Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in i	ink.	Date Stamp CITY CLERK	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE	Statement covers period from 2 20 2011 through 3 19 201	Date of election if applicated (Month, Day, Year) APRILS, 2011	MAR 2 PM 4: 10	Page of For Official Use Only
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee Problematical Party/Central Committee	imarily Formed Baliot Measure pmmittee Controlled Sponsored Complete Pert 6) imarily Formed Candidate/ ficeholder Committee Complete Pert 7)	2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te	Spec Supp ermination) State	terly Statement ial Odd-Year Report lemental Preelection ment - Attach Form 495
3. Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) DAN CABIZERA FOR GUSD BOARD STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP COL MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO CITY STATE ZIP COL OPTIONAL: FAX / E-MAIL ADDRESS	DE AREA CODE/PHONE	Treasurer(s) NAME OF TREASURER JUDY CABR MAILING ADDRESS CITY GLENDALE NAME OF ASSISTANT TREASURE MAILING ADDRESS MAILING ADDRESS CITY OPTIONAL: FAX / E-MAIL ADDRESS	STATE ZIP CO	07-126)
4. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California Executed on 3/9/201 Executed on Date Executed on Date	By Signature of Cont	Viedge the Information contained her Signature of Treasurer of Assistant Trolling Officeholder, Candidate, State Measure Pro	Ponent or Responsible Officer of Sponsor rate Measure Proponent	les is true and complete. I certify

ponent FPPC Form 450 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772) State of California

Officeholder or Candidate Controlled Comm	nittee	6.	Primarily Formed Ball	ot Measure	Committee	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
DANIEL C. CABRERA						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	ICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTION	ON	☐ SUPPORT
MEMBER, GUSD GWERNING	BOARD					OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP					
FIEND	ALE CA 91707		Identify the controlling of	iceholder, car	ndidate, or state measu	e proponent, if any.
Olbert 10	poor or interior		NAME OF OFFICEHOLDER, CAI	IDIDATE, OR PR	ROPONENT	
Related Committees Not included in this St not included in this statement that are controlled by you contributions or make expenditures on behalf of your ca	or are primarily formed to receive		OFFICE SOUGHT OR HELD	. — .	DISTRICT N	O. IF ANY
COMMITTEE NAME	I.D. NUMBER				1	
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Can officeholder(s) or candidate(s	didate/Offic) for which thi	eholder Committee s committee is primarily fo	List names of urmed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. E			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEL	SUPPORT OPPOSE
CITY STATE ZIP	CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEL	D SUPPORT
COMMITTEENAME	I.D. NUMBER					
			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEL	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEL	D SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. E	30X)					
CITY STATE ZIP	CODE AREA CODE/PHONE		Atta	ch continuatio	on sheets if necessary	

Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period from 2/20/11 CALIFORNIA 460 FORM 460 through 3/19/11 Page 3 of 8

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

I.D. NUMBER

DAN CABRERA FOR GUSD BOARD 1336597 Column A Column B Calendar Year Summary for Candidates Contributions Received TOTALTHIS PERIOD CALENDAR YEAR TOTAL TO DATE Running in Both the State Primary and (FROMATTACHED SCHEDULES) **General Elections** 1. Monetary Contributions Schedule A. Line 3 1/1 through 6/30 7/1 to Date 20. Contributions 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 Received 4. Nonmonetary Contributions Schedule C, Line 3 21. Expenditures 2800 Made **Expenditures Made Expenditure Limit Summary for State** Candidates 22. Cumulative Expenditures Made* 2918 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 (if Subject to Voluntary Expenditure Limit) Date of Election Total to Date 10. Nonmonetary Adjustment Schedule C, Line 3 (mm/dd/yy) 2918 **Current Cash Statement** 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ To calculate Column B. add 7**000** amounts in Column A to the corresponding amounts 14. Miscellaneous Increases to Cash Schedule I, Line 4 *Amounts in this section may be different from amounts from Column B of your last reported in Column B. 2918 report. Some amounts in Column A may be negative 903 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ figures that should be subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed 17. LOAN GUARANTEES RECEIVED Schedule 8, Part 2 \$ for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ FPPC Form 480 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A	
Monetary Contributions	Received

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period

460 **FORM** through 3)19/11 SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER DAN CABRERA FOR GUSD BOARD 1336597 AMOUNT FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR IF AN INDIVIDUAL, ENTER **CUMULATIVE TO DATE** PER ELECTION DATE CONTRIBUTOR **RECEIVED THIS** (IF COMMITTEE, ALSO ENTER I.D. NUMBER) OCCUPATION AND EMPLOYER CALENDAR YEAR TODATE RECEIVED CODE * (IF SELF-EMPLOYED, ENTERNAME PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) Helena Seltzer ZIND □сом 2/24/11 □отн retired 50 50 □ PTY Glendale CA 91207 □scc J.L. Semeran (Janueline) KIND ⊟сом 1/17/11 Потн 100 retired 100 □ PTY Pasadeva CA 91104 SCC **M**IND Isabelle Meyer 2/27/11 □сом 100 100 Потн retired PTY Glendale CA 91206 □scc Greg Grammer Asst to City Mar Псом וומןג 1201114 Hills, CA □отн 250 250 □ PTY Glendale CA 91707 □scc John Braich, Jr. MIND □сом 7/28/11 200 retired 200 ПОТН □ PTY GLEDANE CA UTLOO □scc 700 SUBTOTAL \$

Schedule A Summary

3. Total monetary contributions received this period.

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) TOTAL \$ 2800

*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

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

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.

SCHEDULE A (CONT.)

Monetar	y Contributions Received	Amounts may be rounded state to whole dollars. from			FORNIA 460
AME OF FILER	₹			I.D. NU	MBER
DAN	CABRERA FOR GUSD BOARD			13	36597
DATE	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRI	BUTOR CONTRIBUTOR IF AN INDIVIDUAL, ENTER	AMOUNT (CUMULATIVE TO DATE	PER ELECTION

A 1/1	WALLERY LAIR AND DAVEN		· · · · · · · · · · · · · · · · · · ·		· · · · · ·	77471
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 DAT CALENDAR YEAR (JAN, 1 - DEC. 31)	E PER ELECTION TO DATE (IF REQUIRED)
3)1/11	Carole Dougnersy Eleudate CA 91206	COM COM OTH PTY SCC	Housewife	700	200	
थीया	Gilbert Rodgers Gloudale LA 91207-1213	DOIND COM OTH PTY SCC	retired	50	50	
3 8/11	Stephen Wong Glaudale CA 91207-1295	☐IND ☐COM ☐OTH ☐PTY ☐SCC	retired	100	100	
3)11)11	Leta Hissins 6) sustate CA 141707	ZHIND COM OTH PTY SCC	Ame	250	250	
3/10/11	Glenn Webb & Lyn Foster Gloudale CA 91207	DOM COM OTH PTY SCC	refired	100	100	
			SUBTOTAL\$	700		

*Contributor Codes

IND-Individual

NAME OF FILER

COM – Recipient Committee (other than PTY or SCC) OTH – Other (e.g., business entity) PTY – Political Party

SCC - Small Contributor Committee

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

Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

		to whole t	ioliars.	from 2/2	<u> </u>		RM 460
				through_3/)	7/11	Page	6 of 8
DAN C	ABRERA FOR GUSD BOARD					1.0. NUM	6597
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.O. 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)
अधी।	Gerri Craenolfi Gloridale CA a 1701	COM COM OTH PTY SCC	640 Propordies Principal	200	200		
3/16/11	Daniel Cabrera (candidate) Gleudale' Cts 91207	☑IND □COM □OTH □PTY □SCC	rethred	1200	3100		
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					
			SUBTOTAL	1400		, .	

*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

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

Schedule E Payments Made

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period from 2/20/20/1 CALIFORNIA 460

through 3/29/20/1 Page 7 of 8

I.D. NUMBER

1336597

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

DAN CABRERA FOR GUSD BOARD

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

<u> </u>	7.119 07.12 17.11				1,,,,,,,
COI MP KNS KTB KVC IL ND VD	DES: If one of the following codes accurately described campaign paraphemalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)*	MBR MTG OFC PET PHO POL POS	member communications meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger services	RAD RFD SAL TEL TRC TRS TSF	lescribe the payment. radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor
EG IT	legal defense campaign literature and mailings	PRO PRT	professional services (legal, accounting) print ads	VOT WEB	voter registration 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
Incarnation School Floudale CA 91202	MTG	Room Reutal	50
Jeff Blyth, Mei Guanki, Inc Glendale CA 91206-1728	P90	FILMING FORWEBSITE	200
Minuteman Preci Gleudake CA 91704	LIT	SIGNS, CARPS	257

Schedule E Summary			Ξ
1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$	2918	
2. Unitemized payments made this period of under \$100			
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)			
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	_ \$	2918	

SUBTOTALS 507

Schedule E
(Continuation Sheet)
Payments Made

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

SCHEDULE E (CONT.)

Statement covers period **CALIFORNIA FORM** Page. I.D. NUMBER 1336957

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

DAN CABRERA FOR GUSD BOARD

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

CMP campaign paraphemalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations

candidate filing/ballot fees FIL FND fundraising events ND independent expenditure supporting/opposing others (explain)*

LEG legal defense

campaign literature and mailings Ш

MBR member communications

MTG meetings and appearances OFC office expenses PET petition circulating

PHO phone banks POL

polling and survey research postage, delivery and messenger services professional services (legal, accounting)

PRT print ads RAD radio airtime and production costs

returned contributions SAL campaign workers' salaries

t.v. or cable airtime and production costs TEL TRC candidate travel, lodging, and meals

staff/spouse travel, lodging, and meals TSF

transfer between committees of the same candidate/sponsor voter registration

VOT

WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Glandale News Press CA TIMES Glandale CA 91203	PRT Newspaper Rd	756
Minuteman Press (see above; Socials)	L15 L15	330 1200
Political Data, Inc. Burbank CA 91502	POL	125