Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

SEE INSTRUCTIONS ON REVERSE

Type or print in ink.

Statement covers period from 3/24/2013 through 4/3/2013

Date of election if applicable: (Month, Day, Year) April 9, 2013

Date Stamp: CCLERK '13APR 5AM11:11

COVER PAGE

CALIFORNIA FORM 460

Page 1 of 11

For Official Use Only

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- [x] 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:

- [x] 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: 1354250

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE): Committee to Re-elect Dave Golonski for Council 2013

STREET ADDRESS (NO P.O. BOX): 725 North Avon Street

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Burbank	CA	91505	818-843-2948

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: Todd Layfer

MAILING ADDRESS: 816 N. Parish Pl.

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Burbank, CA 91505	CA	91506	818-216-8633

NAME OF ASSISTANT TREASURER, IF ANY: Dave Golonski

MAILING ADDRESS: 725 North Avon Street

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Burbank	CA	91505	818-843-2948

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 4/4/2013 (Date) By [signature] (Signature of Treasurer or Assistant Treasurer)

Executed on 4/4/2013 (Date) By [signature] (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)

Recipient Committee Campaign Statement Cover Page — Part 2

Type or print in ink.

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Dave Golonski

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

City Council - Burbank

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP
725 North Avon Street	Burbank, CA 91505		

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
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ 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 from 3/24/2013 through 4/3/2013

CALIFORNIA FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Committee to Re-elect Dave Golonski for Council 2013

I.D. NUMBER: 1354250

Contributions Received

		Column A (TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES))	Column B (CALENDAR YEAR TOTAL TO DATE)
1. Monetary Contributions	Schedule A, Line 3	$ 3410—	$ 16,983—
2. Loans Received	Schedule B, Line 3	0—	2000—
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	$ 3410—	$ 18,983—
4. Nonmonetary Contributions	Schedule C, Line 3	0—	0—
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	$ 3410—	$ 18,983—

Expenditures Made

6. Payments Made	Schedule E, Line 4	$ 2753.54	$ 16,432.98
7. Loans Made	Schedule H, Line 3	Ø—	Ø—
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	$ 2753.54	$ 16,432.98
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	250—	250—
10. Nonmonetary Adjustment	Schedule C, Line 3	0—	0—
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	$ 3003.54	$ 16,682.98

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	$ 2193.56
13. Cash Receipts	Column A, Line 3 above	3410.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4	Ø
15. Cash Payments	Column A, Line 8 above	2753.54
16. **ENDING CASH BALANCE**	Add Lines 12 + 13 + 14, then subtract Line 15	$ 2850.02

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

17. LOAN GUARANTEES RECEIVED — Schedule B, Part 2 — $ Ø

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	$ Ø
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	$ 2250.00

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).

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	$	$

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
/ /	$
/ /	$

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

Schedule A
Monetary Contributions Received

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

SCHEDULE A

CALIFORNIA FORM **460**

Statement covers period
from 3/24/2013
through 4/3/2013

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Committee to Re-elect Dave Golonski for Council 2013

I.D. NUMBER
1354250

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)
3/25/13	WILLIAM LUDDY 440 W. ELM AVE BURBANK, CA. 91506	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	DIR. OF SPECIAL PROJECTS UNITED BROTHERHOOD CARP.	250-	250-	250-
3/26/13	ROZAN MARDOSIAN 19815 TURTLE SPRINGS WAY PORTER RANCH, CA. 91326	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	MARKETING ARCADIA TRANSIT	250-	250-	250-
3/26/13	LUDWIG MARDOSIAN 19815 TURTLE SPRINGS WAY PORTER RANCH, CA. 91326	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	COORDINATOR TRI CITY TRANS.	250-	250-	250-
3/26/13	TIMMY MARDIROSSIAN 1970 RIMCREST DR. GLENDALE, CA. 91207	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	MANAGER SAN GABRIEL TRANSIT	250-	250-	250-
3/26/13	MELENE MORAD 3338 CLIFDEN LN BURBANK, CA. 91504	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	WORKERS COMP. MGR. SAN GABRIEL TRANSIT	250-	250-	250-
			SUBTOTAL $	1,250-		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 3410-
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 $ 3410-

*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
Monetary Contributions Received

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

SCHEDULE A

CALIFORNIA FORM **460**

Statement covers period
from 3/24/2013
through 4/3/2013

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Committee to Re-elect Dave Golonski for Council 2013

I.D. NUMBER
1354250

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)
3/26/13	ARMEN MORAD 3338 CLIFDEN LN BURBANK, CA. 91504	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	MANAGER ARCADIA TRANSIT INC.	250—	250—	250—
3/26/13	CHRIS WELKER 924 BIRMINGHAM BURBANK, CA. 91504	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	RETIRED	100—	200—	100—
3/26/13	JOYCE STARLEAF 700 LIMA BURBANK, CA. 91505	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	REALTOR Keller-Williams	100—	200—	100—
3/26/13	DAVID STARLEAF PO BOX 7162 BURBANK, CA. 91501	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	RETIRED	100—	100—	100—
3/26/13	LINDA LORE 1521 MELWOOD DR GLENDALE, CA. 91207	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	BUSINESS OWNER LORE CONSULTING	100—	200—	100—
			SUBTOTAL $	650—		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 3410—
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 $ 3410—

*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
Monetary Contributions Received

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

SCHEDULE A

CALIFORNIA FORM **460**

Statement covers period
from 3/24/2013
through 4/3/2013

Page 6 of 11

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Committee to Re-elect Dave Golonski for Council 2013

I.D. NUMBER
1354250

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)
3/27/13	LA LEAGUE OF CONSERVATION VOTERS 9112C E. FAIRVIEW AVE. SAN GABRIEL	☐IND ☐COM ☒OTH ☐PTY ☐SCC		250-	250-	250-
3/27/13	JIM MCDERMOTT / CYNTHIA KURTZ 710 S. ARROYO BLVD. PASADENA, CA. 91105	☒IND ☐COM ☐OTH ☐PTY ☐SCC	CONSULTANT MCDERMOTT CONSULTING	100-	199-	100-
3/28/13	VINCE CARNESIE 918 COUNTRY CLUB DR. BURBANK, CA. 91501	☒IND ☐COM ☐OTH ☐PTY ☐SCC	GEOLOGIST GEOSYSTEMS INC.	25-	25-	25-
3/28/13	ANITA SCHACKMANN 127 S. SPARKS ST. BURBANK, CA. 91506	☒IND ☐COM ☐OTH ☐PTY ☐SCC	HUMAN RESOURCES BURBANK UNIFIED SD	25-	25-	25-
3/28/13	CONNIE WILSON 3013 N. KEYSTONE BURBANK, CA. 91504	☒IND ☐COM ☐OTH ☐PTY ☐SCC	RETIRED	100-	100-	100-
			SUBTOTAL $	500-		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 3410-
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 $ 3410-

*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
Monetary Contributions Received

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

SCHEDULE A

CALIFORNIA FORM **460**

Statement covers period
from 3/24/2013
through 4/3/2013

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Committee to Re-elect Dave Golonski for Council 2013

I.D. NUMBER
1354250

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)
3/29/13	Disney Worldwide Services 500 S. Buena Vista St Burbank, CA. 91521	☐IND ☐COM ☒OTH ☐PTY ☐SCC		250-	250-	250-
3/29/13	David Fogg 907 E. Grinnell Dr. Burbank, CA. 91501	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Realtor Keller-Williams	100-	200-	100-
3/29/13	Mary Alvord 1016 N. Fairview Burbank, CA.	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100-	100-	100-
3/29/13	Eric Hansen 1852 Homewood Dr. Altadena, CA. 91001	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	35- D.G ~~100-~~	35-	35-
4/2/13	Frank Gansi 229 E. Palm Burbank, CA. 91502	☒IND ☐COM ☐OTH ☐PTY ☐SCC	R/E Developer Gansi Builders	250-	500-	250-
			SUBTOTAL $	~~800-~~ 735- D.G.		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 3410-
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 $ 3410-

*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
Monetary Contributions Received

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

SCHEDULE A

CALIFORNIA FORM **460**

Statement covers period
from 3/24/2013
through 4/3/2013

Page 8 of 11

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Committee to Re-elect Dave Golonski for Council 2013

I.D. NUMBER
1354250

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)
4/2/13	GAY MAUND 1601 CAMINO DE VILLAS BURBANK, CA. 91501	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	COSTCO - Audio logist 18649 VIA PRINCESSA, SANTA CLARITA	25-	25-	25-
4/3/13	WARNER BROS. ENTERTAINMENT 4000 WARNER BLVD. BURBANK, CA. 91522	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		250-	500-	250-
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
				SUBTOTAL $ 275-		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 3410-
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 $ 3410-

*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 from 3/24/2013 through 4/3/2013

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Committee to Re-elect Dave Golonski for Council 2013

I.D. NUMBER: 1354250

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
Dave Golonski 725 North Avon Street Burbank, CA 91505 †☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	City Councilmember City of Burbank	$ 2000.00	$ 0.00	☐ PAID $ 0.00 ☐ FORGIVEN $ 0.00	$ 2000.00 4/30/13 DATE DUE	0 % RATE $ 0.00	$ 2000.00 2/28/13 DATE INCURRED	CALENDAR YEAR $ 2400.00 PER ELECTION** $ 2000.00
†☐ 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 $ 0.00		$ 0.00	$ 2000.00	$ 0.00 (Enter (e) on Schedule E, Line 3)		

Schedule B Summary

1. Loans received this period ..... $ 0.00
   (Total Column (b) plus unitemized loans of less than $100.)
2. Loans paid or forgiven this period ..... $ 0.00
   (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 $ 0.00 (May be a negative number)
   Enter the net here and on the Summary Page, Column A, Line 2.

†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.

Schedule E
Payments Made

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

Statement covers period
from 3/24/2013
through 4/3/2013

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Committee to Re-elect Dave Golonski for Council 2013

I.D. NUMBER
1354250

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)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	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
BARBARA SYKES 725 N. AVON BURBANK, CA. 91505		Office Supplies / Postage	793.88
AMERICAN DIRECT MAIL 908 N. HOLLYWOOD WAY BURBANK, CA. 91505		PRINTING / POSTAGE	1,944.66
CHASE BANK 1551 W. OLIVE AVE BURBANK, CA. 91506		BANK FEE	15.00

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

SUBTOTAL $ 2,753.54

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 2,753.54
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.) ..... TOTAL $ 2,753.54

Schedule F
Accrued Expenses (Unpaid Bills)

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

Statement covers period
from 3/24/2013
through 4/3/2013

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Committee to Re-elect Dave Golonski for Council 2013

I.D. NUMBER
1354250

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)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Political DATA PO BOX 59570 Norwalk, CA. 90652	Mail/Phone Listings	-0-	-250-	—	-250-
SUBTOTALS $		-0-	$ 250	$ -0-	$ 250

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

Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of $100 or more, plus total unitemized accrued expenses under $100.) ..... **INCURRED TOTALS $** 250
2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of $100 or more, plus total unitemized payments on accrued expenses under $100.) ..... **PAID TOTALS $** -0-
3. Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... **NET $** 250
   May be a negative number