

Supplemental Independent Expenditure Report

(Government Code Section 84203.5)

SEE INSTRUCTIONS ON REVERSE

Report ID Number
2013-1A

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

SUPPLEMENTAL INDEPENDENT EXPENDITURE

CITY CLERK
Date Stamp

CALIFORNIA
FORM **465**

Report covers period
from 1/1/2013
through 3/25/2013
Date of election if applicable:
(Month, Day, Year)
4/2/2013

2013 MAR 29 AM 8:00

Page 1 of 3
For Official Use Only

Amendment (Explain Below)
entered wrong \$ amount on
initial filing

1. Committee/Filer Information

I.D. NUMBER (if recipient committee)
770923

Treasurer (if recipient committee)

COMMITTEE/FILER'S NAME
GLENDALE FIREFIGHTERS FOR BETTER GOVERNMENT

STREET ADDRESS (NO P.O. BOX)
421 OAK STREET

CITY STATE ZIP CODE AREA CODE/PHONE
GLENDALE CA 912040000 (562) 429-7974

OPTIONAL: FAX / E-MAIL ADDRESS

NAME OF TREASURER
Richard Bush

MAILING ADDRESS
4400 Heather Road

CITY STATE ZIP CODE AREA CODE/PHONE
Long Beach CA 90808 (562) 832-6397

OPTIONAL: FAX / E-MAIL ADDRESS
Treasurer: richwbush@yahoo.com

2. Name of Candidate or Measure Supported or Opposed

CHECK ONE

NAME OF CANDIDATE Ara Najarian	OFFICE SOUGHT OR HELD AND DISTRICT, IF APPLICABLE Office Sought: Other: City Council Jurisdiction: City Description: City of Glendale	SUPPORT <input checked="" type="checkbox"/>	OPPOSE <input type="checkbox"/>
NAME OF BALLOT MEASURE	BALLOT NO./LETTER JURISDICTION	SUPPORT <input type="checkbox"/>	OPPOSE <input type="checkbox"/>

3. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets.

CUMULATIVE TO DATE
CALENDAR YEAR
(JAN.1 - DEC.31)

DATE	NAME AND ADDRESS OF PAYEE	DESCRIPTION OF EXPENDITURE	AMOUNT	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC.31)
3/22/2013	Firefighters Print and Design 1780 Creekside Oaks Drive Sacramento, CA, 95833	Mailer Memo Reference: 1	\$2,647.56	\$3,385.56
3/17/2013	LA Times 202 W. First St 9th Floor Los Angeles, CA, 90012	Glendale News Press newspaper ad Memo Reference: 2	\$738.00	\$738.00

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SUPPLEMENTAL INDEPENDENT EXPENDITURE

Report covers period		CALIFORNIA FORM 465
from	1/1/2013	
through	3/25/2013	Page <u>2</u> of <u>3</u>
NAME OF FILER GLENDALE FIREFIGHTERS FOR BETTER GOVERNMENT		I.D. NUMBER (if recipient com.) 770923

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
GLENDALE FIREFIGHTERS FOR BETTER GOVERNMENT

4. Summary

1. Total independent expenditures of \$100 or more made this period. (Part 3.)	\$	3,385.56
2. Total independent expenditures under \$100 made this period. (Not itemized.)	\$	0.00
3. Total independent expenditures made this period. (Add Lines 1 + 2.)	TOTAL \$	3,385.56

5. Filing Officers *Enter the name and address of each filing officer with whom the filer's most recent campaign statements (Form 450, 460 or 461) have been filed.*

1) NAME OF FILING OFFICER
Secretary of State

ADDRESS (NO. AND STREET)
1500 11th Street, Room 495

CITY STATE ZIP CODE
Sacramento CA 95814

3) NAME OF FILING OFFICER
Registrar of Voters, City and County of San Francisco

ADDRESS (NO. AND STREET)
Room 48, City Hall, One Doctor Carlton B. Goodlett Place

CITY STATE ZIP CODE
San Francisco CA 94102

2) NAME OF FILING OFFICER
Registrar-Recorder of Los Angeles County

ADDRESS (NO. AND STREET)
12400 Imperial Highway

CITY STATE ZIP CODE
Norwalk CA 90650

4) NAME OF FILING OFFICER
Glendale City Clerk

ADDRESS (NO. AND STREET)
613 E. Broadway, Room 110

CITY STATE ZIP CODE
Glendale CA 91206

6. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein is true and completed. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 3/26/2013
DATE

By *Richard Barr*
SIGNATURE OF FILER, TREASURER OR ASSISTANT TREASURER

Executed on 3/26/2013
DATE

By *Chay Stuu*
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT, OR RESPONSIBLE OFFICER OF SPONSOR

Executed on _____
DATE

By _____
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on _____
DATE

By _____
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Memo Reference: 1

1/3 cost of mailer supporting Najarian, Friedman, and Khassakian

Memo Reference: 2

1/2 cost of ad supporting Najarian and Friedman
