

Supplemental Independent Expenditure Report

SUPPLEMENTAL INDEPENDENT EXPENDITURE

CALIFORNIA FORM **465**

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For Official Use Only

Amendment

Report covers period
 from 10/20/2013
 through 12/31/2013
 Date of Election if applicable
 (Month, Day, Year)
 11/05/2013

2014 Date Stamp: 11/10/13
 CITY CL

1. Committee/Filer Information

I.D. Number 951841

Treasurer(s)

COMMITTEE NAME
 PALM SPRINGS POLICE OFFICERS ASSOCIATION POLITICAL ACTION COMMITTEE

STREET ADDRESS (NO PO BOX)
 1415 L St Ste 410 Sacramento

CITY STATE ZIP CODE AREA CODE/PHONE
 Sacramento CA 95814

MAILING ADDRESS (IF DIFFERENT)

CITY STATE ZIP CODE

OPTIONAL FAX / E-MAIL ADDRESS
 / ordoslaw@jps.net

NAME OF TREASURER
 Wayne Ordos

STREET ADDRESS
 1415 L St Ste 410

CITY STATE ZIP CODE AREA CODE/PHONE
 Sacramento CA 95814

NAME OF ASSISTANT TREASURER, IF ANY

STREET ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL FAX / E-MAIL ADDRESS
 (916) 556-1233 / ordoslaw@jps.net

2. Name of Candidate or Measure Supported or Opposed

NAME OF CANDIDATE Ginny Foat	OFFICE SOUGHT OR HELD AND DISTRICT, IF APPLICABLE City of Palm Springs City Council Member	SUPPORT X	OPPOSE
NAME OF BALLOT MEASURE	BALLOT NO/LETTER JURISDICTION	SUPPORT	OPPOSE

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COMMITTEE NAME Palm Springs Police Officers Association Political Action Committee	I.D. NUMBER 951841
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3. Independent Expenditures Made

DATE	NAME AND ADDRESS OF PAYEE	DESCRIPTION OF EXPENDITURE	AMOUNT	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC 31)
10/28/2013	Brian Floyd & Associates 721 Cordova Street #6 Pasadena, CA 91101	Campaign Mailing	1,292.63	1,492.63

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COMMITTEE NAME	Palm Springs Police Officers Association Political Action Committee	I.D. NUMBER	951841
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4. Summary

1. Total independent expenditures of \$100 or more made this period. (Part 3)	\$	1,292.63
2. Total independent expenditures under \$100 made this period. (Not itemized.)	\$	0.00
3. Total independent expenditures made this period. (Add Lines 1 and 2.)	TOTAL \$	1,292.63

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
City of Palm Springs City Clerk

ADDRESS (NO. & STREET)

CITY STATE ZIP CODE

2) NAME OF FILING OFFICER

ADDRESS (NO. & STREET)

CITY STATE ZIP CODE

3) NAME OF FILING OFFICER

ADDRESS (NO. & STREET)

CITY STATE ZIP CODE

4) NAME OF FILING OFFICER

ADDRESS (NO. & STREET)

CITY STATE ZIP CODE

6. Verification

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 1/10/14 By [REDACTED] OR ASSISTANT TREASURER

Executed on _____ By _____ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

Executed on _____ By _____ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on _____ By _____ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT