Recipient Committee			CITY CLERK COVERPAGE						
Campaign Statement Cover Page (Government Code Sections 84200-84218.5)		Type or print in a	ink. 20	IS FEB 199 PM	°2: 24	CALIFORNIA 460			
SEE INSTRUCTIONS ON REVERSE		Statement covers period from January 1, 2013 through February 16, 2913	Date of election if applicable (Month, Day, Year) April 2, 2013	:		Page 1 of 18 For Official Use Only			
1. Type of Recipient Committee: All Committee	nittees - Co	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:						
 ✓ 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 Committee Controlled Sponsored Spo	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Amendment (Explain	nt t Termination)	Special Suppl	erly Statement al Odd-Year Report emental Preelection nent - Attach Form 495			
3. Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE NAME IF NO COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE NAME IF NO COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE NAME IF NO COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE NAME IF NO COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE NAME IF NO COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE NAME IF NO COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE NAME IF NO COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE NAME IF NO COMMI	1 1	. NUMBER 272875	Treasurer(s)						
Ara Najarian for Glendale City Council	OMMITTEE)		NAME OF TREASURER Ara Najarian						
The transmitter of the death of the control			MAILING ADDRESS						
STREET ADDRESS (NO P.O. BOX)	<u> </u>		CITY Glendale	STATE	ZIP CO 91203				
CITY STATE Glendale Ca	91203		NAME OF ASSISTANT TREASE		9 1203)·			
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET	OR P.O. 8	DX X	MAILING ADDRESS						
CITY STATE	ZIP CO	DE AREA CODE/PHONE	CITY	STATE	ZIP CO	DE AREA CODE/PHONE			
OPTIONAL: FAX / E-MAIL ADDRESS			OPTIONAL: FAX / E-MAIL ADD	PRESS					
I have used all reasonable diligence in preparing an under penalty of perjury under the laws of the State of Executed on Date Executed on Texture Tex	d reviewing of California —)— (9	this statement and to the best of my know that the foregoing is true and correct. By	viedge the information contained he will be with the will be with the will be will be will be with the will be		ed schedule	es is true and complete. I certify			
Executed on		Signalure of Contin	olling Officeholder, Candidate, State Measure Pr		rofSponsor				
Date Executed on		S	ignature of Controlling Officeholder, Candidate,						
Liele			ignature of Controlling Officeholder, Candidate, S	State Measure Proponent		EDDC Corm 460 (Tenues 196)			

and Parine

FPPC Form 460 (January/05) FPPC Toil-Free Helpline: 866/ASK-FPPC (866/275-3772) State of California Type or print in ink.

Recipient Committee Campaign Statement Cover Page — Part 2

CALIFORNIA 460

						Page2	of <u>18</u>
Officeholder or Candidate Controlled	Committee	6.	Primarily Formed Ball	ot Measur	e Committee		
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE				
Ara Najarian			, .				
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND	DISTRICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICT	TION		
Citty Council, Glendale Ca							SUPPORT
RESIDENTIALIBUSINESS ADDRESS (NO. AND STREE	T) CITY STATE ZIP						
	ilendale ca 91203		Identify the controlling of	ficeholder, c	andidate, or state	measure	Drobonent, if any
			NAME OF OFFICEHOLDER, CA	NDIDATE, OR P	ROPONENT		
Related Committees Not Included in the	nis Statement: List any committees						
not included in this statement that are controlled in contributions or make expenditures on behalf of y	hu vou or are milmouth. formers and a		OFFICE SOUGHT OR HELD		DIS	STRICT NO.	IF ANY
COMMITTEE NAME						- · · · · · · · · · · · · · · · · · · ·	
OCHINATI ECCIANANE	I.D. NUMBER						
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Can	didate/Offic	ceholder Com	mittee /	ct names of
	☐ YES ☐ NO		officeholder(s) or candidate(s) for which th	is committee is pri	marily form	ied.
COMMITTEE ADDRESS STREET ADDRESS (NO	P.O. BOX)		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT	OR HELD	T
CITY							SUPPORT
STATE	ZIP CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	ANDIDATE	OFFICE SOUGHT	OD UC D	
COMMITTEE NAME					OLLICE SOUGHT	OKHELD	SUPPORT
COMINITIEE NAME	I.D. NUMBER		NAME OF OFFICE				☐ OPPOSE
			NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT
NAME OF TREASURER	CONTROLLED COMMITTEE?						OPPOSE
	☐ YES ☐ NO		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT	OR HELD	
COMMITTEE ADDRESS STREET ADDRESS (NO			•				SUPPORT OPPOSE
					J		
CITY STATE	ZIP CODE AREA CODE/PHONE		a 12-				
			Attac	n continuațio	on sheets if nece:	ssary	

Campaign Disclosure Statement Summary Page

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

SUMMARY PAGE Statement covers period CALIFORNIA January 1, 2013 **FORM** February 16, 2013

from _ SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Ara najarian for

		Onlines A				
Contributions Received		Column A TOTAL THIS PERIOD (FROMATTACHED SCHEDULES)		COLUMN B CALENDAR YEAR TOTAL TO DATE	Running in Both th	mary for Candidates e State Primary and
1. Monetary Contributions Schedule A, Line 3	\$	22245	s	22245	General Elections	,
2. Loans Received Schedule 8, Line 3		2500	•	2500	1/1 th	rough 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1+2		24745	\$	24745	20. Contributions	
4. Nonmonetary Contributions Schedule C, Line 3		0		0		\$
5. TOTAL CONTRIBUTIONS RECEIVED	\$	24745	\$	24745	21. Expenditures Made \$	
Expenditures Made					E	
6. Payments Made Schedule E, Line 4		15281	\$	15281	Expenditure Limit S Candidates	ummary for State
7. Loans Made Schedule H, Line 3		0		0	, , , , , , , , , , , , , , , , , , , ,	
8. SUBTOTAL CASH PAYMENTS Add Unes 6+7		15281	\$	15281	22. Cumulative	Expenditures Made* foluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3		0		0	Date of Election	
10. Nonmonetary Adjustment		0		0	(mm/dd/yy)	Total to Date
11. TOTAL EXPENDITURES MADE	\$	15281	\$.	15281		. \$
Current Cash Statement			Г		, .	*
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	1173			[. \$
13. Cash Receipts Column A, Line 3 above	•	24745	To c	alculate Column B, add ounts in Column A to the	i	
14. Miscellaneous Increases to Cash Schedulo I, Line 4			COL	esponding amounts	*Amounts in this section ma	y be different from amounts
15. Cash Payments Column A, Line 8 above		15281	repo	Column B of your last ort. Some amounts in	reported in Column B.	y be omeight from anioung
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	s	10637	Coll	imn A may be negative es, that should be		
If this is a termination statement, Line 16 must be zero.			8ub1	racted from previous od amounts, if this is		
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$.	. 0	the t	irst report being filed his calendar year, only		
Cash Equivalents and Outstanding Debts	_			over the amounts Lines 2, 7, and 9 (if		
18. Cash Equivalents See Instructions on reverse	\$	0	any)	•		
19. Outstanding Debts Add Line 2 + Line 9 in Column B abovo						
	· * · ·				FPPC Toll-Free Helplines	FPPC Form 460 (January/05)

Schedule A Monetary Contributions Received		Amoun	e or print in ink. ts may be rounded whole dollars.	Statement cov	ers period / 1, 2013	CALIFORNIA 460		
SEE INSTRUCTION	ONS ON REVERSE			through Februa	ry 16, 2013	Page	4 of 18	
NAME OF FILER Ara Najar	ian for Glendale City Council	-		<u> </u>		I.D. NU 12728		
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 CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)	
1-7-13	Tony Pogosyan Glendale, Ca 91203	ØIND □COM □OTH □PTY □SCC	attorney	1000	1000			
1-27- 13	Cecil Keshishian Los Angeles ca 90004	☑IND ☐COM ☐OTH ☐PTY ☐SCC	retired	1000	1000			
1-27-13	Ralph Tufenkian Glendale, CA 91208	☑IND □COM □OTH □PTY □SCC	retired	1000	10	00		
1-27-13	Vahe Yacoubian Glendale, Ca 91203		physician	200	2	00		
1-27-13	Talin Yacoubian Los Angeles, CA 90071	☑IND □COM □OTH □PTY □SCC	attorney	250	2	50		
			SUBTOTAL\$	3,450				
Amount red (Include all Amount red Total mone	A Summary ceived this period – itemized monetary contributions. Schedule A subtotals.) ceived this period – unitemized monetary contributions tary contributions received this period. 1 and 2. Enter here and on the Summary Page, Colu	of less than \$	\$100\$	_	IND- COM OTH PTY-	other t) Other (- Political-	I nt Committee han PTY or SCC) e.g., business entity)	
	Chara Season To the Charge			•	oll-Free Helpline	FPPC 866/ASI	Form 460 (January/05) K-FPPC (866/275-3772)	

Schedule A (Continuation Sheet)

Type or print in ink.

SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may to whole		Statement covers period from January 1, 2013 through February 16, 2013		CALIFORNIA 460	
NAME OF FILER Ara Najaria	an for Glendale City Council			through reprua	iy 10, 2013	Page . I.D. NU 12728	MBER
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD, NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
1-27-13	Vahe Simonian la Canada, Ca	☑IND □COM □OTH □PTY □SCC	retired	400	400		
1-27-13	Paul Kalemkiarian Arcadia, CA 91006	ZIND COM OTH PTY SCC	business owner, Wine of the Month	150	1	50	
1-27-13	Mina Shirvanian Glendale, Ca 91207	☑IND □COM □OTH □PTY □SCC	retired	300	3	00	
1-27-13	Shahan Yacoubian La Canada, Ca 91011	☑IND □COM □OTH □PTY □SCC	physician	250	2	50	
1-27-13	Silvia Tchakmakjian Los Angeles, Ca 90027	☑IND □COM □OTH □PTY □SCC	owner, Silvia's Costumes	1000	100	00	
		······································	SUBTOTAL \$	2100			

*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





Type or print in ink. Amounts may be rounded to whole dollars SCHEDULE A (CONT.)

Statement covers period

		to whole dollars.		from January 1, 2013		FORM 460			
				through_Februa	ry 16, 2013	Page	6 of 18		
Ara Najaria	an for Glendale City Council					1.D. NUI 12728			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR. (IFCOMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALENDAR Y	AULATIVE TO DATE ALENDAR YEAR AN. 1 - DEC, 31) AULATIVE TO DATE (IF REQUIRE			
1-27-13	Souren Shorvoghlian Glendale, Ca 91202		realtor	200	200		200		-
1-27-13	Kalemkiarian Family Trust San Diego, CA 92122	☐IND ☐COM ☑OTH ☐PTY ☐SCC		250	250				
1-27-13	Garo Kevorkian Glendale, CA 91206	☑IND □COM □OTH □PTY □SCC	contractor	500	5	00			
1-27-13	Mary Der Parseghian Pasadena, Ca 91107	☑IND □COM □OTH □PTY □SCC	attorney	500	50	00			
1-27-13	Eve Mekerdichian Glendale, Ca 91207	☑IND □COM □OTH □PTY □SCC	not employed	1000	100	00			
		.:	SUBTOTAL\$	2450					

*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





Type or print in ink.
Amounts may be rounded

SCHEDULE A (CONT.)

	•	to whole dollars.		from January 1, 2013		FORM 460	
NAME OF FILER Ara Najaria	n for Glendale City Council			through_Februa	ry 16, 2013	Page I.D. NUN 12728	ØER
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD, NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELFEMPLOYED, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	DATE EAR	PER ELECTION TO DATE (IF REQUIRED)
1-27-13	Alex Hovsepian Santa Monica, CA 90405	DIND COM OTH PTY SCC	Bank of Manhattan	500	500		
1-27-13	Edith Aghajanian Glendale, CA 91202	☑IND □COM □OTH □PTY □SCC	not empolyed	500	500		
1-27-13	Carmen Simonian Glendale, CA 91222	☑IND □COM □OTH □PTY □SCC	not employed	500	50	00	
1-27-13	John Gerro Burbank, Ca 91501	ZIND COM OTH PTY SCC	attorney	200	20	00	
1-27-13	Missak Abdulian Los Angeles, Ca 90068	☑IND □COM □OTH □PTY □SCC	Physician	200	20	00	
		1900	1 1 Y				

*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



The system

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

SCHEDULE A (CONT.)

CALIFORNIA AGO

Statement covers period

				fromJanuary	1, 2013	, 2013 FORM		400		
				through_Februar	у 16, 2013	Page	<u>८</u> of	18_		
Ara Najari	an for Glendal City Council					1.D. NUI 12728		•		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD, 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)		TÓ	LECTION DATE QUIRED)		
1-27-13	Hovhannes Babujian Glendale, Ca 91202	COM COM OTH PTY SCC	retired	1000	1000		1000			
1-27-13	Arsen Sanjian Oceanside, Ca 92054	Z IND COM OTH PTY SCC	retired	1000	1000					
1-27-13	E.T. Simonian Glendale, CA 91222	☑IND □COM □OTH □PTY □SCC	architect	1000	1000					
1-27-13	Raffi Najarian Glendale, Ca 91208	☑IND □COM □OTH □PTY □SCC	dentist	1000	1000					
1-27-13	Gaguik Guevorkian Glendale, Ca	ZIND COM OTH PTY SCC	owner Bijoux Treasures	1000	10	00				
			SUBTOTAL	\$ 5000						

*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





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

SCHEDULE A (CONT.)

MONETALY	Contributions Received	to whole		Statement cov from January	1, 2013	F	orm 460	
NAME OF FILER				through_Februar	ry 16, 2013	Page.	9 of 18	
Ara Najaria	an for Glendale City Council					1.D. NUMBER 1272875		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)	
2-1-13	Vatche Tashjian Glendale, Ca 91203	☑IND □COM □OTH □PTY □SCC	attorney	500	500			
1-16-13	Vartkes Najarian La Canada, Ca 91011	☑IND □COM □OTH □PTY □SCC	retired	1000	10	00		
1-16-13	Stephan Yacoubian Glenuare, CA 9 1206	ZIND ☐COM ☐OTH ☐PTY ☐SCC	physician	1000	10	00		
1-16-13	Mary Najarian La Canada, CA 91011	ØIND □COM □OTH □PTY □SCC	retired	1000	10	00		
1-23-13	Armen martin Glendale, Ca	ZIND □COM □OTH □PTY □SCC	attorney	100	11	00		
			SUBTOTAL\$	3600			*	

*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





Type or print in lnk. Amounts may be rounded

Schedi	JLE A ((CONT.)

Monetary Contributions Received		Amounts may to whole c		110111	1, 2013	CALIFORNIA 460		
	·			through_Februar	y 16, 2013	Page_	10 of 18	
NAME OF FILER Ara Najaria	an for Glendale City Council			I.D. NUMBER 1272875				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALENDAR YEAR T		PER ELECTION TO DATE (IF REQUIRED)	
2-3-13	Raymond Raven Pasadena, Ca 91103	☑IND □COM □OTH □PTY □SCC	physician	1000	1000			
2-3-13	Joe Bahuth Tarzana, Ca 91356	Z IND COM OTH PTY SCC	retired	200	2	200		
2-9-13	Stephan Yacoubian Glendale, Ca 91206	IZIND COM OTH PTY SCC	physician	1000	10	000		
1-18-13	Nora Sahagian Westlake Village, Ca 91362	☑IND □COM □OTH □PTY □SCC	retired	100	1	00		
1-29-13	Joyce Abdulian Studio City, Ca 91604	☑IND □COM □OTH □PTY □SCC	retired	100	1	00		

SUBTOTAL\$

2400

*Contributor Codes

IND-Individual

COM-Recipient Committee

(other than PTY or SCC)
OTH ~ Other (e.g., business entity)
PTY ~ Polltical Party

SCC - Small Contributor Committee





Type or print in link.
Amounts may be rounded

SCHEDULE A (CONT.)

to whole dollars.			Statement covers period from January 1, 2013			CALIFORNIA 460						
NAME OF FILER		··		through_Februa	ry 16, 2013	Page.						
	nn for City Council					1.D.NL 1272	JMBER 875					
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, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)					
2-15-13	Hermine Kevorkian Los-Angeles, CA 90036	IZIND ☐COM ☐OTH ☐PTY ☐SCC	retired	200	200							
2-15-13	Bogaard Living Trust Pasadena, CA 91105	☐IND ☐COM ØOTH ☐PTY ☐SCC		250	2	 250						
1-31-13	Mihran Agbabian Los Angeles, Ca 90049	☑IND □COM □OTH □PTY □SCC	retired	200	2	00						
1-27-13	Armen Yesayan Glendale, CA 91206	☑IND □COM □OTH □PTY □SCC		100	1	00						
		☐IND ☐COM ☐OTH ☐PTY ☐SCC.										
		SUBTOTAL\$ 750										

*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 B - Part 1		Type or print in ounts may be re		Г	Statement cov	rers period		NUMBER 72875	
Loans Received	7	to whole dollar	rs.			y 1, 2013		^{IA} 460	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER					through Februa	ry 16, 2013	Page 12	of <u>18</u>	
Ara Najarian for City Council							1272875		
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER LD. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELFEMPLOYED, ENTER NAME OF BUSINESS)	OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAIL OR FORGIVER THIS PERIOD	CLOSE OF THIS	(v) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTIONS TO DATE	
Ara najarlan	Self emplyed attorney			PAID	LEMOD		20/41	CALENDARYEAR	
Glendale, Ca 91203				\$0 ☐ FORGIVEN	\$ 2500	O %	ş <u>2500</u>	\$ 2500 PERELECTION**	
TEZ IND COM COTH PTY SCC		\$2500	52500	ş <u> </u>	9-1-13 DATE DUE	s0	1-1-13 DATE INCURRED	\$	
				\$ FORGIVEN	\$	RATE	ş	\$PER ELECTION ***	
[†] □ IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$	
				\$ FORGIVEN	\$		\$	CALENDARYEAR \$ PER ELECTION**	
TO IND COM OTH PTY SCC		\$	\$	\$	DATEDUE	\$	DATE INCURRED	5	
		SUBTOTALS \$	2500 \$	0	\$ 2500 :	0			
Schedule B Summary		-				(Enter (e) on Schedule E, Line 3)	<u>er a si jeli i kod p</u>	<u> </u>	
Loans received this period (Total Column (b) plus unitemized loans	of less than \$100.)	*****************	*****************	\$	2500				
Loans paid or forgiven this period (Total Column (c) plus loans under \$100 (Include loans paid by a third party that	Daid or forgiven)		•	·····\$	0	IND COI OTI	ontributor Codes - Individual M – Recipient Cor (other than P I – Other (e.g., L	TY or SCC)	
 Net change this period. (Subtract Line Enter the net here and on the Summary 	2 from Line 1.) Page, Column A, Line 2.	*****************	**************	NET \$	2500 by be a negative number)	SCO	Y — Political Party C — Small Contribu	tor Committee	
*Amounts forgiven or paid by another party also n ** If required.	ust be reported on Schedule A.						FPDC Form 4	60 (

Schedule B - Part 2 Loan Guarantors SEE INSTRUCTIONS ON REVERSE		Type or print in lnk. Amounts may be rounded to whole dollars.		from	nent covers perio January 1, 2013 February 16, 20	3	CALIFOR FORM	NIA 460
NAME OF FILER		· · · · · · · · · · · · · · · · · · ·				_	I.D. NUMBER	
FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN		AMOUNT GUARANTEED THIS PERIOD		JMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
	□IND □COM		LENDER			CAI	LENDARYEAR	
	□отн □рту		DATE	·····			RELECTION REQUIRED)	
	□scc			_		\$	ENDAR YEAR	
	□IND □COM □OTH		LENDER			\$		
	□PTY □scc		DATE			PE (IF	RELECTION REQUIRED)	
						5		
	□IND		LENDER			s_		
	□OTH □PTY □SCC		DATÉ	·		(IF	REQUIRED)	
	-					\$		
	□com		LENDER			CALI	ENDAR YEAR	
	НТОП УТЯП		DATE			PEI (IF	REQUIRED)	

□PTY □scc

SUBTOTAL \$

Enter on Summery Page, Line 17 only.

0

Schedule B – Part 1		Type or print in		r	Statement co		SCH	EDULE B-PART1	
Loans Received	Am	Amounts may be rounded to whole dollars.					CALIFORNIA 460		
				ļ	from	ry 1, 2013	FORM TOU		
SEE INSTRUCTIONS ON REVERSE NAME OF FILER					through Februa	ary 16, 2013	Page 14	of 18	
		•				-	I.D. NUMBER		
Ara Najarian for City Council							1272875	ļ	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER LD. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIOR	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF	(g) CUMULATIVE CONTRIBUTIONS	
Ara nalarian	Self emplyed attorney	151000		PAID	PERIOD	FERIOD	LOAN	TO DATE CALENDAR YEAR	
Glendale, Ca 91203	_			\$(2500	O %	ş <u>2500</u>	\$ 2500 PER ELECTION**	
TO IND COM OTH PTY SCC		\$2500	\$2500	\$(9-1-13 DATE DUE	s0	1-1-13 DATE INCURRED	\$	
				\$ FORGIVEN	- \$		\$	CALENDAR YEAR S PER ELECTION ***	
TO IND COM OTH PTY SCC		5	\$	\$,	DATE DUE	\$	DATEINCURRED	\$	
				PAID \$ FORGIVEN	\$	RATE %	s	CALENDAR YEAR \$ PER ELECTION**	
TO IND COM OTH PTY SCC		•	5	\$	DATE DUE	\$	DATE INCURRED	\$	
		SUBTOTALS \$	2500 \$. (\$ 2500	\$ 0			
Schedule B Summary				 	0500	(Enter (v) on Schedule E, Line 3)	<u> </u>		
 Loans received this period	of less than \$100.)	*************	******************	\$	2500				
2. Loans paid or forgiven this period (Total Column (c) plus loans under \$100 (Include loans paid by a third party that	paid or forgiven.)		***********************	, \$	0	CO	ontributor Codes - Individual M - Recipient Cor (other than P	TY or SCC)	
Net change this period. (Subtract Line Enter the net here and on the Summary	2 from Line 1.)	•	***************************************	NET \$	2500 lay be a nogative number)	1 1	H – Other (e.g., t Y – Political Party C – Small Contribu	1	
*Amounts forgiven or paid by another party also n	nust be reported on Schedule A.)							

** if required.

Schedule E Payments Made	Type or prii Amounts may to whole o	be rounde	rounded Statement covers period				FORNIA 460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		<u> </u>		thro	ugh <u>February I</u>	0, 2013	15 of 18
CODES: If one of the following codes accurately described: CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations Fil. candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member con meetings ar OFC office experimental petition circles phone bank POL polling and postage, de	nmunication: d appearantses slating s survey rese livery and n	s ces	RAD RFD SAL TEL TRC TRS TSF VOT	radio airtime and preturned contribution campalgn workers t.v. or cable airtime candidate travel, to staff/spouse travel transfer between coter registration	production costs ions s' salaries e and production cos odging, and meats l, lodging, and meats	ime candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE	OR	DESCRIPTION	OF PAYMENT	· ·	AMOUNT PAID
Math Academia Glendale ca, 91203		ofc					2000
Print On All Glendale, CA 91201		l)t				· · · · · · · · · · · · · · · · · · ·	240
Political data Burbank, Ca		pro					2500
* Payments that are contributions or independent expenditures	must also be summ	arized on	Schedule D.			SUBTOTAL	4740
Schedule E Summary			,				
1. Itemized payments made this period. (Include all Schedu	le E subtotals.)	++++	*******************	***************************************	******************	\$	15148
2. Unitemized payments made this period of under \$100	*******************		*****************	*********	*****************	\$	133
3. Total interest paid this period on loans. (Enter amount from	m Schedule B, Part	1, Columr	(e).}	***************	*******************	\$	0

15281

Schedule E (Continuation Sheet) Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER	Type or pri Amounts may to whole o	be rounded		Statement covers period from January 1, 2013 through February 16, 2013	CALIFO FOR Page I.D. NUMBER	76 of 18
CODES: If one of the following codes accurately describ CMP campaign paraphernalia/misc. CNS campaign consultants contribution (explain nonmonetary)* CVC civic donations FIL candidate filling/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LTT campaign literature and mailings	MBR member co MTG meetings a OFC office expe PET petition circ PHO phone bank POL politing and POS postage, de	mmunications nd appearance uses culating ts survey resea	es .	RAD radio airtime and production returned contributions SAL campaign workers' salaries t.v. or cable airtime and pro candidate travel, lodging, ar staff/spouse travel, lodging, transfer between committee voter registration WEB information technology cost	n costs duction cost nd meals and meals es of the sai	me candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE	OR DES	CRIPTION OF PAYMENT		AMOUNT PAID
City of Glendale Glendale, CA		fil				825
Hrag Kitsinian Encino CA 91316		cns				2500
Hrag Kitsinian Encino, CA		ofc				1427
Caspian Services La Crescenta, CA		web	,			1250
Color Depot Glendale Ca		prt				2507
Payments that are contributions or independent expenditures must als	o be summarized on	Schedule D.		GIII	RTOTAL 6	

SUBTOTAL \$

8509

Schedule E Payments Made SEE INSTRUCTIONS ON REVERSE	Amounts	Type or print in ink. Amounts may be rounded to whole dollars.			ement covers period January 1, 2013 h February 16, 2013	- FC	SCHEDULE ORNIA 460
NAME OF FILER				inroug	n	Page	
CODES: If one of the following codes accurately described CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filling/ballot fees FND fundralsing events IND Independent expenditure supporting/opposing others (explain)* LEG legal defense LTC campaign literature and mallings	MBR memb MTG meetir OFC office PET petition PHO phone POL polling POS postag	er communication of and appear of circulating banks and survey re- of delivery and slonal services	ns Inces	RAD ra RFD re SAL ca TEL tv TRC ca TRS sta TSF tre VOT vo	cribe the payment. dio airtime and production turned contributions turned contributions and production are petition formation technology cost	duction cosi nd meals and meals and meals	me candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD, HUMBER)		CODE	OR	DESCRIPTION OF	PAYMENT		AMOUNTPAID
Math Academia Glendale ca, 91203		ofc					2000
Print On All Glendale, CA 91201		lit					240
Political data Burbank, Ca		pro					2500
* Payments that are contributions or independent expenditures n	must also be s	ummarized or	Schedule D.		SU	BTOTAL\$	4740
Schedule E Summary							
1. Itemized payments made this period. (Include all Schedule	E subtotals.).	d+==>#= ***	******************	*************	***********************	\$	15148
2. Uniternized payments made this period of under \$100			**********			¢	133
3. Iotal interest paid this period on loans. (Enter amount from	Schedule B, F	Part 1, Colum	n (e).)	••••••		œ	
4. Total payments made this period. (Add Lines 1, 2, and 3. En	nter here and	on the Sumn	ary Page, Colum	ın A, Line 6.)	ΤΟ	TAL \$	15281

Schedule E (Continuation Sheet) Payments Made SEE INSTRUCTIONS ON REVERSE	Type or prin Amounts may b to whole do	e rounded		SCHEDULE E (CC Statement covers period from January 1, 2013 FORM 46 through February 16, 2013			
CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filling/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LT campaign literature and mailings	MBR member commeetings an office exper petition circuphone banks polling and spostage; del	imunications d appearance ises lating s survey resear	es	RAD radio airlime and product returned contributions SAL campaign workers' salativ. or candidate travel, lodging TRS staff/spouse travel, lodging	ction costs ries production costs , and meals ing, and meals ttees of the same candidate/sponsor		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LO. NUMBER)		CODE (OR DE	ESCRIPTION OF PAYMENT	AMOUNT PAID		
AA1 Graphics Glendale, Ca		prt			1799		
Vartan Kalantaryan Glendale Ca 91206		pro			100		

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

SUBTOTAL \$ 1899