Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

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Date Stamp

CITY CLERK

2011 FEB 25 AM 10: 34

CALIFORNIA FORM **460**

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For Official Use Only

Statement covers period	Date of election if applicable: (Month, Day, Year)
from __01/01/2011__	
through __02/19/2011__	April 5, 2011

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 Ballot Measure Committee
  - ○ Controlled
  - ○ Sponsored
  - *(Also Complete Part 6)*
- ☐ Primarily Formed Candidate/Officeholder Committee
  - *(Also Complete Part 7)*

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

I.D. NUMBER
1336390

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Vahe Peroomian for GCC Board 2011

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Glendale	CA	91206	

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER
Vahe Peroomian

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Glendale	CA	91206	

NAME OF ASSISTANT TREASURER, IF ANY

MAILING 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 __2/23/11__ Date   By ____ Signature of Treasurer or Assistant Treasurer

Executed on __2/2/3/11__ Date   By ____ 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

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

**Recipient Committee
Campaign Statement
Cover Page — Part 2**

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Vahe Peroomian

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

Glendale Community College Board of Trustees Member

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP
███████████████	Glendale	CA	91206

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? ☐ YES ☐ 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? ☐ YES ☐ 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	
		☐ SUPPORT ☐ OPPOSE
		☐ SUPPORT ☐ OPPOSE
		☐ SUPPORT ☐ OPPOSE
		☐ SUPPORT ☐ 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

Statement covers period	CALIFORNIA FORM **460**
from **01/01/2011**	
through **02/19/2011**	Page **3** of **5**

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NAME OF FILER

I.D. NUMBER
1336390

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	$ 2,450.00	$ 2,450.00
2. Loans Received	Schedule B, Line 3	210.02	210.02
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	$ 2,660.02	$ 2,660.02
4. Nonmonetary Contributions	Schedule C, Line 3	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	$ 2,660.02	$ 2,660.02

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

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

Expenditures Made

6. Payments Made	Schedule E, Line 4	$ none	$ none
7. Loans Made	Schedule H, Line 3	none	none
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	$ none	$ none
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	none	none
10. Nonmonetary Adjustment	Schedule C, Line 3	none	none
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	$ none	$ none

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
___/___/___	$
___/___/___	$

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	$ 0
13. Cash Receipts	Column A, Line 3 above	2,660.02
14. Miscellaneous Increases to Cash	Schedule I, Line 4	0
15. Cash Payments	Column A, Line 8 above	0
16. **ENDING CASH BALANCE**	Add Lines 12 + 13 + 14, then subtract Line 15	$ 2,660.02

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

17. LOAN GUARANTEES RECEIVED	Schedule B, Part 2	$ 0

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).

*Amounts in this section may be different from amounts reported in Column B.

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	$ 0
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	$ 210.02

Schedule A
Monetary Contributions Received

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

Statement covers period	CALIFORNIA FORM **460**
from 01/01/2011	SCHEDULE A
through 02/19/2011	Page 4 of 5

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NAME OF FILER

I.D. NUMBER: 1336390

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)
2/7/2011	Neshan Peroomian Glendale CA 91206	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Contractor T.L.D. Constrcution, Inc.	1000.00	1000.00	1000.00
2/14/2011	Carolyn Karapetian London, England	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Businesswoman CarolynK Makeup Ltd.	700.00	700.00	700.00
2/15/2011	Ralph & Savey Tufenkian Glendale CA 91208	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	250.00	250.00	250.00
2/15/2011	Hacob & Mina Shirvanian Glendale CA 91207	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	250.00	250.00	250.00
2/17/2011	Vahak Petrossian Glendale CA 91206	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	250.00	250.00	250.00

SUBTOTAL $ 2,450.00

Schedule A Summary

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) .... $ 2,450.00

2. Amount received this period – unitemized monetary contributions of less than $100 .... $ 0

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .... TOTAL $ 2,450.00

*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 B – Part 1
Loans Received

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

Statement covers period		CALIFORNIA FORM **460**
from	01/01/2011	
through	02/19/2011	Page __5__ of __5__

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NAME OF FILER

I.D. NUMBER

1336390

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Vahe Peroomian Glendale CA 91206 †☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Research Scientist, UCLA	$____ 0	$____ 210.02	☐ PAID $____ ☐ FORGIVEN $____	$____ 210.02 4/5/2011 DATE DUE	____% RATE $____	$____ DATE INCURRED	CALENDAR YEAR $____ 210.02 PER ELECTION** $____
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$____	$____	☐ PAID $____ ☐ FORGIVEN $____	$____ DATE DUE	____% RATE $____	$____ DATE INCURRED	CALENDAR YEAR $____ PER ELECTION** $____
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$____	$____	☐ PAID $____ ☐ FORGIVEN $____	$____ DATE DUE	____% RATE $____	$____ DATE INCURRED	CALENDAR YEAR $____ PER ELECTION** $____

SUBTOTALS $ 210.02 $ 0 $ 210.02 $

Schedule B Summary

(Enter (e) on Schedule E, Line 3)

1. Loans received this period .... $ ____ 210.02
(Total Column (b) plus unitemized loans of less than $100.)

2. Loans paid or forgiven this period .... $ ____ 0.
(Total Column (c) plus loans under $100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (**Subtract** Line 2 from Line 1.) .... NET $ ____ 210.02
Enter the net here and on the Summary Page, Column A, Line 2.
(May be a negative number)

†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

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.