

**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 10/25/2011  
through 12/31/2011

Date of election if applicable:  
(Month, Day, Year)  
11/8/2011

Date Stamp  
**Received**  
JAN 31 2012  
D.H.S. CITY CLERK

CALIFORNIA 2001/02 FORM 460

Page 1 of 8  
For Official Use Only

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

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

**2. Type of Statement:**

- Preelection Statement
- Semi-annual Statement
- Termination Statement (Also file a Form 410 Termination)
- Amendment (Explain below)
- 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  
1329846

Committee to Re-Elect Russell Betts, Desert Hot Springs City Council  
2011

STREET ADDRESS (NO P.O. BOX)  
65381 Avenida Dorado

CITY STATE ZIP CODE AREA CODE/PHONE  
Desert Hot Springs CA 92240 760 660-7122

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX  
CITY STATE ZIP CODE AREA CODE/PHONE  
Palm Springs CA 92262 760 322-1076

CITY STATE ZIP CODE AREA CODE/PHONE  
OPTIONAL: FAX / E-MAIL 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 January 20, 2012

By Peter F East  
Signature of Treasurer or Assistant Treasurer

Executed on May 20, 2012

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

Executed on \_\_\_\_\_

By \_\_\_\_\_  
Signature of Controlling Officer/Officeholder, Candidate, State Measure Proponent

Executed on \_\_\_\_\_

By \_\_\_\_\_  
Signature of Controlling Officer/Officeholder, 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  
Russell Betts

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)  
Desert Hot Springs City Council

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP  
65381 Avenida Dorado Desert Hot Springs CA 92240

**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**

Statement covers period  
from 10/25/2011  
through 12/31/2011

Page 3 of 8  
I.D. NUMBER  
1329846

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER  
Committee to Re-Elect Russell Betts, Desert Hot Springs City Council 2011

## Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions .....	Schedule A, Line 3 \$ 3,500.00	\$ 20,058.63
2. Loans Received .....	Schedule B, Line 3 0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS .....	Add Lines 1 + 2 \$ 3,500.00	\$ 20,058.63
4. Nonmonetary Contributions .....	Schedule C, Line 3 0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED .....	Add Lines 3 + 4 \$ 3,500.00	\$ 20,058.63

## Expenditures Made

6. Payments Made .....	Schedule E, Line 4 \$ 7,357.26	\$ 19,783.66
7. Loans Made .....	Schedule H, Line 3 0.00	0.00
8. SUBTOTAL CASH PAYMENTS .....	Add Lines 6 + 7 \$ 7,357.26	\$ 19,783.66
9. Accrued Expenses (Unpaid Bills) .....	Schedule F, Line 3 0.00	0.00
10. Nonmonetary Adjustment .....	Schedule G, Line 3 0.00	0.00
11. TOTAL EXPENDITURES MADE .....	Add Lines 8 + 9 + 10 \$ 7,357.26	\$ 19,783.66

## Current Cash Statement

12. Beginning Cash Balance .....	Previous Summary Page, Line 16 \$ 4,177.23	
13. Cash Receipts .....	Column A, Line 3 above 3,500.00	
14. Miscellaneous Increases to Cash .....	Schedule I, Line 4 0.00	
15. Cash Payments .....	Column A, Line 8 above 7,357.26	
16. ENDING CASH BALANCE .....	Add Lines 12 + 13 + 14, then subtract Line 15 \$ 319.97	

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

17. LOAN GUARANTEES RECEIVED .....

Schedule B, Part 2 \$ 0.00

## Cash Equivalents and Outstanding Debts

18. Cash Equivalents .....

See instructions on reverse \$ 0.00

19. Outstanding Debts .....

Add Line 2 + Line 9 in Column B above \$ 0.00

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

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

## 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 Monetary Contributions Received

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

**CALIFORNIA  
FORM 460**

Statement covers period  
from 10/25/2011  
through 12/31/2011

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SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER  
Committee to Re-Elect Russell Betts, Desert Hot Springs City Council 2011

I.D. NUMBER  
1329846

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)
10/27/2011	San Bernardino & Riverside Counties COPE; ID 85-1055 1074 E La Cadena Dr #1; 92507	<input checked="" type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
11/1/2011	Hitzke Development Corporation 251 Autumn Drive Ste 100 92069	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2000.00	2000.00	
11/2/2011	UFCW Local 1167 UFCW Union; ID 1254111 PO Box 1167 92613	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
11/7/2011	KJB Properties LLC 9231 Valencia Dr 92240	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		300.00	300.00	
11/7/2011	T. I. Group Inc. 14500 Palm Dr 92240	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		200.00	200.00	
<b>SUBTOTAL \$</b>				<b>3,500.00</b>		

## Schedule A Summary

- Amount received this period – itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 3,500.00,
- Amount received this period – unitemized monetary contributions of less than \$100 ..... \$ 0.00
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$** 3,500.00

\*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

Statement covers period  
from 10/25/2011  
through 12/31/2011

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NAME OF FILER  
Committee to Re-Elect Russell Betts, Desert Hot Springs City Council 2011

I.D. NUMBER  
1329846

**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
- MER 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
Richard Oberhaus 1415 E Ocotillo Palm Springs CA 92264	CNS			1500.00
Max Lieberman 65911 7th Street Desert Hot Springs, CA 92240	WEB			200.00
Richard Oberhaus 1415 E Ocotillo Palm Springs CA 92264	WEB			650.00
<b>SUBTOTAL \$</b>				<b>2350.00</b>

\* 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.) ..... \$ 7,307.26
2. Unitemized payments made this period of under \$100 ..... \$ 50.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ..... \$ 0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ..... **TOTAL \$** 7,357.26

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

Type or print in ink.  
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to whole dollars.

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

Committee to Re-Elect Russell Betts, Desert Hot Springs City Council 2011

Statement covers period  
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**CALIFORNIA FORM 460**  
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**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- OMB 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
- LIT 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
Scott Cranfill 9562 Oro Court Desert Hot Springs, CA 92240	SAL			180.00
Tie Mei Xiao 65381 Avenida Dorado Desert Hot Springs CA 92240	FIL			375.00
Richard Oberhaus 1415 E Ocotillo Palm Springs CA 92264	CNS			1000.00
Richard Oberhaus 1415 E Ocotillo Palm Springs CA 92264	LIT			1000.00
Max Lieberman 65911 7th Street Desert Hot Springs, CA 92240	WEB			100.00

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

**SUBTOTAL \$ 2,655.00**

FPPC Form 460 (January/05)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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

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

SCHEDULE E (CONT.)

**CALIFORNIA  
FORM 460**

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1329846

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**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
- 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
- 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
Richard Oberhaus 1415 E Ocotillo Palm Springs CA 92264	MTG			512.26
Richard Oberhaus 1415 E Ocotillo Palm Springs CA 92264	LIT			500.00
Russell Betts 65381 Avenida Dorado Desert Hot Springs CA 92240			Election Night event expense reimbursement	1000.00
Scott Cranfill 9562 Oro Court Desert Hot Springs, CA 92240	SAL			290.00

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

**SUBTOTAL \$ 2,302.26**