

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in blue.

| | | |
|---|--|---|
| Statement covers period from <u>7-1-2011</u> through <u>12-31-2011</u> | Date of election if applicable: (Month, Day, Year) <u>June 5, 2012</u> | Date Stamp |
| <input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee <input type="checkbox"/> State Candidate Election Committee <input type="checkbox"/> Recall <small>(Also Complete Part 5)</small> | | CALIFORNIA FORM 460 Page <u>1</u> of <u>14</u> For Official Use Only |
| <input type="checkbox"/> General Purpose Committee <input type="checkbox"/> Sponsored <input type="checkbox"/> Small Contributor Committee <input type="checkbox"/> Political Party/Central Committee | | |
| <input type="checkbox"/> Primarily Formed Ballot Measure Committee <input type="checkbox"/> Controlled <input type="checkbox"/> Sponsored <small>(Also Complete Part 6)</small> | | |
| <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee <small>(Also Complete Part 7)</small> | | |

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

3. Committee Information

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) _____ I.D. NUMBER 1338204

Committee to Elect J.P. Menville

STREET ADDRESS (NO P.O. BOX) 899 West Ross Road

CITY El Centro STATE CA ZIP CODE 92243 AREA CODE/PHONE 760-353-1869

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

CITY _____ STATE _____ ZIP CODE _____ AREA CODE/PHONE _____

OPTIONAL: FAX / E-MAIL ADDRESS _____

2. Type of Statement:

Preelection Statement
 Semi-annual Statement
 Termination Statement
(Also file a Form 410 Termination)
 Amendment (Explain below)
Amended from 7-1-2011 thru 12-31-2011

Quarterly Statement
 Special Odd-Year Report
 Supplemental Preelection Statement - Attach Form 495

Treasurer(s)

NAME OF TREASURER John Pierre Menville

MAILING ADDRESS 899 West Ross Road

CITY El Centro STATE CA ZIP CODE 92243 AREA CODE/PHONE 760-353-1869

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 5-21-2012 Date

Executed on 5-21-2012 Date

Executed on _____ Date

By [Signature] Signature of Treasurer or Assistant Treasurer

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

By _____ Signature of Controlling Officer/Candidate, State Measure Proponent

By _____ 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
John Kiene Merville

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
F. I. D. Director Division 2

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
897 West Post Road El Centro, CA 92243

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.

| | |
|-------------------|---|
| COMMITTEENAME | 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 |
| COMMITTEENAME | 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 | <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 |

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

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

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

John Pierre Menvielle

Contributions Received

| | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|---------------------------------|--|--|
| 1. Monetary Contributions | | |
| 2. Loans Received | Schedule A, Line 3 \$ 21,887.96 | \$ 21,887.96 |
| 3. SUBTOTAL CASH CONTRIBUTIONS | Schedule B, Line 3 \$ 21,887.96 | \$ 21,887.96 |
| 4. Nonmonetary Contributions | Add Lines 1 + 2 \$ 0 | \$ 0 |
| 5. TOTAL CONTRIBUTIONS RECEIVED | Schedule C, Line 3 Add Lines 3 + 4 \$ 21,887.96 | \$ 21,887.96 |

| | | |
|--|------------------|-------------|
| 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 | \$ 0 | \$ 0 |
| 21. Expenditures Made | \$ 0 | \$ 0 |

Statement covers period from 7-1-2011 through 12-31-2011

Page 3 of 14

CALIFORNIA FORM 460

SUMMARY PAGE

I.D. NUMBER 1338204

Expenditures Made

| | | | |
|------------------------------------|----------------------|-----------|-----------|
| 6. Payments Made | Schedule E, Line 4 | \$ 855.08 | \$ 855.08 |
| 7. Loans Made | Schedule H, Line 3 | \$ 0 | \$ 0 |
| 8. SUBTOTAL CASH PAYMENTS | Add Lines 6 + 7 | \$ 855.08 | \$ 855.08 |
| 9. Accrued Expenses (Unpaid Bills) | Schedule F, Line 3 | \$ 0 | \$ 0 |
| 10. Nonmonetary Adjustment | Schedule G, Line 3 | \$ 0 | \$ 0 |
| 11. TOTAL EXPENDITURES MADE | Add Lines 8 + 9 + 10 | \$ 855.08 | \$ 855.08 |

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 |
| | | \$ 0 |
| | | \$ 0 |

Current Cash Statement

| | | |
|-------------------------------------|--|--------------|
| 12. Beginning Cash Balance | Previous Summary Page, Line 16 | \$ 0 |
| 13. Cash Receipts | Column A, Line 3 above | \$ 21,887.96 |
| 14. Miscellaneous Increases to Cash | Schedule I, Line 4 | \$ 0 |
| 15. Cash Payments | Column A, Line 8 above | \$ 855.08 |
| 16. ENDING CASH BALANCE | Add Lines 12 + 13 + 14, then subtract Line 15 If this is a termination statement, Line 16 must be zero. | \$ 21,032.88 |

LOAN GUARANTEES RECEIVED

17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ 0

Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse \$ 0

19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ 0

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).

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

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

NAME OF FILER

John Pierre Menvielle

Statement covers period
from 7-1-2011
through 12-31-2011

SCHEDULE A (CONT)
CALIFORNIA
FORM
460

Page 4 of 14

ID NUMBER
1338204

| DATE RECEIVED | FULL NAME STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTER ID 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 TODAY (IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|---|----------------------------------|
| 8-9-2011 | California Renewables Energy 13600 Marina Route Dr #415 Marina Del Rey CA 92029 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Lawyer | \$250.00 | \$250.00 | |
| 9-8-2011 | CA 6 Farms 28112 Escalle Road San Jale, CA 93926 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Farming | \$1,000.00 | \$1,000.00 | |
| 9-15-2011 | John P. Menvielle, FR 2864 Andover Ave. Carlsbad CA 92010 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Teacher | \$200.00 | \$200.00 | |
| 8-31-2011 | Barbara Worth Country Club Imperial Palms Resort LLC 2050 Country Club Drive Holtville, CA 92250 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Business Resort | \$500.00 | \$500.00 | |
| 9-21-2011 | JASON AND NICOLE LELIS 632 Morris Street Brentwood CA 94513-6305 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Sales | \$200.00 | \$200.00 | |
| SUBTOTAL \$ | | | | 2,150.00 | | |

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

Schedule Continuation Sheet
Monetary Contributions Received

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

SCHEDULE A (CONT)
CALIFORNIA
FORM
460

Statement covers period
 from 7-1-2011
 through 12-31-2011

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I.D. NUMBER
1338204

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER ID. NUMBER)</small> | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small> | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR <small>(JAN. 1 - DEC. 31)</small> | PER ELECTION TO DATE <small>(IF REQUIRED)</small> |
|--------------------|---|---|--|-----------------------------|---|--|
| 9-26-11 | Ben and Michelle Menzelle 3845 Eliza Court #635 San Diego, CA 92131-6009 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | U.S. Government Employee | \$100.00 | \$100.00 | |
| 9-22-2011 | Dallas Growth Partners, LLC 2225 Huntington Drive Suite 534 San Marino, CA 91108-2640 534 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | businessman | \$500.00 | \$500.00 | |
| 10-13-2011 | Johnny P. and Gloria Singh Bob Russell Road Brawley, CA 92227 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | businessman real estate | \$200.00 | \$200.00 | |
| 10-13-2011 | Richard M. Murdock 16805 Highland Valley Rd Ramona, CA 92065 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | real estate | \$100.00 | \$100.00 | |
| 10-14-2011 | Robert E. Hahn 2630 Lenney Ave. El Centro, CA 92243 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | banker | \$100.00 | \$100.00 | |
| SUBTOTAL \$ | | | | 1000.00 | | |

***Contributor Codes**
 IND - Individual
 COM - Recipient Committee
 (other than PTY or SCC)
 OTH - Other (e.g., business entity)
 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.

NAME OF FILER

John Pierre Menvielle

Statement covers period
from 7-1-2011
through 12-31-2011

SCHEDULE A (CONT.)
**CALIFORNIA
FORM 460**

Page 6 of 14

ID NUMBER
1338204

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID 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) |
|---------------|--|---|--|-----------------------------|---|------------------------------------|
| 10-15-2011 | T. J. Menvielle 1029 Guey Street San Diego, CA. 92110 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Law enforcement officer | \$400.00 | \$400.00 | |
| 10-18-2011 | Aggreg. & The Product, Inc 9500 Beverly Rd. Pico Rivera CA. 90660-2135 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Sand and gravel business | \$1000.00 | \$1000.00 | |
| 10-21-2011 | JAMES M. CARLBERG / Kent B. O 11125 Flintholme Ave suite J San Diego, CA. 92121 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Algae businessman | \$100.00 | \$100.00 | |
| 10-25-2011 | Freddi and Alice Abatti 520 Mesquite Street Sausalito, CA. 942251 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Farmers | \$500.00 | \$500.00 | |
| 10-19-2011 | Richard Neault 13121 Mulberry Lane Grass Valley, CA. 95945-9645 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Medical business | \$1000.00 | \$1000.00 | |
| SUBTOTAL \$ | | | | <u>2100.00</u> | | |

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**Schedule (Continuation Sheet)
Monetary Contributions Received**

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

NAME OF FILER

John Pierre Mervielle

Statement covers period
from 7-1-2011
through 12-31-2011

SCHEDULE A (CONT)
CALIFORNIA FORM 460

Page 7 of 14
I.D. NUMBER
1338204

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTERED, 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) |
|--------------------|--|---|---|-----------------------------|---|--|
| 10-25-2011 | Ed Snively Realty 314 North 8th Street Alhambra, CA 92213 Suite 200 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Real Estate | \$100.00 | \$100.00 | |
| 10-26-2011 | Jim and Pat Preece 246 East Deakwood Rd El Cerrito CA 92243 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Farmers | \$250.00 | \$250.00 | |
| 10-27-2011 | Timothy E. Fields 1610 2nd Ave #1300 San Diego CA 92101 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Lawyer | \$100.00 | \$100.00 | |
| 10-28-2011 | Seaton Management Corp 77682 Country Club Drive Palm Desert, CA 92211 Suite H3 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | builders | \$500.00 | \$500.00 | |
| 10-31-2011 | DUFLOCK & ASSOC. ATES 1898 West Main Street El Cerrito CA 92243 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Real Estate | \$250.00 | \$250.00 | |
| SUBTOTAL \$ | | | | 200.00 | | |

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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)

CALIFORNIA
FORM
460

NAME OF FILER

John Pierre Menvielle

Statement covers period
from 7-1-2011
through 12-31-2011

Page 8 of 14

I.D. NUMBER
1338204

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTERED 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) | PERELECTION TO DATE (IF REQUIRED) |
|--------------------|--|---|---|-----------------------------|---|-----------------------------------|
| 10-31-2011 | W.G. and Judy DuFlock 1898 West Main Street El Centro, CA, 92243 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Real Estate | \$ 250.00 | \$ 250.00 | |
| 10-31-2011 | Paul R. Engle 7825 Fay Ave. Suite 250 La Jolla, CA, 92037-4259 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | business man | \$ 500.00 | \$ 500.00 | |
| 11-6-2011 | Alice M. Johnson 5990 Camino De La Costa La Jolla, CA, 92037-6550 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | landowner | \$ 100.00 | \$ 100.00 | |
| 11-7-2011 | Kenneth and Alicia Jeans 4855 County Road C Jones Colorado 80822-9413 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Farmers | \$ 100.00 | \$ 100.00 | |
| 11-7-2011 | Douglas and Lisa Meyer 44620 Frags Leap Street Temecula, CA, 92592 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Sales CPA | \$ 100.00 | \$ 100.00 | |
| SUBTOTAL \$ | | | | 1050.00 | | |

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(other than PTY or SCC)
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SCC - Small Contributor Committee

**Schedule A
Monetary Contributions Received**

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

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

John Pierre Menvielle

Statement covers period
from 7-1-2011
through 12-31-2011

**CALIFORNIA
FORM
460**

SCHEDULE A

Page 9 of 14
I.D. NUMBER
1338204

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTER ID 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) |
|--------------------|--|---|---|-----------------------------|---|------------------------------------|
| 11-11-2011 | Sandra L. and Horacio Rodiles 1358 Appaloosa Road El Centro, CA 92243 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Medical business | \$250.00 | \$250.00 | |
| 10-28-2011 | Republic Services Inc 1850 North Allied Way Phoenix, AZ 85054 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Trash Business | \$500.00 | \$500.00 | |
| 11-15-2011 | Pacific Land Development Co. 111 Woodmere Rd Suite 190 Folsom, CA 95630 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | developers | \$2000.00 | \$2000.00 | |
| 11-15-2011 | Landmark Consultant, Inc. 780 North 4th Street El Centro, CA 92243 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Consultants | \$250.00 | \$250.00 | |
| 11-23-2011 | Laura Mc Donald - Kaminski 221 Vista Grande Blvd Escondido, CA 92625-7021 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Business woman | \$250.00 | \$25 | |
| SUBTOTAL \$ | | | | 3,250.00 | | |

SUBTOTAL \$ 3,250.00

*Contributor Codes

- IND - Individual
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- OTH - Other (e.g., business entity)
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Schedule A Summary

Amount received during period itemized monetary contributions
(include all Schedule A subtotals):

Amount received during period unitemized monetary contributions of less than \$100

Total monetary contributions received this period

Additional funds, entitlements and other Summary Page 1, Column A, Line 11

TOTAL \$

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

NAME OF FILER

John Pierre Menvielle

Statement covers period
 from 7-1-2011
 through 12-31-2011

SCHEDULE A (CONT)
CALIFORNIA
FORM
460
 Page 10 of 14
 ID NUMBER
1338204

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTERED, 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) |
|--------------------|---|---|--|-----------------------------|---|------------------------------------|
| 11-28-2011 | Meyer Farm L.L.C. 2921-B S. KISH AVE. YUMA AZ. 85365 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Landowners Landowners | \$ 500.00 | \$ 500.00 | |
| 11-28-2011 | Meyer Duperval Investment LLC 291-B S. KISH AVE YUMA, AZ. 85365 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Landowner | \$ 500.00 | \$ 500.00 | |
| 11-28-2011 | Terra Management, LLC 2921-B S. KISH AVE YUMA, AZ. 85365 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Landowner | \$ 500.00 | \$ 500.00 | |
| 12-1-2011 | Keith and Patty Sharp 1675 EAST HAVEN ROAD HOLTVILLE, CA. 92250 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Landowner | \$ 250.00 | \$ 250.00 | |
| 12-3-2011 | Robert and Adrienne Andrews 429 South Las Palmas Ave. Los Angeles, CA. 90020 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Landowner | \$ 100.00 | \$ 100.00 | |
| SUBTOTAL \$ | | | | 850.00 | | |

*Contributor Codes
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 (other than PTY or SCC)
 OTH - Other (e.g., business entity)
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule (Continuation Sheet)
 Monetary Contributions Received

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

SCHEDULE A (CONT.)
 CALIFORNIA
 FORM
460

Statement covers period
 from 7-1-2011
 through 12-31-2011

Page 11 of 14

I.D. NUMBER
1338204

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER ID NUMBER)</small> | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small> | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR <small>(JAN. 1 - DEC. 31)</small> | PER ELECTION TO DATE <small>(IF REQUIRED)</small> |
|---------------|--|---|--|-----------------------------|---|--|
| 12-2-2011 | Ed and Patty McGrew 1755 Meloid Road Hartsville CA. 92220-9595 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Landowner | \$ 250.00 | \$ 250.00 | |
| 11-28-2011 | L.F. "Bezi" Schlot 14298 Bourgeois Way San Diego CA 92129-4336 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Contractor | \$ 250.00 | \$ 250.00 | |
| 12-6-2011 | KAY Binkeman 573 Drew Road Calexico, CA. 92231 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Landowner | \$ 200.00 | \$ 200.00 | |
| 12-9-2011 | Thomas D. Watton 665 West Ever Heron Way D Castro, CA. 922244 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | businessman | \$ 100.00 | \$ 100.00 | |
| 12-16-2011 | Smith-Kendal Real Estate 510 West Main Street Brawley, CA 92227 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Real Estate | \$ 500.00 | \$ 500.00 | |
| SUBTOTAL \$ | | | | <u>1300.00</u> | | |

*Contributor Codes
 IND - Individual
 COM - Recipient Committee
 (other than PTY or SCC)
 OTH - Other (e.g., business entity)
 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.)
CALIFORNIA
FORM
460

Statement covers period
from 7-1-2011
through 12-31-2011

Page 12 of 14

I.D. NUMBER
1338204

| 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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|---|--|-----------------------------|---|------------------------------------|
| 12-17-2011 | William T and Mary Ellen Dubois 1791 Nicholas Road El Centro, CA 92243 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Landowner | \$100.00 | \$100.00 | |
| 12-19-2011 | Matthew D. Ramsey 867 Rodas Drive Brawley, CA 92227 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Real Estate Sales | \$400.00 | \$400.00 | |
| 12-21-2011 | Floyd Nelson Fr & Sns, Inc. 2305 East Hart Road Holtville, CA 92250 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Construction business | \$100.00 | \$100.00 | |
| 12-21-2011 | Tam Watson, INC. 1199 Industry Way El Centro, CA 92243 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Electrical Business | \$500.00 | \$500.00 | |
| 12-21-2011 | ME LATH INVESTMENTS 1407 South LA Buderne Rd El Centro, CA 92243 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Landowner | \$2500.00 | \$2500.00 | |
| SUBTOTAL \$ | | | | 3600.00 | | |

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

**Schedule A
Monetary Contributions Received**

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

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 7-1-2011
through 12-31-2011

**CALIFORNIA
FORM
460**

SCHEDULE A

NAME OF FILER John Pevine Menville

ID NUMBER
1338204

Page 13 of 14

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTER ID 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) |
|--------------------|---|---|--|-----------------------------|---|------------------------------------|
| 12-23-2011 | Mark C. and Ricki Schmidt 1715 East Havens Road Holtville CA. 92250 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Real estate owners rentals | \$100.00 | \$100.00 | |
| 12-23-2011 | Lawrence E. or Lane S. Ponton 1715 East Havens Rd Holtville, CA. 92250 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Real estate owner rentals | \$200.00 | \$200.00 | |
| 12-27-2011 | George Bishop 804 Morse Street Oceanside, CA 92054-5937 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Landowner | \$200.00 | \$200.00 | |
| <u>0</u> | <u>0</u> | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> |
| <u>0</u> | <u>0</u> | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> |
| <u>0</u> | <u>0</u> | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> |
| SUBTOTAL \$ | | | | <u>500.00</u> | | |

Schedule A Summary

- Amount received this period - itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 18,000.00
- Amount received this period - unitemized monetary contributions of less than \$100 \$ 3,887.96
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 21,887.96

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

**Schedule E
Payments Made**

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

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

John Pierre Menvielle

Statement covers period
from 7-1-2011
through 12-31-2011

Page 14 of 14

I.D. NUMBER
1338204

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.
 CMP campaign paraphernalia/misc.
 CNS campaign consultants
 CTB contribution (explain nonmonetary)*
 CVC civic donations
 FIL candidate filing/ballot fees
 FND fundraising events
 ND independent expenditure supporting/opposing others (explain)*
 LEG legal defense
 LT campaign literature and mailings

MBR member communications
 MTG meetings and appearances
 OFC office expenses
 PET petition circulating
 PHO phone banks
 POL polling and survey research
 POS postage, delivery and messenger services
 PRO professional services (legal, accounting)
 PRT print ads

RAD radio airtime and production costs
 RFD returned contributions
 SAL campaign workers' salaries
 TEL t.v. or cable airtime and production costs
 TRC candidate travel, lodging, and meals
 TRS staff/spouse travel, lodging, and meals
 TSF 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 ID NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------------|------------------------|----------------------|
| <u>IMPERIAL PRINTERS</u> <u>430 Main Street</u> <u>Escondido, CA 922243</u> | <u>CMP</u> | | <u>\$855.08</u> |
| <u>Ø</u> | <u>Ø</u> | | <u>Ø</u> |
| <u>Ø</u> | <u>Ø</u> | | <u>Ø</u> |
| <u>Ø</u> | <u>Ø</u> | | <u>Ø</u> |
| SUBTOTAL \$ | | | <u>855.08</u> |

* 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.) \$ 855.08
- Unitemized payments made this period of under \$100 \$ Ø
- Total interest paid this period on loans: (Enter amount from Schedule B, Part 1, Column (e).) \$ Ø
- Total payments made this period: (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) **TOTAL \$** 855.08

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

SEE INSTRUCTIONS ON REVERSE

| | | | |
|--|--|--|--|
| Statement covers period from <u>7-1-2011</u> through <u>12-31-2011</u> | Date of election if applicable: (Month, Day, Year) <u>June 5, 2012</u> | Date Stamp FILED REGISTRAR OF VOTERS JAN 31 2012 | CALIFORNIA 460 FORM |
| | | RECEIVED BY: <u>OK y jwb</u> | Page <u>1</u> of <u>5</u> 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)
- Primarily Formed Candidate/Officeholder Committee
- (Also Complete Part 7)

2. Type of Statement:

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

3. Committee Information I.D. NUMBER 1338204

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Committee to Elect J.P. Menvielle

Treasurer(s)

NAME OF TREASURER

John Pierre Menvielle

STREET ADDRESS (NO P.O. BOX)
897 West Ross Road
CITY EL Centro STATE CA ZIP CODE 92243 AREA CODE/PHONE 760-353-1869
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

MAILING ADDRESS
CITY EL Centro STATE CA ZIP CODE 92243 AREA CODE/PHONE 760-353-1869
NAME OF ASSISTANT TREASURER, IF ANY
MAILING ADDRESS

CITY _____ STATE _____ ZIP CODE _____ AREA CODE/PHONE _____
OPTIONAL: FAX / E-MAIL ADDRESS
FAX: 760-353-9065

CITY _____ STATE _____ ZIP CODE _____ AREA CODE/PHONE _____
OPTIONAL: FAX / E-MAIL ADDRESS
FAX: 760-353-9065

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 1-31-2012 Date
Executed on 1-31-2012 Date

By [Signature]
Signature of Treasurer or Assistant Treasurer

Executed on _____ Date

By _____
Signature of Controlling Officer/Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on _____ Date

By _____
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
John Pierre Mervielle

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
I. I. D. Director Division 2

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
897 West Ross Road El Centro CA. 92243

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 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 | <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 |

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 7-1-2011
through 12-31-2011

**CALIFORNIA
FORM 460**

Page 3 of 5

I.D. NUMBER
1335204

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

John Ferre Menvielle

Contributions Received

| | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|---------------------------------------|--|--|
| 1. Monetary Contributions | Schedule A, Line 3 \$ <u>2,196.00</u> | \$ <u>2,196.00</u> |
| 2. Loans Received | Schedule B, Line 3 \$ <u>0</u> | \$ <u>0</u> |
| 3. SUBTOTAL CASH CONTRIBUTIONS | Add Lines 1 + 2 \$ <u>2,196.00</u> | \$ <u>2,196.00</u> |
| 4. Nonmonetary Contributions | Schedule C, Line 3 \$ <u>0</u> | \$ <u>0</u> |
| 5. TOTAL CONTRIBUTIONS RECEIVED | Add Lines 3 + 4 \$ <u>2,196.00</u> | \$ <u>2,196.00</u> |

Expenditures Made

| | | |
|--|--|------------------|
| 6. Payments Made | Schedule E, Line 4 \$ <u>855.08</u> | \$ <u>855.08</u> |
| 7. Loans Made | Schedule H, Line 3 \$ <u>0</u> | \$ <u>0</u> |
| 8. SUBTOTAL CASH PAYMENTS | Add Lines 6 + 7 \$ <u>855.08</u> | \$ <u>855.08</u> |
| 9. Accrued Expenses (Unpaid Bills) | Schedule F, Line 3 \$ <u>0</u> | \$ <u>0</u> |
| 10. Nonmonetary Adjustment | Schedule G, Line 3 \$ <u>0</u> | \$ <u>0</u> |
| 11. TOTAL EXPENDITURES MADE | Add Lines 8 + 9 + 10 \$ <u>855.08</u> | \$ <u>855.08</u> |

Current Cash Statement

| | |
|---|---|
| 12. Beginning Cash Balance | Previous Summary Page, Line 16 \$ <u>0</u> |
| 13. Cash Receipts | Column A, Line 3 above \$ <u>2,196.00</u> |
| 14. Miscellaneous Increases to Cash | Schedule I, Line 4 \$ <u>0</u> |
| 15. Cash Payments | Column A, Line 8 above \$ <u>855.08</u> |
| 16. ENDING CASH BALANCE | Add Lines 12 + 13 + 14, then subtract Line 15 \$ <u>1,340.92</u> |

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

17. LOAN GUARANTEES RECEIVED

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*
(# 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 A
Monetary Contributions Received

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

SCHEDULE A
CALIFORNIA
FORM **460**

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 7-1-2011
through 12-31-2011

Page 4 of 5

NAME OF FILER
John Peire Mervielle

I.D. NUMBER
1338204

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTERED, 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) |
|--------------------|---|---|--|-----------------------------|---|------------------------------------|
| 8-19-2011 | CALIFORNIA RENEWABLE ENERGIES 13600 Marina Pointe Drive #415 Marina Del Rey, CA 90292 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Lawyer. | \$250.00 | \$250.00 | |
| 9-8-2011 | C and G Farms 28112 Escelle Road Gonzales, CA 93926 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Farming | \$1,000.00 | \$1,000.00 | |
| 9-15-2011 | John F. Mervielle, JR. 2864 Andover Avenue Carlsbad, CA 92010 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Teacher | \$200.00 | \$200.00 | |
| 9-28-2011 | Jason and Nicole Lulis 632 Norris Street Brentwood, CA 94513 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Sales. | \$200.00 | \$200.00 | |
| 9-26-2011 | Brian and Michelle Mervielle 3845 Elijah Court #635 San Diego, CA 92130 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | U.S Government | \$100.00 | \$100.00 | |
| SUBTOTAL \$ | | | | 1750.00 | | |

Schedule A Summary

- Amount received this period - itemized monetary contributions:
(Include all Schedule A subtotals.) \$ 1750.00
- Amount received this period - unitemized monetary contributions of less than \$100 \$ 446.00
- Total monetary contributions received this period:
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 2,196.00

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

**Schedule E
Payments Made**

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER John Pierre Menvielle

| | |
|--|---------------------------|
| Statement covers period from <u>7-1-2011</u> through <u>12-31-2011</u> | Page <u>5</u> of <u>5</u> |
| CALIFORNIA FORM 460 | |
| I.D. NUMBER <u>1338204</u> | |

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

| | | |
|--|---|---|
| OMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| ONS campaign consultants | MTG meetings and appearances | RED returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL tv. 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 |
| ND 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) | VOI voter registration |
| UT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, e-mail) |

| NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER ID NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-----------------|
| IMPERIAL PRINTERS 430 MAIN STREET EL CENTRO, CA 92243 | OMP | | \$855.08 |
| | | | |
| | | | |
| | | | |
| SUBTOTAL \$ | | | \$855.08 |

* 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.) \$ 855.08
- Unitemized payments made this period of under \$100 \$ 0
- 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 \$** 855.08

Recipient Committee
Campaign Statement
Cover Page

(Government Code Sections 84200-84216.5)

Type or print in blue ink

CALIFORNIA
FORM 460

PAGE 1

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 1-1-2012
through 3-17-2012

Date of election if applicable:
(Month, Day, Year)
June 5, 2012

Date Stamp
Printed

Page 1 of 15
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 7)
- 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)
- Quarterly Statement
- Special Odd-Year Report
- Supplemental Preelection Statement - Attach Form 495

3. Committee Information

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

I.D. NUMBER 1338204

Treasurer(s)

NAME OF TREASURER

John Herre Menville

Committee to Elect J.P. Menville

STREET ADDRESS (NO P.O. BOX)

897 West Ross Road

CITY

Pacifica

STATE

CA

ZIP CODE

92243

AREA CODE/PHONE

760-353-1869

MAILING ADDRESS

897 West Ross Road

CITY

Pacifica

STATE

CA

ZIP CODE

92243

AREA CODE/PHONE

760-353-1869

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

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

FAX 760-353-9065

OPTIONAL: FAX / E-MAIL ADDRESS

FAX # 760-353-9065

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 5-24-2012

By

John Herre Menville
Signature of Treasurer or Assistant Treasurer

Executed on 5-24-2012

By

John Herre Menville
Signature of Controlling Officer/Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on _____

By

Executed on _____

By

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
John Perre Menville

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
I. I. D. Director Division 2

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
897 West Ross Road Elkhorn CA 92243

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

Attach continuation sheets if necessary

**Campaign Disclosure Statement
Summary Page**

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

SUMMARY PAGE

**CALIFORNIA
FORM 460**

Statement covers period
from 1-1-2012
through 3-17-2012

Page 3 of 15

I.D. NUMBER
1338204

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

John Pierre Menville

Contributions Received

| | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|---------------------------------|--|--|
| 1. Monetary Contributions | Schedule A, Line 3 \$ 30,535.99 | \$ 30,535.99 |
| 2. Loans Received | Schedule B, Line 3 \$ 0 | \$ 0 |
| 3. SUBTOTAL CASH CONTRIBUTIONS | Add Lines 1 + 2 \$ 30,535.99 | \$ 30,535.99 |
| 4. Nonmonetary Contributions | Schedule C, Line 3 \$ 0 | \$ 0 |
| 5. TOTAL CONTRIBUTIONS RECEIVED | Add Lines 3 + 4 \$ 30,535.99 | \$ 30,535.99 |

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 | \$ _____ | \$ _____ |

Expenditures Made

| | | |
|------------------------------------|--------------------------------------|--------------|
| 6. Payments Made | Schedule E, Line 4 \$ 13,687.00 | \$ 13,687.00 |
| 7. Loans Made | Schedule H, Line 3 \$ 0 | \$ 0 |
| 8. SUBTOTAL CASH PAYMENTS | Add Lines 6 + 7 \$ 13,687.00 | \$ 13,687.00 |
| 9. Accrued Expenses (Unpaid Bills) | Schedule F, Line 3 \$ 0 | \$ 0 |
| 10. Nonmonetary Adjustment | Schedule G, Line 3 \$ 0 | \$ 0 |
| 11. TOTAL EXPENDITURES MADE | Add Lines 8 + 9 + 10 \$ 13,687.00 | \$ 13,687.00 |

Expenditure Limit Summary for State
Candidates

| 22. Cumulative Expenditures Made* | Date of Election (mm/dd/yy) | Total to Date |
|-----------------------------------|--------------------------------|---------------|
| \$ _____ | ____/____/____ | \$ _____ |
| \$ _____ | ____/____/____ | \$ _____ |

*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 \$ 21,032.88 |
| 13. Cash Receipts | Column A, Line 3 above \$ 30,535.99 |
| 14. Miscellaneous Increases to Cash | Schedule I, Line 4 \$ 13,687.00 |
| 15. Cash Payments | Column A, Line 8 above \$ 37,881.87 |
| 16. ENDING CASH BALANCE | Add Lines 12 + 13 + 14, then subtract Line 15 \$ 27,373.00 |

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

LOAN GUARANTEES RECEIVED

Schedule B, Part 2

\$ 0

Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse \$ 0

19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ 0

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).

Schedule A (Continuation Sheet)
 Monetary Contributions Received

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

SCHEDULE A (CONT)
CALIFORNIA
FORM
460

Statement covers period
 from 1-1-2012
 through 3-17-2012
 Page 4 of 15

NAME OF FILER John Pierre Menvielle ID NUMBER 1338204

| 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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|--|---|--|-----------------------------|---|------------------------------------|
| 1-3-2012 | KULBLER FRANKS 595 Ferrell Road Calexico CA. 92231-9515 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Farmer | \$100.00 | \$100.00 | |
| 1-5-2012 | Michael J. and Sandra Keatney 436 South Santa Rosa Ave El Centro, CA 922243 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Hardware store owner | \$100.00 | \$100.00 | |
| 1-5-2012 | Carroll Childers 1905 West Wilson Road El Centro, CA. 922243 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Landowner | \$100.00 | \$100.00 | |
| 1-9-2012 | Peter F. and Debra L. Smith 24 West Norland Rd Hingham, MA. 02043 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Consultant | \$100.00 | \$100.00 | |
| 1-10-2012 | Robeco FRANKS, INC. 873 Wendley Ave El Centro, CA. 922243 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Farmers | \$200.00 | \$200.00 | |
| SUBTOTAL \$ | | | | 600.00 | | |

*Contributor Codes
 IND - Individual
 COM - Recipient Committee
 (other than PTY or SCC)
 OTH - Other (e.g., business entity)
 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
from 1-1-2012
through 3-17-2012

**CALIFORNIA
FORM 460**

Page 5 of 15

I.D. NUMBER
1338204

| NAME OF FILER | | | | | | | | |
|----------------------|---|---|--|-----------------------------|---|------------------------------------|--|--|
| John Perre Mervielle | | | | | | | | |
| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTERED, 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) | | |
| 1-13-2012 | Harold M. 2nd Deberah Walk 2290 BMW Avenue El Centro, CA. 92224 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Banker | \$100.00 | \$100.00 | | | |
| 1-14-2012 | Anthony J. Mervielle 2913 Santa Alwood Court El Centro CA. 92224 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Landowner | \$100.00 | \$100.00 | | | |
| 1-18-2012 | Stanley and Francis Matthews 1545 South LaBorde Rd El Centro CA 92224 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Landowner | \$100.00 | \$100.00 | | | |
| 1-18-2012 | Arthur Forkon 1752 Lohe's Ave. El Centro CA 92224 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Farmer | \$100.00 | \$100.00 | | | |
| 1-19-2012 | California Ethanol & Power, LLC. 4231 Hurst & Lute 2 Brawley, CA. 92227 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Ethanol Company | \$100.00 | \$100.00 | | | |
| SUBTOTAL \$ | | | | 500.00 | | | | |

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

Statement covers period
 from 1-1-2012
 through 3-17-2012

SCHEDULE A (CONT)
CALIFORNIA
FORM 460

Page 6 of 15

I.D. NUMBER
1338204

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID 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) | PERELECTION TO DATE (IF REQUIRED) |
|--------------------|--|---|--|-----------------------------|---|-----------------------------------|
| 1-18-2012 | Granite Construction Company 38000 Monroe Street Indio, CA 92203 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Construction Co. Asphalt, soil, gravel | \$1,000.00 | \$1,000.00 | |
| 1-12-2012 | New Jothm Co. LLC 429 West Main Street El Centro, CA 92243 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Air Conditioning Company | \$100.00 | \$100.00 | |
| 1-23-2012 | MANM CO., LLC 400 North Durgenel Ave. Durgenel CA 92251 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Construction Business | \$250.00 | \$250.00 | |
| 1-23-2012 | MAY and Natalie Artillo 400 North Durgenel Ave. Durgenel CA 92251 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Construction Business | \$500.00 | \$500.00 | |
| 1-23-2012 | Kenneth and Valerie Chavere 525 D Underhold Rd Calveria CA 92231 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Landowners | \$250.00 | \$250.00 | |
| SUBTOTAL \$ | | | | <u>2,100.00</u> | | |

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Schedule A, Continuation Sheet
Monetary Contributions Received

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

NAME OF FILER

John Pierre Menville

Statement covers period
 from 1-1-2012
 through 3-17-2012

Page 7 of 15
 CALIFORNIA FORM 460

SCHEDULE A (CONT)

I.D. NUMBER
 1338204

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTERED 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 TODAY (IF REQUIRED) |
|--------------------|--|---|--|-----------------------------|---|----------------------------------|
| 1-20-2012 | CLIFFORD E. CARPENTER 795 Desert Gardens El Centro, CA 92243 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Lawyer | \$250.00 | \$250.00 | |
| 1-26-2012 | K 2nd L. CINDLTHANTS 1199 South Industrial way El Centro, CA 92243 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Contractors | \$500.00 | \$500.00 | |
| 1-25-2012 | MCLATO INVESTMENTS 1407 South Llaneros Road El Centro, CA 92243 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | INVESTORS | \$2500.00 | \$2500.00 | |
| 1-26-2012 | SOILWORKS, INC. 350 Flseler Ave COSTA MESA, CA 92626 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Contract | \$100.00 | \$100.00 | |
| 1-24-2012 | Pacific Land International Dev. Inc. 150 North Santa Anita Ave Arcadia, CA 91006 Suite 300 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | developers | \$1000.00 | \$1000.00 | |
| SUBTOTAL \$ | | | | 4,350.00 | | |

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Schedule A (Continuation Sheet)
 Monetary Contributions Received

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

Statement covers period
 from 1-1-2012
 through 3-17-2012

SCHEDULE A (CONT)
 CALIFORNIA
 FORM **460**

Page 8 of 15

I.D. NUMBER
1338204

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID. 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) |
|---------------|---|---|--|-----------------------------|---|------------------------------------|
| 1-30-2012 | JAN PERITE PRO TESTS 73-185 Highway 111 Suite B Palm Desert CA 92260 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Developers. | \$5,000.00 | \$5,000.00 | |
| 2-8-2012 | BRICK AFFRATIGUS CO, LLC 1399 Forester Row El Centro, CA. 922243 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Farming | \$100.00 | \$100.00 | |
| 2-13-2012 | Facques and Felicia Isstel 1 center of the world plaza Felicity CA. 92283-7777 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Landowners | \$125.00 | \$125.00 | |
| 2-15-2012 | MIKE CLAVERNE FARM 1298 Runderhuit Road Holtville, CA. 92250 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Farming | \$200.00 | \$200.00 | |
| 2-9-2012 | LABORERS LOCAL 1184 1128 E. La Cadena Drive Riverside, CA. 92507 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Labor Union | \$500.00 | \$500.00 | |
| SUBTOTAL \$ | | | | 5,925.00 | | |

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Schedule Continuation Sheet
 Monetary Contributions Received

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

Statement covers period
 from 1-1-2012
 through 3-17-2012

SCHEDULE A (CONT)
 CALIFORNIA
 FORM **460**

Page 9 of 15

ID NUMBER
1338204

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID 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) |
|--------------------|--|---|--|-----------------------------|---|------------------------------------|
| 1-14-2012 | Ralph and Nancy Strawn 2023 Fairway Drive Holtville, CA. 92250 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Landowner | \$300.00 | \$300.00 | |
| 1-22-2012 | John and Barbara Pfister 2495 Boyd Road Brawley, CA. 92227 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Landowner | \$200.00 | \$200.00 | |
| 1-21-2012 | Rubicon Systems Avenue, Inc 4563 Denver Court Fort Collins, CO. 80524 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | irrigation systems | \$5000.00 | \$5000.00 | |
| 1-29-2012 | Desert Services, Inc 760 West Main Street El Centro, CA 92243 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Security business | \$250.00 | \$250.00 | |
| 3-2-2012 | Natalie Hoffman/ Bob Dickey 13600 Marking Pointe Drive MIRIVA DEL RET, CA 90242 #415 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Investors | \$250.00 | \$250.00 | |
| SUBTOTAL \$ | | | | 6,000.00 | | |

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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)

NAME OF FILER

John Pierre Menville

| | |
|---|-----------------------------|
| Statement covers period from <u>1-1-2012</u> through <u>3-17-2012</u> | Page <u>10</u> of <u>15</u> |
| CALIFORNIA FORM 460 | |
| I.D. NUMBER 1338204 | |

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID 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) |
|--------------------|--|---|--|-----------------------------|---|------------------------------------|
| 2-29-2012 | ARTIC AIR CONDITIONING 667 EAST ROSS ROAD El Centro, CA, 922243 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Riv Conditioning business | \$100.00 | \$100.00 | |
| 3-2-2012 | Knutson Land Company 13497 WCR 44 Platteville, CO, 80651 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Farmer | \$100.00 | \$100.00 | |
| 3-5-2012 | C & E Farms 28112 Escollie Road Gonzales, CA, 93926 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Farmers landowner | \$1000.00 | \$1000.00 | |
| 3-1-2012 | Dulerial Farms Resort LLC 2050 Country Club Drive Holtville, CA, 92250 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Resort developers | \$500.00 | \$500.00 | |
| 3-9-2012 | Dan Grizzle Farming 1395 Bonds Corner Road Holtville, CA 92250 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Farming landowner | \$250.00 | \$250.00 | |
| SUBTOTAL \$ | | | | <u>950.00</u> | | |

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Schedule A - Continuation Sheet
Monetary Contributions Received

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

Statement covers period
 from 1-1-2012
 through 3-17-2012

Page 11 of 15

CALIFORNIA
FORM
460

SCHEDULE A (CONT)

NAME OF FILER John Pierre Menyelle I.D. NUMBER 1338204

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID 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) |
|--------------------|--|---|--|-----------------------------|---|------------------------------------|
| 3-1-2012 | Ravinder Singh Samra 1295 East Hwy 98 Calexico, CA 92231 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | landowner | \$100.00 | \$100.00 | |
| 2-25-2012 | SAM RA 1295 EAST HWY 98 CALEXICO CA 92231 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | landowners | \$100.00 | \$100.00 | |
| 3-12-2012 | J. Michael Dessert 8646 Clifbridge Ave. La Jolla, CA 92037-2113 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | landowner | \$200.00 | \$200.00 | |
| 3-14-2012 | Smith Capital Limited Partnership 9651 Adams Ave Huntington Beach, CA 92646 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | investors | \$500.00 | \$500.00 | |
| 3-13-2012 | Barbara Worth Country Club 2050 Country Club Drive Healdville CA 92250 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | resort developers | \$500.00 | \$500.00 | |
| SUBTOTAL \$ | | | | <u>400.00</u> | | |

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

Statement covers period
from 1-1-2012
through 3-17-2012

Page 12 of 15

CALIFORNIA FORM 460

SCHEDULE A (CONT)

I.D. NUMBER
1338204

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID 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) |
|---------------|---|---|--|-----------------------------|---|------------------------------------|
| 3-14-2012 | Karlen Caputo Corporation 19881 Brockhurst Blvd c-302 Huntington Beach, CA 92646 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Investors | \$500.00 | \$500.00 | |
| 3-9-2012 | Dennis and Pamela Andreotti 2241 Desert Garden Drive El Centro, CA 92243 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Landowner | \$100.00 | \$100.00 | |
| 3-9-2012 | Joe Heeger Family, LLC 375 East Commercial Ave El Centro CA 92243 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Farming | \$2,500.00 | \$2,500.00 | |
| 3-1-2012 | Timothy B. Jones 1985 Nichols Road El Centro CA 92243 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Engineer | \$250.00 | \$250.00 | |
| 3-13-2012 | LABONDE FAMILY PARTNERSHIP 425 Filbert Street El Centro CA 92220-4611 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Landowner | \$100.00 | \$100.00 | |
| SUBTOTAL \$ | | | | <u>3450.00</u> | | |

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

Schedule A Monetary Contributions Received

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

STATEMENT A
CALIFORNIA
FORM
460

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 1-1-2012
through 3-17-2012

Page 13 of 15

I.D. NUMBER
1338204

NAME OF FILER
John Perre Menville

| 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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
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Schedule E
(Continuation Sheet)
Payments Made

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

SEE INSTRUCTIONS ON REVERSE
 NAME OF FILER

John Pierre Menyelle

Statement covers period
 from **1-1-2012**
 through **3-17-2012**

CALIFORNIA
 FORM **460**
 Page **14** of **15**
 I.D. NUMBER
1338204

SCHEDULE E (CONT)

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

- OMP campaign paraphernalia/misc.
- CNS campaign consultants
- CTB contribution (explain nonmonetary)*
- CVC civic donations
- FIL candidate filing/ballot fees
- RND fundraising events
- ND independent expenditure supporting/opposing others (explain)*
- LEG legal defense
- LT campaign literature and mailings
- MBR member communications
- MTG meetings and appearances
- OFC office expenses
- PET petition circulating
- PHO phone banks
- POL polling and survey research
- POS postage, delivery and messenger services
- PRO professional services (legal, accounting)
- PRT print ads
- RAD radio airtime and production costs
- RFD returned contributions
- SAL campaign workers' salaries
- TEL tv or cable airtime and production costs
- TRC candidate travel, lodging, and meals
- TRS staff/spouse travel, lodging, and meals
- TSE 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 PAYMENT | AMOUNT PAID |
|---|------|----|--|-------------|
| D.O.V.E.S. 330 SOUTH ELERRITO Drive Brawley, CA 92222 | CVC | | CIVIC DONATION community | 250.00 |
| Registrar of Voters / County of Imperial 939 West Main St El Centro, CA 92243 | | | Register as a candidate to run for office. DIV2 | 472.00 |
| Registrar of Voters / Imperial County 939 West Main St El Centro, CA 92243 | | | Register as a candidate to run for office. I.D., DIV2 | 350.00 |
| DuPeral Valley Press 205 North 8th Street El Centro, CA. 92243 | PRT | | Newspaper ads | 615.00 |
| Imperial Valley Press 205 North 8th Street El Centro, CA. 92243 | PRT | | Newspaper ads | 12,000.00 |

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

SUBTOTAL \$ **13,687.00**

**Schedule
Payments Made**

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

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

John Pierre Menvieille

Statement covers period
from 1-1-2012
through 3-17-2012

Page 15 of 15

**CALIFORNIA
FORM 460**

SCHEDULEE

I.D. NUMBER
1338204

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

| | | | | | |
|-----|---|-----|---|-----|---|
| OMP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
| ONS | 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 |
| 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 |
| ND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services | TSE | 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 |
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| X | X | X | X |
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| X | X | X | X |
| X | X | X | X |
| X | X | X | X |
| X | X | X | X |
| X | X | X | X |
| SUBTOTAL \$ | | | |

Schedule E Summary

- Itemized payments made this period. (Include all Schedule E subtotals.) \$ 13,687.00
- Unitemized payments made this period of under \$100 \$ 0
- 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 \$** 13,687.00

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 <u>3-08-2012</u> through <u>5-19-2012</u> | Date of election if applicable: (Month, Day, Year) <u>June 5 2012</u> | Date Stamp |
| <p align="center">CALIFORNIA FORM 460</p> | | <p>Page <u>1</u> of <u>13</u> For Official Use Only</p> |

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

- Offholder, 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 Ballot Measure Committee
- Controlled
- Sponsored (Also Complete Part 6)
- Primarily Formed Candidate/Offholder Committee (Also Complete Part 7)

2. Type of Statement:

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

3. Committee Information

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

I.D. NUMBER 1338204

Treasurer(s)

Committee to Elect J. P. Menville
 STREET ADDRESS (NO P.O. BOX) 897 West Ross Road
 CITY El Centro STATE CA ZIP CODE 92243 AREA CODE/PHONE 760-353-1869
 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

NAME OF TREASURER John Pierre Menville
 MAILING ADDRESS 897 West Ross Rd
 CITY El Centro STATE CA ZIP CODE 92243 AREA CODE/PHONE 760-353-1869
 NAME OF ASSISTANT TREASURER, IF ANY
 MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
 OPTIONAL: FAX / E-MAIL ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
 OPTIONAL: FAX / E-MAIL ADDRESS FAX # 760-353-1869

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 5-24-2012 Date
 Executed on 5-24-2012 Date

By [Signature] Signature of Treasurer or Assistant Treasurer
 By [Signature] Signature of Controlling Officer of Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on _____ Date
 Executed on _____ Date

By _____ Signature of Controlling Officer of Candidate, State Measure Proponent
 By _____ Signature of Controlling Officer of Sponsor

Recipient Committee
Campaign Statement
Cover Page — Part 2

Type or print in ink.

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
John Pierre Menvielle

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
I. F. D. Director Division 2

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
897 West Ross Rd El Cerrito CA 92243

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 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 | <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 |

Attach continuation sheets if necessary

**Campaign Disclosure Statement
Summary Page**

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

SUMMARY PAGE

CALIFORNIA
FORM
460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

John Pierre Menvielle

Statement covers period
from 3-08-2012
through 5-19-2012

Page 3 of 13

I.D. NUMBER
1338204

Contributions Received

| | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|---------------------------------------|--|--|
| 1. Monetary Contributions | Schedule A, Line 3 \$ <u>14,789.00</u> | \$ _____ |
| 2. Loans Received | Schedule B, Line 3 \$ <u>0</u> | \$ _____ |
| 3. SUBTOTAL CASH CONTRIBUTIONS | Add Lines 1 + 2 \$ <u>14,789.00</u> | \$ _____ |
| 4. Nonmonetary Contributions | Schedule C, Line 3 \$ <u>0</u> | \$ _____ |
| 5. TOTAL CONTRIBUTIONS RECEIVED | Add Lines 3 + 4 \$ <u>14,789.00</u> | \$ _____ |

Expenditures Made

| | | |
|--|---|----------|
| 6. Payments Made | Schedule E, Line 4 \$ <u>27,213.15</u> | \$ _____ |
| 7. Loans Made | Schedule H, Line 3 \$ <u>0</u> | \$ _____ |
| 8. SUBTOTAL CASH PAYMENTS | Add Lines 6 + 7 \$ <u>27,213.15</u> | \$ _____ |
| 9. Accrued Expenses (Unpaid Bills) | Schedule F, Line 3 \$ <u>0</u> | \$ _____ |
| 10. Nonmonetary Adjustment | Schedule G, Line 3 \$ <u>0</u> | \$ _____ |
| 11. TOTAL EXPENDITURES MADE | Add Lines 8 + 9 + 10 \$ <u>27,213.15</u> | \$ _____ |

Current Cash Statement

| | | |
|---|--|--|
| 12. Beginning Cash Balance | Previous Summary Page, Line 16 \$ <u>37,881.87</u> | |
| 13. Cash Receipts | Column A, Line 3 above \$ <u>14,789.00</u> | |
| 14. Miscellaneous Increases to Cash | Schedule I, Line 4 \$ <u>0</u> | |
| 15. Cash Payments | Column A, Line 8 above \$ <u>27,213.15</u> | |
| 16. ENDING CASH BALANCE | Add Lines 12 + 13 + 14, then subtract Line 15 \$ <u>25,457.72</u> | |

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

17. LOAN GUARANTEES RECEIVED

Schedule B, Part 2
\$ 0

Cash Equivalents and Outstanding Debts

18. Cash Equivalents

See instructions on reverse
\$ 0

19. Outstanding Debts

Add Line 2 + Line 9 in Column B above
\$ 0

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

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

**Expenditure Limit Summary for State
Candidates**

| | | |
|-----------------------------------|---|---------------|
| 22. Cumulative Expenditures Made* | (If Subject to Voluntary Expenditure Limit) | Total to Date |
| Date of Election (mm/dd/yy) | | |
| / / | | \$ _____ |
| / / | | \$ _____ |

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

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).

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

Statement covers period
from 3-08-2012
through 5-19-12

SCHEDULE A (CONT)
CALIFORNIA
FORM 460

Page 4 of 13

ID NUMBER
1338204

| NAME OF FILER | | DATE RECEIVED | | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID 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) |
|-----------------------|--|---------------|--|---|---|--|-----------------------------|---|------------------------------------|
| John Pierre Menvielle | | 3-19-2012 | | JEFF and Joan Moore 783 Redes Drive Brawley, CA 92227 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Cattle business | \$100.00 | \$100.00 | |
| | | 3-21-2012 | | Moore Livestock Co. 783 Redes Drive Brawley, CA 92227 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Cattle business | \$100.00 | \$100.00 | |
| | | 3-21-2012 | | Thomas S. Noble 34360 Gateway Drive Palm Desert CA 92211 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Real estate business | \$1,000.00 | \$1,000.00 | |
| | | 3-23-2012 | | Win Tee Energy LTD 1090 North Palm Canyon Drive Palm Springs, CA 92262 Suite A | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Energy business | \$1,000.00 | \$1,000.00 | |
| | | 3-21-2012 | | Andy Hoyt Benefit Engineering Inc. 1103 EAST ELM HAVES EL Centro, CA 92224 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Engineering business | \$250.00 | \$250.00 | |
| SUBTOTAL \$ | | | | | | | 2,450.00 | | |

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
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.

Statement covers period
from 3-08-2012
through 5-19-2012

Page 5 of 13

**CALIFORNIA
FORM 460**

SCHEDULE A (CONT)

NAME OF FILER
John Pierre Menville

ID NUMBER
1338204

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID 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) |
|--------------------|--|---|--|-----------------------------|---|------------------------------------|
| 3-25-2012 | Daniel R. Batista Cabral 9940 Reagan Rd # 46 Mira Mesa CA. 92126 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Construction businessman | \$500.00 | \$500.00 | |
| 3-30-2012 | Seaton Management Corp 77682 Country Club Drive Palm Desert, CA 92211 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | developers | \$500.00 | \$500.00 | |
| 4-6-2012 | Freddi and Alice Abatti 1756 Meloland Road Haltville CA. 92250 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | landowners | \$250.00 | \$250.00 | |
| 4-12-2012 | Brandy Farms, Inc. 1715 West Highway 98 Calverico, CA. 92231 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Farming company | \$100.00 | \$100.00 | |
| 4-12-2012 | Tom's Hay Farm, Inc. 1715 West Highway 98 Calverico, CA. 92231 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Hay business company | \$100.00 | \$100.00 | |
| SUBTOTAL \$ | | | | 450.00 | | |

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g. business entity)
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.

Statement covers period
 from 3-18-2012
 through 5-19-2012

CALIFORNIA
FORM
460

SCHEDULE A (CONT)

Page 6 of 13

ID NUMBER
1338204

NAME OF FILER
John Pierre Menvielle

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER ID NUMBER)</small> | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small> | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR <small>(JAN. 1 - DEC. 31)</small> | PER ELECTION TODAY <small>(IF REQUIRED)</small> |
|--------------------|--|---|--|-----------------------------|---|--|
| 4-14-2012 | Ruben and Olga Lopez 2499 Vine Street El Dorado, CA 92243 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Educators | \$200.00 | \$200.00 | |
| 4-19-2012 | Thomas E. DuBoise 367 I. Street Bradley, CA 92227 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | businessman | \$100.00 | \$100.00 | |
| 4-23-2012 | Dana and Paula Annis-Rangle 1510 West North Place San Marcos CA 92069-1190 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | landscapers | \$500.00 | \$500.00 | |
| 4-18-2012 | First Solar Development, Inc 1111 Broadway Oakland CA 94607 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | foliar developers | \$250.00 | \$250.00 | |
| 4-20-2012 | Charles and Debra Hosken 1946 Chambers Lane Holtville CA 92250-9530 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | foliar business | \$650.00 | \$650.00 | |
| SUBTOTAL \$ | | | | 1700.00 | | |

*Contributor Codes
 IND - Individual
 COM - Recipient Committee
(other than PTY or SCC)
 OTH - Other (e.g., business entity)
 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.

Statement covers period
from 8-08-2012
through 5-19-2012

Page 7 of 13

**CALLIFORNIA
FORM 460**

SCHEDULE A (CONT)

NAME OF FILER: John Pierre Menville

I.D. NUMBER
1338204

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER ID. NUMBER)</small> | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small> | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE <small>(IF REQUIRED)</small> |
|--------------------|---|---|--|-----------------------------|---|--|
| 4-25-2012 | Jack B. Hart, Sr 4425 Brandt Road Bradley CA. 92227 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | businessman | \$200.00 | \$200.00 | |
| 4-24-2012 | Aggregrate Products, Inc. 9500 Beverly Road Pico Rivera CA 90660 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Sand & gravel business | \$2,000.00 | \$2,000.00 | |
| 5-2-2012 | Larry Bratton 5561 Sandalwood Drive El Centro CA. 92223 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | businessman | \$250.00 | \$250.00 | |
| 5-4-2012 | Clem Muller and Son 1904 Meth Road Helthville, CA. 92250 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | landowners | \$500.00 | \$500.00 | |
| 5-1-2012 | Jeff E. Brothers 2129 Rancheria Oxnard Carnel Valley CA 93024 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | businessman | \$1,000.00 | \$1,000.00 | |
| SUBTOTAL \$ | | | | \$3,950.00 | | |

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

Schedule A
Monetary Contributions Received

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

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 3-08-2012
through 5-19-2012

Page 8 of 13

NAME OF FILER John Pierre Menville

I.D. NUMBER
1338204

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTERED, ID 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) |
|--------------------|---|---|---|-----------------------------|---|--|
| 5-4-2012 | John and Cathy Kennen 1669 Pepper Court El Cerrito, CA 92243 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | businessman | \$100.00 | \$100.00 | |
| 5-3-2012 | Smith-Kandari Real Estate 510 West Main Street Brawley, CA. 92222 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Real Estate business | \$500.00 | \$500.00 | |
| 5-14-2012 | William L. Braudt 4410 Braudt Road Brawley, CA 92222 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | California landowner | \$1,000.00 | \$1,000.00 | |
| <u>0</u> | <u>0</u> | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | <u>0</u> | <u>0</u> | <u>0</u> | |
| <u>0</u> | <u>0</u> | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | <u>0</u> | <u>0</u> | <u>0</u> | |
| SUBTOTAL \$ | | | | 1,600.00 | | |

Schedule A Summary

- Amount received this period - itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 11,150.00
- Amount received this period - unitemized monetary contributions of less than \$100 \$ 3639.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 14,789.00

*Contributor Codes
IND - Individual
COM - Recipient Committee
(Other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

**Schedule
(Continuation Sheet)
Payments Made**

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

SCHEDULE E (CONT')

Statement covers period
from 3-08-2012
through 5-19-2012

Page 9 of 13

**CALIFORNIA
FORM 460**
ID NUMBER
1338204

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

John Pierre Mervelle

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

- OMP campaign paraphernalia/misc.
- CNS campaign consultants
- CTB contribution (explain nonmonetary)*
- CVC civic donations
- FL candidate filing/ballot fees
- FND fundraising events
- ND independent expenditure supporting/opposing others (explain)*
- LEG legal defense
- LT campaign literature and mailings
- MBR member communications
- MTG meetings and appearances
- OFC office expenses
- PET petition circulating
- PHO phone banks
- POL polling and survey research
- POS postage, delivery and messenger services
- PRO professional services (legal, accounting)
- PRT print ads

- RAD radio airtime and production costs
- RFD returned contributions
- SAL campaign workers' salaries
- TEL t.v. or cable airtime and production costs
- TRC candidate travel, lodging, and meals
- TRS staff/spouse travel, lodging, and meals
- TSF 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 PAYMENT | AMOUNT PAID |
|---|---------|-------------------------------------|-------------|
| Holtville Tribune 570 Holt Ave Holtville, CA 92250 | PRT | Newspaper Advertising | \$4,180.00 |
| The Institute for Social-Economic Justice 541 Main Street Brawley, CA 92227 | CTB | Contribution Cesar Chavez Day | \$500.00 |
| SHERWIN - WILLIAMS 2413 Marshall Drive Imperial CA 92251 | OMP | Wall Paper Paste Political signs | \$47.36 |
| SHERWIN - WILLIAMS 2413 Marshall Drive Imperial CA 92251 | OMP | Wall Paper Paste Political signs | \$94.71 |
| EL SOL de Valle 280 Campillo Ave Suite D Calexico, CA 92231 | PRT | Newspaper Advertising | \$1,850.00 |

SUBTOTAL \$ 6,672.00

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

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

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

SCHEDULE E (CONT)

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 3-08-2012
through 5-19-2012

CALIFORNIA
FORM **460**

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ID NUMBER
1338204

NAME OF FILER
John Pierre Menvielle

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

CMP campaign paraphernalia/misc.
 CNS campaign consultants
 CTB contribution (explain nomenclature)*
 CVC civic donations
 FIL candidate filing/ballot fees
 FND fundraising events
 IED independent expenditure supporting/opposing others (explain)*
 LEG legal defense
 LT campaign literature and mailings
 MBR member communications
 MTG meetings and appearances
 OFC office expenses
 OFC office expenses
 PET petition circulating
 PHO phone banks
 POL polling and survey research
 POS postage, delivery and messenger services
 PRO professional services (legal, accounting)
 PRT print ads
 RAD radio airtime and production costs
 RPD returned contributions
 SAL campaign workers' salaries
 TEL t.v. or cable airtime and production costs
 TRC candidate travel, lodging, and meals
 TRS staff/spouse travel, lodging, and meals
 TSF 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 PAYMENT | AMOUNT PAID |
|---|------|----|---------------------------------|-------------|
| Imperial Valley Press Imperial Valley Press 205 N. 8th St. El Centro, CA. 92243 | PRT | | Newspaper Advertising | \$ 3,000.00 |
| Brawley Pop Warner Football 410 South Cesar Cesar Chavez St. Brawley, CA 92227 | CTB | | Contribution to Pop Warner. | \$ 100.00 |
| LAMAR 1699 North Imperial Ave El Centro, CA 92243 | PRT | | Bill board Advertising | \$ 2,550.00 |
| CLUB de los Amigos 420 Cesar Chavez Blvd suite D Calxico, CA. 92231 | CTB | | Contribution Mothers Day Event. | \$ 250.00 |
| KXO RADID 420 West Main Street El Centro, CA. 92243 | RAD | | Radio Advertising | \$ 3510.00 |

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

SUBTOTAL \$ 9,410.00

**Schedule
(Continuation Sheet)
Payments Made**

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

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

John Pierre Menvielle

Statement covers period
from 3-08-2012
through 5-19-2012

Page 11 of 13

**CALIFORNIA
FORM 460**

ID. NUMBER
1338204

SCHEDULE E (CONT.)

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

- CMP campaign paraphernalia/misc.
- CNS campaign consultants
- CTB contribution (explain nonmonetary)*
- CVC civic donations
- FL candidate filing/ballot fees
- FND fundraising events
- IND independent expenditure supporting/opposing others (explain)*
- LEG legal defense
- LT campaign literature and mailings
- MBR member communications
- MTG meetings and appearances
- OFC office expenses
- FET petition circulating
- PHO phone banks
- POL polling and survey research
- POS postage, delivery and messenger services
- PRO professional services (legal, accounting)
- PRT print ads
- RAD radio airtime and production costs
- RFD returned contributions
- SAL campaign workers' salaries
- TEL tv or cable airtime and production costs
- TRC candidate travel, lodging, and meals
- TRS staff/spouse travel, lodging, and meals
- TSF 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 ID. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|--|----------------|
| Imperial Printers 430 Main Street El Centro, CA 92243 | CMP | Campaign misc. signs, cards, etc. | \$ 3,283.15 |
| Hidalgo Society 410 South Ceasar Chavez Street Brawley, CA 92227 | CTB | Campaign contribution Mothers Day Event | \$ 250.00 |
| Westmorland PAL 976 West Bughilwan Rd Brawley, CA 92227 | CTB | Campaign contribution Boxing Event. | \$ 100.00 |
| Our Lady of Perpetual Help Church 1250 B Street Brawley, CA 92227 | CTB | Campaign contribution church event. | \$ 100.00 |
| ALLEGRIA North G.N. Perry Calexico, Calif. 92231 | CTB | Campaign contribution Mother Day event Senior citizens | \$ 250.00 |
| SUBTOTAL \$ | | | 3983.15 |

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

Schedule E
(Continuation Sheet)
Payments Made

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

SCHEDULE E (CONT)

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

John Pierre Menyelle

Statement covers period
from 3-18-2012
through 5-19-2012

CALIFORNIA
FORM **460**

Page 12 of 13

I.D. NUMBER
1338204

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.
 CMP campaign paraphernalia/misc.
 CNS campaign consultants
 CTB contribution (explain nonmonetary)*
 CVC civic donations
 FIL candidate filing/pollot fees
 FND fundraising events
 IAD independent expenditure supporting/opposing others (explain)*
 LEG legal defense
 LT campaign literature and mailings

MBR member communications
 MTG meetings and appearances
 OFC office expenses
 PET petition circulating
 PHO phone banks
 POL polling and survey research
 POS postage, delivery and messenger services
 PRO professional services (legal, accounting)
 PRT print ads

RAD radio airtime and production costs
 RPD returned contributions
 SAL campaign workers' salaries
 TEL tv, or cable airtime and production costs
 TRC candidate travel, lodging, and meals
 TRS staff/spouse travel, lodging, and meals
 TSF 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 PAYMENT | AMOUNT PAID |
|--|------|----|--|-------------|
| Desert Review 439 West K Street Brawley, CA 92227 | WEB | | advertising on-line internet newspaper. | \$500.00 |
| John Pierre Menyelle 897 West Ross Road El Centro, CA 92243 | CMP | | Purchased campaign products. (CASH) | \$500.00 |
| SPECTRUM ADVERTISING 760 West Main Street El Centro, CA 92243 | TEL | | Television advertising | \$3,500.00 |
| Calxico Chamber of Commerce 1100 Imperial Ave. Calxico, CA 92231 | CTB | | Calxico Chamber Event. Political advertising | \$500.00 |
| American Citizens Club 890 B. Street Brawley, CA. 92227 | CTB | | Mo Men's Day Event | \$250.00 |

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

SUBTOTAL \$ **5,250.00**

**Schedule E
Payments Made**

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

SCHEDULEE
CALIFORNIA
FORM
460

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

John Pierre Menvielle

Statement covers period
from 3-18-2012
through 5-19-2012

Page 13 of 13

I.D. NUMBER
1338204

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

- CMP campaign paraphernalia/misc.
- CNS campaign consultants
- CTB contribution (explain nonmonetary)*
- CVC civic donations
- FIL candidate filing/ballot fees
- FND fundraising events
- IND independent expenditure supporting/opposing others (explain)*
- LEG legal defense
- LT campaign literature and mailings
- MBR member communications
- MTC meetings and appearances
- OFC office expenses
- PET petition circulating
- PHO phone banks
- POL polling and survey research
- POS postage, delivery and messenger services
- PRO professional services (legal, accounting)
- PRT print ads
- RAD radio airtime and production costs
- RFD returned contributions
- SAL campaign workers' salaries
- TEL tv. or cable airtime and production costs
- TRC candidate travel, lodging, and meals
- TRS staff/spouse travel, lodging, and meals
- TSF 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 PAYMENT | AMOUNT PAID |
|--|---------|-------------------------------------|----------------|
| Inverperal Valley Press 205 North 8th Street EL Centro, CA 92243 | WEB | On-line advertising internet | \$600.00 |
| KROP 120 SOUTH PLAZA Brawley, CA 92227 | RHD | radio political ads | \$798.00 |
| John Pierre Menvielle 897 West Rossi Road EL Centro, CA 92243 | CMP | Purchased campaign products. (CASH) | \$500.00 |
| SUBTOTAL \$ | | | 1898.00 |

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

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) \$ 27,213.15
2. Unitemized payments made this period of under \$100 \$ 0
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) \$ 0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) **TOTAL \$** 27,213.15

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 5-20-2012
through 6-30-2012

Date of election if applicable:
(Month, Day, Year)
June 5, 2012

| | |
|--|--|
| Date Stamp FILED REGISTRAR OF VOTERS | CALIFORNIA 460 FORM |
| JUL 30 2012 | Page <u>1</u> of <u>8</u> For Official Use Only |
| RECEIVED BY: <u>gpt</u> | |

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 Ballot Measure Committee
- Controlled
- Sponsored (Also Complete Part 6)
- Primarily Formed Candidate/Officeholder Committee (Also Complete Part 7)

2. Type of Statement:

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

3. Committee Information I.D. NUMBER 1338204

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Committee to Elect J.P. Menvielle

Treasurer(s)

NAME OF TREASURER

John Ferre Menvielle

STREET ADDRESS (NO P.O. BOX)
897 West Ross Road
CITY El Centro STATE CA ZIP CODE 92243 AREA CODE/PHONE 760-353-1869
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

MAILING ADDRESS
897 West Ross Road
CITY El Centro STATE CA ZIP CODE 92243 AREA CODE/PHONE 760-353-1869
NAME OF ASSISTANT TREASURER, IF ANY
MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS 760-353-9065

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 7-30-2012 Date
Executed on 7-30-2012 Date

By [Signature]
Signature of Treasurer or Assistant Treasurer

Executed on _____ Date
Executed on _____ Date

By _____
Signature of Controlling Officer, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Recipient Committee
Campaign Statement
Cover Page — Part 2

Type or print in ink.

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE: John Herre Menville
 OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE): I.T.D. Director Division 2
 RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET): 897 West Ross Road El Centro, CA. 92243 CITY: STATE: ZIP:

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 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"/> 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

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

John Pierre Mervielle

| | |
|--|---------------------------|
| Statement covers period from <u>5-20-2012</u> through <u>6-30-2012</u> | Page <u>3</u> of <u>8</u> |
| CALIFORNIA FORM 460 | |
| I.D. NUMBER <u>1338204</u> | |

Contributions Received

| | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|---------------------------------|--|--|
| 1. Monetary Contributions | Schedule A, Line 3 \$ <u>14,505.00</u> | \$ <u>81,717.95</u> |
| 2. Loans Received | Schedule B, Line 3 \$ <u>0</u> | \$ <u>0</u> |
| 3. SUBTOTAL CASH CONTRIBUTIONS | Add Lines 1 + 2 \$ <u>14,505.00</u> | \$ <u>81,717.95</u> |
| 4. Nonmonetary Contributions | Schedule C, Line 3 \$ <u>0</u> | \$ <u>0</u> |
| 5. TOTAL CONTRIBUTIONS RECEIVED | Add Lines 3 + 4 \$ <u>14,505.00</u> | \$ <u>81,717.95</u> |

Expenditures Made

| | | |
|------------------------------------|---|---------------------|
| 6. Payments Made | Schedule E, Line 4 \$ <u>16,300.43</u> | \$ <u>58,055.66</u> |
| 7. Loans Made | Schedule H, Line 3 \$ <u>0</u> | \$ <u>0</u> |
| 8. SUBTOTAL CASH PAYMENTS | Add Lines 6 + 7 \$ <u>16,300.43</u> | \$ <u>58,055.66</u> |
| 9. Accrued Expenses (Unpaid Bills) | Schedule F, Line 3 \$ <u>0</u> | \$ <u>0</u> |
| 10. Nonmonetary Adjustment | Schedule G, Line 3 \$ <u>0</u> | \$ <u>0</u> |
| 11. TOTAL EXPENDITURES MADE | Add Lines 6 + 9 + 10 \$ <u>16,300.43</u> | \$ <u>58,055.66</u> |

Current Cash Statement

| | | |
|-------------------------------------|--|--|
| 12. Beginning Cash Balance | Previous Summary Page, Line 16 \$ <u>25,457.72</u> | |
| 13. Cash Receipts | Column A, Line 3 above \$ <u>14,505.00</u> | |
| 14. Miscellaneous Increases to Cash | Schedule I, Line 4 \$ <u>0</u> | |
| 15. Cash Payments | Column A, Line 8 above \$ <u>16,300.43</u> | |
| 16. ENDING CASH BALANCE | Add Lines 12 + 13 + 14, then subtract Line 15 \$ <u>23,662.29</u> | |

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

LOAN GUARANTEES RECEIVED

Schedule B, Part 2
\$ 0

Cash Equivalents and Outstanding Debts

18. Cash Equivalents
See instructions on reverse
\$ 0

19. Outstanding Debts
Add Line 2 + Line 9 in Column B above
\$ 0

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

| | | |
|----------------------------|------------------|-------------|
| 20. Contributions Received | 1/1 through 6/30 | 7/1 to Date |
| 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.

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).

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

Statement covers period
 from 5-20-2012
 through 6-30-2012

SCHEDULE A (CONT)
CALIFORNIA FORM 460

Page 4 of 8

ID NUMBER
1338204

NAME OF FILER
John Pierre Menvielle

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID 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) |
|--------------------|--|---|--|-----------------------------|---|------------------------------------|
| 5-26-2012 | ARPEX ENERGY SOLUTIONS LLC 604 Sutter Street Suite 250 Folsom, CA. 95630 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Energy Business | 1,000.00 | \$1,000.00 | |
| 5-26-2012 | Green Leaf Power / Desert View Power 62-300 Gene Welinas Dr. Merced, CA 95354 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Energy Business | 500.00 | 500.00 | |
| 5-1-2012 | Larry Lee Grogan & Velia 444 Main Street El Centro, CA. 92243 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Power Shop Awards | 200.00 | 200.00 | |
| 5-1-2012 | Energy Source LLC 12250 California Road San Diego, CA. 92130 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Energy Business | 1,000.00 | 1,000.00 | |
| 4-2012 | First Solar Development, Inc. 525 Market Street, 15th Floor San Francisco, CA. 94165 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Solar Energy Business | 750.00 | 1,000.00 | |
| SUBTOTAL \$ | | | | <u>3450.00</u> | | |

*Contributor Codes
 IND - Individual
 COM - Recipient Committee (other than PTY or SCC)
 OTH - Other (e.g., business entity)
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule A
Monetary Contributions Received

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: John Pierre Menville

Statement covers period
from 5-20-2012
through 6-30-2012

CALIFORNIA
FORM
460

Page 5 of 8

ID NUMBER
1338204

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID 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) |
|--------------------|--|---|--|-----------------------------|---|------------------------------------|
| 6-15-2012 | DAVID AND LYNE WATSON 2104 Edinburg Ave. Candler, CA 92007-1805 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Energy Business | 100.00 | | |
| 1-27-2012 | DRUMAT NEVADA, INC. 6225 Adel Road Reno, NV 89511-1136 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Energy Business | 5000.00 | | |
| 1-27-2012 | Sempura Energy 101 Ash Street San Diego, CA 92101-3017 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Energy Business | 1500.00 | | |
| 1-27-2012 | Tbn and Augusta Kuhn 42 Church Street Charleston, South Carolina 29401 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Landowner | 100.00 | | |
| 1-27-2012 | TINLETTY, E. FIELDS 1010 Second St. Ave, Suite #1300 San Diego, CA 92101 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Attorney | 250.00 | | |
| SUBTOTAL \$ | | | | 6950.00 | | |

Schedule A Summary

- Amount received this period - itemized monetary contributions.
(Include all Schedule A subtotals.)
- Amount received this period - unitemized monetary contributions of less than \$100
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)

\$ 10,400.00
\$ 4,105.00
TOTAL \$ 14,505.00

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

**Schedule
(Continuation Sheet)
Payments Made**

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

SCHEDULE E (CONT)

Statement covers period
from 5-20-2012
through 6-30-2012

CALIFORNIA
FORM **460**

Page 6 of 8

I.D. NUMBER
1338204

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

John Pierre Mervielle

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

AMP campaign paraphernalia/misc.
 CNS campaign consultants
 CTB contribution (explain nonmonetary)*
 CVC civic donations
 FIL candidate filing/ballot fees
 FND fundraising events
 ND independent expenditure supporting/opposing others (explain)*
 LEG legal defense
 LT campaign literature and mailings
 MBR member communications
 MTS meetings and appearances
 OFC office expenses
 FET petition circulating
 PHO phone banks
 POL polling and survey research
 POS postage, delivery and messenger services
 PRO professional services (legal, accounting)
 PRT print ads
 RAD radio airtime and production costs
 RPD returned contributions
 SAL campaign workers' salaries
 TEL tv or cable airtime and production costs
 TRC candidate travel, lodging, and meals
 TRS staff/spouse travel, lodging, and meals
 TSF 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 PAYMENT | AMOUNT PAID |
|---|------|----|---|-------------|
| Linda Locke 112 Daming Lane Dubernal CA 92251 | CTB | | DuPerail Gardens Cometary-Flowers | 100.00 |
| STETTLIN ADVERTISING 760 West Main Street El Centro, CA 92243 | TEL | | TELEVISION ADVERTISING | 5,200.00 |
| EDTAMOVIL (ALBARD CISNERO) 280 Landis Ave #17 Chula Vista, CA 91910 | PRT | | Political Advertising Print ad's moving truck Brewer-El Centro-Cterex | 900.00 |
| Club de Los Amigos 420 Cesar Chavez Blvd Suite D Calveria CA 92231 | CTB | | Contributor Senior Citizen Ladies Club | 100.00 |
| John Pierre Mervielle 899 West Roll Rd El Centro CA 92243 | AMP | | Campaign misc (cash) | 1150.00 |
| | SAL | | Campaign worker salaries (cash) | |

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

SUBTOTAL \$ 7450.00

Schedule E
(Continuation Sheet)
Payments Made

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

SCHEDULE E (CONT)
CALIFORNIA
FORM
460

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

John Pierre Mervielle

Statement covers period
from 5-20-2012
through 6-30-2012

Page 7 of 8

I.D. NUMBER
1338204

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.
 OMP campaign paraphernalia/misc.
 ONS campaign consultants
 CTB contribution (explain nonmonetary)*
 CVC civic donations
 FIL candidate filing/ballot fees
 RND fundraising events
 ND independent expenditure supporting/opposing others (explain)*
 LEG legal defense
 LT Campaign literature and mailings
 MBR member communications
 MTG meetings and appearances
 OFC office expenses
 FET petition circulating
 PHO phone banks
 POL polling and survey research
 POS postage, delivery and messenger services
 PRO professional services (legal, accounting)
 PRT print ads

describe the payment.
 RAD radio airtime and production costs
 RPD returned contributions
 SAL campaign workers' salaries
 TEL T.V. or cable airtime and production costs
 TRC candidate travel, lodging, and meals
 TRS staff/spouse travel, lodging, and meals
 TSF 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 PAYMENT | AMOUNT PAID |
|--|------|----|--|-------------|
| Haiti Ville Tribune 570 Hait Ave. Haiti Ville, CA 92250 | PRT | | News Paper Advertising | 1442.50 |
| El Sol del Valle 280 Campillo Ave. Suite 2 Alexico CA. 92231 | PRT | | News Paper Advertising | 287.00 |
| Dufferin Valley Press 205 North 8th Street El Centro, CA. 92243 | PRT | | Newspaper Advertising | 777.50 |
| Alexico Chamber of Commerce 1100 Dufferin Ave Alexico, CA. 92231 | CTB | | Alexico Chamber Event Political Advertising (Sponsor) | 500.00 |
| KXD Radio 420 West Main Street El Centro, CA 92243 | RND | | Radio Advertising Freedom Fest 2012 sponsor | 750.00 |

SUBTOTAL \$ 3757.00

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

**Schedule C
Payments Made**

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

John Pierre Mervielle

Statement covers period
from 5-20-2012
through 6-30-2012

CALIFORNIA
FORM 460

SCHEDULE E

Page 8 of 8

I.D. NUMBER

1338204

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.
 OMP campaign paraphernalia/misc.
 ONS campaign consultants
 CTB contribution (explain nonmonetary)*
 CVC civic donations
 FIL candidate filing/ballot fees
 FND fundraising events
 ND independent expenditure supporting/opposing others (explain)*
 LEG legal defense
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RAD radio airtime and production costs
 PRD returned contributions
 SAL campaign workers' salaries
 TEL t.v. or cable airtime and production costs
 TRC candidate travel, lodging, and meals
 TRS staff/spouse travel, lodging, and meals
 TSF 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 ENTERED, NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|--|---------|------------------------|-------------|
| DUPREVAL Printers 430 Main Street El Cerrito, CA 94743 | OMP | Campaign misc | 5093.43 |
| | | | |
| | | | |
| | | | |
| SUBTOTAL \$ | | | 5093.43 |

Schedule E Summary

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

TOTAL \$ 16,300.43