

**Recipient Committee
Campaign Statement
Cover Page**
(Government Code Sections 84200-84216.5)

CITY CLERK
Type or print in Ink.
2013 JUL 22 PM 1:04

COVER PAGE

**CALIFORNIA
FORM 460**

Date Stamp

E-Filed
06/27/2013
18:22:16
Filing ID:
143825854

Page 1 of 15

For Official Use Only

Statement covers period	Date of election if applicable: (Month, Day, Year)
from <u>03/17/2013</u>	<u>04/02/2013</u>
through <u>06/30/2013</u>	

SEE INSTRUCTIONS ON REVERSE

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

- | | |
|---|--|
| <input checked="" type="checkbox"/> Officeholder, Candidate-Controlled Committee
<input type="checkbox"/> State Candidate Election Committee
<input type="checkbox"/> Recall
<i>(Also Complete Part 5)</i> | <input type="checkbox"/> Primarily Formed Ballot Measure Committee
<input type="checkbox"/> Controlled
<input type="checkbox"/> Sponsored
<i>(Also Complete Part 6)</i> |
| <input type="checkbox"/> General Purpose Committee
<input type="checkbox"/> Sponsored
<input type="checkbox"/> Small Contributor Committee
<input type="checkbox"/> Political Party/Central Committee | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee
<i>(Also Complete Part 7)</i> |

2. Type of Statement:

- | | |
|---|---|
| <input type="checkbox"/> Preelection Statement | <input type="checkbox"/> Quarterly Statement |
| <input checked="" type="checkbox"/> Semi-annual Statement | <input type="checkbox"/> Special Odd-Year Report |
| <input type="checkbox"/> Termination Statement
<i>(Also file a Form 410 Termination)</i> | <input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
| <input type="checkbox"/> Amendment (Explain below) | |

3. Committee Information

I.D. NUMBER
1355010

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Sam Engel For Glendale City Council 2013

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE
Glendale CA 91201

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
Samuel Engel, Jr.

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
Glendale CA 91201

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 06/27/2013
Date

By Samuel Engel
Signature of Treasurer or Assistant Treasurer

Executed on 06/27/2013
Date

By Samuel Engel
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on _____
Date

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on _____
Date

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 15

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Samuel Engel, Jr.

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

City Council Member

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

[REDACTED] Glendale CA 91201

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?

YES 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?

YES 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>03/17/2013</u> through <u>06/30/2013</u>	CALIFORNIA FORM 460
Page <u>3</u> of <u>15</u>	I.D. NUMBER <u>1395010</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Sam Engel For Glendale City Council 2013

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions <i>Schedule A, Line 3</i>	\$ <u>22,550.00</u>	\$ <u>35,157.00</u>
2. Loans Received <i>Schedule B, Line 3</i>	<u>-10,300.00</u>	<u>200.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS <i>Add Lines 1 + 2</i>	\$ <u>12,250.00</u>	\$ <u>35,357.00</u>
4. Nonmonetary Contributions <i>Schedule C, Line 3</i>	<u>0.00</u>	<u>0.00</u>
5. TOTAL CONTRIBUTIONS RECEIVED <i>Add Lines 3 + 4</i>	\$ <u>12,250.00</u>	\$ <u>35,357.00</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 <i>Schedule E, Line 4</i>	\$ <u>10,542.14</u>	\$ <u>35,402.28</u>
7. Loans Made <i>Schedule H, Line 3</i>	<u>0.00</u>	<u>0.00</u>
8. SUBTOTAL CASH PAYMENTS <i>Add Lines 6 + 7</i>	\$ <u>10,542.14</u>	\$ <u>35,402.28</u>
9. Accrued Expenses (Unpaid Bills) <i>Schedule F, Line 3</i>	<u>0.00</u>	<u>0.00</u>
10. Nonmonetary Adjustment <i>Schedule C, Line 3</i>	<u>0.00</u>	<u>0.00</u>
11. TOTAL EXPENDITURES MADE <i>Add Lines 8 + 9 + 10</i>	\$ <u>10,542.14</u>	\$ <u>35,402.28</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 <i>Previous Summary Page, Line 16</i>	\$ <u>-1,753.14</u>
13. Cash Receipts <i>Column A, Line 3 above</i>	<u>12,250.00</u>
14. Miscellaneous Increases to Cash <i>Schedule I, Line 4</i>	<u>150.00</u>
15. Cash Payments <i>Column A, Line 8 above</i>	<u>10,542.14</u>
16. ENDING CASH BALANCE <i>Add Lines 12 + 13 + 14, then subtract Line 15</i>	\$ <u>104.72</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 <i>Schedule B, Part 2</i>	\$ <u>0.00</u>
--	----------------

Cash Equivalents and Outstanding Debts

18. Cash Equivalents <i>See instructions on reverse</i>	\$ <u>0.00</u>
19. Outstanding Debts <i>Add Line 2 + Line 9 in Column B above</i>	\$ <u>200.00</u>

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

**Schedule A
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>03/17/2013</u> through <u>06/30/2013</u>	CALIFORNIA FORM 460
	Page <u>4</u> of <u>15</u>
	I.D. NUMBER 1355010

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Sam Engel For Glendale City Council 2013

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)
03/17/2013	Ms. Brenda Dietlein Glendale, CA 91202	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Producer/Owner Glendale Center Theater	250.00	250.00	
03/17/2013	Mr. Karl Loureiro Glendale, CA 91202	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Lewis, Brisbois, Bisgaard, Attorneys	400.00	400.00	
03/19/2013	Billy Bennett Glendale, CA 91202	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired None	150.00	450.00	
03/20/2013	Ms. Joan Zierhut Glendale, CA 91202	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Instructor Glendale Unified School District	100.00	100.00	
03/25/2013	Mr. Mohammed Ali 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 Teknaf Teak Company	300.00	300.00	
SUBTOTAL \$				1,200.00		

Schedule A Summary

- Amount received this period – itemized monetary contributions.
(Include all Schedule A subtotals.) \$ 22,075.00
- Amount received this period – unitemized monetary contributions of less than \$100 \$ 475.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 22,550.00

*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

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

**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	03/17/2013	
through	06/30/2013	Page <u>5</u> of <u>15</u>
NAME OF FILER		I.D. NUMBER
Sam Engel For Glendale City Council 2013		1355010

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)
03/25/2013	Mr. Julio Coronado Arleta, CA 91331	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner J & G Sweeping	375.00	375.00	
03/25/2013	Surendra Dhanaraj Glendale, CA 91205	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Technician Self	100.00	100.00	
03/25/2013	Mr. Patrick Furey Torrance, CA 90501	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Political Campaign Consultant Liberty Campaign Solutions	250.00	250.00	
03/25/2013	Mr. Greg Grammer Glendale, CA 91207	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Assistant City Manager City of Rolling Hills Estates	200.00	200.00	
03/25/2013	Ms. Rosa Jimenez Glendale, CA 91205	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Housewife Self	100.00	100.00	
SUBTOTAL \$				1,025.00		

*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>03/17/2013</u> through <u>06/30/2013</u>	CALIFORNIA FORM 460
Page <u>6</u> of <u>15</u>	I.D. NUMBER 1355010

NAME OF FILER

Sam Engel For Glendale City Council 2013

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)
03/25/2013	Mr. Christopher Laxamana Glendale, CA 91205	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Student None	100.00	100.00	
03/25/2013	Mr. Scott Lowe Glendale, CA 91204	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Animator Renegade Animation	100.00	100.00	
03/25/2013	Mr. Edik Mardirossian Glendale, CA 91206	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Manager/Owner Super Shuttle	1,000.00	1,000.00	
03/25/2013	Mr. Harry Marshallian Tujunga, CA 91042	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired None	100.00	100.00	
03/25/2013	Ms. Arcelli Ruiz Glendale, CA 91205	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Technician Self	100.00	100.00	
SUBTOTAL \$				1,400.00		

*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	03/17/2013	
through	06/30/2013	Page <u>7</u> of <u>15</u>
NAME OF FILER		I.D. NUMBER
Sam Engel For Glendale City Council 2013		1355010

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)
03/25/2013	Mr. Armen Savadian Glendale, CA 91202	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Realtor Self	100.00	100.00	
03/25/2013	Ms. Dahlia Savadian Glendale, CA 91202	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker None	100.00	100.00	
03/25/2013	Ms. Arlene Vidor Glendale, CA 91205	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Yoga Instructor Glendale Adventist Med Ctr	150.00	150.00	
03/26/2013	Mr. Hank Scheetz Glendale, CA 91202	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Technician LACMTA	100.00	100.00	
03/26/2013	Mr. Chris Welch Glendale, CA 91205	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Principal Synchromatics	250.00	250.00	
SUBTOTAL \$				700.00		

*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	03/17/2013	
through	06/30/2013	Page <u>8</u> of <u>15</u>

NAME OF FILER Sam Engel For Glendale City Council 2013	I.D. NUMBER 1355010
---	------------------------

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)
03/26/2013	Ms. Marissa Zacarias Azusa, CA 91702	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Accountant Skeehan & Company	200.00	200.00	
03/28/2013	Ms. Sally Spaulding Glendale, CA 91201	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired None	100.00	100.00	
04/01/2013	Siu Tong Chan Torrance, CA 90503	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Professional Translator Self	1,000.00	1,000.00	
04/01/2013	Mr. Nicholas Lam Glendale, CA 91205	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Pacific BMW	1,000.00	1,000.00	
04/01/2013	Shuk Lo Torrance, CA 90503	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Secretary Bethlehem Management	1,000.00	1,000.00	
SUBTOTAL \$				3,300.00		

*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 of print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	03/17/2013	
through	06/30/2013	Page 9 of 15

NAME OF FILER Sam Engel For Glendale City Council 2013	I.D. NUMBER 1355010
---	------------------------

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)
04/01/2013	Ms. Mary Ann Mangilin [REDACTED] Azusa, CA 91702	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Accountant Laidlaw	350.00	350.00	
04/01/2013	Mr. Juan Vasquez [REDACTED] Los Angeles, CA 90006	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner JB Prking Service	700.00	700.00	
04/01/2013	Mrs. Leonila Viloría-Aquino [REDACTED] Highland Park, CA 90042	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Accountant Cushman & Wakefield	500.00	500.00	
06/29/2013	Mr. Samuel Engel Jr. [REDACTED] Glendale, CA 91201	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	none City of Glendale, retired	5,500.00	13,100.00	
06/29/2013	Mr. Samuel Engel Jr. [REDACTED] Glendale, CA 91201	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	none City of Glendale, retired	3,000.00	13,100.00	
SUBTOTAL \$				10,050.00		

*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>03/17/2013</u> through <u>06/30/2013</u>	CALIFORNIA FORM 460
	Page <u>10</u> of <u>15</u>

NAME OF FILER Sam Engel For Glendale City Council 2013	I.D. NUMBER 1355010
---	------------------------

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)
06/29/2013	Mr. Samuel Engel Jr. Glendale, CA 91201	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	none City of Glendale, retired	4,400.00	13,100.00	
		<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				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$				4,400.00		

*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.

FPPC Form 460 (January/05)
 FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

**Schedule B – Part 1
Loans Received**

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

SCHEDULE B - PART 1

Statement covers period from <u>03/17/2013</u> through <u>06/30/2013</u>	CALIFORNIA FORM 460
Page <u>11</u> of <u>15</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Sam Engel For Glendale City Council 2013

I.D. NUMBER

1355010

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(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
Mr. Samuel Engel Jr. Glendale, CA 91201	none City of Glendale, retired	\$ 5,000.00	\$ 0.00	<input checked="" type="checkbox"/> PAID \$ 400.00 <input checked="" type="checkbox"/> FORGIVEN \$ 4,400.00	\$ 200.00	0 % RATE	\$ 5,000.00	CALENDAR YEAR \$ 13,100.00 PERELECTION**
<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					04/22/2013 DATE DUE	\$ 0.00	01/17/2013 DATE INCURRED	\$
Mr. Samuel Engel Jr. Glendale, CA 91201	none City of Glendale, retired	\$ 5,500.00	\$ 0.00	<input type="checkbox"/> PAID \$ 0.00 <input checked="" type="checkbox"/> FORGIVEN \$ 5,500.00	\$ 0.00	0 % RATE	\$ 5,500.00	CALENDAR YEAR \$ 13,100.00 PERELECTION**
<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					05/15/2013 DATE DUE	\$ 0.00	02/25/2013 DATE INCURRED	\$
Mr. Samuel Engel Jr. Glendale, CA 91201	none City of Glendale, retired	\$ 0.00	\$ 3,000.00	<input type="checkbox"/> PAID \$ 0.00 <input checked="" type="checkbox"/> FORGIVEN \$ 3,000.00	\$ 0.00	0 % RATE	\$ 3,000.00	CALENDAR YEAR \$ 13,100.00 PERELECTION**
<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					06/30/2013 DATE DUE	\$ 0.00	04/04/2013 DATE INCURRED	\$
SUBTOTALS \$		3,000.00	13,300.00	200.00	0.00			

Schedule B Summary

(Enter (e) on
Schedule E, Line 3)

- Loans received this period \$ 3,000.00
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period \$ 13,300.00
(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 \$ -10,300.00**
Enter the net here and on the Summary Page, Column A, Line 2.
(May be a negative number)

†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

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.

**Schedule E
Payments Made**

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

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from	03/17/2013	
through	06/30/2013	Page 12 of 15
NAME OF FILER		I.D. NUMBER
Sam Engel For Glendale City Council 2013		1355010

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Sam Engel For Glendale City Council 2013

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
FL 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
Liberty Campaign Solutions, LLC Torrance, CA 90508	LIT	Performance Payment	351.00
Liberty Campaign Solutions, LLC Torrance, CA 90508	PRO		2,000.00
California Law Enforcement Voter Guide Los Angeles, CA 90010	LIT	Share of mailing & production expense	1,200.00

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

SUBTOTAL \$ 3,551.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 10,305.66
2. Unitemized payments made this period of under \$100	\$ 236.48
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 Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$ 10,542.14

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

**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	03/17/2013	
through	05/30/2013	Page 13 of 15
NAME OF FILER		I.D. NUMBER
Sam Engel For Glendale City Council 2013		1355010

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Sam Engel For Glendale City Council 2013

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
FL	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
Staples Glendale, CA 91206	OFC			242.95
AABCTV Glendale, CA 91201	TEL		Per Vrej, cost of production & air time.	900.00
Liberty Campaign Solutions, LLC Torrance, CA 90508	CNS		Final Payment	1,200.00
Liberty Campaign Solutions, LLC Torrance, CA 90508	TEL		YT video production costs	350.00
Liberty Campaign Solutions, LLC Torrance, CA 90508	SAL		Alvarez & Marks	1,000.00

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

SUBTOTAL \$ 3,692.95

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

**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	03/17/2013	
through	06/30/2013	Page 14 of 15
NAME OF FILER		I.D. NUMBER
Sam Engel For Glendale City Council 2013		1355010

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Sam Engel For Glendale City Council 2013

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
Aaron Thomas & Associates [REDACTED] Chatsworth, CA 91311	LIT		Final mailing production & postage	2,942.84
City of Glendale [REDACTED] Glendale, CA 91206	FIL		Cost for ballot statement, final accounting.	118.87

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

SUBTOTAL \$ 3,061.71

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

**Schedule I
Miscellaneous Increases to Cash**

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

SCHEDULE I

Statement covers period from <u>03/17/2013</u> through <u>06/30/2013</u>	CALIFORNIA FORM 460
	Page <u>15</u> of <u>15</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Sam Engel For Glendale City Council 2013

I.D. NUMBER

1355010

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
04/04/2013	Mr. David Engel Burbank, CA 91501	Collection taken at election night gathering	150.00

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 150.00

Schedule I Summary

- 1. Itemized increases to cash this period. \$ 150.00
- 2. Unitemized increases to cash of under \$100 this period. \$ 0.00
- 3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) \$ 0.00
- 4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) **TOTAL \$ 150.00**