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

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 6)
   ☐ 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 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)
   1212 S Victory Bl

   CITY STATE ZIP CODE AREA CODE/PHONE
   Burbank CA 91502 (818) 260-0669

   MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
   1212 S Victory Bl

   CITY STATE ZIP CODE AREA CODE/PHONE
   Burbank CA 91502

   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 07/26/2011
   By Kinde Durkee
   Signature of Treasurer or Assistant Treasurer

   Executed on
   By
   Signature of Controlling Officerholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

   Executed on
   By
   Signature of Controlling Officerholder, Candidate, State Measure Proponent

   Executed on
   By
   Signature of Controlling Officerholder, Candidate, State Measure Proponent

   Executed on
   By
   Signature of Controlling Officerholder, Candidate, State Measure Proponent

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 888/ASK-FPPC (888/275-3772)
State of California
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

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

Measure A

BALLOT NO. OR LETTER JURISDICTION SUPPORT

A West Hollywood CA

☐ SUPPORT

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

NAME OF OFFICEHOLDER, CANDIDATE, OR PROONENT

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

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD SUPPORT

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD SUPPORT

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD SUPPORT

Attach continuation sheets if necessary

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772) State of California
**Campaign Disclosure Statement**

**Summary Page**

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

Statement covers period from **02/20/2011** through **06/30/2011**

**CALIFORNIA FORM 460**

**NAME OF FILER**

No On Measure A - West Hollywood Citizens For Responsible Growth

**Contributions Received**

<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
<th>Calendar Year Summary for Candidates Running in Both the State Primary and General Elections</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Monetary Contributions</strong> Schedule A, Line 3 $0.00</td>
<td><strong>25000.00</strong></td>
<td><strong>CONTRIBUTIONS RECEIVED</strong> $0.00</td>
</tr>
<tr>
<td><strong>2. Loans Received</strong> Schedule B, Line 3 $0.00</td>
<td><strong>0.00</strong></td>
<td><strong>LOANS RECEIVED</strong> $0.00</td>
</tr>
<tr>
<td><strong>3. SUBTOTAL CASH CONTRIBUTIONS</strong> Add Lines 1 + 2 $0.00</td>
<td><strong>25000.00</strong></td>
<td><strong>SUBTOTAL LOANS RECEIVED</strong> $0.00</td>
</tr>
<tr>
<td><strong>4. Nonmonetary Contributions</strong> Schedule C, Line 3 $0.00</td>
<td><strong>0.00</strong></td>
<td><strong>NONMONETARY CONTRIBUTIONS RECEIVED</strong> $0.00</td>
</tr>
<tr>
<td><strong>5. TOTAL CONTRIBUTIONS RECEIVED</strong> Add Lines 3 + 4 $0.00</td>
<td><strong>25000.00</strong></td>
<td><strong>TOTAL CONtributions RECEIVED</strong> $25000.00</td>
</tr>
</tbody>
</table>

**Expenditures Made**

<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
<th>Expenditure Limit Summary for State Candidates</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>6. Payments Made</strong> Schedule E, Line 4 $11561.58</td>
<td><strong>17165.44</strong></td>
<td><strong>CUMULATIVE EXPENDITURES MADE</strong> $0.00</td>
</tr>
<tr>
<td><strong>7. Loans Made</strong> Schedule H, Line 3 $0.00</td>
<td><strong>0.00</strong></td>
<td><strong>LOANS MADE</strong> $0.00</td>
</tr>
<tr>
<td><strong>8. SUBTOTAL CASH PAYMENTS</strong> Add Lines 6 + 7 $11561.58</td>
<td><strong>17165.44</strong></td>
<td><strong>SUBTOTAL LOANS MADE</strong> $0.00</td>
</tr>
<tr>
<td><strong>9. Accrued Expenses (Unpaid Bills)</strong> Schedule F, Line 3 $0.00</td>
<td><strong>8840.00</strong></td>
<td><strong>ACCrued EXPENSEs (Unpaid Bills)</strong> $0.00</td>
</tr>
<tr>
<td><strong>10. Nonmonetary Adjustment</strong> Schedule C, Line 3 $0.00</td>
<td><strong>0.00</strong></td>
<td><strong>NONmonetary ADJUSTMENT</strong> $0.00</td>
</tr>
<tr>
<td><strong>11. TOTAL EXPENDITURES MADE</strong> Add Lines 8 + 9 + 10 $11561.58</td>
<td><strong>26005.44</strong></td>
<td><strong>TOTAL EXPENDitures MADE</strong> $26005.44</td>
</tr>
</tbody>
</table>

**Current Cash Statement**

<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>12. Beginning Cash Balance</strong> Previous Summary Page, Line 16 $24743.98</td>
<td><strong>24743.98</strong></td>
</tr>
<tr>
<td><strong>13. Cash Receipts</strong> Column A, Line 3 above $0.00</td>
<td><strong>0.00</strong></td>
</tr>
<tr>
<td><strong>14. Miscellaneous Increases to Cash</strong> Schedule I, Line 4 $0.00</td>
<td><strong>0.00</strong></td>
</tr>
<tr>
<td><strong>15. Cash Payments</strong> Column A, Line 8 above $11561.58</td>
<td><strong>11561.58</strong></td>
</tr>
<tr>
<td><strong>16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15</strong> $13182.40</td>
<td><strong>13182.40</strong></td>
</tr>
</tbody>
</table>

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**

<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>18. Cash Equivalents</strong> See instructions on reverse $0.00</td>
<td><strong>0.00</strong></td>
</tr>
<tr>
<td><strong>19. Outstanding Debts</strong> Add Line 2 + Line 9 in Column B above $8840.00</td>
<td><strong>8840.00</strong></td>
</tr>
</tbody>
</table>

**Expenditure Limit Summary for State Candidates**

<table>
<thead>
<tr>
<th>Date of Election</th>
<th>Total to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>22. Cumulative Expenditures Made</strong> <em>(If Subject to Voluntary Expenditure Limit)</em></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Date of Election</strong></th>
<th><strong>Total to Date</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>1/1 through 6/30</td>
<td>7/1 to Date</td>
</tr>
<tr>
<td><strong>22. Cumulative Expenditures Made</strong> $0.00</td>
<td></td>
</tr>
<tr>
<td><strong>22. Cumulative Expenditures Made</strong> $0.00</td>
<td></td>
</tr>
<tr>
<td><strong>22. Cumulative Expenditures Made</strong> $0.00</td>
<td></td>
</tr>
</tbody>
</table>

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

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
## Schedule E Payments Made

**NAME OF FILER**
No On Measure A - West Hollywood Citizens For Responsible Growth

**NAME AND ADDRESS OF PAYEE**
(If Committee, also enter I.D. number)

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bieber Communications</td>
<td>LIT</td>
<td></td>
<td>3536.00</td>
</tr>
<tr>
<td>3609 W MacArthur Blvd #812</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Santa Ana CA 92704</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>USPS</td>
<td></td>
<td></td>
<td>Memo:</td>
</tr>
<tr>
<td>8201 Canoga Av</td>
<td>POS</td>
<td></td>
<td>1250.00</td>
</tr>
<tr>
<td>Canoga Park CA 91304</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Continental Colorcraft</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1166 W Garvey Av</td>
<td>LIT</td>
<td></td>
<td>2731.32</td>
</tr>
<tr>
<td>Monterey Park CA 91754</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**SUBTOTAL** $6,267.32

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) $11,561.58
2. Unitemized payments made this period of under $100 $0.00
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** $11,561.58
## Schedule E (Continuation Sheet)

**Payments Made**

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

### Statement covers period
- **from**: 02/20/2011
- **through**: 06/30/2011

### CALIFORNIA FORM
- **SCHEDULE E (CONT.)
- **I.D. NUMBER**: 1325035

### CODES:
- CMP: campaign paraphernalia/misc.
- CNS: campaign consultants
- CTB: contribution (explain nonmonetary)*
- CVC: civic donations
- FIL: candidate filing/ballot fees
- FND: fundraising events
- IND: independent expenditure supporting/opposing others (explain)*
- LEG: legal defense
- LIT: campaign literature and mailings
- MBR: member communications
- MTG: meetings and appearances
- OFC: office expenses
- PET: petition circulating
- PHO: phone banks
- POL: polling and survey research
- POS: postage, delivery and messenger services
- PRO: professional services (legal, accounting)
- PRT: print ads
- RAD: radio airtime and production costs
- RFD: returned contributions
- SAL: campaign workers' salaries
- TEL: t.v. or cable airtime and production costs
- TRC: candidate travel, lodging, and meals
- TRS: staff/spouse travel, lodging, and meals
- TSF: transfer between committees of the same candidate/sponsor
- VOT: voter registration
- WEB: information technology costs (internet, e-mail)

### NAME AND ADDRESS OF PAYEE

<table>
<thead>
<tr>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRO</td>
<td></td>
<td>8.07</td>
</tr>
<tr>
<td>PRO</td>
<td></td>
<td>1500.00</td>
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<tr>
<td>PRO</td>
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<td>640.00</td>
</tr>
<tr>
<td>PRO</td>
<td></td>
<td>215.46</td>
</tr>
<tr>
<td>LIT</td>
<td></td>
<td>400.00</td>
</tr>
</tbody>
</table>

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

**SUBTOTAL**: $2,763.53
### Schedule E (Continuation Sheet)

**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.
- CNS campaign consultants
- CTB contribution (explain nonmonetary)*
- CVC civic donations
- FIL candidate filing/ballot fees
- FND fundraising events
- IND independent expenditure supporting/opposing others (explain)*
- LEG legal defense
- LIT campaign literature and mailings
- MBR member communications
- MTG meetings and appearances
- OFC office expenses
- PET petition circulating
- PHO phone banks
- POL polling and survey research
- POS postage, delivery and messenger services
- PRO professional services (legal, accounting)
- PRT print ads
- RAD radio airtime and production costs
- RFD returned contributions
- SAL campaign workers’ salaries
- TEL t.v. or cable airtime and production costs
- TRC candidate travel, lodging, and meals
- TRS staff/spouse travel, lodging, and meals
- TSF transfer between committees of the same candidate/sponsor
- VOT voter registration
- WEB information technology costs (internet, e-mail)

#### NAME AND ADDRESS OF PAYEE
(IF COMMITTEE, ALSO ENTER I.D. NUMBER)

<table>
<thead>
<tr>
<th>PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Political Data Inc</td>
<td>LIT</td>
<td></td>
<td>135.28</td>
</tr>
<tr>
<td>12501 Imperial Hwy, Suite #200 Norwalk CA 90650</td>
<td>LIT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tribune Direct</td>
<td>LIT</td>
<td></td>
<td>2395.45</td>
</tr>
<tr>
<td>5091 4th St Irwindale CA 91706</td>
<td>LIT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>USPS</td>
<td>POS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8201 Canoga Av Canoga Park CA 91304</td>
<td>POS</td>
<td></td>
<td>1409.20</td>
</tr>
</tbody>
</table>

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

**Statement covers period**

**from** 02/20/2011 **through** 06/30/2011

**SUBTOTAL** $2,530.73

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CALIFORNIA FORM 460

Page 6 of 7

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
### Schedule F
Accrued Expenses (Unpaid Bills)

**NAME OF FILER:**
No On Measure A - West Hollywood Citizens For Responsible Growth

**NAME AND ADDRESS OF CREDITOR**
Manatt, Phelps, Phillips
11355 W Olympic Bl
Los Angeles, CA 90064

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

<table>
<thead>
<tr>
<th>CODE</th>
<th>DESCRIPTION</th>
<th>MBR</th>
<th>MTG</th>
<th>OFC</th>
<th>PET</th>
<th>PHO</th>
<th>POL</th>
<th>POS</th>
<th>PRO</th>
<th>FRT</th>
<th>MRP</th>
<th>RAD</th>
<th>RFD</th>
<th>SAL</th>
<th>TEL</th>
<th>TRC</th>
<th>TSF</th>
<th>VOT</th>
<th>WEB</th>
</tr>
</thead>
<tbody>
<tr>
<td>CMP</td>
<td>campaign paraphernalia/misc.</td>
<td></td>
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</tr>
<tr>
<td>CNS</td>
<td>campaign consultants</td>
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</tr>
<tr>
<td>CTB</td>
<td>contribution (explain nonmonetary)*</td>
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<tr>
<td>CVC</td>
<td>civic donations</td>
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<tr>
<td>FIL</td>
<td>candidate filing/ballot fees</td>
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<tr>
<td>FND</td>
<td>fundraising events</td>
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<tr>
<td>IND</td>
<td>independent expenditure supporting/opposing others (explain)*</td>
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<tr>
<td>LEG</td>
<td>legal defense</td>
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</tr>
<tr>
<td>LT</td>
<td>campaign literature and mailings</td>
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</tr>
</tbody>
</table>

**OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD $**

- **NAME AND ADDRESS OF CREDITOR**
  - Manatt, Phelps, Phillips
  - 11355 W Olympic Bl
  - Los Angeles, CA 90064

- **CODE OR DESCRIPTION OF PAYMENT**
  - LEG

- **AMOUNT INCURRED THIS PERIOD $**
  - 8840.00

- **AMOUNT PAID THIS PERIOD (ALSO REPORT ON E) $**
  - 0.00

- **OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD $**
  - 8840.00

**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 $**

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 $**

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 $**

---

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

SUBTOTALS $ 8,840.00 $ 0.00 $ 0.00 $ 8,840.00

---

*May be a negative number*

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