

# Recipient Committee Campaign Statement — Short Form

Type or print in ink.

SHORT FORM

SEE INSTRUCTIONS ON REVERSE

For use by recipient committees which have not received a contribution or other receipt which must be itemized, have not received or made loans, and have no outstanding accrued expenses or enforceable promises received.

Check one of the following boxes to indicate the type of statement being filed:

- Pre-election Statement   
  Quarterly Statement   
  Supplemental Pre-election Statement (Attach a completed Form 495 to this statement.)  
 Semi-annual Statement   
  Special Odd-year Campaign Report   
  Termination Statement (Attach a completed Form 415 to this statement.)

Statement covers period from <u>7-1-12</u> through <u>12-31-12</u>	CITY CLERK Date Stamp 2013 MAR -7 PM 4:00	RECEIVED STATE OF CALIFORNIA 450 Page <u>1</u> of <u>3</u> For Official Use Only 745922
Date of election if applicable: (Month), Day, Year		

## I Committee Information

NAME OF COMMITTEE  
Glendale city Employees ASSOC.

ADDRESS OF COMMITTEE (NO. AND STREET)  
[REDACTED]

CITY STATE ZIP CODE  
Glendale CA 91206

AREA CODE/PHONE NUMBER  
[REDACTED]

I.D. NUMBER  
745922

NAME OF TREASURER  
Evelle Matary

PERMANENT ADDRESS OF TREASURER (NO. AND STREET)  
[REDACTED]

CITY STATE ZIP CODE  
[REDACTED]

AREA CODE/DAYTIME PHONE NUMBER  
[REDACTED]

## II Committee Type (check boxes) Is this a controlled committee? Yes No Is this a sponsored committee? Yes No Is this a broad based committee? Yes No

## III Verification

This committee has not received any contributions, cumulative contributions or miscellaneous receipts from a single source totaling \$100 or more which must be itemized, and this committee has not made or received loans, and has no accrued expenses or outstanding enforceable promises received.

I have used all reasonable diligence in preparing this statement. I have reviewed the 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 3-1-13 At Glendale CA By [Signature]  
DATE CITY AND STATE SIGNATURE OF TREASURER

An officeholder, candidate, or state measure proponent who controls a committee must also verify the campaign statement. I have used all reasonable diligence and to the best of my knowledge the treasurer has used all reasonable diligence in preparing this statement. I have reviewed the 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 \_\_\_\_\_ At \_\_\_\_\_ By \_\_\_\_\_  
DATE CITY AND STATE SIGNATURE OF OFFICEHOLDER, CANDIDATE, PROPONENT, OR RESPONSIBLE OFFICER

Executed on \_\_\_\_\_ At \_\_\_\_\_ By \_\_\_\_\_  
DATE CITY AND STATE SIGNATURE OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

Executed on \_\_\_\_\_ At \_\_\_\_\_ By \_\_\_\_\_  
DATE CITY AND STATE SIGNATURE OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

FOR INFORMATION REQUIRED TO BE PROVIDED TO YOU PURSUANT TO THE INFORMATION PRACTICES ACT OF 1977, SEE INFORMATION MANUAL ON CAMPAIGN DISCLOSURE PROVISIONS OF THE POLITICAL REFORM ACT.

**Recipient Committee  
Campaign Statement  
Summary Page**

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

SHORT FORM

Statement covers period  
from 7-1-13  
through 12-31-13

CALIFORNIA  
FORM **450**

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NAME OF COMMITTEE

I.D. NUMBER

GCEA Better Government committee

745922

**Expenditures Made**

- |  |  |
|--|--|
| 1. Expenditures of \$100 or more made this period .....                    | \$ <u>1,922.40</u>                             |
| 2. Expenditures under \$100 made this period (Not itemized.) .....         | <u>0</u>                                       |
| 3. SUBTOTAL EXPENDITURES MADE THIS PERIOD .....                            | Add Lines 1 + 2 \$ <u>1,922.40</u>             |
| 4. Nonmonetary Adjustment .....  | From Line 8 Below <u>0</u>                     |
| 5. Total expenditures made from previous statement .....                   | Previous Summary Page, Line 6 \$ <u>2,300-</u> |
| <i>(If this is the first statement for the calendar year, enter zero.)</i> |  |
| 6. TOTAL EXPENDITURES MADE TO DATE .....                                   | Add Lines 3 + 4 + 5 \$ <u>4,222.40</u>         |

**Contributions Received**

- |  |   |
|--|---|
| 7. Monetary contributions received this period .....                       | \$ <u>2,592-</u>                                  |
| 8. Non-monetary contributions received this period .....                   | <u>0</u>  |
| 9. Total contributions received from previous statement .....              | Previous Summary Page, Line 10 \$ <u>2,763.75</u> |
| <i>(If this is the first statement for the calendar year, enter zero.)</i> |   |
| 10. TOTAL CONTRIBUTIONS RECEIVED TO DATE .....                             | Add Lines 7 + 8 + 9 \$ <u>5,355.75</u>            |

**Current Cash Statement**

- |   |  |
|---|--|
| 11. Beginning cash balance .....          | Previous Summary Page, Line 15 \$ <u>69.88</u>                 |
| 12. Cash receipts this period .....       | Line 7 above <u>2,592-</u>                                     |
| 13. Miscellaneous increases to cash ..... | \$ <u>0</u>  |
| 14. Cash expenditures this period .....   | Line 3 above <u>1,922.40</u>                                   |
| 15. ENDING CASH BALANCE THIS PERIOD ..... | Add Lines 11 + 12 + 13, then subtract Line 14 \$ <u>739.48</u> |

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Campaign Statement – Short Form

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**CALIFORNIA FORM 450**

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NAME OF COMMITTEE

G-CEA Better Government committee

I.D. NUMBER

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5. Payments Made (If more space is needed, use additional copies of this page for continuation sheets.)

DATE*	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF PAYMENT	NAME OF CANDIDATE AND OFFICE OR NAME OF BALLOT MEASURE AND BALLOT NUMBER OR LETTER AND JURISDICTION	AMOUNT THIS PERIOD	CUMULATIVE AMOUNTS TO DATE*
7-1-12 to 12-31-12	United Public Emp. Political Action Committee - (PAC) ID # 1306273 [REDACTED] sacramento, CA 95814	contribution	UPE-PAC <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.	714-	Calendar Year \$ <u>714</u> Other \$ _____
7-1-12 8-31-12	Keeslar & Associate Government Relation ID # 1306273 [REDACTED] sacramento - CA 95814	contribution	lobbying consulting <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.	900	Calendar Year \$ <u>3,200-</u> Other \$ _____
8-27-12	UPE-PAC Legislative conference	Independent Unions legislative conference	Conference <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.	308.40	Calendar Year \$ <u>308.40</u> Other \$ _____
			<input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.		Calendar Year \$ _____ Other \$ _____
<b>SUBTOTAL</b>				<b>\$ 1,922.40</b>	<b>\$ 3,222.40</b>

\* Required only for payments which are contributions or independent expenditures.