Recipient Committee Campaign Statement Cover Page	Type or print in		CITON CEME		CALIFORNIA 460
(Government Code Sections 84200-84216.5). SEE INSTRUCTIONS ON REVERSE	Statement covers period from 2/17/2013 through 3/16/2013	Date of election if applicable: (Month, Day, Year)	DI3MAR 21 PM	4: 28	For Official Use Only
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	iplete Parts 1, 2, 3, and 4. imarily Formed Ballot Measure immittee Controlled Sponsored so Complete Part 6) imarily Formed Candidate/ ficeholder Committee. so Complete Part 7)	2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Till Amendment (Explain b	ermination)	 ☐ Specia ☐ Supple	erly Statement il Odd-Year Report emental Preelection ent - Altach Form 495
3 Committee Information		Treasurer(s) NAME OF TREASURER ROSAILYN BUTAILA MAILING ADDRESS CITY Glendale NAME OF ASSISTANT TREASUR MAILING ADDRESS	STATE CA RER, IF ANY	zip coi 91202	
OPTIONAL: FAX / E-MAIL ADDRESS	DE AREA CODE/PHONE	OPTIONAL: FAX / E-MAIL ADDR	STATE	ZIP-COI	DE AREA CODE/PHONE
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 3/2//3 Executed on Date Executed on Date	that the foregoing is true and correct. By Signature of Con	Wiedge the information contained he Signature of Treasurer or Assistant trolling Officerolder, Candidate, State Measure Press, Signature of Controlling Officeholder, Candidate, Signature of Contro	Treasurer pponent or Responsible Officer tale Measure Proponent		es is true and complete: I certify

COVER PAGE - PART					
CALIFORNIA FORM	460				
Page	of				

NAME OF OFFICEHOLDER OR CANDID	ATE	¹ NAI	ME OF BALLOT MEASURE				
Rick Barnes for Glendale City	/ Council 2013						
	OCATION AND DISTRICT NUMBER IF APPLICABLE)	BA	LLOT NO. OR LETTER	JURISDICT	ION		SUPPORT
City Council for Glendale, CA	¥						OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (N	IO. AND STREET) CITY STATE ZIP		entify the controlling of	fficebolder es	ndidata av et	afa maasura	proposant if an
	Glendale CA 91202		ME OF OFFICEHOLDER, CA			ate measure	proponess, near
			•				
	cluded in this Statement: List any committees are controlled by you or are primarily formed to receive on behalf of your candidacy.	OF	FICE SOUGHT OR HELD			DISTRICT NO.	IF ANY
COMMITTEE NAME	I.D. NUMBER	_					
COMMITTEE NAME	I.D. NUMBER	_			<u></u>		
COMMITTEE NAME	I.D. NUMBER CONTROLLED COMMITTEE?		imarily Formed Car				
		off.	iceholder(s) or candidate	(s) for which th	ls committee is	primarily form	
NAME OF TREASURER	CONTROLLED COMMITTEE?	off.		(s) for which th	ls committee is		ned.
NAME OF TREASURER. COMMITTEE ADDRESS STREET	CONTROLLED COMMITTEE?	off. NAI	iceholder(s) or candidate	(s) for which the	ls committee is	primarily form	SUPPORT SUPPORT
NAME OF TREASURER. COMMITTEE ADDRESS STREET CITY	CONTROLLED COMMITTEE? YES NO TADDRESS (NO P.O. BOX)	NAI NAI	iceholder(s) or candidate(ME OF OFFICEHOLDER OR ME OF OFFICEHOLDER OR	(s) for which the Candidate	OFFICE SOUR	Primarily form	SUPPORT OPPOSE
NAME OF TREASURER. COMMITTEE ADDRESS STREET CITY	CONTROLLED COMMITTEE? YES NO TADDRESS (NO P.O. BOX) STATE ZIP CODE AREA CODE/PHONE	NAI NAI	iceholder(s) or candidate((s) for which the Candidate	OFFICE SOUR	primarily form	SUPPORT OPPOSE
VAME OF TREASURER	CONTROLLED COMMITTEE? YES NO TADDRESS (NO P.O. BOX) STATE ZIP CODE AREA CODE/PHONE	NAI NAI NAI	iceholder(s) or candidate(ME OF OFFICEHOLDER OR ME OF OFFICEHOLDER OR	(s) for which the CANDIDATE CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUC	Primarily form SHT OR HELD SHT OR HELD SHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET COMMITTEE ADDRESS STREET COMMITTEE NAME COMMITTEE NAME	CONTROLLED COMMITTEE? YES NO TADDRESS (NO P.O. BOX) STATE ZIP CODE AREA CODE/PHONE LD. NUMBER	NAI NAI NAI	ME OF OFFICEHOLDER OR ME OF OFFICEHOLDER OR	(s) for which the CANDIDATE CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUC	Primarily form	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT

Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

	COMMINITATION
Statement covers period 2/17/13	CALIFORNIA 460
from	FORIVI
through 3/16/13	Page of
	I.D. NUMBER
	4054076

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

SHAMADY DAGE

SEE INSTRUCTIONS ON REVERSE NAME OF FILER RICK BARNES FOR GLENDALE CITY COUNCIL 2013 1354876 Calendar Year Summary for Candidates Column A Column B Contributions Received TOTAL THIS PERIOD
(FROMATTACHED SCHEDULES) CALENDAR YEAR TOTAL TO DATE Running in Both the State Primary and General Elections 5881.00 3805.00 1/1 through 6/30 7/1 to Date 00.00 3100.00 20. Contributions 3805.00 8981.00 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ Received 625.00 625.00 21. Expenditures 4430.00 9606.00 Made Expenditures Made **Expenditure Limit Summary for State** 8106.48 Candidates 00.00 22. Cumulative Expenditures Made* 8. SUBTOTAL CASH PAYMENTS ______ Add Lines 6+7 \$ 8106.48 (If Subject to Voluntary Expenditure Limit) 00.00 9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3 Date of Election Total to Date 00.00 (mm/dd/yy) 8106.48 **Current Cash Statement** 4132.11 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ To calculate Column B, add 4430.00 amounts in Column A to the 13. Cash Receipts Column A, Line 3 above corresponding amounts *Amounts in this section may be different from amounts 00.00 14. Miscellaneous Increases to Cash Schedule I, Line 4 from Column B of your last reported in Column B. report. Some amounts in 8106.97 Column A may be negative 455.14 figures that should be 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15. \$ subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed 00.00 for this calendar year, only 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ ___ carry over the amounts from Lines 2, 7, and 9 (If Cash Equivalents and Outstanding Debts any). FPPC Form 460 (January/06)

Schedule A **Monetary Contributions Received**

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

SCHEDULE A Statement covers period

tement covers period	CALIFORNIA /	ē
2/17/2013.	FORM	

from _ 3/16/2013 through SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Rick Barnes

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 (IFSELF-EMPLOYED, ENTER NAME OFBUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/22/13	Gevork Khechumyan Glendale, CA 91205	ØIND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Self-Employed	250.00	250.00	250.00
2/19/13	Gary Stewart Glendale, CA 91292	☑IND □COM □OTH □PTY □SCC	Executive SBR Roofing	1000.00	1000.00	1000.00
2/21/13	Peter Chorebanian Glendale, CA 91202	☑IND □COM □OTH □PTY □SCC	Realtor American Realty Center	100.00	100.00	100.00
2/19/13	Nooshin Zarrabi Glendale, CA 91207	☑IND □COM □OTH □PTY □SCC	Realtor Optima ReMax	100.00	100.00	100.00
2/22/13	Robert Bowers La Canada, CA 91011	☑IND □COM □OTH □PTY □SCC	Retired	100.00	100.00	100.00
			SUBTOTALS	1550.00 /		

Schedule A Summary 1. Amount received this period - itemized monetary contributions.

6250.00 (include all Schedule A subtotals.)\$ 522,00 2. Amount received this period – unitemized monetary contributions of less than \$100\$

3. Total monetary contributions received this period. 6772.00

*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

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

SCHEDULE A (CONT,)
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CALIFORNIA 4 A

Statement covers period

		to whole d	ioliars.	from2/17/	/2013	FC	ORM 460
				through 3/10	6/2013	Page_	of
NAME OF FILER			<u>'-</u>			I,D. NUI	MBER
Rick Barne	es						
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)
2/22/13	Donald Hildreth Trust Glendale, CA 91207	□IND □COM ØOTH □PTY □SCC		100.00	100,	.00	100.00
2/22/13	Montrose CA 9/020	□ IND □ COM □ OTH □ PTY □ SCC	Investment-Realtor Self Employed Acquire Assoc Realty	100.00	100.	.00	100.00
2/22/13	Glen Forsch Burbank, CA 91504	ØIND COM OTH PTY SCC	Real Estate Investor/Manager Self Emplyed	100.00	100.	.00	100.00
2/25/13	Marion Mandeson Glendale, CA 91203	☑IND □COM □OTH □PTY □SCC	Community Volunteer	100.00	100.	.00	100.00
2/25/13	Allen Brandstater Glendate, CA 91208	☑IND □COM □PTY □SCC	Writer Self Employed	250.00	250.	.00	250.00
			SURTOTAL	¢ 650.00		•	

*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 A (Continuation Sheet) Monetary Contributions Received

Type or print in ink. Amounts may be rounded

SCHEDU	ILE A	(CON	T.)

Monetary Contributions Received		Amounts may to whole o		Statement covers period 2/17/2013		FORM 460	
NAME OF FILER Rick Barne	25			through		Page	DER
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	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
2/25/13	Patrick J. Wade Glendale, CA 91205	ZIND COM OTH PTY SCC	Realtor Phoenix Professional Corp.	250.00	250.	00	250.00
2/25/13	Diane Dixon Glendale, CA 91202	ZIND COM OTH PTY SCC	Petirel	100.00	100.	00	100.00
2/27/13	Arch Hardyment Glendale, CA 91208	ZIND COM OTH PTY SCC	Retired	100.00	100.	00	100.00
3/1/13	John Jolly Glendale, CA 91207	ZIND COM OTH PTY SCC	Retirlet	100.00	100.	00	100.00
3/1/13	Thoralf Sandaker Glendale, GA 91202	☑IND □COM □OTH □PTY □SCC	requested	100.00	100.	00	100.00
			SUBTOTAL\$	650.00	100		

*Contributor Codes

IND -- Individual

COM-Recipient Committee

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

SCC - Small Contributor Committee

Schedule A (Continuation Sheet)

Type or print in ink.

SCHEDULE A (CONT.	

wonetary Contributions Received		to whole o					ORNIA 460
				through 3/1	6/2013	Page	of
NAME OF FILER Rick Barne	98					1.D. NUM 13548	
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 ((JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
2/19/12	Susan Cahill Glendale, CA 91202	IND COM OTH PTY SCC	Retired	1000.00	1000	.00	1000.00
		□IND □COM □OTH □PTY □SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		□IND □COM □OTH □PTY □SCC					
			SUBTOTAL	\$ 1000.00			

*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

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

Outrate to De Daniel	7	Type or print in	ink.	_		SCHEDULE B - PART					
Schedule B – Part 1 Loans Received		ounts may be ro to whole dollar	ounded		Statement cov from2/17	ers period //2013	CALIFORN FORM	^{IA} 460			
BEE INSTRUCTIONS ON REVERSE					through3/1	6/2013	Page	of			
NAME OF FILER				•		·	I.D. NUMBER				
Rick Barnes							1354876				
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (#COMMITTEE, ALSO ENTER LD. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER OF SELFEMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAIL OR FORGIVE THIS PERIOR	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	CUMULATIVE CONTRIBUTION TO DATE			
				PAID	, , , , , , , , , , , , , , , , , , , ,			CALENDAR YEAR			
				\$	_ s		\$	\$			
				FORGIVEN		RATE		PER ELECTION [®]			
TO IND COM COTH PTY SCC		\$:	s	· \$	DATEDUE	s	DATE INCURRED	\$			
				PAID				CALENDAR YEAR			
				s	_ •		•				
			ļ	FORGIVEN		RATE	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	PERELECTION			
[†] □ IND □ СОМ □ ОТН □ РТҮ □ SCC		\$	\$	\$	DATEDUE	s	DATE INCURRED	\$			
- IND I COM I OIN I PIT I SCC		 			DATEDUE		DATE INCORRED				
				☐ PAID				CALENDAR YEAR			
				\$FORGIVEN	- \$	RATE %	\$	\$PERELECTION			
								LINECTORON			
[†] □ IND □ COM □ OTH □ PTY □ SCC		s	\$	is	DATE DUE	 *	DATE INCURRED	\$			
		SUBTOTALS \$	0.00	0.00	0.00	\$ 0.0	0				
Schedule B Summary						(Enler (e) on Schedule E, Une 3	!				
•				•	0.00	CONTRACT CALCULATION CO.	<i>'</i>				
Loans received this period (Total Column (b) plus unitemized loans	of less than \$100.)	· • • • • • • • • • • • • • • • • • • •	*****************	Ф'	7.00	· .	Contributor Codes				
F	•			4.	0.00	1	r Contributor Codes IND⊶Individual				
 Loans paid or forgiven this period	naid or forelyon	1,12,14,1,14,1,2,2,2,2,2,2,2,2,2,2,2,2,2	*****************	\$	0.00	1	COM - Recipient Co				
Linear colours (c) bing rough attent \$100	Paid of forgivers)						(other than	PTY or SCC)			

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

Enter the net here and on the Summary Page, Column A, Line 2.

(Include loans paid by a third party that are also itemized on Schedule A.)

(May be a negative number)

PTY-Political Party

OTH - Other (e.g., business entity)

SCC - Small Contributor Committee

Type or print in link, Amounts may be rounded to whole dollars. SCHEDULE B-PART 2
Statement covers period CALIFORNIA 160

2/17/2013 **FORM** from 3/16/2013 through Page ___ _ of. SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Rick Barnes 1354876 IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND AMOUNT BALANCE CONTRIBUTOR CUMULATIVE ZIP CODE OF GUARANTOR (IFCOMMITTEE, ALSO ENTER I.D. NUMBER) OCCUPATION AND EMPLOYER LOAN GUARANTEED OUTSTANDING. CODE (IFSELF-EMPLOYED, ENTER: TO DATE THIS PERIOD TODATE NAME OF BUSINESS) CALENDARYEAR LENDER **□IND** □COM **□отн** PER ELECTION DATE (IF REQUIRED) □ PTY □scc CALENDAR YEAR IND. LENDER □ COM PER ELECTION Потн DATE (IF REQUIRED) □ PTY □scc. CALENDAR YEAR LENDER □сом PER ELECTION Потн (IF REQUIRED) DATE □PTY □scc CALENDAR YEAR LENDER **□СОМ** PER ELECTION (IF REQUIRED) **□**OTH DATE □ PTY □scc Enteron Summary Page; Line 17 only. 0.00 SUBTOTAL \$

Schedule C Nonmonetary Contributions Received

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

RICK BARNES FOR GLENDALE CITY COUNCIL 2013

13:

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	IF AN INDIVIOUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER , NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
3/14/13	Chevy Chase Investment Group Glendale, CA 91206	☐IND IZICOM ☐OTH ☐PTY ☐SCC		Newspaper Print Ad	625,00	625.00	4/2/13
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					
Attach add	ditional information on appropriately label	ed continuati	on sheets.	SUBTOTAL \$			
							

Schedule C Summary

1. Amount received this period – nonmonetary contributions of \$100 or more.

(Include all Schedule C subtotals.) 625.00

*Contributor Codes
IND – individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other
PTY – Political Party
SCC – Small Contributor Committee

SCC-Small Contributor Comm

Supporting Candidate	of Expenditures ng/Opposing Other es, Measures and Committees	Type or print î Amounts may be to whole doll	rounded	Statement covers period from 2/17/2013 through 3/16/2013		CALIFO FOR Page	of
Rick Barne						1.D. NUMI 135487	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVA CALENDA (JAN. 1 - 0	R YEAR	PER ELECTION TO DATE (IF REQUIRED)
	Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure:					
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
			SUBTOTAL	\$ 0.00			
	D Summary contributions and independent expenditures made	this period. (Include a	all Schedule D subtotals.)			\$_	0.00
2. Unitemize	d contributions and independent expenditures ma	ide this period of unde	er \$100	********************		\$	0.00
3. Total contr	ributions and independent expenditures made this	s period. (Add Lines 1	and 2. Do not enter on the	Summary Page.)	TO	TAL \$_	0:00

Summary Supportin	D tion Sheet) of Expenditures g/Opposing Other es, Measures and Committees	Type or print Amounts may be to whole dol	rounded	Statement covers period from 2/17/2013 through 3/16/2013		CALIFORNIA 460	
AME OF FILER				unough	·	Page	of
Rick Barnes	S					135487	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIV CALENDA (JAN, 1-1	R YEAR	PER ELECTION TO DATE (IF REQUIRED)
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
			SUBTOTAL	\$ 0.00			

Schedule E Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.			State	ement covers period 2/17/13	CALIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE				throug	nh3/16/13	Page of		
RICK BARNES FOR GLENDALE CITY COUNCIL 2013						1.D. NUMBER 1354876		
CODES: If one of the following codes accurately describes CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FiL candidate filing/ballot fees FND fundralsing events IND Independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member con MTG meetings ar OFC office experiments PET petition circles Photopoliting and POS postage, de	MBR member communications meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting)			cribe the payment. Idio airlime and production Idiumed contributions Idiumed contributions Idiumed contributions Idiumed contributions Idiumed contributions Idiumed contributions Idiumed contribution Idiumed con	uction costs I meals and meals I of the same candidate/s	; eals s same candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE	OR DES	SCRIPTION O	F PAYMENT	AMOUNT	PAID	
POLITICAL DATA INC NORWALK, CA 90652		POL	VOTER LISTS			29:	20.19	
SHEILA MCNICHOLS		OFC	REIMBURSEME	ENTS		9:	76.89	

SHEILA MCNICHOLS GLENDORA, CA 91741	OFC	REIMBURSEMENTS	976.89				
MICHAEL BAKER LOS ANGELES, CA 90006	SAL		100.00				
* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL\$							
Schedule E Summary	111						
1. Itemized payments made this period. (Include all Schedule E subtotals.)	********************	\$	7929.48				
2. Unitemized payments made this period of under \$100		177.00					
3. Total interest paid this period on loans. (Enter amount from Schedule B,	Part 1, Column	(e).)\$	0				
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and			8106.48				

Schedule E

SCHEDULE E (CONT.)

Type or print in ink. Statement covers period (Continuation Sheet) **CALIFORNIA** Amounts may be rounded to whole dollars. **FORM Payments Made** 2/17/13 from. 3/16/13 through Page. of. SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER RICK BARNES FOR GLENDALE CITY COUNCIL 2013 1354876 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* office expenses OFC SAL campaign workers' salaries CVC civic donations petition circulating PET TEL t.v. or cable airtime and production costs candidate filing/ballot fees FIL PHO phone banks candidate travel, lodging, and meals TRC fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* IND POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor legal defense. professional services (legal, accounting) PRO voter registration VOT LIT campaign literature and mailings print ads information technology costs (internet, e-mail) PRT NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD, NUMBER) CODE OR: DESCRIPTION OF PAYMENT AMOUNT PAID MOISES VASQUEZ SAL 100.00 LOS ANGELES, CA 90006 JONATHAN ALVARADO SAL 850.00 LOS ANGELES, CA 90006 AA 1 GRAPHICS YARD SIGNS LIT 1482.40 GLENDALE, CA 91202 SHEILA MONICHOLS CNS 1500.00 GLENDORA, CA 91741 * Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule F Accrued Expenses (Unpaid Bills)		Type or print in ink. Amounts may be rounded to whole dollars.			CALIFORNIA 460			
SEE INSTRUCTIONS ON REVERSE			through3/16	6/2013	Page	of		
NAME OF FILER			h . <u></u>		I.D. NUMBER	· ·		
Rick Barnes					1354876			
CODES: If one of the following codes accurately describe	es the payment, you may	enter the code. O	therwise, describe t	he payment.				
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 campaign literature and mailings	MTG meetings and appeara OFC office expenses PET petition circulating PHO phone banks POL polling and survey res POS postage, delivery and	OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting)			RAD radio airlime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airlime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/spons VOT voter registration WEB information technology costs (internet, e-mail)			
NAME AND ADDRESS OF CREDITOR: (IF COMMITTEE, ALSO ENTER LD: NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(8) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT F THIS PER (ALSO REPORT	IOD: BALA	(d) TSTANDING NCE AT CLOSE THIS PERIOD		
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$	\$	\$	\$			
Schedule F Summary 1. Total accrued expenses incurred this period. (Include all Saccrued expenses of \$100 or more, plus total unitemized a			INCU	IRRED TOTA	ALS \$			
2. Total accrued expenses paid this period. (Include all Sche accrued expenses of \$100 or more, plus total unitemized)	edule F, Column (c) subto	tals for payments or	1					
3. Net change this period. (Subtract Line 2 from Line 1. Enton the Summary Page, Column A, Line 9.)				1	NET \$	native gumber		

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)	Type or print in ink. Amounts may be round to whole dollars.	3/1	ers period /2013	SCHEDULE F (CONT. CALIFORNIA 460 FORM	
NAME OF FILER			through	0/2010	Page of
Rick Barnes					1354876
CODES: if one of the following codes accurately described. CMP campaign paraphernalis/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations Fit candidate filing/ballot fees FND fundraising events Independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings * Payments that are contributions or independent expenditures must a	MBR member communication MTG meetings and appears OFC office expenses PET pelition circulating PHO phone banks POL polling and survey res POS postage, delivery and PRO professional services PRT print ads	ns inces search messenger services (legal, accounting)	RAD radio airtime a RFD returned conti SAL campaign woi TEL t.v. or cable ai TRC candidate trav TRS staff/spouse in TSF transfer betwee VOT	and production con ributions ricers' salaries irtime and production, lodging, and managed ravel, lodging, and managed committees of	lion costs leals I meals I the same candidate/sponsor
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	GODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PA THIS PERIO (ALSO REPORT C	D BALANCE AT CLOSE

SUBTOTALS \$

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)	Type or print in ink. Amounts may be rounded to whole dollars.				Statement covers period CALIFORNIA 46			
SEE INSTRUCTIONS ON REVERSE NAME OF FILER RIck Barnes		<u> </u>		thr	ough	3/16/2013	Page	
NAME OF AGENT OR INDEPENDENT CONTRACTOR			·				1004076	
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations Fil. candidate filling/ballot fees FND fundrelising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings * Payments that are contributions or independent expenditures must also	MBR member of meetings a office expression petition circ phone ban polling and postage, deprocession print ads	ommunication and appears enses culating ks i survey res celivery and al services	ns ances search messenger service (legal, accounting)	RAD RFD SAL TEL TRC TRS	radio a returne campa t.v. or candid staff/sp transfe voter r	cribe the payment artime and production and contributions along workers' salaries cable airtime and production at travel, lodging, an ocuse travel, lodging, or between committee egistration atton technology costs	duction costs d meals and meals s of the same	
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE	OR	DESCRIPTIO	N OF PAY	/MENT		AMOUNT PAID

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

				SCHEDUL					
Schedule H Loans Made to Others*		Amounts n	print in ink. say be rounded le dollers.	rounded 2/17/2013			CALIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE					through 3/1	6/2013	Page	of	
NAME OF FILER							I.D. NUMBER		
Rick Barnes							1354876		
FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (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	(%) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT (FORGIVENES THIS PERIOR	S CLOSE OF THIS	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE	
				☐ PAID				CALENDAR YEAR	
				s	_		s	s	
				FORGIVEN		,		PER ELECTION**	
		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$	
				☐ PAID				CALENDAR YEAR	
				\$	\$	RATE %	\$	\$PERELECTION ^{int}	
		s	ş	s	DATE DUE	s	DATE INCURRED	\$	
*Loans that are contributions to another candid must also be summarized on Schedule D. Loan also be reported on Schedule E.	ate or committee s forgiven must	SUBTOTALS	\$	\$	\$	\$			
						(Enler (e) on Schedule I, Lins 3)			
Schedule H Summary									
Loans made this period (Total Column (b) plus unitemized loans	of less than \$100.)	12**********	*****************	*****************	\$			**If Required	
Payments received on loans (Total Column (c) plus unitemized paym	ents of less than \$100.)	*****************************	*****************	******************	\$		_		
Net change this period. (Subtract Line (Enter the net here and on the Summar	2 from Line 1.)y Page, Column A, Line 7.)		********************	******************	NET \$	be a negative number)		

Schedule I Miscellaneous Increases to Cash SEE INSTRUCTIONS ON REVERSE NAME OF FILER		Amounts	r print in ink. may be rounded ole dollars.	Statement covers period 2/17/2013 from 3/16/2013	CALIFORNIA 460 FORM of
Rick Barnes					I.D. NUMBER 1354876
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER LD, NUMBER)		DES	SCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
		:			
		Tracing property and the second secon			
Attach additional inform	nation on appropriately labeled continuation sheets.			SUBTOTAL	\$
Schedule i Summa	· •				
	o cash this period				, -
	s to cash of under \$100 this period				
	ecelved this period on loans made to others. (Sche			\$	-
 Total miscellaneous Summary Page, Line 	increases to cash this period. (Add Lines 1, 2, are 14.)	nd 3. Enter he	re and on the	TOTAL \$	_