

RECEIVED
CITY CLERK

SUPPLEMENTAL INDEPENDENT EXPENDITURE

Supplemental Independent Expenditure Report

(Government Code Section 84203.5)

SEE INSTRUCTIONS ON REVERSE

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

Amendment (Explain Below)

Report covers period from July 20, 2012 through Sept. 30, 2012	Date Stamp 2012 OCT -5 PM 3:41	CALIFORNIA FORM 465
Date of election if applicable: (Month, Day, Year) Nov. 6, 2012		

1. Committee/Filer Information

I.D. NUMBER (If recipient committee)
1344077

Treasurer (If recipient committee)

NAME OF TREASURER

John Humphrey

MAILING ADDRESS

1620 Sandalwood St.

CITY

Costa Mesa

STATE

CA

ZIP CODE

92626

AREA CODE/PHONE

714-751-6552

OPTIONAL: FAX / E-MAIL ADDRESS

COMMITTEE/FILER'S NAME

Costa Mesans 4 Responsible Government (CM4RG)

STREET ADDRESS (NO P.O. BOX)

1620 Sandalwood St.

CITY

Costa Mesa

STATE

CA

ZIP CODE

92626

AREA CODE/PHONE

714-751-6552

OPTIONAL: FAX / E-MAIL ADDRESS

2. Name of Candidate or Measure Supported or Opposed

CHECK ONE

NAME OF CANDIDATE

Sandra Genis

OFFICE SOUGHT OR HELD AND DISTRICT, IF APPLICABLE

City Council Member City of Costa Mesa, CA

SUPPORT

OPPOSE

NAME OF BALLOT MEASURE

BALLOT NO./LETTER

JURISDICTION

SUPPORT

OPPOSE

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

DATE	NAME AND ADDRESS OF PAYEE	DESCRIPTION OF EXPENDITURE	AMOUNT	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)
9/6/2012	COGS South Signs	Yard Signs	\$595.00	\$1,781.00
9/27/2012	JT Printing 12771 Western Ave. Suite H Garden Grove, CA 92841	Flyer for Distribution	\$200.00	\$1,781.00
9/30/2012	California Premier Printing 2173 Salk Ave, Suite 250 Carlsbad, CA 92008	Printing of Mailer	\$320.82	\$1,781.00

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Amendment (Explain Below)

Report covers period from <u>July 1, 2012</u> through <u>Sept. 30, 2012</u>	Date Stamp	CALIFORNIA FORM 465
Date of election if applicable: (Month, Day, Year) <u>Nov. 6, 2012</u>		
		Page <u>2</u> of <u>3</u>
For Official Use Only		

1. Committee/Filer Information

I.D. NUMBER (If recipient committee)
1344077

Treasurer (If recipient committee)

COMMITTEE/FILER'S NAME

Costa Mesans 4 Responsible Government (CM4RG)

NAME OF TREASURER

John Humphrey

STREET ADDRESS (NO P.O. BOX)

1620 Sandalwood St.

MAILING ADDRESS

1620 Sandalwood St.

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Costa Mesa</u>	<u>CA</u>	<u>92626</u>	<u>714-751-6552</u>

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<u>Costa Mesa</u>	<u>CA</u>	<u>92626</u>	<u>714-751-6552</u>

OPTIONAL: FAX / E-MAIL ADDRESS

OPTIONAL: FAX / E-MAIL ADDRESS

2. Name of Candidate or Measure Supported or Opposed

CHECK ONE

NAME OF CANDIDATE <u>Sandra Genis</u>	OFFICE SOUGHT OR HELD AND DISTRICT, IF APPLICABLE <u>City Council Member City of Costa Mesa, CA</u>	SUPPORT <input checked="" type="checkbox"/>	OPPOSE <input type="checkbox"/>
NAME OF BALLOT MEASURE	BALLOT NO./LETTER	JURISDICTION	SUPPORT <input type="checkbox"/>
			OPPOSE <input type="checkbox"/>

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

DATE	NAME AND ADDRESS OF PAYEE	DESCRIPTION OF EXPENDITURE	AMOUNT	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)
<u>9/30/2012</u>	<u>Mail Pros Inc 5261 Business Dr. Huntington Beach, CA 92649</u>	<u>Postage for mailer</u>	<u>\$665.18</u>	<u>\$1,781.00</u>

Supplemental Independent Expenditure Report

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SUPPLEMENTAL INDEPENDENT EXPENDITURE

Report covers period		CALIFORNIA FORM 465
from	July 1, 2012	
through	Sept. 30, 2012	Page <u>3</u> of <u>3</u>
NAME OF FILER		I.D. NUMBER (If recipient com.)
Costa Mesans 4 Responsible Government (CM4RG)		1344077

SEE INSTRUCTIONS ON REVERSE

4. Summary

1. Total independent expenditures of \$100 or more made this period. (Part 3.)	\$	1,781.00
2. Total independent expenditures under \$100 made this period. (Not itemized.)	\$	100.03
3. Total independent expenditures made this period (Add Lines 1 + 2.)	TOTAL \$	1,881.03

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
Brenda Green City Clerk of Costa Mesa

ADDRESS (NO. AND STREET)
77 Fair Drive

CITY STATE ZIP CODE
Costa Mesa CA 92627

3) NAME OF FILING OFFICER

ADDRESS (NO. AND STREET)

CITY STATE ZIP CODE

2) 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 have used all reasonable diligence in preparing and reviewing this statement and the information provided 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 11/5/2012
DATE

Executed on _____
DATE

Executed on _____
DATE

Executed on _____
DATE

By _____
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROponent

By _____
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROponent