CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE

Date Received
Official Use Only
MAR 29 2012
BY: HCSD-K.R.

Please type or print in ink.

NAME OF FILER (LAST)	(FIRST)	(MIDDLE)
WALLER	PHILLIP	HENRY

1. Office, Agency, or Court

Agency Name
HELENDALE COMMUNITY SERVICES DISTRICT

Division, Board, Department, District, if applicable: DISTRICT

Your Position: AUDITOR

► If filing for multiple positions, list below or on an attachment.

Agency: ______ Position: ______

2. Jurisdiction of Office *(Check at least one box)*

- ☐ State
- ☐ Multi-County ______
- ☐ City of ______
- ☐ Judge or Court Commissioner (Statewide Jurisdiction)
- ☐ County of ______
- ☒ Other SAN BERNARDINO COUNTY

3. Type of Statement *(Check at least one box)*

- ☒ **Annual:** The period covered is January 1, 2011, through December 31, 2011.
  -or-
  The period covered is ___/___/______, through December 31, 2011.
- ☐ **Assuming Office:** Date assumed ___/___/______
- ☐ **Leaving Office:** Date Left ___/___/______
  (Check one)
  - ○ The period covered is January 1, 2011, through the date of leaving office.
  - ○ The period covered is ___/___/______, through the date of leaving office.
- ☐ **Candidate:** Election Year ______ Office sought, if different than Part 1: ______

4. Schedule Summary

Check applicable schedules or "None."

► ***Total number of pages including this cover page:*** ______

- ☐ **Schedule A-1** - *Investments* – schedule attached
- ☒ **Schedule A-2** - *Investments* – schedule attached
- ☐ **Schedule B** - *Real Property* – schedule attached
- ☒ **Schedule C** - *Income, Loans, & Business Positions* – schedule attached
- ☐ **Schedule D** - *Income – Gifts* – schedule attached
- ☐ **Schedule E** - *Income – Gifts – Travel Payments* – schedule attached

-or-

☐ **None** - *No reportable interests on any schedule*

5. Verification

MAILING ADDRESS STREET *(Business or Agency Address Recommended - Public Document)*	CITY	STATE	ZIP CODE
735 E. CARNEGIE DRIVE, SUITE 100	SAN BERNARDINO	CA	92408

DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS (OPTIONAL)
(909) 889-0871	pwaller@ramscpa.net

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed March 29, 2012 *(month, day, year)*

Signature P H Waller *(File the originally signed statement with your filing official.)*

SCHEDULE A-2
Investments, Income, and Assets of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
PHILLIP HENRY WALLER

▶ 1. BUSINESS ENTITY OR TRUST

ROGERS, ANDERSON, MALODY & SCOTT, LLP
Name
735 E. Carnegie Dr., Ste. 100, San Bernardino, CA
Address *(Business Address Acceptable)*
Check one
☐ Trust, *go to 2* ☒ Business Entity, *complete the box, then go to 2*

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
CERTIFIED PUBLIC ACCOUNTANTS

FAIR MARKET VALUE
☐ $0 - $1,999
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☒ Over $1,000,000

IF APPLICABLE, LIST DATE:
__/__/11 ACQUIRED __/__/11 DISPOSED

NATURE OF INVESTMENT
☐ Sole Proprietorship ☒ Partnership ☐ ______ Other

YOUR BUSINESS POSITION CPA/PARTNER

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☐ $0 - $499
☐ $500 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☒ OVER $100,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (Attach a separate sheet if necessary.)

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
__/__/11 ACQUIRED __/__/11 DISPOSED

NATURE OF INTEREST
☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership
☐ Leasehold ______ Yrs. remaining ☐ Other ______

☐ Check box if additional schedules reporting investments or real property are attached

▶ 1. BUSINESS ENTITY OR TRUST

STONE CREEK ESCROW, INC.
Name
17310 Bear Valley Rd., Ste 110, Victorville, CA
Address *(Business Address Acceptable)*
Check one
☐ Trust, *go to 2* ☒ Business Entity, *complete the box, then go to 2*

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
REAL ESTATE ESCROW SERVICES

FAIR MARKET VALUE
☐ $0 - $1,999
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☒ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
__/__/11 ACQUIRED __/__/11 DISPOSED

NATURE OF INVESTMENT
☐ Sole Proprietorship ☐ Partnership ☒ CORPORATION Other

YOUR BUSINESS POSITION Spouse is Pres/Shareholder

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

☐ $0 - $499
☐ $500 - $1,000
☐ $1,001 - $10,000
☒ $10,001 - $100,000
☐ OVER $100,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (Attach a separate sheet if necessary.)

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:
☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE
☐ $2,000 - $10,000
☐ $10,001 - $100,000
☐ $100,001 - $1,000,000
☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
__/__/11 ACQUIRED __/__/11 DISPOSED

NATURE OF INTEREST
☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership
☐ Leasehold ______ Yrs. remaining ☐ Other ______

☐ Check box if additional schedules reporting investments or real property are attached

Comments: ______

SCHEDULE C
Income, Loans, & Business Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
PHILLIP HENRY WALLER

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
ROGERS, ANDERSON, MALODY & SCOTT, LLP

ADDRESS *(Business Address Acceptable)*
735 E. Carnegie Dr., Ste. 100, San Bernardino, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
CERTIFIED PUBLIC ACCOUNTANTS

YOUR BUSINESS POSITION
CPA/PARTNER

GROSS INCOME RECEIVED
☐ $500 - $1,000 ☐ $1,001 - $10,000
☐ $10,001 - $100,000 ☒ OVER $100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
☒ Salary ☐ Spouse's or registered domestic partner's income
☐ Loan repayment ☐ Partnership
☐ Sale of ______________ *(Real property, car, boat, etc.)*
☐ Commission or ☐ Rental Income, *list each source of $10,000 or more*

☐ Other ______________ *(Describe)*

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME
STONE CREEK ESCROW, INC.

ADDRESS *(Business Address Acceptable)*
17310 Bear Valley Rd., Ste. 110, Victorville, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE
REAL ESTATE ESCROW SERVICES

YOUR BUSINESS POSITION
SPOUSE IS PRESIDENT/SHAREHOLDER

GROSS INCOME RECEIVED
☐ $500 - $1,000 ☐ $1,001 - $10,000
☒ $10,001 - $100,000 ☐ OVER $100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
☒ Salary ☐ Spouse's or registered domestic partner's income
☐ Loan repayment ☐ Partnership
☐ Sale of ______________ *(Real property, car, boat, etc.)*
☐ Commission or ☐ Rental Income, *list each source of $10,000 or more*

☐ Other ______________ *(Describe)*

► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD
☐ $500 - $1,000
☐ $1,001 - $10,000
☐ $10,001 - $100,000
☐ OVER $100,000

INTEREST RATE
_____% ☐ None

TERM (Months/Years)

SECURITY FOR LOAN
☐ None ☐ Personal residence
☐ Real Property ______________ *Street address*
______________ *City*
☐ Guarantor ______________
☐ Other ______________ *(Describe)*

Comments: ______________