

Recipient Committee Campaign Statement

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

CALIFORNIA
2001/02
FORM **460**

Date Stamp

Page 1 of 29

For Official Use Only

Statement covers period

from 04/24/2016

through 05/21/2016

Date of election if applicable:
(Month, Day, Year)

06/07/2016

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1,2,3, and 4.

- ☒ Officeholder, Candidate Controlled Committee
☒ State Candidate Election Committee
☐ Recall
(Also Complete Part 5.)
☐ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☐ Political Party/Central Committee
- ☐ Ballot Measure Committee
☐ Primary Formed
☐ Controlled
☐ Sponsored
(Also Complete Part 6.)
☐ Primary Formed Candidate/
Officeholder Committee
(Also Complete Part 7.)

2. Type of Statement:

- ☒ Pre-election Statement
☐ Semi-annual Statement
☐ Termination Statement
☐ Amendment (Explain below)
- ☐ Quarterly Statement
☐ Special Odd-Year Report
☐ Supplemental Preelection
Statement - Attach Form 495

3. Committee Information

I.D. NUMBER
1373710

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Marc Steinorth for Assembly 2016

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Rancho Cucamonga</u>	<u>CA</u>	<u>91701</u>	<u>() -</u>

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Santa Ana</u>	<u>CA</u>	<u>92705</u>	

OPTIONAL: FAX/E-MAIL ADDRESS
lysaray.campaignservices@gmail.com

Treasurer(s)

NAME OF TREASURER
Lysa Ray

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Santa Ana</u>	<u>CA</u>	<u>92705</u>	<u>714-540-2295</u>

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX/E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 05/24/2016 By Lysa Ray
DATE SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on 05/24/2016 By Marc Steinorth
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

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

Recipient Committee Campaign Statement Cover Page – Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA
FORM **460**

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Marc Steinorth

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

Held: State Assembly Person

Assembly District

40

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

Alta Loma

CA

91737

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES

☐ NO

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

CITY

STATE

ZIP CODE

AREA CODE/PHONE

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES

☐ NO

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

CITY

STATE

ZIP CODE

AREA CODE/PHONE

6. Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER

JURISDICTION

☐ SUPPORT

☐ OPPOSE

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

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

7. Primarily Formed Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

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

SUMMARY PAGE

Statement covers period from 04/24/2016 through 05/21/2016	CALIFORNIA FORM 460 Page 3 of 29 I.D. NUMBER 1373710
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Marc Steinorth for Assembly 2016

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$143,253.94	\$287,152.14
2. Loans Received	Schedule B, Line 7	\$0.00	\$58,400.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$143,253.94	\$345,552.14
4. Nonmonetary Contributions	Schedule C, Line 3	\$876.98	\$23,605.38
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$144,130.92	\$369,157.52

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

	1/1 through 6/30	7/1 to Date
20. Contribution Received	\$0.00	\$0.00
21. Expenditures Made	\$0.00	\$0.00

Expenditures Made

6. Payments Made	Schedule E, Line 4	\$11,383.59	\$33,729.61
7. Loans Made	Schedule H, Line 7	\$0.00	\$0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$11,383.59	\$33,729.61
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	\$0.00	\$0.00
10. Nonmonetary Adjustment	Schedule C, Line 3	\$876.98	\$23,605.38
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	\$12,260.57	\$57,334.99

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	\$471,194.53	To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).
13. Cash Receipts	Column A, Line 3 above	\$143,253.94	
14. Miscellaneous Increases to Cash	Schedule I, Line 4	\$0.00	
15. Cash Payments	Column A, Line 8 above	\$11,383.59	
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$603,064.88	
If this is a termination statement, Line 16 must be zero.			
17. LOAN GUARANTEES RECEIVED	Schedule B, Part 2	\$0.00	

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	\$0.00
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	\$58,400.00

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

Schedule A

Monetary Contributions Received

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

SCHEDULE A

Statement covers period from <u>04/24/2016</u>		CALIFORNIA FORM 460
through <u>05/21/2016</u>		
		Page <u>4</u> of <u>29</u>
NAME OF FILER Marc Steinorth for Assembly 2016		I.D. Number 1373710

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING 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)
5/5/2016	Advance America Spartanburg, SC 29306	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$1,000.00	\$1,000.00	2016P: \$1,000.00
5/16/2016	American Chemistry Council Washington, DC 20002	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$1,500.00	\$1,500.00	2016P: \$1,500.00
5/3/2016	Amgen Inc Alexandria, VA 22303	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$1,000.00	\$2,000.00	2016P: \$3,500.00
4/28/2016	Anthem Blue Cross Sacramento, CA 95814	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$1,200.00	\$1,500.00	2016P: \$4,200.00 2016G: \$300.00
4/28/2016	Anthem Blue Cross Sacramento, CA 95814	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$300.00	\$1,500.00	2016P: \$4,200.00 2016G: \$300.00

SUBTOTAL

Schedule A Summary

1. Amount received this period - contributions of \$100 or more. (Include all Schedule A subtotals.)	\$141,866.94
2. Amount received this period - unitemized contributions of less than \$100	\$1,387.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)	TOTAL \$143,253.94

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

FPPC Form 460 (JUNE/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period from <u>04/24/2016</u>		CALIFORNIA FORM 460
through <u>05/21/2016</u>		
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5/20/2016	Jesus Armendarez Fontana, CA 92335	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Sierra Realty Realtor	\$250.00	\$250.00	2016P: \$250.00
5/10/2016	Associated General Contractors PAC West Sacramento, CA 95691 Committee ID: 890194	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		\$500.00	\$2,000.00	2016P: \$4,000.00
5/18/2016	AstraZeneca Wilmington, DE 19850	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$1,500.00	\$1,500.00	2016P: \$3,000.00
5/9/2016	Paul Barich Redlands, CA 92373	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Barich & Assoc Broker	\$400.00	\$2,500.00	2016P: \$4,200.00 2016G: \$400.00
5/9/2016	Paul Barich Redlands, CA 92373	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Barich & Assoc Broker	\$2,100.00	\$2,500.00	2016P: \$4,200.00 2016G: \$400.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period from 04/24/2016		CALIFORNIA FORM 460
through 05/21/2016		
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NAME OF FILER Marc Steinorth for Assembly 2016		I.D. Number 1373710

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DATE RECEIVED	FULL NAME, MAILING 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)
5/20/2016	Brickley Environmental Brickley Construction San Bernardino, CA 92411	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$250.00	\$562.30	2016P: \$1,212.30
5/10/2016	CA Assoc of Health Plans PAC Sacramento, CA 95814 Committee ID: 950541	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		\$1,500.00	\$3,000.00	2016P: \$4,200.00 2016G: \$1,800.00
5/17/2016	Ca Professional Firefighters PAC Sacramento, CA 95833 Committee ID: 744058	☐ IND ☐ COM ☐ OTH ☐ PTY ☒ SCC		\$1,500.00	\$2,500.00	2016P: \$8,500.00
4/27/2016	CA Republican Party Burbank, CA 91506 Committee ID: 810163	☐ IND ☐ COM ☐ OTH ☒ PTY ☐ SCC		\$35,000.00	\$57,000.00	2016P: \$64,500.00
4/26/2016	California Building Industry Assoc PAC Sacramento, CA 95814 Committee ID: 890483	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		\$1,000.00	\$1,000.00	2016P: \$4,200.00 2016G: \$1,000.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from 04/24/2016		CALIFORNIA FORM 460
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NAME OF FILER Marc Steinorth for Assembly 2016		I.D. Number 1373710

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4/27/2016	California Chiropractic Assoc PAC Sacramento, CA 95814 Committee ID: 742986	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		\$1,000.00	\$1,000.00	2016P: \$1,000.00
4/26/2016	CALPAC California Medical Assoc PAC Sacramento, CA 95814 Committee ID: 742617	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		\$1,000.00	\$2,700.00	2016P: \$4,200.00
5/12/2016	CALPAC California Medical Assoc PAC Sacramento, CA 95814 Committee ID: 742617	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		\$1,700.00	\$2,700.00	2016P: \$4,200.00
5/10/2016	CSI California Steel Industries Fontana, CA 92335	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$1,000.00	\$1,000.00	2016P: \$1,000.00
5/10/2016	California Trailblazers Sacramento, CA 95814 Committee ID: 1373710	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		\$3,616.94	\$3,616.94	2016P: \$4,200.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from <u>04/24/2016</u>		CALIFORNIA FORM 460
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5/4/2016	CCA of Tennessee Nashville, TN 37215	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$1,000.00	\$1,000.00	2016P: \$1,000.00
5/10/2016	Kellie Clark Rancho Cucamonga, CA 91739	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Newco Distributors CFO	\$1,000.00	\$1,000.00	2016P: \$1,000.00
5/20/2016	CLL Firm LLC Newport Beach, CA 92660	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$1,000.00	\$1,000.00	2016P: \$1,000.00
5/5/2016	Comcast Philadelphia, PA 19103	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$1,500.00	\$1,500.00	2016P: \$1,500.00
5/20/2016	Commercial Realty Advisors Rancho Cucamonga, CA 91730	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$1,500.00	\$1,500.00	2016P: \$1,500.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	04/24/2016	
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NAME OF FILER

Marc Steinorth for Assembly 2016

I.D. Number
1373710

DATE RECEIVED	FULL NAME, MAILING 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)
5/13/2016	WellCare Comprehensive Health Management Cypress, CA 90630	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$1,000.00	\$1,000.00	2016P: \$1,000.00
5/13/2016	CSLEA PAC Sacramento, CA 95814 Committee ID: 970375	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		\$1,000.00	\$1,000.00	2016P: \$1,000.00
5/20/2016	Martha Cuevas Fontana, CA 92336	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Homemaker	\$4,100.00	\$4,100.00	2016P: \$4,100.00
5/10/2016	Dart Container Mason, MI 48854	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$2,000.00	\$2,000.00	2016P: \$4,200.00 2016G: \$2,300.00
4/26/2016	Del Mar Thoroughbred Club Del Mar, CA 92014	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$500.00	\$500.00	2016P: \$1,500.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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SCHEDULE A (CONT.)

Statement covers period from 04/24/2016 through 05/21/2016		CALIFORNIA FORM 460 Page 10 of 29
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5/20/2016	Philip Dowley La Jolla, CA 92037	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Gateway Personnel Svcs Real Estate Exec	\$1,000.00	\$1,000.00	2016P: \$1,000.00
4/27/2016	EdVoice for the Kids PAC Sacramento, CA 95814 Committee ID: 1243091	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		\$1,500.00	\$1,500.00	2016P: \$3,500.00
4/26/2016	Enterprise Holdings Inc PAC Saint Louis, MO 63105 Committee ID: 992324	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		\$1,200.00	\$1,500.00	2016P: \$4,200.00 2016G: \$300.00
4/26/2016	Enterprise Holdings Inc PAC Saint Louis, MO 63105 Committee ID: 992324	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		\$300.00	\$1,500.00	2016P: \$4,200.00 2016G: \$300.00
5/20/2016	Farmers Employees & Agents PAC San Rafael, CA 94901 Committee ID: 901422	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		\$4,200.00	\$4,200.00	2016P: \$4,200.00 2016G: \$4,200.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period from 04/24/2016 through 05/21/2016		CALIFORNIA FORM 460 Page 11 of 29
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marc Steinorth for Assembly 2016

DATE RECEIVED	FULL NAME, MAILING 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)
5/20/2016	Farmers Group Inc Employees & Agents PAC San Rafael, CA 94901 Committee ID: 1343619	☐ IND ☐ COM ☐ OTH ☐ PTY ☒ SCC		\$4,300.00	\$4,300.00	2016P: \$4,300.00 2016G: \$4,300.00
5/20/2016	FH II LLC Rancho Cucamonga, CA 91730	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$1,700.00	\$5,900.00	2016P: \$4,200.00 2016G: \$1,700.00
5/20/2016	FH II LLC Rancho Cucamonga, CA 91730	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$4,200.00	\$5,900.00	2016P: \$4,200.00 2016G: \$1,700.00
5/3/2016	Fox Group Los Angeles, CA 90067	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$1,000.00	\$1,000.00	2016P: \$1,000.00
5/20/2016	Gerald W Beard Realty Rialto, CA 92376	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$250.00	\$250.00	2016P: \$250.00
SUBTOTAL						

*Contributor Codes
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 (other than PTY or SCC)
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Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	04/24/2016	
through	05/21/2016	Page 12 of 29

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Marc Steinorth for Assembly 2016

I.D. Number
1373710

DATE RECEIVED	FULL NAME, MAILING 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)
4/28/2016	GreenbergTaurig Miami, FL 33166	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$1,000.00	\$1,000.00	2016P: \$1,000.00
4/26/2016	Grove for Senate 2018 Bakersfield, CA 93309 Committee ID: 1374834	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		\$4,200.00	\$4,200.00	2016P: \$4,200.00
5/3/2016	Jacob Haiavy Rancho Cucamonga, CA 91730	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self Doctor	\$250.00	\$250.00	2016P: \$250.00
5/20/2016	Joseph Henehan Redlands, CA 92373	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	The Henehan Co CEO	\$250.00	\$250.00	2016P: \$375.00
5/20/2016	Stephan Hinckley Carlsbad, CA 92009	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Land Cap Investment Partners CEO	\$1,000.00	\$1,000.00	2016P: \$1,000.00
SUBTOTAL						

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	04/24/2016	
through	05/21/2016	Page 13 of 29

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Marc Steinorth for Assembly 2016

I.D. Number

1373710

DATE RECEIVED	FULL NAME, MAILING 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)
5/20/2016	Jeffrey Holbrook San Juan Capistrano, CA 92675	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Land Cap Investment Partners Coo	\$1,000.00	\$1,000.00	2016P: \$1,000.00
5/20/2016	Holliday Rock Co Upland, CA 91786	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$500.00	\$500.00	2016P: \$3,150.00
5/20/2016	Roberta Howe Newport Beach, CA 92663	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	South Lazy H Ranch Manager	\$1,000.00	\$1,000.00	2016P: \$1,000.00
5/3/2016	Ryan Hutchison Rancho Cucamonga, CA 91739	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	All Nations Realty Realtor	\$200.00	\$200.00	2016P: \$475.00
5/10/2016	International Union of Operating Engineers Pasadena, CA 91103 Committee ID: 743030	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		\$4,200.00	\$4,200.00	2016P: \$4,200.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period from <u>04/24/2016</u>		CALIFORNIA FORM 460
through <u>05/21/2016</u>		
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NAME OF FILER Marc Steinorth for Assembly 2016		I.D. Number 1373710

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING 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)
5/20/2016	Reggie King Rancho Cucamonga, CA 91730	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Young Homes CEO	\$4,200.00	\$4,200.00	2016P: \$4,200.00
5/20/2016	Knapp & Assoc San Bernardino, CA 92401	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$200.00	\$200.00	2016P: \$200.00
5/20/2016	Christopher Leggio Upland, CA 91785	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Mark Christopher Auto Center Owner	\$2,000.00	\$2,000.00	2016P: \$2,000.00
5/18/2016	Angela Magness Redlands, CA 92373	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Volunteer	\$500.00	\$500.00	2016P: \$500.00
5/3/2016	David Mayo Rancho Cucamonga, CA 91730	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self/David Mayo Insurance Sales	\$200.00	\$200.00	2016P: \$750.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period from <u>04/24/2016</u>		CALIFORNIA FORM 460
through <u>05/21/2016</u>		
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NAME OF FILER Marc Steinorth for Assembly 2016		I.D. Number 1373710

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING 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)
5/20/2016	John Mirau Claremont, CA 91711	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Mirau, Edwards, Cannon, Lewin & Tooke Attorney	\$200.00	\$200.00	2016P: \$200.00
5/20/2016	Richard Munkvold Rancho Cucamonga, CA 91737	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Frontier Enterprises CFO	\$3,000.00	\$3,000.00	2016P: \$3,000.00
5/20/2016	Neill Waner Certified Financial Planner Redlands, CA 92373	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$150.00	\$150.00	2016P: \$150.00
5/20/2016	New Direction Upland, CA 91784	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$500.00	\$500.00	2016P: \$500.00
5/5/2016	Northern California Water Assoc PAC Sacramento, CA 95814 Committee ID: 921655	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		\$1,000.00	\$1,000.00	2016P: \$1,000.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period from <u>04/24/2016</u> through <u>05/21/2016</u>		CALIFORNIA FORM 460 Page <u>16</u> of <u>29</u>
I.D. Number 1373710		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marc Steinorth for Assembly 2016

DATE RECEIVED	FULL NAME, MAILING 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)
5/10/2016	Novartis Fort Worth, TX 76134	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$1,500.00	\$1,500.00	2016P: \$1,500.00
4/26/2016	Mark Olson Rancho Cucamonga, CA 91739	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Gerdau VP/GM	\$500.00	\$500.00	2016P: \$500.00
5/20/2016	O'Reilly Public Relations Riverside, CA 92501	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$900.00	\$900.00	2016P: \$900.00
5/20/2016	James Previti Carlsbad, CA 92008	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Gateway Personnel Svcs CEO	\$4,200.00	\$4,200.00	2016P: \$4,200.00
5/20/2016	Kathleen Salvesen Redlands, CA 92373	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	La-Z-Boy Furniture President	\$250.00	\$250.00	2016P: \$1,400.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period from 04/24/2016		CALIFORNIA FORM 460
through 05/21/2016		
		Page 17 of 29
NAME OF FILER Marc Steinorth for Assembly 2016		I.D. Number 1373710

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, MAILING 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)
5/10/2016	Local Union 105 Sheet Metal Workers International Assov Glendora, CA 91740 Committee ID: 962809	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		\$1,500.00	\$1,500.00	2016P: \$1,500.00
5/20/2016	Paul Shimoff Redlands, CA 92373	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Shimoff Law Corp Owner	\$500.00	\$998.20	2016P: \$998.20
5/21/2016	Robert Sorosky Upland, CA 91784	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	\$500.00	\$500.00	2016P: \$500.00
5/10/2016	Tesoro Companies Sacramento, CA 95814	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$1,000.00	\$1,000.00	2016G: \$1,000.00
5/11/2016	The Doctors Company PAC Napa, CA 94558 Committee ID: 923140	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		\$4,200.00	\$4,200.00	2016P: \$4,200.00 2016G: \$4,200.00
SUBTOTAL						

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Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period from <u>04/24/2016</u> through <u>05/21/2016</u>		CALIFORNIA FORM 460 Page <u>18</u> of <u>29</u>
I.D. Number 1373710		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Marc Steinorth for Assembly 2016

DATE RECEIVED	FULL NAME, MAILING 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)
5/10/2016	Viejas Tribal Government Alpine, CA 91901	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$4,100.00	\$4,200.00	2016P: \$4,200.00 2016G: \$4,100.00
5/10/2016	Viejas Tribal Government Alpine, CA 91901	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$100.00	\$4,200.00	2016P: \$4,200.00 2016G: \$4,100.00
5/3/2016	Waldron for Assembly 2016 San Diego, CA 92119 Committee ID: 1374375.	☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		\$4,200.00	\$4,200.00	2016P: \$4,200.00
5/3/2016	Watson Land Co Carson, CA 90745	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		\$1,200.00	\$1,200.00	2016P: \$4,200.00
5/20/2016	Deanna Williams San Bernardino, CA 92404	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	\$100.00	\$100.00	2016P: \$100.00
SUBTOTAL				\$141,866.94		

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Schedule B – Part 1 Loans Received

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

SCHEDULE B - PART 1

Statement covers period from 04/24/2016 through 05/21/2016	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Marc Steinorth for Assembly 2016	I.D. NUMBER 1373710
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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 PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Brian Dahle for Assembly 2018 Willows, CA 95988 Committee ID: 1373730 ☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		\$4,200.00		☐ PAID ☐ FORGIVEN	\$4,200.00 12/31/2017 DATE DUE	 RATE % 	\$4,200.00 4/23/2016 DATE INCURRED	CALENDAR YEAR \$4,200.00 PER ELECTION** 2016P: \$4,200.00
Marc Steinorth Rancho Cucamonga, CA 91737 ☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC	Assemblyman State of CA	\$50,000.00		☐ PAID ☐ FORGIVEN	\$50,000.00 DATE DUE	 RATE % 	\$50,000.00 3/9/2015 DATE INCURRED	CALENDAR YEAR \$0.00 PER ELECTION** 2016P: \$50,000.00
Travis Allen for Assembly 2016 Willows, CA 95988 Committee ID: 1373831 ☐ IND ☒ COM ☐ OTH ☐ PTY ☐ SCC		\$4,200.00		☐ PAID ☐ FORGIVEN	\$4,200.00 12/31/2017 DATE DUE	 RATE % 	\$4,200.00 1/26/2016 DATE INCURRED	CALENDAR YEAR \$4,200.00 PER ELECTION** 2016P: \$4,200.00
SUBTOTALS						\$58,400.00		

Schedule B Summary

1. Loans received this period. _____ \$0.00
(Total Column (b) plus unitemized loans less than \$100.)

2. Loans paid or forgiven this period _____ \$0.00
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) _____ **Net** \$0.00
Enter the net here and on the Summary Page, Column A, Line 2. (may be a negative number)

(Enter (e) on
Schedule E, Line 3)

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

** If required.

*Contributor Codes

IND-Individual COM-Recipient Committee (other than PTY or SCC) OTH-Other PTY-Political Party SCC-Small Contributor Committee

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

Schedule B - Part 2

Loan Guarantors

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

SCHEDULE B - PART 2

Statement covers period from 04/24/2016 through 05/21/2016	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marc Steinorth for Assembly 2016

FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		LENDER DATE		CALENDAR YEAR PER ELECTION (IF REQUIRED)	
	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		LENDER DATE		CALENDAR YEAR PER ELECTION (IF REQUIRED)	
	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		LENDER DATE		CALENDAR YEAR PER ELECTION (IF REQUIRED)	
	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		LENDER DATE		CALENDAR YEAR PER ELECTION (IF REQUIRED)	
SUBTOTAL					Enter on Summary Page, Line 17 only.	

Schedule C Nonmonetary Contributions Received

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

SCHEDULE C

Statement covers period from <u>04/24/2016</u> through <u>05/21/2016</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marc Steinorth for Assembly 2016

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 SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
5/12/2016	Thomas Brickley San Bernardino, CA 92411	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner Brickley Environmental	Wine for FND	\$312.30	\$562.30	2016P: \$1,212.30
5/12/2016	Shimoff Law Corp Redlands, CA 92373	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		FND food & Drink	\$498.20	\$998.20	2016P: \$998.20
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$810.50

Schedule C Summary

1. Amount received this period - nonmonetary contributions of \$100 or more. (Include all Schedule C subtotals.).....	\$810.50
2. Amount received this period - unitemized nonmonetary contributions of less than \$100	\$66.48
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)	TOTAL \$876.98

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IND - Individual
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Schedule D

Summary of Expenditures

Supporting/Opposing Other Candidates, Measures and Committees

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

Statement covers period		SCHEDULE D	
from	04/24/2016	CALIFORNIA FORM 460	
through	05/21/2016	Page 22 of 29	
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marc Steinorth for Assembly 2016

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)
		☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
	☐ Support ☐ Oppose					
		☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
	☐ Support ☐ Oppose					
		☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
	☐ Support ☐ Oppose					

SUBTOTAL

Schedule D Summary

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

Schedule E Payments Made

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

SCHEDULE E

Statement covers period from 04/24/2016 through 05/21/2016	CALIFORNIA FORM 460
	Page 23 of 29
	I.D. NUMBER 1373710

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Marc Steinorth for Assembly 2016

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

CMP	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	TSF	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, email)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Chase Card Palatine, IL 60094	CMP			\$8,517.21
Anedot.com Baton Rouge, LA 70801			cc Processing	\$19.80
Anedot.com Baton Rouge, LA 70801			cc Processing	\$10.05

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

SUBTOTAL

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$11,293.30
2. Unitemized payments made this period of under \$100.	\$90.29
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$0.00
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$11,383.59

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
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Statement covers period		CALIFORNIA FORM 460
from	04/24/2016	
through 05/21/2016		Page 24 of 29
NAME OF FILER Marc Steinorth for Assembly 2016		I.D. NUMBER 1373710

SEE INSTRUCTIONS ON REVERSE

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

- | | | |
|---|---|---|
| CMP 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 | TSF 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, email) |

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot.com Baton Rouge, LA 70801			cc Processing	\$97.80
Anedot.com Baton Rouge, LA 70801			cc Processing	\$39.30
Michael Ornelas Fontana, CA 92336	CMP			\$318.67
The ImagEmporium	CMP			\$1,235.34
FedEx Pasadena, CA 91109	POS			\$31.08

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

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

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

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	04/24/2016	
through 05/21/2016		Page 25 of 29
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CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	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	TSF	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, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Lysa Ray Campaign Services Santa Ana, CA 92705	PRO			\$750.00
Anedot.com Baton Rouge, LA 70801		cc Processing		\$2.25
Logan Rhind Rancho Cucamonga, CA 91739	CMP			\$252.00
Anedot.com Baton Rouge, LA 70801		cc Processing		\$19.80

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

SUBTOTAL \$11,293.30

Schedule F Accrued Expenses (Unpaid Bills)

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

SCHEDULE F

Statement covers period
from 04/24/2016
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CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	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	TSF	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, email)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD

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

SUBTOTALS

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)..... **INCURRED TOTALS** _____
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)..... **PAID TOTALS** _____
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)..... **NET** _____
May be a negative number.

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

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

SCHEDULE G

Statement covers period		CALIFORNIA FORM 460
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NAME OF AGENT OR INDEPENDENT CONTRACTOR
Chase Card

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

CMP	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	TSF	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, email)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Home Depot Rancho Cucamonga, CA 91730	CMP			\$1,500.12
COGS Santa Ana, CA 92707	CMP			\$7,585.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$9085.12

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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

Schedule H – Loans Made to Others*

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

SCHEDULE H

Statement covers period

from 04/24/2016

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FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (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 LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				☐ PAID ☐ FORGIVEN		_____ % RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
				☐ PAID ☐ FORGIVEN		_____ % RATE		CALENDAR YEAR PER ELECTION**
					DATE DUE		DATE INCURRED	
*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.			SUBTOTALS					

(Enter (e) on
Schedule I, Line 3)

Schedule H Summary

- Loans made this period
(Total Column (b) plus unitemized loans less than \$100.)
- Payments received on loans
(Total Column (c) plus unitemized payments less than \$100.)
- Net change this period. (Subtract Line 2 from Line 1.)
(Enter the net here and on the Summary Page, Column A, Line 7.)

NET _____
(May be a negative number)

** If Required

Schedule I

Miscellaneous Increases to Cash

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

SCHEDULE I

Statement covers period

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DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$00

Schedule I Summary

- Increases to cash of \$100 or more this period..... \$00
- Unitemized increases to cash under \$100 this period. \$00
- Total of all interest received this period on loans made to others. (Schedule H, Column (e).)..... \$00
- Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)..... **TOTAL** \$00

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