Supplemental Independent Expenditure Report (Government Code Section 84203.5) SEE INSTRUCTIONS ON REVERSE		Type or print in ink. Amounts may be rounded to whole dollars. Amendment (Explain Below)				RFC	F VSUPP	EMENTA	LINDEPENDENT	EXPENDITURE		
				Report covers pour July 1, 2	2012 C		Date Stamp CLER	K	CALIFORNIA FORM	465	THE REAL PROPERTY AND ADDRESS OF THE PERSON.	
				Sept. 30,	2012	OCT .	-5 PM 3	£ 42	1 Page	of3	annual designations.	
				Date of election if ap	nlicable:				For Official U	Use Only	A COLUMN TWO IS NOT THE OWNER.	
				(Month, Day, Ye		Y OF C	COSTA ME	SA		-	-	
				Nov. 6, 201			SOUTHING				-	
											-	
1. Committee/Filer Information I.D. NUMBER (If recipient committee) 1344077)	Treasurer (If recipient committee)								
COMMITTEE/FILER'S NAME				NAME OF TREASUR	RER							
Costa Mesans 4 Responsible Government (CM4RG)				John Humphrey								
				MAILING ADDRESS								
STREET ADDRESS (NO P.O. BOX) 1620 Sandalwood St.				1620 Sandalwood St.								
		IP CODE AREA CODE/PH	ONE	CITY			STATE	ZIP CODE	AREA CO	ODE/PHONE		
Costa Mesa		IP CODE AREA CODE/PHO 2626 714-751-6552		Costa Mesa			CA S	92626	714-75	1-6552		
OPTIONAL: FAX/E		111101000		OPTIONAL: FAX/E-MAIL ADDRESS								
OPTIONAL. PAX/E	E-IVIAIL ADDRESS											
2. Name of Ca	andidate or Measure Su	pported or Opposed	NICESCANDA CONSERVACIONA SANTANA SANTA			es en reconstruir de la companya de				CHECK ONE		
NAME OF CANDIDA				OFFICE SOUGHT OR HELI	D AND DISTR	ICT, IF AP	PLICABLE		SU	PPORT OPPOSE	-	
Harold Weitzberg				City Council Member City of Costa Mesa, CA						X	A STATE OF THE PERSON	
NAME OF BALLOT	MEASURE			BALLOT NO./LETTER	JURISDICTION	NC			su	PPORT OPPOSE	-	
									age of the same of		-	
2 Indonosdo	nt Expenditures Made A		ua n via ta lu	labeled continuation shoot	to.	NAME OF THE PERSON OF THE PERS	ALL DELL'ARTE DE		OURALII ATIVE	TO DATE		
•	Barton Branchia Constitution Co		ropriately •				AMOUN	ir 1	CUMULATIVE CALENDAR	RYEAR		
DATE	NAME AND ADDR	ESS OF PAYEE		DESCRIPTION OF EXPER	NUTTORE		AWOUN	-	(JAN. 1 - D	EC. 31)	-	
0/0/0040	O/6/2012 COGS South Signs			d Ciana			\$595.00		\$1,781.00			
9/6/2012	<u> </u>		Yard Signs \$595.0		0.00							
											_	
9/27/2012	9/27/2012 JT Printing 12771 Western Ave. Suite H		Flyer	Flyer for Distribution			\$20	0.00	\$1,78	1.00		
Garden Grove, CA 92841												
	, , , , , , , , , , , , , , , , , , , ,										-	
2173 Saik Ave, Suite 250			Drintin	Printing of Mailer			\$32	0.82	\$1,781.00			
			rinur				402		+ 1,10			
	Carlsbad, CA 92008											

Supplemental Independent		Type or print in ink.		SUPPLEMENTAL INDEPENDENT EXPENDITUR									
Expenditure Report (Government Code Section 84203.5)		Amounts may be rounded to whole dollars.		Report covers period July 1, 2012 from		Date Stamp		california 465 form					
SEE INSTRUCTIONS ON REVERSE		Amendment (Explain Below)		through Sept. 30, 2012 Date of election if applicable: (Month, Day, Year)				Page2	_ of3				
								For Official Use Only					
			Maryla shifting and a same	Nov. 6, 2012									
1. Committee	/Filer Information	e)	Treasurer (If recipient committee)										
COMMITTEE/FILER'S NAME				NAME OF TREASURER									
Costa Mesans 4 Responsible Government (CM4RG)				John Humphrey									
STREET ADDRESS	S (NO BO BOY)			MAILING ADDRESS	•								
1620 Sandaly	· ·			1620 Sandalwood S	St.								
				CITY		STATE	ZIP CODE	AREA (CODE/PHONE				
CITY STATE ZIP CODE AREA CODE/PHONE Costa Mesa CA 92626 714-751-6552				Costa Mesa CA 92626				714-751-6552					
OPTIONAL: FAX/I				OPTIONAL: FAX/E-MAIL A	ADDRESS								
01 1101012 17011													
2. Name of Ca	andidate or Measure Su	nnorted or Onnosed					· · · · · · · · · · · · · · · · · · ·						
NAME OF CANDIDA		pported of opposed		OFFICE SOUGHT OR HELD AND	DISTRICT IE AD	DI ICADI E		- la	CHECK ONE SUPPORT OPPOSE				
Harold Weitzberg				City Council Member City of Costa Mesa, CA					X				
NAME OF BALLOT MEASURE				BALLOT NO/LETTER JURISDICTION				S	SUPPORT OPPOSE				
									o. rom				
3. Independe	nt Expenditures Made A	ttach additional information on appl	ropriately	labeled continuation sheets.				CUMULATIV	E TO DATE				
DATE	NAME AND ADDR		ĺ	DESCRIPTION OF EXPENDITUR	Œ [AMO	JNT I	CALENDA (JAN. 1 - I	AR YEAR				
9/30/2012	Mail Pros Inc 5261 Business Dr. Huntington Beach, CA 92649		Posta	Postage for mailer		\$665.18		\$1,78					
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Supplemental Independent	Type or print in ink.		SUPPLEMENTAL INDEPENDENT EXPENDITURI					
Expenditure Report	Amounts may	be rounded	Rep	port covers period	CALIFORNIA 465			
	to whole dollars.		from	July 1, 2012	FO	RM TOO		
SEE INSTRUCTIONS ON REVERSE			through_	Sept. 30, 2012	Page	3 3		
NAME OF FILER			<u> </u>			ER (If recipient com.)		
Costa Mesans 4 Responsible Government (CM4RG)					134407	7		
4. Summary								
1. Total independent expenditures of \$100 or more made t	his period. (Part 3.))	*******	*************************	. \$	\$1,781.00		
2. Total independent expenditures under \$100 made this p						100.03		
	•	•				\$1,881.03		
Total independent expenditures made this period (Add	Lines 1 + Z.)		*************	101A	L \$			
5. Filing Officers Enter the name and address of each filing	g officer with whom th	ne filer's most recent campa	ign stateme	nts (Form 450, 460 or 46	31) have be	en filed.		
1) NAME OF FILING OFFICER		3) NAME OF FILING O	FFICER					
Brenda Green City Clerk of Costa Mesa								
ADDRESS (NO. AND STREET)		ADDRESS		(NO. AND STREET)				
77 Fair Drive								
CITY STATE Costa Mesa CA	ZIP CODE 92627	СПҮ			STATE	ZIP CODE		
2) NAME OF FILING OFFICER		4) NAME OF FILING O	FFICER					
ADDRESS (NO. AND STREET)		ADDRESS		(NO. AND STREET)				
CITY STATE	ZIP CODE	CITY			STATE	ZIP CODE		
S. Verification								
I have used all reasonable diligence in preparing and reviewing th	is statement and to the	e best of my knowledge the in	oformation co	ontained herein is true an	d complete	. Loertify under		
penalty of perjury under the laws of the State of California that the	foregains is in Control				a complete	Troorally direct		
., 1-1								
Executed on 1/5/2012	By_							
DATE				TREASURER				
Executed on	BySIGNATURE OF CONTRO	DLLING OFFICEHOLDER, CANDIDATE,	STATE MEASURE	PROPONENT, OR RESPONSIBLE	OFFICER OF	 SPONSOR		
•	Ву							
DATE		NATURE OF CONTROLLING OFFICEH	OLDER, CANDID	ATE, STATE MEASURE PROPONI	ENT			
Executed on	Bv							

DATE

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT