

# 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.

SUPPLEMENTAL INDEPENDENT EXPENDITURE

Report covers period from <u>07/01/2015</u> through <u>10/17/2015</u>	Date Stamp <b>RECEIVED</b> CITY OF PALM SPRINGS 2015 DEC 21 AM 10:42 JAMES THOMPSON CITY CLERK	<b>CALIFORNIA FORM 465</b> Page <u>1</u> of <u>4</u> For Official Use Only
Date of election if applicable: (Month, Day, Year) <u>11/3/2015</u>		

**Amendment** (Explain Below)

Added voter data cost

## 1. Committee/Filer Information

I.D. NUMBER (if recipient committee)  
951841

COMMITTEE/FILER'S NAME

Palm Springs Police Officers Association Political Action Committee

STREET ADDRESS (NO P.O. BOX)

1415 L Street, Ste. 410

CITY STATE ZIP CODE AREA CODE/PHONE

Sacramento CA 95814

OPTIONAL: FAX / E-MAIL ADDRESS

## Treasurer (if recipient committee)

NAME OF TREASURER

Wayne Ordos

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

Sacramento CA 95814

OPTIONAL: FAX / E-MAIL ADDRESS

## 2. Name of Candidate or Measure Supported or Opposed

CHECK ONE

NAME OF CANDIDATE <u>Geoff Kors</u>	OFFICE SOUGHT OR HELD AND DISTRICT, IF APPLICABLE <u>City Council Member: Palm Springs</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)
10/09/2015	ALCO Printing 3649 San Fernando Road Glendale, CA 91204-	Campaign Mailer	614.04	6,231.95
10/14/2015	Steve Casavan Palmdale, CA 93550	Yard sign installation	513.00	6,231.95
10/13/2015	ALCO Printing 3649 San Fernando Road Glendale, CA 91204-	Campaign Mailer	832.03	6,231.95

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For use by an officeholder, candidate, or committee making independent expenditures totaling \$1000 or more in a calendar year to support or oppose a single candidate or a single measure. This form must be filed at the same times and places as the campaign statements filed by the candidate supported or opposed or by a committee primarily formed to support or oppose the measure. A separate form must be filed for each candidate or measure being supported or opposed. This form is filed in addition to any other required campaign statements.

<b>Report covers period</b>	Date Stamp	<b>CALIFORNIA FORM 465</b>
from <u>07/01/2015</u>		
through <u>10/17/2015</u>		
<b>Date of election if applicable: (Month, Day, Year)</b>		Page <u>2</u> of <u>4</u>
		For Official Use Only

## IV 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)
10/13/2015	Brian Floyd & Associates 721 Cordova Street #6 Pasadena, CA 91101-	Campaign Mailer	904.10	6,231.95
10/13/2015	Political Data Inc. 12501 Imperial Hwy., Ste. 200 Norwalk, CA 90650-	Voter Data for Mailer	38.59	6,231.95
10/08/2015	Press Print, Inc. 66 Country Club Drive Calimesa, CA 92320	Yard Signs	360.00	6,231.95
10/09/2015	Political Data Inc. 12501 Imperial Hwy., Ste. 200 Norwalk, CA 90650-	Voter Data for Mailer	91.74	6,231.95
10/16/2015	Political Data Inc. 12501 Imperial Hwy., Ste. 200 Norwalk, CA 90650-	Voter Data for Telephone Calls	50.78	6,231.95
10/09/2015	Brian Floyd & Associates 721 Cordova Street #6 Pasadena, CA 91101-	Campaign Mailer	855.17	6,231.95



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NAME OF FILER Palm Springs Police Officers Association Political Action Committee	I.D. NUMBER (if recipient com.) 951841
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## 4. Summary

1. Total independent expenditures of \$100 or more made this period. (Part 3.)	\$ <u>6,231.95</u>
2. Total independent expenditures under \$100 made this period. (Not itemized.)	\$ <u>0.00</u>
3. Total independent expenditures made this period (Add Lines 1 + 2.)	<b>TOTAL</b> \$ <u>6,231.95</u>

## 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  
Palm Springs City Clerk

ADDRESS (NO. AND STREET)  
3200 E. Tahquitz Canyon Way

CITY STATE ZIP CODE  
Palm Springs CA 92262

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 certify that the "independent expenditure(s)" disclosed in this statement were not "made at the behest of" the candidate or committee that benefitted from the expenditure(s) as those terms are defined in Government Code Section 82031 and FPPC Regulation 18225.7. 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 12/13/15  
DATE

Executed on \_\_\_\_\_  
DATE

Executed on \_\_\_\_\_  
DATE

Executed on \_\_\_\_\_  
DATE

By  \_\_\_\_\_  
ASSISTANT TREASURER

By \_\_\_\_\_  
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROponent, OR RESPONSIBLE OFFICER OF SPONSOR

By \_\_\_\_\_  
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROponent

By \_\_\_\_\_  
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROponent