e,	innlomont	al Independent	Type or print in ink.				REC	EIYU	PPLEMENTA	AL INDEPENDI	ENT EXPI	ENDITUR
E	xpenditure overnment Code Se	Report	Amounts may be rounded to whole dollars.		Report covers p	2012	CITY	Dete Star	PHR	CALIFOR FORM	NIA /	165
SEE	EINSTRUCTIONS O	N REVERSE	Amendment (Explain B	Below)	Sept. 30 through		2012 OCT		H 3: 41	Page1	of	3
				Ministration of the second	(Month, Day, Y	ear)	CITY OF BY	COSTA	MESA	For Offi	ciai Use Or	піу
					Nov. 6, 20	12						
1.	Committee	/Filer Information	I.D. NUMBER (If recipient committee 1344077)	Treasurer (If recipient co	ommittee)					
	COMMITTEE/FILER	'S NAME			NAME OF TREASU	RER		A				
	Costa Mesan	s 4 Responsible Government (0	CM4RG)		John Humphr							
	STREET ADDRESS	(NO P.O. BOX)			MAILING ADDRESS							
	1620 Sandalw				1620 Sandalw	vood St.						
	CITY STATE ZIP CODE AREA CODE/PHON				CITY STATE ZIP CODE AREA CODE/PHONE						HONE	
	Costa Mesa		626 714-751-6552		Costa Mesa			CA	92626	714-	751-655	52
	OPTIONAL: FAX/E	-MAIL ADDRESS			OPTIONAL: FAX/E	-MAIL ADDRI	ESS					
2.	Name of Ca	andidate or Measure Sup	ported or Opposed							eny taonan'i managampagasiana tipetatan disembatikan	CHEC	K ONE
i	NAME OF CANDIDA	TE -			OFFICE SOUGHT OR HEL	D AND DIST	RICT, IF APP	LICABLE			SUPPORT	OPPOSE
	John Stephen	s			City Council Memb	er City	of Costa I	Mesa, C	A		X	
Ī	NAME OF BALLOT N	MEASURE			BALLOT NO./LETTER	JURISDICT	ION				SUPPORT	OPPOSE
	an a poetina de distribuir de la companie de la co											<u></u>
3.	Independer	nt Expenditures Made Atta	ach additional information on appr	opriately	labeled continuation shee	ts.					IVE TO DA	
	DATE	NAME AND ADDRE	SS OF PAYEE		DESCRIPTION OF EXPE	NDITURE	- 1	AMO	UNT		DAR YEAR - DEC. 31	
	9/6/2012	COGS South Signs		Yard S	Yard Signs			\$5	595.00	\$1,781.00		
	9/27/2012	JT Printing 12771 Western Ave. Suite H Garden Grove, CA 92841		Flyer f	or Distribution			\$2	200.00	\$1,	781.00	
	9/30/2012	California Premier Printing 2173 Salk Ave, Suite 250 Carlsbad, CA 92008		Printin	g of Mailer			\$3	20.82	\$1,7	781.00	

Supplemental Independent Expenditure Report (Government Code Section 84203.5)		Type or print in ink. Amounts may be rounded to whole dollars.		Report covers period July 1, 2012 from		SUPPLEMENT Date Stamp	CALIFORNIA 465					
SEE INSTRUCTIONS O	ON REVERSE	☐ Amendment (Explain B	Below)	throughSept. 30, 2012	2		Page2	of3				
				Date of election if applicate (Month, Day, Year)	ole:		For Official	Use Only				
				Nov. 6, 2012								
1. Committee	/Filer Information	I.D. NUMBER (If recipient committee) 1344077)	Treasurer (if recipient committee) NAME OF TREASURER								
COMMITTEE/FILE												
Costa Mesan	s 4 Responsible Government	(CM4RG)		John Humphrey								
				MAILING ADDRESS								
STREET ADDRESS			1620 Sandalwood St.									
1620 Sandaly				CITY STATE ZIP CODE AREA CODE								
спу Costa Mesa		ZIP CODE AREA CODE/PHO 32626 714-751-6552		Costa Mesa		CA 92626	714-75	1-6552				
OPTIONAL: FAX/I	andidate or Measure Su	upported or Opposed			·			CHECK ONE				
NAME OF CANDIDA				OFFICE SOUGHT OR HELD AND			st	JPPORT OPPOSE				
John Stepher				City Council Member C	· ·	lesa, CA		X				
NAME OF BALLOT	MEASURE			BALLOT NO./LETTER JURIS	EDICTION		<u>.</u>	JPPORT OPPOSE				
3. Independe	nt Expenditures Made A	Attach additional information on appro	opriately	labeled continuation sheets.			CUMULATIVE CALENDA					
DATE	NAME AND ADDR	RESS OF PAYEE		DESCRIPTION OF EXPENDITUR	Æ	AMOUNT	(JAN. 1 - D					
9/30/2012	Mail Pros Inc 5261 Business Dr. Huntington Beach, CA 9264	49	Posta	ge for mailer		\$665.18	\$1,78	1.00				
					ł							

	Time	or print in ink.	SUPPLEMENTAL INDEPENDENT EXPENDITUR					
Supplemental Independent	Amounts	s may be rounded	Report covers period	CALIFORNIA ARE				
Expenditure Report	to w	vhole dollars.	July 1, 2012	FORM 400				
EE INSTRUCTIONS ON REVERSE			through Sept. 30, 2012	9 of 3				
AME OF FILER				I.D. NUMBER (If recipient com.) 1344077				
Costa Mesans 4 Responsible Government (CM4RG								
I. Summary	manda this naviad (D	and 3 \		\$1,781.00				
Total independent expenditures of \$100 or more				100.02				
2. Total independent expenditures under \$100 mad	le this period. (Not ite	mized.)		. \$				
3. Total independent expenditures made this perio	od (Add Lines 1 + 2.).	***************************************	TOTA	L \$				
i. Filing Officers Enter the name and address of e	ach filing officer with wh	hom the filer's most recent compa	ian statements (Form 450, 460 or 46	S1) have been filed				
	ach hing oncer with wi	3) NAME OF FILING O		77 1000 00011 11100.				
NAME OF FILING OFFICER Brenda Green City Clerk of Costa Mesa		3) NAME OF FILING O	FFICER					
ADDRESS (NO. AND STREET)		ADDRESS	(NO. AND STREET)					
77 Fair Drive			•					
CITY	STATE ZIP CODE	CITY		STATE ZIP CODE				
Costa Mesa	CA 92627							
2) NAME OF FILING OFFICER		4) NAME OF FILING O	FFICER					
ADDRESS (NO. AND STREET)		ADDRESS	(NO. AND STREET)					
CITY	STATE ZIP CODE	CITY		STATE ZIP CODE				
· · · · · · · · · · · · · · · · · · ·								
. Verification								
I have used all reasonable diligence in preparing and revi	iewing this stateme <u>nt an</u>	d to the best of my knowledge the i	nformation contained herein is true an	d complete. I certify under				
penalty of perjury under the laws of the State of California	that the foregoing							
1/-/								
Executed on // /5 / 20/7	Ву							
Executed on	By		NBLE	OFFICER OF SPONSOR				
Executed on	Ву	SIGNATURE OF CONTROLLING OFFICEH	OLDER, CANDIDATE, STATE MEASURE PROPON	ENT				
Executed on	Ву							
DATE	~, ~~~~~	SIGNATURE OF CONTROLLING OFFICEH	OLDER, CANDIDATE, STATE MEASURE PROPON	ENT				

DATE