Campaign Statement Cover Page Covernment Code Sections 84200-84216.5) 088401 EE INSTRUCTIONS ON REVERSE	Statement covers period from01/01/2016 through06/30/2016	Date of election if applicable: (Month, Day, Year)	Date Stamp REGEIVED JUL - 7 2016 CITY GLERK'S OFFICE CITY OF PERSIS	Page 1 of 19 For Official Use Only
O State Candidate Election Committee O Recall (Also Complete Part 5) ☐ General Purpose Committee O Sponsored O Small Contributor Committee	omplete Parts 1, 2, 3, and 4. Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te	Quarte Special Supple rmination)	rly Statement I Odd-Year Report mental Preelection ent - Attach Form 495
Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE McCarron for Perris City Council 2016 STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP COMMITTEE MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.	ODE AREA CODE/PHONE	Treasurer(s) NAME OF TREASURER Brady McCarron MAILING ADDRESS CITY NAME OF ASSISTANT TREASUR MAILING ADDRESS	STATE ZIP COD	DE AREA CODE/PHONE
CITY STATE ZIP COPTIONAL: FAX / E-MAIL ADDRESS	ODE AREA CODE/PHONE	CITY OPTIONAL: FAX / E-MAIL ADDRI	STATE ZIP COD	E AREA CODE/PHONE
Verification I have used all reasonable diligence in preparing and reviewlr under penalty of perjury under the laws of the State of Californ Executed on 07/01/2016 Date Executed on Date Executed on Date	ng this statement and to the best of my knowled that the foregoing is true and correct. By Brady McCa. By Brady McCa. Signature of Co. By By	rron	lible Officer of Sponsor	s is true and complete. I certify
Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, Sta	ate Measure Proponent	 FPPC Form 460 (Jan/2016)

COVER PAGE

Officeholder or Candidate Controlled Comm	ittee	6.	Primarily Formed Ballot	Measure (Committee		
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE				
Brady McCarron							
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRIC	T NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIO	N		SUPPORT
City Council Member: City of Perris							OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) C	ITY STATE ZIP		Identify the controlling office	eholder, can	didate, or state me	easure p	roponent, if any.
			NAME OF OFFICEHOLDER, CAND	IDATE, OR PRO	PONENT		
Related Committees Not Included in this Stanot 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		DISTRI	ICT NO. IF	ANY
COMMITTEE NAME	I.D. NUMBER		<u> </u>				
NAME OF TREE OF INC.	CONTROLLED COMMITTEE?	7.	Primarily Formed Cand				
NAME OF TREASURER	YES NO		officeholder(s) or candidate(s)	for which this	committee is prima	rily forme	d.
COMMITTEE ADDRESS (NO P.O. B	DX)		NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUGHT OR	RHELD	SUPPORT OPPOSE
CITY STATE ZIP C	ODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUGHT OR	RHELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUGHT OR	R HELD	
							SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUGHT OR	HELD	
	YES NO		Will Co. Collinstration of the		0,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. B	OX)						<u> </u>
CITY STATE ZIP C	ODE AREA CODE/PHONE		Attnal	. continuatio	n shoote if nocces	ori/	
	tirimi i www.mir (1971)m		Attaci	i continuatio	n sheets if necess	агу	

FPPC Advice: advice@fppc.ca.gov (866/275-3772)

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

		SUMMARY PAGE
Statem	ent covers period	CALIFORNIA 160
from	01/01/2016	FORM +UU
through	06/30/2016	Page3 of19
	4	I.D. NUMBER

1374036

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

McCarron for Perris City Council 2016

Contributions Received	Column A TOTALTHIS PERIOD (FROM ATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summ Running in Both the General Elections	
1. Monetary Contributions Schedule A, Line 3	\$ 3,184.00	\$	3,184.00		ugh 6/30 7/1 to Date
2. Loans Received Schedule B, Line 3	7,485.59		8,730.33		ugii 6/30 // i to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 10,669.59	\$	11,914.33	20. Contributions Received \$	s
4. Nonmonetary Contributions Schedule C, Line 3	380.00		380.00	21 Evnandituras	
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 11,049.59	\$	12,294.33	Made \$	\$
Expenditures Made				Expenditure Limit Su	ımmary for State
6. Payments Made Schedule E, Line 4	\$ 8,981.31	\$	8,981.31	Candidates	
7. Loans Made Schedule H, Line 3	0.00		0.00	22. Cumulative	Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7		\$	8,981.31		luntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3	0.00		0.00	Date of Election	Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3	380.00		380.00	(mm/dd/yy)	
11. TOTAL EXPENDITURES MADEAdd Lines 8 + 9 + 10	\$ 9,361.31	\$	9,361.31		\$
Current Cash Statement				/	\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 1,345.00	To	calculate Column B, add		
13. Cash Receipts Column A, Line 3 above	10,669.59		nounts in Column A to the rresponding amounts		
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00	fro	m Column B of your last	*Amounts in this section may reported in Column B.	y be different from amounts
15. Cash Payments Column A, Line 8 above	8,981.31		oort. Some amounts in slumn A may be negative	·	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 3,033.28	fig	ures that should be		
If this is a termination statement, Line 16 must be zero.		рe	btracted from previous riod amounts. If this is a first report being filed		
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ 0.00	for	this calendar year, only rry over the amounts		
Cash Equivalents and Outstanding Debts		fro	m Lines 2, 7, and 9 (if y).		
18. Cash Equivalents See instructions on reverse	\$ 0.00				
19. Outstanding Dehts. Add Line 2 + Line 9 in Column B above	\$ 8,730.33				

FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772)

Schedule / Monetary	A Contributions Received		ts may be rounded whole dollars.	Statement cover	-	SCHEDL CALIFORNIA 46 FORM	
SEE INSTRUCTIO	NS ON REVERSE			through <u>06/30/2</u>	016	Page4 of19	
NAME OF FILER						I.D. NUMBER	
McCarron for	Perris City Council 2016					1374036	
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 DE CALENDAR YEA (JAN. 1 - DEC. 3	R TO DATE	
01/04/2016	Robert Cronk	⊠IND □COM □OTH □PTY □SCC	Engineer Design West Engineering	100.00	10	0,00	
01/10/2016	Mrs. Joanne Evans	⊠IND □COM □OTH □PTY □SCC	Retired Retired	500.00	50	0,00	
01/21/2016	Jeff Andelin	⊠IND □COM □OTH □PTY □SCC	Retired Retired	50.00	10	0.00	
02/15/2016	Majid Ahmed	⊠IND □COM □OTH □PTY □SCC	Veternarian Nuevo Road Animal Hospital	100.00	30	0.00	
03/01/2016	Gary Hunter	⊠IND □COM □OTH □PTY □SCC	Promo Editor Taft Broadcasting	100.00	10	0.00	
			SUBTOTAL\$	850.00			
	A Summary				*Contrib	outor Codes dividual	$\bar{\bar{1}}$

 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) Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

				from01/01/	2016	ORM 400
				through 06/30/	2016 Page	5_ of19
AME OF FILER					I.D. N	UMBER
Carron for	Perris City Council 2016				1374	036
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)	IPATION AND EMPLOYER RECEIVED THIS CALENDAR YEAR PERIOD (JAN. 1 - DEC. 3 OF BUSINESS)		
03/02/2016	Mike Talbert	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Apprentice Coordinator Broward County Plumber & Pipefitters		100.00	
03/18/2016	Majid Ahmed	⊠IND □COM □OTH □PTY □SCC	Veternarian Nuevo Road Animal Hospital	100.00	300.00	
04/21/2016	Jeff Andelin		Retired Retired	50.00	100.00	
	William Daigle	⊠IND □COM □OTH □PTY □SCC	Self Employed Tarpology	200.00	200.00	
04/26/2016	George Harpole	☑IND □COM □OTH □PTY □SCC	Retired Retired	100.00	100.00	
			SUBTOTAL\$	550.00		

*Contributor Codes

IND - Individual

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(other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

Monetary NAME OF FILER	A (Continuation Sheet) Contributions Received Perris City Council 2016	Amounts may to whole (Statement coverage of the statement coverage	/2016	CALII F(Page _ I.D. NU 13740	MBER
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 YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
05/18/2016	Mamco Inc	☐IND ☐COM 図OTH ☐PTY ☐SCC		1,000.00	1,00	00.00	
05/28/2016	Majid Ahmed	XIND □COM □OTH □PTY □SCC	Veternarian Nuevo Road Animal Hospita	100.00	3(00.00	
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					

SUBTOTAL\$

1,100.00

*Contributor Codes

IND - Individual

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(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

	SCHEDL	JLE B	- PART 1
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Loans Received	Ame	ounts may be ro to whole dollar			from01/01/201		CALIFORN FORM	460
SEE INSTRUCTIONS ON REVERSE					through 06/3	0/2016	Page	of <u>19</u>
NAME OF FILER							I.D. NUMBER	
McCarron for Perris City Council 2016							1374036	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIO	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Brady McCarron	Audio Visual Producer Department of Defense			☐ PAID				CALENDAR YEAR
FEILIS, CA 32370				\$ 0.0	91.85	% RATE	\$ 91.85	\$ 7,485.59 PER ELECTION**
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$91.85	\$0.00	s <u>0.0</u>	DATE DUE	s0.00	12/24/2014 DATE INCURRED	\$
Brady McCarron	Audio Visual Producer Department of Defense			☐ PAID				CALENDAR YEAR
				\$0.0	3 91.91	% RATE	\$ 91.91	\$ 7,485.59 PER ELECTION **
TIND □ COM □ OTH □ PTY □ SCC		\$ 91.91	\$0.00	\$0.0	DATE DUE	\$0.00	03/05/2015 DATE INCURRED	\$
Brady McCarron	Audio Visual Producer Department of Defense			☐ PAID				CALENDAR YEAR
				\$ 0.0	s 9.96		\$ 9.96	\$ 7,485.59 PER ELECTION**
TIND □ COM □ OTH □ PTY □ SCC		\$ 9,96	\$ 0.00	\$0.0	DATE DUE	\$0.00	03/18/2015 DATE INCURRED	s
		SUBTOTALS \$	0.00	5 0.	00 \$ 193.72	\$ 0.00		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
Loans received this period				\$	10,651.40			
(Total Column (b) plus unitemized loan						(to	ontributor Codes	
Loans paid or forgiven this period (Total Column (c) plus loans under \$10 (Include loans paid by a third party tha	0 paid or forgiven.)		***************************************	\$	3,165.81	OT	D – Individual DM – Recipient Co (other than I TH – Other (e.g., TY – Political Party	PTY or SCC) business entity)
3. Net change this period. (Subtract Lin- Enter the net here and on the Summar		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************	NET \$	7,485.59 May be a negative number)		CC - Small Contrib	
*Amounts forgiven or paid by another party also ** If required.	must be reported on Schedule A.						EDDC E	orm 460 / Jan/201

Schedule B – Part 1 (Continua) Loans Received	(ION Sneet) Am	ounts may be ro to whole dollar			from01/0	ers period	california 460 form		
SEE INSTRUCTIONS ON REVERSE					through06/30	0/2016	Page8	of <u>19</u>	
NAME OF FILER							I.D. NUMBER		
McCarron for Perris City Council 2016							1374036		
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IFCOMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAII OR FORGIVE THIS PERIOI	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE	
Brady McCarron	Audio Visual Producer Department of Defense			☐ PAID				CALENDAR YEAR	
				\$ 0.00	\$ 91,90	RATE	\$ <u>91.90</u>	\$	
†⊠ IND □ COM □ OTH □ PTY □ SCC		\$ 91.90	\$0.00	\$0.00	DATE DUE	\$0.00	03/18/2015 DATE INCURRED	\$	
Brady McCarron	Audio Visual Producer Department of Defense			PAID 9.00	91.91	% RATE	\$91.91	CALENDAR YEAR	
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$ 91.91	s0.00	FORGIVEN 0.00	DATE DUE	\$ 0.00	04/07/2015 DATE INCURRED	\$	
Brady McCarron	Audio Visual Producer Department of Defense			PAID \$ 0.00	<u> </u>	% RATE	\$ 91.90	CALENDAR YEAR \$ 7,751.40 PER ELECTION**	
†☑ IND □ COM □ OTH □ PTY □ SCC		\$ 91.90	s0.00	\$0.08	DATE DUE	\$ 0.00	04/30/2015 DATE INCURRED	\$	
Brady McCarron	Audio Visual Producer Department of Defense			paid 5 0.00 FORGIVEN	91.91	% RATE	\$ 91.91	\$ 7,751.40 PER ELECTION*	
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$91.91	s0.00	\$ 0.00	DATE DUE	\$0.00	06/26/2015 DATE INCURRED	\$	
		SUBTOTALS \$	0.00	5 0.1	00\$ 367.62	\$ 0.00			

†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

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

SCHEDULE B - PART 1 (CONT.)

Loans Received	don Sneet) Amo	ounts may be ro to whole dollar			from01/0	1/2016	CALIFORN FORM	^{IA} 460
SEE INSTRUCTIONS ON REVERSE					through 06/3	0/2016	Page 9	of
NAME OF FILER McCarron for Perris City Council 2016							I.D. NUMBER	
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 PERIOR	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Brady McCarron	Audio Visual Producer Department of Defense			\$ 0.00			\$40.10	S 7,751.40 PER ELECTION**
†⊠ IND □ COM □ OTH □ PTY □ SCC		5 40.10	30.00	\$ 0.00	DATE DUE	\$0.00	07/06/2015 DATE INCURRED	\$
Brady McCarron	Audio Visual Producer Department of Defense	1		\$ 0.00	\$ 91.90		\$ 91.90	S 7,751.40 PER ELECTION
TIND □ COM □ OTH □ PTY □ SCC		\$ 91,90	\$0.00	\$0.00	DATE DUE	\$ 0.00	07/09/2015 DATE INCURRED	\$
Brady McCarron	Audio Visual Producer Department of Defense			PAID \$ 0.00		% RATE	\$ 91.90	S 7,751.40 PER ELECTION**
†☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$ 91.90	\$ 0.00	\$0.0	DATE DUE	\$ 0.00	08/20/2015 DATE INCURRED	\$
Brady McCarron	Audio Visual Producer Department of Defense			\$ 0.00	91.90	% RATE	\$91.90	\$ 7,751.40 PER ELECTION***
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$91.90	\$ 0,00	\$0.0!	DATE DUE	\$ 0.00	10/01/2015 DATE INCURRED	\$
		SUBTOTALS (0.00	5 a.	00\$ 315.80	\$ 0.00		

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SCHEDULE B - PART 1 (CONT.)

Schedule B – Part 1 (Continua: Loans Received	tion Sheet) Amo	ounts may be ro to whole dollar			from01/0	rers period	CALIFORN FORM	^{IA} 460
SEE INSTRUCTIONS ON REVERSE					through06/3	0/2016	Page 10	of19
NAME OF FILER							I.D. NUMBER	
McCarron for Perris City Council 2016							1374036	
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)	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
Brady McCarron	Audio Visual Producer Department of Defense			\$0.00	91,90	% RATE	\$ 91.90	S 7,751.40 PER ELECTION**
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$91.90	\$	\$0.01	DATE DUE	\$ 0.00	10/29/2015 DATE INCURRED	\$
Brady McCarron	Audio Visual Producer Department of Defense			\$ 0.00	91.90		\$ <u>91.90</u>	S 7,751.40 PER ELECTION **
TIND □ COM □ OTH □ PTY □ SCC		\$91.90	s	\$0.00	DATE DUE	\$0,00	11/12/2015 DATE INCURRED	s
Brady McCarron	Audio Visual Producer Department of Defense			\$ 0.00	0 \$91.90	% RATE	\$ 91.90	CALENDAR YEAR \$7,751.40 PER ELECTION***
† IND □ COM □ OTH □ PTY □ SCC		s 91.90	\$0.00	\$0.00	DATE DUE	\$ 0.00	11/25/2015 DATE INCURRED	\$
Brady McCarron	Audio Visual Producer Department of Defense	s91.90	\$0.00	\$ 0.00 paid paid paid paid paid paid paid paid	0	RATE %	\$ 91.90 12/10/2015	\$ 7,751.40 PER ELECTION**
T IND COM OTH PTY SCC		SUBTOTALS \$	0.00	\$ 0.	DATE DUE 00\$ 367.60	\$ 0.50	DATE INCURRED	

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

SCHEDULE B-PART 1 (CONT.)

Schedule B — Part 1 (Continuation Sneet) Loans Received to whole dollars.				from01/0	rers period	FORM 460		
SEE INSTRUCTIONS ON REVERSE					through 06/3	0/2016	Page11	of <u>19</u>
NAME OF FILER							I.D. NUMBER	
McCarron for Perris City Council 2016							1374036	
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)	OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIO	N CLOSE OF THIS	(*) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Brady McCarron	Audio Visual Producer Department of Defense			\$0.0	0 \$100.00	% RATE	\$100.00	\$ 7,485.59 PER ELECTION**
†⊠ IND □ COM □ OTH □ PTY □ SCC		\$0.00	\$100,00	\$0.0	DATE DUE	\$0.00	01/25/2016 DATE INCURRED	5
Brady McCarron	Audio Visual Producer Department of Defense			S 0.00	<u>s</u> 91.90	% RATE	\$ 91.90	\$ 7,485.59 PER ELECTION **
TE IND □ COM □ OTH □ PTY □ SCC		\$0.00	\$91.90	\$ 0.00	DATE DUE	\$0.00	02/04/2016 DATE INCURRED	\$
Bradv McCarron	Audio Visual Producer Department of Defense	• 0.00	81 00	PAID 3 0.00		RATE 0.00	\$ 91.90 02/18/2016	\$ 7,485.59 PER ELECTION*
†☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$ 0.00	\$ <u>91.90</u>	\$0.0	DATE DUE	\$0.00	DATE INCURRED	\$
Brady McCarron	Audio Visual Producer Department of Defense			X PAID 3,165.8	1 3 6,834.19		\$ 10,000.00	CALENDAR YEAR \$ 7,485.59 PER ELECTION**
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		3 0,00	\$ 10,000.00	\$0.0	DATE DUE	\$155.80	03/08/2016 DATE INCURRED	\$
		SUBTOTALS S	10,283.80	3,165.	81\$ 7,117.99	\$ 155.80		

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

SCC - Small Contributor Committee

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

SCHEDULE B-PART 1 (CONT.)

Schedule B – Part 1 (Continuation Sheet) Loans Received Amounts may be rounded to whole dollars.				Statement cov	ers period	CALIFORN FORM	^{IA} 460	
SEE INSTRUCTIONS ON REVERSE					through 06/3	0/2016	Page12_	of <u>19</u>
NAME OF FILER							I.D. NUMBER	
McCarron for Perris City Council 2016							1374036	
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 PERIO	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Brady McCarron	Audio Visual Producer Department of Defense			☐ PAID				CALENDAR YEAR
				\$0.00	91.90	RATE	\$ 91.90	\$ 7,751.40 PER ELECTION**
T⊠ IND □ COM □ OTH □ PTY □ SCC		s <u>0.00</u>	\$ 91.90	\$0.00	DATE DUE	s0.00	03/17/2016 DATE INCURRED	s
Brady McCarron	Audio Visual Producer Department of Defense			PAID \$ 0.00	<u>s</u> 91.90		\$ 91.90	\$ 7,751.40 PER ELECTION**
†⊠ IND □ COM □ OTH □ PTY □ SCC		\$0.00	\$91.90	\$0.0	DATE DUE	so.oo	04/28/2016 DATE INCURRED	\$
Brady McCarron	Audio Visual Producer Department of Defense			PAID \$O.OH FORGIVEN	s 91.90		\$91.90	\$ 7,751.40 PER ELECTION**
†☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$0.00	\$ 91.90	\$0.0	DATE DUE	\$0.00	06/10/2016 DATE INCURRED	\$
Brady McCarron	Audio Visual Producer Department of Defense			\$ 0.00	91,90	RATE	\$91.90	\$ 7,751.40 PER ELECTION**
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	,	s <u>0.00</u>	\$ 91.90	s0.0	DATE DUE	s0.00	06/23/2016 DATE INCURRED	\$
SUBTOTALS \$ 367.60\$ 0.00\$ 367.60\$ 0.00								

†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

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

Schedul	le C		4						SCHEDULE	
Nonmonetary Contributions Received		Amounts may be rounded to whole dollars.			Statement covers period			CALIFORNIA 460		
					from	01/01/201	.6	FOF	RM TOO	
					thro	ugh 06/30/201	.6	Page	13 of 19	
NAME OF FILE	TIONS ON REVERSE R			1				I.D. NUMBI		
McCarron i	For Perris City Council 2016							1374036		
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)	DESCRIPTION OF GOODS OR SERVICE		AMOUNT/ FAIR MARKET VALUE	D CALENI	ATIVE TO ATE DAR YEAR - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)	
05/16/2016	So Cal Graphics	□IND □COM ☑OTH □PTY □SCC		Business Cards, Brochures, Post Cards		380.00		380.00		
		□IND □COM □OTH □PTY □SCC								
-		□IND □COM □OTH □PTY □SCC								
		□IND □COM □OTH □PTY □SCC								
Attach ad	ditional information on appropriately labe	eled continuati	ion sheets.	SUBTO	ΓAL \$	380.00				
1. Amount	e C Summary received this period – itemized nonmonetal all Schedule C subtotals.)				\$	380.0	INC	ontributor Cod — Individual M — Recipient		
2. Amount	received this period – unitemized nonmone	tary contributio	ns of less than \$100	***************************	\$	0.0			g., business entity)	
	nmonetary contributions received this period ses 1 and 2. Enter here and on the Summar		n A, Lines 4 and 10.)	TOTAL	. \$	380.0	sc		ntributor Committee	

Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees

Amounts may be rounded to whole dollars.

	SCHEDULE D
Statement covers period	CALIFORNIA 160
from 01/01/2016	FORM 400
through <u>06/30/2016</u>	. Page <u>14</u> of <u>19</u>
	I.D. NUMBER

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NAME OF FILER

McCarron for Perris City Council 2016

through 06/30/2016 Page 14 of 19
I.D. NUMBER

1374036

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/12/2016	Richard Roth State Senator District: 31 X Support Oppose	™ Monetary Contribution Nonmonetary Contribution Independent Expenditure		130.00	130.00	
	Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure				
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure				
SUBTOTAL \$ 130.00						

Schedule D Summary

1.	. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)	\$ 130.00
2.	. Unitemized contributions and independent expenditures made this period of under \$100	\$ 99.00
3.	. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	\$ 229.00

Payments Made Amounts may be rounded to whole dollars.		from 01/01/2016		CALIFO FOR			
SEE INSTRUCTIONS ON REVERSE				through .	06/30/2016		5 of <u>19</u>
NAME OF FILER						I.D. NUME	JER
McCarron for Perris City Council 2016					· · · · · · · · · · · · · · · · · · ·	1374036	;
CODES: If one of the following codes accurately describes	s the payment, yo	ou may enter t	he code. Other	rwise, descri	be 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 con MTG meetings an OFC office exper PET petition circu PHO phone bank: POL polling and POS postage, de PRO professional PRT print ads	d appearances nses ulating s survey research		RFD retur SAL camp TEL t.v. of TRC cand TRS staff, TSF trans VOT vote	o airtime and production med contributions paign workers' salaries or cable airtime and production airtime and producte travel, lodging, and spouse travel, lodging, afer between committee or registration mation technology costs	duction costs d meals and meals s of the sam	•
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DE	SCRIPTION OF F	AYMENT		AMOUNT PAID
Facebook Ads	****	WEB				:	4,8
Natalie Wizer-Orozco		WEB					700.0
Creative Printing		LIT	,,				78.3
* Payments that are contributions or independent expenditures	must also be sumn	narized on Sche	dule D.		SL	JBTOTAL\$	783.
Schedule E Summary			_				•
1. Itemized payments made this period. (Include all Schedule	E subtotals.)				**************	\$	8,569.72
2. Unitemized payments made this period of under \$100	******************************			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		\$	255.79
3. Total interest paid this period on loans. (Enter amount from	Schedule B, Part	1, Column (e).)			\$	155.80
4. Total payments made this period. (Add Lines 1, 2, and 3. E	inter here and on t	the Summary F	age, Column A	, Line 6.)	то	TAL \$	8,981.31

SCHEDULE E

Schedule E (Continuation Sheet)

CVP campaign paraphernalia/misc.

CNS campaign consultants

Amounts may be rounded

MBR member communications

MTG meetings and appearances

	SCHEDULE E (CON I.
Statement covers period	CALIFORNIA 460
from 01/01/2016	FORM 400
through06/30/2016	Page 16 of 19
	4

RAD radio airtime and production costs

RFD returned contributions

Payments Made	to whole dollars.	from 01/01/2016	FORM 40U
SEE INSTRUCTIONS ON REVERSE		through 06/30/2016	Page 16 of 19
NAME OF FILER			1.D. NUMBER
McCarron for Perris City Council 2016			1374036
CODES: If one of the following codes accurate	ely describes the payment, you may enter the code. Othe	erwise, describe the payment.	

CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events ND independent expenditure supporting/opposing others (explain)* LEG legal defense LT campaign literature and mailings	ibution (explain nonmonetary)* donations idate filing/ballot fees raising events bendent expenditure supporting/opposing others (explain)* defense OFC office expenses petition circulating phone banks polling and survey resear postage, delivery and mer professional services (leg			salaries and production costs dging, and meals lodging, and meals committees of the same candidate/sponsor		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID		
Natalie Wizer-Orozco		WEB		685.00		
Facebook Ads	, <u>, , , , , , , , , , , , , , , , , , </u>	WEB		50.00		
Facebook Ads		WEB		20.53		
AAD Ink		LIT		229.13		
Creative Printing		LIT		75.60		
* Payments that are contributions or independent expenditures must also	so be summarized on	Schedule D.	SUBTOT	AL\$ 1,060.26		

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

CMP campaign paraphernalia/misc.

Amounts may be rounded to whole dollars.

MBR member communications

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.

		SCHEDULE E (CONT	:)
Sta	tement covers period	CALIFORNIA 460	
from _	01/01/2016	FORM 400	
throug	h 06/30/2016	Page 17 of 19	

RAD radio airtime and production costs

i dymento made	170m 02/01/2010	
SEE INSTRUCTIONS ON REVERSE	through <u>06/30/2016</u>	Page17 of19
NAME OF FILER		I.D. NUMBER
McCarron for Perris City Council 2016		1374036

FIL			petition circulating phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting)			TEL TRC TRS TSF VOT	returned contributions campaign workers' salaries t.v. or cable airtime and production of candidate travel, lodging, and meals staff/spouse travel, lodging, and mea	ition costs neals d meals of the same candidate/sponsor	
	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CODE	OR	DESCRIPTION	DN OF PAYMENT	AMOUNT PAID	
Lama				PRT				4,750.00	
Face	book Ads			WEB				68.81	
Buil	ders Industry Association			FND				199.00	
Rive	rside County Democratic Central Committee (ID# Pend	ing)		FND				200.00	
Face	book Ads			WEB				78.33	

5,296.14

SUBTOTAL \$

Schedule E (Continuation Sheet)

CMP campaign paraphernalia/misc.

CTB contribution (explain nonmonetary)*

CNS campaign consultants

Amounts may be rounded

MBR member communications

OFC office expenses

MTG meetings and appearances

	SCHEDULE E (CONT.				
Statement covers period	CALIFORNIA 460				
from 01/01/2016	FORM TOO				
through 06/30/2016	Page 18 of 19				

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

Payments Made	to whole dollars.	from 01/01/2016	FORM	400
SEE INSTRUCTIONS ON REVERSE		through 06/30/2016	Page 18	of <u>19</u>
NAME OF FILER			I.D. NUMBER	
McCarron for Perris City Council 2016			1374036	
CODES: If one of the following codes accurately	describes the payment, you may enter the code. Other	rwise, describe the payment.		

CVC civic donations FIL candidate filing/ballot fees FND fundraising events ND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	PET PHO POL POS PRO PRT	HO phone banks OL polling and survey rese OS postage, delivery and a RO professional services (i		nessenger service	TEL TRC TRS S TSF VOT WEB	candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the sai voter registration	me candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CODE	OR	DESCRIPTION	ON OF PAYMENT	AMOUNT PAID
Riverside County Democratic Central Committee (ID# Pendi	ng)		FND				50.00
Thomas Catering			PRO				380.00
Facebook Ads			WEB				32.00
Roth for Senate 2016 (ID# 1353520)			СТВ				130.00
Hakan Jackson			CNS				250.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.					SUBTOTAL \$ 842.		

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

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.) **CALIFORNIA**

1374036

Statement covers period **FORM** 01/01/2016 from. through 06/30/2016 Page 19 of 19 I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

McCarron for Perris City Council 2016

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

radio airtime and production costs MBR member communications CMP campaign paraphernalia/misc. meetings and appearances returned contributions campaign consultants CNS SAL campaign workers' salaries OFC office expenses contribution (explain nonmonetary)*

CTB TEL. t.v. or cable airtime and production costs PET petition circulating CVC civic donations TRC candidate travel, lodging, and meals phone banks PHO candidate filing/ballot fees staff/spouse travel, lodging, and meals polling and survey research fundralsing events POL

transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF POS ND voter registration professional services (legal, accounting) VOT LEG legal defense PRO

print ads WEB information technology costs (internet, e-mail) PRT campaign literature and mailings

NAME AND ADDRESS OF PAYEE AMOUNT PAID CODE OR **DESCRIPTION OF PAYMENT** (IF COMMITTEE, ALSO ENTER I.D. NUMBER) 253.05 CMP Customink 57.62 WEB Facebook Ads CNS 250.00 Hakan Jackson 27.46 WEB Facebook Ads

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

SUBTOTAL \$

588.13