campaign paraphernalia/misc.

CNS campaign consultants

NAME OF FILER

Jawane Hilton for Carson City Council 2015

I.D. NUMBER 1373690

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	PET PHO POL POS PRO	office expen petition circu phone banks polling and s postage, del professional print ads	lating survey rese ivery and n	arch nessenger services egal, accounting)	TEL TRC TRS TSF	transfer between committees of the sal voter registration	me candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CODE	OR	DESCRIPTIO	ON OF PAYMENT	AMOUNT PAID
CLEO CLAXTON			SAL				215.00
BRYAUM PROBY			SAL				240.00
AMBAR CASTANEDA 4330 PENDELTON AVENUE LYNWOOD, CA 9062			SAL				110.00
JUANA HERNANDEZ			SAL				30.00
JAWAUN TARVER 17422 WELLFLEET AVENUE CARSON, CA 90746			SAL				270.00
* Payments that are contributions or independent expenditures must als	o be sur	nmarized on	Schedule D	).		SUBTOTAL S	865.00

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

tor Continuat	uon report	Amounts ma	nounts may be rounded to whole dollars.				497 CO	NTRIBUTION REPORT		
NAME OF FILER JAWANE HILTON	I FOR CARSON CIT	Date of This Filing	05/26/15		Date Stamp\ 🔨	CALIFO FOR				
REA CODE/PHONE NUMBER (310) 740-9363		I.D. NUMBER (if applicable) 1373690		Report No.	1013		26 M 5: 1	For	For Official Use Only	
STREET ADDRESS 865 EAST UNIVE	RSITY DRIVE	☐ Amendmer to Report No.	ıt	The second secon	y 04450i		1			
CARSON		STATE CA	ZIP CODE 90746	(explain below)  No. of Pages	4				in the second se	
1. Contribution	ı(s) Received		nn sa a ceann a dh'i dheann ann an						nama, a pagagaga da kini kini 1900 di minini ka mana nama nagaya ga ad 4 kini 1900 da da d	
DATE RECEIVED	FULL NAME	ITOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)			AMOUNT RECEIVED			
05/22/15	GIPSON FOR AS 3700 WILSHIRE E LOS ANGELES, C ID# 1373829	BLVD. SUITE 1056	OB		☐ IND  ☑ COM ☐ OTH ☐ PTY ☐ SCC				10,000  ⊠ Check if Loan  10  Provide interest rate	
					☐ IND☐ COM☐ OTH☐ PTY☐ SCC				☐ Check if Loan ————————————————————————————————————	
					☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				☐ Check if Loan ————————————————————————————————————	
Reason for Amendme	ent:					IN CO P	Contributor Codes  ID - Individual  OM - Recipient C  TH - Other (e.g.,  TY - Political Par  CC - Small Contr	business entit ty		

FPPC Form 497 (March/2011) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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

RECEIVED CITY CLERK

497 CONTRIBUTION REPORT

NAME OF FILER			Date of 05/06/15 15 MAY Date Stamp 2: 39 CALIFORNIA						
JAWANE HILTON	FOR CARSON CIT	Y COUNCIL 2015		This Filing	05/06/15 ไป	MARTO INECOZ	FORM 497		
AREA CODE/PHONE NU	MBER	I.D. NUMBER (if applicable)			1010 GI	TY OF CARSON	For	Official Use Only	
(310) 740-9363		1373690		Report No					
STREET ADDRESS				☐ Amendmer	ıt				
665 EAST UNIVERSITY DRIVE  CITY STATE ZIP CODE  CARSON, CA 90746			to Report No.						
			(explain below)	1					
			No. of Pages						
1. Contributio	n(s) Received								
DATE RECEIVED	FULL NAME	E, STREET ADDRESS AND 2 (IF COMMITTEE, ALSO ENTE		OR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EM (IF SELF-EMPLOYED, ENTER NAME OF		AMOUNT RECEIVED	
5/4/15	WATSON LAND ( 22010 WILMINGT CARSON, CA 90	ON AVENUE			☐ IND☐ COM☐ OTH☐ PTY☐ SCC			2,500.00  Check if Loan  **  **Provide interest rate**	
5/6/15	CARSON EL CAN 10751 WILSHIRE LOS ANGELES, (	BLVD. STE 1207			☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC			2,000.00  Check if Loan  **  Provide interest rate	
					☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			☐ Check if Loan  ———————————————————————————————————	
Reason for Amendm	ent:		· · · · · · · · · · · · · · · · · · ·			**Contributor Codes IND — Individual COM — Recipient Com OTH — Other (e.g., bu PTY — Political Party SCC — Small Contribu	siness entit	<b>y</b> )	

497	Co	ntrib	ution	Report
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## Type or print in ink. Amounts may be rounded to whole dollars.

REGENTED CHESK



497 CONTRIBUTION REPORT

AREA CODE/PHONE NUI LMO) 74( STREET ADDRESS LUG EAS CITY	1373690 + University Drive STATE ZIP CODE	Report No  Amendme to Report No (explain below)	nt 	Date Stamp  5 FEB 19 PM 2: 19 ITY OF GARRON		
Careon	A 9074-6	No. of Pages	ij	ngga daga tangga kanana salah sa Salah salah sa		
1. Contribution	n(s) Received					
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2-18-2015	Carson Companies 100 Bayview Circle # 2500 Newport Beach, CA 92660		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			ZOOO. O O  ☐ Check if Loan  Provide interest rate
		•	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			Check if Loan  Short Sho
			☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			☐ Check if Loan  ———  Provide interest rate
Reason for Amendm	nent:			**Contributor Codes IND – Individual COM – Recipient Com OTH – Other (e.g., bu PTY – Political Party SCC – Small Contribu	isiness entity	/) 

FPPC Form 497 (March/2011)

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



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NAME OF FILER		***************************************	onest transcrives and the second of the seco		VIRIBUTION REPORT
Jawane Hit	in for carson city Council 2015	Date of This Filing	2-24-15	Date Stamp CALIFO	
(310) 740-	MBER I.D. NUMBER (if applicable)	Report No.	003		
STREET ADDRESS LUG5 E. W CITY CUTYON	niversity Drive  STATE ZIP CODE  CA 90746	Amendmer to Report No. (explain below) No. of Pages	è		
1. Contribution	n(s) Received	ataaliineen 1965 seesta 1960 seesta 19	ARRIPARA SA ANTONIO DE COMENZA A TRANSPORTA A TRANSPORTA A TRANSPORTA A TRANSPORTA A TRANSPORTA A TRANSPORTA A	annous and a state of the state	and an an an ann an an an an an an an an an
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBU' (IF COMMITTEE, ALSO ENTER LD. NUMBER)	TOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
420/15	Jawane R. Hilton. 1008 Autumn Leaf Court Carson, CA 90746	·	☑ IND □ COM □ OTH □ PTY □ SCC	Delf-employed: Gr. Pastor, City on the Hill Church Carson, CA	\$ 1,550.00  Check if Loan  10  Provide interest rate
			☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		Check if Loan
			☐ IND☐ COM☐ OTH☐ PTY☐ SCC		Check if Loan
Reason for Amendn	ent:			**Contributor Codes  IND – Individual  COM – Recipient Committee (other  OTH – Other (e.g., business entity  PTY – Political Party  SCC – Small Contributor Commit	y)

Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in in	COPY.	Date Stamp RECEIVED CITY CLERM	
fre	statement covers period om January 1, 2015	Date of election if applicable: (Month, Day, Year)	15 FEB -2 PM !	:Page of For Official Use Only
SEE INSTRUCTIONS ON REVERSE th	roug January 17, 2015	03-03-15	CITY OF CARS	0N
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee Office	ate Parts 1, 2, 3, and 4.  It Measure Committee  It marily Formed  Controlled  It ponsored  Complete Part 6)  It private the committee complete Part 7)	2. Type of Statement:    Preelection Statement     Semi-annual Statement     Termination Statement     Amendment (Explain be	Special Supplement	erly Statement al Odd-Year Report emental Preelection nent - Attach Form 495
3. Committee Information  COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  TOWNS HILTON FOR CAYSON  STREET ADDRESS (NO P.O. BOX)  1008 AUTUMN LEAF COUR  CITY STATE ZIP CODE  MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX  CITY STATE ZIP CODE  OPTIONAL: FAX / E-MAIL ADDRESS	City Council 2015	Treasurer(s)  NAME OF TREASURER SHOP BUT  MAILING ADDRESS 21724 GIVAL  CITY CAVOON, C  NAME OF ASSISTANT TREASURE  MAILING ADDRESS  CITY	CE AVENUE A 90746  R, IF ANY  STATE ZIP CO	(323) 394-4549
4. Verification		OPTIONAL: FAX / E-MAIL ADDRE		TRANSMATERSONSSINASINSKA PRODUSESSINASINASINASINAS STRENDRAND SVENDRAD SVENDRAD SVENDRAD SVENDRAD SVENDRAD SVE
I have used all reasonable diligence in preparing and reviewing the certify under penalty of perjury under the laws of the State of Careful Executed on FWO. 2, 2015  Executed on Date  Executed on Date	By Signature of Control  By Signature of Control  By Signature of Control  By Signature of Control	d correct.	easurer ment or Responsible Officer of Sponsor e Measure Proponent	chedules is true and complete.
	(C)	grauro o conconny enconcider, Candidate, Stat	e measure fredorem	TELO FOLDI MOR (ARTIRIO I)

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

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## Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period from January 1, 2015

through January 17, 2015

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SEE INSTRUCTIONS ON REVERSE NAME OF FILER Council Carcon 2015 SURWIDE 373690 Column A Column B Calendar Year Summary for Candidates Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE **General Elections** 015.00 1. Monetary Contributions ...... Schedule A, Line 3 1/1 through 6/30 7/1 to Date 1061500 3. SUBTOTAL CASH CONTRIBUTIONS ...... Add Lines 1 + 2 61500 20. Contributions Received 4. Nonmonetary Contributions ...... Schedule C, Line 3 21. Expenditures 1001500 10.615.00 Made Expenditures Made **Expenditure Limit Summary for State** 1.836,00 1836.00 6. Payments Made ...... Schedule E, Line 4 Candidates 7. Loans Made ...... Schedule H. Line 3 22. Cumulative Expenditures Made\* 836.00 . B36.00 (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date 0 10. Nonmonetary Adjustment ...... Schedule C, Line 3 (mm/dd/yy) 836.0C 836,00 **Current Cash Statement** To calculate Column B, add W15.00 13. Cash Receipts ...... Column A, Line 3 above amounts in Column A to the corresponding amounts 14. Miscellaneous Increases to Cash ...... Schedule I, Line 4 from Column B of your last report. Some amounts in 15. Cash Payments ...... Column A. Line 8 above Column A may be negative 16. ENDING CASH BALANCE ...... Add Lines 12 + 13 + 14, then subtract Line 15 figures that should be subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed 17. LOAN GUARANTEES RECEIVED ...... Schedule B, Part 2 \$ for this calendar year, only \*Since January 1, 2001. Amounts in this section may be carry over the amounts different from amounts reported in Column B. from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). 18. Cash Equivalents ...... See instructions on reverse 19. Outstanding Debts ...... Add Line 2 + Line 9 in Column B above FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

## Schedule A Monetary Contributions Received

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

SCHEDULE A

Statement covers period

Monetary (	Contributions Received RECEIVED OITY CLERK		whole dollars.	from Tanua	ry 1,2015	EAL F	IFORNIA 460 ORM
SEE INSTRUCTION			•	through Januar	y 17, 2015	Page	4 of 6
Jawand	Hilton for Courson Cally of Co	incil 2	015				umber 13690
DATE RECEIVED	FULL NAME. STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
-10-15	Gwendolyn White 1753 W. 125th Otreet Los Angeles, CA 90047	MIND COM OTH PTY SCC	Retired.	\$ 900.00	\$900.0	0	
•		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC				TOTAL PROPERTY OF THE PROPERTY	
		□IND □COM □OTH □PTY □SCC				THE PARTY OF THE P	TO The second and the
		□IND □COM □OTH □PTY □SCC				The state of the s	
			SUBTOTAL \$	900.00		7	
1. Amount rec	<b>Summary</b> seived this period – contributions of \$100 or more. Schedule A subtotals.)		\$	900.00	IND-		!
	eived this period – unitemized contributions of less that	an \$100	\$	115.00	PTY-	- Other Politica	l Party
	ary contributions received this period. 1 and 2. Enter here and on the Summary Page, Colur	nn A, Line 1.)	TOTAL \$	1015.00	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 lnk, Amounts may be rounded to whole dollars.

SCHEDULE B - PART 1

Statement covers period

Loans Received  Amounts may be rounded to whole dollars.				Statement cov	ers period	CALIFORN FORM	MA 460	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER					throughandan		Page	of <u>6</u>
Jawane Hilton for Carson	n City Counci	1 2015					1.D. NUMBER	090
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER LD, NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(6) AMOUNT RECEIVED THIS PERIOD	(e) AMOUNT PAIC OR FORGIVER THIS PERIOD	CLOSE OF THIS	(a) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Jawano Hilton 1008 Autumn Leaf Court Cargon, CA 90746	self Employed Senior Pastor @ City on the Hill		4.	PAID  \$ FORGIVEN	s <b>1,600.0</b> 0	Û %	\$ <u>4000.00</u>	PER ELECTION**
TIX IND COM OTH PTY SCC	Church, Cargon, CA	s &	,9600.00	\$	03 04 15 Date Due	s_B'	VA/15 DATE INCURRED	\$ 9000°°
		٠	¢.	PAID  \$ FORGIVEN	\$		\$	CALENDAR YEAR  \$ PER ELECTION **
T IND COM OTH PTY SCC				r PAID	DATE DUE	***************************************	DATE INCURRED	CALENDAR YEAR
				\$	\$	#ATE	\$	\$PER ELECTION **
TO IND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	s
	*	SUBTOTALS \$	960000 \$	)	\$ 9,600°	<b>)</b>		
Schedule B Summary  1. Loans received this period				¢	9600 00	(Enter (e) on Schadule E, Line 3)		
(Total Column (b) plus unitemized loans  2. Loans paid or forgiven this period	s less than \$100.)				0		1	given or paid by also must be Schedule A.
(Total Column (c) plus loans under \$100 (Include loans paid by a third party that	paid or forgiven.)		***************************************		O		** If required.	
<ol><li>Net change this period. (Subtract Line Enter the net here and on the Summary</li></ol>	2 from Line 1.)/ Page, Column A, Line 2.			NET \$	ay be a negative number)			
† Contributor Codes IND – Individual COM – Recipient Committee (of	ther than PTY or SCC) OTH – (	Other PTY - Po	olitical Party St	CC – Small Con	tributor Committee	FPPC To		m 460 (June/01)

Schedule E
Payments Made

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

	SCHEDULEE
Statement covers period	PALEORNIA / PAS
from January 1, 2015	FORM 4.0 U
through anuary 17, 2015	Page _ G of _ G
	I.D. NUMBER
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SEE INSTRUCTIONS ON REVERSE		through anuary 17, 2015	Page
Jawane Hilton for Cargon City Counci	l 2015		I.D. NUMBER
			1373690
CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  FND fundraising events independent expenditure supporting/opposing others (explain)*  MTG meetings ar  OFC office expe  petition circ phone bank  POL polling and postage, de	nmunicatíons nd appearances nses ulating	vise, describe the payment.  RAD radio airtime and production cosmology returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production TRC candidate travel, lodging, and mostaff/spouse travel, lodging, and transfer between committees of voter registration WEB information technology costs (in	ion costs eals I meals i the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE OR DESC	CRIPTION OF PAYMENT	AMOUNT PAID
CampaignLA 15518 South Broadway Street Gardena, CA 90248	CMP		\$1,836.00
	*		
* Payments that are contributions or independent expenditures must also be summ	narized on Schedule D.	SUBTO	OTAL\$ 1,836.00
Schedule E Summary			
1. Payments made this period of \$100 or more. (Include all Schedule E subtotal	s.)		\$ 1,836.00
Uniternized payments made this period of under \$100			
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part			
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on t			t de la

Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)		Type or print in Statement covers period from	Date of election if applicable: (Month, Day, Year)  15 FEB 19	illia i ph 2	Pag	LIFORNIA 460 FORM of 11
SEE INSTRUCTIONS ON REVERSE	Modelateni, ma na na marria na nia hara na ma'a u sori 164 Utalia	through February 14, 2015	March 3, 2015 ← TY OF	CARS		Al Bank in Northwest Science Science Applying agent in the Science Science and Complete Science Science Science
1. Type of Recipient Committee: All  Officeholder, Candidate Controlled Committee State Candidate Election Committee Recall (Also Complete Part 5)  General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee	mittee	mplete Parts 1, 2, 3, and 4.  Primarily Formed Ballot Measure Committee Controlled Sponsored Niso Complete Part 6)  Primarily Formed Candidate/ Officeholder Committee Niso Complete Part 7)	2. Type of Statement:  Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination) Amendment (Explain below)		Supplement	atement I-Year Report al Preelection Attach Form 495
3. Committee Information		. number 1373690	Treasurer(s)			
Jawane Hilton for Carson City Cou			NAME OF TREASURER Sheri Butler MAILING ADDRESS 21724 Grace Avenue Unit 120 CITY	STATE	ZIP CODE	AREA CODE/PHONE
665 East University Drive	***************************************		Carson	CA	90745	323-394-4545
Carson	CA 90746	310-74 <b>0-</b> 9363	NAME OF ASSISTANT TREASURER, IF ANY MAILING ADDRESS			
MAILING ADDRESS (IF DIFFERENT) NO. AND S	SIREEL UR P.O. B	0.4	MAILING ADDRESS			
CITY	STATE ZIP CC	DE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS	######################################	and a become of the second	OPTIONAL: FAX / E-MAIL ADDRESS			APPLICATION TO SERVICE THE PROPERTY OF THE PRO
4. Verification  I have used all reasonable diligence in prepar under penalty of perjury under the laws of the   Executed on 2/19/15  Date  Executed on Date  Executed on Date	State of California	a that the foregoing is true and correct.  By	Signature of Treasurer or Assistant Treasurer  Action Officeholder, Capadate, State Measure Proponent or Respo	nsible Officer c		ue and complete. I certify

Officeholder or Candidate Controlled Committe	<u> </u>	6.	Primarily Formed Ball	ot Measure	Committee	
NAME OF OFFICEHOLDER OR CANDIDATE		i	NAME OF BALLOT MEASURE			
Jawane Hilton						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NU	MBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICT	ON	SUPPORT
Carson City Council				M320330007013403404414114		OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY	STATE ZIP		1.3			
1008 Autumn Leaf Court Carson, CA	90746		Identify the controlling of			sure proponent, if a
	2461346444444444444444444444444444444444		NAME OF OFFICEHOLDER, CA	NDIDATE, OR P	ROPONENT	
Related Committees Not Included in this Statem	ent: List any committees					
not included in this statement that are controlled by you or are	primarily formed to receive		OFFICE SOUGHT OR HELD		DISTRICT	NO. IF ANY
contributions or make expenditures on behalf of your candida	cy.		•			
COMMITTEE NAME I.D.	NUMBER	•		· · · · · · · · · · · · · · · · · · ·		7.1 TAXABLE
CO.	NTROLLED COMMITTEE?		Primarily Formed Car			
	YES NO		officeholder(s) or candidate(	s) for which th	is committee is primarily	formed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)		Í	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR H	ELD SUPPOR
STREET ADDRESS (NO 1.0, BOA)						OPPOSE
CITY STATE ZIP CODE	AREA CODE/PHONE	j	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR H	ELD SUPPOR
AMA 1-					:	OPPOSE
COMMITTEE NAME L.D.	NUMBER		NAME OF OFFICEROLDED OD	CALIDIDATE	OFFICE SOUGHT OR H	EIN
		1	NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT ON I	SUPPOR OPPOSE
AME OF TREASURER CO	NTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR H	ELD SUPPOR
						[ ] SUPPUR
	YES NO				4	☐ OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	YES NO			*********		OPPOSE
	YES NO			MANUFACTOR AND ASSESSMENT ASSESSM		OPPOSE

# Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period from January 18, 2015 FORM

through February 14, 2015 Page 3 of

SUMMARY PAGE

SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Jawane Hilton for Carson City Council 2015 1373690 Column A Column B Calendar Year Summary for Candidates Contributions Received TOTALTHIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE **General Elections** 6.039.00 1/1 through 6/30 7/1 to Date 9.600.00 20. Contributions 5.024.00 15,639.00 Received 0 Nonmonetary Contributions ...... Schedule C, Line 3 21. Expenditures 15.639.00 5,024.00 Made 5. TOTAL CONTRIBUTIONS RECEIVED ...... Add Lines 3 + 4 \$ \_\_\_\_\_ Expenditures Made **Expenditure Limit Summary for State** 15,273.87 6. Payments Made ...... Schedule E, Line 4 \$ \_\_\_ Candidates 7. Loans Made ...... Schedule H. Line 3 22. Cumulative Expenditures Made\* 13,437.87 15,273.87 8. SUBTOTAL CASH PAYMENTS ...... Add Lines 6 + 7 \$ (If Subject to Voluntary Expenditure Limit) Total to Date Date of Election (mm/dd/yy) 13,437.87 15,273.87 **Current Cash Statement** 8,779.00 To calculate Column B. add 5.024.00 amounts in Column A to the corresponding amounts \*Amounts in this section may be different from amounts 14. Miscellaneous Increases to Cash ...... Schedule I, Line 4 from Column B of your last reported in Column B. 13,437.87 report. Some amounts in Column A may be negative 365.13 figures that should be 16. ENDING CASH BALANCE ......... Add Lines 12 + 13 + 14. then subtract Line 15 subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 17. LOAN GUARANTEES RECEIVED ...... Schedule B. Part 2 \$ \_\_\_\_\_ carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

### Schedule A Monetary Contributions Received

Type or print in ink. Amounts may be rounded

SCHEDULE A

Statement covers period

		to whole dollars.		from January	ary 18, 2015		FORM 460	
	NS ON REVERSE			through Februa	ry 14, 2015	Page	of	
NAME OF FILER				200000000000000000000000000000000000000			UMBER	
Jawane H	ilton for Carson City Council 2015			ONICE THE THE CONTROL OF THE CONTROL		1373	690	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LO. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)	
1/26/2015	Brian Cook 974 Sagebank Carson, CA 90746	☑IND □COM □OTH □PTY □SCC	Sheriff, Los Angeles County Sheriff Department	100.00	100.00		,	
1/26/2015	Carlisha Millage 234 W. 91st Street Los Angeles, CA 90003	☑IND □COM □OTH □PTY □SCC	Manager, Department of Motor Vehicle	150.00	150.00			
1/26/2015	Franklin Sellers 19819 Midtown Avenue Carson, CA 90746	☑IND □COM □OTH □PTY □SCC	Self-Employed, Pastor	200.00	. 200.0	00		
1/26/2015	Deterius Frierson 2894 Herrington Avenue #K San Bernnardino, CA 92405	☑IND □COM □OTH □PTY □SCC	Advisor, Long Beach Job Corp.	200.00	200.0	00		
1/31/2015	Steven C. Bradford 13609 Purche Avenue Gardena, CA 90249	☑IND □COM □OTH □PTY □SCC	Retired	100.00	100.0	00		
			SUBTOTAL \$	750.00			Andrew Committee	

#### Schedule A Summary

1. Amount received this period – itemized monetary contributions. 3650.00 (Include all Schedule A subtotals.) \$ 1374.00 2. Amount received this period – unitemized monetary contributions of less than \$100 ......\$

3. Total monetary contributions received this period.

#### \*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

5024.00

SCC - Small Contributor Committee

FPPC Form 460 (January/05)

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

SCHEDULE A (CC	(TMC
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Statement covers period	PALIEORNIA ( CASA)
from January 18, 2015	FORM 46L
through February 14, 2015	Page <u>5'</u> of <u>11</u>
	LD, NUMBER
	1373690

Jawane Hil	ton for Carson City Council 2015				13	73690
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DAT CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/31/2015	Steve Jefferson 323 Faley Lane Placentia, CA 92870	☑IND □COM □OTH □PTY □SCC	Teacher, John Muir Charter School	100.00	100.00	
1/31/2015	Teresa Murdock P.O. Box 465 Atwood, CA 92811	☑IND □COM □OTH □PTY □SCC	Sales Representative, AT&T	100.00	100.00	
1/31/2015	Charles Alford 19520 Scobey Avenue Carson, CA 90745	☑IND □COM □OTH □PTY □SCC	Longshoreman, ILWU	150.00	150.00	
1/31/2015	Jennifer Mason 13148 Day Street #E302 Moreno Valley, CA 92553	☑IND □COM □OTH □PTY □SCC	Processor, Word and Brown	100.00	100.00	
1/31/2015	Suzanne Brown 2421 West 85th Street Inglewood, CA 90305	☑IND □COM □OTH □PTY □SCC	Director, Los Angeles Urban League	100.00	100.00	
			SUBTOTAL\$	550.00		

\*Contributor Codes

IND - Individual

NAME OF FILER

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (	CONT.)
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CALIFORNIA FORM

Statement covers period

from.

January 18, 2015

NAME OF FILER		****		through_Februar	y 14, 2015	Page _	
Jawane Hilton for Carson City Council 2015						13736	690
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)
1/31/2015	Walter Whitehead 13006 Kornblum Avenue #H Hawthorne, CA 90250	☑IND □COM □OTH □PTY □SCC	Registered Private Wealth Associate, Merrill Lynch	100.00	100.00		
1/31/2015	Reginald Tate 28318 Granite Court Valencia, CA 91354	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Depot X, Los Angeles County	100.00	100.00		
1/31/2015	Harry Eaves 20303 Kaiser Circle Carson, CA 90746	☑IND □COM □OTH □PTY □SCC	Self-Employed, Pastor/Realtor	100.00	100.	.00	
1/31/2015	Brandi Murdock 20029 Alvo Avenue Carson, CA 90746	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Self-Employed, Realtor	950.00	950.	.00	
1/31/2015	Panattoni Developmenet Company 20411 SW Birch Street Suite 200 Newport Beach, CA 92660	□IND ☑COM □OTH □PTY □SCC		500.00	500.	.00	
			SUBTOTAL	<b>\$</b> 1750.00			

\*Contributor Codes

IND - Individual

COM – Recipient Committee

(other than PTY or SCC)

OTH – Other (e.g., business entity)

PTY - Political Party

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

SCHEDULE A (CON'
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Statement covers period	CALIFORNIA A CO
from January 18, 2015	FORM 46U
through February 14, 2015	Page of
	I.D. NUMBER
	1373690

Jawane Hil	ton for Carson City Council 2015	0.000 Maria		•	1373	690
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)
1/31/2015	Deidra Vandiegriff 1021 Gladwick Carson, CA 90746	☑IND □COM □OTH □PTY □SCC	Community Development Specialist, City of Long Beach	100.00	100.00	
2/13/2015	James Peoples 19202 Broadacre Avenue Carson, CA 90745	☑IND □COM □OTH □PTY □SCC	Economist, Retired	100.00	100.00	
2/13/2015	Robert Felix 873 Gladwick Carson, CA 90746	☑IND □COM □OTH □PTY □SCC	Los Angeles Police Dept., Retired	100.00	100.00	
2/13/2015	California Ticket Defense Legal Service 11455 Paramount Blvd., Suite H Downey, CA 90241	☐IND ☐COM ☐OTH ☐PTY ☐SCC		100.00	100.00	
2/13/2015	Pro Color Lab West 16435 Ishida Gardena, CA 90248	☐IND ☑COM ☐OTH ☐PTY ☐SCC		100.00	100.00	
			SUBTOTAL \$	500.00		

\*Contributor Codes

IND - Individual

NAME OF FILER

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

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

SCHEDULE A	(CONT.)
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CALIFORNIA

Statement covers period

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				through_Februa	ry 14, 2015	Page_	8 of 11	
NAME OF FILER					***************************************	I.D. NU	MBER	
Jawane Hil	Iton for Carson City Council 2015					13736	390	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD, NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)	
1/26/2015	Lauren Wilson 19527 Eddington Drive Carson, CA 90746	☑IND □COM □OTH □PTY □SCC	Educator, Los Angeles Unified School District	100.00	100.	.00		VOORANIE VALLE
		□IND □COM □OTH □PTY □SCC				THE RESIDENCE AND ADDRESS OF THE PERSON OF T		
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						
		☐IND ☐COM ☐OTH ☐PTY ☐SCC			-			
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						
			SUBTOTAL	100.00				

\*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

### Schedule E Payments Made

Jawane Hilton for Carson City Council 2015

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period from January 18, 2015 FORM 460

through February 14, 2015 Page of 11

SEE INSTRUCTIONS ON REVERSE through Pedrua

NAME OF FILER

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

1373690

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 com MTG meetings an OFC office exper PET petition circu PHO phone bank POL polling and POS postage; de	nmunications d appearance uses ulating s survey resear		RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production cost TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the s VOT voter registration WEB information technology costs (internet,	s ame candidate/sponsor				
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER J.D. NUMBER)		CODE	OR (	DESCRIPTION OF PAYMENT	AMOUNT PAID				
Bhullar Properties  40 Symmit Team Inc. 17165 Newhope St. Suite # Fountain Valley, CA 92708			Headquarter F	Rent	1000.00				
Cognetix 2912 Old Bennett Ridge Road Santa Rosa, CA 95404		L.T			655.57				
Independent Voters League 3700 Wilshire Blvd., #1050B Los Angeles, CA 90010-3090		LIT			250.00				
* Payments that are contributions or independent expenditures n	nust also be summ	arized on S	chedule D.	SUBTOTAL	<b>\$</b> 1905.57				
Schedule E Summary									
1. Itemized payments made this period. (Include all Schedule	E subtotals.)	***********	***************************************	\$ <u>_</u>	13,437.87				
2. Unitemized payments made this period of under \$100	2. Unitemized payments made this period of under \$100								
3. Total interest paid this period on loans. (Enter amount from	Schedule B, Part	1, Column	(e).)	\$ <u>_</u>					
4. Total payments made this period. (Add Lines 1, 2, and 3. El	A, Line 6.) <b>TOTAL \$</b> _	13,437.87							

#### Schedule E (Continuation Sheet) Payments Made

Target Marketing USA

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE E (CONT.
Statement covers period	GALIFORNIA / AA
fromJanuary 18, 2015	FORM 400
through February 14, 2015	Page 10 of 11
	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Jawane Hilton for Carson City Council 2015

LD. NUMBER

1373690

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs campaign paraphernalia/misc. MBR member communications campaign consultants MTG meetings and appearances RFD returned contributions CNS SAL campaign workers' salaries CTB contribution (explain nonmonetary)\* office expenses OFC petition circulating TEL t.v. or cable airtime and production costs CVC civic donations PET phone banks TRC candidate travel, lodging, and meals candidate filing/ballot fees TRS staff/spouse travel, lodging, and meals fundraising events polling and survey research FND transfer between committees of the same candidate/sponsor postage, delivery and messenger services TSF independent expenditure supporting/opposing others (explain)\* VOT voter registration legal defense professional services (legal, accounting) WEB information technology costs (internet, e-mail) campaign literature and mailings PRT print ads NAME AND ADDRESS OF PAYEE AMOUNT PAID CODE OR **DESCRIPTION OF PAYMENT** (IF COMMITTEE, ALSO ENTER I.D. NUMBER) John F. Kennedy Alliance 1365.00 LIT 3700 Wilshire Blvd., #1050B Los Angeles, CA 90010-3090 Courtney Lindberg Photography 525.00 LIT 8002 West 4th Street

Los Angeles, CA 90048

Political Data, Inc.
P.O. Box 59570
Norwalk, CA 90652

Voter Guide Slate Card
6285 E. Spring Street, Suite 202
Long Beach, CA 90808

LIT
1212.00

22981 Calle Azorin
Mission Viejo, CA 92692

LIT
269.04

SUBTOTAL \$

4280.01

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

### Schedule E (Continuation Sheet) Payments Made

870 E. Del Amo Bivd.

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

SCHEDU	LE E	(CONT.)

Statement covers period **CALIFORNIA** FORM January 18, 2015 from. through February 14, 2015 Page I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Jawane Hilton for Carson City Council 2015 1373690

•							
CODES: If one of the following codes accurately describes  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		member com meetings and office expen petition circul phone banks polling and s postage, deli	munications d appearance ses lating urvey resea	ees	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		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	411-1-10-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		CODE	OR	DESCRIPTIO	N OF PAYMENT	AMOUNT PAID
Overland Strategies LLC 13300 Victory Boulevard #362 Van Nuys, CA 91401			LIT				6998.00
Bank of America				Wire Fee			

Carson, CA 90746		
Southern California Edison P.O. Box 600 Rosemead, CA 917701-001	Security Deposit for electric company	135.00
PayPal P.O. Box 105658 Atlanta, GA 30348-5658	Fees for online donations	94.29

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

SUBTOTAL \$

7252.29

25.00



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

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AREA CODE/PHONE NU	N FOR CARSON CIT	I.D. NUMBER (if applica	************	This Filing		15 MAR -3 AM 8:40	FOR	
(310) 740-9363	CONTRACTOR	1373690	uroj	Report No	1005		ForO	fficial Use Only
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665 EAST UNIVE	EDGITY DDIVE			☐ Amendmer to Report No.				
CITY	TIOILI DIVIVE	STATE	ZIP CODE	(explain below)				
CARSON,		CA	90745	No. of Pages .	11			
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9-90/					☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			Check if Loan % Provide interest rate
					☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			Check if Loan  % Provide interest rate
Reason for Amendm	nent:					**Contributor Codes  IND — Individual  COM — Recipient Come  OTH — Other (e.g., bus  PTY — Political Party  SCC — Small Contribut	siness entity)	·



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

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AREA CODE/PHONE NU (310) 740-9363		I.D. NUMBER (if applied		Report No.	1006		MAR -3 AN 8:40 Y OF CARSON		Official Use Only
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665 EAST UNIVE	ROIT DRIVE	STATE	ZIP CODE	to Report No. (explain below)					
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3/2/2015	CARSON EL CA 10751 WILSHIR LOS ANGELES	E BLVD. STE. 120	7		☐ IND  ☑ COM ☐ OTH ☐ PTY ☐ SCO	1			2,000.00  Check if Loan  Provide interest rate
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497 CONTRIBUTION REPORT

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2/24/15	Christopher To 20022 Horses Laguna Hills, CA	noe Circle + 97653	,	☑ IND □ COM □ OTH □ PTY □ SCC	President Townsend Public Aff	airs	
424/15	Norwalk Unoca DBA Autocar/v 11948 Regent VIE Downey, CA 90	į .	-	☐ IND  Y COM ☐ OTH ☐ PTY ☐ SCC			1,000.00  Check if Loan  Provide interest rate
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FPPC Form 497 (March/2011) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)