

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print name.

COVER PAGE

Date Stamp	<b>CALIFORNIA FORM 460</b>
RECEIVED JUL 18 2012 CITY CLERK'S OFFICE CITY OF SUNNYVALE	Page <u>1</u> of <u>8</u>
	For Official Use Only

Statement covers period  
from 01/01/12  
through 06/30/12

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

SEE INSTRUCTIONS ON REVERSE

**1. Type of Recipient Committee:** All Committees – Complete Parts 1, 2, 3, and 4.

- |  |  |
|--|--|
| <input type="checkbox"/> Officeholder, Candidate Controlled Committee<br><input type="radio"/> State Candidate Election Committee<br><input type="radio"/> Recall<br><i>(Also Complete Part 5)</i>               | <input type="checkbox"/> Primarily Formed Ballot Measure Committee<br><input type="radio"/> Controlled<br><input type="radio"/> Sponsored<br><i>(Also Complete Part 6)</i> |
| <input checked="" type="checkbox"/> General Purpose Committee<br><input type="radio"/> Sponsored<br><input type="radio"/> Small Contributor Committee<br><input type="radio"/> Political Party/Central Committee | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee<br><i>(Also Complete Part 7)</i>  |

**2. Type of Statement:**

- |   |   |
|---|---|
| <input type="checkbox"/> Preelection 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<br><i>(Also file a Form 410 Termination)</i> | <input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
| <input type="checkbox"/> Amendment (Explain below)  |   |

**3. Committee Information**

I.D. NUMBER  
**990921**

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

**Sunnyvale Public Safety Officers Association PAC**

STREET ADDRESS (NO P.O. BOX)

**469 E. Evelyn Ave.**

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<b>Sunnyvale</b>	<b>CA</b>	<b>94088</b>	<b>408-736-7191</b>

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

**P.O.Box 60372**

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<b>Sunnyvale</b>	<b>CA</b>	<b>94088</b>	<b>408-736-7191</b>

OPTIONAL: FAX / E-MAIL ADDRESS

**408-522-1572 / psoa@pacbell.net**

**Treasurer(s)**

NAME OF TREASURER

**David Meinhardt**

MAILING ADDRESS

**P.O. Box 60372**

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<b>Sunnyvale</b>	<b>CA</b>	<b>94088</b>	<b>408-736-7191</b>

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS

**408-522-1572 / psoa@pacbell.net**

**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 7/13/12  
Date

By *David Meinhardt*  
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

**Campaign Disclosure Statement  
Summary Page**

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

SUMMARY PAGE

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/12	
through	06/30/12	Page <u>2</u> of <u>8</u>
		I.D. NUMBER 990921

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Sunnyvale Public Safety Officers Association PAC

**Contributions Received**

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$ 10,824.46	\$ 10,824.46
2. Loans Received	Schedule B, Line 3	-	-
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$ 10,824.46	\$ 10,824.46
4. Nonmonetary Contributions	Schedule C, Line 3	-	-
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$ 10,824.46	\$ 10,824.46

**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**

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made	Schedule E, Line 4	\$ 16,000.00	\$ 16,000.00
7. Loans Made	Schedule H, Line 3	-	-
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$ 16,000.00	\$ 16,000.00
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	-	-
10. Nonmonetary Adjustment	Schedule C, Line 3	-	-
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	\$ 16,000.00	\$ 16,000.00

**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	\$ 74,933.92
13. Cash Receipts	Column A, Line 3 above	10,824.46
14. Miscellaneous Increases to Cash	Schedule I, Line 4	1.47
15. Cash Payments	Column A, Line 8 above	16,000.00
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$ 69,759.85

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).

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

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

17. LOAN GUARANTEES RECEIVED	Schedule B, Part 2	\$ -
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**Cash Equivalents and Outstanding Debts**

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

**Schedule  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>01/01/12</u>	<b>CALIFORNIA FORM 460</b>
through <u>06/30/12</u>	
Page <u>3</u> of <u>8</u>	
I.D. NUMBER 990921	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Sunnyvale Public Safety Officers Association PAC

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
01/04/12	Member Contributions PP1150	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Public Safety	779.57	779.57	
01/18/12	Member Contributions PP1152	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Public Safety	779.57	1559.14	
02/01/12	Member Contributions PP1201	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Public Safety	779.57	2338.71	
02/08/12	Member Contributions PP1203	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Public Safety	772.11	3110.82	
02/22/12	Member Contributions PP1205	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Public Safety	772.11	3882.93	
<b>SUBTOTAL \$</b>				<b>3882.93</b>		

**Schedule A Summary**

- Amount received this period – itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 10,824.46
- Amount received this period – unitemized monetary contributions of less than \$100 ..... \$ -
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$** 10,824.46

\*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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

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

SCHEDULE A (CONT.)

Statement covers period from <u>01/01/12</u> through <u>06/30/12</u>		<b>CALIFORNIA FORM 460</b>
NAME OF FILER Sunnyvale Public Safety Officers Association PAC		I.D. NUMBER 990921

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
02/29/12	Member Contributions PP1207	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Public Safety	772.11	4655.04	
03/14/12	Member Contributions PP1209	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Public Safety	772.11	5427.15	
03/28/12	Member Contributions PP1211	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Public Safety	772.11	6199.26	
04/11/12	Member Contributions PP1213	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Public Safety	772.11	6971.37	
04/25/12	Member Contributions PP1215	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Public Safety	772.11	7743.48	
<b>SUBTOTAL \$</b>				<b>3860.55</b>		

\*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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

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

SCHEDULE A (CONT.)

Statement covers period from <u>01/01/12</u> through <u>06/30/12</u>		<b>CALIFORNIA FORM 460</b>
NAME OF FILER <b>Sunnyvale Public Safety Officers Association PAC</b>		I.D. NUMBER <b>990921</b>

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
05/16/12	Member Contributions PP1217	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Public Safety	772.11	8515.59	
05/30/12	Member Contributions PP1219	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Public Safety	772.11	9287.70	
06/13/12	Member Contributions PP1221	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Public Safety	768.38	10,056.08	
06/28/12	Member Contributions PP1223	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Public Safety	768.38	10,824.46	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				<b>3,080.98</b>		

\*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

**Schedule J  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

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

SCHEDULED

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/12	
through	06/30/12	Page <u>6</u> of <u>8</u>
I.D. NUMBER		990921

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Sunnyvale Public Safety Officers Association PAC

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
03/21/12	Paul Colin for Judge	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		500.00	500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
03/21/12	Sevely4Judge	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		500.00	500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
<b>SUBTOTAL \$</b>				1,000.00		

**Schedule D Summary**

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) .....	\$	1,000.00
2. Unitemized contributions and independent expenditures made this period of under \$100 .....	\$	-
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) .....	<b>TOTAL \$</b>	1,000.00

**Schedule E  
Payments Made**

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

Statement covers period  
from 01/01/12  
through 06/30/12

SCHEDULE E

**CALIFORNIA FORM 460**

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I.D. NUMBER  
990921

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Sunnyvale Public Safety Officers Association PAC

**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 PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Eagle Communications 2309 N. 150th Ave. Omaha, NE 68116	CNS		15,000.00
Paul Colin for Judge FPPC #1343639 1702-L Meridian Ave., #194 San Jose, CA 95125	CTB		500.00
Sevely4Judge P. O. Box 4018 Mountain View, CA 94040-0018	CTB		500.00

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

**SUBTOTAL \$ 16,000.00**

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 16,000.00
2. Unitemized payments made this period of under \$100	\$ -
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ -
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	<b>TOTAL \$ 16,000.00</b>

**Schedule I  
Miscellaneous Increases to Cash**

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

SCHEDULE I

Statement covers period from <u>01/01/12</u> through <u>06/30/12</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>8</u> of <u>8</u>
I.D. NUMBER 990921	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Sunnyvale Public Safety Officers Association PAC

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL \$**

**Schedule I Summary**

1. Itemized increases to cash this period. ....	\$	-
2. Unitemized increases to cash of under \$100 this period. ....	\$	1.47
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) .....	\$	-
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) .....	<b>TOTAL \$</b>	<b>1.47</b>