

**Recipient Committee
Campaign Statement - Short Form**

Type or print in ink.

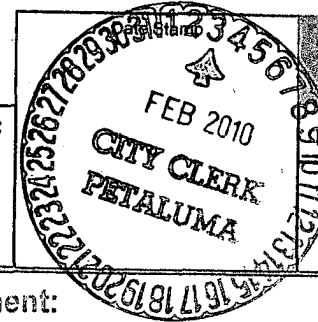
SHORT FORM

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 7/1/09
through 12/31/09

Date of election if applicable:
(Month, Day, Year)



CALIFORNIA FORM 450

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For Official Use Only

1. Type of Recipient Committee:

- Ballot Measure Committee
 - Primarily Formed
 - Controlled
 - Sponsored
- General Purpose Committee
 - Sponsored
 - Small Contributor Committee
- Primarily Formed Candidate/Officeholder Committee

2. Type of Statement:

- Pre-election Statement
- Semi-annual Statement
- Termination Statement
- Amendment (Explain) _____
(Also check type of statement you are amending)
- Quarterly Statement
- Special Odd-year Report
- Supplemental Pre-election Statement - Attach Form 495

3. Committee Information

I.D. NUMBER

1259128

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

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

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

t-shoemaker@ci-petaluma.ca.us

Treasurer(s)

NAME OF TREASURER

Tamara Shoemaker

MAILING ADDRESS

Same

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

Same

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 02/23/10
DATE

By T. Shoemaker
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>7/1/09</u> through <u>12/31/09</u>	CALIFORNIA FORM 450
	Page <u>2</u> of <u>2</u>
I.D. NUMBER	

NAME OF COMMITTEE

Peace Officers Association of Petaluma

Expenditures Made

1. Expenditures of \$100 or more made this period		\$ <u>0</u>
2. Expenditures under \$100 made this period (Not itemized.)		<u>0</u>
3. SUBTOTAL EXPENDITURES MADE THIS PERIOD	Add Lines 1 + 2	\$ <u>0</u>
4. Nonmonetary Adjustment	From Line 8 Below	<u>0</u>
5. Total expenditures made from previous statement	Previous Summary Page, Line 6	\$ <u>0</u>
<i>(If this is the first statement for the calendar year, enter zero.)</i>		
6. TOTAL EXPENDITURES MADE TO DATE	Add Lines 3 + 4 + 5	\$ <u>0</u>

Contributions Received

7. Monetary contributions received this period		\$ <u>0</u>
8. Non-monetary contributions received this period		<u>0</u>
9. Total contributions received from previous statement	Previous Summary Page, Line 10	\$ <u>0</u>
<i>(If this is the first statement for the calendar year, enter zero.)</i>		
10. TOTAL CONTRIBUTIONS RECEIVED TO DATE	Add Lines 7 + 8 + 9	\$ <u>0</u>

Current Cash Statement

11. Beginning cash balance	Previous Summary Page, Line 15	\$ <u>7220.37</u>
12. Cash receipts this period	Line 7 above	<u>0</u>
13. Miscellaneous increases to cash		\$ <u>1.64</u>
14. Cash expenditures this period	Line 3 above	<u>0</u>
15. ENDING CASH BALANCE THIS PERIOD	Add Lines 11 + 12 + 13, then subtract Line 14	\$ <u>7222.01</u>