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 3/24/13 through 4/3/13

Date of election if applicable: (Month, Day, Year) 4/9/13

Date Stamp: CCLERK '13APR 5AM11:37

COVER PAGE

CALIFORNIA FORM 460

Page 1 of 10

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: 1353740

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE): TALAMANTES FOR COUNCIL 2013

STREET ADDRESS (NO P.O. BOX): 831 BIRMINGHAM ROAD

CITY	STATE	ZIP CODE	AREA CODE/PHONE
BURBANK	CA	91504	818-632-2397

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX: P.O. BOX 10962

CITY	STATE	ZIP CODE	AREA CODE/PHONE
BURBANK	CA	91510	

OPTIONAL: FAX / E-MAIL ADDRESS: 818-846-2397/JATBFT@aol.com

Treasurer(s)

NAME OF TREASURER: CHARLES R ALLEMAN JR CPA

MAILING ADDRESS: 27200 TOURNEY RD #475

CITY	STATE	ZIP CODE	AREA CODE/PHONE
VALENCIA	CA	91355	661-705-4221

NAME OF ASSISTANT TREASURER, IF ANY: JESS TALAMANTES

MAILING ADDRESS: 831 BIRMINGHAM ROAD

CITY	STATE	ZIP CODE	AREA CODE/PHONE
BURBANK	CA	91504	818-632-2397

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 4/3/13 (Date) By Charles R Alleman Jr CPA (Signature of Treasurer or Assistant Treasurer)

Executed on 4-4-13 (Date) By Jess Talamantes (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

JESS TALAMANTES

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

BURBANK CITY COUNCILMEMBER

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP
831 BIRMINGHAM ROAD	BURBANK	CA	91504

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

CALIFORNIA FORM **460**

Statement covers period from 3/24/13 through 4/3/13

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: TALAMANTES FOR COUNCIL 2013

I.D. NUMBER: 1353740

Contributions Received

		Column A (TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES))	Column B (CALENDAR YEAR TOTAL TO DATE)
1. Monetary Contributions	*Schedule A, Line 3*	$ 3140.00	$ 14890.00
2. Loans Received	*Schedule B, Line 3*	71.87	3378.79
3. SUBTOTAL CASH CONTRIBUTIONS	*Add Lines 1 + 2*	$ 3211.87	$ 18268.79
4. Nonmonetary Contributions	*Schedule C, Line 3*	0	0
5. TOTAL CONTRIBUTIONS RECEIVED	*Add Lines 3 + 4*	$ 3211.87	$ 18268.79

Expenditures Made

6. Payments Made	*Schedule E, Line 4*	$ 480.04	$ 4539.44
7. Loans Made	*Schedule H, Line 3*	0	0
8. SUBTOTAL CASH PAYMENTS	*Add Lines 6 + 7*	$ 480.04	$ 4539.44
9. Accrued Expenses (Unpaid Bills)	*Schedule F, Line 3*	0	0
10. Nonmonetary Adjustment	*Schedule C, Line 3*	0	0
11. TOTAL EXPENDITURES MADE	*Add Lines 8 + 9 + 10*	$ 480.04	$ 4539.44

Current Cash Statement

12. Beginning Cash Balance	*Previous Summary Page, Line 16*	$ 10997.52
13. Cash Receipts	*Column A, Line 3 above*	3211.87
14. Miscellaneous Increases to Cash	*Schedule I, Line 4*	0
15. Cash Payments	*Column A, Line 8 above*	480.04
16. **ENDING CASH BALANCE**	*Add Lines 12 + 13 + 14, then subtract Line 15*	$ 13729.35

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

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

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*	$ 3378.79

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

Statement covers period
from 3/24/13
through 4/3/13

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
TALAMANTES FOR COUNCIL 2013

I.D. NUMBER
1353740

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)
3/28/13	BARBARA BECKLEY 235 E VALENCIA AVE APT A BURBANK, CA 91502	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	ARTISTIC DIRECTOR THE COLONY THEATRE	50.00	50.00	50.00
3/25/13	EDWARD CLIFT 415 N ONTARIO ST BURBANK, CA 91505	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	PROFESSOR WOODBURY UNIVERSITY	50.00	50.00	50.00
3/24/13	JOAN MCFARLANE 3313 WEDGEWOOD LANE BURBANK, CA 91504	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	ENGINEER CITY OF LOS ANGELES	50.00	50.00	50.00
3/24/13	ALTON BUTLER 3309 WEDGEWOOD LANE BURBANK, CA +1504	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CEO ANGSTROM LIGHTING INC	50.00	50.00	50.00
3/24/13	JUAN GUILLEN JR 2713 N KEYSTONE ST BURBANK, CA 91504	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CFO TRUE INTEGRITY INS	50.00	50.00	50.00
			SUBTOTAL $	250.00		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 3100.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 40.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL $ 3140.00

*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 to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
from 3/24/13
through 4/3/13

CALIFORNIA FORM 460

NAME OF FILER
TALAMANTES FOR COUNCIL 2013

I.D. NUMBER
1353740

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)
3/24/13	FRANK QUINTERO, III 1966 DEERMONT RD GLENDALE, CA 91207	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	MAYOR CITY OF GLENDALE	100.00	100.00	100.00
3/28/13	SAM MOUCHAMEL 3317 WEDGEWOOD LANE BURBANK, CA 91504	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	DENTIST ABC DENTAL	100.00	100.00	100.00
3/24/13	VAHEHAYRAPETIAN 3329 WEDGEWOOD LANE BURBANK, CA 91504	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	MORTGAGE BROKER SKYLINE	100.00	100.00	100.00
3/24/13	VIRGINIA & MAURO SARDI 3425 KILDARE CT BURBANK, CA 91504	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	RETIRED	100.00	100.00	100.00
3/24/13	PETER MCGRATH 525 E TUFTS AVE BURBANK, CA 91504	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	RETIRED	100.00	100.00	100.00
			SUBTOTAL $	500.00		

*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 to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
from 3/24/13
through 4/3/13

CALIFORNIA FORM 460

NAME OF FILER
TALAMANTES FOR COUNCIL 2013

I.D. NUMBER
1353740

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)
3/28/13	LINDA WALMSLEY 1432 NAOMI ST BURBANK, CA 91505	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CR UNION EXEC, FIRST ENTERTAINMENT C U	100.00	100.00	100.00
3/24/13	PRASHANT VAGHASHIA 3339 DURHAM CT BURBANK, CA 91504	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	HOTEL OWNER HAMPTON INN	100.00	100.00	100.00
3/24/13	SHAVARSH ODADJIAN 1600 VENTURA BLVD, STE 600 ENCINO, CA 91436	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	SELF EMPLOYED MUSICIAN	150.00	150.00	150.00
3/24/13	BEATRIZ OCHOA 1136 N PARISH PL BURBANK, CA 91506	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	RETIRED	250.00	250.00	250.00
3/25/13	JAMES SHENOUDA 3407 VIEWCREST DR BURBANK, CA 91504	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	INSURANCE AGENT RIGHT STOP INSURANCE	250.00	250.00	250.00
			SUBTOTAL $	850.00		

*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 to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
from 3/24/13
through 4/3/13

CALIFORNIA FORM 460

NAME OF FILER
TALAMANTES FOR COUNCIL 2013

I.D. NUMBER
1353740

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	SERA SHENOUDA 3407 VIEWCREST DR BURBANK, CA 91504	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	~~NONE~~ Housewife	250.00	250.00	250.00
3/24/13	HAKOP OGANYAN 2313 CASTLEMAN LN BURBANK, CA 91504	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	MEDICAL DOCTOR ALL FOR HEALTH	250.00	250.00	250.00
3/24/13	ABRAHAM TASHDJIAN 5060 W PICO BLVD LOS ANGELES, CA 90019	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CEO VETERAN CO.	250.00	250.00	250.00
3/24/13	JACK O'NEILL 617 S ORCHARD DR BURBANK, CA 91506	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CONSULTANT THE O'NEILL GROUP LLC	250.00	250.00	250.00
3/27/13	THE WALT DISNEY COMPANY 500 S BUENA VISTA ST BURBANK, CA 91521	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		250.00	250.00	250.00
			SUBTOTAL $	1250.00		

*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 to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
from 3/24/13
through 4/3/13

CALIFORNIA FORM 460

NAME OF FILER
TALAMANTES FOR COUNCIL 2013

I.D. NUMBER
1353740

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)
3/24/13	CALIFORNIA CR UN LEAGUE PAC #760255 2855 E QUASTI ROAD, SUITE 600 ONTARIO, CA 91761	☐IND ☐COM ☑OTH ☐PTY ☐SCC		250.00	250.00	250.00
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
			SUBTOTAL $	250.00		

*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 from 3/24/13 through 4/3/13

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: TALAMANTES FOR COUNCIL 2013

I.D. NUMBER: 1353740

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
JESS TALAMANTES 831 BIRMINGHAM ROAD BURBANK, CA 91504 †☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	RETIRED	$ 910.00	$ 0	☐ PAID $ 0 ☐ FORGIVEN $ 0	$ 910.00 DATE DUE	0 % RATE $ 0	$ 910.00 10/12/12 DATE INCURRED	CALENDAR YEAR $ 910.00 PER ELECTION** $
JESS TALAMANTES 831 BIRMINGHAM ROAD BURBANK, CA 91504 †☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	RETIRED	$ 2000.00	$ 0	☐ PAID $ 0 ☐ FORGIVEN $ 0	$ 2000.00 DATE DUE	0 % RATE $ 0	$ 2000.00 12/21/12 DATE INCURRED	CALENDAR YEAR $ 2000.00 PER ELECTION** $
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$	$	☐ PAID $ ☐ FORGIVEN $	$ DATE DUE	% RATE $	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION** $
		SUBTOTALS $ 0	$ 0		$ 2910.00	$ 0 (Enter (e) on Schedule E, Line 3)		

Schedule B Summary

1. Loans received this period ..... $ 71.87
   (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 $ 71.87 (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 3/24/13
through 4/3/13

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
TALAMANTES FOR COUNCIL 2013

I.D. NUMBER
1353740

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
SCOTT SCOZZOLA SS GOLF INC 824 CAMBRIDGE DR, BURBANK, CA 91504	RFD		250.00

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

SUBTOTAL $ 250.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 250.00
2. Unitemized payments made this period of under $100 ..... $ 230.04
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 on the Summary Page, Column A, Line 6.) ..... **TOTAL $** 480.04