

Recipient Committee Campaign Statement – Short Form

Type or print in ink

Date Stamp		CALIFORNIA FORM 450	
MAY - 2 2008		Page 1 of 3	
For Official Use Only			

SEE INSTRUCTIONS ON REVERSE

For use by recipient committees that have not received a contribution or other receipt that must be itemized, have not received or made loans, and have no outstanding accrued expenses.

Statement covers period from 1/1/06 through 6/30/06	Date of election if applicable: (Month, Day, Year) N/A
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1. Type of Recipient Committee:

- | | |
|--|--|
| <input type="checkbox"/> Ballot Measure Committee | <input type="checkbox"/> General Purpose Committee |
| <input type="radio"/> Primarily Formed | <input type="radio"/> Sponsored |
| <input type="radio"/> Controlled | <input type="radio"/> Small Contributor Committee |
| <input type="radio"/> Sponsored | |
| <input type="checkbox"/> Primarily Formed Candidate/
Officeholder Committee | |

2. Type of Statement:

- | | |
|---|---|
| <input type="checkbox"/> Pre-election 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 | <input type="checkbox"/> Supplemental Pre-election
Statement - Attach Form 495 |
| <input type="checkbox"/> Amendment (Explain) _____
(Also check type of statement you are amending) | |

3. Committee Information

I.D. NUMBER
1259158

COMMITTEE NAME

Peace Officers Association of Petaluma

STREET ADDRESS (NO P.O. BOX)

969 Petaluma Blvd. No.

CITY STATE ZIP CODE AREA CODE/PHONE

Petaluma CA 94952 707-778-4372

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY STATE ZIP CODE AREA CODE/PHONE

LJUDO@CI.PETALUMA.CA.US

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

GARY BUFFO

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

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 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 4/24/08
DATE

By [Signature]
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
Summary Page**

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

SHORT FORM

Statement covers period from <u>1/1/06</u> through <u>6/30/06</u>	CALIFORNIA FORM 450
	Page <u>2</u> of <u>3</u>
	I.D. NUMBER <u>1259158</u>

NAME OF COMMITTEE

Peace Officers Association of Petaluma

Expenditures Made

1. Expenditures of \$100 or more made this period	\$ <u>1275 -</u>
2. Expenditures under \$100 made this period (Not itemized.)	<u>61 -</u>
3. SUBTOTAL EXPENDITURES MADE THIS PERIOD	<u>1336 -</u>
4. Nonmonetary Adjustment	<i>Add Lines 1 + 2</i>
5. Total expenditures made from previous statement	<i>From Line 8 Below</i>
(If this is the first statement for the calendar year, enter zero.)	<i>Previous Summary Page, Line 6</i>
6. TOTAL EXPENDITURES MADE TO DATE	<u>1336 -</u>

Contributions Received

7. Monetary contributions received this period	\$ <u>4881 -</u>
8. Non-monetary contributions received this period	
9. Total contributions received from previous statement	<u>4881 -</u>
(If this is the first statement for the calendar year, enter zero.)	<i>Previous Summary Page, Line 10</i>
10. TOTAL CONTRIBUTIONS RECEIVED TO DATE	<u>4881 -</u>

Current Cash Statement

11. Beginning cash balance	<i>Previous Summary Page, Line 15</i>	\$ <u>2033.21</u>
12. Cash receipts this period	<i>Line 7 above</i>	<u>4881.00</u>
13. Miscellaneous increases to cash		<u>2 -</u>
14. Cash expenditures this period	<i>Line 3 above</i>	<u>1336 -</u>
15. ENDING CASH BALANCE THIS PERIOD	<i>Add Lines 11 + 12 + 13, then subtract Line 14</i>	\$ <u>5580.21</u>

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NAME OF COMMITTEE

Peace OFFICERS ASSOCIATION OF Petaluma

5. Payments Made (If more space is needed, use additional copies of this page for continuation sheets.)

DATE*	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF PAYMENT	NAME OF CANDIDATE AND OFFICE OR NAME OF BALLOT MEASURE AND BALLOT NUMBER OR LETTER AND JURISDICTION	AMOUNT THIS PERIOD	CUMULATIVE AMOUNTS TO DATE*
<u>1/3/06</u> <u>thru</u> <u>6/16/06</u>	<u>Michael Anderson</u>	<u>accounting</u>		<u>1275</u>	Calendar Year \$ _____ Other \$ _____
			<input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.		Calendar Year \$ _____ Other \$ _____
			<input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.		Calendar Year \$ _____ Other \$ _____
				SUBTOTAL \$ <u>1275</u>	-

* Required only for payments which are contributions or independent expenditures.