

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from July 1, 2008
through December 31, 2008

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

Date Stamp
RECEIVED
CITY OF WALNUT
CITY CLERKS OFFICE
09 JAN 22 P 5:16
CALIFORNIA 2001/02
FORM 460
Page 1 of 4
For Official Use Only

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
- Primarily Formed Candidate/Officeholder Committee (Also Complete Part 6)
- Primarily Formed Ballot Measure Committee
- Controlled
- Sponsored (Also Complete Part 6)

2. Type of Statement:

- Preelection Statement
- Semi-annual Statement
- Termination Statement (Also file a Form 410 Termination)
- Amendment (Explain below)
- Quantity Statement
- Special Odd-Year Report
- Supplemental Preelection Statement - Attach Form 495

3. Committee Information

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Committee to elect Tony Cartagena

I.D. NUMBER
1255309

Treasurer(s)

NAME OF TREASURER
Filina Fontejon

STREET ADDRESS (NO P.O. BOX)
21200 E. Valley View Dr.

CITY STATE ZIP CODE AREA CODE/PHONE
Walnut CA 91789 909-595-4364

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

CITY STATE ZIP CODE AREA CODE/PHONE
Walnut CA 91789 626-964-8662

MAILING ADDRESS
965 Pebble Creek Lane

CITY STATE ZIP CODE AREA CODE/PHONE
Walnut CA 91789 626-912-3785

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 1/21/09
Date

By [Signature]
Signature of Controlling Officer/Candidate, State Measure Proponent

Executed on 1/21/09
Date

By [Signature]
Signature of Controlling Officer/Candidate, State Measure Proponent

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

Type or print in ink.

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
Antonio "Tony" Cartagena

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

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
21200 E. Valley View Dr. 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	CONTROLLED COMMITTEE?
Committee to elect Tony Cartagena	1258309	<input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF TREASURER Filina Fontejon		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX) 21200 E. Valley View Dr.		
CITY STATE ZIP CODE AREA CODE/PHONE Walnut CA 91789 909-595-4364		
COMMITTEE NAME	I.D. NUMBER	
NAME OF TREASURER		CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> 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? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS 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, 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	SUPPORT <input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
Tony Cartagena	Walnut City Council	<input checked="" 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

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 July 1, 2008 through December 31, 2008

CALIFORNIA FORM **460**

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SEE INSTRUCTIONS ON REVERSE
 NAME OF FILER
 Committee to elect Tony Cartagena

I.D. NUMBER
 1258309

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3 0	21,834.61
2. Loans Received	Schedule B, Line 3 0	100.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2 0	21,934.61
4. Nonmonetary Contributions	Schedule C, Line 3 0	0
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4 0	21,934.61

Expenditures Made

6. Payments Made	Schedule E, Line 4 269.69	19,072.23
7. Loans Made	Schedule H, Line 3 0	0
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7 269.69	19,072.23
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3 0	0
10. Nonmonetary Adjustment	Schedule C, Line 3 0	0
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10 269.69	19,072.23

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16 3,243.07	
13. Cash Receipts	Column A, Line 3 above 0	
14. Miscellaneous Increases to Cash	Schedule I, Line 4 269.69	
15. Cash Payments	Column A, Line 8 above 2,973.38	
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15 2,973.38	

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED

Cash Equivalents and Outstanding Debts

18. Cash Equivalents

19. Outstanding Debts

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).

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 \$ _____ \$ _____

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 \$ _____

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

**Schedule E
Payments Made**

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

SEE INSTRUCTIONS ON REVERSE

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NAME OF FILER
Committee to elect Tony Cartagena

I.D. NUMBER
1258309

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

- | | | | | | |
|-----|---|-----|---|-----|---|
| CWP | 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 | PEI | petition circulating | TEL | t.v. or cable airtime and production costs |
| FL | 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 |
| LT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, e-mail) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Curt Hagman for Assembly 3233 N. Grand Ave. Suite 265 Chino Hills, CA 91709	IND		Supporting candidate for Assembly	150.00
SUBTOTAL \$				150.00

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

Schedule E Summary

- Itemized payments made this period. (Include all Schedule E subtotals.) \$ 150.00
- Unitemized payments made this period of under \$100 \$ 119.69
- Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) \$ 0
- Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) **TOTAL \$** 269.69