Recipie. Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in		Date Stamp	CALIFORNIA 460 2001/02 FORM
	Statement covers period from 10/22/2006	Date of election if applicable: (Month, Day, Ye en)7	N -4 A10:32	Page _1 of _13 For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through12/31/2006	OLTV	TY CLERK	
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	nplete Parts 1, 2, 3, and 4. allot Measure Committee Primarily Formed Controlled Sponsored Sponsored Scomplete Part 6) finantily Formed Candidate/ fificeholder Committee Scomplete Part 7)	2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement Amendment (Explain b	Speci	erly Statement ial Odd-Year Report lemental Preelection ment - Attach Form 495
3. Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Citizens To Save The Rose Bowl, Yes On M STREET ADDRESS (NO PO. BOX) 1212 S Victory Blvd GITY STATE ZIP COE Burbank CA 91502 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR PO. BC 1212 S Victory Blvd CITY STATE ZIP COE Burbank CA 91502 OPTIONAL FAX / E-MAIL ADDRESS	DE AREA CODE/PHONE 2 (818) 260-0669 DX AREA CODE/PHONE	Treasurer(s) NAME OF TREASURER Kinde Durkee MAILING ADDRESS 1212 S Victory Blvd CITY Burbank NAME OF ASSISTANT TREASUR MAILING ADDRESS CITY OPTIONAL: FAX / E-MAIL ADDRI	STATE ZIP CC	(818) 260-0669
4. Verification I have used all reasonable diligence in preparing and reviewir certify under penalty of perjury under the laws of the State of	California that the foregoing is true at By Kinde Durks By Signature of Cont By	nd correct.	reasurer onent or Responsible Officer of Sponsor site Measure Proponent	

Type or print in ink.

Recipient Committee Campaign Statement Cover Page — Part 2 CALIFORNIA 460

Page 2 of 13

Officeholder or Candidate Controlled Committee								
NAME OF OFFICEHOLDER OR CANDIDATE			OF BALLOT MEASURE					
			Yes	s on Measure A				
OFFICE SOUGHT OR HELD (INCLUDE LOCAT	ION AND DISTRICT NUMBER IF API	PLICABLE)	BALL	OT NO. OR LETTER	JURISDICTIO	NC	ĺΧ	SUPPORT
			Α		City of F	Pasadena		OPPOSE
RÉSIDENTIAL/BUSINESS ADORESS (NO. AN	D STREET) CITY	STATE ZIP	lden	tify the controlling o	ficeholder, ca	ndidate, or stat	te measure	proponent, if any
			NAME	OF OFFICEHOLDER, CA	ANDIDATE, OR PR	ROPONENT		
Balatad Committees Not Include	ed in this Ctatamants	***						
Related Committees Not Include not included in this statement that are co- contributions or make expenditures on be	ntrolled by you or are primarily f		OFFI	CE SOUGHT OR HELD		C	DISTRICT NO.	IF ANY
COMMITTEE NAME	I.D. NUMBER					L		
			7 Prin	narily Formed Co.	mmittan /:-		t	
NAME OF TREASURER	CONTROLLED C	COMMITTEE?	7. Prin	narily Formed Cor h this committee is prii	mmittee List	names of officel	holder(s) or c	andidate(s) for
NAME OF TREASURER	CONTROLLED C	COMMITTEE?	whic	h this committee is pri	narily formed.			andidate(s) for
	1		whic	narily Formed Col h this committee is print OF OFFICEHOLDER OR	narily formed.	OFFICE SOUGH		☐ SUPPORT
COMMITTEE ADDRESS STREET ADD	RESS (NO PO. BOX)	□ NO	whic	h this committee is pri	narily formed.			
COMMITTEE ADDRESS STREET ADD	RESS (NO PO. BOX)		NAME	h this committee is pri	candidate		HT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADD	RESS (NO PO. BOX)	□ NO	NAME	h this committee is prid	candidate	OFFICE SOUGH	HT OR HELD	☐ SUPPORT
COMMITTEE ADDRESS STREET ADD	RESS (NO PO. BOX)	□ NO	NAME	h this committee is priv	CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGH	HT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADD	RESS (NO PO. BOX) STATE ZIP CODE AR	□ NO	NAME	h this committee is prid	CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGH	HT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADD	RESS (NO PO. BOX) STATE ZIP CODE AR	REA CODE/PHONE	NAME NAME	h this committee is print OF OFFICEHOLDER OR OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGH	HT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADD CITY S COMMITTEE NAME NAME OF TREASURER	TATE ZIP CODE AR I.D. NUMBER CONTROLLED C	REA CODE/PHONE	NAME NAME	h this committee is priv	CANDIDATE CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGH	HT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT
COMMITTEE ADDRESS STREET ADD CITY S COMMITTEE NAME NAME OF TREASURER	TATE ZIP CODE AR	REA CODE/PHONE	NAME NAME	h this committee is print OF OFFICEHOLDER OR OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGH	HT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADD CITY S COMMITTEE NAME NAME OF TREASURER	TATE ZIP CODE AR I.D. NUMBER CONTROLLED C	REA CODE/PHONE	NAME NAME	h this committee is print OF OFFICEHOLDER OR OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE CANDIDATE	OFFICE SOUGH	HT 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.

SEE INSTRUCTIONS ON REVERSE					through	12/31/2006	Page 3 of 13
NAME OF FILER Citizens To Save The Rose Bowl, Yes On Measure A							1.D. NUMBER 1280756
Contributions Received	COLUMN A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTALT O DATE		Calendar Year Summary for Candidates Running in Both the State Primary and		
1. Monetary Contributions	\$	7,100.00	\$	48,89	90.00	General Elections	
2. Loans Received		16,153.00		43,35	51.85	1/1	through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS	\$	23,253.00	\$	92,24	41.85	20. Contributions Received \$	\$
4. Nonmonetary Contributions Schedule C, Line 3		0.00		0.00		21. Expenditures	Ф
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	23,253.00	\$	92,24	41.85	Made \$_	\$ <u> </u>
Expenditures Made				_		Expenditure Limit	Summary for State
6. Payments Made Schedule E, Line 4	\$	26,222.41	\$	91,8	17.86	Candidates	•
7. Loans Made Schedule H, Line 7		0.00			0.00	22 Cumula	ive Expenditures Mad-*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	26,222.41	\$	91,8	17.86	22. Cumulat (if Subject	ive Expenditures Made* to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)		7,773.00		7,7	73.00	Date of Election	Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3		0.00			0.00	(mm/dd/yy)	
11. TOTAL EXPENDITURES MADE	\$	33,995.41	\$	99,5	90.86		\$
Current Cash Statement		4.050.04				 	\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$			calculate Colun		, ,	\$
13. Cash Receipts		23,253.00		ounts in Colum responding am			Ψ <u></u>
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	m Column B of	your last		\$
15. Cash Payments Column A, Line 8 above		26,222.41		ort. Some amo Iumn A may be		, ,	¢.
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	1,286.60	fig	ures that should	d be	<i> </i>	
If this is a termination statement, Line 16 must be zero.			pe	riod amounts. I first report bei	If this is		\$
17. LOAN GUARANTEES RECEIVED	\$	0.00	for ca	this calendar y ry over the am	ear, only ounts		. Amounts in this section may be
Cash Equivalents and Outstanding Debts		0.00	fro an	m Lines 2, 7, a y).	nd 9 (if	different from amounts	reported in Column B.
18. Cash Equivalents See instructions on reverse	\$						
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	51,124.85				FPPC 1	FPPC Form 460 (June/0 oll-Free Helpline: 866/ASK-FPF

EDULE F.

Schedule F Accrued Expenses (Unpaid Bills)	Type or print in ink. Amounts may be round to whole dollars.	ed	Statement cover from 10/22/2 through 12/31/2	006 F	FORNIA 460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER Citizens To Save The Rose Bowl, Yes On Measure A				I.D. NU	
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CMP campaign consultants 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	erwise, describe the payment. RAD radio airtime and production costs RED returned contributions SAL campaign workers salaries 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/sponsor VOT voter registration WEB information technology costs (internet, e-mail)				
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(C) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Disc Marketing 35 W Dayton St Pasadena CA 91105	LIT	0.00	7,773.00	0.00	7,773.00
<u> </u>					
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$ 0.00 :	5 7,773.00	\$ 0.00	\$ 7,773.00
Schedule F Summary 1. Total accrued expenses incurred this period. (Include all saccrued expenses of \$100 or more, plus total unitemized	JRRED TOTALS \$	7,773.00			
Total accrued expenses paid this period. (Include all Sch accrued expenses of \$100 or more, plus total unitemized		0.00			
Net change this period. (Subtract Line 2 from Line 1. Er on the Summary Page, Column A, Line 9.)			7 773 00		
on the common, a ggr, a reason, and				FI	PPC Form 460 (June/01) Helpline: 866/ASK-FPPC