Recipient Committee	Type or print in	ink.	Date Stamp		CALIFORNIA 460	
Campaign Statement Cover Page		250511	/ED		2001/02 FORM	
(Government Code Sections 84200-84216.5)		RECEIV	160		OKW	
,	Statement covers period	Date of election if applicable:		Page	of	
	fromJanuary 1, 2011	(Month, Day, Year) FEB 10	P4:37		For Official Use Only	
SEE INSTRUCTIONS ON REVERSE	throughJanuary 22, 2011		ERK FORENA			
1. Type of Recipient Committee: All Committees - Co	omplete Parts 1, 2, 3, and 4.	2. Type of Statement:	AULIN (
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	Ballot Measure Committee Primarily Formed Controlled Sponsored Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee Also Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement Amendment (Explain belo		Quarterly Sta Special Odd- Supplementa Statement - A	Year Report	
	D. NUMBER net yet received	Treasurer(s)				
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)		NAME OF TREASURER				
Friends of Allen Shay City Council 2011		Susana Campos				
		MAILING ADDRESS	to 260			
		202 S. Lake Avenue, Suit		ZIP CODE	AREA CODE/PHONE	
STREET ADDRESS (NO P.O. BOX) 202 S. Lake Avenue, Suite 260		Pasadena		91101	626-584-0499	
CITY STATE ZIP C	ODE AREA CODE/PHONE	NAME OF ASSISTANT TREASURE				
Pasadena CA 9110						
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.	BOX	MAILING ADDRESS				
CITY STATE ZIP C	ODE AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE	
OPTIONAL: FAX / E-MAIL ADDRESS 626-584-0703 / shayandassociates@hotmail.co	om	OPTIONAL: FAX / E-MAIL ADDRES	SS			
4. Verification I have used all reasonable diligence in preparing and review certify under penalty of perjury under the laws of the State 2/7/2011 Executed on	By	and correct.	fasturer ·		es is true and complete. I	
Executed on	Ву	Signature of Controlling Officeholder, Candidate, Stat	e Measure Proponent	EDDC Toll	FPPC Form 460 (June/0	

NAME OF OFFICEHOLDER OR CANDIDATE		<u>,</u>	AME OF BALLOT MEASURE				
Friends of Allen Shay for City Council 2011		_					
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIS	TRICT NUMBER IF APPLICABLE)	Ē	BALLOT NO. OR LETTER	JURISDICTIC	N		SUPPORT OPPOSE
Pasadena City Council District 4 2011		_					
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP				45.6.4	4 -	if an
202 S. Lake Avenue, Suite 260, Pasadena,	CA 91101		dentify the controlling office			te measure p	proponent, ii any
Zoz G. Lako / Worker, Gallo 2004, 1 deadors,		1	NAME OF OFFICEHOLDER, CAN	DIDATE, OR PR	OPONENT		
Related Committees Not Included in this not included in this statement that are controlled by y contributions or make expenditures on behalf of your	ou or are primarily formed to receive	;	DFFICE SOUGHT OR HELD			DISTRICT NO. I	F ANY
COMMITTEE NAME	I.D. NUMBER	•					
		7	Primarily Formed Com	mittee List	names of office	eholder(s) or c	andidate(s) for
NAME OF TREASURER	CONTROLLED COMMITTEE?		Primarily Formed Com		names of office	eholder(s) or c	andidate(s) for
	YES NO		which this committee is prima	arily formed.	OFFICE SOUG		
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO P.	YES NO			arily formed.			SUPPORT OPPOSE
COMMITTEE ADDRESS (NO P.	YES NO	;	which this committee is prima	ANDIDATE		SHT OR HELD	SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO P.	YES NO		which this committee is prima	ANDIDATE ANDIDATE	OFFICE SOUG	SHT OR HELD	SUPPORT SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO P. CITY STATE Z	O. BOX) IP CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR C	ANDIDATE ANDIDATE ANDIDATE CANDIDATE	OFFICE SOUG	SHT OR HELD SHT OR HELD SHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P. CITY STATE Z COMMITTEE NAME	O. BOX) IP CODE AREA CODE/PHONE I.D. NUMBER		NAME OF OFFICEHOLDER OR CO	ANDIDATE ANDIDATE ANDIDATE CANDIDATE	OFFICE SOUG	SHT OR HELD SHT OR HELD SHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO P. CITY STATE Z COMMITTEE NAME	O. BOX) IP CODE AREA CODE/PHONE I.D. NUMBER CONTROLLED COMMITTEE? YES NO		NAME OF OFFICEHOLDER OR CO	ANDIDATE ANDIDATE ANDIDATE CANDIDATE	OFFICE SOUG	SHT OR HELD SHT OR HELD SHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE

Campaign Disclosure Statement Summary Page

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

SUMMARY PAGE Statement covers period **CALIFORNIA FORM** January 1, 2011 from January 22, 2011 of ___ through . I.D. NUMBER

FPPC Toll-Free Helpline: 866/ASK-FPPC

SEE INSTRUCTIONS ON REVERSE NAME OF FILER not vet received Allen Shav **Calendar Year Summary for Candidates** Column B Column A CALENDAR YEAR Running in Both the State Primary and **Contributions Received** TOTAL THIS PERIOD TOTALTODATE (FROM ATTACHED SCHEDULES) **General Elections** 550.00 1. Monetary Contributions Schedule A, Line 3 \$ __ 1/1 through 6/30 7/1 to Date 4.000.00 10,000.00 2. Loans Received Schedule B, Line 3 20. Contributions 10,550.00 4100.00 \$ 4.000.00 4100.00 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ Received 0.00 0.00 4. Nonmonetary Contributions Schedule C, Line 3 21. Expenditures 2648.43 \$ 2648.43 4,000.00 10.550.00 Made 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 \$ ____ **Expenditure Limit Summary for State Expenditures Made** 7.015.98 2,648.43 **Candidates** 6. Payments Made Schedule E, Line 4 \$ 0.00 0.00 7. Loans Made Schedule H, Line 3 22. Cumulative Expenditures Made* 7.015.98 2,648.43 (If Subject to Voluntary Expenditure Limit) 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ 0.00 0.00 Total to Date 9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3 Date of Election (mm/dd/yy) 0.00 0.00 10. Nonmonetary Adjustment Schedule C, Line 3 2.648.43 7,015.98 **Current Cash Statement** 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ To calculate Column B, add 4,000.00 amounts in Column A to the 13. Cash Receipts Column A, Line 3 above corresponding amounts 0.00 from Column B of your last 14. Miscellaneous Increases to Cash Schedule I, Line 4 report. Some amounts in 2,648.43 15. Cash Payments Column A, Line 8 above Column A may be negative 6.648.43 figures that should be 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ subtracted from previous period amounts. If this is If this is a termination statement, Line 16 must be zero. the first report being filed for this calendar year, only *Since January 1, 2001. Amounts in this section may be 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ _____ carry over the amounts different from amounts reported in Column B. from Lines 2, 7, and 9 (if **Cash Equivalents and Outstanding Debts** any). 0.00 18. Cash Equivalents See instructions on reverse \$ ____ 4.000.00 FPPC Form 460 (June/01) 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ __

Schedule B – Part 1

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

State	ment covers period January 1, 2011	california 46	0
through	January 22, 2011	Page of	_

Loans Received		to whole donar	3.		from	7 1, 2011	FURIVI	
					through Januar	y 22, 2011	Page	of
SEE INSTRUCTIONS ON REVERSE					oug.		I.D. NUMBER	
NAME OF FILER Allen Shay							not yet recei	ived
Alleri Orlay	IF AN INDIVIDUAL ENTER	(a) OUTSTANDING	(b)	(c)	(d) OUTSTANDING	(e)	(f) ORIGINAL	(g) CUMULATIVE
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)	BALANCE BEGINNING THIS PERIOD	AMOUNT RECEIVED THIS PERIOD	AMOUNT PAI OR FORGIVE THIS PERIO	BALANCE AT CLOSE OF THIS	INTEREST PAID THIS PERIOD	AMOUNT OF LOAN	CONTRIBUTIONS TO DATE
	Chay and Associator			☐ PAID				CALENDAR YEAR
Allen Shay 202 S. Lake Avenue, Suite 260 Pasadena, CA 91101	Shay and Associates			\$	\	RATE	\$	\$PER ELECTION**
Tagadena, or error			4,000.00			e		s
† IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	3	DATE INCURRED	
TEN IND COM OTH PTY SCC				PAID				CALENDAR YEAR
				\$ FORGIVEN	_ \$	RATE	\$	PER ELECTION *
↑ IND COM OTH PTY SCC		s	\$	\$	DATE DUE	\$	DATE INCURRED	\$
IND COM COM COM				PAID				CALENDAR YEAR
				\$FORGIVEN	\$	RATE	\$	PER ELECTION*
†□ IND □ COM □ OTH □ PTY □ SCC		s	\$	\$	DATE DUE	s	DATE INCURRED	s
		SUBTOTALS	\$ 4,000.00	\$	\$	\$		uros.
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
_				\$	4,000.00			
Loans received this period (Total Column (b) plus unitemized loan	s less than \$100.)				0.00	-	another part	orgiven or paid by ty also must be Schedule A.
2. Loans paid or forgiven this period				\$ _	0.00	_	** If required	a
(Total Column (c) plus loans under \$10 (Include loans paid by a third party tha	0 paid or forgiven.)						Il required	u.
Net change this period. (Subtract Lin Enter the net here and on the Summar	e 2 from Line 1.)ry Page, Column A, Line 2.			NET \$ _	4,000.00 (May be a negative number)	-		
† Contributor Codes IND – Individual COM – Recipient Committee (other than PTY or SCC) OTH	- Other PTY -	Political Party	SCC – Small (Contributor Committee	FPPC 1		orm 460 (June/0 ne: 866/ASK-FPF

Schedule E Payments Made

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE E
Statement covers perio	california 460
fromJanuary 1, 201	form 400
through January 22, 20	11 Page of

-								
OFF WOTPUCTIONS ON DEVENOE					through	January 22, 2	2011 Page	of
SEE INSTRUCTIONS ON REVERSE NAME OF FILER					<u> </u>		I.D. N	NUMBER
Allen Shay							not ye	et received
CODES: If one of the following codes accurately describe CMP campaign paraphernalia/misc. CNS campaign consultants	MBR member.com MTG meetings and	munication d appearar	8	de. Otherv	RAD radi	ibe the payment of airtime and pro- rined contribution apaign workers' s	s	
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	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			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/s VOT voter registration WEB information technology costs (internet, e-mail)			als same candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DES	CRIPTION OF	PAYMENT		AMOUNT PAID
Allen Shay 202 S. Lake Avenue, Suite 260 Pasadena, CA 91101		LIT						4,000.00
* Payments that are contributions or independent expenditures	must also be summ	narized or	Schedule [).			SUBTOTA	AL\$ 4,000.00
Sahadula E Summani								
Schedule E Summary 1. Payments made this period of \$100 or more. (Include all S	Sahadula E subtata	le \					\$	4,000.00
1. Payments made this period of \$100 or more. (Include all S	scriedule E subiota	15.)					\$	0.00
2. Unitemized payments made this period of under \$100		4 0-1	······································				φ	0.00
3. Total interest paid this period on loans. (Enter amount from								