

**Recipient Committee  
Campaign Statement  
Cover Page**

CITY CLERK

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COVER PAGE

CALIFORNIA  
FORM **460**

Page 1 of 21

For Official Use Only

Statement covers period  
from 01/01/2014  
through 03/17/2014

Date of Election if applicable  
06/03/2014  
(Month, Day, Year)

**1. Type of Recipient Committee**

- Officeholder, Candidate Controlled Committee
- State Candidate Election Committee
- Recall
- General Purpose Committee
  - Sponsored
  - Small Contributor Committee
  - Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
  - Controlled
  - Sponsored
- Primarily Formed Candidate/Officeholder Committee

**2. Type of Statement**

- Pre-election Statement
- Semi-Annual Statement
- Termination Statement
- Amendment
- Quarterly Statement
- Special Odd-Year Statement
- Supplemental Pre-election Statement - Attach Form 495

**3. Committee Information**

I.D. Number 1363257

COMMITTEE NAME  
Paula Devine For City Council 2014

STREET ADDRESS (NO PO BOX)

CITY STATE ZIP CODE AREA CODE/PHONE  
Los Angeles CA 90048

MAILING ADDRESS (IF DIFFERENT)

CITY STATE ZIP CODE

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER  
Jane Leiderman

STREET ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE  
Los Angeles CA 90048

NAME OF ASSISTANT TREASURER, IF ANY

STREET ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

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 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 3/24/14

By   
SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on 3/22/14

By Paula Devine  
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

**Recipient Committee  
Campaign Statement  
Cover Page - Part 2**

COVER PAGE - PART 2

**CALIFORNIA  
FORM 460**

Statement covers period  
from 01/01/2014  
through 03/17/2014

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**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE  
Paula Devine

OFFICE SOUGHT OR HELD ( INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)  
City Council Member City of Glendale

RESIDENTIAL/BUSINESS ADDRESS ( NO. AND STREET) CITY STATE ZIP  
[REDACTED] Glendale CA 91207

**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 ? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE STREET ADDRESS ( NO P.O. BOX)	
CITY	STATE ZIP CODE AREA CODE/PHONE
COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE ? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE 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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER OR CANDIDATE OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY
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**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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

**Campaign Disclosure Statement  
Summary Page**

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2014	
through	03/17/2014	
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NAME OF FILER Paula Devine For City Council 2014

I.C. NUMBER  
1363257

	Column A TOTAL PER PERIOD FROM ATTACHED SCHEDULES	Column B CALENDAR YEAR TOTAL TO DATE
<b>Contributions Received</b>		
1. Monetary Contributions ..... Schedule A, Line 3	\$ 15,117.00	\$ 15,117.00
2. Loans Received ..... Schedule B, Line 3	5,000.00	5,000.00
3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1+2	\$ 20,117.00	\$ 20,117.00
4. Nonmonetary Contributions ..... Schedule C, Line 3	763.32	763.32
5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3+4	\$ 20,880.32	\$ 20,880.32

**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	\$ _____	\$ _____

<b>Expenditures Made</b>		
6. Payments Made ..... Schedule E, Line 4	\$ 10,455.43	\$ 10,455.43
7. Loans Made ..... Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6+7	\$ 10,455.43	\$ 10,455.43
9. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3	1,000.00	1,000.00
10. Nonmonetary Adjustment ..... Schedule G, Line 3	763.32	763.32
11. TOTAL EXPENDITURES MADE ..... Add Lines 8+9+10	\$ 12,218.75	\$ 12,218.75

**Expenditure Limit Summary  
for State Candidates**

22. Cumulative Expenditures Made \*  
(If Subject to Voluntary Expenditure Limits)

\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

\* Amounts in this Section may be different from amounts reported in Column B.

<b>Current Cash Statement</b>	
12. Beginning Cash Balance ..... Previous Summary Page, Line 16	\$ 0.00
13. Cash Receipts ..... Column A, Line 3 above	20,117.00
14. Miscellaneous Increases to Cash ..... Schedule I, Line 4	0.00
15. Cash Payments ..... Column A, Line 8 above	10,455.43
16. ENDING CASH BALANCE, Add Lines 12+13+14, then subtract Line 15	\$ 9,661.57
17. LOAN GUARANTEES RECEIVED ..... Schedule B, Part 2	\$ 0.00

<b>Cash Equivalents and Outstanding Debts</b>	
18. Cash Equivalents	\$ 0.00
19. Outstanding Debts ..... Add Lines 2+Line 9 in Column B above	\$ 6,000.00

**Schedule A  
Monetary Contributions Received**

SCHEDULE A

Statement covers period from <u>01/01/2014</u> through <u>03/17/2014</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Paula Devine For City Council 2014

I.D. NUMBER  
1363257

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/20/2014	Allen Lisa Inc Studio One Skin Care [REDACTED] Glendale, CA 91208	OTH		250.00	250.00	250 (P14)
02/10/2014	Kenarig Avedisian [REDACTED] Glendale, CA 91208	IND	Sales Clerk Auto Club of South California	100.00	100.00	100 (P14)
03/17/2014	Michael A Barclay [REDACTED] Glendale, CA 91206	IND	Retired N.A.	200.00	200.00	200 (P14)
03/11/2014	Wanda Bistagne [REDACTED] Glendale, CA 91207	IND	Retired N.A.	100.00	100.00	100 (P14)
02/20/2014	Joyce L. Briscoe [REDACTED] Glendale, CA 91205	IND	Retired N.A.	100.00	100.00	100 (P14)

**SUBTOTAL \$ 750.00**

**Schedule A Summary**

1. Amount received this period - itemized contributions (Includes all Schedule A subtotals) .....	\$ 14,350.00
2. Amount received this period - unitemized .....	\$ 767.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A Line 1) .....	<b>TOTAL \$ 15,117.00</b>

\*\* Contributor Codes  
IND - Individual  
COM - Recipient Committee (other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

FPPC Form 460 (Jan/05)  
FPPC Toll-Free Helpline: 866/ASK-FPPC

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A

Statement covers period from <u>01/01/2014</u> through <u>03/17/2014</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Paula Devine For City Council 2014

I.D. NUMBER  
1363257

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/10/2014	Carol Brusha [REDACTED] Glendale, CA 91202	IND	Writer  Carol Brusha	250.00	250.00	250 (P14)
02/20/2014	Carol Ann Burton [REDACTED] Glendale, CA 91207	IND	Retired  N.A.	100.00	100.00	100 (P14)
02/10/2014	Daniel Cabrera [REDACTED] Glendale, CA 91207	IND	Retired  N.A.	100.00	100.00	100 (P14)
03/11/2014	Rima G. Cameron [REDACTED] Glendale, CA 91202	IND	Retired  N.A.	100.00	100.00	100 (P14)
02/12/2014	Raymond Chan [REDACTED] Monterey Park, CA 91755	IND	Manager  City of Los Angeles	1,000.00	1,000.00	1,000 (P14)

**SUBTOTAL \$ 1,550.00**

\*\* Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Statement covers period		<b>CALIFORNIA FORM 460</b>
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I.D. NUMBER  
1363257

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/20/2014	Claudia Culling [REDACTED] Glendale, CA 91208	IND	Retired  N.A.	100.00	100.00	100 (P14)
02/26/2014	Richard Dinger [REDACTED] Glendale, CA 91208	IND	President  Crescenta Valley Insurance	100.00	100.00	100 (P14)
03/17/2014	Arthur C. Fisher [REDACTED] Glendale, CA 91206	IND	Retired  N.A.	200.00	200.00	200 (P14)
02/10/2014	Lyn S. Foster [REDACTED] Glendale, CA 91207	IND	Retired  N.A.	250.00	250.00	250 (P14)
03/17/2014	Rosa Fromer [REDACTED] Glendale, CA 91201	IND	Retired  N.A.	150.00	150.00	150 (P14)
<b>SUBTOTAL \$</b>				<b>800.00</b>		

\* Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A

Statement covers period		<b>CALIFORNIA FORM 460</b>
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I.D. NUMBER  
1363257

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
03/11/2014	Full Scale Effects Inc [REDACTED] North Hollywood, CA 91605	OTH		250.00	250.00	250 (P14)
02/12/2014	Anna Galstain [REDACTED] Glendale, CA 91207	IND	Doctor  Glendale Adventist Hospital	100.00	100.00	100 (P14)
02/10/2014	Greg Grammer [REDACTED] Glendale, CA 91207	IND	Assistant City Manager  City of Rolling Hills	250.00	500.00	500 (P14)
03/17/2014	Greg Grammer [REDACTED] Glendale, CA 91207	IND	Assistant City Manager  City of Rolling Hills	250.00	500.00	500 (P14)
02/20/2014	Scott Halloran [REDACTED] Glendale, CA 91201	IND	Retired  N.A.	100.00	200.00	200 (P14)

**SUBTOTAL \$ 950.00**

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**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A

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1363257

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
03/17/2014	Scott Halloran [REDACTED] Glendale, CA 91201	IND	Retired  N.A.	100.00	200.00	200 (P14)
02/15/2014	Michael Haney [REDACTED] Glendale, CA 91208	IND	Marketing Director  ARROYO Investment Group	1,000.00	1,000.00	1,000 (P14)
02/20/2014	Shirley Ann Hill [REDACTED] Glendale, CA 91205	IND	Realtor  Remax Elite	100.00	100.00	100 (P14)
02/12/2014	Karen Horn [REDACTED] Glendale, CA 91207	IND	Retired  N.A.	100.00	100.00	100 (P14)
02/18/2014	Susan Crancer Hunt [REDACTED] Glendale, CA 91206	IND	Executive Director  Glendale Education Foundation	100.00	100.00	100 (P14)

**SUBTOTAL \$ 1,400.00**

\*\* Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee



Schedule A (Continuation Sheet)  
 Monetary Contributions Received

SCHEDULE A

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I.D. NUMBER  
1363257

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/26/2014	Margaret V. Kaufman [REDACTED] Glendale, CA 91205	IND	Retired  N.A.	100.00	100.00	100 (P14)
02/10/2014	Seda Khojayan [REDACTED] Glendale, CA 91202	IND	Retired  N.A.	100.00	100.00	100 (P14)
02/10/2014	Carol Ann Lee [REDACTED] Glendale, CA 91207	IND	Homemaker  N.A.	100.00	100.00	100 (P14)
03/09/2014	Mary E. Lotz [REDACTED] Glendale, CA 91214	IND	Escrow Officel  Glencaks Escrow	100.00	100.00	100 (P14)
02/12/2014	Elizabeth A Manassezian [REDACTED] Glendale, CA 91206	IND	Businessperson  Boardwalk Realty Investments	500.00	500.00	500 (P14)
<b>SUBTOTAL \$</b>				900.00		

\*\* Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A

Statement covers period		<b>CALIFORNIA FORM 460</b>
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I.D. NUMBER  
1363257

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/10/2014	Aileen Marcoosi [REDACTED] Glendale, CA 91207	IND	Student  N.A.	100.00	100.00	100 (P14)
02/10/2014	Aren Marcoosi [REDACTED] Glendale, CA 91207	IND	Businessperson  Aren Marcoosi	100.00	100.00	100 (P14)
03/17/2014	Vrej Hordian [REDACTED] Glendale, CA 91206	IND	Designer Consultant  Hordian Associates	150.00	150.00	150 (P14)
02/20/2014	Carol Merry [REDACTED] Glendale, CA 91207	IND	Retired  N.A.	250.00	250.00	250 (P14)
02/10/2014	Elizabeth P. Mirzaiian [REDACTED] Glendale, CA 91206	IND	Director  Glendale Adventist Med. Center	150.00	150.00	150 (P14)

**SUBTOTAL \$ 750.00**

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Schedule A (Continuation Sheet)  
 Monetary Contributions Received

SCHEDULE A

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I.D. NUMBER  
1363257

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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/26/2014	Helen R. Morran-Wolf [REDACTED] Glendale, CA 91207	IND	Retired  N.A.	100.00	100.00	100 (P14)
02/07/2014	Cathy Nachum [REDACTED] Tarzana, CA 91356	IND	Retired  N.A.	500.00	500.00	500 (P14)
02/10/2014	Laurel Patric [REDACTED] Glendale, CA 91207	IND	Retired  N.A.	200.00	200.00	200 (P14)
02/26/2014	Louise Peebles [REDACTED] Glendale, CA 91202	IND	Retired  N.A.	100.00	100.00	100 (P14)
02/13/2014	Razmik Ross Perian [REDACTED] Glendale, CA 91207	IND	CIO  Superior Industries Inc	250.00	250.00	250 (P14)
<b>SUBTOTAL \$</b>				1,150.00		

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**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Statement covers period		<b>CALIFORNIA FORM 460</b>
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02/10/2014	Mary Lou Rhodes [REDACTED] Glendale, CA 91206	IND	Retired  r/a	100.00	100.00	100 (P14)
02/15/2014	Shawbeth Inc [REDACTED] Glendale, CA 91204	OTH		1,000.00	1,000.00	1,000 (P14)
02/10/2014	Simpson and Associates CPA'S [REDACTED] Glendale, CA 91202	OTH		100.00	100.00	100 (P14)
03/09/2014	Pamela Valentina Smith [REDACTED] Glendale, CA 91202	IND	Retired  N.A.	500.00	500.00	500 (P14)
02/12/2014	Sam Sarkis Solakyan [REDACTED] Sherman Oaks, CA 91403	IND	CEO  Global Holdings	1,000.00	1,000.00	1,000 (P14)
<b>SUBTOTAL \$</b>				<b>2,700.00</b>		

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Schedule A (Continuation Sheet)  
 Monetary Contributions Received

SCHEDULE A

Statement covers period		<b>CALIFORNIA FORM 460</b>
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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	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED):
02/18/2014	Suzanna Sophia Solakyan [REDACTED] Glendale, CA 91207	IND	Retired  N.A.	1,000.00	1,000.00	1,000 (P14)
02/10/2014	Ruth Ansoy Sowby [REDACTED] Glendale, CA 91207	IND	Instructor  Glendale Community College	100.00	100.00	100 (P14)
02/10/2014	Arlene Vidor [REDACTED] Glendale, CA 91205	IND	Retired  N.A.	800.00	800.00	800 (P14)
02/07/2014	Patrick Wade [REDACTED] Glendale, CA 91205	IND	Real Estate Investor  Patrick Wade	500.00	500.00	500 (P14)
03/11/2014	Steven B. Warheit [REDACTED] Glendale, CA 91207	IND	Retired  N.A.	100.00	100.00	100 (P14)

**SUBTOTAL \$ 2,500.00**

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**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A

Statement covers period		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Paula Devine For City Council 2014

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02/12/2014	Page Whyte [REDACTED] Montrose, CA 91020	IND	Businessperson  Broadmoor Financial Sevices	100.00	100.00	100 (214)
02/26/2014	Mary Wight [REDACTED] Glendale, CA 91206	IND	Retired  N.A.	250.00	250.00	250 (214)
03/11/2014	William Wilkerson [REDACTED] Glendale, CA 91207	IND	Engineer  URS	300.00	300.00	300 (214)
02/10/2014	Suzanne D. Zachary [REDACTED] Glendale, CA 91202	IND	Psychologist  Suzanne D. Zachary	250.00	250.00	250 (214)

**SUBTOTAL \$** 900.00

\*\* Contributor Codes: IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other PTY - Political Party SCC - Small Contributor Committee

**Schedule B - Part 1  
Loans Received**

SCHEDULE B - PART 1

Statement covers period from <u>01/01/2014</u> through <u>03/17/2014</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Paula Devine For City Council 2014

I.D. NUMBER  
1363257

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER	IF INDIVIDUAL, OCCUPATION & EMPLOYER IF COMMITTEE, ID NUMBER	(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
Paula Devine [REDACTED] Glendale, CA 91207			5000.00	<input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN	5000.00	0.00	5,000.00	CALENDAR YEAR 5,000
Contributor Code: IND					DUE DATE / /	INTEREST RATE 0.00%	DATE INCURRED 01/31/2014	PER ELECTION** 5,000 (P14)

<b>SUBTOTALS \$</b>	(b) 5,000.00	(c) 0.00	(d) 5,000.00	(e) 0.00
---------------------	-----------------	-------------	-----------------	-------------

**Schedule B Summary**

- Loans received this period  
(Total Column (b) plus unitemized loans of less than \$100.) ..... \$ 5,000.00
- Loans paid or forgiven this period ..... \$ 0.00  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (Subtract Line 2 from Line 1.) ..... **NET \$** 5,000.00  
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  
PTY - Political Party  
SCC - Small Contributor Committee

**Schedule C  
Nonmonetary Contributions Received**

SCHEDULE C

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2014	
through	03/17/2014	Page 16 of 21

NAME OF FILER Paula Devine For City Council, 2014

I.D. NUMBER  
1363257

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR	CONTRIBUTOR CODE	OCCUPATION & EMPLOYER OR COMMITTEE ID NO.	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
01/29/2014	Arthur Devine [REDACTED] Glendale, CA 91207	IND	Retired N.A.	PO Box	80.00	763.32	763 (P14)
02/04/2014	Arthur Devine [REDACTED] Glendale, CA 91207	IND	Retired N.A.	Printing of Donation Forms	32.70	763.32	763 (P14)
02/05/2014 TO 02/20/2014	Arthur Devine [REDACTED] Glendale, CA 91207	IND	Retired N.A.	Printing of Flyers	40.88	763.32	763 (P14)
02/13/2014	Arthur Devine [REDACTED] Glendale, CA 91207	IND	Retired N.A.	Printing	261.60	763.32	763 (P14)
02/20/2014	Arthur Devine [REDACTED] Glendale, CA 91207	IND	Retired N.A.	Web Hosting	72.06	763.32	763 (P14)

**SUBTOTAL \$** 487.24

**Schedule C Summary**

1. Amount received this period - itemized contributions (Includes all Schedule C subtotals) .....	\$	763.32
2. Amount received this period - unitemized .....	\$	0.00
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A Lines 4 and 10.) .....	<b>TOTAL \$</b>	<b>763.32</b>

Contributor Codes  
 IND - Individual  
 COM - Recipient Committee (other than PTY or SCC)  
 OTH - Other  
 PTY - Political Party  
 SCC - Small Contributor Committee



**Schedule C (Continued)  
Nonmonetary Contributions Received**

SCHEDULE C

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2014	
through	03/17/2014	Page 17 of 21

NAME OF FILER Paula Devine For City Council 2014

I.D. NUMBER  
1363257

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR	CONTRIBUTOR CODE	OCCUPATION & EMPLOYER OR COMMITTEE ID NO.	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
03/05/2014	Arthur Devine [REDACTED] Glendale, CA 91207	IND	Retired  N.A.	Printing	106.22	763.32	763 (P14)
03/14/2014	Arthur Devine [REDACTED] Glendale, CA 91207	IND	Retired  N.A.	Printing	167.86	763.32	763 (P14)

**SUBTOTAL \$** 276.08

\*\* Contributor Codes: IND - Individual COM - Recipient Committee OTH - Other PTY - Political Party SCC - Small Contributor Committee

FPPC Form 460 (Jan/05)  
FPPC Toll-Free Helpline: 888/ASK-FPPC

**Schedule E  
Payments Made**

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2014	
through	03/17/2014	Page 18 of 21
NAME OF FILER Paula Devine For City Council 2014		I.D. NUMBER 1363257

**CODES:** If one of the following 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 production costs                            |
| FIL candidate filing / ballot fees                      | PHO phone banks                               | TRC candidate travel, lodging and meals                       |
| FND fundraising expenses                                | POL polling and survey research               | TRS staff/spouse travel, lodging and meals                    |
| IND independent expenditures supporting/opposing others | 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	CODE or DESCRIPTION OF PAYMENT	AMOUNT PAID
Blair Biggs Campaigns [REDACTED] Los Angeles, CA 90024	CNS	2,500.00
Blair Biggs Campaigns [REDACTED] Los Angeles, CA 90024	CNS	2,500.00
Cogs South Signs [REDACTED] Santa Ana, CA 92707	CMP	2,645.00
<b>SUBTOTAL \$</b>		<b>7,645.00</b>

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 10,330.43
2. Unitemized payments made this period of under \$100	\$ 125.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ 0.00
4. Total payments made this period. (Add Line 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	<b>TOTAL \$ 10,455.43</b>

**Schedule E (Continuation Sheet)  
Payments Made**

SCHEDULE E

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2014	
through	03/17/2014	Page 19 of 21
NAME OF FILER Paula Devine For City Council 2014		I.D. NUMBER 1363257

**CODES:** If one of the following 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 production costs                            |
| FIL candidate filing / ballot fees                      | PHO phone banks                               | TRC candidate travel, lodging and meals                       |
| FND fundraising expenses                                | POL polling and survey research               | TRS staff/spouse travel, lodging and meals                    |
| IND independent expenditures supporting/opposing others | 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	CODE or	DESCRIPTION OF PAYMENT	AMOUNT PAID
Paula Devine [REDACTED] Glendale, CA 91207	FIL		1,925.00
Padilla & Associates [REDACTED] Los Angeles, CA 90048	PRO		353.50
Voterlink [REDACTED] Alpine, UT 84004	WEB		406.93

**SUBTOTAL \$ 2,685.43**

**Schedule F  
Accrued Expenses (Unpaid Bills)**

SCHEDULE F

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2014	
through	03/17/2014	Page 20 of 21
NAME OF FILER Paula Devine For City Council 2014		I.D. NUMBER 1363257

**CODES:** If one of the following 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 production costs                            |
| FIL candidate filing / ballot fees                      | PHO phone banks                               | TRC candidate travel, lodging and meals                       |
| FND fundraising expenses                                | POL polling and survey research               | TRS staff/spouse travel, lodging and meals                    |
| IND independent expenditures supporting/opposing others | 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 CREDITOR	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Weberg Technology Consulting [REDACTED] La Grange, KY 40031	WEB	0.00	1,000.00	0.00	1,000.00

**SUBTOTALS \$ 0.00 \$ 1,000.00 \$ 0.00 \$ 1,000.00**

**Schedule F Summary**

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) ..... **INCURRED TOTALS \$ 1,000.00**
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) ..... **PAID TOTALS \$ 0.00**
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, column A, Line 9.) ..... **NET \$ 1,000.00**

**Schedule G  
Payments Made by an Agent or Independent  
Contractor (on Behalf of This Committee)**

SCHEDULE G

Statement covers period from 01/01/2014 through 03/17/2014	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Paula Devine For City Council 2014

ID NUMBER  
1363257

NAME OF AGENT OR INDEPENDENT CONTRACTOR  
Paula Devine

**CODES:** If one of the following 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 production costs
FIL candidate filing / ballot fees	PHO phone banks	TRC candidate travel, lodging and meals
FND fundraising expenses	POL polling and survey research	TRS staff/spouse travel, lodging and meals
IND independent expenditures supporting/opposing others	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)

\* Payments that re contributions or independent expenditures are also summarized on Schedule D

NAME AND ADDRESS OF PAYEE OR CREDITOR	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
City of Glendale [REDACTED] Glendale, CA 91206	FIL		1,925.00

**TOTAL \$ 1,925.00**