

# Supplemental Independent Expenditure Report

(Government Code Sections 84203.5)  
SEE INSTRUCTIONS ON REVERSE

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

Amendment No \_\_\_\_\_  
Report No 001

Amendment (Explain Below)

Report covers period  
from 02/21/2013  
through 03/23/2013  
Date of election if applicable:  
(Month, Day, Year)  
04/09/2013

Date Stamp  
CLERK 13MAR29AM 9:40

CALIFORNIA 1994 FORM **465**

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For Official Use Only

## 1. Committee/Filer Information

I.D. NUMBER (if recipient committee)  
1355585

## Treasurer (If recipient committee)

### NAME OF FILER

Burbank Residents Opposed to Jess Talamantes Slashing Public Safety, A Committee to Oppose Jess Talamantes for Council 2013, Sponsored by Burbank Residents and United John Grant

### NAME OF TREASURER

John Grant

### STREET ADDRESS (NO P.O. BOX)

777 S. Figueroa St., #4050

### MAILING ADDRESS

777 S. Figueroa St., #4050

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Los Angeles</u>	<u>CA</u>	<u>90017-0000</u>	<u>2134526565</u>

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Los Angeles</u>	<u>CA</u>	<u>90017-0000</u>	<u>213-452-6565</u>

OPTIONAL: FAX/E-MAIL ADDRESS  
2134526575

OPTIONAL: FAX/E-MAIL ADDRESS

## 2. Name of Candidate or Measure Supported or Opposed

CHECK ONE

NAME OF CANDIDATE  
Jess Talamantes

OFFICE SOUGHT OR HELD  
City Council Member

SUPPORT	OPPOSE
	X

NAME OF BALLOT MEASURE

BALLOT NO./LETTER JURISDICTION

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

Please see attached pages

# Supplemental Independent Expenditure Report

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SUPPLEMENTAL INDEPENDENT EXPENDITURE

Report covers period from <u>2/21/2013</u> through <u>3/23/2013</u>	CALIFORNIA FORM <b>465</b> Page <u>2</u> of <u>3</u> I.D. NUMBER (if recipient com.) <b>1355585</b>
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Burbank Residents Opposed to Jess Talamantes Slashing Public Safety, A Committee to Oppose Jess Talamantes for Council 2013, Sponsored by Burbank Residents and United Food and Commercial Workers Local 770

## 4. Summary

1. Total independent expenditures of \$100 or more made this period. (Part 3.)	\$ <u>6396.94</u>
2. Total independent expenditures under \$100 made this period. (Not itemized.)	\$ <u>0.00</u>
3. Total independent expenditures made this period (Add Lines 1 + 2.)	<b>TOTAL</b> \$ <u>6396.94</u>

## 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  
Burbank City Clerk

ADDRESS (NO. AND STREET)  
275 E. Olive Ave.

CITY STATE ZIP CODE  
Burbank CA 91502

2) NAME OF FILING OFFICER

ADDRESS (NO. AND STREET)

CITY STATE ZIP CODE

3) NAME OF FILING OFFICER

ADDRESS (NO. AND STREET)

CITY STATE ZIP CODE

4) NAME OF FILING OFFICER

ADDRESS (NO. AND STREET)

CITY STATE ZIP CODE

## 6. Verification

I certify that the "independent expenditure(s)" disclosed in this statement were not "made at the behest of" the candidate or committee that benefitted from the expenditure(s) as those terms are defined in Government Code Section 82031 and FPPC Regulation 18225.7. 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 complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 3.27.13  
DATE

Executed on \_\_\_\_\_  
DATE

Executed on \_\_\_\_\_  
DATE

Executed on \_\_\_\_\_  
DATE

By   
SIGNATURE OF FILER, TREASURER OR ASSISTANT TREASURER

By \_\_\_\_\_  
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT, OR RESPONSIBLE OFFICER OF SPONSOR

By \_\_\_\_\_  
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

By \_\_\_\_\_  
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Received Fax: 03/27/13 02:25PM Fax Station: DOUBLETREE BY HILTON GALLERIA p.2  
 03/27/2013 13:27 FAX 12134526575 KAUFMAN LEGAL GROUP APC 002/003

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SUPPLEMENTAL INDEPENDENT EXPENDITURE

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		For Official Use Only

For use by an officeholder, candidate, or committee making independent expenditures totaling \$500 or more in a calendar year to support or oppose a single candidate or a single measure. This form must be filed at the same times and places as the campaign statements filed by the candidate supported or opposed or by a committee primarily formed to support or oppose the measure. A separate form must be filed for each candidate or measure being supported or opposed. This form is filed in addition to any other required campaign statements.

### 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)
03/20/2013	Tribune Direct 5091 4th St.  Irwindale CA 91706 Reference No:	POS, Jess Talamantes, Oppose	69.80	14709.22
03/06/2013	Political Data Inc. 12501 Imperial Hwy., #200  Norwalk CA 90650 Reference No:	Voter Data, Jess Talamantes, Oppose	698.38	14709.22
03/05/2013	Marshall Arts Creative Services, Inc. 9616 Highland Gorge Dr.  Beverly Hills CA 90210 Reference No:	LIT, Jess Talamantes, Oppose	1950.00	14709.22
02/27/2013	Fox Printing Company, Inc. 9330 San Fernando Rd.  Sun Valley CA 91352 Reference No:	LIT, Jess Talamantes, Oppose	3678.76	14709.22