Recipient Committee Campaign Statement Cover Page

ORIGINAL

Type or print in ink.

(Government Code Sections 84200-84216.5)

Date Stamp

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OFFICE OF THE CITY CLERK

For Official Use Only

Statement covers period	Date of election if applicable: (Month, Day, Year)
from 07/01/2013	
through 12/31/2013	

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
- [x] Primarily Formed Ballot Measure Committee
  - ( ) Controlled
  - (x) Sponsored
  - *(Also Complete Part 6)*
- [ ] Primarily Formed Candidate/Officeholder Committee
  - *(Also Complete Part 7)*

2. Type of Statement:

- [ ] Preelection Statement
- [x] 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 1325035

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

No On Measure A - West Hollywood Citizens For Responsible Growth

STREET ADDRESS (NO P.O. BOX)

9401 Wilshire Blvd.

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Beverly Hills, CA 90212			(818) 260-0669

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

Stacy Owens

MAILING ADDRESS

5940 College Avenue

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Oakland, CA 94618			(510) 652-1000

NAME OF ASSISTANT TREASURER, IF ANY

Henry C. Levy

MAILING ADDRESS

5940 College Avenue

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Oakland, CA 94618			(510) 652-1000

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 01/17/2014 Date

By _____ Signature of Treasurer or Assistant Treasurer

Executed on _____ Date

By _____ 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

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

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

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

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
Measure A - Tax Billboard Act

BALLOT NO. OR LETTER	JURISDICTION	
A	City of West Hollywood, CA	☐ SUPPORT ☒ 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	
		☐ SUPPORT ☐ OPPOSE
		☐ SUPPORT ☐ OPPOSE
		☐ SUPPORT ☐ OPPOSE
		☐ SUPPORT ☐ 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

CALIFORNIA FORM 460

Statement covers period

from ____07/01/2013____

through ____12/31/2013____

Page __3__ of __6__

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No On Measure A - West Hollywood Citizens For Responsible Growth

I.D. NUMBER
1325035

Contributions Received		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions .... Schedule A, Line 3		$ 0.00	$ 0.00
2. Loans Received .... Schedule B, Line 3		0.00	215.55
3. SUBTOTAL CASH CONTRIBUTIONS .... Add Lines 1 + 2		$ 0.00	$ 215.55
4. Nonmonetary Contributions .... Schedule C, Line 3		1,246.67	1,246.67
5. TOTAL CONTRIBUTIONS RECEIVED .... Add Lines 3 + 4		$ 1,246.67	$ 1,462.22

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			
6. Payments Made .... Schedule E, Line 4		$ 0.00	$ 0.00
7. Loans Made .... Schedule H, Line 3		0.00	0.00
8. SUBTOTAL CASH PAYMENTS .... Add Lines 6 + 7		$ 0.00	$ 0.00
9. Accrued Expenses (Unpaid Bills) ...... Schedule F, Line 3		-582.84	8,840.00
10. Nonmonetary Adjustment .... Schedule C, Line 3		1,246.67	1,246.67
11. TOTAL EXPENDITURES MADE .... Add Lines 8 + 9 + 10		$ 663.83	$ 10,086.67

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	$	13,182.40	
13. Cash Receipts .... Column A, Line 3 above		0.00	
14. Miscellaneous Increases to Cash ...... Schedule I, Line 4		0.00	
15. Cash Payments .... Column A, Line 8 above		0.00	
16. **ENDING CASH BALANCE** ...... Add Lines 12 + 13 + 14, then subtract Line 15	$	13,182.40	

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

17. LOAN GUARANTEES RECEIVED .... Schedule B, Part 2	$	0.00

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).

Cash Equivalents and Outstanding Debts

18. Cash Equivalents .... See instructions on reverse	$	0.00
19. Outstanding Debts .... Add Line 2 + Line 9 in Column B above	$	9,055.55

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

Schedule B – Part 1
Loans Received

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

Statement covers period	
from	07/01/2013
through	12/31/2013

CALIFORNIA FORM 460

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No On Measure A - West Hollywood Citizens For Responsible Growth

I.D. NUMBER

1325035

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
Rutan & Tucker, LLP 611 Anton Blvd, Suite 1400 Costa Mesa, CA 92626 Loan in the form of accounting services payment made to Henry C. Levy & Company, See 6/30/2012 Schedule E for detail †☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		$ 215.55	$ 0.00	☐ PAID $ 0.00 ☐ FORGIVEN $ 0.00	$ 215.55 02/12/2012 DATE DUE	___% RATE $ 0.00	$ 215.55 02/12/2012 DATE INCURRED	CALENDAR YEAR $ 0.00 PER ELECTION**
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$	$	☐ PAID $ ☐ FORGIVEN $	$ DATE DUE	___% RATE $	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION**
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$	$	☐ PAID $ ☐ FORGIVEN $	$ DATE DUE	___% RATE $	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION**

SUBTOTALS $** 0.00 **$ 0.00 **$** 215.55 **$** 0.00

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

Schedule B Summary

1. Loans received this period .... $ __0.00__
   (Total Column (b) plus unitemized loans of less than $100.)

2. Loans paid or forgiven this period .... $ __0.00__
   (Total Column (c) plus loans under $100 paid or forgiven.)
   (Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (**Subtract** Line 2 from Line 1.) .... **NET $** __0.00__
   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.

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

www.netfile.com

Schedule C
Nonmonetary Contributions Received

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

Statement covers period	CALIFORNIA FORM 460
from 07/01/2013	
through 12/31/2013	Page 5 of 6

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No On Measure A - West Hollywood Citizens For Responsible Growth

I.D. NUMBER
1325035

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)
12/23/2013	Regency Outdoor Advertising, Inc. 8820 West Sunset Boulevard, 2nd Floor West Hollywood, CA 90069 Accounting services payment made to 'The Henry Levy Group, 5940 College Avenue, Oakland, CA 94618'	☐IND ☐COM ☒OTH ☐PTY ☐SCC		Bill Paid By Third Party	582.84	1,246.67	
12/23/2013	Regency Outdoor Advertising, Inc. 8820 West Sunset Boulevard, 2nd Floor West Hollywood, CA 90069 Accounting services payment made to 'The Henry Levy Group, 5940 College Avenue, Oakland, CA 94618'	☐IND ☐COM ☒OTH ☐PTY ☐SCC		Bill Paid By Third Party	401.13	1,246.67	
12/23/2013	Regency Outdoor Advertising, Inc. 8820 West Sunset Boulevard, 2nd Floor West Hollywood, CA 90069 Accounting services payment made to 'The Henry Levy Group, 5940 College Avenue, Oakland, CA 94618'	☐IND ☐COM ☒OTH ☐PTY ☐SCC		Bill Paid By Third Party	262.70	1,246.67	
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL $ 1,246.67

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions.
   (Include all Schedule C subtotals.) .... $ 1,246.67

2. Amount received this period – unitemized nonmonetary contributions of less than $100 .... $ 0.00

3. 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 $ 1,246.67

*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)

www.netfile.com

Schedule F
Accrued Expenses (Unpaid Bills)

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

Statement covers period		CALIFORNIA FORM 460
from 07/01/2013		
through 12/31/2013	Page 6 of 6	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

No On Measure A - West Hollywood Citizens For Responsible Growth

I.D. NUMBER
1325035

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
Manatt, Phelps, Phillips 11355 W. Olympic Blvd. Los Angeles, CA 90064	PRO	8,840.00	0.00	0.00	8,840.00
Henry C. Levy & Company 5940 College Avenue Suite F Oakland, CA 94618	PRO	582.84	-582.84	0.00	0.00

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

SUBTOTALS $	9,422.84 $	-582.84 $	0.00 $	8,840.00

Schedule F Summary

1. 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 $** -582.84

2. 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 $** 0.00

3. Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) .... **NET $** -582.84
   May be a negative number