

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in Ink.

COVER PAGE

Date Stamp
CITY CLERK
2009 MAR 26 PM 4:59

CALIFORNIA 460
2001/02
FORM
Page 1 of 22
For Official Use Only

Statement covers period
from 2/22/09
through 3/21/09

Date of election if applicable:
(Month, Day, Year)
04/07/09

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.

- Officeholder, Candidate Controlled Committee
 - State Candidate Election Committee
 - Recall
(Also Complete Part 5)
- General Purpose Committee
 - Sponsored
 - Small Contributor Committee
 - Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
 - Controlled
 - Sponsored
(Also Complete Part 6)
- Primarily Formed Candidate/Officeholder Committee
(Also Complete Part 7)

2. Type of Statement:

- Preelection Statement
- Semi-annual Statement
- Termination Statement
(Also file a Form 410 Termination)
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report
- Supplemental Preelection Statement - Attach Form 495

3. Committee Information

I.D. NUMBER
1231806

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

FRANK QUINTERO FOR CITY COUNCIL

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE
Glendale, CA 91207

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

Jane Quintero

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
Glendale, CA 91207

NAME OF ASSISTANT TREASURER, IF ANY

MAILING 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 and in the attached schedules 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 3/21/09
Date
Executed on 3/21/09
Date
Executed on _____
Date
Executed on _____
Date

By Jane Quintero
Signature of Treasurer or Assistant Treasurer
By Frank Quintero
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

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

Type or print in Ink.

COVER PAGE - PART 2

CALIFORNIA
FORM **460**

Page 2 of 22

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
FRANK QUINTERO

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
GLENDALE CITY COUNCIL

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 ADDRESS | 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 ADDRESS | 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 |
|----------------------|--------------|---|

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

| | |
|-----------------------|---------------------|
| OFFICE SOUGHT OR HELD | DISTRICT NO. IF ANY |
|-----------------------|---------------------|

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 |

Attach continuation sheets if necessary

**Campaign Disclosure Statement
Summary Page**

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

SUMMARY PAGE

| | |
|--|-------------------------------|
| Statement covers period from <u>2/22/09</u> | CALIFORNIA FORM 460 |
| through <u>3/21/09</u> | |
| Page <u>3</u> of <u>22</u> | I.D. NUMBER <u>1231806</u> |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

FRANK QUINTERO FOR CITY COUNCIL

Contributions Received

| | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|---|--|--|
| 1. Monetary Contributions Schedule A, Line 3 | \$ <u>23,660</u> | \$ <u>23,760</u> |
| 2. Loans Received Schedule B, Line 3 | \$ <u>0</u> | \$ <u>0</u> |
| 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 | \$ <u>23,660</u> | \$ <u>23,760</u> |
| 4. Nonmonetary Contributions Schedule C, Line 3 | \$ <u>945</u> | \$ <u>945</u> |
| 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 | \$ <u>24,605</u> | \$ <u>24,705</u> |

**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 | \$ _____ | \$ _____ |

Expenditures Made

| | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|---|--|--|
| 6. Payments Made Schedule E, Line 4 | \$ <u>25,782.10</u> | \$ <u>35,880.48</u> |
| 7. Loans Made Schedule H, Line 3 | \$ <u>0</u> | \$ <u>0</u> |
| 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 | \$ <u>25,782.10</u> | \$ <u>35,880.48</u> |
| 9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 | \$ <u>-1513.05</u> | \$ <u>0</u> |
| 10. Nonmonetary Adjustment Schedule C, Line 3 | \$ <u>945.00</u> | \$ <u>945.00</u> |
| 11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10 | \$ <u>25,214.05</u> | \$ <u>36,825.48</u> |

**Expenditure Limit Summary for State
Candidates**

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

| Date of Election (mm/dd/yy) | Total to Date |
|--------------------------------|---------------|
| ____/____/____ | \$ _____ |
| ____/____/____ | \$ _____ |

Current Cash Statement

| | |
|---|---------------------|
| 12. Beginning Cash Balance Previous Summary Page, Line 16 | \$ <u>48,787.52</u> |
| 13. Cash Receipts Column A, Line 3 above | \$ <u>23,660.00</u> |
| 14. Miscellaneous Increases to Cash Schedule I, Line 4 | \$ <u>0</u> |
| 15. Cash Payments Column A, Line 8 above | \$ <u>25,782.10</u> |
| 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 | \$ <u>46,665.42</u> |

If this is a termination statement, Line 16 must be zero.

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

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

17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ 0

Cash Equivalents and Outstanding Debts

| | |
|---|-------------|
| 18. Cash Equivalents See instructions on reverse | \$ <u>0</u> |
| 19. Outstanding Debts Add Line 2 + Line 9 in Column B above | \$ <u>0</u> |

**Schedule A
Monetary Contributions Received**

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

SCHEDULE A

| | | |
|--|--|-------------------------------|
| Statement covers period from <u>2/22/09</u> | | CALIFORNIA FORM 460 |
| through <u>3/21/09</u> | | |
| Page <u>4</u> of <u>22</u> | | I.D. NUMBER 1231806 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

FRANK QUINTERO FOR CITY COUNCIL

| 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 THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|---|---|---|-----------------------------|--|---------------------------------------|
| 3/15/09 | Fred Dona [REDACTED] Montrose, CA 91021 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Accountant State of CA | 100 | 100 | 100 |
| 2/27/09 | Jose Granda [REDACTED] Glendale, CA 91204 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 1000 | 1000 | 1000 |
| 2/26/09 | Michiyo Ando [REDACTED] Torrance, CA 90503 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Reflexologist own business | 100 | 100 | 100 |
| 2/28/09 | Scott Solis [REDACTED] La Crescenta, CA 91214 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Attorney Law Offices of Scott & Solis | 1000 | 1000 | 1000 |
| 2/26/09 | David Meyers [REDACTED] La Crescenta, CA 91214 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Pharmacy Desoto Pharmacy | 500 | 500 | 500 |

SUBTOTALS \$ 2700

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 22,474
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 4,186
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) TOTAL \$ 23,660

*Contributor Codes
IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

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

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

SCHEDULE A (CONT.)

| | |
|--|--------------------------------|
| Statement covers period from <u>2/22/09</u> | CALIFORNIA FORM 460 |
| through <u>3/21/09</u> | |
| Page <u>5</u> of <u>22</u> | |

| | |
|---|-------------------------------|
| NAME OF FILER FRANK QUINTERO FOR CITY COUNCIL | I.D. NUMBER 1231806 |
|---|-------------------------------|

| 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 THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|--|---|--|-----------------------------|---|------------------------------------|
| 3/08/09 | Moses Boyadjian [REDACTED] Glendale CA 91203 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Internet Marketing Cyber Pro media, Inc | 250 | 250 | 250 |
| 3/8/09 | Emin Adjemian [REDACTED] Glendale, CA | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Insurance Agent WFG | 150 | 150 | 150 |
| 3/8/09 | Avetis Eskanian [REDACTED] Glendale CA 91208 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Owner Avis Roto Die | 300 | 300 | 300 |
| 3/8/09 | Mukueh Bukojian [REDACTED] Glendale, CA 91202 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Self Employed | 300 | 300 | 300 |
| 3/8/09 | Sheila Murray [REDACTED] Glendale CA 91206 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Retired | 200 | 200 | 200 |

SUBTOTAL \$ 1200

1200

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IND - Individual
COM - Recipient Committee
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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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

SCHEDULE A (CONT.)

| | | |
|---------------------------------|--|-------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from <u>2/22/09</u> | | |
| through <u>3/21/09</u> | | Page <u>6</u> of <u>22</u> |
| NAME OF FILER | | I.D. NUMBER |
| FRANK QUINTERO FOR CITY COUNCIL | | 1231806 |

| 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 THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 3/16/09 | H.J. Astengo [REDACTED] Glendale, CA 91207 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Retired | 500 | 500 | 500 |
| 3/19/09 | Kamran Benji [REDACTED] Arch Investments LA CA 90021 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 300 | 300 | 300 |
| 3/19/09 | California Paper Bag [REDACTED] Glendale, CA 91207 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 1000 | 1000 | 1000 |
| 3/19/09 | George Sevilla [REDACTED] Alta Loma, CA 91701 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Lender America United Bank | 100 | 100 | 100 |
| 3/19/09 | Leonor Gavina-Valls [REDACTED] Glendale CA 91207 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | VP marketing F Genra & Sons | 150 | 150 | 150 |
| SUBTOTAL \$ | | | | 2050 | | |

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 (other than PTY or SCC)
 OTH - Other (e.g., business entity)
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 SCC - Small Contributor Committee

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

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

SCHEDULE A (CONT.)

| | | |
|--|--|-------------------------------|
| Statement covers period from <u>2/22/09</u> through <u>3/21/09</u> | | CALIFORNIA FORM 460 |
| | | |
| NAME OF FILER FRANK QUINTERO FOR CITY COUNCIL | | I.D. NUMBER 1231806 |

| 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 THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 3/19/09 | Hector Carrion [REDACTED] Upland, CA 91784 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Retired | 500 | 500 | 500 |
| 3/19/09 | Astral Pharmacy [REDACTED] LA CA 90028 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 500 | 500 | 500 |
| 3/19/09 | Avanti Trattoria, Inc DBA Divina Cucina [REDACTED] Monterose, CA 91020 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 300 | 300 | 300 |
| 3/19/09 | Massage Envy, Glendale [REDACTED] Glendale, CA | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 100 | 100 | 100 |
| 3/19/09 | R. Martin & Associates [REDACTED] Glendale CA 91203 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 1000 | 1000 | 1000 |
| SUBTOTALS | | | | 2400 | | |

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COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

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

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

SCHEDULE A (CONT.)

| | | |
|---------------------------------|--|-------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from <u>2/22/09</u> | | |
| through <u>3/21/09</u> | | Page <u>8</u> of <u>22</u> |
| NAME OF FILER | | I.D. NUMBER |
| FRANK QUINTERO FOR CITY COUNCIL | | 1231806 |

| 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 THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|--|---|--|-----------------------------|---|------------------------------------|
| 3/19/09 | El mambi Meat Market [REDACTED] Glendale CA 91205 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 500 | 500 | 500 |
| 3/19/09 | Mayer Brown, LLP [REDACTED] Los Angeles, CA 90011 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 500 | 500 | 500 |
| 3/19/09 | Turiani Properties LLC [REDACTED] Glendale, CA 91208 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 500 | 500 | 500 |
| 3/19/09 | Zinnah Chowdhury Deshi Food Inc [REDACTED] Los Angeles, CA 90020 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 500 | 500 | 500 |
| 3/19/09 | Ronald Nakawatase [REDACTED] La Canada, CA 91011 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | CPA OWN | 500 | 500 | 500 |

SUBTOTAL \$ 2500

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IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

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

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

SCHEDULE A (CONT.)

| | |
|--|---|
| Statement covers period from <u>2/22/09</u> through <u>3/21/09</u> | CALIFORNIA FORM 460 Page <u>9</u> of <u>22</u> |
|--|---|

| | |
|---|-------------------------------|
| NAME OF FILER FRANK QUINTERO FOR CITY COUNCIL | I.D. NUMBER 1231806 |
|---|-------------------------------|

| 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 THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|--|---|--|-----------------------------|---|------------------------------------|
| 3/19/09 | Nasima Faruk [REDACTED] Arcadia CA 91007 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Consultant | 500 | 500 | 500 |
| 3/19/09 | Saihum Hossain [REDACTED] Pacific Palisades, CA 90272 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | owner Sweet oven Inc | 500 | 500 | 500 |
| 3/19/09 | Zakia, MeraJ [REDACTED] Los Angeles CA 9004 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Senior Analyst Coca Cola Enterprises | 125 | 125 | 125 |
| 3/19/09 | Shawbeth Inc [REDACTED] Glendale CA 91204 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 1000 | 1000 | 1000 |
| 3/19/09 | Pacific Town Center [REDACTED] Glendale, CA 91204 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 1000 | 1000 | 1000 |

SUBTOTAL \$ **3125**

*Contributor Codes
IND - individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

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

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

SCHEDULE A (CONT.)

| | | |
|--|--|--|
| Statement covers period from <u>2/22/09</u> through <u>3/21/09</u> | | CALIFORNIA FORM 460 Page <u>10</u> of <u>22</u> |
| | | |

NAME OF FILER
FRANK QUINTERO FOR CITY COUNCIL

| 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 THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|--|---|--|-----------------------------|---|------------------------------------|
| 3/19/09 | Finchley Sports Car Inc [REDACTED] Glendale, CA 9204 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 1000 | 1000 | 1000 |
| 3/19/09 | I & G Pharmacy [REDACTED] Glendale CA 91205 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 300 | 300 | 300 |
| 3/19/09 | EMC Group Inc [REDACTED] Los Angeles CA 90026 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 100 | 100 | 100 |
| 3/19/09 | Malekian & Assoc [REDACTED] Glendale CA 91202 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 250 | 250 | 250 |
| 3/19/09 | Qus Gomez [REDACTED] La Canada Flintridge, CA | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 100 | 100 | 100 |
| SUBTOTAL \$ | | | | 1750 | | |

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

| | | |
|---------------------------------|--|-----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from <u>2/22/09</u> | | |
| through <u>3/21/09</u> | | Page <u>11</u> of <u>22</u> |
| NAME OF FILER | | I.D. NUMBER |
| FRANK QUINTERO FOR CITY COUNCIL | | 1231806 |

| 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 THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 3/19/09 | Laurie Collins [REDACTED] Glendale CA 91207 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 150 | 150 | 150 |
| 3/19/09 | ANKIN Krikorian [REDACTED] Glendale CA 91206 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 250 | 250 | 250 |
| 3/19/09 | Dario Frommer [REDACTED] Glendale CA 91207 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Attorney | 250 | 250 | 250 |
| 3/19/09 | Manuel Remon [REDACTED] Glendale CA 91206 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Banker America's United Bank | 250 | 250 | 250 |
| 3/19/09 | Arthur Devine [REDACTED] Glendale CA 91207 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Retired | 300 | 300 | 300 |
| SUBTOTAL \$ | | | | <u>1200</u> | | |

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 (other than PTY or SCC)
 OTH - Other (e.g., business entity)
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

| | |
|--|-------------------------------|
| Statement covers period from <u>2/22/09</u> through <u>3/21/09</u> | CALIFORNIA FORM 460 |
| | Page <u>12</u> of <u>22</u> |
| | I.D. NUMBER 1231806 |

NAME OF FILER
FRANK QUINTERO FOR CITY COUNCIL

| 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 THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 3/19/09 | Delma Kirch [REDACTED] Glendale CA 91202 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Finance Western Asset | 250 | 250 | 250 |
| 3/19/09 | Wendy Pagnone [REDACTED] Glendale CA 91208 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Real Estate Pagnone Realty | 100 | 100 | 100 |
| 3/19/09 | Hilario Navarro [REDACTED] La Canada, CA 91011 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | President Bonzanza Foods | 1000 | 1000 | 1000 |
| 3/19/09 | Stephan Moradians [REDACTED] Montrose CA 91020 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Dentist owner | 200 | 200 | 200 |
| 3/19/09 | Vista Investments [REDACTED] Los Angeles, CA 90045 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 1000 | 1000 | 1000 |
| SUBTOTAL \$ | | | | 2550 | | |

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 (other than PTY or SCC)
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 SCC - Small Contributor Committee

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

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

SCHEDULE A (CONT.)

| | |
|--|-----------------------------|
| Statement covers period from <u>2/22/09</u> through <u>3/21/09</u> | CALIFORNIA FORM 460 |
| | Page <u>13</u> of <u>27</u> |
| | I.D. NUMBER 1231806 |

NAME OF FILER
FRANK QUINTERO FOR CITY COUNCIL

| 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 THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|---|---|-----------------------------|--|---------------------------------------|
| 3/14/09 | Gary R. Cornell [REDACTED] Glendale CA 91208 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Retired | 200 | 200 | 200 |
| 3/8/09 | Elmira Ananikyan [REDACTED] Glendale, CA 91206 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Teacher LA USD | 250 | 250 | 250 |
| 3/8/09 | Lusine Ishtoyan [REDACTED] Glendale CA 91202 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Pharmacist I S & Pharmacy | 200 | 200 | 200 |
| 3/8/09 | Jack Iskanian [REDACTED] Glendale, CA 91202 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | President Ishtoyan Sacer Academy | 500 | 500 | 500 |
| 3/8/09 | Christina Kegayan [REDACTED] Sun Valley, CA 91352 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Consultant Political Fundraiser | 250 | 250 | 250 |
| SUBTOTAL \$ | | | | <u>1400</u> | | |

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 OTH - Other (e.g., business entity)
 PTY - Political Party
 SCC - Small Contributor Committee

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

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

SCHEDULE A (CONT.)

| | | |
|--|--|-------------------------------|
| Statement covers period from <u>2/22/09</u> through <u>3/21/09</u> | | CALIFORNIA FORM 460 |
| | | Page <u>14</u> of <u>22</u> |
| NAME OF FILER <u>Frank Quintero for City Council</u> | | I.D. NUMBER <u>1231806</u> |

| 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 THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|--|---|--|-----------------------------|---|------------------------------------|
| 3/19/09 | Diverse Strategies For Organizing, [REDACTED] Los Angeles CA 90041 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 250 | 250 | 250 |
| 3/19/09 | Irshad VK Hague [REDACTED] Ojai, CA 93023 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Owner Stor # ALL | 149 | 149 | 149 |
| 3/21/09 | Noubar's Pharmacy Noubar Gerovkian [REDACTED] Los Angeles CA 90027 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Pharmacist Noubar's ELADOBE | 200 | 200 | 200 |
| 3/19/09 | Gorgee Enterprises, Inc [REDACTED] Pasadena, CA 91106 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 1000 | 1000 | 1000 |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| SUBTOTAL \$ | | | | <u>1599</u> | | |

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 (other than PTY or SCC)
 OTH - Other (e.g., business entity)
 PTY - Political Party
 SCC - Small Contributor Committee

**Schedule C
Nonmonetary Contributions Received**

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

SCHEDULE C

| | |
|--|-------------------------------|
| Statement covers period from <u>2/22/09</u> through <u>3/21/09</u> | CALIFORNIA FORM 460 |
| | Page <u>15</u> of <u>22</u> |
| I.D. NUMBER 1231806 | |

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

FRANK QUINTERO FOR CITY COUNCIL

| 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) | DESCRIPTION OF GOODS OR SERVICES | AMOUNT/ FAIR MARKET VALUE | CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|--|---|--|----------------------------------|---------------------------|---|------------------------------------|
| 3/19/09 | Porto's Bakery [REDACTED] Glendale, CA | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | Desserts & Beverages Wine | \$945. | \$945. | \$945. |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | | |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | | |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | | |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$

Schedule C Summary

- Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) \$ 945
- Amount received this period – unitemized nonmonetary contributions of less than \$100 \$ 0
- Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) TOTAL \$ 945

*Contributor Codes
IND – Individual
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OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

**Schedule E
Payments Made**

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

SCHEDULE E

| | |
|--|--------------------------------|
| Statement covers period from <u>2/22/09</u> | CALIFORNIA FORM 460 |
| through <u>3/21/09</u> | |
| Page <u>16</u> of <u>22</u> | I.D. NUMBER 1231806 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

FRANK QUINTERO FOR CITY COUNCIL

CODES: If one of the following codes 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 airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | 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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| Sharif Rahman [REDACTED] Van Nuys, CA 91405 | LIT | | 800.00 |
| USPC | POS | | 2500.00 |
| Copies Unlimited [REDACTED] LOS ANGELES, CA 90027 | LIT | INV#191145 | 286.32 |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 3586.32

Schedule E Summary

- | | |
|--|----------------------------------|
| 1. Itemized payments made this period. (Include all Schedule E subtotals.) | \$ <u>25,662.10</u> |
| 2. Unitemized payments made this period of under \$100 | \$ <u>120.</u> |
| 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) | \$ <u>0</u> |
| 4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) | TOTAL \$ <u>25,782.10</u> |

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

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

SCHEDULE E (CONT.)

| | | |
|---------------------------------|---------|-------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 2/22/09 | |
| through | 3/21/09 | Page <u>17</u> of <u>22</u> |
| NAME OF FILER | | I.D. NUMBER |
| FRANK QUINTERO FOR CITY COUNCIL | | 1231806 |

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes 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 airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | 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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|-------------------------------|-------------|
| COPIES UNLIMITED [REDACTED] LOS ANGELES, CA 90027 | LIT | | INV#19159 1500 1710.51 | 3210.51 |
| OFFICE DEPOT [REDACTED] GLENDALE, CA 91204 | OFC | | 97.98 3/2/09 155.87 3/4/09 | 253.85 |
| STAPLES [REDACTED] GLENDALE, CA 91203 | OFC | | | 97.08 |
| RAY TRIM, [REDACTED] Montrose, CA 91021 | CNS | | 1500 1000 | 2500.00 |
| GLENDALE FOCUS [REDACTED] GLENDALE, CA 91203 | PRT | | | 720.00 |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 5070.93

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

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

SCHEDULE E (CONT.)

| | | |
|---------------------------------|---------|-------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 2/22/09 | |
| through | 3/21/09 | Page <u>18</u> of <u>22</u> |
| NAME OF FILER | | I.D. NUMBER |
| FRANK QUINTERO FOR CITY COUNCIL | | 1231806 |

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes 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 airtime and production costs |
| FIL candidate filing/bailot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | 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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|--|-------------|
| COLBY POSTER PRINTING [REDACTED] LOS ANGELES, CA 90015 | | SIGNS <i>Chase Card Services 1513.05</i> | 1513.05 |
| JOYCE SOKOLOFF [REDACTED] GLENDALE, CA 91208 | LIT | REIMBURSE POSTAGE 2123.11 PRINTING 599.42 | 2722.53 |
| JOYCE SOKOLOFF [REDACTED] GLENDALE, CA 91208 | LIT | REIMBURSE POSTAGE 1158.69 PRINTING 804.31 | 1963.00 |
| JOYCE SOKOLOFF [REDACTED] GLENDALE, CA 91208 | LIT | REIMBURSE POSTAGE 1353.86 PRINTING 474.14 | 1828.00 |
| SHARIF RAHMAN [REDACTED] <i>Van Nuys, CA 91405</i> | LIT | | 1500.00 |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 9526.58

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

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

SCHEDULE E (CONT.)

| | |
|--|-------------------------------|
| Statement covers period from <u>2/22/09</u> through <u>3/21/09</u> | CALIFORNIA FORM 460 |
| | Page <u>19</u> of <u>22</u> |
| | I.D. NUMBER 1231806 |

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

FRANK QUINTERO FOR CITY COUNCIL

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- | | | |
|--|--|--|
| OMP 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 airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PFO 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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|---|-------------|
| JANE QUINTERO [REDACTED] GLENDALE, CA 91207 | | REIMBURSE EXPENSE FOR CAMPAIGN OPEN HOUSE COSTCO - 197.90 RALPHS 5.61 | 203.51 |
| FRY'S ELECTRONICS | PHO | | 52.99 |
| Copies Unlimited [REDACTED] LOS ANGELES, CA 90027 | LIT | | 4000.00 |
| CHASE CARD SERVICES [REDACTED] PALATINE, IL 60094-4014 | PHO | ATT BUS PHONE PMT -2000 671 | 2671.00 |
| CHASE CARD SERVICES [REDACTED] PALATINE, IL 60094-4014 | | OFFICE OPENING VIRGILS-12.93; SMART & FINAL-73.22; FST FR THE EST-69.55 | 155.70 |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 7083.20

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

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

SCHEDULE E (CONT.)

| | |
|--|--------------------------------|
| Statement covers period from <u>2/22/09</u> through <u>3/21/09</u> | CALIFORNIA FORM 460 |
| | Page <u>20</u> of <u>22</u> |
| | I.D. NUMBER 1231806 |

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

FRANK QUINTERO FOR CITY COUNCIL

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | |
|--|--|--|
| OMP 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 airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | 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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|--------------------------------|-------------|
| CHASE CARD SERVICES ██████████ PALATINE, IL 60094-4014 | | GAS EXP 2000-C-STORE CHEVRON | 56.46 |
| CHASE CARD SERVICES ██████████ PALATINE, IL 60094-4014 | | CAMPAIGN WORKER FOOD -EAT WELL | 88.36 |
| CHASE CARD SERVICES ██████████ PALATINE, IL 60094-4014 | POS | RALPHS - STAMPS | 84.00 |
| CHASE CARD SERVICES ██████████ PALATINE, IL 60094-4014 | LIT | FED-EX | 15.41 |
| CHASE CARD SERVICES ██████████ PALATINE, IL 60094-4014 | WEB | CONSTANT CONTACT | 30.00 |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 274.23

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

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

SCHEDULE E (CONT.)

| | | |
|---------------------------------|---------|-------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 2/22/09 | |
| through | 3/21/09 | Page <u>21</u> of <u>22</u> |
| NAME OF FILER | | I.D. NUMBER |
| FRANK QUINTERO FOR CITY COUNCIL | | 1231806 |

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes 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 airtime and production costs |
| FIL | candidate filing/ballot fees | PHO | phone banks | TRC | candidate travel, lodging, and meals |
| FND | fundraising events | POL | polling and survey research | TRS | staff/spouse travel, lodging, and meals |
| IND | independent expenditure supporting/opposing others (explain)* | 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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|--|-------------|
| Chase Card Services [REDACTED] Palatine, Ill 60094-4014 | OFC | | Smart & Jones - 60.55 Vuglio 14.06 Staples 46.23 | 120.84 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 120.84

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

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

| | | |
|--|--|-------------------------------|
| Statement covers period from <u>2/22/09</u> | | CALIFORNIA FORM 460 |
| through <u>3/21/09</u> | | |
| Page <u>22</u> of <u>22</u> | | I.D. NUMBER 1231806 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

FRANK QUINTERO FOR CITY COUNCIL

CODES: If one of the following codes 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 airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | 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 (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR DESCRIPTION OF PAYMENT | (a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD | (b) AMOUNT INCURRED THIS PERIOD | (c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E) | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD |
|--|-----------------------------------|---|---------------------------------------|---|--|
| Colby Poster printing Co | Signs | 1513.05 | 0.00 | 1513.05 | 0.00 |
| | | | | | |
| | | | | | |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

| | | | | |
|---------------------|------------|------|------------|---|
| SUBTOTALS \$ | 1513.05 \$ | 0 \$ | 1513.05 \$ | 0 |
|---------------------|------------|------|------------|---|

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 \$** 0.00
- 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 \$** 1513.05
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** -1513.05
May be a negative number