

Supplemental Independent Expenditure Report

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

SUPPLEMENTAL INDEPENDENT EXPENDITURE CALIFORNIA FORM 465	
Report covers period from <u>01/01/2015</u>	through <u>10/17/2015</u>
2 / 4	
I.D. NUMBER (If Recipient Com.) <u>1380424</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Committee for Responsible Government in Millbrae formed to support Ann Schneider and Robert Gottschalk and oppose Gina Papan for City Council 2015

4. Summary

1. Total independent expenditures made of \$100 or more this period. (Part 3)	\$ <u>8021.10</u>
2. Total independent expenditures under \$100 made this period. (Not itemized.)	\$ <u>0.00</u>
3. Total independent expenditures made this period (Add Lines 1 + 2.)	TOTAL \$ <u>8021.10</u>

5. Filing Officers

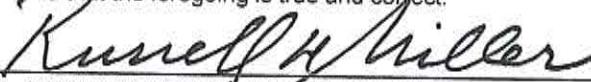
Enter the official title and address of each filing officer with whom most recent campaign statements have been filed.

Please see attached pages

6. 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 10/ 19 /2015
DATE

By _____

SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on _____
DATE

By _____
SIGNATURE OF CONTROLLING OFFICERHOLDER, CANDIDATE, STATE MEASURE PROPOSER OR RESPONSIBLE OFFICER OF SPONSOR

Executed on _____
DATE

By _____
SIGNATURE OF CONTROLLING OFFICERHOLDER, CANDIDATE, STATE MEASURE PROPOSER

Executed on _____
DATE

By _____
SIGNATURE OF CONTROLLING OFFICERHOLDER, CANDIDATE, STATE MEASURE PROPOSER

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5. Filing Officers Enter the official title and address of each filing officer with whom most recent campaign statements have been filed.

1) NAME OF FILING OFFICER

Millbrae- City Clerk

ADDRESS

621 Magnolia Ave

(NO. AND STREET)

CITY

Millbrae

STATE

CA

ZIP CODE

94030-

**Supplemental Independent
Expenditure Report**
(Government Code Sections 84203.5)
SEE INSTRUCTIONS ON REVERSE

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For use by an officeholder, candidate, or committee making independent expenditures totaling \$500 or more in a calendar year to support or oppose a single candidate or a single measure. This form must be filed at the same times and places as the campaign statements filed by the candidate supported or opposed or by a committee primarily formed to support or oppose the measure. A separate form must be filed for each candidate or measure being supported or opposed. This form is filed in addition to any other required campaign statements.

SUPPLEMENTAL INDEPENDENT EXPENDITURE

CALIFORNIA FORM **465**

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For Official Use Only

3. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets.

DATE	NAME AND ADDRESS OF PAYEE	DESCRIPTION OF EXPENDITURE	AMOUNT	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC.31)
10/06/2015	Pacific Printing	Postcard Printing Mailhouse & Postage	1493.92	8021.10
10/08/2015	Pacific Printing	Postcard Printing Mailhouse & Postage	2987.84	8021.10
10/14/2015	Pacific Printing	Postcard Printing Mailhouse & Postage	2987.84	8021.10
10/14/2015	Cindy Potter	Graphic Design Services	301.50	8021.10
10/06/2015	Kate Ward	Graphic Design	100.00	8021.10
10/08/2015	Kate Ward	Graphic Design	150.00	8021.10