

**Recipient Committee
Campaign Statement
Cover Page**

COVER PAGE

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CITY OF WALNUT
CITY CLERKS OFFICE

CALIFORNIA FORM 460
Page 1 of 1
For Official Use Only

Statement covers period
from 10/23/2018
through 12/31/2018

Date of Election if applicable
(Month, Day, Year)

1. Type of Recipient Committee

- Officeholder, Candidate Controlled Committee
 - State Candidate Election Committee
 - Recall
- General Purpose Committee
 - Sponsored
 - Small Contributor Committee
 - Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
 - Controlled
 - Sponsored
- Primarily Formed Candidate/Officeholder Committee

2. Type of Statement

- Pre-election Statement
- Semi-Annual Statement
- Termination Statement
- Amendment
- Quarterly Statement
- Special Odd-Year Statement
- Supplemental Pre-election Statement - Attach Form 495

3. Committee Information

I.D. Number 1409950

COMMITTEE NAME
Bob Pacheco for Walnut City Council 2018

STREET ADDRESS (NO PO BOX)
161 Commerce Way

CITY STATE ZIP CODE AREA CODE/PHONE
Walnut CA 91789 626/665-2622

MAILING ADDRESS (IF DIFFERENT)

CITY STATE ZIP CODE

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

Treasurer(s)

NAME OF TREASURER
Dana Hopkins, CPA

STREET ADDRESS
11750 Sterling Ave Ste C

CITY STATE ZIP CODE AREA CODE/PHONE
Riverside CA 951/406-1838

NAME OF ASSISTANT TREASURER, IF ANY

STREET 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 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 1/28/2019 By Dana Hopkins
SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on 1/29/2019 By Bob Pacheco
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

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

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

**Recipient Committee
Campaign Statement
Cover Page - Part 2**

COVER PAGE - PART 2

**CALIFORNIA
FORM 460**

Statement covers period
from 10/23/2018
through 12/31/2018

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
Mr. Robert (Bob) Pacheco

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
City Council Member City of Walnut

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
161 Commerce Way Walnut CA 91789

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

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE ? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE STREET ADDRESS (NO P.O. BOX)	
CITY	STATE ZIP CODE AREA CODE/PHONE
COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE ? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE STREET ADDRESS (NO P.O. BOX)	
CITY	STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER | JURISDICTION

SUPPORT
 OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.
NAME OF OFFICEHOLDER OR CANDIDATE OR PROPONENT

OFFICE SOUGHT OR HELD | DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee

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

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

**Campaign Disclosure Statement
Summary Page**

SUMMARY PAGE

Statement covers period		CALIFORNIA FORM 460
from	10/23/2018	
through	12/31/2018	Page 3 of 11

NAME OF FILER Bob Pacheco for Walnut City Council 2018

I.D. NUMBER
1409950

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
Contributions Received		
1. Monetary Contributions Schedule A, Line 3	\$ 4,999.00	\$ 10,513.00
2. Loans Received Schedule B, Line 3	0.00	4,000.00
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1+2	\$ 4,999.00	\$ 14,513.00
4. Nonmonetary Contributions Schedule C, Line 3	198.30	198.30
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 5,197.30	\$ 14,711.30

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

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

	Column A	Column B
Expenditures Made		
6. Payments Made Schedule E, Line 4	\$ 4,629.92	\$ 12,622.03
7. Loans Made Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 4,629.92	\$ 12,622.03
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	296.02	425.00
10. Nonmonetary Adjustment Schedule C, Line 3	198.30	198.30
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 5,124.24	\$ 13,245.33

**Expenditure Limit Summary
for State Candidates**

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

_____ \$ _____
_____ \$ _____

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

Current Cash Statement	
12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 1,521.89
13. Cash Receipts Column A, Line 3 above	4,999.00
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00
15. Cash Payments Column A, Line 8 above	4,629.92
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 1,890.97

17. LOAN GUARANTEES RECEIVED. Schedule B, Part 2	\$ 0.00
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Cash Equivalents and Outstanding Debts	
18. Cash Equivalents	\$ 0.00
19. Outstanding Debts. Add Lines 2 + Line 9 in Column B above	\$ 4,425.00

**Schedule A
Monetary Contributions Received**

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from	10/23/2018	
through	12/31/2018	Page 4 of 11

NAME OF FILER Bob Pacheco for Walnut City Council 2018

I.D. NUMBER
1409950

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	Amendo V. Alberto 347 Amberwood Dr Walnut, CA 91789	IND	Self Employed Urgent Hospice Care	500.00	500.00	500 (G18)
10/30/2018	Phillip Chen 1142 S Diamond Bar Blvd Diamond Bar, CA 91765	IND	State Assemblyman State of California	1,000.00	1,000.00	1,000 (G18)
10/31/2018	Allen K. Gan 18829 Aldridge Pl Rowland Heights, CA 91748	IND	Businessman Gan Company	500.00	500.00	500 (G18)
10/30/2018	Grow Elect 30101 Town Center Dr Ste 204 Laguna Niguel, CA 92677	COM	ID No. 1342160	500.00	500.00	500 (G18)

SUBTOTAL \$ 2,500.00

Schedule A Summary

1. Amount received this period - itemized contributions (Includes all Schedule A subtotals)	\$ 4,900.00
2. Amount received this period - unitemized	\$ 99.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page. Column A Line 1)	TOTAL \$ 4,999.00

** 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**

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from	10/23/2018	
through	12/31/2018	Page 5 of 11

NAME OF FILER Bob Pacheco for Walnut City Council 2018

I.D. NUMBER
1409950

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2018	Theresa Lee 22379 Kicking Horse Dr Diamond Bar, CA 91765	IND	Director Walnut Valley Water District	500.00	500.00	500 (G18)
10/26/2018	Herminio N. Maximo 3401 Willow Glen Ln West Covina, CA 91792	IND	Retired N.A.	100.00	100.00	100 (G18)
10/30/2018	Karl E. Pearson 20574 Barnard Ave Walnut, CA 91789	IND	Retired N.A.	200.00	200.00	200 (G18)
10/26/2018	Smile Enterprise Inc. 16135 Winton Ct Apple Valley, CA 92307	OTH		100.00	100.00	100 (G18)
SUBTOTAL \$				900.00		

** 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**

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from	10/23/2018	
through	12/31/2018	Page 6 of 11

NAME OF FILER Bob Pacheco for Walnut City Council 2018

I.D. NUMBER
1409950

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/29/2018	Urgent Hospice Care Inc. 1180 Durfee Ave Ste 250 South El Monte, CA 91733	OTH		500.00	500.00	500 (G18)
12/20/2018	Benny Wantah 2899 E Hillside Dr West Covina, CA 91791	IND	Business Owner Nusign Supply	1,000.00	1,000.00	1,000 (G18)

SUBTOTAL \$ 1,500.00

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

**Schedule B - Part 1
Loans Received**

Statement covers period		CALIFORNIA FORM 460
from	10/23/2018	
through	12/31/2018	Page 7 of 11

NAME OF FILER Bob Pacheco for Walnut City Council 2018

I.D. NUMBER
1409950

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER	IF INDIVIDUAL, OCCUPATION & EMPLOYER IF COMMITTEE, ID NUMBER	(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
Robert (Bob) Pacheco 161 Commerce Way Walnut, CA 91789 Contributor Code: IND	Law Offices of Pacheco & Pache Attorney	4,000.00		<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	4000.00	0.00	4,000.00	CALENDAR YEAR 4,000 PER ELECTION ** 4,000 (G18)
					DUE DATE 12/31/2018	INTEREST RATE 0.00 %	DATE INCURRED 09/19/2018	

SUBTOTALS \$	(b) 0.00	(c) 0.00	(d) 4,000.00	(e) 0.00	
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Schedule B Summary

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

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

**Schedule C
Nonmonetary Contributions Received**

SCHEDULE C

Statement covers period		CALIFORNIA FORM 460
from	10/23/2018	
through	12/31/2018	Page 8 of 11
NAME OF FILER Bob Pacheco for Walnut City Council 2018		I.D. NUMBER 1409950

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR	CONTRIBUTOR CODE	OCCUPATION & EMPLOYER OR COMMITTEE ID NO.	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/06/2018	Luis Angel 20835 Valley Blvd Walnut, CA 91783	IND	Owner Los Amigos Restaurant	Food & beverages for election night	198.30	198.30	198 (G18)

SUBTOTAL \$ 198.30

Schedule C Summary

1. Amount received this period - itemized contributions (Includes all Schedule C subtotals)	\$	198.30
2. Amount received this period - unitemized	\$	0.00
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 \$	198.30

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

**Schedule E
Payments Made**

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	10/23/2013	
through	12/31/2018	Page 9 of 11
NAME OF FILER Bob Pacheco for Walnut City Council 2018		I.D. NUMBER 1409950

CODES: If one of the following 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 production costs |
| FIL candidate filing / ballot fees | PHO phone banks | TRC candidate travel, lodging and meals |
| FND fundraising expenses | POL polling and survey research | TRS staff/spouse travel, lodging and meals |
| IND independent expenditures supporting/opposing others | 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,e-mail) |

NAME AND ADDRESS OF PAYEE	CODE or DESCRIPTION OF PAYMENT	AMOUNT PAID
Chase Credit Services P.O. Box 6294 Carol Stream, IL 60197	Advertising	128.98
Chase Credit Services P.O. Box 6294 Carol Stream, IL 60197	Advertising	49.00
Chase Credit Services P.O. Box 6294 Carol Stream, IL 60197	Advertising	65.00
SUBTOTAL \$		242.98

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 4,513.32
2. Unitemized payments made this period of under \$100	\$ 116.60
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 Line 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$ 4,629.92

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

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	10/23/2018	
through	12/31/2018	Page 10 of 11
NAME OF FILER Bob Pacheco for Walnut City Council 2018		I.D. NUMBER 1409950

CODES: If one of the following 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 production costs |
| FIL candidate filing / ballot fees | PHO phone banks | TRC candidate travel, lodging and meals |
| FND fundraising expenses | POL polling and survey research | TRS staff/spouse travel, lodging and meals |
| IND independent expenditures supporting/opposing others | 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,e-mail) |

NAME AND ADDRESS OF PAYEE	CODE or	DESCRIPTION OF PAYMENT	AMOUNT PAID
David Lang & Associates 17837 Calle Los Arboles Rowland Heights, CA 91748	CNS		2,000.00
Political Data Inc. 12501 Imperial Highway #200 Norwalk, CA 90650	CMP		270.34
Christine Chiang- Schultheiss 454 Kiolstad Dr Placentia, CA 92870	LIT		2,000.00

SUBTOTAL \$ 4,270.34

**Schedule F
Accrued Expenses (Unpaid Bills)**

SCHEDULE F

Statement covers period		CALIFORNIA FORM 460
from	10/23/2018	
through	12/31/2018	Page 11 of 11
NAME OF FILER Bob Pacheco for Walnut City Council 2018		I.D. NUMBER 1409950

CODES: If one of the following 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 production costs |
| FIL candidate filing / ballot fees | PHO phone banks | TRC candidate travel, lodging and meals |
| FND fundraising expenses | POL polling and survey research | TRS staff/spouse travel, lodging and meals |
| IND independent expenditures supporting/opposing others | 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,e-mail) |

NAME AND ADDRESS OF CREDITOR	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Chase Credit Services P.O. Box 6294 Carol Stream, IL 60197	Advertising	128.98	0.00	128.98	0.00
Trimble & Company 5041 La Mart Drive Ste 110 Riverside, CA 92507	PRO	0.00	425.00	0.00	425.00
SUBTOTALS \$		128.98	\$ 425.00	\$ 128.98	\$ 425.00

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 \$** 425.00
- 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 \$** 128.98
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, column A, Line 9.) **NET \$** 296.02