

AFFIDAVIT OF NOMINEE & OATH OR AFFIRMATION OF NOMINEE

AFFIDAVIT OF NOMINEE

State of California } ss.  
County of Riverside }

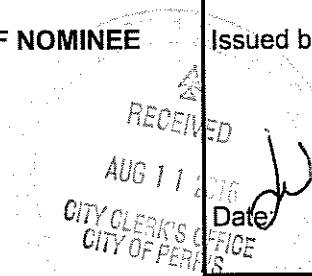
City: Perris

Issued by: [Redacted]

Date: July 20, 2016

Deputy Clerk

TITLE



I, Raul Mark Yarbrough, under penalty of perjury, state that I am a nominee for the office of City Council

Ward or Councilmanic District N/A  Full Term  Short Term

I will accept the office in the event of my election to this office at the election to be held on November 8, 2016

I desire my name to appear on the ballot as follows: RAUL MARK YARBROUGH  
PRINT OR TYPE YOUR NAME

and I desire the following designation to appear on the ballot under my name:  
COUNCIL MEMBER / BUSINESS OWNER

(Print or type your principal profession(s), vocation(s), or occupation(s), in 3 words or less; or the name of the elective public office you hold or "Incumbent". If you leave this space blank, no designation will appear on the ballot.)

My residence address is as follows:  
[Redacted]

RESIDENCE ADDRESS: NUMBER, STREET, CITY & ZIP

[Redacted] ADDRESS, IF DIFFERENT

[Redacted] DAY TELEPHONE NUMBER [Redacted] EVENING TELEPHONE NUMBER [Redacted] FAX

EMAIL ADDRESS: \_\_\_\_\_

OATH OR AFFIRMATION OF NOMINEE

I do solemnly swear (or affirm) that I will support and defend the Constitution of the United States and the Constitution of the State of California against all enemies, foreign and domestic; that I will bear true faith and allegiance to the Constitution of the United States and the Constitution of the State of California; that I take this obligation freely, without any mental reservation or purpose of evasion; and that I will well and faithfully discharge the duties upon which I am about to enter.

State of California } ss. [Redacted Signature]  
County of Riverside }

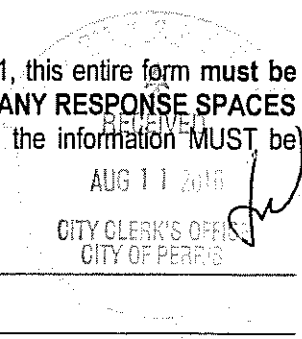
SIGNATURE OF NOMINEE

Subscribed and sworn to before me 11th August, 2016

[Redacted Signature] SIGNATURE OF OFFICER ADMINISTERING OATH  
Deputy Clerk TITLE OF OFFICER ADMINISTERING OATH

# Ballot Designation Worksheet

Pursuant to California Elections Code Section 13107.3 and California Code of Regulations section 20711, this entire form must be completed, or it will not be accepted and you will not be entitled to a ballot designation. DO NOT LEAVE ANY RESPONSE SPACES BLANK. If information requested is not applicable, please write N/A in the space provided. Otherwise the information MUST be provided. Upon filing, this worksheet will be a public record.



Candidate Information

Candidate Name: RAUL MARK YARBROUGH  
Office: CITY COUNCIL  
Home Address: [REDACTED]  
Business Address: [REDACTED]  
Mailing Address: [REDACTED]  
Phone Number(s) Business: [REDACTED] Home/Mobile: [REDACTED] Fax: [REDACTED]  
Gender (optional, for translation use only): MALE

Attorney Information

Attorney Name (or other person authorized to act in your behalf): N/A  
Address: N/A  
Home Address: N/A E-Mail: N/A  
Business Address: N/A  
Mailing Address: N/A  
Phone Number(s) Business: N/A Home/Mobile: N/A Fax: N/A

Proposed Ballot Designation: COUNCIL MEMBER/BUSINESS OWNER  
1st Alternative: COUNCIL MEMBER  
2nd Alternative: SMALL BUSINESS OWNER

You may select as your ballot designation:

- (a) Your current principal profession(s), vocation(s), or occupation(s) [maximum total of three words, separated by a "/"]
- (b) The full title of the public office you currently occupy and to which you were elected
- (c) "Appointed [full title of public office]" if you currently serve by appointment in an elective public office and are seeking election to a different office
- (d) "Incumbent" if you were elected (or, if you are a Superior Court Judge, appointed) to your current public office and seek election to a new term
- (e) "Appointed Incumbent" if you were appointed to your current elective public office (other than Superior Court Judge) and seek election to a new term

In the space provided on the next page or on an attachment sheet, describe why you believe you are entitled to use the proposed ballot designation. Attach any documents or exhibits that you believe support your proposed ballot designation. If using the title of an elective office, attach a copy of your certificate of election or appointment. These documents will not be returned to you. **Do not submit originals.**

If your proposed ballot designation includes the word "volunteer," indicate the title of your volunteer position and the name of the entity for which you volunteer along with a brief description of the type of volunteer work you do and the approximate amount of time

involved. You may only use the ballot designation "community volunteer" if you volunteer for a 501(c)(3) charitable, educational, or religious organization, a governmental agency or an educational institution. You may not use "community volunteer" together with another designation.

Remember, it is your responsibility to justify your proposed ballot designation and to provide all requested details. For your reference, attached are Elections Code Sections 13107 and 13107.3, and 2 California Code of Regulations (CCR) Section 20711. You may also wish to consult Elections Code Section 13107.5 ("community volunteer") and 2 CCR Sections 20712 - 20719 (found at [www.sos.ca.gov](http://www.sos.ca.gov)).

Justification for use of proposed ballot designation: I was elected to the  
city council November 2015 and  
am a small business owner

Current or Most Recent Job Title: OWNER Start/End Dates: 3/95 - present  
Employer Name or Business: SWEDISH SPEER INC.

Person(s) who can verify this information:

Name(s): SHELLY PARBROGCT Phone Number: [REDACTED]

E-mail: [REDACTED]

Name(s): DEBBIE AYERS Phone Number: [REDACTED]

E-mail: [REDACTED]

Before signing below, answer the following questions.

Does your proposed ballot designation:

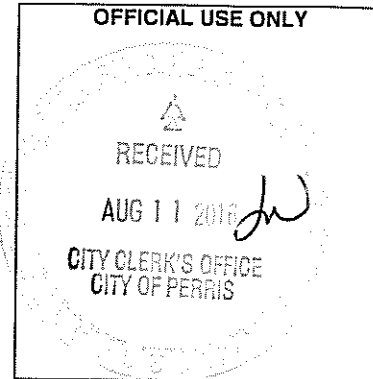
- Use only a portion of the title of your current elected office? Yes  No
- Use only the word "Incumbent" for an elective office (other than Superior Court Judge) to which you were appointed? Yes  No
- Use more than three total words for your principal professions, vocations, or occupations? Yes  No
- Suggest an evaluation of you, such as outstanding, leading, expert, virtuous, or eminent? Yes  No
- Refer to a status (Veteran, Activist, Founder, Scholar), rather than a profession, vocation or occupation? Yes  No
- Abbreviate the word "retired"? Yes  No
- Place the word "retired" after the words it modifies? Example: Accountant, retired Yes  No
- Use any word of prefix (except "retired") such as "former" or "ex-" to refer to a former profession, vocation or occupation? Yes  No
- Use the word "retired" along with a current profession, vocation, or occupation? Example: Retired Firefighter/Teacher Yes  No
- Use the name of a political party or political body? Yes  No
- Refer to a racial, religious, or ethnic group? Yes  No
- Refer to any activity prohibited by law? Yes  No

If the answer to any of these questions is "Yes," your proposed ballot designation is likely to be rejected.

Candidate's Signature: [REDACTED] Date: 8/11/14

**CANDIDATE'S STATEMENT  
Municipal Offices**

OFFICIAL USE ONLY



**TO THE CANDIDATE:**

The Candidate's Statement is optional. Indicate your decision below and return this form with your Nomination Documents.


- I do not wish to submit a Candidate's Statement. \_\_\_\_\_  
CANDIDATE'S INITIALS
- I am submitting my Candidate's Statement (on the back of this form).

**TO CANDIDATE SUBMITTING A CANDIDATE'S STATEMENT:**

Please check below concerning payment of Candidate's Statement deposit.

- City of Perris required deposit of \$500.00 is submitted herewith.

I understand that I must pay **my pro rata share of the actual cost**. I agree that if my pro rata share exceeds the deposit, I will pay the difference when billed.

Signature of Candidate \_\_\_\_\_  


- I request a waiver of the deposit on the grounds of indigence. My Statement of Financial Worth is submitted herewith. (Form available from the City Clerk)

I am aware that if notified that indigent status is not granted, I must pay the deposit within three days of notification or my Candidate's Statement will not be printed.

Further, I am aware that if indigent status is granted, I am excused only from payment of the deposit. I will be required to pay **my pro rata share of the actual cost**, and I agree to do so when billed.

Signature of Candidate \_\_\_\_\_

- No deposit is required. (The city pays the cost.)

**NOTE:** Pursuant to Elections Code Section § 13308 Candidate statements shall be limited to a recitation of the candidate's own personal background and qualifications and shall not in any way make reference to other candidates for that office or to another candidate's qualifications, character, or activities. The Registrar of Voters will not print or circulate any statement that makes reference to other candidates.

WORD COUNT (Elections Code § 9)	
Punctuation	free
Dictionary words and single characters	one
Each abbreviation for a word, phrase, or expression	one
All proper nouns, including geographical names, shall be considered as one word: example, "City and County of San Francisco"	one
Whole numbers:	
Digits (1 or 10 or 100, etc.)	one
Spelled out (one or ten or one hundred)	one for each word
Dates: (5/30/02) or (May 30, 2002)	one
Hyphenated words (unless dictionary defined as one word)	one for each word
Phone Number	one
Internet Address	one

NAME OF OFFICE SOUGHT: CITY COUNCIL  
(CITY COUNCIL, MAYOR, SCHOOL BOARD MEMBER, DIRECTOR, ETC.)

- WARD
- DIVISION
- TRUSTEE AREA (IF ANY) \_\_\_\_\_  FULL TERM  SHORT TERM

JURISDICTION: CITY OF PERRIS  
NAME OF DISTRICT

OCCUPATION: SMALL BUSINESS OWNER (OPTIONAL) AGE: 57

CANDIDATE: RAUL MARK YARBROUGH  
PRINTED NAME

In 200 words or less briefly state your Education and Qualifications:

Dear Voters,

Perris has been my home for over 40 years, and I'm here to make a difference.

During my service as your Councilman, I've worked hard to improve our city.

Perris continues to attract new jobs and new industry such as Lowe's, Whirlpool, Hanes, Home Depot and now General Mills.

Our new Super Walmart is leading the way with new business coming to town. Restaurants and shopping opportunities will open very soon.

We've upgraded parks and built a new soccer facility, Big League Dreams and Drop Zone Water Park.

We've increased services for our seniors and veterans which are very well attended.

Brand new schools are opening throughout the city and don't forget the new Metrolink!

And of course, Public Safety is always our highest priority.

I'm proud to be a part of an experienced leadership team and we ask for your continued support.

These accomplishments are the results of strong leadership, careful planning and a vision that reflects how elected leaders are in touch with your community.

Perris needs strong, experienced leadership to continue to moving forward.

As always, I'm available for your concerns and questions at (951) 657-7788.

God Bless and Vote for Raul Mark Yarbrough

OFFICIAL USE ONLY

49

47

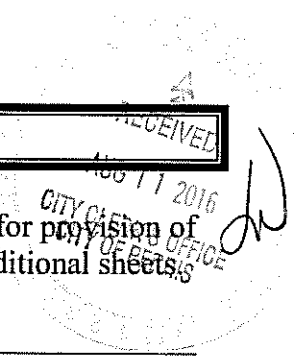
42

51

134

TOTAL WORD COUNT

**CANDIDATE BIOGRAPHY FORM**



This form is completely optional; it may be filed in the City Clerk's Office for provision of information to the news media and public upon request. You may attach additional sheets.

NAME: RALL MARK YARBROUGH

OFFICE SOUGHT: PERRIS CITY COUNCIL

ADDRESS: 


AGE: 57

YEARS OF RESIDENCE IN CALIFORNIA: 57

YEARS OF RESIDENCE IN PERRIS: 40

EDUCATION & TRAINING: GRADUATE: PERRIS HIGH-1977 GRADUATE:

ARIZONA AUTOMOTIVE INSTITUTE-1980 MASTER RATING-VOLVO CAR  
OF NORTH AMERICA, MASTERS RATING ASE (AUTOMOTIVE SERVICE  
MEMBERSHIP & OFFICES IN CIVIC, RELIGIOUS OR FRATERNAL  
ORGANIZATIONS: OPTIMIST INTERNATIONAL (EXCELLENCE)  
PAST PRESIDENT, SONS OF THE AMERICAN LEGION.

CAMPAIGN CONTACT/HEADQUARTERS (IF ANY): SWEDISH SAEBO  


HOME PHONE:  BUSINESS PHONE: 

WEBSITE: YARBROUGH4PERRIS.COM EMAIL: 

AT WHICH NUMBER DO YOU PREFER TO BE CONTACTED? 

**I APPROVE THE USE OF THIS FORM FOR PUBLIC INFORMATION.**

DATE: 8/11/16 SIGNATURE: 

COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
YARBROUGHT RAVE MARK

1. Office, Agency, or Court

Agency Name (Do not use acronyms) CITY OF PERRIS  
Division, Board, Department, District, if applicable CITY COUNCIL  
Your Position COUNCIL MEMBER

RECEIVED  
AUG 11 2016  
CITY CLERK'S OFFICE  
CITY OF PERRIS

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

2. Jurisdiction of Office (Check at least one box)

- State
- Multi-County \_\_\_\_\_
- City of PERRIS
- Judge or Court Commissioner (Statewide Jurisdiction)
- County of \_\_\_\_\_
- Other \_\_\_\_\_

3. Type of Statement (Check at least one box)

- Annual: The period covered is January 1, 2015, through December 31, 2015.
- Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_ (Check one)
- Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_
- The period covered is January 1, 2015, through the date of leaving office.
- The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.
- Candidate: Election year 2016 and office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary (must complete) ► Total number of pages including this cover page: \_\_\_\_\_

Schedules attached

- Schedule A-1 - Investments - schedule attached
- Schedule C - Income, Loans, & Business Positions - schedule attached
- Schedule A-2 - Investments - schedule attached
- Schedule D - Income - Gifts - schedule attached
- Schedule B - Real Property - schedule attached
- Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)

DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and any attached schedules and I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 8/11/16  
(month, day, year)

Signature \_\_\_\_\_  
(File the originally signed statement with your filing official.)

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
(Ownership Interest is 10% or Greater)

**CALIFORNIA FORM 700**  
**FAIR POLITICAL PRACTICES COMMISSION**  
Name \_\_\_\_\_  
**Raul Mark Yarbrough**

**▶ 1. BUSINESS ENTITY OR TRUST**

**Swedish Speed Inc., dba Swedish Speed**  
Name \_\_\_\_\_  
Address (Business Address Acceptable) \_\_\_\_\_  
Check one  
 Trust, go to 2     Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF THIS BUSINESS**  
**Auto Repair**

<b>FAIR MARKET VALUE</b>	<b>IF APPLICABLE, LIST DATE:</b>	
<input type="checkbox"/> \$0 - \$1,999	____/____/15	____/____/15
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$10,001 - \$100,000		
<input checked="" type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

**NATURE OF INVESTMENT**  
 Partnership     Sole Proprietorship     **Incorporated**     Other

**YOUR BUSINESS POSITION** CFO

**▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

\$0 - \$499                       \$10,001 - \$100,000  
 \$500 - \$1,000                 OVER \$100,000  
 \$1,001 - \$10,000

**▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)**

None    or     Names listed below  
dba Swedish Speed, dba Champion Tow  
\_\_\_\_\_  
\_\_\_\_\_

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT                       REAL PROPERTY

**Swedish Speed, Inc.**  
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property  
\_\_\_\_\_

Description of Business Activity or City or Other Precise Location of Real Property  
\_\_\_\_\_

<b>FAIR MARKET VALUE</b>	<b>IF APPLICABLE, LIST DATE:</b>	
<input type="checkbox"/> \$2,000 - \$10,000	____/____/15	____/____/15
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

**NATURE OF INTEREST**  
 Property Ownership/Deed of Trust     Stock     Partnership

Leasehold \_\_\_\_\_ Yrs. remaining     Other \_\_\_\_\_

Check box if additional schedules reporting investments or real property are attached

**▶ 1. BUSINESS ENTITY OR TRUST**

**Swedish Speed Inc., dba Champion Tow**  
Name \_\_\_\_\_  
Address (Business Address Acceptable) \_\_\_\_\_  
Check one  
 Trust, go to 2     Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF THIS BUSINESS**  
**Towing and Auto Storage**

<b>FAIR MARKET VALUE</b>	<b>IF APPLICABLE, LIST DATE:</b>	
<input type="checkbox"/> \$0 - \$1,999	____/____/15	____/____/15
<input type="checkbox"/> \$2,000 - \$10,000	ACQUIRED	DISPOSED
<input type="checkbox"/> \$10,001 - \$100,000		
<input checked="" type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

**NATURE OF INVESTMENT**  
 Partnership     Sole Proprietorship     **Incorporated**     Other

**YOUR BUSINESS POSITION** CFO

**▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

\$0 - \$499                       \$10,001 - \$100,000  
 \$500 - \$1,000                 OVER \$100,000  
 \$1,001 - \$10,000

**▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)**

None    or     Names listed below  
dba Swedish Speed, dba Champion Tow  
\_\_\_\_\_  
\_\_\_\_\_

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST**

Check one box:  
 INVESTMENT                       REAL PROPERTY

**Champion Tow**  
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property  
\_\_\_\_\_

Description of Business Activity or City or Other Precise Location of Real Property  
\_\_\_\_\_

<b>FAIR MARKET VALUE</b>	<b>IF APPLICABLE, LIST DATE:</b>	
<input type="checkbox"/> \$2,000 - \$10,000	____/____/15	____/____/15
<input type="checkbox"/> \$10,001 - \$100,000	ACQUIRED	DISPOSED
<input checked="" type="checkbox"/> \$100,001 - \$1,000,000		
<input type="checkbox"/> Over \$1,000,000		

**NATURE OF INTEREST**  
 Property Ownership/Deed of Trust     Stock     Partnership

Leasehold \_\_\_\_\_ Yrs. remaining     Other \_\_\_\_\_

Check box if additional schedules reporting investments or real property are attached

Comments: \_\_\_\_\_



**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

Name  
Raul Mark Yarbrough

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
[REDACTED]

CITY  
[REDACTED]

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

IF APPLICABLE, LIST DATE:  
 ACQUIRED:      /      / 15  
 DISPOSED:      /      / 15

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold \_\_\_\_\_ Yrs. remaining       \_\_\_\_\_ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499       \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 None

\_\_\_\_\_  
 \_\_\_\_\_

▶ ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS  
\_\_\_\_\_

CITY  
\_\_\_\_\_

FAIR MARKET VALUE  
 \$2,000 - \$10,000  
 \$10,001 - \$100,000  
 \$100,001 - \$1,000,000  
 Over \$1,000,000

IF APPLICABLE, LIST DATE:  
 ACQUIRED:      /      / 15  
 DISPOSED:      /      / 15

NATURE OF INTEREST  
 Ownership/Deed of Trust       Easement  
 Leasehold \_\_\_\_\_ Yrs. remaining       \_\_\_\_\_ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED  
 \$0 - \$499       \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.  
 None

\_\_\_\_\_  
 \_\_\_\_\_

\* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*  
\_\_\_\_\_

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER  
\_\_\_\_\_

INTEREST RATE      TERM (Months/Years)  
 \_\_\_\_\_%       None      \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

Guarantor, if applicable

\_\_\_\_\_

NAME OF LENDER\*  
\_\_\_\_\_

ADDRESS (Business Address Acceptable)  
\_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER  
\_\_\_\_\_

INTEREST RATE      TERM (Months/Years)  
 \_\_\_\_\_%       None      \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

Guarantor, if applicable

\_\_\_\_\_

Comments: \_\_\_\_\_

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
 (Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**  
 FAIR POLITICAL PRACTICES COMMISSION

Name  
 Raul Mark Yarbrough

**▶ 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME  
 Perris Auto Speedway

ADDRESS (Business Address Acceptable)  
 [REDACTED]

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Auto Racing

YOUR BUSINESS POSITION  
 Tow Truck Provider

GROSS INCOME RECEIVED  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 Salary       Spouse's or registered domestic partner's income  
 (For self-employed use Schedule A-2.)

Partnership (Less than 10% ownership. For 10% or greater use  
 Schedule A-2.)

Sale of \_\_\_\_\_  
 (Real property, car, boat, etc.)

Loan repayment

Commission or       Rental Income, list each source of \$10,000 or more

\_\_\_\_\_  
 (Describe)

Other **Champion Towing-Tickets**  
 (Describe)

**▶ 1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED  
 \$500 - \$1,000       \$1,001 - \$10,000  
 \$10,001 - \$100,000       OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED  
 Salary       Spouse's or registered domestic partner's income  
 (For self-employed use Schedule A-2.)

Partnership (Less than 10% ownership. For 10% or greater use  
 Schedule A-2.)

Sale of \_\_\_\_\_  
 (Real property, car, boat, etc.)

Loan repayment

Commission or       Rental Income, list each source of \$10,000 or more

\_\_\_\_\_  
 (Describe)

Other \_\_\_\_\_  
 (Describe)

**▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD  
 \$500 - \$1,000  
 \$1,001 - \$10,000  
 \$10,001 - \$100,000  
 OVER \$100,000

INTEREST RATE \_\_\_\_\_%       None

TERM (Months/Years) \_\_\_\_\_

SECURITY FOR LOAN  
 None       Personal residence

Real Property \_\_\_\_\_  
 Street address \_\_\_\_\_  
 City \_\_\_\_\_

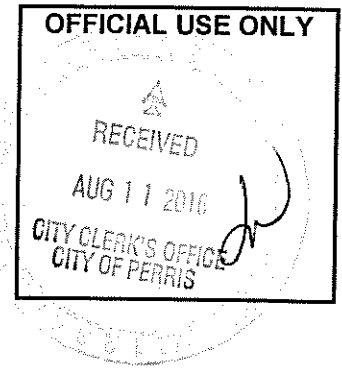
Guarantor \_\_\_\_\_

Other \_\_\_\_\_  
 (Describe)

Comments: \_\_\_\_\_

**"CODE OF FAIR CAMPAIGN PRACTICES"**

There are basic principles of decency, honesty, and fair play which every candidate for public office in the State of California has a moral obligation to observe and uphold in order that, after vigorously contested but fairly conducted campaigns, our citizens may exercise their constitutional right to a free and untrammelled choice and the will of the people may be fully and clearly expressed on the issues.




**THEREFORE:**

- (1) **I SHALL CONDUCT** my campaign openly and publicly, discussing the issues as I see them, presenting my record and policies with sincerity and frankness, and criticizing without fear or favor the record and policies of my opponents or political parties which merit this criticism.
- (2) **I SHALL NOT USE OR PERMIT** the use of character defamation, whispering campaigns, libel, slander, or scurrilous attacks on any candidate or his or her personal or family life.
- (3) **I SHALL NOT USE OR PERMIT** any appeal to negative prejudice based on a candidate's actual or perceived race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, marital status, age, sexual orientation, sex, including gender identity, or any other characteristic set forth in Section 12940 of the Government Code, or association with another person who has any of the actual or perceived characteristics set forth in Section 12940 of the Government Code.
- (4) **I SHALL NOT USE OR PERMIT** any dishonest or unethical practice that tends to corrupt or undermine our American system of free elections, or that hampers or prevents the full and free expression of the will of the voters including acts intended to hinder or prevent any eligible person from registering to vote, enrolling to vote, or voting.
- (5) **I SHALL NOT** coerce election help or campaign contributions for myself or for any other candidate from my employees.
- (6) **I SHALL IMMEDIATELY AND PUBLICLY REPUDIATE** support deriving from any individual or group that resorts, on behalf of my candidacy or in opposition to that of my opponent, to the methods and tactics that I condemn. I shall accept responsibility to take firm action against any subordinate who violates any provision of this code or the laws governing elections.
- (7) **I SHALL DEFEND AND UPHOLD** the right of every qualified American voter to full and equal participation in the electoral process.

I, the undersigned, candidate for election to public office in the State of California or treasurer or chairperson of a committee making any independent expenditures, hereby voluntarily endorse, subscribe to, and solemnly pledge myself to conduct my campaign in accordance with the above principles and practices.

8/11/16  
DATE OF SIGNING

  
SIGNATURE  
PAUL MARK YARBROCK  
PRINTED NAME

PERRIS CITY COUNCIL  
OFFICE SOUGHT (INCLUDING DISTRICT/DIVISION IF APPLICABLE)

November 8, 2016  
DATE OF ELECTION