				COVER PAGE
Recipient Committee Campaign Statement	ink.	Date Stamp	CALIFORNIA 460	
Cover Page Government Code Sections 84200-84216.5)	Statement covers period	Date of election if applicable:	ECEIVED	Page of
SEE INSTRUCTIONS ON REVERSE	from $1/23/11$ through $2/17/11$	(Month, Day, Year) 3 /8///	MAR -1 P4:16	For Official Use Only
1. Type of Recipient Committee: All Committe	es – Complete Parts 1, 2, 3, and 4.	2. Type of Statement	Y OF PASADENA	
Officeholder, Candidate Controlled Committee State Candidate Election Committee Recall (Also Complete Part 5) 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)	□ Preelection Statement □ Semi-annual Statement □ Termination Statement (Also file a Form 410 T □ Amendment (Explain b	Spe	rterly Statement cial Odd-Year Report plemental Preelection ement - Attach Form 495
3. Committee Information	1.D. NUMBER 1294184	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMM		NAME OF TREASURER	AN ALSTINE	
RENATTA COOPER FOR STREET ADDRESS (NO P.O. BOX) PLI MERRETT DR CITY PASADENA MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OF	VE ZIP CODE AREA CODE/PHONE 9/104 (626) 644-30 6	MAILING ADDRESS 2854 CITY PASA DE ZU NAME OF ASSISTANT TREASU	SIERRA MADI	RE BLVD CODE AREA CODE/PHONE LIOT (626) 796-5857
CITY STATE	ZIP CODE AREA CODE/PHONE	CITY	STATE ZIP	CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADD	RESS	
4. Verification I have used all reasonable diligence in preparing and runder penalty of perjury under the laws of the State of the Stat	eviewing this statement and to the best of my kn California that the foregoing is true and correct. By By By By By By By By By B	Signature of Treampring Assistan	Treasurer Toponent or Responsible Officer of Sponse State Measure Proponent State Measure Proponent	

Type or print in ink.

Recipient Committee Campaign Statement Cover Page — Part 2 CALIFORNIA 460

Officeholder or Candidate Contro	olled Committee	6.	Primarily Formed Ballo	t Measure (Committee	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
REVATTA COOPE	ON AND DISTRICT NUMBER IF APPLICABLE)	· -	BALLOT NO. OR LETTER	JURISDICTIO	11	SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND		#2 /	Identify the controlling off	iceholder, can	didate, or state measure	proponent, if any
821 MERRITDR	, PASADENA CA 91109	7-	NAME OF OFFICEHOLDER, CAN	IDIDATE, OR PRO	OPONENT	
Related Committees Not Include not included in this statement that are concontributions or make expenditures on bel	d in this Statement: List any committees trolled by you or are primarily formed to receive half of your candidacy.		OFFICE SOUGHT OR HELD		DISTRICT NO	. IF ANY
COMMITTEE NAME	I.D. NUMBER					
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Can officeholder(s) or candidate(s	didate/Offic	eholder Committee s committee is primarily for	List names of med.
COMMITTEE ADDRESS STREET ADDR	RESS (NO P.O. BOX)		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT OPPOSE
CITY S	TATE ZIP CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDR	RESS (NO P.O. BOX)					

Campaign Disclosure Statement Summary Page

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

Statement covers, period from 1/23/// Page 3 of 6

SUMMARY PAGE

SEE INSTRUCTIONS ON REVERSE		through .	Page of
NAME OF FILER REVATTA COOPER FOR MIDS O	2011		1.D. NUMBER 1294184
Contributions Received 1. Monetary Contributions	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) \$ 850,00 \$ \$50,00	\$ 1,300.00 \$ 1,300.00 \$ 1,300.00	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 6. Payments Made Schedule E, Line 4 7. Loans Made Schedule H, Line 3 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 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	s 100.00 s 100.00 —————————————————————————————————	\$ 100.00 \$ 100.00 	Expenditure Limit Summary for State Candidates 22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) Date of Election (mm/dd/yy)
Current Cash Statement 12. Beginning Cash Balance	\$	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. FPPC Form 460 (January/05 FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772

Schedule A Monetary Contributions Received		Type	or print in ink.	SCHEDULE /				
		Amounts may be rounded to whole dollars.		Statement covers/period from 1/23/11		california 460 form		
				through 2/17	711	Page 4 of 6		
SEE INSTRUCTION	NS ON REVERSE					I.D. NUMBER		
RENI	ATTA COOPER FOR KIDS	2011	,			1294184		
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 D CALENDAR YEA (JAN. 1 - DEC. 3	AR TO DATE		
2/15/11	PLUMBERS & STORM FITTERS LOCAL 398 PAC, 4959 PALD VERDE 97 #200 C, MONTEMIR CA 91763	□IND SCOM □OTH □PTY □SCC		250.00	250.0	00		
2/17/11	TEAMSTERS PUBLIC AFFAIRS COLD 1127-114 St. #50/ SACRAMENTO CA 95814	∫ □IND ECOM □OTH □PTY □SCC		500.00	500.0	0		
2/17/11	DUANE DENNIS 303 WALLIS ST. PASADONA CA 91106	COM COM OTH PTY	CEO, BATHWAYS	100.00	1.00.0)0		
	THE LEAVING CITY THE	□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
			SUBTOTAL	\$ 850				
1. Amount re (Include a	A Summary eceived this period – itemized monetary contributions. Ill Schedule A subtotals.)eceived this period – unitemized monetary contribution	ns of less than	\$\$ \$ \$100\$	850,00	IND – COM-	ributor Codes Individual Recipient Committee (other than PTY or SCC) Other (e.g., business entity) Political Party Small Contributor Committee		

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule B – Part 2 Loan Guarantors

SEE INSTRUCTIONS ON REVERSE

Type or print in ink. Amounts may be rounded to whole dollars. Statement covers period from 1/23/11

through 2/17/11

Page of 1.D. NUMBER

NAME OF FILER					1296	F184
RENATTA COOPER FOR	YIDS 3	20(1			121-	
FULL MANE STREET ADDRESS AND	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
RENATTA COOPER 821 MERRETT DR' PASADENA CA 91104	ZIND □COM □OTH □PTY □SCC	ANALYST, LA Courry	ROVATTA DATE COOPER 1/1/07	0	S PER ELECTION (IF REQUIRED)	2,400.00
	□IND □COM □OTH □PTY □SCC		LENDER DATE		S PER ELECTION (IF REQUIRED)	
	□IND □COM □OTH □PTY □SCC		LENDER DATE		CALENDAR YEAR \$ PER ELECTION (IF REQUIRED) \$	
	□IND □COM □OTH □PTY □SCC		LENDER DATE		\$ PER ELECTION (IF REQUIRED) \$ Enter on	
			SUBTOTAL	\$ 2,400.0	Summary Page, Line 17 only.	

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Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		Amounts may b	Type or print in ink. Amounts may be rounded to whole dollars.		period	CALIFORNIA 460		
SEE INSTRUCTION NAME OF FILER	ONS ON REVERSE	2017		through 41 C/71		Page 6 of 6		
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 CALENDAR (JAN. 1 - DEC	YEAR	PER ELECTION TO DATE (IF REQUIRED)	
1/23/11	MARTIN LUTHER KING GAUTI 961 ALTA PINE DR ' ALTADENA CA 91001	Monetary Contribution Nonmonetary Contribution Independent Expenditure		100.00	100	00		
	☐ Support ☐ Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure						
	Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure						
			SUBTOTAL	\$ 100.00	\			
Itemized Unitemize	D Summary contributions and independent expenditures made ed contributions and independent expenditures made	ade this period of un	der \$100			\$ _	100.00	
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)								

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