Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)			fro	Statement covers period m10/18/2020	Date of election if applicable: (Month, Day, Year)	Date Stamp RECEIVE LOS ANGELES 2021 JAN 25	ALIFORNIA 460 FORM  Ge 1 of 6 For Official Use Only	
SEE	INSTRUCTIONS ON REVERSE  Type of Recipient Committee: All committees - Committees - Committee   Properties   Properties	thr	through12/31/202011/03/2020		CAMPAIGN F	INANCE	011900	
	☑ Officeholder, Candidate Controlled Con     ☐ State Candidate Election Committee     ☐ Recall     (Also Complete Part 5)      ☐ General Purpose Committee     ☐ Sponsored     ☐ Small Contributor Committee	nmittee	Primal Comm Co Sp (Also Co	rily Formed Ballot Measure	2. Type of Statement:  Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 T Amendment (Explain b	[ermination]	Supplemen	Statement d-Year Report stal Preelection - Attach Form 495
	COMMITTEE NAME (OR CANDIDATE'S NAME I		I.D. NUI 1429 MMITTEE)		Treasurer(s)  NAME OF TREASURER  Yolanda Miranda  MAILING ADDRESS			
	STREET ADDRESS (NO P.O. BOX)				CITY	STATE CA	ZIP CODE 91722	AREA CODE/PHONE (626) 915 - 7635
	0.0		ZIP CODE 91722	AREA CODE/PHONE (626) 374-9501	NAME OF ASSISTANT TREASU	PRER, IF ANY		
		STREET	OR P.O. BOX		MAILING ADDRESS	-		
	OPTIONAL: FAX / E-MAIL ADDRESS	STATE	ZIP CODE	AREA CODE/PHONE	OPTIONAL: FAX / E-MAIL ADD	STATE	ZIP CODE	AREA CODE/PHONE
	I have used all reasonable diligence in prepa						es is t	rue and complete. I certify
	Executed on			Bj				
	Executed on			Bj				
	Executed on		_	В)	Signature of Controlling Officeholder, Candidate, S	State Measure Proponent		9
	Executed on		_	Ву	Signature of Controlling Officeholder, Candidate, S	State Measure Proponent		.G

FPPC Form 460 (Jan/2016)

## Recipient Committee Campaign Statement Cover Page — Part 2

CALIFORNIA FORM 460

Page 2 of 6

Officeholder or Candidate Controlled Committee			Primarily Formed Ballo	t Measure	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE				
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND I	DISTRICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIO	N		SUPPORT
Three Valleys Municipal Water Board Mem	ber District 4						OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET	CITY STATE ZIP Glendora CA 91740		Identify the controlling office	ceholder, car	didate, or state	measure p	proponent, if an
	Giendola CA 91740		NAME OF OFFICEHOLDER, CAN	DIDATE, OR PR	OPONENT		
Related Committees Not Included in the not included in this statement that are controlled by contributions or make expenditures on behalf of you	y you or are primarily formed to receive		OFFICE SOUGHT OR HELD		DIS	STRICT NO. I	F ANY
COMMITTEE NAME	I.D. NUMBER						
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Cand officeholder(s) or candidate(s)				
	YES NO				Laurian aassass		
COMMITTEE ADDRESS STREET ADDRESS (NO	P.O. BOX)		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
CITY STATE	ZIP CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR CO	ANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO	P.O. BOX)						
CITY STATE	ZIP CODE AREA CODE/PHONE						
one.	- The Tool Tion		Attac	n continuatio	n sheets if nece	essary	

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

## Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars. SUMMARY PAGE

Statem	ent covers period	CALIFORNIA 460				
from	10/18/2020	FORM 400				
through _	12/31/2020	Page3 of6				
		I.D. NUMBER				
		1429864				

Kuhn for 3Valleys Water Board 2020 Column A Calendar Year Summary for Candidates Column B **Contributions Received** TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE **General Elections** 1/1 through 6/30 7/1 to Date Loans Received ...... Schedule B, Line 3 3,900.00 -10,000.00 20. Contributions 28,084.10 Received 4. Nonmonetary Contributions ...... Schedule C. Line 3 21. Expenditures Made 28,084.10 **Expenditures Made Expenditure Limit Summary for State** Candidates 0.00 0.00 22. Cumulative Expenditures Made\* SUBTOTAL CASH PAYMENTS ...... Add Lines 6 + 7 \$ 444 . 77 \$ 24,963.59 (If Subject to Voluntary Expenditure Limit) 0.00 Date of Election Total to Date (mm/dd/yy) 10. Nonmonetary Adjustment ...... Schedule C. Line 3 0.00 urrent Cash Statement 2. Beginning Cash Balance ...... Previous Summery Page, Line 16 \$ 2,267.18 To calculate Column B. add 1,298.10 amounts in Column A to the 13. Cash Receipts ...... Column A, Line 3 above corresponding amounts \*Amounts in this section may be different from amounts 0.00 14. Miscellaneous Increases to Cash ...... Schedule I, Line 4 from Column B of your last reported in Column B. report. Some amounts in 444.77 Column A may be negative 3,120.51 figures that should be 16. ENDING CASH BALANCE ......... Add Lines 12 + 13 + 14, then subtract Line 15 \$ subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 17. LOAN GUARANTEES RECEIVED ...... Schedule B, Part 2 \$ carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts 18. Cash Equivalents See instructions on reverse \$ 

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Schedule Monetary	Contributions Received		nts may be rounded whole dollars.	Statement covers period from10/18/2020		CALIFORNIA 460	
SEE INSTRUCTION	ONS ON REVERSE			through _12/31/25	020	Page4 of6	
NAME OF FILER Kuhn for 3Va	alleys Water Board 2020					I.D. NUMBER 1429864	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEAR (JAN. 1 - DEC. 31	R TO DATE	
11/03/2020	Engineering Contractors Assoc. PAC (ID# 790729) Sacramento, CA 95814	□IND  ICOM □OTH □PTY □SCC		1,000.00	2,000	).00	
12/31/2020	Robert (Bob) Kuhn Glendora, CA 91740	⊠IND □COM □OTH □PTY □SCC	Retired N/A	10,000.00	11,400	).00	
10/23/2020	James Mussenden Glendora, CA 91740	⊠IND □COM □OTH □PTY □SCC	Retired N/A	100.00	100	0.00	
		□IND □COM □OTH □PTY □SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		g	SUBTOTAL	.\$ 11,100.00			
Amount re (Include al	A Summary eceived this period – itemized monetary contributions. Il Schedule A subtotals.)			11,100.00	IND – Ind COM – F ( OTH – C	outor Codes dividual Recipient Committee (other than PTY or SCC) Other (e.g., business entity) colitical Party	

3. Total monetary contributions received this period.

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11,298.10

SCC - Small Contributor Committee

Schedule B – Part 1 Loans Received	Am	ounts may be re to whole dollar			Statement cov	ers period 8/2020	CALIFORN FORM	<sup>IA</sup> 460
SEE INSTRUCTIONS ON REVERSE					through12/3	1/2020	Page5	of6
NAME OF FILER							I.D. NUMBER	
Kuhn for 3Valleys Water Board 2020							1429864	
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 PA OR FORGIVI THIS PERIO	EN CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTION TO DATE
Judy Kuhn	Retired N/A			PAID				CALENDAR YEAR
endora, CA 91740	.,			\$0_f		0_00% RATE	\$_2.500.00	\$2,500.00 PER ELECTION*
¹☑ IND □ COM □ OTH □ PTY □ SCC		\$\$	\$0.00	\$0_(	DATE DUE	\$0.00	08/28/2020 DATE INCURRED	\$
Robert (Bob) Kuhn	Retired N/A			PAID				CALENDAR YEAR
Glendora, CA 91740				\$O		0_00 % RATE	\$_1,400.00	\$11,400.00 PER ELECTION
		\$1.400.00	\$0.00	\$		\$0.00		\$
T⊠ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC  Robert (Bob) Kuhn	n-1-2				DATE DUE		DATE INCURRED	
	Retired N/A			PAID				CALENDAR YEAR
Glendora, CA 91740 This is a loan				\$0.0		0_00 % RATE	\$ 10,000.00	\$11.400.00 PER ELECTION 1
IND COM OTH PTY SCC		\$ 10,000.00	\$0,00	\$_10.000.0	DATE DUE	\$0_0	09/10/2020 DATE INCURRED	\$
		SUBTOTALS	0.00	\$ 10,000	.00\$ 3,900.00	\$ 0.00		
Schedule B Summary		-				(Enter (e) on Schedule E, Line 3)	A complete the second state of the second second	
Loans received this period  (Total Column (b) plus unitemized loar				\$ _	0.00		Contributor Codes	
Loans paid or forgiven this period     (Total Column (c) plus loans under \$10 (Include loans paid by a third party that	0 paid or forgiven.) at are also itemized on Scheo	dule A.)				IN CO Pr	ID – Individual OM – Recipient Co	ommittee PTY or SCC) business entity)
3. Net change this period. (Subtract Lin	e 2 from Line 1.)			NEI \$ _	-10,000.00			

Enter the net here and on the Summary Page, Column A, Line 2. \*Amounts forgiven or paid by another party also must be reported on Schedule A.

\*\* If required.

(May be a negative number)

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Schedule E	
Payments	Made

Amounts may be rounded to whole dollars.

		SCHEDULE E
Staten	nent covers period	CALIFORNIA 460
from	10/18/2020	FORM TOO
through	12/31/2020	Page6 of6
		I.D. NUMBER

1429864

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Kuhn for 3Valleys Water Board 2020

campaign literature and mailings

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 candidate filing/ballot fees

TRC candidate travel, lodging, and meals PHO phone banks TRS staff/spouse travel, lodging, and meals fundraising events POL polling and survey research independent expenditure supporting/opposing others (explain)\* postage, delivery and messenger services

legal defense professional services (legal, accounting) LEG

> PRT print ads

transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYM	ENT	AMOUNT PAID
Political Data, Ir	nc.	LIT			425.81
Norwalk, CA 90652					
			2. 2.		
			The state of the s		
* Payments that are	contributions or independent expenditures must al	so be summarized on S	chedule D.	SUBTOTAL\$	425.81
Schedule E Su	mmary	- 68-			=
1. Itemized paymer	nts made this period. (Include all Schedule E subt	otals.)		\$	425.81
2. Unitemized payn	nents made this period of under \$100			\$	18.96
3. Total interest pai	d this period on loans. (Enter amount from Sched	lule B, Part 1, Column	(e).)	\$	0.00
4. Total payments n	made this period. (Add Lines 1, 2, and 3. Enter he	ere and on the Summa	ry Page, Column A, Line 6.)	TOTAL \$	444.77